

**Affected Programs:** BadgerCare Plus Benchmark Plan, BadgerCare Plus Standard Plan, Medicaid  
**To:** Hospital Providers, Occupational Therapists, Physical Therapists, Rehabilitation Agencies, School-Based Services Providers, Speech and Hearing Clinics, Speech-Language Pathologists, Therapy Groups, HMOs and Other Managed Care Programs

## Therapy Services Provided in Schools Are Not Counted Toward Community-Based Therapy Limits

Physical therapy, occupational therapy, and speech and language pathology services provided in schools do not count towards the initial spell of illness under Wisconsin Medicaid and the BadgerCare Plus Standard Plan or toward the service limitation for the BadgerCare Plus Benchmark Plan.

### BadgerCare Plus Standard Plan and Medicaid Prior Authorization Threshold

Effective for dates of service (DOS) on and after August 15, 2009, physical therapy (PT), occupational therapy (OT), and speech and language pathology (SLP) services provided in schools, whether or not the services are reimbursed under the school-based services (SBS) benefit, *do not count* toward the prior authorization (PA) threshold of 35 DOS in the initial spell of illness under Wisconsin Medicaid and the BadgerCare Plus Standard Plan.

When PA is required for community-based therapy services, providers are required to submit the child's Individualized Education Program (IEP) with the PA request. Medicaid therapy consultants review the PA request and IEP in addition to all other required materials and records to determine the medical necessity of the requested service. ForwardHealth *does not* base approval or denial of PA requests for community base

therapy on whether the school seeks payment through the SBS benefit. Therapy consultants *do not review SBS billing information*.

Each case is reviewed on an individual basis. ForwardHealth approves PA requests that meet its regulations and guidelines. When making a decision on a PA request, ForwardHealth considers the medical necessity of services and other criteria including (but not limited to) if the service is appropriate, cost-effective, and not reasonably available elsewhere.

### BadgerCare Plus Benchmark Plan Therapy Service Limitation

Effective for DOS on and after August 15, 2009, PT, OT, and SLP services provided in schools, whether or not reimbursed under the SBS benefit, do not count toward the BadgerCare Plus Benchmark Plan service limitation of 20 visits per enrollment year for each therapy discipline (PT, OT, and SLP).

### Reminder

As a reminder, the SBS benefit has been established by Wisconsin Statutes to increase federal funding to Wisconsin schools to help pay for medically related special education and related services.

## **Information Regarding Managed Care Organizations**

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

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