

Wisconsin Medicaid update and BadgerCare

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Wisconsin Medicaid and BadgerCare Information for Providers

To:
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Physician Clinics
Physicians
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Agencies
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Services
Providers
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Speech-Language
Pathologists
Therapy Groups
HMOs and Other
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"A Guide to Obtaining Augmentative Communication Devices and Accessories Through Wisconsin Medicaid" Booklet Available

A new booklet titled "A Guide to Obtaining Augmentative Communication Devices and Accessories Through Wisconsin Medicaid" is now available to providers, recipients, and recipients' families who are considering augmentative communication devices covered by Wisconsin Medicaid.

A new booklet titled "A Guide to Obtaining Augmentative Communication Devices and Accessories Through Wisconsin Medicaid" is now available to providers, recipients, and recipients' families who are considering augmentative communication devices covered by Wisconsin Medicaid. The booklet's question-and-answer format covers topics ranging from what types of devices are covered by Wisconsin Medicaid to an explanation of the process to request a device.

Providers may refer to the Attachment of this *Wisconsin Medicaid and BadgerCare Update* for a copy of the booklet or download the booklet from the Medicaid Web site at dhfs.wisconsin.gov/medicaid/. Additional copies may also be ordered by writing to:

Forms Manager
Division of Health Care Financing
Bureau of Fee-for-Service Health Care
Benefits
PO Box 309
Madison WI 53701-0309

When requesting this booklet, include the form number "PHC 11065" and the quantity needed on the request.

Information Regarding Medicaid HMOs

This *Wisconsin Medicaid and BadgerCare Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

PHC 1250

ATTACHMENT

A Guide to Obtaining Augmentative Communication Devices and Accessories Through Wisconsin Medicaid

(A copy of "A Guide to Obtaining Augmentative Communication Devices and Accessories Through Wisconsin Medicaid" is located on the following pages.)

Important names and resources

Speech-Language Pathologist _____

Telephone Number _____

E-mail Address _____

Report Completed

Durable Medical Equipment Provider _____

Telephone Number _____

E-mail Address _____

Documentation Completed

Physician _____

Telephone Number _____

E-mail Address _____

Prescription Obtained

Other _____

Telephone Number _____

E-mail Address _____

Report Completed

Other _____

Telephone Number _____

E-mail Address _____

Report Completed

A Guide to Obtaining Augmentative Communication Devices and Accessories Through Wisconsin Medicaid

About this booklet ...

This booklet is intended for Medicaid and BadgerCare recipients, their caregivers, and providers considering augmentative communication devices, accessories, and services. Wisconsin Medicaid covers medically necessary equipment and services that meet state and federal guidelines.

Information in this brochure is for recipients in BadgerCare and Wisconsin Medicaid. The term “Wisconsin Medicaid” will be used in this booklet to represent both programs.

This booklet does not address services or equipment provided by Medicaid HMOs or the School-Based Services Benefit.

Checklist for obtaining Augmentative Communication Devices through Wisconsin Medicaid

- The recipient must be Medicaid eligible. Contact the local county/tribal social or human services department or your local W-2 agency for more information on applying for Wisconsin Medicaid, BadgerCare, or Healthy Start.
- An augmentative communication assessment must be obtained.
- A physician’s prescription for the rental or purchase of the specific augmentative communication device and accessories is needed.
- A four- to eight-week rental of the device is recommended. In order for Wisconsin Medicaid to reimburse providers for a rental of an augmentative communication device, providers are required to submit a prior authorization request to Wisconsin Medicaid prior to the rental. Wisconsin Medicaid may approve a prior authorization for up to eight weeks for a rental.
- A Medicaid-certified provider submits *all* documentation for the prior authorization request to Wisconsin Medicaid.

If you have more questions about Medicaid funding of augmentative communication devices call Recipient Services at 1-800-362-3002 or 1-608-221-5720.

Q What should a recipient do if the device is no longer needed?

A Medical equipment that is purchased for recipients by Wisconsin Medicaid becomes the property of the recipient. When the recipient no longer needs the equipment and does not anticipate any future need for the medical equipment, he or she may choose to donate the used equipment.

Wisconsin Medicaid has established a convenient listing of the locations that accept used medical equipment. This information can be found on the Medicaid Web site at dhfs.wisconsin.gov/medicaid/. Click on the "Recipients" link at the top of the page, then click on the "Contacts/Help" link to the left. The directory can be found under the heading, "Directory of used medical equipment."

This information is also available to recipients by calling Recipient Services at 1-800-362-3002 or 1-608-221-5720 and to providers by calling Provider Services at 1-800-947-9627 or 1-608-221-9883.

Q What is an augmentative communication device?

A An augmentative communication device is durable medical equipment which is used to assist a recipient who has difficulty speaking.

Q What augmentative communication devices, accessories, and services are covered by Wisconsin Medicaid?

A The following augmentative communication devices, accessories, and services are covered by Wisconsin Medicaid:

- The rental and purchase of medically necessary speech-generating devices.
- Speech-generating software programs.
- Mounting systems.
- Carrying cases.
- Repair of recipient-owned speech-generating devices.

Q What makes an augmentative communication device medically necessary?

A All services funded by Wisconsin Medicaid must be medically necessary. The recipient must have a condition that severely limits his or her ability to talk. It must be demonstrated that the device chosen for

rental or purchase will significantly improve the recipient's ability to communicate and make his or her thoughts and needs known. The recipient must be able to use the device effectively.

Q What products, accessories, and services are not covered by Wisconsin Medicaid?

A The following products, accessories, and services are not covered by Wisconsin Medicaid:

- Extended warranties.
- Fax machines.
- Laptop computers.
- Non-speech-generating software programs.
- Printers.
- Repair of rented speech-generating devices.
- Sales tax.
- Shipping and handling.
- Video games.

Q What is needed to request augmentative communication devices and accessories through Wisconsin Medicaid?

A A prior authorization (see description on page 6) is required for the purchase or rental of an augmentative communication device and/or accessories through Wisconsin Medicaid. The prior authorization process includes the following:

- Verify the recipient is Medicaid eligible.

Q How often will Wisconsin Medicaid approve the purchase of a new augmentative communication device for a recipient?

A Wisconsin Medicaid considers each recipient's situation separately. There is no established time period that an augmentative communication device is expected to last. Wisconsin Medicaid monitors the purchase of augmentative communication devices as a part of the prior authorization process.

Q What if a recipient has other insurance?

A The durable medical equipment provider will bill the recipient's other health insurance before billing Wisconsin Medicaid.

Q What if a recipient is enrolled in a Medicaid HMO?

A Contact your Medicaid HMO directly for more information on how to receive an augmentative communication device through a Medicaid HMO.

Q What can a recipient do if Wisconsin Medicaid modifies or denies a prior authorization request?

A If the prior authorization request is denied or modified, the recipient will receive a letter from Wisconsin Medicaid. The letter will provide information about how the recipient can appeal the decision and request a fair hearing before an administrative law judge.

The speech-language pathologist and recipient may want to discuss the decision to make sure that all of the required information was sent. If more information is needed, the durable medical equipment provider may contact Wisconsin Medicaid to determine if additional information should be submitted.

Q Is a trial period to rent and try out the augmentative communication device required by Wisconsin Medicaid?

A No, a trial period is not required, but it is strongly recommended. A trial period allows a recipient and his or her caregivers to use the device for several weeks and see if it will meet the recipient's daily needs. Wisconsin Medicaid may approve the rental of a device for up to eight weeks.

- Complete an augmentative communication assessment (see description on page 6) documenting the medical necessity for the augmentative communication device and accessories.
- Obtain a physician's prescription for the rental or purchase of the specific augmentative communication device and accessories chosen.
- Contact a Medicaid-certified provider who will submit the prior authorization and receive payment for the equipment.

One way to find a Medicaid-certified provider is to contact the manufacturer of the chosen augmentative communication device and ask for their Medicaid-certified provider in Wisconsin. Or, contact a local medical equipment and supplies dealer.

- Rent the chosen augmentative communication device and accessories to try out, if necessary. In order for Wisconsin Medicaid to reimburse providers for a rental of an augmentative communication device, providers are required to submit a prior authorization request to Wisconsin Medicaid. Wisconsin Medicaid may approve a prior authorization for up to an eight-week rental period.
- Submit a prior authorization request to Wisconsin Medicaid for the purchase of an augmentative communication device and accessories. The Medicaid-certified provider is responsible for submitting all documentation included in a prior authorization request.

Q What is prior authorization?

A Some services require approval from Wisconsin Medicaid before they are covered. This is called “Prior Authorization.”

A Medicaid-certified provider requests prior authorization from Wisconsin Medicaid. Wisconsin Medicaid must approve the service before the individual receives the service.

Recipients and/or their caregivers have the right, and are encouraged, to review the prior authorization request before it is sent to Wisconsin Medicaid.

A Medicaid consultant will review the request to make sure it meets Wisconsin Medicaid requirements. After all the required information is sent in, the Medicaid consultant either approves, modifies, or denies the request.

- Attention to task.
- Speed and accuracy of processing information.
- Description of the rental period, if applicable.

The assessment should include a discussion regarding which equipment was considered and why, and why the equipment being requested was chosen over other available options. Justification should be provided that the recommended equipment represents the least costly option that meets the recipient’s functional communication needs.

The report also needs to include a statement of where the device will be used and the person who will be responsible for programming the device.

An occupational therapist or physical therapist may provide recommendations for positioning, mounting, and access of the equipment.

Q What is included in the augmentative communication assessment?

A This assessment is completed by a speech-language pathologist. The assessment includes the recipient’s medical diagnosis and communication diagnosis, provides a description of how the recipient currently communicates, and indicates how an augmentative communication device will improve communication. The report also includes the current baseline of the recipient’s:

- Receptive language skills.
- Expressive language skills.
- Cognitive abilities.
- Ability to initiate communication.
- Ability to remember signs or pictures, attach meaning to them, and use them to communicate.

Q Can a letter of support be submitted with the prior authorization request?

A Yes. Additional documentation supporting the recipient’s need for the augmentative device would be beneficial to a prior authorization request, but is not required. Sometimes letters from parents, family members, teachers, or caregivers may be helpful in documenting how the device has aided the recipient.

Any supporting documentation *must* be submitted with the prior authorization request and should not be mailed separately.