



# Big Sky Waiver

General Program Overview

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# Medicaid 1915(c) Home and Community Based Services(Big Sky Waiver)

- ▶ Section 1915(c) of the Social Security Act provides an option for states to adopt a program that allows long term care services and supports to be provided in home and community-based settings. The program permits a State to furnish an array of services that assist Medicaid members to live in the community and avoid institutionalization.
- ▶ The State has broad discretion to design its waiver program to address the needs of their waiver's target population.
- ▶ The waiver started serving individuals in 1982.



# Medicaid 1915(b)(4) Big Sky Waiver

- ▶ The Medicaid 1915(b)(4) Big Sky Waiver program allows the State to require enrollees to obtain services only from specified providers who undertake to provide such services and meet reimbursement, quality and utilization standards which are consistent with access, quality and efficient and economic provision of covered care and services.
- ▶ Montana has been approved to apply this authority to case management services.
- ▶ BSW contracts with two case management teams to develop an individual plan of care in conjunction with the member.



# Big Sky Waiver

- ▶ The waiver was designed to meet the needs of a particular group of individuals.
  - ▶ There are criteria that need to be met in order to qualify for the program; meeting the financial and non-financial criteria for Medicaid State Plan coverage does not automatically entitle an individual to receive Big Sky Waiver coverage.
  - ▶ Big Sky Waiver is an optional program for the state; it is not an entitlement program. There are a limited number of slots available through this program. If a slot is not immediately available, qualified applicants are held on a wait list until a slot becomes available.
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# BSW - Summary

- ▶ We serve over 2,500 individuals with program expenditures of approximately 45 million.
- ▶ Current wait list is 292 individuals:
  - ▶ 40% individuals requesting Assisted Living Facility assistance
  - ▶ 53% individuals requesting services in their home
  - ▶ 7% Individuals requesting Specialized Residential Habilitation (facilities that specialize in the care of individuals with brain injuries or other severe disabilities).
  - ▶ The wait list is representative of 45% individuals with disabilities, 51% elderly and the remaining are children.



# General Program Requirements

- ▶ Level of Care
  - ▶ Medicaid Eligibility
  - ▶ Elderly or Physically Disabled
  - ▶ Appropriate for the Waiver Program
  - ▶ Have a need that can only be met through Big Sky Waiver.
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# Level of Care



- ▶ Why is a level of care needed?
- ▶ Who determines the level of care?
- ▶ What does the level of care determine?
- ▶ What does the level of care not determine?



# Medicaid Eligibility

- ▶ Applicant needs to be financially eligible for Medicaid.
- ▶ Exceptions:
  - *Minors requiring parental deeming to qualify for Waiver Medicaid, and*
  - *Spouses requiring application of spousal impoverishment rules to qualify for Waiver Medicaid.*



# Elderly or physically disabled

- ▶ Elderly: 65 years or older
  - ▶ Physical Disability: current physical disability approval from either the Social Security Administration (SSA) or Medicaid Eligibility Disability Services (MEDS).
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# Appropriate for the waiver program

Appropriateness criteria includes, but is not limited to:

- ▶ Requires one or more Big Sky Waiver services;
  - ▶ The services provided by Big Sky Waiver are appropriate or effective in relation to the member's needs; and
  - ▶ The service providers necessary to the delivery of services as provided for in the service plan are available.
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Have a need that can only be met through Big Sky Waiver

- ▶ The applicant must have a need that can only be met through Big Sky Waiver services.



# Review....

- ▶ Level of Care
  - ▶ Medicaid Eligibility
  - ▶ Elderly or Physically Disabled
  - ▶ Appropriate for the Waiver Program
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# General Service Requirements

- ▶ Medical necessity/member's diagnosis
  - ▶ Prevent institutionalization
  - ▶ Cost-effectiveness
  - ▶ Third party coverage has been pursued and exhausted
  - ▶ Provided within the coverage period
  - ▶ Direct medical or remedial benefit to the member
  - ▶ An approved service listed in the BSW application
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# Third Party Coverage

- ▶ Potential third party coverage resources must be pursued and exhausted, such as:
- ▶ Community First Choice (CFC)
- ▶ Early Periodic Screening Diagnosis and Treatment Program (EPSDT)
- ▶ State plan
- ▶ Private insurance
- ▶ Medicare
- ▶ Veteran's Administration benefits



# Service Limitations

- ▶ Case Management Teams (CMT) are required to inform providers of service caps limitations and the requirements for prior authorization processes needed to exceed service caps
- ▶ Some services require prior authorizations from the Community Services Bureau.

BSW policy requires prior authorizations including, but not limited to:

- Environmental Accessibility Adaptions and Specialized Medical Equipment or Supplies in excess of specific dollar limits.
- Out-of-State non-medical transportation
- Service caps on Social Supervision and Non-medical transportation; which may exceeded for those meeting specific criteria.



# BSW Services may include:

- ▶ Adult Day Health
- ▶ Case Management
- ▶ Community Transition
- ▶ Consultative Clinical and Therapeutic Services
- ▶ Day Habilitation
- ▶ Dietetic Services
- ▶ Environmental Accessibility Adaptions
- ▶ Family Training and Support
- ▶ Health and Wellness
- ▶ Homemaker
- ▶ Homemaker Chore
- ▶ Non-Medical Transportation
- ▶ Nutrition
- ▶ Occupational Therapy
- ▶ Pain and Symptom Management
- ▶ Personal Assistance Services
- ▶ Personal Emergency Response System
- ▶ Physical Therapy
- ▶ Post-Acute Rehabilitation Services
- ▶ Prevocational Services
- ▶ Private Duty Nursing
- ▶ Residential Habilitation
- ▶ Respiratory Therapy
- ▶ Respite Care
- ▶ Senior Companion
- ▶ Additional Services available under the Big Sky Bonanza Option
- ▶ Specialized Child Care for Medically Fragile Children
- ▶ Specialized Medical Equipment and Supplies
- ▶ Speech Therapy and Audiology
- ▶ Supported Employment
- ▶ Supported Living
- ▶ Vehicle Modification



# BSW Providers

- ▶ Use the Montana Medicaid Provider enrollment process. Montana Medicaid Provider Relations can assist in the online enrollment process. (Montana Medicaid Provider website: <https://medicaidprovider.mt.gov>)
  - ▶ BSW can assist in providing information regarding specific service requirements.
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# BSW Billings and Reimbursement

- ▶ Fees are published on the Medicaid Provider website:

<https://medicaidprovider.mt.gov/28#184572515-fee-schedules--elderly-and-physically-disabled-waiver>

Due to the array of services provided, services may be billed in 15 min increments, or as a daily, monthly or session. Home modifications or Community Transition Services are billed as a service unit.



## BSW Referral

- Contact a local case management team or call Mountain Pacific at 1-800-268—1145.
- For individuals meeting the level of care, Mountain Pacific will submit the level of care to the local case management team for evaluation under the BSW program.



# Questions?

▶ Big Sky Waiver:

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