

1	Inpatient Hospital Services	1
2.a	Outpatient Hospital Services.....	1
2.b	Rural Health Clinic Services.....	1
4.a	Skilled Nursing Facility Services	1
4.c	Family Planning Services	1
5.	Physician’s Services.....	1
4.b	EPSDT Other Services, continued.....	1.d
4	School Based Services	1.d
	Physician’s Services, continued?	2
5.b	Dental Services	3
6.a	Podiatry Services	3
6.b	Vision Care Services.....	3
6.c	Chiropractic.....	3
6.d	Other Practitioners	3
	Other Nurse Practitioners and Clinical Nurse Specialists Services	3
	Pharmacists	3
	Clozapine Management	3.1
	Medication Therapy Management Services Performed by a Pharmacist	3.aa
	I Medication Therapy Management Services Performed by a Pharmacist	3.bb
	A Behavioral Treatment Services	3.cc
	B Components of Behavioral Treatment	3.cc
	C Additional Benefit Information.....	3.ee
	D Provider Qualifications and Training.....	3.ee
	Certified Professional Midwife Services	3.ff
7	Home Health Care Services	3.a
7.c	Medical Supplies and Equipment	4
7.d	Physical, Occupational and Speech etc.....	4
8	Private Duty Nursing	4
9	Clinic Services	4
10	Dental Services	4a
11	Physical Therapy and Related Services	4a
12	Prescribed Drugs.....	5
12.a	Prescribed Drugs, continued	5a
	Covered Outpatient Drugs (preprint).....	5c
12.b	Dentures	6
12.c	Prosthetic devices.....	6
12.d	Eyeglasses	6
13.d	Rehabilitative Services.....	7
	Psychosocial Rehabilitation Services	7
	Service Components	7

Screening and Assessment	7
Diagnostic Evaluations	7a
Service Planning	7a
Service Facilitation	7a
Medication Management	7b
Physical Health Monitoring	7b
Peer Support.....	7c
Community Living Functional Restoration	7c
Mental Health Crisis Intervention Services	7d
Community Living Functional Restoration (cont).....	7f
Recovery Management	7f
Psychotherapy	7g
Substance Abuse Counseling.....	7g
Crisis Intervention.....	7g
Assurances	7h
Additional Benefit Information.....	7h
Provider Qualifications	7i
Licensed psychiatrists	7i
Licensed physicians	7j
Licensed physician assistants.....	7L
Licensed psychologists	7L
Licensed nurse practitioners	7m
Licensed advanced practice nurse prescribers	7m
Licensed practical nurses	7n
Licensed registered nurses	7n
Licensed independent clinical social workers.....	7n
Licensed professional counselors	7p
Licensed marriage and family therapists	7q
Licensed occupational therapists	7s
Certified social workers	7s
Certified advance practice social workers	7t
Certified independent social workers.....	7t
Certified alcohol and drug abuse counselors	7u
i For substance abuse counselors-in-training	7u
ii For substance abuse counselors without previous credentialing	7v
iii For substance abuse counselors with previous credentialing	7v
iv For clinical substance abuse counselors	7w
Certified peer specialists	7w
Certified occupational therapy assistants.....	7w
Certified rehabilitation counselors.....	7x
Master’s level professional	7x
Clinical Student/Resident.....	7x
Bachelors level professional	7x
Psychosocial rehabilitation technician.....	7x
Medical Day Treatment – Mental Health Service	8

- 13.d Medical Day Treatment – Mental Health Service, continued.....9
- Outpatient Psychotherapy Services.....9
- 13.d Outpatient Alcohol and Other Drug Abuse Treatment Services10
- Alcohol and Other Drug Abuse Day Treatment11

- 14 Services for Individuals Age 65 – In Institutions for Mental Diseases12
- 17 Nurse Midwife Services.....12
- 18 Hospice Care Services12
- 19 Case Management Services12
- 19.b Special Tuberculosis Related Services 12a
- 20 Extended Services for Pregnant Women13
- 21 Ambulatory Prenatal Care for Pregnant Women14
- 22 Respiratory Care Services.....14
- 23 Pediatric or Family Nurse Practitioner Services.....14
- 24 Any Other Medical Care..... 14a
- a Transportation Services 14a
- b Transportation for School-Based Services..... 14a
- 2 Off-site transportation.....14b
- d Nursing Facility Services for Recipients Under 21 Years of Age15
- e Non-Emergency Out-of-State Treatment.....15
- f Personal Care Services.....15
- HealthCheck (EPSDT) Other Services16
- 1 Mental Health.....16
- 2 Dental16
- 3 Otherwise Non-Covered Over-the-Counter Medications16
- 4 Comprehensive Treatment 16a

DESCRIPTION OF LIMITATIONS

1. Inpatient Hospital Services. Prior authorization is required for services provided outside the state by non-border status providers in non-emergency circumstances, for transplant services and for ventilator dependent services. Other professional services that require prior authorization outside the hospital, often require prior authorization when provided in a hospital.

Other limitations include, but are not limited to: circumstances for private room accommodations; restrictions on non-therapeutic sterilizations; requirements for separate billing of independent professional services; and restrictions to avoid duplicative and unnecessary payments.

- 2.a. Outpatient Hospital Services. Prior authorization restrictions apply to these services as required by the area of service.
- 2.b. Rural Health Clinic Services. Services provided by rural health clinics are subject to the same prior authorization requirements and other limitations as applied to covered services in the Medical Assistance Program.
- 4.a. Skilled Nursing Facility Services. Prior authorization is required for rental or purchase of a specialized wheelchair. Levels of service required are stipulated by the recipient's plan of care, subject to guidelines described in HSS 107.09(3).
- 4.c. Family Planning Services. Sterilization procedures require prior authorization and informed consent as mandated under federal regulations.
5. Physician's Services. The Department imposes some payment and benefit limitations on some specific physician services. Many of these limitations are based on quantity and frequency, diagnoses, provider specialty, or the place the service is provided. In addition, some procedures require prior authorization and/or a second surgical opinion. Examples of physician services in each of these areas are listed below:

Services with Quantity and Frequency Limitations - Services with quantity and frequency limitations include: evaluation and management visits in the office, outpatient clinic and inpatient hospital nursing home; routine foot care; specific injections; weight alteration programs; fetal monitoring; clozapine management, and multiple surgeries performed on the same day.

4.b. EPDST Other Services, continued.

4. School Based Services

School Based Services (SBS) are services that are listed in an eligible student's Individualized Education Program (IEP) that are coverable under one or more of the service categories described in Section 1905(a) of the Social Security Act, and that are necessary to correct or ameliorate defects or physical or mental illnesses or conditions discovered by an EPDST screen.

Service providers shall be licensed under the applicable State practice act or comparable licensing criteria by the State Department of Public Instruction, and shall meet applicable qualifications under 42 CFR Part 440. Identification of defects, illnesses or conditions and services necessary to correct or ameliorate them is done by practitioners qualified to make those determinations within their licensed scope of practice, either as a member of the IEP team or by a qualified practitioner outside the IEP team. Eligible individuals may obtain covered services from any person qualified to perform the services required, who undertakes to provide the services.

Covered services include physical therapy, occupational therapy, and services for individuals with speech, hearing, and language disorders, performed by, or under the direction of, providers who meet the qualifications set forth at 42 CFR 440.110. Covered services also include nursing services coverable under 42 CFR §440.80, and 42 CFR §440.60 ordered by a licensed physician and performed by a registered nurse or licensed practical nurse, nursing services provided on a restorative basis under 42 CFR §440.130 (d), including services delegated in accordance with the Nurse Practice Act to individuals who have received appropriate training from a registered nurse; personal care services (as known as attendant care services) coverable and performed by individuals qualified under 42 CFR §440.167; psychological, counseling, and social work services performed by licensed practitioners within the scope of practice as defined under state law and coverable as medical or other remedial care under 42 CFR §440.60 or rehabilitative services under 42 CFR §440.130. Assessments are covered as necessary to assess or reassess the need for medical services in a child's treatment plan and must be performed by any of the above licensed practitioners within the scope of practice.

The state has established controls to prevent duplicate services and assure continuity of care when a child receives services from both SBS providers and Medicaid Health Maintenance Organizations (HMOs) or fee-for-service providers. HMOs are responsible for managing medical services for recipients receiving SBS when recipients are in HMOs. SBS and HMO providers are required to sign Memorandums of Understanding setting standards, policies and procedures to avoid duplication of services and coordinate care. Where a child served within the Medicaid fee-for-service system receives SBS, SBS providers are required to document the regular contracts between schools and community providers as appropriate for each child but at least annually. Medicaid monitors service coordination and ensures duplicate services are not provided through prior authorization.

Physical therapy can be provided by physical therapy assistants, aides, and interns under the direction of a qualified physical therapist. Occupational therapy can be provided by occupational therapy assistants, aides, and interns under the direction of a qualified occupational therapist. Speech language services for individuals with speech, hearing, and language disorders can be provided by a speech language pathology assistant and interns under the direction of a qualified speech language pathologist. Audiology can be provided by audiology assistants, interns, and interpreters under the direction of a qualified audiologist.

When services are provided under the direction of a licensed therapist, the licensed must:

- see the beneficiary at the beginning of and periodically during treatment;
- is familiar with the treatment plan as recommended by the referring physician or other licensed practitioner of the healing arts under State law;
- has continued involvement in the care provided, and reviews the need for continued services throughout the treatment;
- assume professional responsibility for the services provided under his/her direction and monitors the need for continued services;
- spend as much time as necessary directly supervising services to ensure beneficiaries are receiving services in a safe and efficient manner in accordance with accepted standards of practice;
- ensure that individuals working under his/her direction have contact information to permit them direct contact with the supervising therapist as necessary during the course of treatment; and
- maintain documentation supporting the supervision of services and ongoing involvement in the treatment.

Services with Diagnosis Limitations - Services with diagnosis limitations include: certain injections, routine foot care and application of Unna boots.

Services with Provider Specialty Limitations - Provider specialty limitations are imposed on physicians providing obstetric and pediatric services, and those performing evoked potentials testing.

Services with Place of Service Limitations - Place of service limitations are imposed on medication management in the home and on critical or prolonged care provided in the emergency department.

Services that Require Prior Authorization - To insure that a procedure is medically necessary, to demonstrate that the procedure is not primarily cosmetic or for the convenience of the recipient, to assure that the procedure is not experimental in nature, and to allow the Department to determine the treatment is the most cost-effective available, the provider must obtain prior authorization for the following categories of procedures:

- 1) Surgical or other medical procedures of questionable medical necessity but deemed by the Department to be essential to correct conditions that cause significant impairment to the recipient's interpersonal adjustments or employability;
- 2) Surgical procedures or medical procedures that the Department deems redundant, outdated or marginally effective;
- 3) Transplants;
- 4) Sterilizations (to conform with federal and state regulations and limitations);
- 5) Temporomandibular surgery.

Second Surgical Opinion - Elective surgeries that require the recipient obtain a second surgical opinion include but are not limited to: cataract extraction; cholecystectomy; hemorrhoidectomy; diagnostic D & C procedures; inguinal hernia repair; hysterectomy; joint replacement, hip or knee; tonsillectomy/adenoidectomy; varicose vein surgery.

- 5.b. Dental Services. The same prior authorization and other limitations required under Item
Eff. #10 and 12.b. apply.
10-1-91
- 6.a. Podiatry Services. Prior authorization is required for electric bone stimulation.
Eff. Maintenance care is limited to once per 61 day period under certain conditions. For other
7-1-90 service limitations, see. s. OHS 107.14(3), Wis. Adm. Code. All orthopedic and orthotic
services, including repairs, orthopedic and corrective shoes and supportive devices,
services correcting “flat feet,” and treatment of subluxation of the foot are not covered.
- 6.b. Vision Care Services. (Optometry) Prior authorization is required for certain types of
Eff. lenses and frames, antiseikonic services, prisms crutch services, low vision services.
1-1-93 Certain ophthalmological services and vision training. Frames, lenses and replacement
parts must be obtained through the volume purchase plan provider, unless prior
authorized. Anti-glare coating, spare eyeglasses and sunglasses, and services provided
primarily for convenience or cosmetic reasons are not covered.
- 6.c. Chiropractic. Prior authorization is required for services beyond the initial visit and 20
Eff. spinal manipulations per spell of illness. Consultations are not covered.
3-1-86
- 6.d. Other Practitioners
Eff. Services of licensed pharmacists, pharmacy interns and pharmacy technicians acting
4-1-93 within the scope of their practice under state law to administer COVID-19 vaccines.
Pharmacy interns or pharmacy technicians are working under the supervision of a
licensed pharmacist.

Pharmacies are qualified providers of COVID-19 vaccinations per the HHS COVID-19
PREP Act Declaration and authorizations.

Other Nurse Practitioners and Clinical Nurse Specialist Services.

Included are other primary care nurse practitioner and clinical nurse specialist services
not covered under item #23. Services are subject to limitations imposed on specific
disciplines within the scope of practice of the nurse. These services include medical
services delegated by a licensed physician through protocols, pursuant to the
requirements set forth in the Wisconsin Nursing Act and the guidelines set forth by the
medical examining board and the board of nursing. Other practitioner services are
subject to the same limitations imposed on physician services under item #5 to enable
the Department to monitor and regulate the following: medical necessity, cost, frequency
and place of service.

Medication management Includes in-home administration of medications other than
those given intravenously, prefilling syringes for self injection when the recipient is not
capable, setting up medications for self-administration, and programming dispensers.
Instructing the recipient may be covered when provided in conjunction with these
activities but not covered if it is the only activity.

Pharmacists.

Licensed pharmacists may administer vaccines, including the H1N1 and COVID-19
vaccines, as authorized and permitted by the State of Wisconsin Pharmacy Examining
Board, within their scope of practice and to the extent permitted by Wisconsin law.

Eff. Clozapine Management. Clozapine Management is a covered service
7-1-95 when all of the following conditions are met:

- a physician has prescribed clozapine,
- the recipient is currently taking clozapine or has taken it within four weeks,
- the dispensing pharmacy has received prior authorization for clozapine,
- the provider of clozapine management has received prior authorization for that service.

Providers of clozapine management work under the general supervision of a physician or a pharmacist and include Medicaid-certified, licensed pharmacies and Community Support Programs (CSP). Qualified pharmacy staff include pharmacists, nurses, pharmacy technicians and others with equivalent training, knowledge and experience. Qualified CSP professional staff are designated in the approved CSP treatment plan component regarding clozapine management services.

Components of clozapine management include the following services as appropriate:

- a. Ensuring the recipient has the required weekly white blood count testing. The provider may draw the blood or transport the recipient to a clinic, hospital, or laboratory to have the blood drawn, if necessary. To perform this service, the provider may travel, if necessary, to the recipient's residence or other places in the community where the recipient is available.
- b. Ensuring the blood test results are reported in a timely fashion to the pharmacy dispensing the recipient's clozapine.
- c. Ensuring abnormal blood test results are reported to the physician who prescribed the recipient's clozapine.
- d. Ensuring the recipient receives medications as scheduled, ensuring the recipient stops taking medication when the blood test is abnormal, if so ordered by the physician, and receives any physician-prescribed follow-up care to ensure that the recipient's physical and mental well-being are maintained.
- e. Making arrangements for the transition and coordination of the use of clozapine and clozapine management services between different care locations.
- f. Maintaining appropriate records.

TN #95-027
Supersedes
New

Approval Date 5/10/96

Effective Date 7-1-95

State: Wisconsin

6.d. Other practitioners, continued

Medication Therapy Management Services Performed by a Pharmacist

The Medication Therapy Management (MTM) benefit consists of services that are provided by qualified, licensed pharmacists to members in order to optimize the therapeutic outcomes of a recipient's medications and reduce costs. These services are delivered in a face-to-face setting. This benefit is voluntary and is available for members in Wisconsin Medicaid, BadgerCare Plus, and SeniorCare programs.

Wisconsin will reimburse enrolled pharmacies for Comprehensive Medication Review and Assessment (CMR/A) – These are comprehensive interventions between providers and members. They involve an in-depth, interactive review of the member's medication regimen, health history and lifestyle.

1. A member may be eligible for this service if the member meets at least one of the following criteria:
 - Is taking four or more medications used to treat or prevent two or more chronic conditions.
 - Has diabetes.
 - Has recently been discharged from the hospital or a long term care setting.
 - Has experienced health literacy issues.
 - Was referred by a prescriber due to issues that are impacting the member's health.
 - Meets other criteria as defined by the Department.
2. The provider must be certified by a Department-approved certification program before providing a CMR/A.
3. Providers must have a private or semi-private area in which to conduct the CMR/A.
4. One initial Comprehensive Medication Review and Assessment (CMR/A) and three follow-up assessments are reimbursable per member, per rolling year.

Providers may receive Department approval to exceed annual limits for the CMR/As for children who are EPSDT-eligible and for members who demonstrate medical need.

State: Wisconsin

6.d. Other Practitioners, continues

A. Behavioral Treatment Services provided by licensed practitioners

Licensed practitioners furnish treatment services for autism spectrum disorder (ASD) and other related conditions that cause persistent, clinically significant impairment in social communication, behavioral interaction, and/or other areas of functional development that manifest as atypical behavior patterns that interfere with member's safety and effective functioning in the home and community. Treatment is directly furnished by a licensed practitioner within their scope of practice under state law by a non-licensed practitioner under the supervision of a licensed practitioner within his or her scope of practice as allowed under state law. Services are authorized in home, community, or provider's office.

B. Components of Behavioral Treatment provided by licensed practitioners

1. Assessment

Assessment services are covered for the purpose of treatment planning for an individual diagnosed with a condition for which behavioral treatment services have been proven effective. Both initial and follow-up assessments are covered.

Initial assessments must be performed by a licensed professional within their scope of practice. Allowable providers are the behavioral treatment licensed supervisor and the focused treatment licensed supervisor, both of which are described in "Section D – Provider Qualifications.":

Follow-up assessments may be performed by a licensed professional by a treatment therapist under the direction of a licensed professional. Allowable providers are the behavioral treatment licensed supervisor, the focused treatment licensed supervisor, the behavioral treatment therapist, and the focused treatment therapist, all of which are described in "Section D – Provider Qualifications."

State: Wisconsin

6.d. Other Practitioners, continued

B. Components of Behavioral Treatment provided by licensed practitioners, continued

2. Comprehensive Treatment (EPSDT only)

Comprehensive treatment targets acquisition of a broad base of skills with an emphasis on the primary deficits of autism spectrum disorders or other related conditions (communicative, social, emotional, and adaptive functioning). It entails a high degree of intensity. In addition, caregiver training is an essential feature of this approach.

ForwardHealth reimburses the following services:

- a. Comprehensive adaptive behavior treatment by protocol
- b. Comprehensive adaptive behavior treatment with protocol modification
- c. Comprehensive treatment family adaptive treatment guidance
- d. Group adaptive behavior treatment by protocol
- e. Group adaptive behavior treatment with protocol modification

Comprehensive treatment may be performed by licensed professionals or by treatment therapists or treatment technicians under the direction of a licensed professional. Allowable providers are the behavioral treatment licensed supervisor, the behavioral treatment therapist, and the behavior treatment technician. Allowable providers are described in greater detail in "Section – Provider Qualifications.:

3. Focused Treatment

The goals of focused treatment are the reduction of specific challenging behaviors, with development of replacement behaviors, as well as discrete skill acquisition. ForwardHealth reimburses for the following services:

- a. Focused adaptive behavior by protocol
- b. Focused adaptive behavior treatment with protocol modification
- c. Focused treatment family adaptive behavior treatment guidance
- d. Group adaptive behavior treatment by protocol
- e. Group adaptive behavior treatment with protocol modification

Focused treatment may be performed by licensed professionals or by treatment therapists under the direction of a licensed professional. Allowable providers are the focused treatment licensed supervisor, the behavioral treatment licensed supervisor, the behavioral treatment therapists, the focused treatment therapist, and the behavioral treatment technician. Allowable providers are described in greater detail in "Section D – Provider Qualifications."

State: Wisconsin

6.d. Other Practitioners, continued

C. Additional Benefit Information

1. Prior Authorization

All behavioral treatment comprehensive treatment or focused treatment services provided directly by or under the supervision of a licensed practitioner must be authorized by the Department in advance of their provision to the member.

Behavioral identification assessment and follow-up assessment services require prior authorization by the Department only in certain circumstances, as outlined in the ForwardHealth provider policy manual.

2. Limits

Focused or comprehensive treatment services must be medically necessary for the member as determined by ForwardHealth through the prior authorization process.

D. Provider Qualification and Training

Wisconsin requires all providers who provide behavioral treatment services to Medicaid members to enroll as a behavioral treatment provider. Only licensed practitioners may enroll as a billing provider for behavioral treatment services. Providers should enroll in the specialty listed below that best matches their level of training and experience.

Wisconsin's Scope of Practice Act for licensed practitioners allows licensed practitioners to supervise unlicensed practitioners who furnish behavioral treatment services. In addition, Wisconsin's Scope of Practice Act requires licensed practitioners to assume professional responsibility for both the patient and the behavioral treatment service(s) furnished by unlicensed practitioners under his or her supervision. Licensed providers are able to furnish services being provided.

1. Behavioral Treatment Licensed Supervisor – billing and rendering provider.
2. Behavioral Treatment Therapist – rendering provider only.
3. Behavioral Treatment Technician – rendering provider only.
4. Focused Treatment Licensed Supervisor – billing and rendering provider.
5. Focused Treatment Therapist – rendering provider only.

State: Wisconsin

6.d. Other Practitioners, continued

Certified Professional Midwife services.

Certified professional midwife services are a covered service when provided by a qualified provider acting within their scope of practice in accordance with state law to engage in the practice of midwifery, "Practice of midwifery" means providing maternity care during the antepartum, intrapartum, and postpartum periods.

Other Practitioners, continued

Treat-in-Place/No Transport services provided by licensed EMS personnel including Emergency Medical Responders (EMRs), Emergency Medical Technicians (EMTs), and Paramedics.

State: Wisconsin

7. Home Health Care Services. Covered services include: skilled nursing services, home health aide services, medical supplies, equipment and appliances, and therapy and speech pathology services which the agency is certified to provide. Home health services may take place in any setting in which normal life activities take place.

Similar to Medicare, a visit may be of any duration, with prior authorization required after 30 visits of any combination of RN, LPN, home health aide or therapy services, including medication management. Skilled nursing and therapy services are available for recipients who require less than eight hours of a day with home health aide services provided up to 24 hours a day as the recipient's condition requires. Various limitations apply based on appropriate nursing practices, state licensure, and Medicare/Medicaid certification requirements.

Medication management includes administration of medications other than those given intravenously, prefilling syringes for self-injection when the recipient is not capable, setting up medications for self-administration, and programming dispensers. Instructing the recipient may be covered when provided in conjunction with these activities but not covered if it is the only activity.

State: Wisconsin

7.c. Medical Supplies and Equipment.

The Department requires prior authorization or imposes payment and benefit limitations for the repair, modification, rental, or purchase of most medical supplies and equipment to enable the Department to monitor and regulate the following: cost, frequency, place where the recipient receives the service, and recipient's medical diagnosis or fundamental conditions under which the items will be reimbursed. These medical supplies and equipment include, but are not limited to: durable medical equipment, disposable supplies, hearing aid and related materials, and orthoses.

- i. Disposable Medical Supplies are health care related items with limited life expectancy that are consumable or disposable, or cannot withstand repeated use by more than one individual, and are required to address an individual medical disability, illness or injury.
- ii. Equipment and appliances are items that are primarily and customarily used to serve a medical purpose, generally are not useful to an individual in the absence of a disability, illness or injury, can withstand repeated use, and can be reusable or removable. State Medicaid coverage of equipment and appliances is not restricted to the items covered as durable medical equipment in the Medicare program.

The following are not covered:

Items that are not primarily medical in nature, are not proven to be therapeutically effective, or do not contribute to the improvement of a recipient's medical or functional condition; and items or features that are primarily for a recipient's comfort and convenience.

Effective 1-1-93

7.d. Physical, Occupational and Speech Therapy and Audiology Provided by a Medical Rehabilitation Facility.

The prior authorization requirements and other limitations are described below in item #11.

Effective 3-1-86

8. Private Duty Nursing.

Prior authorization is required for all private duty nursing services. These services may be provided only if the recipient requires 8 or more hours of skilled nursing services a day.

Effective 1-1-92

9. Clinic Services.

All prior authorization requirements for services apply as appropriate. Second surgical opinions also apply (see #5 above).

Effective 3-1-86

State: Wisconsin

10. Dental Services. Dental services are limited to the basic services within each of the following categories: diagnostic services, preventive services, restorative services, endodontic services, periodontic services, fixed and removable prosthodontics, oral and maxillofacial services, and emergency treatment of dental pain. The following are examples of services not covered: dental implants and transplants; services for cosmetic purposes; overlay and duplicate dentures; precious metal crowns; professional visits; drug dispensing; adjunctive periodontal services; alveoplasty and stomoplasty; and non-surgical temporomandibular joint therapy. Several services are provided only in specified circumstances or as referred through a HealthCheck (EPSDT) screen. For other limitations and a listing of those services requiring prior authorization, see the WMAP Dental Provider Handbook, Part B.
11. Physical Therapy and Related Services. Prior authorization is required for physical and occupational therapies, and speech language pathology after 35 treatment days per spell of illness. A spell of illness means a condition characterized by a demonstrated loss of functional ability to perform daily living skills, caused by a new disease, injury or medical condition or by an increase in the severity of a pre-existing medical condition. Services for recipients who are hospital inpatients or receiving therapy through a home health agency are not subject to this requirement. For audiology, prior authorization is required for speech and aural rehabilitation.

Physical therapists provide physical therapy services, occupational therapists provide occupational therapy services, and speech-language pathologists provide speech, hearing and language services. Physical therapists are certified under s. DHS 105.27 and meet the requirements of 42 CFR 440.110 (a). Occupational therapists are certified under s. DHS 105.28 and meet the requirements of 42 CFR 440.110 (b). Speech language pathologists are certified under s. DHS 105.30 and meet the requirements of 42 CFR 440.110 (c). Those who provide services under the direction of the listed therapists are physical therapist assistants, who are certified providers under ch. DHS 105.27, and occupational therapy assistants, who are certified providers under s. DHS 105.28.

12. Prescribed Drugs.

1. Drugs and drug products covered by MA include legend and non-legend drugs and supplies listed in the Wisconsin Medicaid drug index, which are prescribed by a licensed physician, nurse prescriber, dentist, podiatrist, or optometrist or when a physician delegates prescription of drugs to a nurse practitioner or to a physician's assistant.
2. Drugs excluded from coverage include drugs determined to be "less than effective by the FDA, drugs not covered by a federal rebate agreement, experimental drugs or other drugs that have no medically accepted indications, and other items as enumerated in Wisconsin Administrative Code, such as personal hygiene items, cosmetic items, and common medicine chest items.
3. To be a covered service, an over-the-counter drug shall have a signed federal rebate agreement and be listed in the Wisconsin Medicaid drug index. General categories of OTC drugs that are covered include the following: antacids, analgesics, insulins, contraceptives, cough preparations, ophthalmic lubricants, iron supplements for pregnant women, and other, medically necessary, cost-effective drug products, including some non-legend products that previously had legend drug status.

Effective 08/15/2003

12.a. Prescribed drugs, continued.

Prior Authorization

1. Prescription drugs may be subject to prior authorization by DHFS to ensure that drugs are prescribed and dispensed appropriately.
2. DHFS determines which prescription drugs may require prior authorization by reviewing the drug(s) for the following: safety; potential for abuse or misuse; narrow therapeutic index; and high cost when less expensive therapeutically equivalent alternatives are available.
3. DHFS will convene a Prescription Drug Prior Authorization Committee comprised of at least two physicians, two pharmacists, and one advocate for Medicaid recipients to review the pertinent scientific literature and make prior authorization recommendations to the Department.
4. As enumerated in Wisconsin Administrative Code, all Schedule III and IV stimulant drugs as listed in the Wisconsin Medicaid Drug Index; enteral and parenteral nutrition products; fertility drugs used for treatment of a condition not related to fertility; impotence drugs used for treatment of a condition not related to impotence; drugs that have been demonstrated to entail substantial cost or utilization problems for the MA program; and drugs produced by a manufacturer that has not signed a federal rebate agreement but which are medically appropriate and cost effective treatment for a recipient's condition as certified by the prescribing provider are subject to prior authorization.
5. To provide economies and efficiencies in the Medicaid program, the state applies the same prior authorization requirements and supplemental rebate provisions utilized in the Medicaid program to its state-sponsored portion of SeniorCare.

State Wisconsin

12.a. Prescribed drugs, continued.

6. Prior authorization programs for covered outpatient drugs provide for a response within 24 hours of a request for prior authorization and for the dispensing of a 72-hour supply of medications in emergency situations.
7. A drug use review program, including prospective and retrospective drug utilization review, has been implemented, in compliance with federal law.
8. Claims management is electronic, in compliance with federal law.
9. The state is in compliance with section 1927 of the Social Security Act. The state will cover drugs of manufacturers participating in the federal rebate program. The state is in compliance with reporting requirements for utilization and restrictions to coverage. Pharmaceutical manufacturers may audit utilization data. The unit rebate amount is confidential and may not be disclosed for purposes other than rebate invoicing and verification.
10. The state will participate in a multi-state pooling program that will negotiate supplemental rebates in addition to federal rebates provided for in Title XIX. This multi-state pooling program is known as the Optimal PDL Solution (TOP\$). TOP\$ rebate agreements will be separate from the federal rebates. TOP\$ supplemental rebates received by the state in excess of those required under the federal drug rebate agreement will be shared with the federal government on the same percentage basis as applied under the federal rebate agreement.
11. A TOP\$ rebate agreement for drugs provided to the Medicaid program, effective 10/01/2013, has been authorized by CMS.
12. Pursuant to 42 USC 1396r-8, the state is establishing a preferred drug list with prior authorization requirements for drugs not included on the preferred drug list.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State Agency Wisconsin

MEDICAID PROGRAM: REQUIREMENTS RELATING TO
COVERED OUTPATIENT DRUGS FOR THE CATEGORICALLY NEEDY

Effective January 1, 2006, the Medicaid agency will not cover any Part D drug for full-benefit dual eligible individuals who are entitled to receive Medicare benefits under Part A or Part B.

The Medicaid agency provides coverage for the following excluded or otherwise restricted drugs or classes of drugs, or their medical uses to all Medicaid recipients, including full benefit dual eligible beneficiaries under the Medicare Prescription Drug Benefit –Part D.

The following excluded drugs are covered:

- (a) agents when used for weight loss
Meredia, Didrex, Phentermine, Ionamin, Diethylpropion, Bontril, and Xenical. Coverage is for both the brand name and generic formulations of the aforementioned weight loss agents.
- (b) agents when used to promote fertility (see specific drug categories below)
- (c) agents when used for cosmetic purposes or hair growth (see specific drug categories below)
- (d) agents when used for the symptomatic relief cough and colds
- (e) prescription vitamins and mineral products, except prenatal vitamins and fluoride
- (f) nonprescription drugs
Prilosec OTC (coverage terminates 4/1/06)
Antacids, analgesics, contraceptives, cough preparations, antihistamines, ophthalmic lubricants, iron supplements for pregnant women, and other, medically necessary, cost-effective drug products, including some non-legend products that previously had legend drug status.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency Wisconsin

MEDICAID PROGRAM: REQUIREMENTS RELATING TO PAYMENT FOR COVERED
OUTPATIENT DRUGS FOR THE MEDICALLY NEEDY

- (g) covered outpatient drugs which the manufacturer seeks to require as a condition of sale that associated tests or monitoring services be purchased exclusively from the manufacturer or its designee (see specific drug categories below)

State: Wisconsin

- 12.b. Dentures. Prior authorization is required.
- 12.c. Prosthetic devices. Prior authorization is required for most prostheses, hearing aids, and other medical equipment in the Wisconsin Durable Medical Equipment and Supplies indices, except for certain ophthalmological prostheses. Prior authorization also is required for most items not in the indices.
- 12.d. Eyeglasses. When frames and lenses services are provided by the same provider, prior authorization is required to exceed the following limitations in a 12 month period: one original pair; one unchanged prescription replacement pair; and one replacement pair with a documented changed prescription meeting Department criteria. Tinted lenses, occupational frames, certain glass and lens types, and frames and other vision materials not obtained through the volume purchase plan also require prior authorization. Anti-glare coating, spare eyeglasses and sunglasses, and services provided primarily for convenience or cosmetic reasons are not covered.

State: Wisconsin

13.d. Rehabilitative ServicesPsychosocial Rehabilitation Services:

The rehabilitative service (or services) described below is a:

- Program (encompasses several rehabilitative services)

Identify and describe the program and each service component of the program.

- Psychosocial Rehabilitation Services Program

Description: Psychosocial rehabilitation services are provided to members to better manage the symptoms of their behavioral health issues, to increase their independence, to achieve effective levels of functioning in the community and at home, and to reduce the incidence and duration of institutional care members might otherwise need. Psychosocial rehabilitation services are recommended by a physician or other licensed practitioner of the healing arts within the scope of his or her practice under State law. Psychosocial rehabilitation services are provided in an individual, family, or group setting within the community, including a member's home.

Service Components:

- **Screening and Assessment**

Describe: Screening and assessment services include completion of initial screens and assessments, comprehensive assessments, and ongoing screens or assessments. These screens and assessments are used to determine member need for psychosocial rehabilitation services and assess treatment needs that will be addressed through the development of an appropriate treatment plan. Criteria for screens and assessments are appropriate to the member's age and presenting condition(s). The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:• **Diagnostic Evaluations**

Describe: Diagnostic evaluations are exams necessary to appropriately diagnose a member's mental health disorder, substance use disorder, or related health condition. Diagnostic evaluations do not include central nervous system assessments or evaluations for autism, developmental disabilities, or learning disabilities. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Master's level professional, Clinical Student/Resident

• **Service Planning**

Describe: Service planning includes development and update of a written plan detailing psychosocial rehabilitation services that will be provided or arranged for the member. Service planning is a person-centered planning process conducted as a collaboration between the healthcare practitioner and the member. Service planning actively engages and empowers the member, ensuring that the plan reflects the member's needs and preferences. Service planning is culturally and age appropriate. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process. The service plan must be updated at least every six months.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

• **Service Facilitation**

Describe: Service facilitation includes coordination and monitoring activities to ensure the member receives those services identified in the service plan and has access to other necessary services. Service facilitation is culturally and age appropriate. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

- **Medication Management**

Describe: Medication management includes identification of target symptoms, prescription of medication to alleviate identified symptoms, administration of medication, medication checks and evaluations of the medication regimen, monitoring symptoms, supporting the member and the member's family in establishing a medication regime, and educating the member and the member's family regarding their medications. Medication management includes services related to both medical and psychotropic medications. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

- **Physical Health Monitoring**

Describe: Physical health monitoring includes evaluations of the impact a member's mental health or substance abuse issues have on his or her physical health; identification of medical conditions present; training the member and the member's family to identify, monitor, and manage physical health conditions in collaboration with primary care providers; and supporting access to treatment for medical conditions. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

- **Peer Support**

Describe: Peer support services link members with peer specialists who serve as advocates, mentors, facilitators, and role models. Peer support services build formal and informal supports to instill confidence, provide assistance in developing goals, and rebuild the abilities of members to meet their chosen goals. Peer specialists demonstrate techniques in recovery and provide ongoing recovery and resiliency support. Peer specialists attend treatment team and crisis plan development meetings, promote members' use of self-directed recovery tools, and inform members about community and natural supports and how to utilize these in the recovery process. Peer specialists deliver peer support services under the direction of a qualified health care practitioner. The peer support services are identified in a person-centered assessment and are specified in the member's service plan. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Certified Peer Specialists

- **Community Living Functional Restoration**

Describe: Community Living Functional Restoration addresses specific functional needs that result from the member's mental health or substance abuse disorder and impede the member's ability to live independently in the community. Functional needs are identified in a person-centered assessment and services to address them are specified in the member's service plan. Service providers do not complete tasks necessary for successful community living *for* the member; rather, service providers assist the member in becoming more independent in accomplishing these tasks. Services are provided using motivational, psychoeducational, and cognitive-behavioral strategies to address mental health and/or substance use disorders.

Eff. Mental Health Crisis Intervention Services

10-1-96

13.d Mental Health Crisis Intervention (MHCI) services are a coordinated system of mental health services that provides an immediate response to assist a person experiencing a mental health crisis. "Crisis" means a situation caused by an individual's apparent mental disorder:

- that results in a high level of stress or anxiety for the individual, for the persons providing care for the individual or for the public, and
- that cannot be resolved by the available coping methods of the individual or by the efforts of those providing ordinary care or support for the individual.

An initial assessment and referral to services, if appropriate, either over the telephone or face-to-face is available to any recipient contacting a MHCI provider. Additional crisis linkage, follow-up and stabilization services are available only to recipients determined to be in crisis. Services are described in a response plan or a crisis plan for individuals known to require periodic crisis intervention, and are approved by a psychiatrist or a licensed psychologist. Interventions are designed to relieve the recipient's immediate distress, reduce the risk of escalation, reduce the risk of physical harm to the recipient or others, resolve the crisis and improve individual and family coping skills, coordinate the involvement of other resources needed to respond to the crisis and assist the recipient to make the transition to the least restrictive level of care required. Services may be provided in the office setting, over the telephone, in the home or in the community. Services to individuals residing in a hospital or nursing facility are limited to development of the response plan or crisis plan and those services required to assist the recipient to transition to the least restrictive level of care required, but may not duplicate the hospital's or nursing facility's discharge planning activities. Services may be provided directly to the recipient or to others involved with the recipient when such intervention is required to address the recipient's crisis. Services for individuals receiving Medicaid Community Support Program (CSP) services are allowed when:

- The crisis intervention program has a formal arrangement with the CSP to provide crisis services to CSP enrollees.
- The crisis intervention services are delivered according to a crisis plan developed by the crisis intervention program and the CSP.
- The crisis intervention services do not duplicate CSP services.

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Supersedes
New

Approval Date 3/13/97

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Substitute page reserved 3-7-97

Supplement 1 to Attachment 3.1-B
State Wisconsin

While MHCI services are available in each county, agencies providing Medicaid MHCI services must be certified by the Department's Division of Supportive Living certification standards which include staff qualifications, supervision requirements, service standards and requirements for a coordinated emergency mental health services plan. Services must be available 24 hours a day, 7 days a week.

Services billed and reimbursed as MHCI services may not also be billed and reimbursed as another MA service, such as hospital outpatient services, community support program services, day treatment services, outpatient psychotherapy services or case management services. Room and board costs are not covered under MHCI services. Services that are primarily social or recreational are not covered under MHCI services.

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13.d Rehabilitative Services, continued.**Enhanced Mobile Crisis Services**

Enhanced mobile crisis services are specialized mental health crisis intervention services that provide rapid in-person community-based mobile crisis intervention by a team of at least two Medicaid providers trained in trauma-informed care practices, de-escalation strategies and harm reduction techniques. Enhanced mobile crisis services include individual assessment, de-escalation, and crisis resolution. Enhanced mobile crisis services may also include follow up interventions for a period up to 72 hours after the initial response, including additional mobile crisis intervention and referral to or arrangement for any additional behavioral health services which are necessary to reduce symptoms and connect the member to ongoing supports and services. All services are provided outside of a hospital, psychiatric residential treatment facility, or nursing facility. Enhanced mobile crisis services are available to members 24 hours a day, 7 days a week, every day of the year.

Services billed and reimbursed as enhanced mobile crisis services may not also be billed and reimbursed as another mental health crisis intervention service. Wisconsin will only claim increased FMAP for mobile crisis services that meet the requirements as described in section 1947(b) and 1947 (d)(2).

Allowable Practitioners

The enhanced mobile crisis team must include one behavioral health professional able to conduct an assessment within their scope of practice under state law. At least one practitioner must deliver services in-person. Additional practitioners can provide services in-person or via telehealth.

Practitioners eligible to provide enhanced mobile crisis services, include: Licensed psychiatrists, licensed physicians, licensed physician assistants, licensed psychologists, licensed nurse practitioners, licensed advanced practice nurse prescribers, licensed practical nurses, licensed registered nurses, licensed independent clinical social workers, licensed professional counselors, licensed marriage and family therapists, licensed occupational therapists, certified social workers, certified advance practice social workers, certified independent social workers, certified alcohol and drug abuse counselors, certified occupational therapy assistants, certified rehabilitation counselors, certified peer specialists, Master's level professionals, clinical student/resident, Bachelor's level professional, psychosocial rehabilitation technician / paraprofessionals, certified parent peer specialist, recovery coaches, other paraprofessionals, licensed emergency medical services professionals, certified emergency medical services professionals

- Licensed emergency medical services professionals shall be licensed in the state of Wisconsin and must complete all required training for mobile crisis intervention practitioners.
- Certified emergency medical services professionals shall be certified in the state of Wisconsin and must complete all required training for mobile crisis intervention practitioners.

For all other allowable behavioral health practitioners, refer to Attachment 3.1-B, section 13.d, page 7i thru 7x, for provider qualifications.

State: Wisconsin

13.d. Rehabilitative Services, continued.**Psychosocial Rehabilitation Services, continued:**

Services provided to minors focus on restoring integration and interaction with the minor's family, school, community, and other social networks. Services include assisting the minor's family to actively restore the minor's ability to live in the community through the management of mental health or substance use disorders. Services that are designed to assist the family must be directly related to the assessed needs of the minor.

The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

- **Recovery Management**

Describe: Recovery management services include psychoeducation, behavioral tailoring, development of a recovery action plan, and recovery and/or resilience training. Services focus on improving the member's engagement in treatment and management of their recovery progress. Services are provided using motivational, psychoeducational, and cognitive-behavioral strategies. Services can be provided with a mental health or substance abuse focus. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed physician assistants, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed practical nurses, Licensed registered nurses, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Licensed occupational therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified alcohol and drug abuse counselors, Certified occupational therapy assistants, Certified rehabilitation counselors, Master's level professional, Clinical Student/Resident, Bachelors level professional, Psychosocial rehabilitation technician

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:• **Psychotherapy**

Describe: Psychotherapy includes individual and family psychotherapy to treat an individual who is mentally ill or has medically significant emotional or social dysfunctions. The treatment is a planned and structured program based on information from a differential diagnostic examination and directed at the accomplishment of specified goals. The treatment goals may include removing, modifying, or retarding existing symptoms, mediating disturbed patterns of behavior, and promoting positive personal growth and development by enhancing the ability to adapt and cope with internal and external stresses. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed psychologists, Licensed nurse practitioners, Licensed advanced practice nurse prescribers, Licensed independent clinical social workers, Licensed professional counselors, Licensed marriage and family therapists, Certified social workers, Certified advance practice social workers, Certified independent social workers, Clinical Student/Residents

• **Substance Abuse Counseling**

Describe: Substance abuse counseling includes individual substance abuse counseling and intervention, family counseling, and group counseling. Services are provided to ameliorate negative symptoms from substance abuse and to restore effective function in persons with substance abuse dependency or addiction. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed physicians, Licensed psychologists, Certified alcohol and drug abuse counselors, Clinical Student/Resident

• **Crisis Intervention**

Describe: Crisis intervention includes intervention by psychosocial rehabilitation staff to assess and manage a member crisis and prevent hospitalization. The amount and duration of this service is determined on a case by case basis through the person-centered assessment and planning process.

Allowable Practitioners: Licensed Psychiatrists, Licensed psychologists, Licensed registered nurses, Licensed independent clinical social workers, Certified social workers, Certified advance practice social workers, Certified independent social workers, Certified rehabilitation counselors, Bachelors level professional, Psychosocial rehabilitation technician

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:**Assurances**

- The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of, the Medicaid eligible individual in accordance with section 1902(a)(10)(A)(i) of the Act.
- The State assures that rehabilitative services do not include and FFP is not available for any of the following in accordance with section 1905(a)(13) of the Act.
 - a. educational, vocational and job training services;
 - b. room and board;
 - c. habilitation services;
 - d. services to inmates in public institutions as defined in 42 CFR §435.1010;
 - e. services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
 - f. recreational and social activities; and
 - g. services that must be covered elsewhere in the state Medicaid plan.

Additional Benefit Information

- Benefits or Services are provided with limitations on amount, scope or duration or with authorization requirements.

Member Eligibility:

A member who is eligible for psychosocial rehabilitation services has a need for comprehensive behavioral health services beyond what is offered by outpatient behavioral health services. Eligible members are impaired in the basic areas of everyday functioning and may have varying degrees of need and acuity throughout their recovery. All members must be assessed by the psychosocial rehabilitation program to determine their needs.

Authorization:

The psychosocial rehabilitation program must develop a service plan for each member that is updated as needed and at least every six months. The member will only receive psychosocial rehabilitation services identified in their individualized service plan.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:**Provider Qualifications**

Psychosocial rehabilitation services are provided by a psychosocial rehabilitation program. A psychosocial rehabilitation program is an entity that employs licensed and non-licensed health professionals. Services are provided by or overseen by a licensed professional within the scope of his or her practice under state law. All psychosocial rehabilitation programs must be certified by Wisconsin's State Medicaid Agency and enrolled as a Medicaid provider in Wisconsin.

Individual practitioners are not eligible for direct reimbursement of psychosocial rehabilitation services. These practitioners must act as staff within a psychosocial rehabilitation program.

Practitioners acting as staff for a psychosocial rehabilitation program include:

- Licensed psychiatrists – Psychiatrists shall be licensed in Wisconsin to practice medicine and surgery and shall have completed 3 years of residency training in psychiatry in a program approved by the American Medical Association or the Accreditation Council for Graduate Medical Education. The above licensure requires:
 - i. Verified documentary evidence of graduation from a medical or osteopathic school approved by the Medical Examining Board. The board recognizes as approved those medical or osteopathic schools recognized and approved at the time of the applicant's graduation therefrom by the American osteopathic association, or the liaison committee on medical education, or successors. If an applicant is not a graduate of a medical school approved by the board, but is a graduate of a medical school recognized and listed as such by the world health organization of the united nations, such applicant shall submit verified documentary evidence of graduation from such school and also verified documentary evidence of having passed the examinations conducted by the educational council for foreign medical graduates or successors, and shall also present for the board's inspection the originals thereof, and if such medical school requires either social service or internship or both of its graduates, and if the applicant has not completed either such required social service or internship or both, such applicant shall also submit verified documentary evidence of having completed a 12 month supervised clinical training program under the direction of a medical school approved by the board.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- ii. A verified certificate showing satisfactory completion by the applicant of 12 months' postgraduate training in a facility approved by the board. The board recognizes as approved those facilities and training programs recognized as approved at the time of the applicant's service therein by the council on medical education of the American medical association, or the American osteopathic association, or the liaison committee on graduate medical education, or the national joint committee on approval of pre-registration physician training programs of Canada, or successors. If an applicant is a graduate of a foreign medical school not approved by the board and if such applicant has not completed 12 months' postgraduate training in a facility approved by the board, but such applicant has had other professional experience which the applicant believes has given that applicant education and training substantially equivalent, such applicant may submit to the board documentary evidence thereof. The board will review such documentary evidence and may make such further inquiry including a personal interview of the applicant as the board deems necessary to determine that such substantial equivalence in fact exists. The burden of proof of such equivalence shall lie upon the applicant. If the board finds such equivalence, the board may accept this in lieu of requiring that applicant to have completed 12 months' postgraduate training in a program approved by the board.
 - iii. A verified statement that the applicant is familiar with the state health laws and the rules of the department of health services as related to communicable diseases.
- Licensed physicians – Physicians shall be licensed in Wisconsin to practice medicine and surgery and shall possess knowledge and experience related to mental disorders of adults or children, be certified in addiction medicine by the American Society of Addiction Medicine, be certified in addiction psychiatry by the American Board of Psychiatry and Neurology, or otherwise be knowledgeable in the practice of addiction medicine. The above licensure requires:

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:**Provider Qualifications, continued**

- i. Verified documentary evidence of graduation from a medical or osteopathic school approved by the Medical Examining Board. The board recognizes as approved those medical or osteopathic schools recognized and approved at the time of the applicant's graduation therefrom by the American osteopathic association, or the liaison committee on medical education, or successors. If an applicant is not a graduate of a medical school approved by the board, but is a graduate of a medical school recognized and listed as such by the world health organization of the united nations, such applicant shall submit verified documentary evidence of graduation from such school and also verified documentary evidence of having passed the examinations conducted by the educational council for foreign medical graduates or successors, and shall also present for the board's inspection the originals thereof, and if such medical school requires either social service or internship or both of its graduates, and if the applicant has not completed either such required social service or internship or both, such applicant shall also submit verified documentary evidence of having completed a 12 month supervised clinical training program under the direction of a medical school approved by the board.
- ii. A verified certificate showing satisfactory completion by the applicant of 12 months' postgraduate training in a facility approved by the board. The board recognizes as approved those facilities and training programs recognized as approved at the time of the applicant's service therein by the council on medical education of the American medical association, or the American osteopathic association, or the liaison committee on graduate medical education, or the national joint committee on approval of pre-registration physician training programs of Canada, or successors. If an applicant is a graduate of a foreign medical school not approved by the board and if such applicant has not completed 12 months' postgraduate training in a facility approved by the board, but such applicant has had other professional experience which the applicant believes has given that applicant education and training substantially equivalent, such applicant may submit to the board documentary evidence thereof. The board will review such documentary evidence and may make such further inquiry including a personal interview of the applicant as the board deems necessary to determine that such substantial equivalence in fact exists. The burden of proof of such equivalence shall lie upon the applicant. If the board finds such equivalence, the board may accept this in lieu of requiring that applicant to have completed 12 months' postgraduate training in a program approved by the board.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- iii. A verified statement that the applicant is familiar with the state health laws and the rules of the department of health services as related to communicable diseases.
- Licensed physician assistants – Physician assistants shall be licensed in Wisconsin. The above licensure requires:
 - i. Proof of successful completion of an educational program accredited and approved by the committee on allied health education and accreditation of the American Medical Association, the commission for accreditation of allied health education programs, or its successor agency.
 - ii. Proof of successful completion of the national certifying examination.
 - iii. Proof that the applicant is currently certified by the national commission on certification of physician assistants or its successor agency.
- Licensed psychologists – Psychologists shall be licensed in Wisconsin and be listed or have met the requirements for listing with the National Register of Health Service Providers in Psychology or have a minimum of one year of supervised post-doctoral clinical experience directly related to the assessment and treatment of individuals with mental disorders or substance-use disorders. The above licensure requires:
 - i. Official transcripts of graduate training, properly attested to by the degree granting institution and submitted by the institution directly to the Psychology Examining Board.
 - ii. Documentation of any additional relevant education and appropriate experience.
 - iii. The "Supervised Psychological Experience" form which has been filled out by a psychologist who has firsthand knowledge of the applicant's experience relating to psychology.
 - iv. The "Nature of Intended Practice of Psychology" form.
 - v. Evidence of successful completion of an examination on the practice of psychology approved by the board.
 - vi. Proof of successful completion of the written examination on the elements of practice essential to the public health, safety or welfare.
 - vii. For applicants with doctoral degrees in psychology from universities outside the United States and Canada, as required by the board, documentation of additional supervised experience in the United States and documentation of English proficiency.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- viii. Verification of the applicant's licensure in all states or countries in which the applicant has ever held a license.
 - ix. For applicants who have a pending criminal charge or have been convicted of a crime, all related information necessary for the board to determine whether the circumstances of the pending criminal charge or conviction are substantially related to the duties of the licensed activity.
 - x. For applicants licensed in another state, proof of completion of continuing education requirements.
- Licensed nurse practitioners – Nurse practitioners shall be licensed in Wisconsin as a registered nurse, certified in Wisconsin as a nurse practitioner, and possess 3,000 hours of supervised clinical experience. The above certification requires:
 - i. Proof of certification by a national certifying body as a nurse practitioner
 - ii. Successful completion of a master's degree in nursing or a related health field granted by a college or university accredited by a regional accrediting agency approved by the board of education in the state in which the college or university is located
 - Licensed advanced practice nurse prescribers – Advance practice nurse prescribers shall be licensed in Wisconsin as a registered nurse and certified in Wisconsin as an advance practice nurse prescriber. The above certification requires:
 - i. Proof of certification by a national certifying body as a nurse practitioner, certified nurse-midwife, certified registered nurse anesthetist or clinical nurse specialist
 - ii. Successful completion of a master's degree in nursing or a related health field granted by a college or university accredited by a regional accrediting agency approved by the board of education in the state in which the college or university is located
 - iii. Documented evidence of at least 45 contact hours in clinical pharmacology/therapeutics within 3 years preceding the application for a certificate to issue prescription orders
 - iv. Successful completion of a jurisprudence examination for advanced practice nurse prescribers

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- Licensed practical nurses – Licensed practical nurses shall be licensed in the state of Wisconsin. The above licensure requires:
 - i. Completion of two years of high school or its equivalent.
 - ii. Age of 18 years or older.
 - iii. Proof of either of the following:
 - Graduation from a school of practical nursing.
 - Evidence of general and professional educational qualifications comparable to those required in this state at the time of graduation.
 - iv. Successful completion of the national council licensure examination (NCLEX)

- Licensed registered nurses – Licensed registered nurses shall be licensed in the state of Wisconsin. The above licensure requires:
 - i. Proof of graduation from a high school or its equivalent.
 - ii. Proof of either of the following:
 - Graduation from a school of practical nursing.
 - Evidence of general and professional educational qualifications comparable to those required in this state at the time of graduation.
 - iii. Successful completion of the national council licensure examination (NCLEX)

- Licensed independent clinical social workers – Licensed independent clinical social workers shall be licensed in the state of Wisconsin and shall possess at least 3,000 hours of supervised clinical experience where the majority of clients are children or adults with mental disorders or substance use disorders. The above licensure requires:
 - i. A certificate of professional education, signed and sealed by the chancellor, dean or registrar of the school from which the applicant has graduated with a master's or doctoral degree in social work with a concentration in clinical social work, including completion of supervised clinical field training. In lieu of supervised clinical field training, applicants may submit an affidavit indicating that they have completed 1,500 hours of supervised clinical social work experience in not less than one year within a primary clinical setting, which includes at least 500 hours of supervised face-to-face client contact.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- ii. Verification that the school or program which awarded the social work degree was accredited by, or a pre-accreditation program, of the Council on Social Work Education (CSWE) at the time the applicant graduated from the program or school, or that a degree awarded by a foreign institution of higher learning has been determined by the CSWE to be equivalent to a program accredited by the CSWE. If the applicant's education was not received in English, the applicant must demonstrate proficiency in English by achieving a score of 550 (or 213 on the computer-based exam) or above on the Test of English as a Foreign Language (TOEFL) or an equivalent score on an equivalent examination.
- iii. An affidavit that the applicant, after receiving a master's or doctoral degree and after receiving certification as an independent social worker, has completed at least 3,000 hours of clinical social work practice in no less than 2 years, including at least 1,000 hours of face-to-face client contact and including DSM diagnosis and treatment of individuals, under the supervision of a supervisor approved by the social worker section.
 - An applicant who after receiving a master's or doctoral degree in social work and completing any portion of the applicant's 3,000 hours of supervised clinical social work practice outside of Wisconsin in no less than 2 years may be given credit for those hours provided they included at least 1,000 hours of face-to-face client contact, or a proportionate number thereof, and also included DSM diagnosis and treatment of individuals, completed under the supervision of a supervisor acceptable to the social worker section.
- iv. Verification of successful completion of the examination approved by the section, or verification that the applicant is a board certified diplomat (BCD) of the American Board of Examiners in clinical social work.
- v. Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.
- vi. All pertinent information relating to any convictions or pending charges for all crimes and any traffic offenses which did or could result in revocation or suspension of the applicant's driver's license.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- Licensed professional counselors – Licensed professional counselors shall be licensed in the state of Wisconsin and shall possess at least 3,000 hours of supervised clinical experience where the majority of clients are children or adults with mental disorders or substance use disorders. The above licensure requires:
 - i. A certificate of professional education, signed and sealed by the chancellor, dean or registrar of the school from which the applicant has graduated with an approved degree.
 - An applicant who does not have a master's or doctoral degree in professional counseling shall be considered for licensure as a professional counselor upon the professional counselors section's receipt of a complete description of the academic program which the applicant proposes as the equivalent of a master's or doctoral degree in professional counseling. The professional counselors section may request additional information as necessary to complete the evaluation of the applicant's academic program.
 - ii. Verification that the institution which awarded the degree was a regionally accredited college or university, or accredited by the commission for accreditation of counseling and related educational programs (CACREP), or the council on rehabilitation education (CORE) at the time the applicant graduated from the school, or that a degree awarded by a foreign institution of higher learning has been determined by the National Board for Certified Counselors (NBCC) or by another organization approved by the section to be equivalent to a degree from a program accredited by CACREP. If the applicant's education was not received in English, the applicant must demonstrate proficiency in English by achieving a score of 550 (or 213 on the computer-based exam) or above on the Test Of English as a Foreign Language (TOEFL) or an equivalent score on an equivalent examination.
 - iii. An affidavit from the applicant that the applicant has, after receiving a master's or doctoral degree, completed the required period of supervised practice under the supervision of a person qualified to supervise the applicant's practice.
 - iv. Verification of successful completion of an examination required by the section.
 - v. Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- vi. If the applicant has been convicted of a crime, or of a traffic offense which did or could result in the suspension or revocation of his or her driver's license, or the applicant has such charges pending against him or her, the applicant has disclosed all information necessary for the section to determine whether the circumstances of the pending charge or conviction are substantially related to the duties of the practice under the license.
 - vii. An applicant may submit, but is not required to submit, evidence of certification by a professional organization.
- Licensed marriage and family therapists – Licensed marriage and family therapists shall be licensed in the state of Wisconsin and shall possess at least 3,000 hours of supervised clinical experience where the majority of clients are children or adults with mental disorders or substance use disorders. The above licensure requires:
 - i. For those providers without clinical membership in the American association for marriage and family therapy:
 - A certificate of professional education, signed and sealed by the chancellor, dean or registrar of the regionally accredited college or university or other accredited institution from which the applicant has graduated with a master's or doctoral degree in marriage and family therapy.
 - An applicant who does not have a master's or doctoral degree in marriage and family therapy must present a certificate of professional education signed and sealed by the chancellor, dean or registrar of the school from which the applicant has graduated with a master's or doctoral degree in a field substantially equivalent to marriage and family therapy, together with satisfactory evidence of having completed education equivalent to a master's or doctoral degree in marriage and family therapy.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- An applicant who has a master's or doctoral degree in marriage and family therapy from a program which was not accredited by the commission on accreditation for marriage and family therapy education (COAMFTE) of the American association for marriage and family therapy must submit satisfactory evidence of having completed education equivalent to a master's or doctoral degree in marriage and family therapy from a program accredited by the commission on accreditation for marriage and family therapy education of the American association for marriage and family therapy, or that a degree awarded by a foreign institution of higher learning has been determined by an organization approved by the section to be equivalent to a degree from a program accredited by COAMFTE. If the applicant's education was not received in English, the applicant must demonstrate proficiency in English by achieving a score of 550 (or 213 on the computer-based exam) or above on the Test Of English as a Foreign Language (TOEFL) or an equivalent score on an equivalent examination.
 - An affidavit that the applicant has completed at least 3000 hours of marriage and family therapy practice in no less than 2 years, including at least 1000 hours of supervised face-to-face client contact.
 - Verification of successful completion of an examination required by the section
 - Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.
 - All pertinent information relating to any convictions or pending charges for all crimes, and any traffic offenses which did or could result in revocation or suspension of the applicant's driver's license.
- ii. For providers who have been admitted to clinical membership in the American association for marriage and family therapy, licensure will be considered for following the section's review of documentation of the individual's clinical membership submitted directly to the section from AAMFT. Those applicants shall also submit:
 - An affidavit that the applicant has completed at least 3000 hours of marriage and family therapy practice in no less than 2 years, including at least 1000 hours of supervised face-to-face client contact.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:**Provider Qualifications, continued**

- Verification of successful completion of an examination required by the section.
 - Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.
 - All pertinent information relating to any convictions or pending charges for all crimes, and any traffic offenses which did or could result in revocation or suspension of the applicant's driver's license.
- Licensed occupational therapists – Licensed occupational therapists shall be licensed in the state of Wisconsin. The above licensure requires:
 - i. Evidence that the applicant is certified as an occupational therapist or occupational therapy assistant by the national board for certification in occupational therapy; and that the applicant has completed an occupational therapist educational program, or an occupational therapy assistant educational program.
 - ii. Written verification from the national board for certification in occupational therapy that the applicant has passed the examination required by this chapter.
 - Certified social workers – Certified social workers shall be certified in the state of Wisconsin. The above certification requires:
 - i. A certificate of professional education, signed and sealed by the chancellor, dean or registrar of the school from which the applicant has graduated with a bachelor's, master's or doctoral degree in social work.
 - ii. Verification that the school or program which awarded the social work degree was accredited by, or a pre-accreditation program, of the Council on Social Work Education (CSWE) at the time the applicant graduated from the program or school, or that a degree awarded by a foreign institution of higher learning has been determined by the CSWE to be equivalent to a program accredited by the CSWE. If the applicant's education was not received in English, the applicant must demonstrate proficiency in English by achieving a score of 550 (or 213 on the computer-based exam) or above on the Test of English as a Foreign Language (TOEFL) or an equivalent score on an equivalent examination.
 - iii. Verification of successful completion of an examination required by the section.
 - iv. Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- v. All pertinent information relating to any convictions or pending charges for all crimes and any traffic offenses which did or could result in revocation or suspension of the applicant's driver's license.
- Certified advance practice social workers – Certified advance practice social workers shall be certified in the state of Wisconsin. The above certification requires:
 - i. A certificate of professional education, signed and sealed by the chancellor, dean or registrar of the school from which the applicant has graduated with a master's or doctoral degree in social work.
 - ii. Verification that the school or program which awarded the social work degree was accredited by, or a pre-accreditation program, of the Council on Social Work Education (CSWE) at the time the applicant graduated from the program or school, or that a degree awarded by a foreign institution of higher learning has been determined by the CSWE to be equivalent to a program accredited by the CSWE. If the applicant's education was not received in English, the applicant must demonstrate proficiency in English by achieving a score of 550 (or 213 on the computer-based exam) or above on the Test of English as a Foreign Language (TOEFL) or an equivalent score on an equivalent examination.
 - iii. Verification of successful completion of an examination required by the section.
 - iv. Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.
 - v. All pertinent information relating to any convictions or pending charges for all crimes and any traffic offenses which did or could result in revocation or suspension of the applicant's driver's license.
 - Certified independent social workers – Certified independent social workers shall be certified in the state of Wisconsin. The above certification requires:
 - i. A certificate of professional education, signed and sealed by the chancellor, dean or registrar of the school from which the applicant has graduated with a master's or doctoral degree in social work.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- ii. Verification that the school or program which awarded the social work degree was accredited by, or a pre-accreditation program, of the Council on Social Work Education (CSWE) at the time the applicant graduated from the program or school, or that a degree awarded by a foreign institution of higher learning has been determined by the CSWE to be equivalent to a program accredited by the CSWE. If the applicant's education was not received in English, the applicant must demonstrate proficiency in English by achieving a score of 550 (or 213 on the computer-based exam) or above on the Test of English as a Foreign Language (TOEFL) or an equivalent score on an equivalent examination.
 - iii. An affidavit that the applicant, after receiving a master's or doctoral degree and after receiving certification as an advanced practice social worker, has obtained at least 3,000 hours of social work practice in no less than 2 years under the supervision of a supervisor approved by the social worker section.
 - iv. Verification of successful completion of the examination approved by the section, or verification that the applicant has obtained certification of the Academy of Certified Social Workers (ACSW) of the National Association of Social Workers.
 - v. Verification of the applicant's credential in all jurisdictions in which the applicant has ever been credentialed.
 - vi. All pertinent information relating to any convictions or pending charges for all crimes and any traffic offenses which did or could result in revocation or suspension of the applicant's driver's license.
- Certified alcohol and drug abuse counselors – Certified alcohol and drug abuse counselors shall be certified in the state of Wisconsin. The above certification requires:
 - i. For substance abuse counselors-in-training:
 - Verified high school diploma, an HSED or GED.
 - Successful passage of an ethics, boundaries and jurisprudence examination developed or approved by the department.
 - Successful completion of 100 hours of specialized education in the transdisciplinary foundations in compliance with state board defined curriculum. An organized educational field experience program from an accredited school fulfills this requirement.
 - Current employment, a written offer of employment or an agreement authorizing volunteer hours at an agency providing substance use disorder treatment. The applicant's clinical supervisor shall review the education submitted and attest that the education submitted by the applicant fulfills the above requirements.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- ii. For substance abuse counselors without previous credentialing:
 - Successful passage of the International Certification Reciprocity Consortium Alcohol and Other Drug Abuse written counselor examination.
 - Verified high school diploma, an HSED or GED.
 - Completion of 4,000 hours of supervised work experience performing the practice dimensions within 5 years immediately preceding the date of application. Experience in excess of 40 hours per week or 2,000 hours per year does not count in meeting the experience requirement. The 4,000 hours shall include all of the following:
 - Two thousand hours in performing the practice dimensions with patients who have a primary substance use disorder diagnosis.
 - One thousand hours in substance use disorder counseling with at least 500 hours in a one-on-one individual modality setting.
 - A minimum of 200 hours of counseling during the 12 month period immediately preceding the date of application, of which 100 hours shall have been completed using an individual modality setting.
- iii. For substance abuse counselors with previous credentialing:
 - An applicant for certification as a substance abuse counselor who is previously credentialed by the marriage and family therapy, professional counseling and social work examining board shall submit evidence of completing training and education in the treatment of alcohol or substance dependency or abuse.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- iv. For clinical substance abuse counselors:
 - Successful passage of the International Certification Reciprocity Consortium Alcohol and Other Drug Abuse written counselor certification examination taken on or after June 1, 2008. If the written examination was taken before June 1, 2008, an applicant shall have either successfully passed the International Certification Reciprocity Consortium case presentation method interview on or before December 31, 2008, or have successfully retaken the written counselor certification examination on or after June 1, 2008.
- Certified peer specialists - Certified peer specialists shall be certified in the state of Wisconsin. The above certification requires:
 - i. Successful completion of a peer specialist training program using a state-approved training curriculum.
 - ii. Successful completion of the Wisconsin Peer Specialist Certification Exam.
- Certified occupational therapy assistants – Certified occupational therapy assistants shall be certified in the state of Wisconsin. The above certification requires:
 - i. Applicants for licensure as an occupational therapist or occupational therapy assistant shall pass the certification examination for occupational therapist or the certification examination for occupational therapy assistant of the national board for certification in occupational therapy, and shall complete an open book examination on statutes and rules governing the practice of occupational therapy in Wisconsin.

State: Wisconsin

13.d. Rehabilitative Services, continued.Psychosocial Rehabilitation Services, continued:Provider Qualifications, continued

- Certified rehabilitation counselors – A certified rehabilitation counselor shall be certified or eligible for certification by the national Commission on Rehabilitation Counselor certification
- Master's level professional - shall have a master's degree in an area directly related to providing mental health services, including clinical psychology, psychology, school or educational psychology, rehabilitation psychology, counseling and guidance, counseling psychology, or social work. Masters level professionals must complete orientation and training in the delivery of psychosocial rehabilitation. The psychosocial rehabilitation program will determine that masters level providers have a clean criminal background and possess the interpersonal skills, training, and experience necessary to perform their assigned functions.
- Clinical Student/Resident - shall either be enrolled in a masters degree or higher program at an accredited institution or have completed such a degree and be working toward completion of the full clinical experience requirements necessary for licensure or certification as a provider.
- Bachelors level professional - shall have at least a bachelors degree in an area of education or human services. Bachelors level professionals must complete orientation and training in the delivery of psychosocial rehabilitation. The psychosocial rehabilitation program will determine that bachelors level providers have a clean criminal background and possess the interpersonal skills, training, and experience necessary to perform their assigned functions.
- Psychosocial rehabilitation technician - shall be a paraprofessional with aptitude for the delivery of psychosocial rehabilitation services. Technicians must complete orientation and training in the delivery of psychosocial rehabilitation. The psychosocial rehabilitation program will determine that masters level providers have a clean criminal background and possess the interpersonal skills, training, and experience necessary to perform their assigned functions.

Eff. Medical Day Treatment - Mental Health Service. Medical day
1-1-93 treatment is a mental health rehabilitation service for recipients
who are seriously impaired in basic areas of everyday functioning
and for whom less intensive, traditional, outpatient mental health
treatment is not adequate to stabilize their condition, attain
their best possible functional level, or maintain their residence
in the community. This service also is appropriate on a limited
basis for individuals in hospitals or nursing facilities who are in
transition from an institutional to a community setting. Day
treatment services are necessary for the maximum reduction of a
recipient's disability and for restoring a recipient to his or her
best possible functional level.

Medical day treatment is a compendium of medical, mental health,
occupational therapy, and other services. Specific day treatment
services include individual and group occupational therapy and
psychotherapy, medication management, symptom management,
psychosocial rehabilitation services, and nursing services.
Medical Assistance pays only for those medically-necessary services
in a physician-approved plan of care, provided under the general
direction of a physician.

Medical day treatment is provided by day treatment programs
certified by the Department of Health and Social Services.
Certification requires the following: a registered nurse or
occupational therapist is on duty to participate in program
planning, implementation, and coordination; the program is directed
by an interdisciplinary team; a qualified professional staff person
participates in all groups; and periodic evaluation is conducted of
each recipient's progress in the program.

TN #95-029
Supersedes
TN #93-003

Approval Date 12/18/95

Effective Date 1/1/96

13.d Medical Day Treatment - Mental Health Service. (Continued)

Prior authorization is required after a limited number of hours of service have been provided in a calendar year. Any occupational therapy and psychotherapy provided as part of the day treatment program are part of the day treatment benefit, are subject to day treatment limitations, and cannot be separately billed.

Activities such as recreation, arts and crafts, music, exercise, socializing, and general education that may be part of a recipient's day treatment program, are non-covered services.

Eff. Outpatient Psychotherapy Services. The Medical Assistance Program
1-1-93 covers outpatient psychotherapy services necessary for the maximum reduction of a recipient's disability and for restoring a recipient to his or her best possible functional level. These services are available to recipients when prescribed by a physician prior to beginning treatment.

Evaluations, assessments and testing are provided to all recipients to determine the need for psychotherapy services or to evaluate the appropriateness of the services being provided.

Treatment services include individual, group, and family psychotherapy (including such modalities as hypnotherapy and biofeedback) and collateral contacts. Psychiatric medication management may be provided by physicians or registered nurses employed by a certified clinic.

Outpatient psychotherapy services are provided under the direction of a psychiatrist or licensed psychologist who is listed or eligible to be listed in the National Register of Healthcare Providers in Psychology. These services may be performed by either such a psychiatrist or psychologist, or by an individual with a master's degree in social work, counseling, psychology, or a related discipline, who has 3000 hours of post-degree experience providing psychotherapy services and who is supervised by a provider meeting the certification requirements. Masters level providers must work in an outpatient clinic certified by the Department of Health and Social Services.

TN #93-003
Supersedes
TN #91-0036

Approval Date 6/17/93

Effective Date 1/1/93

State Wisconsin

Eff. Mental health services, including services provided by a psychiatrist, may be provided to an individual who is 21 years of age or older in the individual's home or in the community.

13.d Out patient Substance Use Disorder (SUD) Formerly-Alcohol and Other
Eff. Drug Abuse (AODA) Treatment Services.

Outpatient SUD AODA treatment services are available to recipients when such services are necessary for the maximum reduction of the recipient's disability and for restoring the recipient to his or her best possible functional level. A physician's prescription is required before starting AODA treatment services.

Outpatient SUD AODA services include evaluations, assessments and diagnostic services to determine the need for SUD services or to evaluate the appropriateness of the services being provided. The outpatient SUD treatment services include individual, group, and family SUD treatment and SUD educational programming specific to medical aspects of SUD diagnosis and treatment. Outpatient SUD services include drug testing for a member engaged in treatment at an appropriately certified treatment facility.

Medication management may be provided by physicians, registered or nurses employed by a certified clinic. Counseling services include counseling necessary to ensure the best possible level of functioning associated with methadone maintenance. All services are provided under the general direction of a physician.

These services may be performed only by the following providers: a physician; a licensed psychologist who is listed or eligible to be listed in the National Register of Healthcare Providers in Psychology; an individual with a master's degree in social work, counseling or psychology, or a related discipline, who has 3000 hours of post-degree experience providing psychotherapy services supervised by a provider meeting the certification requirements; or an individual certified by the Wisconsin Alcoholism and Drug Abuse Counselor Certification Board as an alcohol and drug counselor II or III. Masters level providers and SUD counselors must work in outpatient clinics certified by the Department of Health and Social Services.

TN #23-0017

Supersedes

TN #97-020

Approval Date 10-23-23Effective Date 07-1-23

CH03193.MP/SP

State Wisconsin

Detoxification is not covered in a social (non-hospital) setting.

Substance Use disorder (SUD) Day Treatment. SUD day treatment is available for recipients who are seriously impaired in basic areas of everyday functioning and for whom less intensive, traditional, outpatient treatment is not adequate to stabilize their condition or attain their best possible functional level in the community. SUD day treatment may be appropriate for individuals who have had inpatient hospital detoxification or limited inpatient hospital rehabilitation. These services are necessary for the maximum reduction of the recipient's disability and for restoring the recipient to his or her best possible functional level.

SUD day treatment is a compendium of medical and SUD treatment services, but Medical Assistance pays for only those services which are medically necessary based on a supervising physician or psychologist-approved plan of care and are provided under the general direction of a physician. Medical Assistance-covered services include individual, group, and family therapy educational programming specific to medical aspects of SUD diagnosis and treatment, and drug testing.

SUD day treatment is provided by day treatment programs certified by the Department of Health and Social Services. certification requires that the program be directed by an interdisciplinary team; that an individual certified by the Wisconsin Alcoholism and Drug Abuse Counselor Certification Board as an alcohol and drug counselor II or III is on duty all hours in which services are provided; and that recipients are evaluated for their ability to benefit from treatment.

All SUD day treatment services must be prior authorized except for the initial three hours of assessment. A recipient may not receive outpatient AODA SUD services during the period he or she is receiving SUD day treatment.

Alcohol and other drug abuse Substance Use Disorder services may be provided to an individual who is 21 years of age or older in the individual's home or in the community.

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#97-020

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Activities such as recreation, arts and crafts, music, exercise, socializing and general education which may be part of the recipient's day treatment program are non-covered services by Medical Assistance.

14. Services for Individuals Age 65 - In Institutions for Mental Diseases. Prior authorization and other limitations which otherwise are required for SNF or ICF care apply here. See Item #4a of this section and HSS 107.09, Wis. Adm. Code.
Eff. 7-1-87
17. Nurse Midwife Services. Nurse midwife services are subject to limitations within the scope of practice of the nurse midwife. The scope of practice is the overall management of care of a woman in normal childbirth and the provision of prenatal, intrapartal, postpartal and nonsurgical contraceptive methods and care for the mother and the newborn up to one year of age. These services include medical services delegated by a licensed physician through protocols, pursuant to the requirements set forth in the Wisconsin Nursing Act and the guidelines set forth by the medical examining board and the board of nursing. Nurse midwife services are subject to the same limitations imposed on physician services under item #5 to enable the Department to monitor and regulate the following: medical necessity, cost, frequency and place of service.
Eff. 10-1-93
18. Hospice Care Services. This service is provided according to federal requirements, including amendment by P.L. 101-508 (OBRA '90).
Eff. 7-1-88
1-1-91
19. Case Management Services.
Eff. 10-1-97 Case Management is not available to any recipient:
- a. participating in a home and community based (1915(c)) waiver program,
 - b. residing in an MA funded institution (e.g., hospital or nursing home), except for discharge-related case management services prior to discharge from an institutional setting,
 - c. in excess of one assessment or case plan per calendar year, per county, except when recipients receive prenatal care coordination,
 - d. in excess of one claim for ongoing monitoring per month per county except when recipients receive prenatal care coordination, or
 - e. enrolled in a MA-certified community support program.

TN #97-018
Supersedes
TN #95-019

Approval Date

3/17/98

Effective Date 10-1-97

Case Management does not include:

- a. services which are diagnostic or therapeutic or which could be paid for by MA as any other covered benefit by certified or certifiable professionals,
- b. legal advocacy by a lawyer or paralegal,
- c. personal care or supportive home care,
- d. client education and training, or
- e. services not provided or directed towards some specific recipient.

19.b. Special Tuberculosis Related Services under Section 1902(z)(2)(F)
Eff.

7-1-95

These services are limited to those recipients with a TB-related diagnosis and include directly observed therapy, in-home monitoring of TB-symptoms, patient education and anticipatory guidance, and disposable supplies to encourage the completion of prescribed drugs.

TN #95-019
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TN #93-045

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20. Extended Services to Pregnant Women

Eff.

9-1-87

Major Categories of Service

Major categories of services are: inpatient and outpatient hospital services, physician services, laboratory and x-ray services, rural health and other clinic services, and diagnostic services. These include routine prenatal care, labor and delivery, routine post-partum care and complications of pregnancy or delivery likely to affect the pregnancy. These services are subject to the same limitations which pertain to the respective areas of service.

Eff.

1-1-93

Health Education

Health education for high risk pregnant and postpartum women (up to 60 days after delivery) is medically necessary instruction to ameliorate a pregnant woman's identified risk factors, as determined by the Department-sanctioned risk assessment. The following areas may be included:

1. education/assistance to stop smoking and to stop alcohol and addictive drug consumption;
2. education/assistance to stop potentially dangerous sexual practices;
3. lifestyle management and reproductive health;
4. education/assistance to handle environmental/ occupational hazards;
5. childbirth and parenting education.

Nutrition Counseling

Nutrition counseling for high risk pregnant and postpartum women (up to 60 days after delivery) is medically necessary nutrition instruction and guidance to ameliorate a pregnant woman's identified risk factors as determined by the Department-sanctioned risk assessment, and may include, but is not limited to, the following areas:

1. weight and weight gain;
2. biochemical and dietary factors;
3. previous and current nutrition-related obstetrical complications;
4. psychological problems affecting nutrition; and
5. reproductive history affecting nutritional status.

21. Ambulatory Prenatal Care for Pregnant Women. These services are subject to the same limitations which pertain to the respective areas of service.

22. Respiratory Care Services. Prior authorization of services is required for reimbursement. The recipient will have been medically dependent on a ventilator for life support for at least six hours per day. In addition, the recipient will meet one of the following two conditions:

- The recipient will have been so dependent for at least 30 consecutive days as an inpatient in one or more hospitals, nursing facilities, or ICF/MR, as stated in 42 CFR 440.185(a)(2).
- If the recipient has been hospitalized for less than 30 days, the recipient's eligibility for services will be determined by the Division's Chief Medical Officer on a case-by-case basis, and may include discussions with the recipient's pulmonologist and/or primary care physician to evaluate the recipient's prognosis, history of hospitalizations for the respiratory condition, diagnosis, and weaning attempts, when appropriate.

Reimbursement under the respiratory care benefit is not available for services that are part of the rental agreement for a ventilator or other necessary equipment with a durable medical equipment provider. Respite services are not covered.

23. Pediatric or Family Nurse Practitioner Services. Services are subject to limitations imposed on specific disciplines within the scope of practice of the nurse. These services include medical services delegated by a licensed physician through protocols, pursuant to the requirements set forth in the Wisconsin Nursing Act and the guidelines set forth by the medical examining board and the board of nursing. Other practitioner services are subject to the same limitations imposed on physician services under item #5 to enable the Department to monitor and regulate the following: medical necessity, cost, frequency and place of service.

Medication management includes in-home administration of medications other than those given intravenously, prefilling syringes for self injection when the recipient is not capable, setting up medications for self-administration, and programming dispensers. Instructing the recipient may be covered when provided in conjunction with these activities but not covered if it is the only activity.

TN #99-001
Supersedes
TN #95-026

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Effective Date 1-1-99

CH03193.MP/SP

24. Any Other Medical Care

- a. Transportation Services Non-emergency transportation by air and water ambulance requires prior authorization. Ambulance service restrictions include, but are not limited to: medical order requirements for non-emergency services; trip purpose limitations, and pick-up and destination point limitations.

Specialized motor vehicle transportation services are provided only to recipients with prescriptions documenting their inability to use common carrier transportation (such as private auto, bus, taxi). Eligibility standards are established for second attendant services. Within Department-established restrictions, unloaded mileage is a covered service utilizing specified mileage zones. Trips over a specified upper mileage limit require prior authorization.

- b. Transportation for School-Based Services (SBS):

1. Transportation to School.

A child's transportation to and from a school certified as an SBS provider is a covered service only if all of the following conditions are met:

- The child receives covered SBS services identified in the child's IEP at the school on the day the transportation is provided.
- The SBS provider is financially responsible for providing the transportation.
- The child's medical need for the particular type of transportation is identified in the IEP.
- The vehicle is equipped with and the child requires a ramp or lift, an aide is present and the child requires the aide's assistance in the vehicle or the child has behavioral problems that do not require the assistance of an aide but that preclude the child from riding on a standard school bus.

Effective 1-1-98

2. Off-site transportation. A child's transportation to and from a site other than the child's "home" school is a covered service only if all of the following conditions are met:

- The child receives covered SBS services identified in the child's IEP at the site on the day the transportation is provided.
- The SBS provider is financially responsible for providing the transportation.
- The transportation is either from the school to an off-site provider and back to school or to home, or is between home and a "special" school. A "special school" is a school that requires that a child have a disability in order to be enrolled, including but not limited to the Wisconsin School For The Deaf or the Wisconsin School For The Visually Handicapped, as defined in ch. PI 12, Wis. Adm. Code.

Effective 1-1-98

- d. Nursing Facility Services for Recipients Under 21 Years of Age. The plan of care and independent medical review provide bases for authorization and payment amount.
- e. Non-Emergency Out-of-State Treatment. Prior authorization is required for all non-emergency out-of-state procedures unless the provider has been granted border status.

24.f. Personal Care Services. Prior authorization is required for
Eff. personal care services after a limited number of hours of service
2-25-94 have been provided in a calendar year.

Services must be supervised by an RN who reviews the plan of care, the performance of the personal care worker and evaluates the recipient's condition at least every 60 days. Reimbursement for RN supervisory visits is limited to one visit per month.

Eff. Personal care workers can perform home health aide tasks when
1-1-89 delegation, training and supervision criteria are met.
Housekeeping tasks performed by the personal care worker are limited to 1/3 of the time spent in the recipient's home.

TN #94-010
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TN #93-044

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Eff. HealthCheck (EPSDT) Other Services

1-1-98

In addition to services provided elsewhere in this Plan, HealthCheck (EPSDT) recipients may receive, if medically necessary and prior authorized, the following services:

1. Mental Health

- a. In-home psychotherapy
- b. Mental health day treatment
- c. Specialized psychological evaluation for conditions, such as children with sexually deviant behavior, where a limited number of providers are qualified. The evaluation includes components not included under outpatient psychotherapy services.

2. Dental

- a. Oral examinations exceeding the limitations for adults
- b. Single unit crowns

3. Otherwise Non-Covered Over-the-Counter Medications

Certain commonly required medications such as multivitamins require only a prescription and not prior authorization.

TN #97-019
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TN #96-014

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State: Wisconsin

HealthCheck (EPSDT) Other Services, continued

4. Comprehensive Treatment

See "Comprehensive Treatment" under Behavioral Treatment Services in Section 6.d.,
Other Practitioners.