**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Advanced Practice Nurse Prescribers with Psychiatric Specialty, Case Management Providers, Intensive In-Home Mental Health and Substance Abuse Treatment Services for Children, Master’s-Level Psychotherapists, Nurse Practitioners, Occupational Therapists, Outpatient Mental Health Clinics, Outpatient Substance Abuse Clinics, Physical Therapists, Physician Assistants, Physician Clinics, Physicians, Psychologists, Qualified Treatment Trainees, Speech-Language Pathologists, Substance Abuse Counselors, HMOs and Other Managed Care Programs

**Provider Enrollment for the New Behavioral Treatment Benefit**

Beginning November 16, 2015, certain licensed and/or certified medical professionals and other paraprofessionals will be able to enroll in Wisconsin Medicaid as a behavioral treatment provider in preparation for ForwardHealth’s coverage of behavioral treatment services, including services for treatment of autism spectrum disorder.

**Overview**

In July 2014, the federal Centers for Medicare and Medicaid Services issued guidance requiring states to provide coverage of autism spectrum disorder (ASD) treatment through their statewide Medicaid programs. In response, the Wisconsin Department of Health Services (DHS) is defining new coverage for BadgerCare Plus, Medicaid, and Katie Beckett Program members who would benefit from certain behavioral treatment services (e.g., members with ASD). Some of the services rendered as part of behavioral treatment are currently covered through the Children’s Long Term Support (CLTS) Waivers. In 2016, DHS will transition coverage of behavioral treatment services from the CLTS Waivers to ForwardHealth.

ForwardHealth will require all licensed/certified medical professionals and qualifying paraprofessionals who provide behavioral treatment to ForwardHealth members to be enrolled in Wisconsin Medicaid. Beginning November 16, 2015, certain licensed/certified medical professionals and qualifying paraprofessionals will be able to enroll in Wisconsin Medicaid as a behavioral treatment provider in preparation for the start of this new coverage. Licensed/certified medical professionals and qualifying paraprofessionals are encouraged to begin the Medicaid enrollment process as soon as possible starting November 16, 2015.

Licensed/certified medical professionals who are already enrolled in Wisconsin Medicaid will be required to complete a separate enrollment as a behavioral treatment provider in order to provide covered behavioral treatment services to ForwardHealth members.

More information about the behavioral treatment benefit, including member eligibility, covered and noncovered services, prior authorization (PA) requirements, and claims requirements will be published in a future ForwardHealth Update.

**Provider Specialties**

ForwardHealth is establishing the following provider specialties that reflect the existing multi-tiered paraprofessional delivery model commonly used by Wisconsin behavioral treatment providers:

- Behavioral treatment licensed supervisor.
- Behavioral treatment therapist.

**Department of Health Services**
• Behavioral treatment technician.
• Focused treatment licensed supervisor.
• Focused treatment therapist.

Licensed/certified medical professionals and qualifying paraprofessionals should choose the most appropriate provider specialty for his or her qualifications. Each professional or paraprofessional is encouraged to enroll in a single provider specialty but may enroll in two provider specialties to reflect his or her professional duties. Detailed enrollment information will be located on the Provider Enrollment Information page of the ForwardHealth Portal at www.forwardhealth.wi.gov/. To locate enrollment criteria for each specialty, providers will need to select the Become a Provider link from the Portal home page and then select the Information for Specific Provider Types link.

Levels of Treatment
There will be two different levels of treatment under the new behavioral treatment benefit: comprehensive and focused. Comprehensive treatment will encompass high-intensity, early-intervention treatment approaches designed to address multiple aspects of development and behavior. Focused treatment will encompass fewer hours of treatment and will be dedicated to addressing specific behaviors or developmental deficits. Treatment modalities must be evidence-based, as determined by a DHS review process. Current evidence-based treatment modalities include Applied Behavior Analysis (ABA) and Early Start Denver Model (ESDM).

Comprehensive Treatment
The aim of comprehensive treatment is for the member to acquire a broad base of skills, with an emphasis on the primary deficit areas associated with ASD (communication, social-emotional development, and adaptive functioning). The broad scope of goals and focus on early developmental impacts are the defining features of this treatment.

Per policy, all behavioral treatment providers who enroll to provide comprehensive treatment are subject to caregiver background check requirements found in Wis. Admin. Code § DHS 12. Documentation of the background check and its results must be maintained by the provider’s employer and be made available to DHS on request.

Behavioral Treatment Licensed Supervisor
Enrollment Criteria: To enroll in Wisconsin Medicaid as a behavioral treatment licensed supervisor, a health care professional is required to be certified to do one of the following:
• Supervise provision of ABA:
  ✓ The individual is required to be licensed by the Wisconsin Department of Safety and Professional Services (DSPS) as a behavior analyst.
  ✓ This licensure requires certification as a Board Certified Behavior Analyst or Board Certified Behavior Analyst — Doctoral from the Behavior Analyst Certification Board (BACB).
• Supervise provision of ESDM:
  ✓ This individual is required to be licensed by the Wisconsin DSPS as a psychiatrist, psychologist, behavior analyst, clinical social worker, professional counselor, or marriage and family therapist.
  ✓ The individual is required to hold an ESDM certificate from the University of California, Davis program.

In addition, a behavioral treatment licensed supervisor is required to have, and attest to, at least 4,000 hours of documented experience as a supervisor of less experienced clinicians delivering the approved treatment model for the target population.

Enrollment Category: Wisconsin Medicaid categorizes a behavioral treatment licensed supervisor as a billing/rendering provider. More information on categories of enrollment can be found on the Provider Enrollment Information page of the Portal.

Type(s) of Treatment: Behavioral treatment licensed supervisors may provide both comprehensive and focused treatment.
**Documentation Requirements:** The following documentation will be required during the enrollment process for behavioral treatment licensed supervisors:

- The DSPS license number.
- Documentation denoting required hours of supervisory experience. The submission should provide a value for the total hours of experience as well as a breakdown of total hours by a standard category that can be applied to the entire body of experience. Categories may include hours by client, hours by week, hours by dates of employment at provider agency, or another category that is supported by clinical notes, billing records, or employment records.
- A copy of the ESDM certificate, if applicable.

Providers who meet all the enrollment criteria for licensed behavioral treatment supervisors except the BACB or ESDM certification may receive a variance to enroll. Providers granted a variance must adhere to all behavioral treatment provider enrollment criteria, including the BACB or ESDM certification requirement, no later than three years after the date the variance is granted.

**Enrollment Category:** Wisconsin Medicaid categorizes a behavioral treatment therapist as a rendering provider only, meaning he or she may render services but will not receive direct reimbursement from Wisconsin Medicaid.

**Type(s) of Treatment:** Behavioral treatment therapists may provide both comprehensive and focused treatment.

**Documentation Requirements:** The following documentation will be required during the enrollment process for behavioral treatment therapists:

- A copy of the BACB certificate, if applicable.
- A degree from an appropriate institution, if applicable.
- Documentation denoting required hours of supervisory experience. The submission should provide a value for the total hours of experience as well as a breakdown of total hours by a standard category that can be applied to the entire body of experience. Categories may include hours by client, hours by week, hours by dates of employment at provider agency, or another category that is supported by clinical notes, billing records, or employment records.

**Behavioral Treatment Therapist**

**Enrollment Criteria:** A healthcare professional is required to meet one of the following criteria to enroll in Wisconsin Medicaid as a behavioral treatment therapist:

- Be a Board Certified Assistant Behavior Analyst (BCaBA) with certification from the BACB and have, and attest to, 400 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.
- Hold a master’s degree in psychology, counseling, marriage and family therapy, social work, education, or a behavioral sciences field and have, and attest to, 400 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.
- Hold a bachelor’s degree in psychology, counseling, marriage and family therapy, social work, education, or a behavioral sciences field and have, and attest to, 2,000 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.

**Behavioral Treatment Technician**

**Enrollment Criteria:** An individual is required to meet all of the following criteria to enroll in Wisconsin Medicaid as a behavioral treatment technician:

- Be at least 18 years old.
- Have earned a high school diploma or a General Educational Development (GED) certificate.

In addition, a behavioral treatment technician is required to have a Registered Behavior Technician (RBT) certification from the BACB or have, and attest to, 40 hours of training administered by a supervising provider (refer to the Attachment of this Update).

**Enrollment Category:** Wisconsin Medicaid categorizes a behavioral treatment technician as a rendering provider, meaning he or she may render services but will not receive direct reimbursement from Wisconsin Medicaid.
Type(s) of Treatment: Behavioral treatment technicians may provide comprehensive treatment only.

Documentation Requirements: The following documentation will be required during the enrollment process for behavioral treatment technicians:
- A copy of the BACB certificate, if applicable.
- A copy of the high school diploma or GED certificate.

Focused Treatment

The aim of focused treatment is to reduce the challenging behaviors of the member, develop replacement behaviors, and develop discrete skill acquisition tasks, such as skills training for independent living. A narrow scope of goals is the defining feature of focused treatment, in contrast to the broad scope of goals with comprehensive treatment.

Per policy, all behavioral treatment providers who enroll to provide focused treatment are subject to caregiver background check requirements found in Wis. Admin. Code § DHS 12. Documentation of the background check and its results must be maintained by the provider’s employer and be made available to DHS on request.

Focused Treatment Licensed Supervisor

Enrollment Criteria: A healthcare professional is required to meet all of the following criteria to enroll in Wisconsin Medicaid as a focused treatment licensed supervisor:
- Be licensed by the Wisconsin DSPS as a psychiatrist, psychologist, behavior analyst, clinical social worker, professional counselor, or marriage and family therapist.
- Act within the scope of his or her training and experience.

In addition, the focus treatment licensed supervisor is required to have, and attest to, at least 2,000 hours of documented supervised experience delivering a Wisconsin-approved treatment model.

Enrollment Category: Wisconsin Medicaid categorizes a focused treatment licensed supervisor as a billing/rendering provider.

Type(s) of Treatment: Focused treatment licensed supervisors may provide focused treatment only.

Documentation Requirements: The following documentation will be required during the enrollment process for focused treatment licensed supervisors:
- The DSPS license number.
- Documentation denoting required hours of supervisory experience. The submission should provide a value for the total hours of experience as well as a breakdown of total hours by a standard category that can be applied to the entire body of experience. Categories may include hours by client, hours by week, hours by dates of employment at provider agency, or another category that is supported by clinical notes, billing records, or employment records.

Focused Treatment Therapist

Enrollment Criteria: A healthcare professional is required to meet one of the following criteria to enroll as a focused treatment therapist:
- Be a BCaBA with certification from the BACB and have, and attest to, 400 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.
- Hold at least a master’s degree in psychology, counseling, marriage and family therapy, social work, education, or a behavioral sciences field and have, and attest to, 400 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.
- Hold a bachelor’s degree in psychology, counseling, marriage and family therapy, social work, education, or a behavioral sciences field and have, and attest to, 2,000 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.
- Be an RBT from the BACB and have, and attest to, 3,000 hours of documented training and supervised experience delivering a Wisconsin-approved treatment model.
**Enrollment Category:** Wisconsin Medicaid categorizes a focused treatment therapist as a rendering provider, meaning he or she may render services but will not receive direct reimbursement from Wisconsin Medicaid.

**Type(s) of Treatment:** Focused treatment therapists may provide focused treatment only.

**Documentation Requirements:** The following documentation will be required during the enrollment process for focused treatment therapists:

- A copy of the BACB certificate, if applicable.
- A degree from an appropriate institution, if applicable.
- Documentation denoting required hours of supervisory experience. The submission should provide a value for the total hours of experience as well as a breakdown of total hours by a standard category that can be applied to the entire body of experience. Categories may include hours by client, hours by week, hours by dates of employment at provider agency, or another category that is supported by clinical notes, billing records, or employment records.

**Medicaid Enrollment Process**

To access the Medicaid enrollment application on the Portal, licensed/certified medical professionals and qualifying paraprofessionals should follow these steps:

2. Select the Become a Provider link in the Provider box on the left side of the Portal home page. The Provider Enrollment Information home page will be displayed.
3. On the upper left side of the Provider Enrollment Information home page, select the Start or Continue Your Enrollment link.
4. In the To Start a New Medicaid Enrollment box, select the Medicaid/Border Status Provider Enrollment Application link.

**Completing and Submitting Enrollment Applications**

After accessing the enrollment application on the Portal, the professional or paraprofessional will be guided through a series of screens on which they will be asked to complete or verify specific information based on their provider type.

At the end of the enrollment application, the professional or paraprofessional will be required to do the following:

1. Upload any additional supporting documents (e.g., licenses or certifications).
2. Select the Submit link to submit the enrollment application.
3. Print and maintain the enrollment documents in compliance with record retention requirements (Wis. Admin. Code § DHS 106.02[9]).

**Tracking Enrollment Through the Portal**

Upon submission of the enrollment application, the professional or paraprofessional will receive an application tracking number (ATN) that will allow him or her to track the enrollment application through the Portal. To check on the status of the enrollment application, the professional or paraprofessional should follow these steps:

1. Access the Portal.
2. Select the Enrollment Tracking Search link in the Providers box on the left side of the Portal home page.
3. Enter the ATN and select Search.

The individual will receive current information about his or her application, such as whether it is being processed or has been returned for more information.

Wisconsin Medicaid will notify the professional or paraprofessional of the status of the enrollment usually within 10 business days, but no longer than 60 days, after receipt of the complete enrollment application. Wisconsin Medicaid will either approve the application and enroll the individual or deny the application. If the enrollment application is denied, Wisconsin Medicaid will give the applicant reasons, in writing, for the denial.
Licensed/certified professionals and qualifying paraprofessionals who meet the enrollment requirements will be sent a welcome letter and a copy of the provider agreement. Included with the letter will be an attachment with important information, such as effective dates and the individual’s assigned provider type and specialty. This information will be used when conducting business with Wisconsin Medicaid.

The welcome letter will also notify non-healthcare providers (e.g., paraprofessionals) of their Medicaid provider number. This number will be used on claim submissions, PA requests, and other communications with Wisconsin Medicaid.

**National Provider Identifier**

Health care providers are required to indicate a National Provider Identifier (NPI) on enrollment applications. The NPI is a 10-digit number obtained through the National Plan and Provider Enumeration System (NPPES). Non-healthcare providers, such as paraprofessionals, are exempt from federal NPI requirements. Providers exempt from federal NPI requirements are assigned a Medicaid provider number once their enrollment application is accepted.

**Taxonomy Code**

Health care providers are required to indicate a taxonomy code on enrollment applications. Non-healthcare providers, such as paraprofessionals, are exempt from taxonomy requirements. Providers already enrolled in Wisconsin Medicaid are required to provide a unique taxonomy on their behavioral treatment enrollment application.

**Effective Date of Enrollment**

The initial effective date of a provider’s enrollment will be based on the date Wisconsin Medicaid receives the complete and accurate enrollment application materials. An application is considered complete when all required information has been accurately submitted and all supplemental documents have been received by Wisconsin Medicaid.

**Revalidation Requirements**

All Medicaid-enrolled providers are required to revalidate their enrollment information every three years to continue their participation with Wisconsin Medicaid. During the revalidation process, providers update their enrollment information and sign the Wisconsin Medicaid Provider Agreement and Acknowledgement of Terms of Participation.

**Provider Revalidation Notice**

Providers receive a Provider Revalidation Notice in the mail from ForwardHealth when it is time to undergo revalidation. The Provider Revalidation Notice specifies the provider's revalidation date. Providers have 30 days from their revalidation date to submit their revalidation application.

*Note:* Providers will not be able to revalidate their enrollment prior to their revalidation date or after the 30-day deadline for revalidating.

**Failure to Revalidate Enrollment**

Providers who fail to submit their revalidation application by the deadline will be terminated from Wisconsin Medicaid. To reactivate Medicaid enrollment, the provider will be required to complete a new provider enrollment application and undergo additional screening activities. The provider may be required to pay another application fee.

**Enrollment May Be Terminated Due to Inactivity**

If a Medicaid-enrolled provider does not render services or submit claims for services rendered to any ForwardHealth member for over 12 consecutive months, the provider’s Medicaid enrollment may be terminated. The provider will then be required to re-enroll.

**Portal Access**

Once enrolled as a Medicaid provider, providers are strongly encouraged to request a secure Portal account. The secure Portal allows providers to conduct business and exchange electronic transactions with ForwardHealth; this includes:

- Verifying member enrollment.
• Submitting claims and PA requests.
• Viewing their Remittance Advices.
• Receiving secure messaging.
• Updating information through the Demographic Maintenance tool.

Refer to the Account User Guide on the Portal User Guides page of the Portal at www.forwardhealth.wi.gov/WIPortal/content/Provider/userguides/userguides.htm.page for more information on establishing and managing a Portal account.

**Changing Medicaid Enrollment**

A Medicaid-enrolled provider may change his or her specialty if the provider advances in his or her field and meets all other enrollment requirements.

To change Medicaid enrollment, a provider updates the Specialty Change panel within the Demographic Maintenance tool of his or her secure Portal account and attaches the documentation to support the change. The provider will be eligible for reimbursement at the reimbursement rate associated with the new provider specialty.

If the change in specialty affects the provider’s category of enrollment, the category will be changed from rendering provider to billing/rendering provider. In these situations, the provider will also need to supply Wisconsin Medicaid with the required financial and address information.

More information on provider enrollment is found in the Provider Enrollment and Ongoing Responsibilities section of the ForwardHealth Online Handbook and on the Provider Enrollment Information page of the Portal.
ATTACHMENT
Behavioral Treatment Technician Training Curriculum Content Standards

The following content outlines the standard core curriculum requirements for training all new behavioral treatment technicians. This content may be delivered in person by a qualified supervisor or online. Provider-specific training should be conducted in addition to the required content outlined below for a total of at least 40 hours of training prior to the provision of Medicaid-funded behavioral treatment:

A. Basics of the diagnosis:
   - Current *Diagnosis and Statistical Manual of Mental Disorders* (DSM) diagnostic criteria
   - Examples of common symptoms (e.g., for autism spectrum disorder [ASD], this includes socialization, communication, and repetitive/restrictive patterns of behavior and interests)
   - Importance of individualized goals
   - Examples of common goals and their relation to member symptoms (e.g., for ASD, this includes communication, socialization, reducing of repetitive behaviors, cognitive skills, adaptive skills, and coping skills)

B. Basic concepts in evidence-based treatment:
   - Purpose of treatment
   - Developmental considerations (e.g., importance of play for young children)
   - Application of behavioral teaching principles:
     - Collecting behavioral data
     - Prompting
     - Understanding the function(s) of behavior
     - Reinforcement (positive and negative)
     - Punishment (positive and negative)
     - Extinction
     - Replacement behavior development

C. Ethics:
   - Definition: “do no harm”
   - Confidentiality
   - Professional boundaries
   - Informed consent

D. Mandatory reporting:
   - Limits to confidentiality
   - Definitions: physical abuse, sexual abuse, neglect, isolation or confinement, unsafe or unsanitary conditions
   - Wisconsin guidelines concerning mandated reporting

E. Seclusion and physical restraint measures:
   - Definitions: physical restraint, seclusion
   - Wisconsin guidelines concerning the use of seclusion and restraint
Documentation Requirements

Behavioral treatment technicians are required to complete a minimum of 40 hours of training (core curriculum and provider-specific training) prior to enrolling with ForwardHealth. Employers must maintain the following documentation for each training episode:

- Technician’s name.
- Date and time of training.
- Trainer’s name and credentials (include website for online training resources).
- Training mode (e.g., classroom, online, hands-on).
- Summary of content.
- Method of competency assessment (e.g., quiz, skill demonstration) and results (i.e., pass/fail).
- Remediation protocol for “fail” status.

Registered Behavior Technicians (RBTs) are required to provide written documentation indicating the name of his or her RBT certification instructor and the certification completion date in place of the core curriculum requirement. Documentation of provider-specific training, including competency assessment, is also required.

Behavioral treatment technicians who previously worked with a different agency are required to provide written documentation of their training and experience in place of the core curriculum requirement. Documentation of provider-specific training, including competency assessment, is also required.