



WISCONSIN DEPARTMENT OF CORRECTIONS

Governor Tony Evers / Secretary Kevin A. Carr

GUIDANCE DOCUMENT CERTIFICATION

I have reviewed this guidance document or proposed guidance document and I certify that it complies with sections §227.10 and §227.11 of the Wisconsin Statutes.

I further certify that the guidance document or proposed guidance document contains no standard, requirement, or threshold that is not explicitly required or explicitly permitted by a statute or a rule that has been lawfully promulgated.

I further certify that the guidance document or proposed guidance document contains no standard, requirement, or threshold that is more restrictive than a standard, requirement, or threshold contained in the Wisconsin Statutes.

Kristin Nissen

Name of Individual Certifying this Document / Proposed Document

Program and Policy Chief

Title


Kristin Nissen

Signature

4/17/2020

Date Signed

Department of Corrections – Wisconsin
Office of the Secretary
Wis. Stat. § 227.112(6)
DOC-2910 (Rev. 12/2019)

 <p style="text-align: center;">WISCONSIN DEPARTMENT OF CORRECTIONS Division of Juvenile Corrections</p> <p style="text-align: center;">Policy and Procedure</p>	EFFECTIVE DATE <i>[Status]</i>	PAGE NUMBER 1 of 5
	MANUAL REFERENCE	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision
	DJC POLICY # 500.10.12	Original Date: <i>[Comments]</i>
	ORIGINATED BY Ron E. Hermes, Administrator	
X _____ Date Signed:		
DISSEMINATION	PRIORITY	
<input type="checkbox"/> All Staff <input type="checkbox"/> Confidential – Security Related	<input type="checkbox"/> Policy/Directive <input checked="" type="checkbox"/> Information	
<input type="checkbox"/> Facilities	Discuss at Staff Meeting	Read/Route/Post
<input type="checkbox"/> Field Offices		
<input checked="" type="checkbox"/> Health Services <input type="checkbox"/> Supervisory Staff Only		
	REPLACES POLICY	<i>[Category]</i>
SUBJECT: Prior Authorization Guidelines for Care		

Purpose

The purpose of this policy is to provide guidelines for urgent and non-urgent specialty health care services.

Policy

Division of Juvenile Correction (DJC) facilities shall utilize prior authorization guidelines for urgent and non-urgent specialty health care services. Hospitalization and specialty care shall be arranged for youth in need of these services.

References

Standards for Health Services in Juvenile Detention and Confinement Facilities National Commission on Correctional Health Care, 2015, Y-A-01 Access to Care, Y-D-05 Hospital And Specialty Care, Y-E-12 Continuity and Coordination of Care during Incarceration

Wisconsin Statute § 302.38 - Medical care of prisoners

Wisconsin Statute § 302.386 - Medical and dental services for prisoners and forensic patients

Definitions, Acronym, and Forms

Advanced Care Provider (ACP) – Provider with prescriptive authority.

BHS – Bureau of Health Services

Class 3 Committee Review- A group of DOC ACPs and MD supervisor(s) that discuss facility ACP presented requests for youth non-urgent specialty care

DOC – Department of Corrections

DOC-3001 – Off-site Service Request and Report

DOC-3436 – Prior Authorization for Non-Urgent Care

Off-Site Dental Treatment – This includes dental services provided on or off the premises of a DOC facility by a contracted dental specialist.

Prior Authorization – The process by which a DOC ACP submits a written request describing the need for a particular medical, psychiatric or dental service to the respective director for review and approval.

Specialty Care – Specialist-provided healthcare (e.g. nephrology, surgery, dermatology, orthopedic).

Telemedicine – The use of electronic information and communications technologies to provide and support health care when distance separates the participants.

Procedure

I. General Guidelines

- A. For each community hospital or off-site specialty service regularly used for medical and mental health care delivery, a collaborative written or verbal agreement shall be in place.
- B. Off-site facilities or health professionals are requested to send the following documentation with the youth upon return to the facility: a written summary of the treatment given and any follow-up instructions or recommendations for continuity of care purposes. Off-site facilities are provided a DOC-3001 or may send the above information in alternative format.
 1. Facility staff shall call the off-site facility for verbal report between professional health staff if written information does not accompany the youth upon return to the facility.
 2. Written health information that is not received from the hospital or specialty facility upon the youth's return to the facility shall be requested by facility health staff within 48 hours.
- C. For on-site specialty services used regularly for medical and mental health care delivery, appropriate licenses, certifications, and timely communication for continuity of care shall exist.

II. Classification of medical and surgical conditions

- A. Class I: Emergency care
 1. An emergency is a potentially life or limb-threatening condition requiring immediate care.
 2. A delay in treatment may result in death or permanent serious impairment of the youth's health.
 3. Includes all emergency and urgent care services.
- B. Class II: Urgent care
 1. Presently necessary urgent health care problem.
 2. An urgent medical health care problem, while not an emergency, is one in which prolonged delay of treatment could present a risk for serious bodily harm, disability, or further deterioration in the youth's condition resulting in worsening health
- C. Class III: Non-urgent medically acceptable
 1. A non-urgent condition is one that at present does not represent a current significant threat to the youth's general health and which is not likely to pose such a threat in the foreseeable future.

2. A surgical procedure(s) that can be performed at the convenience of a physician(s), persons and facilities involved. Non-urgent cases are of two types and require prior-authorization:
 - a. Class III-A – approved to schedule as directed.
 - Cases involving persistent pain or dysfunction where pain or dysfunction have been progressive but do not pose an urgent threat to the health of the youth.
 - The condition must be subject to medical correction or arrest.
 - While no medical detriment is expected to result from a delay of several weeks to months, adequate care dictates the performance of a medical or surgical procedure as soon as scheduling reasonably permits.
 - b. Class III-B- no procedure or referral should be scheduled at the present.
 - Cases not involving persistent pain, progressive disease or impairment and not solely for the convenience of the youth.
 - No medical effects are expected to result from surgical delay of months to years.
- D. Class IV- Elective Non-Covered Care Services- services that are considered not medically necessary or required in accordance with acceptable medical standards for medical and surgical practice. No procedure or referral should be scheduled at the present time.

III. Specialty Request Process

- A. Class I and Class II requests do not require prior approval.
- B. All Class III requests shall be submitted per current BHS medical director guidelines by the facility ACP completing a “Consult Class III” order in the electronic health record or by completing a DOC-3436. Approval for Class III requests shall be granted by the medical director, designee, or by the Class III committee.
- C. Class III committee review shall occur for:
 1. All specialty surgery requests not already approved after facility ACP discussion with the medical director or designee.
 2. Continuation of opioid treatment.
 3. Any other case a facility ACP wishes to review with peers.
- D. Facilities shall develop and maintain a tracking system for off-site care requests.
- E. Facilities shall enable timely scheduling of appointments upon request approval.
 1. The ACP shall identify appropriate scheduling timelines for all youth appointments.
 2. The ACP shall be notified by facility scheduling staff if an appointment cannot be scheduled within the identified timeline.
 3. All contacts made when scheduling appointments shall be documented.
- F. Process of ACP re-evaluation for non-approved Class III requests:
 1. An ACP shall resubmit the request with further supporting information when the facility ACP believes the need to challenge a non-approved request.

2. An ACP shall resubmit the request when there is a change in the youth's condition necessitating another request submission.

G. Submission of Class III Requests for Dental and Mental Health:

1. Prior authorization shall be obtained for any non-urgent dental or mental health treatment.
2. All prior authorization requests, with supporting information, shall be submitted on DOC-3436.
3. Verbal authorization from the dental director or mental health director shall be followed with a completed DOC-3436.
4. The Class III decision by the dental director or mental health director shall be documented on the DOC-3436 and forwarded to the referring facility ACP.

- H. Central Office clerical support staff shall produce statistical reports as requested regarding offsite requests or approvals.

IV. Notification of Class III Decisions and Youth Appeal Process

- A. All specialty care request decisions shall be communicated to the youth by the referring facility ACP.
- B. A youth may appeal a non-approved decision through the Youth Complaint Review System.

cc: Office of the Secretary
DJC Leadership Team

Division of Juvenile Corrections Facility/Region Implementation Procedure	
Facility/Region:	
DJC Policy Number: 500.10.12	
Subject: Prior Authorization Guidelines for Care	
New Effective Date:	Original Effective Date: [Comments]
Will Implement: <input type="checkbox"/> As Written <input type="checkbox"/> With following procedures for facility implementation	
Superintendent's/Regional Chief's Approval:	

REFERENCES

DEFINITIONS, ACRONYMS, AND FORMS

FACILITY PROCEDURE

- I.
 - A.
 - B.
 - 1.
 - 2.
 - a.
 - b.
 - c.
 - 3.
 - C.

II.

III.

RESPONSIBILITY

I. Staff

II. Youth

III. Other