

Medicaid Tribal Consultation

Disaster Emergency Authorities Approved or Pending Approval after the May 2021 Tribal Consultation

Since our May 18-19, 2021 virtual Medicaid Tribal Consultation, the Department of Public Health and Human Services submitted several additional disaster relief authorities to the Centers for Medicare and Medicaid Services, to request additional State Plan and Waiver flexibilities for the remainder of the COVID-19 Public Health Emergency.

This handout provides you with a summary of these submittals.

Policy Change	Effective Date	State Requested Approved End Date	Federal Authority
Community First Choice - 1915(k) State Plan With this change: <ul style="list-style-type: none">- the initial assessment of functional need is not required to be completed before the start of care,- the deadline for completing the annual reassessment of need and review of the person-centered service plan may be delayed beyond the end of the 12-month authorization period, and- services will continue consistent with the current functional needs assessment and person-centered service plan until the reassessment and review can occur. These actions may be postponed for up to one year.	3/1/2020	End of Public Health Emergency	Section 1135 Waiver

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<p>Intensive Outpatient (IOP) benefit for youth with serious emotional disturbance – EPSDT State Plan</p> <p>With this state plan amendment an additional benefit is available for youth with serious emotional disturbance (SED). IOP services provide weekly structured intensive mental health care to youth with SED while allowing youth to safely remain in school, in the home, and in their community. This is an intensive service. Providers must provide 6 hours of core services to the youth per week to be eligible for this service.</p> <p>When weekly requirements are not met the provider may unbundle and bill in accordance with Medicaid Youth Mental Health Fee Schedule and Montana Department of Public Health RBRVS Fee Schedule. Youth must receive all medically necessary services indicated and each service must be documented in the individualized treatment plan (ITP).</p>	1/1/2021	End of Public Health Emergency	Disaster Relief State Plan Amendment
<p>Home and Community Based Service Supplemental Payments – State Plan & BSW, DD, & SDMI Waivers</p> <p>Montana Medicaid is providing a quarterly supplemental payments these supplemental payments will last for 24 months at a declining rate each month. The payments are available to home and community-based services providers providing a broad but select list of services.</p> <p>These supplemental payments are to support providers with the increased cost hazard/retention pay, higher staffing levels and personal protective equipment and other supplies. Montana will implement these temporary changes to maintain a stable workforce and preserve significantly impacted home and community-based service behavioral health provider networks.</p> <p>DPHHS will be submitting an additional state plan amendment to extend these payment to 03/31/2023.</p>	4/1/2021	dates of service between 01/01/2022 and 03/31/2022, or the end of the PHE, whichever is: a) earlier, and b) billed by 04/30/2022	Disaster Relief State Plan Amendment

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<p>After-Hours Crisis Assessment – State Plan</p> <p>With this state plan amendment DPHHS is authorized to increase the payment rate for an After-Hours Crisis Assessment service effective July 1, 2021, through the public health emergency.</p> <p>Description: H0002 - Psychotherapy for after-hours crisis; first 60 minutes *Billed for the first 60 mins of psychotherapy for a patient in crisis, and add-on code 90840 billed for each additional 30 mins. This code may be used after normal business hours, weekends, and holidays.</p>	4/1/2021	End of Public Health Emergency	Disaster Relief State Plan Amendment
<p>Single Case Agreements – State Plan</p> <p>With this amendment Montana Medicaid can negotiate payment for out of state hospitalization service when necessary. The out-of-state inpatient hospital service must be prior authorized based on medical necessity and authorized to be performed by an entity type or entity with subspecialty type not available in Montana.</p> <p>Payment, for prior authorized services, is up to 66% of the provider’s usual and customary or as negotiated between the department and entity.</p>	4/1/2021	End of Public Health Emergency	Disaster Relief State Plan Amendment
<p>Montana’s Assertive Community Treatment (MACT) and the Program of Assertive Community Treatment (PACT) services – State Plan</p> <p>Due to COVID-19, Montana Medicaid is temporarily adjusting the staffing requirements, including staffing structure of the team, as well as the required number of each team member/qualified providers for Montana’s Assertive Community Treatment (MACT) and the Program of Assertive Community Treatment (PACT) services. These changes will ensure that PACT and MACT teams are still able to meet the members identified treatment plan needs and the service requirements outlined in the Other Rehabilitative Services section of the approved state plan.</p>	7/1/2020	End of Public Health Emergency	Disaster Relief State Plan Amendment

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<p>Personal Health and Safety Items - Big Sky, DD & SDMI Waivers: With this amendment Montana Medicaid added a new type of service provider under Personal Health and Safety Items. Services under the waiver are limited to additional services not otherwise covered under the state plan, including EPSDT, but consistent with the waiver objectives of avoiding institutionalization.</p> <p>This service is limited to \$50/per member per month through the duration of this Appendix K ending on January 26, 2021. A physician's order is not required. This service is a new limited time benefit for members and is separate and distinct from rates to providers for other services.</p>	5/1/2020	1/26/2021	1915 (c) Waiver Appendix K
<p>Behavioral Intervention Assistant (BIA) and Life Coach - SDMI Waiver With this amendment Montana Medicaid is adding a participant-directed option for Behavioral Intervention Assistant (BIA) and Life Coach, effective July 1, 2020.</p>	7/1//2020	End of Public Health Emergency	1915 (c) Waiver Appendix K
<p>Conflict Free Case Management Exception - SDMI Waiver With this amendment Montana Medicaid can permit a single entity to provide residential direct services in addition to case management and/or development of person-centered service plans in two regions of the state since the case management entity qualifies under 42 CFR 441.301(c)(1)(vi) as the only willing and qualified entity as specified in the Appendix K.</p>	7/1/2021	End of Public Health Emergency	1915 (c) Waiver Appendix K
<p>COVID Vaccine Administration - 1115 Plan First The amendment provides expenditure authority for state payments to providers for the administration of a COVID-19 vaccine for the limited-benefit population eligible under the Montana Plan First section 1115 demonstration, from December 14, 2020 through March 10, 2021. Starting March 11, 2021, section 1905(a)(4)(E) of the Act (as added by section 9811 of the</p>	12/14/2020	3/10/2021	1115(a) Federal Authority

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State Plan Services Pending Approval

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<p>The state assures Medicaid coverage of the mandatory benefit of COVID-19 testing consistent with the Centers for Disease Control and Prevention (CDC) definitions of diagnostic and screening testing for COVID-19 and its recommendations for who should receive diagnostic and screening tests for COVID-19.</p>	3/11/2021	Ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act	Disaster Relief State Plan Amendment
<p>The state assures Medicaid coverage of the mandatory benefit of COVID-19 treatment, including specialized equipment and therapies (including preventive therapies).</p>	3/11/2021	Ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act	Disaster Relief State Plan Amendment

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<p>Montana is proposing to apply an incremental increase to the current Urban Indian Organization (UIO) Prospective Payment System (PPS) rates effective July 1, 2021, through the duration of the Public Health Emergency (PHE).</p> <p>Each UIO will receive a percent increase to their current PPS rate as follows:</p> <p>Rates will be increased by 61.1%</p> <p>The 61.1% increase is comprised of the following factors:</p> <p>High Risk Population Factor = Calculated difference between the risk-score of the populations served at UIOs vs. non-urban FQHCs.</p> <p>Increased Cost Adjuster = The percent increase of the IHS AIR from CY 2020 to CY 2022.</p>	<p>7/1/2021</p>	<p>End of Public Health Emergency</p>	<p>Disaster Relief State Plan Amendment</p>