

gible for certification as providers of EPSDT health assessment and evaluation services:

1. Physicians;
2. Outpatient hospital facilities;
3. Health maintenance organizations;
4. Visiting nurse associations;
5. Clinics operated under a physician's supervision;
6. Local public health agencies;
7. Home health agencies;
8. Rural health clinics;
9. Indian health agencies; and
10. Neighborhood health centers.

(b) *Procedures and personnel requirements.* 1. EPSDT providers shall provide periodic comprehensive child health assessments and evaluations of the general health, growth, development and nutritional status of infants, children and youth. Immunizations shall be administered at the time of the screening if determined medically necessary and appropriate. The results of a health assessment and evaluation shall be explained to the recipient's parent or guardian and to the recipient if appropriate.

2. EPSDT health assessment and evaluation services shall be delivered under the supervision of skilled medical personnel. In this section "skilled medical personnel" means physicians, physician assistants, nurse practitioners, public health nurses or registered nurses. Skilled medical personnel who perform physical assessment screening procedures shall have successfully completed either a formal pediatric assessment or an inservice training course on physical assessments approved by the department. Individual procedures may be completed by paraprofessional staff who are supervised by skilled medical personnel. Registered nurses who perform EPSDT physical assessments shall have satisfactorily completed a curriculum for pediatric physical assessments approved by the department.

3. All conditions uncovered which warrant further care shall be diagnosed or treated or both by the provider, if appropriate, or referred to other appropriate providers. A referral may either be a direct referral to the appropriate health care provider or a referral recommendation submitted through the agency responsible for the patient's case management and advocacy.

4. Health maintenance organizations and prepaid health plans providing EPSDT services shall meet all requirements of 42 CFR 441.60 in addition to the requirements under subs. 1 to 3.

(c) *Records and documentation.* 1. Certified providers of EPSDT screening services shall:

- a. Complete the department's EPSDT claim form and an individual health and developmental history for each client; and

b. Maintain a file on each client receiving EPSDT services which includes a copy of the EPSDT claim form, individual health and developmental history and follow-up for necessary diagnosis and treatment services.

2. The EPSDT provider shall release information on the results of the health assessment to appropriate health care providers and health authorities when authorized by the patient or the patient's parent or guardian to do so.

(2) **EPSDT CASE MANAGEMENT ACTIVITIES.** (a) *Case management reimbursement.* Providers certified under sub. (1) as providers of EPSDT health assessment and evaluation services shall be eligible to receive reimbursement for EPSDT case management in accordance with the limitations contained in the case management agreement between the provider and the department.

(b) *Case management plan.* 1. All EPSDT providers who apply to receive reimbursement for EPSDT case management services shall submit to the department a case management plan. The case management plan shall describe the geographic service area, target population, coordination with support activities conducted by the department and other health-related services, case management activities and the method of documenting the activities.

2. The department shall evaluate the adequacy of each provider's case management plan according to the case management requirements of the proposed service area and target population, the extent to which the plan would ensure that children receive the necessary diagnosis and treatment services for conditions detected during EPSDT health examinations, the proposed coordination with the EPSDT central notification system and other health related services, and proposed methods for documenting case management services. Based on the evaluation, the department shall either approve or deny the provider's request for reimbursement of case management activities and shall impose on providers as conditions for reimbursement any personnel, staffing or procedural requirements that it determines are necessary pursuant to 42 CFR 441 Part B.

(c) *Records and documentations.* Providers shall maintain records and documentation required by the department in order to verify appropriate use of funds provided by the department for EPSDT case management activities.

(3) **DIAGNOSIS AND TREATMENT SERVICES.** Providers of diagnosis and treatment services for EPSDT recipients shall be certified according to the appropriate provisions of this chapter.

Note: For covered EPSDT services, see s. HSS 107.22.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.38 Certification of ambulance providers. (1) For MA certification, ambulance service providers shall be licensed pursuant to s. 146.50, Stats., and ch. HSS 110, and shall meet ambulance inspection standards of the Wisconsin department of transportation under s. 341.085, Stats., and ch. Trans 309.

(2) An ambulance service provider that also provides air ambulance services shall submit a separate application under s. HSS 105.01 for certification as an air ambulance provider.

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Note 1: For a copy of the application form for an ambulance service provider license, write the EMS Section, Division of Health, P.O. Box 309, Madison, Wisconsin, 53701.

Note 2: For covered transportation services, see s. HSS 107.23.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86; renum. 105.38 to 105.38 (1) and am., cr. (2), Register, November, 1994, No. 467, eff. 12-1-94.

HSS 105.39 Certification of specialized medical vehicle providers. (1) For MA certification, a specialized medical vehicle provider shall meet the requirements of this section and shall sign the affidavit required under sub. (6) stipulating that the provider is in compliance with the requirements of this section as well as with the requirements of the department of transportation for human service vehicles under ss. 110.05 and 340.01 (23) (g), Stats., and ch. Trans. 301, and shall provide proof of compliance when requested by the department.

(2) **VEHICLES.** (a) Insurance of not less than \$250,000 personal liability for each person, not less than \$500,000 personal liability for each occurrence and not less than \$10,000 property damage shall be carried on each specialized medical vehicle used to transport a recipient.

(b) Each vehicle shall be inspected and the inspection documented at least every 7 days by an assigned driver or mechanic, to ensure:

1. The proper functioning of the vehicle systems including but not limited to all headlights, emergency flasher lights, turn signal lights, tail lights, brake lights, clearance lights, internal lights, windshield wipers, brakes, front suspension and steering mechanisms, shock absorbers, heater and defroster systems, structural integrity of passenger compartment, air conditioning system, wheelchair locking systems, doors, lifts and ramps, moveable windows and passenger and driver restraint systems;

2. That all brakes, front suspension and steering mechanisms and shock absorbers are functioning correctly;

3. That all tires are properly inflated according to vehicle or tire manufacturers' recommendations and that all tires possess a minimum of 1/8-inch of tread at the point of greatest wear; and

4. That windshields and mirrors are free from cracks or breaks.

(c) The driver inspecting the vehicle shall document all vehicle inspections in writing, noting any deficiencies.

(d) All deficiencies shall be corrected before any recipient is transported in the vehicle. Corrections shall be documented by the driver. Documentation shall be retained for not less than 12 months, except as authorized in writing by the department.

(e) Windows, windshield and mirrors shall be maintained in a clean condition with no obstruction to vision.

(f) Smoking is not permitted in the vehicle.

(g) Police, sheriff's department and ambulance emergency telephone numbers shall be posted on the dash of the vehicle in an easily readable manner. If the vehicle is not equipped with a working two-way radio, sufficient money in suitable denominations shall be carried to enable not less than 3 local telephone calls to be made from a pay telephone.

(h) A provider shall maintain a list showing for each vehicle its registration number, identification number, license number, manufacturer, model, year, passenger capacity, insurance policy number, insurer, types of restraint systems for wheelchairs and whether it is fitted with a wheelchair lift or with a ramp. Attached to the list shall be evidence of compliance with ch. Trans. 301.

(3) **VEHICLE EQUIPMENT.** (a) The vehicle shall be equipped at all times with a flashlight in working condition, a first aid kit and a fire extinguisher. The fire extinguisher shall be periodically serviced as recommended by the local fire department.

(b) The vehicle shall be equipped with a lift or ramp for loading wheelchairs. The vehicle shall also be equipped with passenger restraint devices for each passenger, including restraint devices for recipients in wheelchairs or on cots or stretchers as defined in s. HSS 107.23 (1) (c) 4. Both a recipient and the recipient's wheelchair, cot or stretcher shall be secured.

(4) **DRIVERS.** (a) Each driver shall possess a valid regular or commercial operator's license which shall be unrestricted, except that the vision restrictions may be waived if the driver's vision is corrected to an acuity of 20/30 or better by the use of corrective lenses. In this event, the driver shall wear corrective lenses while transporting recipients.

(b) 1. Each driver before driving a vehicle or serving as an attendant shall have received all of the following:

a. Basic Red Cross or equivalent training in first aid and cardiopulmonary resuscitation (CPR);

b. Specific instructions on care of passengers in seizure; and

c. Specific instructions in the use of all ramps, lift equipment and restraint devices used by the provider.

2. A driver who was employed before December 1, 1994 and who atests in writing that he or she has had prior training in the topics under subd. 1 shall be considered to have fulfilled the requirements under subd. 1.

3. Each driver shall receive refresher training in first aid every 2 years and refresher training in CPR annually. A driver who is an emergency medical technician licensed under ch. HSS 110, 111 or 112, a licensed practical nurse, a registered nurse or a physician assistant shall be considered to have met this requirement by completion of continuing education which includes first aid and CPR.

(c) The provider shall maintain a current list of all drivers showing the name, license number and any driving violations or license restrictions of each and shall keep that list current.

(5) **COMPANY POLICY.** Company policies and procedures shall include:

(a) Compliance with state and local laws governing the conduct of businesses, including ch. Trans. 301.

(b) Establishment and implementation of scheduling policies that assure timely pick-up and delivery of passengers going to and returning from medical appointments;

(c) Documentation that transportation services for which MA reimbursement is sought are:

1. For medical purposes only;
2. Ordered by the attending provider of medical service; and
3. Provided only to persons who require this transportation because they lack other means of transport, and who are also physically or mentally incapable of using public transportation;

(d) Maintenance of records of services for 5 years, unless otherwise authorized in writing by the department; and

(e) On request of the department, making available for inspection records that document both medical service providers' orders for services and the actual provision of services.

(6) **AFFIDAVIT.** The provider shall submit to the department a notarized affidavit attesting that the provider meets the requirements listed in this section. The affidavit shall be on a form developed by and available from the department, and shall contain the following:

- (a) A statement of the requirements listed in this section;
- (b) The date the form is completed by the provider;
- (c) The provider's business name, address, telephone number and type of ownership;
- (d) The name and signature of the provider or a person authorized to act on behalf of the provider; and
- (e) A notarization.

Note: For covered transportation services, see s. HSS 107.23.

(7) **DENIAL OF RECERTIFICATION.** If a provider violates provisions of this chapter, s. HSS 106.06, s. HSS 107.23 or any other instruction in MA program manuals, handbooks, bulletins or letters on provision of SMV services 3 times in a 36-month period, the department may deny that provider's request for re-certification.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86; am. (1), (2) (a), (b) (intro.), 1., (3) (a), (b), (4) (a), (5) (a), renum. (2) (b) 2. and 3. to be 3. and 4., cr. (2) (b) 2., (h), (7), r. and recr. (4) (b), (c), Register, November, 1994, No. 467, eff. 12-1-94.

HSS 105.40 Certification of durable medical equipment and medical supply vendors. (1) Except as provided in sub. (2), vendors of durable medical equipment and medical supplies shall be eligible to participate in the MA program.

(2) Orthotists and prosthetists who develop and fit appliances for recipients shall be certified by the American board for certification in orthotics and prosthetics (A.B.C.). Certification shall be a result of successful participation in an A.B.C. examination in prosthetics, orthotics, or both, and shall be for:

- (a) Certified prosthetist (C.P.);
- (b) Certified orthotist (C.O.); or
- (c) Certified prosthetist and orthotist (C.P.O.)

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Note: For covered durable medical equipment and medical supply services, see s. HSS 107.24.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.41 Certification of hearing aid dealers. For MA certification, hearing aid dealers shall be licensed pursuant to s. 459.05, Stats.

Note: For covered hearing aids and supplies, see s. HSS 107.24.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.42 Certification of physician office laboratories. (1) REQUIREMENTS. For MA certification, physician office laboratories, except as noted in sub. (2), shall be licensed pursuant to s. 143.15, Stats., and ch. HSS 165.

(2) EXCEPTION. Physician office laboratories servicing no more than 2 physicians, chiropractors or dentists, and not accepting specimens on referral from outside providers, are not required to be licensed under s. 143.15, Stats., or to meet ch. HSS 165 standards. These laboratories, however, shall submit an affidavit to the department declaring that they do not accept outside specimens.

(3) MEDICARE CERTIFICATION REQUIREMENT. Physician office laboratories which accept referrals of 100 or more specimens a year in a specialty shall be certified to participate in medicare in addition to meeting the requirements under sub. (1).

Note: For covered diagnostic testing services, see s. HSS 107.25.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.43 Certification of hospital and independent clinical laboratories. For MA certification, a clinical laboratory that is a hospital laboratory or an independent laboratory shall be licensed pursuant to s. 143.15, Stats., and ch. HSS 165. In addition, the laboratory shall be certified to participate in medicare and meet the requirements of 42 CFR 405.1310 to 405.1317.

Note: For covered diagnostic testing services, see s. HSS 107.25.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.44 Certification of portable x-ray providers. For MA certification, a portable x-ray provider shall be directed by a physician or group of physicians, registered pursuant to s. 140.54, Stats., and ch. HSS 157, certified to participate in medicare, and shall meet the requirements of 42 CFR 405.1411 to 405.1416.

Note: For covered diagnostic testing services, see s. HSS 107.25.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.45 Certification of dialysis facilities. For MA certification, dialysis facilities shall meet the requirements enumerated in ss. HSS 152.05 and 152.08, and shall be certified to participate in medicare.

Note: For covered dialysis services, see s. HSS 107.26.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86; correction made under s. 13.93 (2m) (b) 7, Stats., Register, November, 1994, No. 467.

HSS 105.46 Certification of blood banks. For MA certification, blood banks shall be licensed or registered with the U.S. food and drug administration, Register, November, 1994, No. 467.

tration and shall be approved pursuant to s. 143.15, Stats., and s. HSS 165.05.

Note: For covered blood services, see s. HSS 107.27.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.47 Certification of health maintenance organizations and prepaid health plans. (1) **CONTRACTS AND LICENSING.** For MA certification, a health maintenance organization or prepaid health plan shall enter into a written contract with the department to provide services to enrolled recipients and shall be licensed by the Wisconsin commissioner of insurance.

(2) **REQUIREMENTS FOR HEALTH MAINTENANCE ORGANIZATIONS.** For MA certification, an HMO shall:

(a) Meet the requirements of 42 CFR 434.20 (c);

(b) Make services it provides to individuals eligible under MA accessible to these individuals, within the area served by the organization, to the same extent that the services are made accessible under the MA state plan to individuals eligible for MA who are not enrolled with the organization; and

(c) Make adequate provision against the risk of insolvency, which is satisfactory to the department and which ensures that individuals eligible for benefits under MA are not held liable for debts of the organization in case of the organization's insolvency.

Note: For covered health maintenance organization and prepaid health plan services, see s. HSS 107.28.

History: Cr. Register, February, 1986, No. 362, eff. 3-1-86.

HSS 105.48 Certification of out-of-state providers. (1) When a provider in a state that borders on Wisconsin documents to the department's sat-

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