Below are common questions and answers about HealthCheck and HealthCheck “Other Services.” This document will be updated with new information as it becomes available.

**Topic Category Guide**

Topic Category A - HealthCheck
Topic Category B – HealthCheck “Other Services”

**HealthCheck**

**Question:** What is HealthCheck?
**Answer:** HealthCheck is the name of the Wisconsin Medicaid benefit that covers well-child checks and follow-up services to make sure the health and developmental needs for children and teenagers are met up to their 21st birthday. This benefit is also called EPSDT (Early and Periodic Screening, Diagnosis, and Treatment) in federal Medicaid publications.

This benefit’s goal is to prevent illnesses and find and treat health issues early through regular checkups and services. Any person under 21 years old has automatic access to HealthCheck if they are enrolled in ForwardHealth or BadgerCare Plus. This includes those enrolled in the Katie Beckett program.

HealthCheck covers two types of screens (or exams): regular well-child checks and extra exams outside of the regular schedule. These are called interperiodic screens.

**Question:** Do you have to sign up for HealthCheck?
**Answer:** No. You do not need to sign up or register for HealthCheck. If you have a ForwardHealth card, you automatically have access to HealthCheck services. There is no extra paperwork or application to fill out.

**Question:** How much does a HealthCheck visit cost?
**Answer:** There is no additional cost for a HealthCheck visit. If you usually pay a deductible or co-pay, then you may need to pay a deductible or co-pay for HealthCheck services.
Question: What is a well-child check (also known as a HealthCheck comprehensive screen)?
Answer: Well-child checks are exams that happen during regular doctor visits to help make sure that illnesses and conditions are found and treated early. Exams include:

- Head-to-toe physical exams
- Hearing checks
- Vision checks
- Dental checks
- Lab tests
- Growth and development checks
- Nutrition checks (eating habits)
- Additional health information

If a doctor finds a health problem during a visit, they may refer the patient for more testing.

Question: How often do you need to get a well-child check?
Answer: The frequency of well-child checks is based on an exam schedule created by the American Academy of Pediatrics (AAP). This is also is known as a periodicity schedule. It lists the ages and types of exams children and teens should have from infancy through adolescence. Your doctor should be aware of the schedule and can help you pick a date for your next appointment. If you would like to find out more, see the AAP exam schedule.

Question: What is an interperiodic screen?
Answer: Interperiodic screens (or exams) are visits to the doctor that happen in between scheduled well-child checks. If you, your doctor, your dentist, or any other professional (like a physician, health official, or educator) who comes into contact with your child or teen and has a concern about their health or development, you can see the doctor for an interperiodic screen. You don’t have to wait for the next scheduled well-child visit.

Question: How do you access HealthCheck services?
Answer: You can access HealthCheck services through any Medicaid-enrolled doctor. Well-child checks (or comprehensive HealthCheck screening exams) can be scheduled with your primary doctor.

a) If you are enrolled through BadgerCare Plus and you don’t have a doctor, visit the ForwardHealth Portal at www.forwardhealth.wi.gov/. Then click on the “Find a Provider” link in the top right to search for one. You can also call Member Services at 1-800-362-3002 to get help finding a doctor.

b) If you are enrolled through a BadgerCare Plus HMO and you don’t have a doctor, contact your HMO to get more information on finding a doctor in your network.
Question: How do you set up a well-child check?
   a) **Answer if you are enrolled through BadgerCare Plus:** A well-child check can be scheduled with your primary doctor. If you don’t have a doctor, you can visit the ForwardHealth Portal at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/). Then click the “Find a Provider” link in the top right to search for one. You can also call Member Services at 1-800-362-3002 to get help finding a doctor.

   b) **Answer if you are enrolled through a BadgerCare Plus HMO,** contact your HMO to get more information on getting a doctor in your network and scheduling a well-child check.

Question: How do I get to my appointment?
**Answer:** If you need a ride to or from a HealthCheck appointment, please call the Department of Health Services (DHS) non-emergency medical transportation (NEMT) manager at 866-907-1493. NEMT can help you get:
- A ride.
- Bus tickets.
- Money for gas.

If you cannot ride a bus and you are not able to use your own car, NEMT will schedule a ride for you based on your medical and transportation needs.

**HealthCheck “Other Services”**

Question: What is HealthCheck “Other Services”?
**Answer:** If circumstances require a service not usually covered by Wisconsin Medicaid, a benefit called HealthCheck “Other Services” may cover the costs. Coverage is based on federal guidelines. The service must be medically necessary to help prevent, correct, improve, or maintain a physical or mental condition.

Question: How do you get HealthCheck “Other Services”?
**Answer:** Below are the steps to getting HealthCheck “Other Services.”
1. The best way to access HealthCheck “Other Services” is by scheduling a HealthCheck well-child check with your doctor.
2. If your doctor finds a condition or illness during a well-child exam, they can write a prescription for the service or product your child needs. Your doctor can also help you find a provider for that service or product.
3. This provider will send the prescription to ForwardHealth with information that explains what your child needs and why. This information is called a “prior authorization request.”
4. Clinical consultants at ForwardHealth will look at all the information submitted and decide if the service or product is medically necessary for your child at this time.
5. If the clinical consultants agree that your child needs the service to prevent, correct, improve, or maintain their condition, ForwardHealth will approve the request to cover the service.
6. ForwardHealth will notify the provider who submitted the prior authorization request of the final decision, and the provider will contact you.
Frequently Asked Questions About
HealthCheck and HealthCheck “Other Services”

Question: What is medical necessity?
Answer: For a service or product to be medically necessary and qualify for ForwardHealth coverage, it must meet Wisconsin state law’s standards for medical necessity and be needed to prevent, correct, improve, or maintain a condition. Every person’s condition is different, and the unique needs and circumstances of each person will be carefully considered by clinical experts.

Scheduling a well-child exam (HealthCheck visit) with your primary care doctor is an important first step to finding out if your child or teen has any conditions that will need extra services.

Question: What services are available through HealthCheck “Other Services”?
Answer: Many types of services and products are available through HealthCheck “Other Services.” If your child or teen needs a service or product that can be covered according to federal Medicaid law and ForwardHealth determines it is medically necessary, it can be covered — even if Wisconsin Medicaid doesn’t usually cover that product or service.

Question: Why are some services covered for one person, but not another?
Answer: Services are covered based on each person’s unique needs and circumstances. A person with different needs and circumstances may need different services.

Question: What do you do if the prior authorization request is denied or modified?
Answer: If the request for HealthCheck “Other Services” was denied or approved with modifications, you can contact the provider who submitted the prior authorization. They should be able to explain why it was denied or reduced.

When a prior authorization is denied or approved with modifications, you have the right to appeal the decision. If you would like to file an appeal, follow the directions included in the letter you received informing you of the denial or modification.