

Department of Public Health and Human Services
Presentation to the Children, Families, Health and Human Services Interim Committee
June 25, 2013

Section 1115 Montana Basic Medicaid Waiver Renewal

- Began in 1996 with Able Bodied Adults (commonly referred to as the FAIM waiver)
- Expanded in December 2010 when up to 800 individuals with schizophrenia or bipolar disorder were added (commonly referred to as the HIFA waiver)
- Waiver renewal period February 1, 2014 through January 31, 2017

Current Populations Served

- 8,800 Able Bodied Adults (not pregnant, aged, blind or disabled)
 - incomes at or below 33% of the Federal Poverty Level (FPL)
- 800 individuals
 - with schizophrenia or bipolar disorder
 - at least 18 years of age
 - otherwise ineligible for Medicaid
 - incomes at or below 150% FPL
 - previously qualified for the Mental Health Services Plan (100% State funded)

Current Benefit Package

- Basic Medicaid benefit
 - the following medical services are “generally excluded”: audiology; dental and dentist; durable medical equipment; eyeglasses; optometry and ophthalmology for routine eye exams; personal care services; and hearing aids
 - “generally excluded” services may be covered if they are essential for employment or in an emergency situation

Major Proposed Changes with Renewal

- Increase the Mental Health Services Plan (MHSP) Waiver population from 800 to “up to 2000” individuals
 - Add individuals with a diagnosis of major depressive disorder
 - Update the waiver diagnosis codes for schizophrenic disorder and bipolar disorder
 - Provide the Basic Medicaid Benefit which compared to the MHSP benefit adds a physical health care benefit and increases mental health and pharmacy benefits. (MHSP participants have a limited mental health benefit and a \$425 mental health prescription drug benefit, but no physical health care benefit.)
- Include home infusion as a covered service
- Maintain cost neutrality for the state and federal government