

FAQs About Residential SUD Treatment Benefit

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ForwardHealth has developed this FAQ document to capture provider-submitted questions about the residential substance use disorder (SUD) treatment benefit launched in February 2021 and share answers. This document will be revised with new information as it is available.

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Covered Services

Date: 06/24/2021

Question: What services are covered by the residential SUD treatment benefit?

Answer: The daily rate for residential SUD treatment services covers the following:

- Assessment and treatment planning
- Individual, group, and family counseling
- Psychoeducation
- Medication management
- Nursing services
- Case management
- Peer support services
- Recovery coaching
- Drug testing to monitor and reinforce individual progress

For more information about services reimbursable through the residential SUD treatment benefit, refer to covered services in the [Treatment Services](#) topic (#22120) in the ForwardHealth Online Handbook.

Date: 06/24/2021

Question: Does the residential SUD treatment benefit cover the cost of room and board, in addition to treatment?

Answer: No. ForwardHealth does not reimburse for room and board costs. Members or other payment sources can be billed for room and board expenses.

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Question: Does the residential SUD treatment benefit cover sober living homes, recovery residences, or community living arrangements?

Answer: No. The benefit covers residential facilities that provide treatment services. These facilities must be certified under Wis. Admin. Code §§ DHS [75.11](#) or [75.14](#).

Date: 06/24/2021

Question: Does the residential SUD treatment benefit cover enhanced treatment services, such as family services?

Answer: No. ForwardHealth will only reimburse for the services outlined in the coverage policy in the [Treatment Services](#) topic (#22120) of the Online Handbook.

Date: 06/24/2021

Question: Does the residential SUD treatment benefit cover child care services for a member's child or children while the member is enrolled in residential SUD treatment services?

Answer: No. ForwardHealth only covers residential SUD treatment services for the covered member who meets eligibility requirements for residential level of care. Members may explore other resources for help with child care expenses while a parent is in treatment.

Date: 06/24/2021

Question: Can residential SUD treatment providers be reimbursed for urine drug testing?

Answer: Drug testing to monitor and reinforce individual progress is included in the daily reimbursement rate for residential SUD treatment services. Urine drug testing by the residential SUD treatment provider is not reimbursed as a separate service.

Laboratories may be reimbursed for testing specimens collected at the residential SUD treatment facility, according to current ForwardHealth policy per the [Testing for Drugs of Abuse](#) topic (#17959) of the Online Handbook. ForwardHealth will **not** reimburse residential SUD treatment providers for specimen collection fees for samples sent for laboratory testing for any date of service with a residential claim.

Date: 06/24/2021

Question: Can members receiving residential SUD treatment services also receive medication-assisted treatment (MAT)?

Answer: Yes. MAT **must** be available to members who require it. Residential SUD treatment providers must provide access to MAT medication on site or assist the member in accessing medication off site. The MAT benefit is reimbursed separately from the daily residential SUD treatment rate. Residential SUD treatment providers may **not** deny services to someone receiving MAT. This includes all forms of MAT, which may be provided via programs certified under Wis. Admin. Code § DHS [75.15](#) or by Medicaid-enrolled prescribers with required waivers to provide MAT.

Date: 06/24/2021

Question: Is MAT covered under the residential SUD treatment benefit?

Answer: No, MAT is not covered under the residential SUD treatment benefit. However, Medicaid-enrolled narcotic treatment service providers and MAT prescribers who provide assessment, drug testing, other disease screening, prescribing, and administration of narcotic medications may be reimbursed **separately** from the residential SUD treatment daily rate.

Pharmacy costs are reimbursed through the pharmacy benefit. Counseling services rendered by narcotic treatment service providers, as required by federal and state rules, are reimbursed through the outpatient substance abuse benefit.

Date: 06/24/2021

Question: Does the residential SUD treatment benefit cover transportation costs?

Answer: No; however, BadgerCare Plus and Wisconsin Medicaid members may use non-emergency medical transportation for transportation to the residential facility and for transportation to Medicaid-coverable medical appointments during residential treatment. Visit the Wisconsin Department of Health Services [non-emergency medical transportation webpage](#) for more information about this service.

Date: 06/24/2021

Question: What resources can a member use to cover services not reimbursed by ForwardHealth, such as room and board or family services?

Answer: Members can explore payment arrangements with the residential SUD treatment provider or seek assistance from other payer sources to help pay for services not covered by the residential SUD treatment benefit.

Members may seek assistance for noncovered services from the following resources:

- Family members or friends
- The county human services or social services agency in the county where they live
- Managed care programs like IRIS (Include, Respect, I Self-Direct), Family Care, and Family Care Partnership

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Question: If ForwardHealth denies a request for residential SUD treatment, can other payers cover treatment at the same level of care?

Answer: ForwardHealth follows the American Society of Addiction Medicine (ASAM) level of care standards when approving or denying authorization requests. Many other payers, including counties, also follow ASAM standards. If the member does not meet criteria for the requested ASAM level of care for ForwardHealth coverage, the member is unlikely to meet criteria for a different payer.

If a requested ASAM level of care is denied by ForwardHealth, providers can submit a request to ForwardHealth for a different ASAM level of care that matches the member's needs.

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Enrollment

Date: 06/24/2021

Question: Does each individual practitioner need to be a Medicaid-enrolled provider to bill residential SUD treatment?

Answer: No. The facility is the enrolled provider.

Date: 06/24/2021

Question: Can a facility enroll to provide more than one level of intensity?

Answer: Yes. A facility can be enrolled as low intensity, high intensity, or both. If a facility is certified to enroll as both, they need to enroll in each intensity level separately.

Date: 06/24/2021

Question: If an agency owns multiple facilities, does each location need its own enrollment?

Answer: Yes, each facility must enroll separately.

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Question: If a facility is not a Medicaid-enrolled provider, can they accept Wisconsin Medicaid patients?

Answer: Yes; however, services provided by non-Medicaid-enrolled providers will **not** be reimbursed by ForwardHealth and other payer sources may require Medicaid members to use their Medicaid coverage. All qualified providers are welcome to enroll with Wisconsin Medicaid. Refer to the [Information for Specific Provider Types](#) page of the Provider Enrollment Information area of the ForwardHealth Portal for more information.

Care Coordination

Date: 06/24/2021

Question: Who should residential SUD treatment providers contact to coordinate care when a member is admitted to their facility?

Answer: For members enrolled in an HMO, IRIS, or managed care organization (MCO), residential SUD treatment providers are expected to notify the HMO, IRIS, or MCO within 48 hours of the member's admission per the [Coordination With Managed Care Services](#) topic (#22182) of the Online Handbook. If other agencies, such as the member's county human service agency, are providing or coordinating care for the member, these agencies should be contacted too.

ForwardHealth encourages coordination with other care providers (such as case managers and counselors). For HMO and MCO contact information, visit the [Residential Substance Use Disorder Treatment Benefit Resource page](#) of the Portal.

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Question: How can a member find a Medicaid-enrolled residential SUD treatment provider?

Answer: Members can contact 211 by visiting the [Wisconsin Addition Recovery Helpline webpage](#) of the 211 website or by calling either 2-1-1 or 833-944-4673 to be connected with available providers. Members can also use the [Provider Directory Search](#) tool on the Portal. Members should select **BadgerCare Plus/Medicaid** as the program. They should select **Other** as the provider type. For provider specialty, members should select the **Residential Substance Use Treatment** category and search by county.

Claims and Billing

Date: 06/24/2021

Question: When a BadgerCare Plus or Wisconsin Medicaid member is enrolled in an HMO or MCO, should claims be submitted to ForwardHealth fee-for-service or to the HMO or MCO plan?

Answer: All claims for residential SUD treatment services should be submitted to ForwardHealth. The benefit is considered a fee-for-service benefit.

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Question: When should providers submit claims for services?

Answer: Providers may submit claims as often as they like. ForwardHealth recommends submitting claims monthly at least. All claims and adjustment requests must be received within 365 days of the date of service per current ForwardHealth policy in the [Submission Deadline](#) topic (#547) of the Online Handbook.

Date: 06/24/2021

Question: How should claims be submitted when a member also has private insurance?

Answer: Wisconsin Medicaid or BadgerCare Plus is the payer of last resort. Providers are required to make a reasonable effort to exhaust all other existing health insurance sources before submitting claims to ForwardHealth. For more information, refer to the [Payer of Last Resort](#) topic (#253) of the Online Handbook.

Date: 06/24/2021

Question: What is the reimbursement rate for residential SUD treatment services?

Answer: Reimbursement rates are available on the [Residential SUD Treatment Benefit Resources page](#) of the Portal.

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Question: Is reimbursement available on the date of admission and the date of discharge?

Answer: No. ForwardHealth allows reimbursement for the date of admission but **not** the date of discharge. The member's last full day of service prior to discharge is the last billable date of service.

Prior Authorization

Date: 06/24/2021

Question: Who should submit prior authorization (PA) requests?

Answer: Clinical or administrative staff can submit the PA documentation through the Portal. Clinical staff are responsible for preparing clinical documentation as described in Wis. Admin. Code § [DHS 75](#).

Date: 06/24/2021

Question: What information is required for an initial authorization for treatment?

Answer: The following forms can be found on the [Forms page](#) of the Portal and **both** are required for initial requests for treatment:

- A completed Prior Authorization Request Form (PA/RF), F-11018 (05/2013)
- A completed Prior Authorization/Residential Substance Use Disorder Treatment Attachment (PA/RSUD) form, F-02567 (01/2021), which includes diagnostic information and ASAM criteria

Approval criteria for initial requests are provided in the [Approval Criteria for Initial Prior Authorization Requests](#) topic (#22141) of the Online Handbook. Initial requests can be submitted via the Portal and may result in automatic approval of the first 10 days of treatment.

Date: 06/24/2021

Question: Who can perform the diagnostic evaluation that is required for residential SUD treatment PA?

Answer: The diagnostic evaluation must be conducted by a clinician acting within their scope of practice. The clinician may be employed by the residential SUD treatment facility or may be another professional who has seen the member for evaluation, treatment, or medical care. If the diagnosis was made by another professional, the following must be documented by residential facility staff in the member's initial assessment:

- The professional's name
- The professional's credentials
- The date the member was seen
- The diagnostic conclusions

If a mental health condition is suspected or identified at intake, the member can begin SUD treatment without a diagnostic evaluation of the psychiatric symptoms, but formal diagnosis and treatment should be part of the member's plan of care. If the member's mental health symptoms are too severe to allow effective participation in residential SUD treatment, the symptoms should be addressed before or concurrently with the initiation of SUD treatment.

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Question: How soon can a provider submit an amendment to extend the initial PA request?

Answer: A provider can submit an amendment to extend the initial PA the day after an initial PA request is approved.

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Question: What information is required to extend the approval of an initial PA request?

Answer: Requests to extend an authorization up to 30 days require the documents outlined in the [Prior Authorization Requirements for Requests to Extend Services up to 30 Days](#) topic (#22158) of the Online Handbook. Requests to extend an authorization beyond 30 days require the documents outlined in the [Prior Authorization Requirements for Requests to Extend Services Beyond 30 Days](#) topic (#22177) of the Online Handbook.

When requesting an extension, providers must complete the Prior Authorization Amendment Request form, F-11042 (07/2012), and indicate the updated expiration date in Element 9 (Requested End Date [If Different from Expiration Date of Current PA]) and update the quantity of units requested to reflect the additional days of service. For example, if the current authorization ends on January 20 and 10 additional days of service are desired, update the expiration date to January 30 and indicate that an additional 10 units of service are requested.

Date: 06/24/2021 **Question: What clinical information should be included with requests to extend a PA approval?**

Answer: Approval criteria to extend authorizations up to 30 days are provided in the [Approval Criteria for Prior Authorization Amendments to Request an Extension up to 30 Days from the Date of Admission](#) topic (#22142) of the Online Handbook. Approval criteria to extend authorizations beyond 30 days are provided in the [Approval Criteria for Prior Authorization Amendments to Request an Extension Beyond 30 Days](#) topic (#22157) of the Online Handbook. Providers should carefully review the approval criteria and ensure that they are providing all the required information.

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Question: Can a PA amendment request be used to move a member to a different level of care?

Answer: No. A new level of care is considered a new service. A new authorization with updated clinical documentation is required. The request should indicate that the member is transitioning from one level of care to another and include a summary of the member's outcomes from the previous level of care.

Date: 06/24/2021

Question: What can a member do if ForwardHealth denies a request for treatment?

Answer: If ForwardHealth denies a service request, the member may choose to appeal the decision. Members, **not** providers, are granted appeal rights. Instructions for submitting an appeal are sent to members when a requested service is denied or modified.