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community-based services.

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**** BILL NO. **** 1 **INTRODUCED BY ****** 2 BY REQUEST OF THE **** 3 4 A BILL FOR AN ACT ENTITLED: "AN ACT PROVIDING FOR PRESUMPTIVE ELIGIBILITY UNDER THE 5 6 MONTANA MEDICAID PROGRAM FOR HOME AND COMMUNITY-BASED SERVICES FOR PERSONS WITH PHYSICAL DISABILITIES AND PERSONS WHO ARE ELDERLY; PROVIDING AN APPROPRIATION; 7 8 REQUIRING THE DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES TO APPLY FOR A MEDICAID WAIVER TO FUND THE PROGRAM; AND PROVIDING AN EFFECTIVE DATE." 9 10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA: 11 This legislation does not modify 53-6-401; italicized text included only for convenient reference. 12 13 "53-6-401. Definitions. As used in this part, the following definitions apply: 14 (1) "Department" means the department of public health and human services provided for in 2-15-15 *2201*. 16 (2) "Home and community-based services" means, as provided for in section 1915 of Title XIX of 17 the Social Security Act, 42 U.S.C. 1396n(c), and any regulations implementing that statute, long-term 18 medical, habilitative, rehabilitative, and other services provided in personal residences or in community 19 settings and funded by the department with medicaid money. 20 (3) "Level-of-care determination" means an assessment of a person and the resulting 21 determination establishing whether long-term care facility services to be provided to the person are 22 appropriate to meet the health care and related circumstances and needs of the person. 23 (4) "Long-term care facility" means a facility that is certified by the department, as provided in 24 53-6-106, to provide skilled or intermediate nursing care services, including intermediate nursing care services 25 for persons with developmental disabilities or, for the purposes of implementation of medicaid-funded programs 26 of home and community-based services, that is recognized by the U.S. department of health and human 27 services to be an institutional setting from which persons may be diverted through the receipt of home and

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1 (5) "Long-term care preadmission screening" means, in accordance with section 1919 of Title XIX 2 of the Social Security Act, 42 U.S.C. 1396r, a process conducted according to a specific set of criteria for 3 determining whether a person with intellectual disability or mental illness may be admitted to a long-term 4 care facility. 5 (6) "Persons with disabilities or persons who are elderly" means, for purposes of establishing 6 home and community-based services, those categories of persons who are elderly and disabled as defined in 7 accordance with section 1915 of Title XIX of the Social Security Act, 42 U.S.C. 1396n." 8 9 NEW SECTION. Section 1. Presumptive eligibility for persons with physical disabilities or 10 elderly persons. (1) (a) Presumptive eligibility under the Montana medicaid program for certain home and 11 community-based services may be granted to a person who has a physical disability or who is elderly upon 12 completion of the screening process described in this section and authorization by the division of the 13 department that administers long-term care services for senior citizens and individuals with physical disabilities. 14 Home and community-based services covered by the presumptive eligibility program in [this (b) 15 section] include personal care services, meal delivery, personal emergency response systems, medical 16 equipment and supplies, assistive or adaptive technology, and other services necessary to successfully 17 transition a patient from a hospital to the community or stabilize a patient within the community to prevent 18 hospitalization. 19 (2) The screening process may be conducted by: 20 staff of the division of the department that administers long-term care services for senior (a) 21 citizens and individuals with physical disabilities; or 22 (b) staff of one of the following facilities who have received training and certification from the 23 department to make presumptive eligibility determinations: 24 (i) an area agency on aging or their designated subcontractor, 25 (ii) a tribal entity, or 26 (iii) a hospital or hospital-affiliated facility; or 27 (vi) other entities deemed appropriate by the department or the division of the department that

administers long-term care services for seniors citizens and individuals with physical disabilities.

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1	(c)	Training must be completed initially before an entity is certified to complete presumptive
2	eligibility determinations and annually thereafter.	
3	(3)	The screening process shall include:
4	(a)	an application as prescribed by the department; and
5	(b)	self-attestation that the applicant meets the income, resource, and residency requirements of
6	the Montana medicaid program prescribed in 53-6-131; and	
7	(c)	a functional assessment to establish an in-home and community care plan.
8	(4)	The applicant or the applicant's representative must submit an application for ongoing
9	coverage unde	er the Montana medicaid program provided for in 53-6-131 within 10 calendar days of the
10	applicant's presumptive eligibility determination.	
11	(5)	The presumptive eligibility period begins on the date the screening is completed and ends on
12	the date a determination of ongoing Montana medicaid program eligibility is made or the end of the month	
13	following the month of the presumptive eligibility determination, whichever is earlier.	
14	(6)	A person may receive services under a presumptive eligibility only once within a consecutive
15	12-month period.	
16	(7)	The applicant does not have a right to an administrative hearing on presumptive eligibility.
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18	NEW S	SECTION. Section 2. Appropriation. [This section intentionally left blank for committee
19	consideration.]	
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21	NEW SECTION	ON. Section 3. Codification instruction. [Section 2] is intended to be codified as an integral
22	part of	Title 53, chapter 6, part 4, and the provisions of Title 53, chapter 6, part 4, apply to [section 2].
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24	NEW S	SECTION. Section 4. Effective date. [This section intentionally left blank for committee
25	consideration.]	
26		- END -