Posted online for public comment on May 4, 2018 Multiple State Plan Amendments effective June 1 and July 1, 2018

On or before 6/30/18, the Montana Department of Public Health and Human Services (DPHHS) will submit the following Medicaid State Plan Amendments (SPAs) for approval to the Centers for Medicare and Medicaid Services (CMS).

Effective 6/1/18, Targeted Case Management (TCM) Services for Individuals with Developmental Disabilities (DD) Age 16 and Over or Who Reside in a DD Children's Group Home State Plan will be amended as follows:

- The name of State Plan will be updated to Individuals with Developmental Disabilities Enrolled in the 0208 1915(c) Waiver or Eligible Individuals Age 16 and Over;
- TCM services for children under the age of 16 enrolled in the 0208 1915(c) Comprehensive Waiver will be provided due to the anticipated elimination of Waiver-funded Children's Case Management (WCCM) services from the Comprehensive Waiver;
- The reimbursement amount to the contracted case management agency will change from a 15-minute billable of unit of \$16.86 to a monthly fee of \$85.57 per member;
- The minimum number of annual face-to-face contacts will change from four to three, and the purpose of these meetings will be outlined in the SPA language;
- Maximum caseload sizes will be removed;
- The list of new case manager employee training requirements and knowledge will be revised, and the list of training/knowledge requirements for all case managers will be updated;
- The requirement for a minimum of 20 hours of annual training will be removed;
- Descriptors of billable activities will add language to comprehensive and periodic assessment that more clearly aligns with assessment and reassessment described in applicable Administrative Rules of Montana;
- Reassessment information will be moved to comprehensive and periodic assessment; and
- The Personal Support Plan will be revised to the more widely accepted term of Plan of Care.

These proposed changes result in a total estimated annual savings of \$1,504,373.

Effective 6/1/18, the reimbursement Introduction Page SPA will update the name of Targeted Case Management (TCM) Services for Individuals with Developmental Disabilities (DD) Age 16 and Over or Who Reside in a DD Children's Group Home State Plan, to Individuals with Developmental Disabilities Enrolled in the 1915(c) 0208 Home and Community Based Services (HCBS) Comprehensive Waiver or Eligible Individuals Age 16 and Over. The date of the fee schedule will be updated to 6/1/18. This change is budget neutral.

Effective 7/1/18, the following services will be added to the reimbursement Attachment 4.19B Introduction Page: Transportation-Ambulance and Freestanding Birthing Centers. This change is budget neutral.

Effective 7/1/18, the following services on the Introduction Page will update the date of their fee schedules because the services share a single fee schedule: TCM Services for Youth with Serious Emotional Disturbance (SED); TCM Services for Youth with SED in an Out of State Psychiatric Residential Treatment Facility. The following services on the Introduction Page will update the date of their fee schedules to incorporate the 2018 Relative Value Units from CMS, effective 7/1/18: Other Laboratory and X-Ray; Physicians; Optometrists; Chiropractic; Licensed Clinical Social Workers; Licensed Professional Counselors; and Licensed Psychologists; Nutritionists; Home Health; Physical Therapy; Occupational Therapy; Speech Therapy and Audiology. This amendment is budget neutral.

Effective 7/1/18, the PRTF State Plan will update the date of the fee schedule because it shares a single fee schedule with other services. This amendment is budget neutral.

Effective 7/1/18, all services in the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) State Plan will update the date of the fee schedule because EPSDT services share a single fee schedule with other services. THE EPSDT amendment also removes a reference to sunsetting the reimbursement methodology for Comprehensive School and Community Treatment. This amendment is budget neutral.

Effective 7/1/18, the Transportation-Ambulance State Plan will be amended to clarify the reimbursement methodologies used to establish ambulance reimbursement rates. Medication reimbursement codes reflected on the Ambulance fee schedule will be updated to reflect the current Medicare Average Sales Price Drug Pricing file. This amendment is budget neutral.

Effective 7/1/18, the State portion of the Graduate Medical Education (GME) Payment for State Fiscal Year 2019 will be updated in the Inpatient Hospital State Plan. In addition to Medicaid payments, a GME payment is made to partially fund providers for their otherwise unreimbursed costs of providing care to Medicaid members as part of the primary care and psychiatry residency program to an eligible hospital located in Montana. This does not apply to Indian Health Service and tribal clinics. The total estimated annual fiscal impact of this amendment is \$9,138,922.

Effective 7/1/18, the Home Health Services State Plan will be amended to ensure compliance with federal regulations. The adoption and incorporation of 42 CFR 440.70 will increase the number of beneficiaries who are eligible for home health services due to the removal of the homebound status requirement and the expansion of service delivery locations. This may lead to a cost shift for programs that currently provide services to medically needy populations. The 1915(c) HCBS Big Sky Waiver and 1915(c) Waiver for Individuals with Severe Disabling Mental Illness programs provide private duty nursing services to 257 Medicaid members who may now be eligible for home health services. The expected shift in services may lead to an increase in home health service expenses. The total estimated annual fiscal impact of the Home Health Services amendment is \$1.1 million.

We invite your comments and questions postmarked **by 5/25/18**. You may direct comments to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director's Office, PO Box 4210, Helena, MT 59604-4210.