



Additional Funding Requests

A. Budget Amendment Requests

Budget Amendment (BA) requests are additional funding requests for service costs that exceed a participant's base budget, as calculated by their Individual Budget Allocation (IBA). A BA is requested when a participant has identified a need and associated long-term care outcome that cannot be met by their base budget amount or other Medicaid benefit. If approved, BAs increase the participant's access to additional funding for a requested service.

To ensure an appropriate BA request is being made, these general requirements exist around service plans and the BA request process:

- Department approval for a BA request is required before any of the service units can be authorized on a participant's plan. This means that services which exceed the amount coverable by the participant's base budget may not be authorized on a plan without an approved BA.
- Funds approved through the BA process must be used for the requested service(s) and cannot be transferred to a different service or service type (example: community transportation vs. respite), or different provider type (example: agency vs. Participant Hired Worker).
- Base budgets must be used first, and a BA may only be submitted for excess costs not covered by the base budget or other Medicaid benefit. Additionally, any unallocated amount (amount not currently authorized) within the base budget that exceeds \$25 per month (or \$300 annually) should be applied to the request prior to submission.
- Unused BA funds cannot be applied to a new service; the previously approved BA amount should be updated to reflect actual use.
- A request for a provider's general and uniform rate increase must be evaluated within each participant's service plan and should not be considered automatic grounds for the submission of a BA request.

To ensure that a BA request is the most effective way to meet a participant's identified need and associate long-term care outcome, the participant's ICA assists them throughout the BA request process. The BA request process includes the pre-submission and submission processes, as well as the review of the request and decision issuance.

1. Pre-Submission and Submission Processes

a. Pre-Submission Process

The participant's ICA assists them with preparing the BA request, which will be submitted to the Wisconsin Department of Health Services (DHS) for review. To prepare a thorough BA request, the ICA guides the participant through the pre-submission process, where the ICA

gathers all necessary information to understand the participant's unique needs as it relates to their request. This is also where the ICA will evaluate whether a request is necessary to meet a participant's identified need and associated long-term care outcome as described in Section A.1.a.i.-iii. below.

Before the ICA begins the pre-submission process, the ICA ensures the participant is eligible to request a new BA. If any of the following criteria apply to the participant, they are not eligible to request a new BA, and the ICA should move forward with a request denial and issue a Notice of Action (NOA) ([F-01204](#)):

- Referred for disenrollment from the program for any reason.
- Actively delinquent by one full month in cost-share payments with no repayment agreement established, and/or is not compliant with an existing repayment agreement.
- Actively being investigated for concerns related to program integrity.

i. Identifying the Need

If a participant is eligible for a BA, the first step in the pre-submission process is identifying the need and associated long-term care outcome. This includes assessing the participant's current needs and circumstances, as well as evaluating a participant's existing IRIS Service Plan (ISP) and other available Medicaid benefits for ways to address the newly identified need. The pre-submission process is initiated when a participant identifies an unmet need that exceeds their existing base budget and contacts their ICA to discuss ways to meet their need, including their associated long-term care outcome. Once the participant contacts their ICA, the ICA is responsible for completing the following activities with the participant to establish whether a BA request is appropriate:

- Determine if there is a change in the participant's condition, and whether a new Long-Term Care Functional Screen (referred to as a rescreen or change in condition screen) is necessary. However, a rescreen (or change in condition screen) is not needed if:
 - The participant's screen (or rescreen) has been completed within the last 90 days, and the results are current.
 - The participant has had no change in condition.
- Determine if there has been a change to the participant's circumstances (example: changes in provider access or loss of informal supports).
- Evaluate the participant's ISP to ensure:
 - The Needs Panel is current and reflects all needs identified on the Functional Screen.
 - The Individual Supports and Service Plan (ISSP) is current and reflects all IRIS-funded services, supports, and goods that the participant receives.
- Determine if the participant's need is personal care related. If it is personal care related and the participant has MAPC or SDPC, they should be consulted to determine if there is a personal care recommendation or if a new Personal Care Screen Tool (PCST) may be needed. If the participant does not have personal care, the ICA should assess whether a referral is necessary.

- Assess the participant's service plan, informal supports, other Medicaid benefits or (non-waiver) services, and any additional services to determine if there is another way to address the participant's request. This includes utilizing their existing base budget or evaluating and referring for any medical needs that may be covered by other Medicaid benefits.

After the ICA completes these activities with the participant, the ICA determines whether a BA request is needed. If the ICA determines that a BA request is needed, the ICA will move to the next step of the pre-submission process. If the ICA cannot submit the request because it does not meet program or request requirements, the ICA issues an NOA and appeal rights.

ii. Participant Education

Once the ICA determines a BA request is necessary to meet a participant's identified need and meets the criteria described in this policy, the ICA educates the participant on the BA request process, utilizing the form IRIS Participant Education: Budget Amendments ([E-01205B](#)).

The ICA provides the participant with a summary of the BA process and general expectations for BA submission, review, and decision issuance. This may vary, but should typically consist of, at minimum:

- A summary of the pre-submission, submission and review, and decision process.
- Information on the expedited request process, if applicable.
- Information regarding the Independent Review and appeals processes.
- Request-specific documentation and information needed.

iii. Justifying the Request

The next step in the BA pre-submission process is to begin gathering the information to support the BA request. Any request submitted to DHS must be justified through and directly related to the participant's identified need and associated long-term care outcome. Additionally, ICAs must ensure a participant's plan addresses needs and outcomes in the order of priority, according to the IRIS Service Plan chapter, and ensure non-waiver services and informal supports are captured in the plan.

When evaluating the justification for a BA request, an ICA must consider the following criteria prior to completing a request:

- Is the request needs-based (i.e., identified on the screen) and outcome-driven (i.e., an allowable long-term care outcome)?
- Is the request allowable and cost-effective for this long-term care Medicaid program?
- Is the request addressing an unmet need, rather than duplicating an existing service on the plan?

If the participant's request does not meet these criteria or cannot be justified per this policy, the ICA does not submit a BA request and issues the participant an NOA and appeal rights.

iv. Completing the Request

Once an ICA determines a BA request is justified and meets all requirements of this policy and the request justification has been developed, a BA request must be completed, including the process of gathering accompanying documentation to be submitted to DHS for review. The participant must be informed and involved throughout the duration of the pre-submission process, including the completion of the request.

To complete a BA request, the following documentation must be completed fully per instructions and provided during initial submission:

- **BA Request form (F-01210)**: This includes all information regarding the existing service plan, the identified need and associated long-term care outcome, and the steps taken by the ICA to confirm this need is not already being met or could not be met through existing services or supports. It also includes details regarding the specific service being requested by the participant and the justification for the request.
- **Participant Education (PE) form (F-01205B)**: This includes a signed Budget Amendment-specific PE form, reflecting all related educational information required under section A.1.a.ii above. If the Budget Amendment PE form has been completed within 90 days prior to the date that the request is submitted, an additional form does not need to be signed. Instead, the ICA creates a Case Note to indicate that they had a refresher conversation with the participant, as instructed in section A.1.a.ii of this policy.
- **BA Provider Quote Comparison (PQC) form (F-01210A)**: This includes provider-related information, comparing eligible providers and their quotes for the specific participant's request. Except for requests where the provider will be a Participant Hired Worker, the request must be accompanied by a PQC detailing the quotes of three providers in the service area. If there is not a minimum of three providers available to the participant, the attempt to secure three quotes must be documented and evidenced on the provider quote documentation. The PQC is required to be individualized to the specific participant's needs and the request being made. For instances where a PQC form may not be appropriate (i.e., unique services only provided by one provider or a budget reduction), the ICA may reach out to the DHS' QAS reviewers to confirm whether this form is appropriate or necessary.

Additional documentation may also be required to submit a request. Documentation requirements are dependent on the type of request being made. This means that requests containing certain services, providers, or other unique factors may require additional information or documentation to be provided. When applicable to the requested service or when requested by DHS, additional documentation is expected to be provided before the request can be considered ready for review by DHS. To better understand what documentation may be required for a specific request, refer to the Supporting Documentation Section of the IRIS Budget Amendment Request form.

If any required documentation is missing or is not specific to the participant or their request, DHS will send the request back to the ICA, and the request process will be delayed as a result. Requests may also be denied upon receipt if found to be excessively incomplete or inaccurate.

v. ICA Quality Review

Once the participant's ICA assists them through the completion of the BA request pre-submission process, the BA request is reviewed for quality and compliance prior to submission. Depending on the operational structure of the ICA, this review may be completed by a secondary reviewer, supervisor/manager, or by a dedicated BA submitter. This preliminary quality and compliance review of the BA request is intended to verify that it meets the pre-submission and submission requirements of this policy.

The ICA's BA quality reviewer is responsible for verifying that each request is accurate, complete, and meets program requirements. While performing the quality review, if the ICA determines they are unable to verify or submit the request for any reason that cannot be remediated, the ICA should issue an NOA and appeal rights to the participant.

b. Submission Process

Once the BA request's pre-submission process is completed, including the ICA's quality review, the request is submitted to DHS for review. DHS' Quality Assurance Staff (QAS) reviews the BA request and evaluates if it meets program requirements, including the request's appropriateness, reasonableness, and cost effectiveness. The QAS reviewers will evaluate each request as they are submitted to DHS. Incomplete or inaccurate requests will be sent back to the ICA and may be denied, if appropriate, as stated in section A.1.a.iv. above.

While reviewing the request, the QAS reviewer may request additional information from the ICA as necessary to better evaluate the request. Once the review is complete, the reviewer will issue a decision regarding the request, as detailed in section A.2 of this policy.

c. Procedures

Pre-submission/Submission Processes

Step	Responsible Partner(s)	Detail
1	ICA	Once a potential request has been identified, the ICA ensures the participant is eligible for a BA request. If an ICA determines a participant is not eligible for a BA request or the ICA is unable to move forward with the pre-submission process because it does not meet program or request criteria, the ICA must issue an NOA and appeal rights.
2	ICA	The ICA identifies the request, per section A.1.a.i above. This includes reviewing the participant's current base budget, service plan, informal supports, and other available funding sources, to determine whether IRIS-funded services are the best way to meet the participant's need. The ICA will also evaluate any change in condition or circumstances that may require additional review during this step.
3	ICA	The ICA then justifies the request and educates the participant on the request process and expectations, per

Step	Responsible Partner(s)	Detail
		section A.1.a.ii above. This includes ensuring the participant has been provided and has signed the BA-specific PE form. If a PE form has been reviewed and signed within 90 days prior to the date of request submission, the ICA does not need to obtain completion of an additional form. Instead, the ICA documents the recapped education discussion that took place in the participant’s record within the DHS enterprise care management system.
4	ICA	Then, the ICA completes the BA request, per section A.1.a.iii above. This includes completing the BA request fields in the DHS enterprise care management system, the PQC form, verifying the PE form has been addressed, and gathering any required and applicable information based on the request being made. The ICA should review the Supporting Documentation Section of the BA Request form to ensure that the specific request that is being made has all documentation requirements met to be considered complete.
5	ICA	Once all information has been gathered and documentation completed, the request is validated for quality, accuracy, and completion. The ICA also ensures the request meets all applicable program requirements, including this policy, the Service Definition Manual requirements specific to the service being requested, and any other policy that may be applicable (example: remote services policy, service authorization policy, etc.).
6	ICA	After the request has been reviewed and verified, the ICA submits the request (and all accompanying documentation) to DHS utilizing the DHS enterprise care management system.

2. Review of the Request and Decision Issuance

a. Standard Request Review

Once the request has been submitted to DHS, a QAS reviewer is assigned to the request and begins the review process. While evaluating the request, the QAS reviewer may request additional information from the ICA, as necessary. The reviewer and the ICA may exchange communications (calls, emails, etc.) to support the review process and decision issuance. Any communications that provide necessary or significant information are required to be logged within the request documentation by the party that initiated the communication.

As stated in section A.1.a.iv. in the policy, if a request is not fully complete, it will be sent back to the ICA and is unable to be prioritized according to its initial submission. This may result in a delay in reviewing and issuing a decision for the request.

Once the review is complete, the QAS reviewer will compose a decision letter regarding the request. The ICA issues the decision documentation to the participant. Decision documentation includes a decision letter, as well as an NOA and appeal rights (if

applicable), and any other necessary documentation that may apply to the unique request submitted. The decision types and the associated processes are detailed in the section below.

b. Expedited Request Review

When a BA request is identified as being an urgent need, an expedited review may be requested when the ICA submits the BA request. The ICA may request an expedited review if the duration of time waiting for a decision could jeopardize the participant's health and safety. Additionally, if the ICA is submitting a unique request, the ICA may contact the QAS to confirm whether the unique request is eligible for an expedited review request.

Expedited review requests should be submitted as soon as practicable and without delay. The expedited review process does not impact or lessen the request criteria and documentation requirements. When the ICA indicates that an expedited review is requested, the ICA will be prompted to justify the expedited review request. If the request for an expedited review is verified, the QAS reviewer completes their review of the request within five business days of receipt of a complete and accurate request.

Generally, DHS will not permit requests for expedited review when the request is based on ICA employee turnover, the ICA's failure to submit documents timely, the ICA being unaware of expired BA or provider rate changes, or an already overspent base budget. Additionally, any requests for expedited review due to a provider rate increase will not be considered. If a request for expedited review is not permitted, resubmission of the BA request is not required. Instead, DHS' QAS will process the BA request according to the date of its initial submission, in the order in which it was received.

c. Decision Issuance

i. Approved (Including Approved with Modifications)

Once the QAS reviewer completes their review, they update the request to indicate that a decision has been issued. Within the request, the QAS reviewer includes a decision letter to the ICA indicating the details regarding the decision of approval, including the duration (time limited vs. ongoing), approved rate, approved provider, and any necessary details specific to the request approval. The ICA will send that decision letter to the participant, informing them of the request's approval.

In cases where a BA request is approved, with or without modifications, the total of the base budget is modified to include the BA amount, and it is documented in the participant's service plan. The ICA is responsible for ensuring that the approved amount is incorporated into the base budget accurately, as well as ensuring that the participant's service plan reflects the approved BA request.

ii. Denied

Once the QAS reviewer completes their review, they update the request to indicate that a decision has been issued. Within the request, the QAS reviewer includes a decision letter and an NOA to the ICA indicating the details regarding the decision of denial,

including the reason for denial. The ICA sends the decision letter, the NOA, and appeal rights to the participant, informing them of the request’s denial.

In cases where a BA request is denied and the participant receives an NOA, the participant may request follow-up actions in response to the denial. Participants can request an Independent Review by DHS and/or they can appeal the decision through the State Fair Hearing process.

When a participant requests an Independent Review through DHS, a secondary reviewer assesses the request and decision issued by the initial QAS reviewer. This secondary reviewer either decides to uphold the initial QAS reviewer’s decision to deny, or the secondary reviewer may decide to approve the request. Independent Reviews and decisions issued are detailed in the process steps below.

When a participant appeals the decision through the State Fair Hearing process, they follow the instructions on the Request for a State Fair Hearing - IRIS form ([F-00236B](#)) and submit the completed form to the Division of Hearings and Appeals (DHA). For additional information on appealing a decision, please see the Appeals chapter.

d. Procedures

Standard Request Review Process

Step	Responsible Partner(s)	Detail
1	DHS	DHS evaluates each “Standard” request in the order in which it is received (unless the request is expedited). Note: If a request is incomplete or inaccurate, it will be sent back to the ICA and is unable to be prioritized according to its initial submission. Additionally, if DHS identifies that the participant is not eligible for a BA request, the QAS reviewer will return the request to the ICA with a request for withdrawal. The ICA will issue an NOA and appeal rights to the participant.
2	DHS	If more information related to the request is needed to conduct the review of the submitted request, the QAS reviewer will contact the ICA and request additional information.
3	ICA	If the QAS reviewer reaches out seeking additional information from the ICA, the ICA works with the QAS reviewer to obtain all necessary information to complete the request.
4	DHS	Once the review is complete, the QAS reviewer issues the decision and uploads the decision letter within the DHS enterprise care management system.
5	ICA	The ICA sends the decision documentation to the participant within three business days to formally notify them of the decision. Refer to the Approved and Denied processes below, as necessary, for more details on post-decision requirements.

Expedited Request Review Process

Step	Responsible Partner(s)	Detail
1	ICA	The ICA completes the standard pre-submission and submission processes, as described in this policy.
2	ICA	If the ICA identifies that the duration of time required to conduct the standard review process and issue a decision may jeopardize the participant's health and safety. The ICA indicates that an expedited review is needed during submission, which requires the ICA to provide a justification necessitating the expedited review. The ICA submits the request as usual. Note: If the ICA identifies a request in need of an expedited review for a reason unrelated to health and safety, the ICA needs to receive confirmation from DHS' QAS that an expedited review is appropriate.
3	DHS	DHS verifies that the request for an expedited review is appropriate and necessary.
4	DHS	DHS will review the request and issue a decision within five business days. Refer to the Approved and Denied processes below, as necessary, for more details on post-decision requirements.

Decision Issuance: Approved

Step	Responsible Partner(s)	Detail
1	DHS	When the request is approved, DHS issues an approval letter to the ICA. DHS updates the request's status to "Decision Issued."
2	ICA	The ICA sends the decision documentation to the participant, indicating the request approval within three business days.
3	ICA	The ICA then updates the request's status to "DHS - Contract Compliance Review", indicating they have issued the decision documentation to the participant.
4	ICA	The ICA updates the service plan according to the request approval. Note: Refer to the ISP Development and ISP Development: Service Authorization policies for plan development and authorization development guidance.

Decision Issuance: Denied

Step	Responsible Partner(s)	Detail
1	DHS	When a request is denied, DHS issues a denial letter to the ICA, along with an NOA and participant's appeal rights. DHS updates the request's status to "Decision Issued."
2	ICA	The ICA sends the decision documentation to the participant, indicating the request denial within three business days.

3	ICA	The ICA then updates the request's status to "DHS - Contract Compliance Review", indicating they have issued the decision documentation to the participant.
4	Participant/ICA	Following receipt of the decision, the participant can request an Independent Review and/or a State Fair Hearing. If the participant requests assistance in pursuing either or both, the ICA should assist them in completing the required documentation. Note: For information on the Independent Review process, refer to the details below. For more information on appealing a decision through the State Fair Hearing process, refer to the Appeals chapter.
5	DHS	DHS monitors the IRIS program's inbox for any participant requests for Independent Review or State Fair Hearing request information provided.

Decision Issuance: Denied – Participant Request for Independent Review

Step	Responsible Partner(s)	Detail
1	Participant	Once the participant receives the decision documentation indicating the denial, the participant may request an Independent Review in writing within 15 business days of the effective date of the decision, which is indicated in the letter. This is done by sending additional information and/or clarification to DHS utilizing either of the following contact methods below. The participant can mail the request to DHS at: IRIS Section Manager Attn: Independent Review P.O. Box 7851 1 West Wilson, Room 518 Madison, WI 53707-7851 Or the participant can email DHS at DHSIRISBudgetsandAppeals@dhs.wisconsin.gov , with "Independent Review" in the Subject Line.
2	DHS	DHS receives the Independent Review request and reviews all necessary materials, including the initial BA request and additional information or clarification provided. DHS issues the Independent Review decision within 10 business days and updates the DHS enterprise care management system with the updated decision documentation. Note: The DHS staff person performing the Independent Review is not the same staff person who issued the initial BA request decision.
3	ICA	The ICA sends the updated decision documentation to the participant, indicating the Independent Review's determination within three business days. If the decision was to uphold the

		initial request's denial, then the ICA will also be issuing the updated NOA and appeal rights.
4	ICA	The ICA then updates the request's status to "DHS – Contract Compliance Review", indicating they have issued the updated decision documentation to the participant.

3. Resources

a. Form Links

- i. [IRIS Participant Education: Budget Amendments \(F-01205B\)](#)
- ii. [IRIS Budget Amendment Request \(F-01210\)](#)
- iii. [IRIS Budget Amendment Provider Quote Comparison \(F-01210A\)](#)
- iv. [IRIS Caregiver Daily Task Schedule \(F-03330\)](#)
- v. [Request for a State Fair Hearing – IRIS \(F-00236B\)](#)
- vi. [IRIS Notice of Action \(NOA\) \(F-01204\)](#)