

Update May 2018

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Affected Programs: BadgerCare Plus, Medicaid

To: Home Health Agencies, Personal Care Agencies, HMOs and Other Managed Care Programs

Clarified Prior Authorization Policy for Home Health and Personal Care Services

Effective for dates of service (DOS) on and after January 1, 2018, providers are required to submit separate prior authorization (PA) requests if a member is receiving both personal care services **and** home health services from a home health agency. This policy applies regardless of how the PA is submitted (electronically via the ForwardHealth Portal or on paper by mail or fax). Providers should submit any appropriate, corresponding clinical documentation with each submission. PA requests submitted with home health services and personal care services listed on the same request will be returned to the provider to submit two separate PA requests.

For more information, providers should refer to the Personal Care Services topic (topic #2077) of the General Information chapter of the Prior Authorization section of the Home Health service area of the ForwardHealth Online Handbook, www.forwardhealth.wi.gov/, or the Personal Care Services Provided by Home Health Agencies topic (topic #3177) of the General Information chapter of the Prior Authorization section of the Personal Care service area of the Online Handbook.

Previously Approved PA Requests

Providers with a previously approved PA for personal care services and home health services requested on the same PA form are not required to amend their authorizations to separate the service authorizations.

Reminders

Home health providers should follow the policies specific for the **service they are providing**. For example:

- Providers are required to submit their PA request using the process type of the service they are providing, not their provider type:
 - ✓ Use process type 120 for home health services.
 - ✓ Use process type 121 for personal care services.
- Providers are required to obtain physician orders in accordance with the policy for the service they are providing, not their provider type:
 - Orders for home health services must be obtained as often as required by the member's condition, but at least every 62 days.
 - Orders for personal care services must be obtained once every three months unless the physician specifies that orders covering a period of time up to one year are appropriate or when the member's needs change, whichever occurs first.

Information Regarding Managed Care Organizations

This ForwardHealth 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 (MCO). MCOs 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 Medicaid Services, the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health, DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.

P-1250