



STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of



DECISION
Case #: MPA - 175638

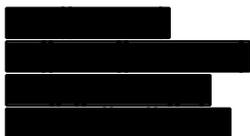
PRELIMINARY RECITALS

Pursuant to a petition filed July 20, 2016, under Wis. Stat., §49.45(5), to review a decision by the Division of Health Care Access and Accountability (DHCAA) to deny Medical Assistance (MA) authorization for speech therapy (ST), a hearing was held on September 7, 2016, by telephone.

The issue for determination is whether the DHCAA correctly denied the requested ST because the goals were the same as school ST and were very similar to ongoing in-home autism services.

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, WI 53703

By: Written submission of [Redacted], ST Consultant
Division of Health Care Access and Accountability
P.O. Box 309
Madison, WI 53701-0309

ADMINISTRATIVE LAW JUDGE:

Brian C. Schneider
Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner is a 5-year-old resident of Columbia County who receives MA.
2. Petitioner has autism and expressive language disorder. He receives regular in-home autism treatment. He receives services as part of an individualized education program (IEP) at school.

3. On June 6, 2016, Divine Savior Healthcare requested prior authorization for twice weekly ST for twelve summer weeks, PA n. [REDACTED]. By a letter dated July 8, 2016 the DHCAA denied the request.
4. Petitioner received a speech generating device (SGD) in 2015. Both his school ST and his in-home autism program works with petitioner to gain communication using the device.
5. The goals listed by the Divine Savior therapist are essentially the same as in the IEP and in-home autism program. In addition there is no evidence that the private therapist coordinated the summer ST with the school therapist.

DISCUSSION

Speech and language therapy is an MA-covered service, subject to prior authorization after the first 35 treatment days. Wis. Admin. Code, §DHS 107.18(2). In determining whether to approve such a therapy request, the Bureau employs the generic prior authorization criteria found at §DHS 107.02(3)(e). Those criteria include the requirements that a service be medical necessary, appropriate, and an effective use of available services. Included in the definition of “medically necessary” at §DHS 101.03(96m) are the requirements that services not be duplicative of other services, and that services be cost effective when compared to alternative services accessible to the recipient. When speech therapy is requested for a school age child in addition to therapy provided by the school system, the request must substantiate the medical necessity of the additional therapy as well as the procedure for coordination of the therapies. Prior Authorization Guidelines, Physical, Occupational, and Speech Therapy, Topics 2781 and 2784. It is up to the provider to justify the provision of the service. §DHS 107.02(3)(d)6.

In this case the goals of the proposed summer therapy are virtually identical to the school therapy and the autism program. It appears that the school therapist worked with the autism program to continue working on therapy with the SGD during the summer, so it was unclear to the DHCAA consultant why the private therapy was requested.

Petitioner’s mother testified that the goal of the summer therapy was to work on speaking, but the Divine Savior therapist did not make that clear in the request. The DHCAA can make a determination only on the information provided in the request, and as a result I must conclude that the denial was correct because the request made it appear that the summer ST was a duplication of the services already provided.

CONCLUSIONS OF LAW

The DHCAA correctly denied the request for summer ST because the request was duplicative of services already being provided.

THEREFORE, it is

ORDERED

That the petition for review is hereby dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN

INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,
Wisconsin, this 13th day of September, 2016

\s _____
Brian C. Schneider
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin \DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on September 13, 2016.

Division of Health Care Access and Accountability