



## Senior & Long Term Care Division Community Services Bureau

### Big Sky Waiver Policy Manual

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<b>Title:</b>	<b>BSW 415</b>
<b>Section:</b>	<b>ELIGIBILITY FOR SERVICES</b>
<b>Subject:</b>	<b>Temporary Absences</b>
<b>Reference:</b>	<b>ARM 37.40.1408; Big Sky Waiver Application (01/01/2018)</b>
<b>Supersedes</b>	<b>BSW 415 (01/01/2018)</b>

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#### REQUIREMENT

Big Sky Waiver (BSW) program eligibility for members may continue and case management services may be billed during a member's temporary absence (on vacation with a plan to return home) of less than 30 days. Refer to BSW 410.

**EXCEPTION:** Case management services may not be billed for members having a temporary absence due to:

1. Admission to a hospital, nursing facility or Transitional Care Unit; or

**NOTE:** CMTs are required to provide adequate notice to the member within 5 calendar days of receiving confirmation a member's stay in a hospital, nursing facility or TCU will exceed 30 days. Refer to BSW 412.

2. Receiving outpatient medical care.

The CMT must send written communication to the Office of Public Assistance (OPA) indicating the member has been admitted to a nursing facility (hospital or TCU) or receiving outpatient medical care; the OPA waiver span should remain open while the absence remains less than 30 days.

#### RE-ENROLLMENT

For a member whose services are terminated and reinstatement of Big Sky Waiver coverage is requested, the member must meet all standard eligibility requirements for the BSW program, meet all wait list criteria and have the highest wait list score prior to re-entry to the program.