

Memorandum



TO: Children, Families, Health, and Human Services Interim Committee
Legislative Finance Committee
Human Services Interim Budget Committee
FROM: Marie Matthews, Medicaid and Health Services
DATE: December 14, 2021
SUBJECT: Medicaid Change Reporting – December 2021

Purpose:

This memo is to complete the requirements set forth in 53-6-101 (12)(a) by reporting changes to provider rates, Montana Medicaid waivers, and/or the Montana Medicaid State Plan to the Children, Families, Health, and Human Services Interim Committee, the Legislative Finance Committee, and the Health and Human Services Interim Budget Committee.

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Provider Rate Changes

The Department of Public Health and Human Services (DPHHS) is enacting the following rate changes for Medicaid covered services delivered by Medicaid enrolled providers to Medicaid enrollees.

Provider Rates: Inpatient Hospital Rate Decreases

As directed by HB 2, the changes proposed below for inpatient hospital reimbursement (non-CAH) is projected to provide for an overall inpatient hospital reimbursement reduction of 1.0% during SFY 2022.

Inpatient Hospitals (Non-CAH)

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	(\$714,186)	(\$353,258)	(\$148,069)	(\$142,302)
Federal Funds	(\$747,587)	(\$1,578,469)	(\$1,734,427)	(\$1,683,436)
Total	(\$1,461,773)	(\$1,931,727)	(\$1,882,496)	(\$1,825,737)

Provider Rates: Outpatient Hospital Rate Decreases

As directed by HB 2, the changes proposed below for outpatient hospital reimbursement (non-CAH) is projected to provide for an overall inpatient hospital reimbursement and Free Standing Birthing Center reduction of 1.0% during SFY 2022.

Outpatient Hospitals (Non-CAH)

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	(\$238,121)	(\$246,432)	(\$254,687)	(\$263,472)
Federal Funds	(\$912,807)	(\$925,457)	(\$939,664)	(\$954,990)
Total	(\$1,150,928)	(\$1,171,889)	(\$1,194,351)	(\$1,218,462)

Free Standing Birthing Centers

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	(\$100)	(\$130)	(\$168)	(\$219)
Federal Funds	(\$253)	(\$339)	(\$456)	(\$615)
Total	(\$353)	(\$469)	(\$624)	(\$834)

Provider Participation Changes

There are no provider participation changes for this report.

Eligibility Changes

There are no eligibility changes for this report.

Benefit Plan Changes

Benefit Plan: New Benefit Children’s Mental Health Intensive Outpatient Therapy Service

The department will be adding an intensive outpatient therapy (IOP) children’s mental health benefit effective through the end of the COVID 19 public health emergency. IOP services provide weekly structured intensive mental health care to youth with serious emotional disturbance (SED) while allowing youth to safely remain in school, in the home, and in their community.

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	\$ 268,116	\$	\$	\$
Federal Funds	\$ 513,711	\$	\$	\$
Total	\$ 781,827	\$	\$	\$

Benefit Plan: New Developmental Disability Waiver Services

The department has submitted a waiver amendment proposing the addition of two new services to the 1915(c) Home and Community Based Montana Medicaid Comprehensive Waiver for Individuals with Developmental Disabilities. The proposed effective date for this waiver amendment is January 1st, 2022.

Behavior Risk Service (BRS) is an acute service that diverts the need for members to be admitted to an institutional setting or become incarcerated. BRS services are provided in a bundled daily rate which includes components of residential habilitation, Board Certified Behavior Analysis (BCBA) and Registered Behavior Technician (RBT).

High Behavior Service (HBS) is an intensive community-based service for members who are stepping down from BRS; require an ongoing high level of support to maintain behavior and avoid incidents of harm to self or others; or are at risk of legal or institutional involvement or medical intervention. HBS services are provided in bundled daily rate which includes components of residential habilitation, Board Certified Behavior Analysis (BCBA) and Registered Behavior Technician (RBT) or Intensive Behavior Assistant (IBA).

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	\$ 97,301	\$ 511,595	\$ 614,764	\$ 683,071
Federal Funds	\$ 180,781	\$ 945,941	\$ 1,136,701	\$ 1,263,001
Total	\$ 278,082	\$ 1,457,536	\$ 1,751,465	\$ 1,946,072

Benefit Plan: Improved Benefit Comprehensive School and Community Service

The department is proposing the programmatic changes to enhance the quality of Comprehensive School and Community (CSCT) services provided to youth and families. The changes cover; medical necessity criteria, reimbursement limits, reimbursement amounts, service requirements, CSCT team structure, training requirements and funding mechanisms.

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	\$ 1,687,642	\$ 2,348,019	\$ 2,458,376	\$ 2,559,169
Federal Funds	\$ 3,202,074	\$ 4,453,722	\$ 4,663,047	\$ 4,854,232
Total	\$ 4,889,716	\$ 6,801,741	\$ 7,121,423	\$ 7,413,401

Benefit Plan: Improved Benefit Applied Behavioral Analysis Services

The department has department submitted a Medicaid State Plan Amendment (SPA) to make substantial changes to the Autism Treatment Services State Plan, including renaming the State Plan to “Applied Behavior Analysis (ABA) Services.” These changes are being requested to expand access to ABA services and reduce delay in member’s receiving these services.

The most substantial change is expanding the service to more individuals. In addition to providing ABA services to Medicaid Members up to age 21 with a diagnosis of Autism Spectrum Disorder, the proposed changes include expanding services to also include Medicaid Members, up to age 21, with a diagnosis of Intellectual and/or Developmental Disability (defined as having been deemed eligible for the receipt of state sponsored developmental disabilities services). Further expansion of the program is proposed to include Medicaid eligible members with a primary diagnosis of Serious Emotional Disturbance (SED), who are up to 17 years of age, or up to 20 years of age if they demonstrate attendance at an accredited secondary school.

Additional revisions to the benefit plan include changes to the prior authorization process to reduce delays and adding additional services. Proposed changes also give the providers and members more flexibility and control regarding which services are most appropriate for the member, the assessment tools used to measure progress and greater flexibility in choosing where the service is delivered.

The changes will be enacted when approved by CMS, for dates of service August 1st, 2021, and after.

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	\$ 194,553	\$ 377,094	\$ 405,762	\$ 436,194
Federal Funds	\$ 390,738	\$ 742,945	\$ 798,279	\$ 858,150
Total	\$ 585,291	\$ 1,120,038	\$ 1,204,041	\$ 1,294,344

Benefit Plan: Improved SDMI HCBS Waiver Services

The department submitted an Appendix K, Emergency Preparedness and Response and COVID-19 Addendum, to requesting authority for the waiver case management contractor to provide direct services. There is no cost impact to this change.

Benefit Plan: New Adult Behavioral Health Service

The department is proposing to add an After-Hours Crisis Assessment service effective through the public health emergency. Crisis response is an essential service which is even more critical during the ongoing COVID-19 emergency. Adding an after-hours assessment code increases the resources available to provide services statewide and particularly in Montana’s rural and frontier areas. The service will be enacted upon approval with CMS with dates of service July 1, 2021, and after.

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	\$38,853	\$22,075	\$23,178	\$24,337
Federal Funds	\$21,002	\$40,815	\$42,856	\$44,999
Total	\$59,865	\$62,890	\$66,034	\$69,336

Benefit Plan: Single Case Plan Agreements

The department is proposing to add an adult single case agreement/rate. This agreement/rate will be used in instances where it is determined a service is medically necessary and covered by the Montana Medicaid program however there is no enrolled provider available to perform the service. Payment, for prior authorized services, is up to 66% of the provider’s usual and customary or as negotiated between the department and entity.

Fund Source	SFY 2022	SFY 2023	SFY 2024	SFY 2025
State Funds	\$ 1,032,608	\$1,084,239	\$1,138,451	\$1,195,374
Federal Funds	\$ 1,909,297	\$2,004,761	\$2,104,999	\$2,210,249
Total	\$ 2,941,905	\$3,089,000	\$3,243,450	\$3,405,623