

ForwardHealth **UPDATE**

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NEW REAL-TIME REVIEW AND APPROVAL OF PRIOR AUTHORIZATION REQUESTS FOR FULL DENTURES

Beginning September 3, 2024, prior authorization (PA) requests for full dentures submitted on the ForwardHealth Portal may be granted real-time PA review and approval if all applicable PA criteria are met. This policy applies only to new PA requests submitted through the Portal for process type 124 (dental) with either/both of these Current Dental Terminology procedure codes:

- D5110 (Complete denture—maxillary)
- D5120 (Complete denture—mandibular)

This submission option **does not include** amendments.

Dental providers who submit PA requests for other codes should refer to ForwardHealth Update [2024-28](#), “Revised Process for All Dental Prior Authorization Requests Submitted Via the ForwardHealth Portal,” for additional revisions to the PA submission process.

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

Dental Hygienists, Dentists, Oral Surgeons, HMOs and Other Managed Care Programs



Real-Time Review

Real-time review for PA requests reduces clerical errors and administrative burden for providers.

In real-time reviews, the system checks to see if all necessary information has been included in the PA request so it can be approved when submitted. The system sends the PA request to a consultant for manual review if real-time review cannot determine whether the request meets all applicable PA criteria or finds that it does not meet PA criteria.

Dental PA requests will not be denied during real-time review. A consultant can confirm during manual review if criteria are missing before issuing a denial. They can also approve the PA if all criteria have been met.

Providers may still submit PA requests by fax and mail for process type 124 at this time, but such submissions will be subject to regular PA review. Real-time review requires use of the Portal.

Regardless of how the PA request is submitted, providers are expected to complete all required fields and are encouraged to complete all optional fields on the required forms.

Criteria for Approval Through Real-Time Review

A PA request for full dentures may be approved through real-time review based on this criteria:

- The member must be missing all upper and/or lower teeth.
- Any existing dentures must be at least 5 years old.
- An existing PA for a full denture or partial denture is not active.
- The requested start date may not be more than 14 days before the submission date.

Note: A new PA request will not be created if an active PA for a full denture or partial denture already exists. In this case, a provider will receive a message saying the authorized unit must be used and/or the active PA must be end-dated (via an amendment) before a new PA can be approved.

Once a provider receives confirmation of the real-time approval for a PA request for dentures, the PA is complete. No further action is necessary.

Beginning September 3, 2024, PA requests for full dentures submitted through the Portal may be granted real-time PA review and approval if all applicable PA criteria are met.

PA Requests Requiring Manual Review

In accordance with Wis. Admin. Code § [DHS 107.02\(3\)](#), there may be instances in which PA requests cannot go through real-time review. In these cases, providers will be notified that a consultant will manually review the PA request. Examples of situations that would make a PA request require manual review include:

- The PA request is submitted by an out-of-state/non-border-state provider.
- The PA request is submitted with a service code other than a full dentures service code.
- The PA request is submitted to replace a denture less than 5 years old that has been lost, stolen, or severely damaged.

Replacement of Lost, Stolen, or Severely Damaged Dentures Less Than 5 Years Old

If a denture less than 5 years old is lost, stolen, or severely damaged, a provider may request a one-time replacement. Since real-time review is not allowed in this situation, providers must submit documentation (via mail, fax, or upload) to include:

- A description of how the full denture was lost, stolen, or severely damaged.
- A plan addressing how the member will prevent a future mishap with the requested prosthetic appliance(s).

Providers may refer to the ForwardHealth Online Handbook Lost, Stolen, or Severely Damaged Prosthesis topic [#2893](#) for required documentation details.

Guideline Questions

When providers submit PA requests using the Portal, they will respond to a series of questions to determine if their request qualifies for real-time approval.

QUICK LINKS

- [Lost, Stolen, or Severely Damaged Prosthesis topic #2893](#)
- [Prior Authorization Dental Request Form topic #2830](#)
- [Supporting Clinical Documentation topic #449](#)
- [ForwardHealth Provider Portal Prior Authorization User Guide \(PDF\)](#)

This table contains the attestation statement providers will need to agree to on the Portal. The statement is also referred to in the [Attachment](#) to this Update.

IF...	The answers provided on the Guidelines Questions panel satisfy the criteria for real-time PA review and approval,
THEN...	The provider will be required to agree to an attestation statement: An approved authorization does not guarantee payment. Reimbursement is contingent upon enrollment of the member and provider at the time the service is provided and the completeness of the claim information. Payment will not be made for services initiated prior to approval or after the authorization expiration date. Reimbursement will be in accordance with ForwardHealth payment methodology and policy. Providers are expected to abide by all regulative authorities as stated in Wis. Admin. Code DHS 107.02(3)(i)1.a . If the member is enrolled in a managed care program that covers the service, ForwardHealth reimbursement will not be allowed.

Submission

The attachment to this Update contains a high-level overview of the PA request submission process for full dentures through the Portal for real-time review and approval.

This table contains the manual review message referred to in the Attachment.

IF...	The answers provided on the Guidelines Questions panel do not satisfy the criteria for real-time PA review and approval,
THEN...	The following message will be displayed: Thank you for submitting this service authorization request. Based on the information provided in this request, it cannot be automatically approved. This service authorization request will be reviewed through the manual adjudication process. Review and submit all documentation and attachments to ensure there is a complete file so ForwardHealth can perform a full clinical review. Click the Next button to continue.

For more information about submitting PA requests on the Portal, providers may refer to the [ForwardHealth Provider Portal Prior Authorization User Guide](#).

Required Documentation for PA Requests for Dental Services

For information about completing required forms and documentation for dental services, refer to the Prior Authorization Dental Request Form topic [#2830](#) and Supporting Clinical Documentation topic [#449](#).

The Portal will automatically generate these forms when a PA request for full dentures is submitted for real-time review and approval:

- Prior Authorization Dental Request Form (PA/DRF), F-11035 (06/2024)
- Prior Authorization/Drug Attachment 1 (PA/DA1) form, F-11010 (01/2019)

For dental PA requests entered on the Portal, including full denture PAs that must be manually reviewed, the Portal will automatically display the PA/DA1 panel for the provider to complete with the PA request submission:

- Some of the information will be prefilled on the PA/DA1 such as provider information, member information, and procedure codes.
- Providers will complete the treatment plan justification section of the PA/DA1.

QUICK LINKS

- [Forms](#) page
- [Training](#) page

Training Available

Providers and BadgerCare Plus or Medicaid HMOs may access a pre-recorded training that provides a detailed overview of the real-time PA review and approval process on the [Trainings](#) page of the Portal.

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 the 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 denial of submitted claims, recoupment of paid claims, application of intermediate sanctions, or termination from the Medicaid program.

Information Regarding Managed Care Organizations

This Update applies to dentures 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.



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/.

ATTACHMENT

Process for Real-Time Review of Prior Authorization Requests for Full Dentures

(A copy of the Process for Real-Time Review of Prior Authorization Requests for Full Dentures can be found on the following page.)

Process for Real-Time Review of Prior Authorization Requests for Full Dentures



Access the Prior Authorization page from the secure Provider area of the ForwardHealth Portal, and click the Submit a new PA link.

1. Initial Information: Select process type 124 for dental and enter all the required fields.
2. Member Information: Enter all the required fields.
3. Service Information: Enter all the required fields.
4. Guideline Questions: Respond to the series of questions.



Criteria is met for real-time review:

- An attestation statement appears.
- Click the check box by the attestation statement.
- Click Next.
- A confirmation message appears.
- Click Next to preview the PA request.
- Click Submit.

The system displays a message that the PA request is approved.

Criteria is not met for real-time review:

- A message appears that says the PA request will proceed with a manual review.
- Click Next.
- Complete the Prior Authorization/ Dental Attachment 1 (PA/DA1) form, F-11010, online.
- Click Next to preview the PA request.
- Click Submit.

The PA request is submitted by the Portal for manual review.