

BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES DIVISION

NP 10001 - FTE Budget Request

Summary:

This new proposal requests 11.00 FTE to conduct waiver assurance activities to complete required federal reporting in the Behavioral Health and Developmental Disabilities Division. In the 2021 Session, 11.00 Quality Improvement Specialist (QIS) FTE positions were removed from the budget. These positions facilitate incident management investigations to ensure health and safety of waiver members. The requested FTE will be filled by individuals currently in temporary positions.

Background:

QIS staff support the delivery of community-based services for Montana Medicaid members. The guidance and oversight tasks performed by these staff are an integral component of the 0208 Comprehensive Home and Community Based Services (HCBS) Waiver. The waiver provides services through individual care plans to over 2500 Montanans each year, helping developmentally disabled Montanans live in their community while decreasing their overall health care costs.

CMS conditions the federal funding participation of the 0208 Comprehensive Home and Community Based Services Waiver on the successful operation of a waiver assurance system targeted at the oversight of beneficiary health and welfare. The QIS position performs a critical role in the DDP system. The DDP waiver assurance system includes monitoring, tracking and reporting of 6 assurances, 17 sub-assurances and 40 performance measures. The assurances, sub-assurances, and performance measure data is reported to CMS in two separate reports; the CMS 372 Report and the CMS Evidentiary Report. The QIS monitor, track and report on all data necessary to complete the required reports.

Staff are employed to deliver three primary outcomes:

- 1. Quality support of members and providers,
- 2. Successful operation of the federally required waiver assurance system
- 3. Rapid monitoring of health and safety incidents and critical incidents

Staff Responsibilities:

- 1. Conduct monthly on-site visits to HCBS waiver providers to ensure health, safety, and quality of life for all waiver recipients.
- 2. Complete ongoing and annual reviews of all waiver assurances and address deficiencies involving the performance and quality of waiver services provided
- 3. Participate in weekly incident management meetings at each assigned provider.
- 4. Provide guidance and technical assistance to service providers in response to crisis situations with individuals receiving waiver services.
- 5. Review and conduct critical incident investigations and reviews investigations conducted by service providers.
- 6. Monitor trends in incident management reports to prevent future occurrences and follows up with Quality Assurance Observation Sheets as necessary to address compliance.

7. Complete initial waiver Level of Care and completes annual redeterminations required to access and maintain federal HCBS funding for waiver services.

It is important to note that roughly 66% of individuals receiving these waiver services do not live in a licensed setting and therefore the Office of Inspect General (OIG) does not provide oversight for these individuals. Additionally, due to the extensive waiver administration activities that these QIS staff complete, their positions are eligible and funded with 50% federal matching funds.

Budget Request:

This change package requests \$1,778,672 in total funds over the biennium, including \$889,336 in general funds and \$889,336 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2024	\$441,101	\$0	\$441,102	\$882,203
FY 2025	\$448,234	\$0	\$448,234	\$896,468
Biennium Total	\$889,335	\$0	\$889,336	\$1,778,671