



VIA EMAIL

TO: Tabitha Ramminger, Section Chief, Clinical Policy & Appropriateness Review Section,
Bureau of Benefits Management, Division of Medicaid Services

FROM: Linda A. Hall, Executive Director

DATE: August 18, 2017

RE: WAFCA Comments on Changes to Coverage Policy and Prior Authorization Requirements
for Behavioral Treatment

WAFCA appreciates the opportunity to comment on draft changes to coverage policy and prior authorization requirements for Behavioral Treatment. Our members who are providing these services also appreciate the dialogue that they have been able to have with your team and that several of their suggestions have been incorporated into the draft. We also appreciate that the conversion of this benefit from waiver to fee-for-service has been a significant endeavor.

Our comments are organized using the section headings of the draft. These section-specific comments are followed by comments on the prior authorization process more generally.

45-Hour per Week Guideline Removed. Removing the 45-hour per week limit on treatment will be very helpful in addressing the full treatment needs of children, especially those attending school.

Age-Normed Standardized Testing. Permitting the processing of some PA without a cognitive test result, when the test is not necessary to establish medical necessity, will be beneficial in allowing more treatment to begin promptly.

Two Levels of Treatment. The recognition of both modifiers TF and 52 will be especially useful when two providers are working with the child and family for training purposes or to meet direct supervision requirements. Allowing each to be paid at their appropriate rate is critical to the financing of treatment teams.

Requirements for Technicians Delivering Focused Behavioral Treatment. Please clarify the language in this section that states:

Behavioral treatment technicians must receive direct, face-to-face case supervision during delivery of direct treatment with the member present, from either a treatment therapist or licensed supervisor.

ForwardHealth requires a minimum of one hour of direct case supervision per 10 hours of direct treatment provided by treatment technicians.

The second sentence seems to require one hour of face-to-face supervision for every 10 hours of service. However, the first sentence seems to require that all of the technician's service must be supervised directly.

Members with Significant, Ongoing Behavioral Needs. Again, in this section more clarification of the MA program's interpretation of medical necessity for Behavioral Treatment would be helpful in planning treatment for individuals with ongoing needs.

Managed Care. The carving out of behavioral treatment from managed care organizations seems to be in contradiction to previous statements that managed care organizations, after the initial implementation of Behavioral Treatment, would be assuming PA for their enrollees requiring this service. An explanation of why and how the program reached this decision would be helpful.

How the PA Process is Working. During the course of collecting these comments, members expressed several frustrations with the PA process that are not addressed in this draft guidance.

1. The PA process is taking 2-3 months. While reviewers sometimes backdate the PA children and families have typically been without service for those months to backdating is not as helpful as more prompt renewal approvals.
2. Renewals -- especially the renewals of the first batch of cases that began with the conversion of Behavioral Treatment from waiver to fee-for-service -- are likely to take longer because MA will not be able to process the large numbers of requests being submitted simultaneously. Agencies have requested some staggering of the large batch of PAs that have the same renewal date for the benefit of both the MA reviewers and agency staff, however, there has been no response to this request.
3. MA wants renewals to be submitted only 2 weeks before the end of the approved PA period. This two-week timeline does not match with the programs 2-3 month review timeline. With commercial insurers, providers typically submit renewal requests 4-6 weeks before the end of the approved period and have the renewal approved before the first PA period ends.
4. There is a great deal of variation in what reviewers look for, and expect, in a PA application. This makes it difficult to know how to develop a PA request.

Outpatient PA as it relates to Children in Behavioral Treatment. Behavioral Treatment providers working with children who have also been referred for mental health treatment (e.g., depression, ADHD, RAD) have frequently been told by their therapists that mental health treatment is being denied because the children are receiving Behavioral Treatment. Because the mental health issues are distinct and BCBA's are not qualified to address the mental health issues, barriers to approving these therapy services should be removed.

WAFCA is most interested in being a resource for you as Behavioral Treatment policy changes are finalized and most willing to clarify any of our comments made above.

WAFCA is a member association that works to improve the lives of families and children in Wisconsin.

Our member agencies provide a wide array of prevention and supportive services such as foster care, in-home support, counseling, and mental health treatment. WAFCA represents over 50 child and family serving agencies and leaders in the field and advocates for the more than 250,000 individuals and families that they serve each year.