

Co-Treatment Billing in Wisconsin Medicaid

What is co-treatment?

Co-treatment is treatment by two providers of different therapies during the same time.

How do I request co-treatment?

Each of the providers wanting a co-treatment time must turn in their own prior authorization (PA) request. The request must be given at the same time.

Are there specific treatment note requirements for co-treatment requests?

Treatment notes must include that the request is for co-treatment with another known therapy provider type, why treatment from a single provider such as an occupational therapist (OT), physical therapist (PT), or speech language pathologist (SLP) does not provide maximum benefit to the member and why services from two therapy disciplines, performed together, are required to treat the member.

Which therapy provider types can bill for co-treatment?

With prior authorization approval, occupational therapists, physical therapists, and speech language therapists can bill for co-treatment services.

If I am treating a member using first 35 treatment visits, can I receive a full payment for co-treatment without a prior authorization approval?

No; a full payment for co-treatment **always** needs prior authorization approval.

How do I bill for co-treatment?

If co-treatment is approved, both therapy providers from both disciplines can bill for the whole treatment session. Example: If the member has co-treatment from occupational therapy and speech language pathology from 1 p.m. to 2 p.m. both providers can get Medicaid payment for one hour.

How do I bill for co-treatment if I do not have prior authorization approval?

If prior authorization has not been approved for two providers of two different therapy areas to treat the member together, each provider could get Medicaid payment for half of the session. Example: occupational therapist and physical therapist treat a member together for an hour session. Each provider could receive Medicaid payment for 30 minutes.

What is fraudulent billing for co-treatment?

Fraudulent billing occurs when a provider from one therapy treats a member together with a provider from a different therapy without prior authorization approval for co-treatment and each provider bills for the whole time. Example: physical therapist and occupational therapist treat a member together for a 60-minute session without prior authorization approval for co-treatment and each provider bills Wisconsin Medicaid for the full 60 minutes.

