



# **Covered Services** ...in Wisconsin's Long-Term Care Programs

The following chart is a partial listing of long-term care and health related services. The chart indicates whether the service is included in the specific program's benefit package. The services that a person actually receives are based on assessed needs and other program-specific requirements. Services covered by your program require prior authorization. See the bottom of the chart for additional information.

#### Long-Term Care Service

### Coordination of Care

A case manager and nurse who monitors the health, safety, and delivery of services.

### Home Health or Personal Care

Services provided to assist with daily activities such as bathing, skin care, or medication management.

#### "Supportive Homecare"

Assistance with daily activities and tasks such as eating, grooming, and routine house cleaning.

#### **Nursing Home**

Skilled nursing or rehabilitation services.

### Medicaid "ForwardHealth" Card

### Included

Included

#### IRIS\*\*

Included: you will work with an IRIS consultant and a Fiscal Employer Agent to help you manage your services.

Choose to use your Medicaid "ForwardHealth" Card to purchase this service or self-direct this service

Included

Use your Medicaid "ForwardHealth" Card\*\*\*

#### Family Care\*

Included: you will work with a nurse and a care manager.

Included

Included

Included





#### Long-Term Care Service

## Assisted Living /Residential Care Services

A home-like residential setting where care, treatment, support, and supervision is provided.

#### **Adult Day or Respite Care**

Services in a setting for adults who need enriched social or supportive health services and supervision.

#### **Home Delivered Meals**

Prepared, nourishing meals delivered to your home.

#### **Home Modifications**

Services and items to assess the need for and provide modifications or improvements to a home.

#### Non-Medical Transportation

Transportation services or items that allow access to community services and activities.

#### Medical Transportation

Transportation to receive nonemergency Medicaid-covered medical services.

#### Medicaid "ForwardHealth" Card

#### IRIS\*\*

Included in part\*\*\*

### Included, but limited

Family Care\*

Included

Included

Included

Included

Included

Use your Medicaid "ForwardHealth" Card Included

Included

Included

Included



Included

#### Long-Term Care Service

#### Hospice

Care provided to a person with a terminal illness.

### Wheelchairs and other equipment

Controls, equipment, or devices.

### Adult diapers, gloves, and other medical supplies

Specialized medical equipment, items, devices, and supplies

#### Mental Health, Mental Health Day Treatment and Community Support Programs (CSP)

Coordinated professional care and treatment in the community.

### Counseling and Therapeutic Services

Professional treatment-oriented services.

#### Alcohol and Drug Treatment

Treatment for substance abuse disorders.

#### **Daily Living Skills Training**

Education and skill development to teach the skills involved in performing daily activities.

#### Medicaid "ForwardHealth" Card

Included

#### Included

Included

#### Included

Included

Included

IRIS\*\*

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

Use your Medicaid "ForwardHealth" Card

Use your Medicaid "ForwardHealth" Card

Use your Medicaid "ForwardHealth" Card

Included

Use your Medicaid "ForwardHealth" Card

Included

#### Family Care\*

Coordinated by the MCO and/or paid for using your Medicare or "ForwardHealth" Card

Included

Included

Included

Included

Included

Included



#### Long-Term Care Service

### Communication Aids / Interpreter

An item, piece of equipment, or product system that increases the ability to communicate.

#### **Employment Services**

Ongoing support to obtain and maintain employment.

### Individual Directed Goods and Services

A service, support, or item that addresses a long-term support need.

#### Medicaid "ForwardHealth" Card

IRIS\*\*

#### Included

#### Family Care\*

Included

Included

Included

#### Included

#### Health Care Service

#### **Physician Services**

#### Hospitalization

**Prescription Medications** 

#### Medicaid "ForwardHealth" Card

Included, but use your Medicare first

Included, but use your Medicare first

Included, but use your Medicare Part D first

#### IRIS\*\*

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

#### Family Care\*

Coordinated by the MCO and/or paid for using your Medicare or "ForwardHealth" Card

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service



# Health Care Service **Dental Care**

#### Medicaid "ForwardHealth" Card

but use your Medicare first

Included,

Use your Medicare and/or Medicaid "ForwardHealth" Card

IRIS\*\*

### Family Care\*

to purchase this service

Coordinated by the MCO and/or paid for using your Medicare or "ForwardHealth" Card

Included, but use your Medicare first Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

Coordinated by the MCO and/or paid for using your Medicare or "ForwardHealth" Card

Vision (including eye glasses)

**Foot Care: Podiatry** 

Included, but use your Medicare first

Use your Medicare and/or Medicaid "ForwardHealth" Card to purchase this service

Coordinated by the MCO and/or paid for using your Medicare or "ForwardHealth" Card

- \* With the help of an interdisciplinary team, participants in a Family Care or Family Care Partnership (also known as Partnership program) choose their longterm care providers (and their health care providers in Family Care Partnership) from the network offered by the Managed Care Organization (MCO).
- \*\*IRIS participants purchase services, supports and goods within an individualized budget amount based on an approved care plan. Participants hire some service providers directly, or may purchase services from an agency.
- \*\*\* Note: Individuals living in a nursing home or a Community Based Residential Facility (CBRF) cannot be enrolled in IRIS.

Note: **Estate Recovery** provisions apply for Family Care, Partnership, PACE, and IRIS.

Note: Program services are determined with the member and the program selected. All providers must be contracted with the managed care organization or authorized by the IRIS consultant agency.

