

Family Survey on Medicaid Prior Authorization for Therapy and DME Services

Within the past year, the Department of Health and Family services began initiating some changes to the Medicaid Prior Authorization process as it relates to payment for therapy services. In order to provide important feedback on these changes to the Wisconsin Legislature, we would like to know if these changes have had an impact on your ability to access therapy and Durable Medical Equipment (DME) services for your child.

Please assist us in answering the following questions about your family's experience with Wisconsin Medicaid Prior Authorization for therapies and (DME):

Does your child's therapy provider currently access or have they accessed Medicaid through SSI, Katie Beckett, or Badgercare to pay for community-based therapy services in the past year? YES or NO

If you answered "YES" please complete & return this survey as described below.

Does your child's therapy provider currently access any commercial insurance plan for therapy payment before accessing Medicaid? YES = 28

Please answer the following questions from your family's experience:

My child has used Medicaid for payment of: (check all that apply)

Occupational Therapy (OT) **119**

Physical Therapy (PT) **109**

Speech Therapy (SLP) **106**

Durable Medical Equipment **83**

My child receives therapy from the following provider settings: (check all that apply)

Birth-3 (B-3) **12**

School-Based Services (SBS) **107**

Clinic/Community/Home-Based Services **98**

Hospital Clinic-Based **24**

Please rate your experience on a scale of 1-4 as you answer the following questions:

1=not true, 2=occasionally true, 3=often true, 4= always true N/A= Not applicable

We have had the following experiences with the WI Medicaid Prior Authorization for Clinic/ Community /Home-Based Services:

1. My Provider has told me that Prior Authorization for services for my child was very time- consuming **3- often true**
1= 16; 2=16; 3=27; 4=53; 5=11
2. My Provider has told me that Prior Authorization for services for my child was a timely process **3 – often true**
1=38; 2=12; 3=28; 4=32; 5=12
3. My provider did not talk with me about Medicaid Prior Authorization. **2 - occasionally true**
1=87; 2=12; 3=8; 4=9; 5=8
4. My provider asked for information from me for my child's prior authorization. **3- often true**
1=16; 2=13; 3=25; 4=58; 5=9
5. My provider had several requests for more information from the Medicaid Program for my child's prior authorization approval **3- often true**
1=16; 2=25; 3=44; 4=23; 5=18
6. My provider rarely receives requests to provide more information for my child's therapy approval. **2- occasionally true**
1=55; 2=31; 3=10; 4=11; 5=12
7. My child's therapy services are often approved by Medicaid at the frequency and number of weeks that the therapist requested. **2 – occasionally true**
1=35; 2=23; 3=34; 4=17; 5=13
8. My child's therapy services have been shortened in the number of sessions or weeks of therapy requested of Medicaid. **2 –occasionally true**
1=30; 2=24; 3=27; 4=26; 5=13
9. My child had continuous service while waiting for processing of the Prior Authorization. **2 – occasionally true**
1=53; 2=12; 3=25; 4=27; 5=17

10. My child missed therapy sessions while waiting for processing of the Prior Authorization. **2 – occasionally true**
1=43; 2=16; 3=25; 4=28; 5=10
11. My child was denied therapy services by Medicaid because they were not considered “medically necessary”. **2 – occasionally true**
1=44; 2=18; 3=22; 4=29; 5=12
12. My child’s therapy services were approved. **3 – often true**
1=13; 2=26; 3=33; 4=33; 5=7
13. My child was denied therapy services in the community because he/she was already receiving services in the schools. **2 – occasionally true**
1=45; 2=14; 3=19; 4=25; 5=14
14. My child qualifies for therapy services both in the schools & the community. **3 – often true**
1=22; 2=16; 3=21; 4=50; 5=17
15. My family’s overall experience with Medicaid has been easy. **2 – occasionally true**
1=47; 2=38; 3=24; 4=12; 5=9
16. My family’s overall experience with Medicaid has been difficult. **3 – often true**
1=19; 2=36; 3=27; 4=33; 5=6
17. My child’s development & health have been affected by services reduced or denied by Medicaid. **2 – occasionally true**
1=29; 2=28; 3=25; 4=24; 5=17
Please describe briefly how you feel your child was affected:

Medicaid services have helped my daughter alot. Our family feels like it is always on a rollercoaster waiting for whether or not PT or OT are going to be approved "this time". It seems like they ask alot of questions that are answered over and over again. I don't think my child changes that much over a few months that they have to ask all of these questions again and again- my daughter is 8 years old- I can't imagine that we will be doing this over and over again until she is at her best! Who pays for all of this paper going back and forth?

18. My child’s therapy provider has discussed the possibility of NOT being willing to bill Medicaid for therapy services. **2 – occasionally true**
1=72; 2=12; 3=24; 4=8; 5=15
If so, why?

Independent providers (and some of the best therapists fall in this group) with minimal support staff are finding it harder to manage MA patients billings due to the amount of time it takes in authorizations and billing AND because of the low reimbursement they get for the services they provide (sometimes half of the fair professional fee non-MA providers can get) I have seen very talented providers go to private pay only. Unfortunately, they can only be accessed by the wealthy.

19. What impact has your ability to access Medicaid therapy services had on your child & family’s health, function and well being?

Because the process is very time consuming and difficult to receive/achieve services, we did not attempt the hurdle of having to fight with someone else to receive services for our child. We feel because to process was made so prohibitive that our child missed out on some very necessary speech, occupational and physical therapy that would have enhanced his ability to provide for himself in the future and enable him to be a more productive citizen in his environment.

20. Please describe any changes noted in the past nine months in the above areas of Medicaid Prior Authorization:

None that I can see!

21. Please offer any ideas you have to improve the prior authorization process:
Simplify the PA's and the process!!!!, >by not have so many layers of so many different people, paper work, and so many different departments reviewing the information. Keep the same person reviewing the PA per case so every 6 months the same person is reviewing the same case for consistency.....the way it is now there are so many different people at MA reviewing each monthly therapy/doctor reports every month and then totally different people reviewing each PA every 6 months. How can one honestly understand the child's need for therapy, when so, so many different people are reviewing so many different parts of the child's data/case/therapy program all the time.
Also, make the letter of any denial/modification of the PA to the parents crystal CLEAR of what has been denied and/or modified in a PA, so the parents don't have to call 6 or MORE people from MA/EDS and the parents or anyone at MA/ITSELF> AND STILL NOT know what has been modified and/or denied in for therapy for their child's PA. As not even.