

# ForwardHealth **UPDATE**

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## CHANGES TO HEALTHCHECK PRIOR AUTHORIZATION FOR DENTAL SERVICES

This ForwardHealth Update clarifies prior authorization (PA) requirements for dental services that align with current HealthCheck “Other Services” policy.

As introduced in the February 2019 Update (2019-08), titled [“Explanation of Prior Authorization Requirements for HealthCheck ‘Other Services,’”](#) and published in the [Prior Authorization for HealthCheck “Other Services”](#) topic (#1) of the ForwardHealth Online Handbook, ForwardHealth streamlined the PA process for HealthCheck “Other Services.” This impacts HealthCheck “Other Services” PA requests for dental services.

### HealthCheck Overview

The purpose of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) is to ensure that children receive early detection and care so

## AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

## TO

Community Health Centers, Dentists, HealthCheck Providers, Rural Health Clinics, Tribal Federally Qualified Health Centers, HMOs and Other Managed Care Programs

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that health problems are prevented or diagnosed and treated as early as possible.

HealthCheck is Wisconsin's term for EPSDT. The HealthCheck benefit provides periodic, comprehensive screening exams (also known as "well-child checks"), as well as interperiodic screens, outreach and case management, and additional medically necessary services, referred to as HealthCheck "Other Services," for members under 21 years of age.

Wisconsin Medicaid follows EPSDT guidelines as outlined in the Centers for Medicare & Medicaid Services State Medicaid Manual ch. 5 §§ 5010, 5121, and 5310.

### **HealthCheck "Other Services"**

HealthCheck "Other Services" provides access to additional services a member might require to meet the medical or dental needs or concerns that have been identified during a comprehensive or interperiodic screen.

HealthCheck "Other Services" may additionally cover medically necessary health care services for members through two types of PA requests:

- Requests for exceptions to coverage limitations for a Medicaid benefit
- Requests for federally allowable Medicaid services not routinely covered by Wisconsin Medicaid

### **PA Guidance**

For services that are covered under an established benefit, providers must submit the required PA documentation detailed in the appropriate service area of the Online Handbook. This applies even for benefits established under HealthCheck authority, such as orthodontia.

If the requested level of service will exceed typical Medicaid limitations or the requested service is not typically covered by Wisconsin Medicaid, refer to the Prior Authorization for HealthCheck "Other Services" topic (#1) in the Online Handbook for more information about submitting PA requests for HealthCheck "Other Services."

### **PA Requirement Change**

#### **No Medical Exam or HealthCheck Screen Required**

As introduced in Update 2019-08 and published in the Prior Authorization for HealthCheck "Other Services" topic (#1), ForwardHealth no longer

## **QUICK LINKS**

- [An Overview of HealthCheck Services](#) topic (#2405)
- [Definition of HealthCheck "Other Services"](#) topic (#22)
- [Prior Authorization for HealthCheck "Other Services"](#) topic (#1)
- [Requirements](#) topic (#41)
- [Resources for HealthCheck Providers](#) page

## **CONTACT INFORMATION**

Provider Services,  
800-947-9627

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requires providers to submit documentation of a completed, comprehensive medical exam or HealthCheck screen with a PA request. No special forms are required, including the “pink card” and the HealthCheck Referral form, F-00021 (01/2017), which have been discontinued.

The removal of the comprehensive medical exam or HealthCheck screen requirement aligns with current HealthCheck policy for members under 21 years of age.

Note: A physician or dental provider’s prescription or order is different from a comprehensive medical exam or a HealthCheck screen and may be required for PA. To request services, providers should refer to the [Online Handbook](#) for policy and PA guidelines.

### **Changes to the Prior Authorization/Dental Attachment 2 Oral Surgery, Orthodontic, and Fixed Prosthetic Services Form**

ForwardHealth has revised the Prior Authorization/Dental Attachment 2 (PA/DA2) Oral Surgery, Orthodontic, and Fixed Prosthetic Services form, F-11014 (01/2020), to align with current HealthCheck “Other Services” PA policy. The HealthCheck referral field has been removed.

The [Forms page](#) of the ForwardHealth Portal contains current copies of all PA forms and instructions.

### **Screening by a Physician or Dental Provider**

Both comprehensive and interperiodic screens may trigger access to HealthCheck “Other Services.” An interperiodic screen can be a problem-focused visit or may include any or all components of the comprehensive screen. For example, an interperiodic screen provided by a dental provider is sufficient to allow coverage of medically necessary dental services under HealthCheck “Other Services” even if the service was not identified during the comprehensive screen.

**“... ForwardHealth no longer requires providers to submit documentation of a completed, comprehensive medical exam or HealthCheck screen with a PA request. No special forms are required, including the “pink card” and the HealthCheck Referral form, F-00021 (01/2017), which have been discontinued.**

## **DID YOU KNOW?**

Providers can find specific forms on the Forms page by entering the form number into the Keyword field of the Search Criteria and clicking Search.

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## Retention of Documentation Reminder

Providers are reminded that they must follow documentation retention requirements, per Wis. Admin. Code § [DHS 106.02\(9\)](#). Information about those requirements is explained in the following Online Handbook topics:

- [Financial Records](#) (#201)
- [Medical Records](#) (#202)
- [Preparation and Maintenance of Records](#) (#203)
- [Record Retention](#) (#204)
- [Availability of Records to Authorized Personnel](#) (#1640)

Providers are required to produce and/or submit documentation to ForwardHealth upon request. ForwardHealth may deny or recoup payment for services that fail to meet this requirement. Refusal to produce documentation may result in sanctions including, but not limited to, termination from Wisconsin Medicaid.

## Information Regarding HealthCheck and Managed Care Organizations

This Update contains fee-for-service policy and applies to members who receive their dental benefits on a fee-for-service basis. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

All HealthCheck requirements must be adhered to for members who receive services under managed care arrangements. ForwardHealth is responsible for medically necessary services not included in the managed care contract. It is the responsibility of the managed care organization to ensure members are aware of HealthCheck and to assist members with accessing benefits and services.

## DID YOU KNOW?

Both comprehensive and interperiodic screens may trigger access to HealthCheck “Other Services.”

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The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).