

Affected Programs: BadgerCare Plus, Medicaid

To: Home Health Agencies, 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

Simplified Prior Authorization Process for Physical Therapy, Occupational Therapy, and Speech and Language Pathology for Members Under 21 Years of Age

Overview

This *ForwardHealth Update* announces simplified documentation and clinical requirements to substantiate prior authorization (PA) requests for physical therapy (PT), occupational therapy (OT), and speech and language pathology (SLP) services for members under 21 years of age. This simplification is intended to increase children's access to therapy services in the community and to reduce the documentation that providers are required to submit to ForwardHealth.

No changes are being made to the Birth to 3 or spell of illness (SOI) PA process.

Simplified PA Process for Members Under 6 Years of Age

Required Documents

Providers are required to submit only the following documents when requesting therapeutic services for members under 6 years of age:

- A completed Prior Authorization Request Form (PA/RF), F-11018 (05/13)

- A Prior Authorization/Therapy Attachment (PA/TA), F-11008 (08/2017)
- For all children 0 to 3 years of age receiving therapy services provided outside the Birth to 3 program, the Child Enrollment Status Regarding Birth to 3 Program form, F-00316 (03/2017), or an equivalent version of the form and content as documented by the county Birth to 3 Program
- A written report of the most recent assessment or evaluation of the member
- If submitting a PA request for continuation of therapy, measurable data that reflects the member's response to treatment (This may be reported in a current plan of care [POC] with progress data or in an assessment with member results.)

For information regarding the PA process for Birth to 3 or SOI, refer to the Requesting Services for Birth to 3 Participants chapter or the Requesting Spell of Illness chapter of the Prior Authorization section of the Therapies: Physical, Occupational, and Speech and Language Pathology service area of the ForwardHealth Online Handbook on the ForwardHealth Portal at www.forwardhealth.wi.gov/.

Frequency and Duration

Each PA request for members under 6 years of age may be approved with the simplified PA process for up to one therapy session per week. To request more than one session per week, providers must submit all required documentation consistent with current policy to allow a full medical necessity review and substantiate the requested frequency of sessions. PA requests for members under 6 years of age may be approved for up to 12 months.

As a reminder, ForwardHealth allows flexible use of approved, medically necessary PT, OT, and SLP sessions so providers may meet members' needs. Providers may refer to the Flexibility of Approved Services topic (topic #2733) in the General Information chapter of the Prior Authorization section of the Therapies: Physical, Occupational, and Speech and Language Pathology service area of the Online Handbook.

If an authorization period of less than 12 months is granted, providers can submit a PA amendment to continue services up to 12 months per PA. Providers must submit an amendment request or a new PA request before the current PA expires to prevent a gap in services. Members are not required to be discharged at the end of the extension period.

Simplified PA Requirements for School-Aged Members (Ages 6–20)

ForwardHealth covers community-based OT, PT, and SLP services provided to school-aged members, ages 6–20, when the primary objective for treatment is to support the member's home- and community-based needs.

Coordination of Care

For the initial PA of an episode of care, providers are not required to submit documentation of coordination of care with school-based or community-based service providers.

Providers are required to submit written attestation of coordination with school-based services on subsequent PAs when a member is receiving both community-based services and school-based services in the same treatment discipline (e.g., outpatient speech therapy and group-based speech

therapy in the school). This attestation must be documented on Element 16 of the PA/TA, on the POC, or on another document. Providers are required to maintain documentation of coordination of care in the member's medical record.

Providers are required to submit documentation of coordination of care with other community-based service providers on subsequent PA requests.

Failure to coordinate care or to maintain documentation of coordination of care may result in recovery of funds.

For more information about documentation that providers are required to keep in members' medical records, providers may refer to the Documentation chapter of the Provider Enrollment and Ongoing Responsibilities section of the Therapies: Physical, Occupational, and Speech and Language Pathology service area of the Online Handbook.

Treatment Generalization

ForwardHealth requires providers to submit evidence that skills learned in therapy have been generalized from the controlled environment of the clinic setting to the member's natural environment(s) of home or community. Providers are not required to submit evidence or attestation that community-based treatment has been generalized to the school setting.

Home Exercise Programs

Per professional best practice standards, ForwardHealth requires the creation and implementation of home exercise programs (HEPs) with the member or the member's parent, guardian, or caregiver. HEPs must be retained in the member's records. Providers are not required to submit HEPs on the initial PA of an episode of care. Providers are required to submit written attestation of members' HEPs with subsequent PA requests.

If the primary purpose of the PA is to create an HEP, a detailed HEP and implementation plan may be requested.

Note: This policy regarding HEP submission requirements applies to all members from age 6 through adult.

Clarification of Backdating for All PA Requests

Backdating an initial PA request to a date prior to ForwardHealth's initial receipt of the request may be allowed in limited circumstances. ForwardHealth will backdate a PA request up to 14 calendar days from the date of submission but not prior to the member's initial evaluation date. In the event that the member has received therapy within the same discipline from the same provider within the last 90 calendar days, submission of a discharge summary report is necessary to demonstrate past therapy has ended and new treatment is being initiated, thereby allowing the potential for backdating.

A request for backdating may be approved if all of the following conditions are met:

- The provider specifically requests backdating in writing on the PA request.
- The request includes clinical justification for beginning the service before the PA was granted, including the evaluation report and, if applicable, a discharge summary.
- ForwardHealth receives the request within 14 calendar days of the start of the provision of services.

Note: This updated backdating policy applies to members of all ages, from age 0 through adult. Birth to 3 and SOI PAs may be backdated according to this policy.

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 (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/.

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