

ForwardHealth **UPDATE**

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CLARIFICATION OF TELEHEALTH SUPERVISION REQUIREMENTS AND DELIVERY

This ForwardHealth Update clarifies telehealth policy related to supervision requirements and delivery and includes both permanent and temporary policy.

Ongoing expectations for certain providers are covered along with documenting supervision methods. In addition, providers are reminded that temporary flexibilities, including remote supervision of personal care workers (PCWs) by registered nurses (RNs), will expire on the day the federal public health emergency (PHE) ends. ForwardHealth will notify providers when the federal government announces an end for the PHE.

Telehealth Supervision Requirements

Supervision requirements and respective telehealth allowances vary depending on service and provider type. Some supervision requirements necessitate the physical presence of the supervising provider to meet the requirements of appropriate delivery of supervision. Such

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

All Providers, HMOs and Other Managed Care Programs

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requirements cannot be met through the provision of telehealth, including audio-visual delivery.

Providers who deliver services with supervision requirements are reminded to review ForwardHealth policy, including permanent telehealth policy, and the requirements of their licensing and/or certifying authorities to determine if the supervisory components of the service can be met via telehealth. Refer to the Supervision topic ([#22757](#)) of the ForwardHealth Online Handbook for additional information.

Supervision of Paraprofessional Providers

Paraprofessional providers are subject to supervision requirements. Paraprofessional providers are providers who do not hold a license to practice independently but are providing services under the direction of a licensed provider. Providers who supervise paraprofessionals are responsible for confirming if the required components of supervision can be met through telehealth delivery.

Personal Care/Home Health Provider Supervision

Under permanent policy, supervision of PCWs and home health aides must be performed on site, in person by the RN. State rules and regulations necessitate supervising providers to physically visit a member's home and directly observe the paraprofessional providing services.

Temporary flexibilities in place **during the federally declared PHE** allow for supervision of PCWs to be performed via telehealth. RN supervision of PCWs through telehealth will not be covered by ForwardHealth after the federal government ends the PHE. Refer to Alert [051](#), "Temporary Policy Changes for Personal Care Providers to Continue Through the Public Health Emergency," for additional information.

As a reminder, direct care services provided by PCWs, home health aides, and private duty nurses are not eligible to be performed via telehealth.

Direct Supervision for Ancillary Care Providers

Ancillary care providers, such as staff nurses, dietician counselors, nutritionists, health educators, genetic counselors, and some nurse practitioners, practice

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under the direct supervision of a physician and bill under the supervising physician's National Provider Identifier.

Refer to the Supervision topic ([#22757](#)) for direct supervision requirements for ancillary care providers providing telehealth services.

Supervision for Behavioral Health Services

Providers are reminded that effective January 1, 2022, modifier FR should be used for behavioral health services where the supervising provider is present through audio-visual means and the patient and supervised provider are in-person.

Refer to the Supervision topic ([#22757](#)) for additional information.

Documenting Supervision Methods

Providers should include how the service and the required supervision occurred in the member record and, if applicable, indicate the appropriate modifier on the claim form. For example, for a behavioral health service where the supervising provider is present through audio-visual means and the patient and supervised provider are in-person, modifier FR should be indicated on the claim.

Refer to the Supervision topic ([#22757](#)) for additional information.

Temporary Public Health Emergency Flexibilities

Providers must abide by the requirements of their licensing and/or certifying authorities when delivering services with supervision requirements in conjunction with federal PHE flexibilities.

Certain ForwardHealth supervision flexibilities will remain in effect until the federal PHE related to the COVID-19 pandemic expires. These temporary flexibilities, which include remote supervision of PCWs by RNs, will end on the day the PHE expires. ForwardHealth will notify providers when the federal government announces an end for the PHE.

Under temporary policy, ForwardHealth allows supervision requirements to be met via telehealth. However, this flexibility does not change or replace licensure or certification requirements of the provider's supervising body or other regulatory authorities. When possible, face-to-face supervision requirements should be met via audio-visual technologies. Supervision must be documented according to existing benefit policy.

QUICK LINKS

- Supervision topic ([#22757](#))
- Alert [051](#), "Temporary Policy Changes for Personal Care Providers to Continue Through the Public Health Emergency"
- Update [2020-15](#), "Additional Services to Be Provided Via Telehealth"
- [Telehealth Expansion and Related Resources for Providers](#) page

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All providers are responsible for communicating to members any changes that might affect them when temporary flexibilities end and permanent telehealth policy becomes effective. This would include changes to supervision requirements such as staff entering a member's home to observe services being provided.

Providers should refer to the following resources for additional information on temporary PHE flexibilities:

- Alert [051](#)
- Update [2020-15](#)

Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Providers are required to produce or submit documentation, or both, to the Wisconsin Department of Health Services (DHS) upon request. Per Wis. Stat. § [49.45\(3\)\(f\)](#), providers of services shall maintain records as required by DHS for verification of provider claims for reimbursement. DHS may audit such records to verify actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from the Medicaid program.

Information Regarding Managed Care Organizations

This Update applies to telehealth services with supervision components that members receive on a fee-for-service basis and through BadgerCare Plus, Medicaid SSI, and other managed care programs. For information about managed care implementation of the updated 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.

REMINDER

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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 within 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 within DHS.

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