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## Wisconsin Medicaid Postpones Mandatory Implementation Date of the Personal Care Screening Tool

Wisconsin Medicaid has extended the phase-in period and postponed the mandatory implementation date of the Personal Care Screening Tool (PCST) from December 1, 2006, to March 1, 2007. Prior authorization (PA) requests and PA amendment requests received by Wisconsin Medicaid on and after March 1, 2007, must be submitted using new processes that utilize the PCST. Providers may refer to the August 2006 *Wisconsin Medicaid and BadgerCare Update* (2006-71), titled "Wisconsin Medicaid Announces Release of Personal Care Screening Tool," for detailed information about the PCST and the new PA and PA amendment processes.

### New Implementation Schedule

Wisconsin Medicaid has extended the phase-in period and postponed the mandatory implementation date of the Personal Care Screening Tool (PCST) from December 1, 2006, to March 1, 2007.

Effective March 1, 2007, all prior authorization (PA) requests and PA amendment requests received by Wisconsin Medicaid must be submitted using the new PA and PA amendment processes that utilize the PCST. Complete information about the PCST and the new PA and PA amendment processes is available in the August 2006 *Wisconsin*

*Medicaid and BadgerCare Update* (2006-71), titled "Wisconsin Medicaid Announces Release of Personal Care Screening Tool."

### Requests Submitted During the Phase-in Period

Providers are strongly encouraged to use the new processes that utilize the PCST when submitting PA requests and PA amendment requests during the phase-in period.

Through the extended phase-in period, providers may choose to submit PA requests and PA amendment requests using the former processes; however, PA requests and PA amendment requests received by Wisconsin Medicaid between September 1, 2006, and February 28, 2007, using the former processes will not be granted for a period of time longer than six months.

### Information Regarding Medicaid HMOs

This *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/](http://dhfs.wisconsin.gov/medicaid/).

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