Getting To Know the SDMI Waiver

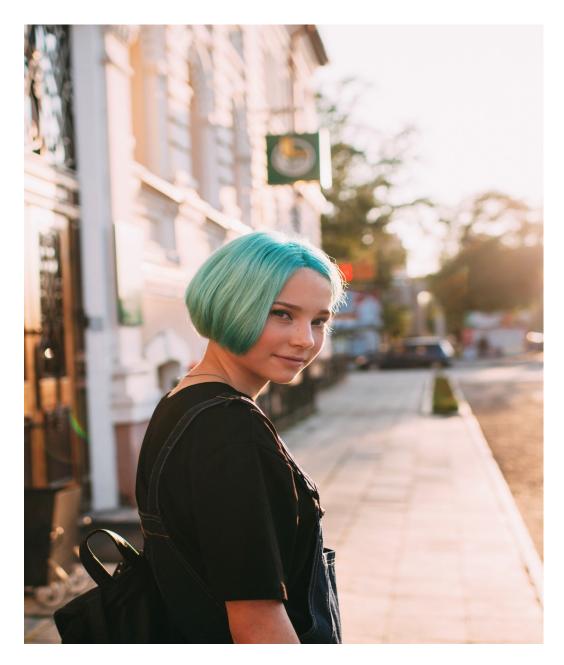
Introduction to your state program staff, waiver resources and more....

April 17, 2025, 10-11am



What is the SDMI Waiver?

- The SDMI waiver is one of three 1915 (c) waiver programs available in the State of Montana.
- The goal of the SDMI HCBS waiver program is to keep members independent in the community for as long as possible and to promote the health and independence of Medicaid members who have a severe disabling mental illness and require long term care.



What is the SDMI Waiver Con't.?

The waiver is centered on recovery for members living within their community utilizing the supports offered by waiver. Members on the waiver strive to reach their fullest potential with help of service supports offered by the waiver, with an emphasis on social participation, attention to the rights of people with mental illness, and equality. The goal is to integrate members into the community in which they live, wherein they become a valued member of their community. The waiver assists with access to opportunities that exist that allow individuals to contribute at the level which they are capable.



DP

MONTANA MEDICAID HOME AND COMMUNITY-BASED SERVICES

SERVICES OFFERED BY EACH HCBS PROGRAM	BSW	DD	SDMI	CFC
Adult Day Health provides social, teaching, and	~		~	
health activities depending on the program.				
Adult Foster Support provides extraordinary		~		
supervision and support by a principal caregiver				
licensed as an adult foster care provider who				
lives in the home.				
Behavior Intervention Assistant provides for			~	
assistance with activities of daily living and/or				
social, behavioral, and adaptive skills that meet				

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

Meet Your SDMI Waiver State Program Staff

Isacc Coy- Behavioral Health and Developmental Disabilities Division(BHDD) Treatment Bureau Chief

Jean Perrotta- SDMI Section Supervisor, BHDD

Jennifer Bergmann- SDMI Quality Assurance Program Manager

Cindy Shay- SDMI Program Manager

Jessica Effenberger- SDMI Community Program Officer



ARM

Administrative Rules of the State of Montana (mt.gov)

CHRISTI JACOBSEN MONTANA SECRETARY OF STATE	Administrative Rules of Montana	Montana Administrative Register	Search	Q
Filters Q 37.90)		, Searc	ch
36 Results			L→ Browse ■ Compact	led
Administrative Rules of Mont	ana			
		TS WITH SEVERE AND DISABLING MENTAL ILLNESS: SPECIALIZED MEDICAL EQUIPMENT AND SUPPLIES		- 1
		MENTAL HEALTH MEDICAID FUNDED 1115 AND 1915 WAIVERS /		- 1
Subchapter 37.90.4 Home ar	nd Community-Based Services Waiver	for Adults With Severe and Disabling Mental Illness		
Administrative Rules of Monta	ana			
37.90.426 HOME AND COM	MUNITY-BASED SERVICES FOR ADUL	TS WITH SEVERE AND DISABLING MENTAL ILLNESS: MEALS		- 1
Title 37 PUBLIC HEALTH ANI	D HUMAN SERVICES / Chapter 37.90 N	MENTAL HEALTH MEDICAID FUNDED 1115 AND 1915 WAIVERS /		
Subchapter 37.90.4 Home ar	nd Community-Based Services Waiver	for Adults With Severe and Disabling Mental Illness		
Administrative Rules of Monta	ana			
37.90.439 HOME AND COM	MUNITY-BASED SERVICES FOR ADUL	TS WITH SEVERE AND DISABLING MENTAL ILLNESS: SELF-DIRECTED SERVICES		
		MENTAL HEALTH MEDICAID FUNDED 1115 AND 1915 WAIVERS /		
Subchapter 37.90.4 Home ar	nd Community-Based Services Waiver	for Adults With Severe and Disabling Mental Illness		
Administrative Rules of Mont	ana			

37.90.452 HOME AND COMMUNITY BASED SERVICES FOR ADULTS WITH SEVERE AND DISABLING MENTAL ILLNESS: RESIDENTIAL HABILITATION, INTENSIVE MENTAL HEALTH GROUP HOME

Title 37 PUBLIC HEALTH AND HUMAN SERVICES / Chapter 37.90 MENTAL HEALTH MEDICAID FUNDED 1115 AND 1915 WAIVERS /

Subchapter 37.90.4 Home and Community-Based Services Waiver for Adults With Severe and Disabling Mental Illness

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Behavioral Health and Developmental Disabilities Division

Severe and Disabling Mental Illness, Home and Community Based Services Waiver Manual, Effective 7/1/2020

Printing the manual material found at this website for long-term use is not advisable. Department Policy material is updated periodically and it is the responsibility of the users to check and make sure that the policy they are researching or applying has the correct effective date for their circumstances. <u>State Website Disclaimer</u>.

Section/Subse	ction	Title/Content		Issued/Revised	
	Introduction				
SDMI HCBS 001	Purpose			07/01/2020	
SDMI HCBS 002	Definitions			07/01/2020	
SDMI HCBS 003	Abbreviations & Acro	nyms		07/01/2020	
SDMI HCBS 004	Provision of Services	vrovision of Services 0		07/01/2020	
SDMI HCBS 005	Severe and Disabling	Mental Illness		08/10/2021	

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SDMI HCBS Waiver Policy Manual

<u>SDMI</u> Website

Montana Home and Community Based Services (HCBS)

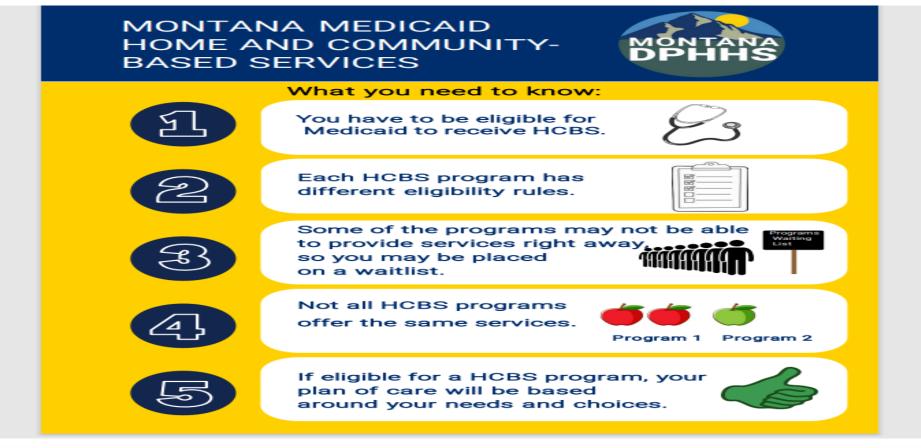
- HCBS Summary Fact Sheet
- HCBS Information Sheet
- November 13, 2020 Public Notice for SDMI Waiver Amendment effective January 27, 2021
- SDMI HCBS Level of Impairment Form
- 2020 SDMI HCBS 1915 (c) renewal Effective 7/1/2020

HCBS Policy and Procedure Memos

- <u>Forms</u>
- Map of Service Areas
- AWARE SDMI Mobile Directory Contact List
- SDMI Wavier Case Management Unwinding Memo

Additional Program Supports

- Money Follows the Person
- Montana Medicaid Provider Website SDMI
- Residential Habilitation Provider List
- SDMI Fee Schedule





Severe Disabling Mental Illness (SDMI) Home and Community Based (HCBS) Waiver Program

Forms

- <u>Retainer Day Form</u>
- SDMI HCBS Level of Impairment (LOI) Form
- <u>kife Coach Application and Requirements</u>
- Social Determinants of Health Questionnaire
- Monthly Utilization Report FY 2021
- Monthly Utilization Report FY 2022
- <u>Quarterly Report Template Life Coach/BIA</u>





SDMI Medicaid Waiver

Provider Retainer Day Payment Authorization Form

Providers for Residential Habilitation and Personal Assistance Services (PAS) are generally not able to bill Medicaid for days a member is absent from the residential habilitation setting in which they reside, or from their own home where personal assistance services are provided. However, providers may be eligible for retainer day payments for the member due to a hospitalization, admission to a nursing facility or if the member is on vacation, with prior authorization from case management. Retainer payments are intended to keep a member from losing their placement in a residential setting or from losing their caregiver for their PAS. Retainer days are limited to 30 days a Person-Centered Recovery Plan year and may not be used for any other service if used for residential habilitation or for PAS.





If retainer days are requested from a provider, and case management authorizes the payment request, the authorization serves as an agreement for the Residential Habilitation setting to maintain the member's placement at the setting, or to maintain their caregiver with the PAS provider. In the event the member is determined by case management to require a higher level of care than the scope of service can provide, the provider is not required to maintain the member's placement at the Residential Habilitation setting, or their caregiver with the PAS provider.

ROVIDER:
EMBER:
JTHORIZED BILLABLE RETAINER DAY DATES:
EIMBURSEMENT RATE – current daily rate /PER DAY:

The use of this form is not required to be eligible for retainer day payment authorization, however a written agreement must be received prior to the approval of the payment. Please see: <u>SDMI HCBS 210 Retainer</u> <u>Payments (mt.gov</u>), for additional requirements and limitations.

PROVIDER SIGNATURE:	DATE:	
SDMI CASE MANAGER SIGNATURE: _	DATE:	





SDMI LIFE COACH/BIA QUARTERLY REPORT

PER POLICIES SDMI HCBS 305 & 340 THE PROVIDER MUST SUBMIT A QUARTERLY REPORT TO THE CMT WHICH INCLUDES THE PROGRESS ON MEMBER'S IDENTIFIED GOALS AND THE METHODOLOGIES/ACTIVITIES USED BY THE LIFE COACH/BIA TO ASSIST THE MEMBER IN ACHIEVING THE GOALS.

REPORT DATE	MEMBER NAME	PREPARED BY (LIFE COACH/BIA)

GOAL PROGRESS

PROGRESS	METHODOLOGIES/ACTIVITIES
	PROGRESS

Additional Program Supports

- <u>Money Follows the Person</u>
- Montana Medicaid Provider Website SDMI
- <u>Residential Habilitation Provider List</u>
- SDMI Fee Schedule

SDMI Monthly Provider Call

- <u>August 2024</u>
- September 2024
 - Provider Call Powerpoint
 - Graphic: SDMI Waiter Non-Medical Transportation, Medical Transportation vs. Medical Escort
- <u>November 2024</u>





Addictive and Mental Disorders Division Severe and Disabling Mental Illness, Home and Community Based Waiver Manual

Other Available Training

SAMHSA - SMI Advisor ILUR Brain and Behavior Research Foundation ALISON Health e Knowledge Emotional CPR | Home Page (emotionalcpr.org).



Additional Resources:

the next several slides will cover some additional provider resources that pertain to provider requirements you may or may not be required to complete, depending on which specific service(s) you provide





The Settings Rule

- Home and Community Based services are services paid for by Medicaid that provide assistance to individuals in their homes or in the community instead of in a nursing home. These services enable Medicaid beneficiaries to receive services in their own homes or communities rather than institutions or other isolated settings
- the rule consists of federal guidelines that were developed to ensure that members receiving long-term services and supports through HCBS programs under Medicaid waiver authorities have full access to benefits of community living and the opportunity to receive services in the most integrated setting appropriate



Settings Rule

- Providers subject to the Settings Rule include:
 - Residential Habilitation Providers (assisted living facilities, group homes, foster homes and supported living)
 - ✓ Supported Employment Providers
 - ✓ Day Supports Providers (Adult day Health, Adult Day Care, Vocational/Work-Day Services)

Home and Community Based Services

Home and Community Based Service

In January 2014, the Centers for Medicare and Medicaid Services (CMS) announced a requirement for states to review and evaluate current Home and Community-Based Services (HCBS), including residential and non-residential settings. These federal guidelines were developed to ensure that members receiving long-term services and supports through HCBS programs under Medicaid waiver authorities have full access to benefits of community living and the opportunity to receive services in the most integrated setting appropriate. This includes opportunities to engage in community life, control personal resources, receive services in the community, and seek employment and work in competitive and integrated settings to the same degree as individuals who do not receive HCBS.

Settings Rule

Current Montana HCBS Settings Information:

- Montana Home and Community-Based Services Statewide Presentation October 8, 2024
- Montana Statewide Transition Plan Final Approval Letter Approved 03/14/2023
- Montana Corrective Action Plan Approval Letter Approved 09/15/2023

Key Facts	\sim
Settings Evaluation and Tracking System (SETS) Training Instructions and Materials	~
Heightened Scrutiny Evaluation	\sim
Montana's Approach to Transition	\sim



Electronic Visit Verification

Senior and Long Term Care / Electronic Visit Verification

Need Assistance with Mobile Caregiver+ Reach out to our call center at: (833) 483-5587 - Representatives are available from 7am to 6pm Mountain Standard Time or <u>Create a Support Ticket</u>

EVV Provider Full Compliance is required as of 7/1/24. This means that all claims with EVV codes are required to have a compliant EVV record and be submitted through the Mobile Caregiver+ solution. Claims submitted without EVV data and/or through Mobile Caregiver+ will be denied for date of service 7/1/24 and beyond.

Electronic Visit Verification (EVV)



<u>Electronic</u> <u>Visit</u> <u>Verification</u>

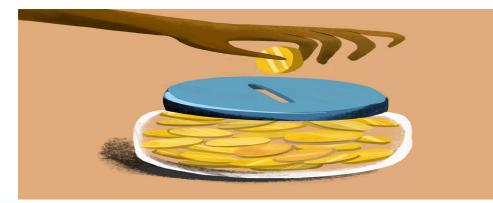
Montana Medicaid providers who bill personal care or home health services are subject to federal EVV requirements. These include certain services available through the following provider types.

- Big Sky Waiver (Elderly and Physically Disabled Waiver)
- Community First Choice
- Developmental Disabilities Waiver Program (DDP)
- Home Health Services
- Personal Assistance Services
- Private Duty Nursing
- Severe Disabling Mental Illness (SDMI) Waiver



Electronic Visit Verification

BHDD - SDMI Waiver PT88			
MMIS CPT/HCPCS Descriptions	Fee Schedule Description	Self-Direct Service Only	Procedure Code and Modifier
BEHAVIORAL INTERVENTION ASSISTANT; PER 15 MINUTES	Behavioral Intevention Assistant		H2019 HD
RESPITE CARE; PER 15 MIN	Respite Care		T1005 HD
RESPITE CARE; PER 15 MIN	Respite Care		T1005 HD CG
PERSONAL ASSISTANCE ATTENDANT; PER 15 MINUTES	Personal Assistance Attendant		T1019 HD
SELF DIRECTED PERSONAL ASSISTANCE ATTENDANT; PER 15 MINUTES	Personal Assistance Attendant - Self-Directed	Yes	T1019 HD TE
PRIVATE DUTY NURSING, RN	Private Duty Nursing, RN		T1002 HD
PRIVATE DUTY NURSING, LPN	Private Duty Nursing, LPN		T1003 HD





apply.mt.gov



Attention Medicaid recipients!

Please read this information

Update your contact information. Please update your contact information with DPHHS to ensure you receive important notices. You can expect to hear from us by mail, email, and text message. Update your contact information here.

Check your mail. DPHHS is reaching out to Medicaid recipients about their Medicaid or HMK coverage. This information will tell you if you need to complete a redetermination packet to see if you still qualify for Medicaid or HMK.

Complete your redetermination packet. Login or create an account to complete your redetermination packet. You can also return the packet by mail or drop off at your nearest Office of Public Assistance. You will have 30 days to complete this step. If you receive a redetermination packet, you must complete it by the deadline, or your Medicaid/HMK will end.

Click here for more information.

LIHEAP Heating Assistance Information

You may apply for LIHEAP heating assistance from October 1 through April 30. Please contact your local <u>LIHEAP</u> eligibility office if you don't want to apply online, want a paper application or have questions.



Help

Other helpful resource links:

Office of Public Assistance (mt.gov)

Medical Assistance (MA) Policy Manual (mt.gov)

LIHEAP and Weatherization Assistance (mt.gov)

Commodity Supplemental Food Program (mt.gov)

Montana Medicaid Transportation Services (mt.gov)





Mountain Pacific

- if you know of any individuals interested in applying for the SDMI waiver program, all roads lead towards Mountain Pacific
- Mountain Pacific is our contracted provider for referrals for the initial evaluation and reevaluation to determine a member needs services through the Severe and Disabling Mental Illness (SDMI), Home and Community Based Services waiver







Quality Improvement Organizations

Sharing Knowledge. Improving Health Care. CENTERS FOR MEDICARE & MEDICAID SERVICES

Mountain Pacific 50 W 14th St, Ste. 5 Helena, MT 59601

TOLL FREE: (800) 497-8232 LOCAL: (406) 443-4020

SDMI Provider Contact Info

Contact information (i.e. emails) from Conduent's system is used to build our contact list of providers. Please ensure your email is up to date with Conduent so as not to miss any important updates or information about SDMI waiver



Top SDMI Claims Issues

• Billing under the wrong provider number and or missing team

When billing for SDMI waiver, providers need to bill with the SDMI-specific provider number. If you bill with your NPI and are enrolled with multiple programs (i.e. Big Sky Waiver, DDP), the system may not choose the correct program/provider number. This could hinder claims processing accurately and require providers to rebill the claim.

In addition, team numbers are now required on all SDMI Claims. The claim will deny if the team number is missing.

 The spreadsheet of team numbers was emailed to our contact list. The spreadsheet is also listed on the Medicaid provider website: <u>https://medicaidprovider.mt.gov/</u> under provider type "Severe Disabling Mental Illness, Other Resources" titled March 2025 Team Number Implementation



Top SDMI Claims Issues Cont...

• Billing with an expired PA

- Ensure the PA number you are using is valid for the dates of service being billed. If you have not received an updated PA, please contact the case manager.
- Required HD modifier is missing or billing with the wrong modifier.
- Ensure claims have finalized (denied, not in pending status) prior to resubmitting the claim. Multiple claims in the system for the same member/date of service etc., can hold up the processing of the claim.
- Pending claims for long periods of time
 - Some claims are manually processed by Conduent so please be patient while Conduent staff work through these claims



Individual vs Organization Enrollment Type

- If you enroll as an individual, you are not able to bill for services delivered by other people. You can only bill for services you yourself have delivered.
- If you have employees, you need to enroll as an organization.



Questions?

