

Verifying Health Care Service Prior Authorizations

Wisconsin has out-of-state and travel distance limitations unless there is a health care service prior authorization (PA) on file. Wisconsin also has service limitations without a PA on file.

When is a Wisconsin Medicaid provider considered enrolled as an “in state” vs.” out of state” provider?

Many health care providers located near the state line of states that border Wisconsin (Minnesota, Michigan, Iowa, and Illinois) are enrolled with Wisconsin Medicaid and have “**in state**” status. Telehealth providers are also considered “in-state” if they provide services to WI members located in the state at the time of the service. They will appear in Veyo’s provider search from the download. (Example: Mayo Clinic in Rochester, Minnesota)

Health care providers in destinations (states) that do not border Wisconsin are considered true “**out of state**” providers and will not appear in Veyo’s provider search. Some providers in bordering states may also have “out of state” status and also will not appear in Veyo’s provider search.

When is a Prior Authorization (PA) required for the health care service?

Most health care services do not need authorization before the service occurs; however, “**In state**” health care providers are required to obtain (PA) for some health care services. See the Veyo WI protocols regarding covered services that require prior authorization.

All non-emergency health care services provided by an “**out of state**” provider require prior authorization.

In situations where a PA is required, Veyo will need to verify if there is a prior authorization on file for the health care service in order to provide transport to that service. To verify the PA is on file, Veyo staff will need to contact the appropriate entity depending on if the member is a Fee-for-Service member or enrolled in an HMO.

How do I know when a health care prior authorization is needed?

Refer to the appropriate Fee-for-Service or HMO table below for workflow.



Fee-For-Service Members (FFS)

Below is a workflow table for FFS members. To verify there is a health care service prior authorization (PA) on file for an FFS member, Veyo staff will need to contact the PA department at Gainwell. The PA department at Gainwell *cannot* approve transportation, they can only verify if there is a PA on file for the health care service. Veyo will need to determine if the transportation is approved based on ForwardHealth policy.

FFS verification will occur via an email sent to vedstravelreq@wisconsin.gov using the template at the bottom of this document.

Circumstance FFS Member	Workflow
Destination outside of Wisconsin/less than 100 miles/destination in provider search	Agent sets trip at time of call.
Destination outside of Wisconsin/less than 100 miles/destination not in provider search	After confirming with the health care provider they are not an enrolled provider for Wisconsin Medicaid, Agent will inform the caller that someone may reach out to them regarding this transportation. The Call Center Portal will send this transportation to the Account Portal in an 'Authorization Pending' mode. A Veyo Clinical Coordinator will email Gainwell and then approve/set trip or deny according to information received in email from Gainwell regarding PA.
Destination outside of Wisconsin/over 100 miles/destination in provider search	Agent will inform the caller that someone may reach out to them regarding this transportation. The Call Center Portal will send this transportation to the Account Portal in an 'Authorization Pending' mode. A Veyo Clinical Coordinator will fax Distance Verification Form to referring/rendering healthcare provider and then approve/set trip or deny according to information received on Distance Verification Form.
Destination outside of Wisconsin/over 100 miles/destination not in provider search	After confirming with the health care provider they are not an enrolled provider for Wisconsin Medicaid, Agent will inform the caller that someone may reach out to them regarding this transportation. The Call Center Portal will send this transportation to the Account Portal in an 'Authorization

	<p>Pending' mode. A Veyo Clinical Coordinator will email Gainwell and then approve/set trip or deny according to information received in email from Gainwell regarding PA.</p>
<p>Destination in Wisconsin/over 100 miles/ destination in provider search</p>	<p>Agent will inform the caller that someone may reach out to them regarding this transportation. The Call Center Portal will send this transportation to the Account Portal in an 'Authorization Pending' mode. A Veyo Clinical Coordinator will fax Distance Verification Form to referring/rendering healthcare provider and then approve/set trip or deny according to information received on Distance Verification Form.</p>
<p>Destination in Wisconsin/over 100 miles/ destination not in provider search</p>	<p>Agent will inform the caller that someone may reach out to them regarding this transportation. The Call Center Portal will send this transportation to the Account Portal in an 'Authorization Pending' mode. A Veyo Clinical Coordinator will verify healthcare provider is MA enrolled provider, fax Distance Verification Form to referring/rendering healthcare provider and then approve/set trip or deny according to information received on Distance Verification Form.</p>



HMO Members Out of State Travel

Below is a workflow table for HMO members. HMOs will determine if it is necessary a member travels to an out of state provider. HMO verification will occur via an email sent to the specific HMO using the HMO Contact Information Table in Section G of the Wisconsin Protocol. The email template for this email can be found at the bottom of this document.

Circumstance HMO Member	Workflow
Destination in or outside of Wisconsin/ destination in provider search	Agent sets trip at time of call.
Destination outside of Wisconsin/ destination not in provider search	The Call Center Portal will send this transportation to the Account Portal in an 'Authorization Pending' mode. A Veyo Clinical Coordinator will contact HMO and then approve/set trip or deny according to information received from HMO.
Destination in Wisconsin/ destination not in provider search	Agent sets trip at time of call. Call Center Portal will send this transportation to the Account Portal in an 'Authorization Pending' mode. Clinical Coordinator will verify healthcare provider is a MA enrolled provider.

Email Template

Prior Authorization Inquiry

Member's ForwardHealth ID:			Date of Service:			Service Being Requested:		
Medical Provider or Medical Facility Name:								
Medical Provider or Medical Facility Location:								
Form completed by:			Title:			Member has a PA on file for the medical service requested:		
						<input type="checkbox"/> Yes <input type="checkbox"/> No		