

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Denver Regional Office  
1600 Broadway, Suite #700  
Denver, CO 80202-4967



## **REGION VIII - DENVER**

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June 24, 2013

MT.0208.R05.00; df

Ms. Mary Dalton  
State Medicaid Director  
Department of Public Health and Human Services  
P.O. Box 4210  
Helena, MT 59604-4210

Dear Ms. Dalton,

Your request to renew the Montana Home and Community-Based Services Waiver for Individuals with Developmental Disabilities, as authorized solely under section 1915(c) of the Social Security Act, has been approved. This waiver serves individuals with intellectual and/or developmental disabilities of all ages who meet the level of care provided in an intermediate care facility for individuals with intellectual disabilities and related conditions. The waiver renewal has been assigned CMS control number MT.0208.R05.00, which should be used in all future correspondences regarding this program.

The renewal, effective 7/1/13 through 6/30/18, results in the following major changes: 1) Merge the MT.0371 Community Supports into this renewal; 2) Add new and revised vocational definitions to include Supported Employment, Individual Employment Support, Follow Along Support, Small Group Employment Support, Co-Worker Support, Job Discovery/Job Preparation, Day Services, Retirement Services, Day Supports and Activities; 3) Add service definition for Remote Monitoring Equipment and Remote Monitoring; 4) Remove current vocational definitions, Day Habilitation and Supported Employment as well as Respiratory Therapy; 5) Remove Family Support Specialist certification as a qualified provider requirement for Waiver Children's Case Management, replaced with equal education and experience to allow a more open qualified provider enrollment process; 6) Remove outdated references; 7) Remove the requirement for provider board of director's approval on purchases over \$4,000 for Environmental Modifications/Adaptive Equipment since not all providers are required to have a board of directors. DDP approval will remain a requirement; 8) Modify the service definitions for Individual Goods and Services, Transportation, and Personal Supports, and change Board Certified Behavior Analyst to Behavioral Support Services; 9) Add Behavioral Support Services as service option to facilities subject to section 1616 (e) of the Social Security Act; 10) Change references from IFES services to Children's Waiver Services to reflect current verbiage; 11) Update Appendix D to reflect changes in plan of care rules and policies, Appendix E to reflect new self-directed options, Appendix F to reflect changes to the additional dispute resolution process, Appendix G to reflect changes in Incident Management rules and policies, Appendix H to more accurately reflect the currently CMS approved Quality Improvement Strategy, Appendix I to reflect any updates to the financial accountability systems

and processes, Appendix J, and performance measures; 12) Remove Children's Mental Health Officer as an option for completing DD eligibility; and 13) Increase waiver authority to 2750 to accommodate the transition of 0371 waiver individuals, Money Follows the Person MFP) demonstration grant individuals, and individuals referred from institutional settings to HCBS services; reserved waiver capacity is being requested for MFP grant individuals, individuals referred from institutional settings to HCBS services and the transition of individuals from the Community Supports waiver to the 0208 waiver.

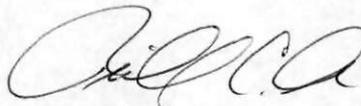
The following is a table of the renewed estimated utilization and costs:

	<b>Unduplicated Recipients (Factor C)</b>	<b>Estimated Community Costs Per Person (Factors D+D')</b>	<b>Estimated Institutional Costs per Person (Factors G+G')</b>	<b>Total Waiver Costs (Factor D only)</b>
<b>Year 1</b>	2,750	\$44,146.00	\$142,877.00	\$96,869,767.72
<b>Year 2</b>	2,750	\$45,033.74	\$196,845.00	\$99,530,040.87
<b>Year 3</b>	2,750	\$46,223.43	\$184,475.00	\$101,877,671.56
<b>Year 4</b>	2,750	\$47,147.78	\$188,276.00	\$103,459,891.28
<b>Year 5</b>	2,750	\$48,615.03	\$192,159.00	\$106,499,339.84

Please see enclosed addendum for general HCBS waiver financial reporting requirements.

If you have any questions, please feel free to contact Di Friedli at (303) 844-7112 or via e-mail at [Diana.Friedli@cms.hhs.gov](mailto:Diana.Friedli@cms.hhs.gov).

Sincerely,



Richard C. Allen  
Associate Regional Administrator  
Divisions of Medicaid & Children's Health Operations

Copy: Jeff Sturm, DDP  
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Darla Tenter, MT  
Ondrea Richardson, CMS  
Jeff Clopein, CMS MFP PO  
Gary Williams, CMS  
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**Reporting Expenditures under the Waiver**

In order to track expenditures under this waiver, Montana will report waiver expenditures through the Medicaid and Children’s Health Insurance Program Budget and Expenditure System (MBES/CBES), following routine CMS-64 reporting instructions outlined in section 2500 of the State Medicaid Manual (SMM).

All HCBS waiver expenditures claimed under the authority of Title XIX of the Act must be reported each quarter on separate Forms CMS-64.9 Waiver and/or CMS-64.9P Waiver, identified by the waiver number assigned by CMS.

Report only approved waiver services as designated in the state’s approved waiver application which are provided to eligible waiver recipients on the corresponding Line 19A-HCBS Payment Waiver Pop-Up Feeder Form, as illustrated in the table below.

<b>HCBS FOR Individuals with Developmental Disabilities</b> <b>MT 0208.R05.00 Effective Date of Renewal: 07/01/2013</b>		
<b>SERVICE TYPE</b>	<b>SERVICE</b>	<b>CMS 64.9 Waiver Feeder Form (Line to report on)</b>
Statutory Service	Day Support and Activities	Line 6b
Statutory Service	Homemaker	Line 2
Statutory Service	Job Discovery/Job Preparation	Line 7A
Statutory Service	Live-In Caregiver (42 CFR 441.303(f)(8))	Line 13
Statutory Service	Residential Habilitation	Line 6A
Statutory Service	Respite	Line 8
Statutory Service	Supported Employment - Follow Along Support	Line 7b
Statutory Service	WCCM- Waiver-funded Children's Case Management	Line 1
Extended State Plan Service	Occupational Therapy	Line 14
Extended State Plan Service	Physical Therapy	Line 14
Extended State Plan Service	Psychological Services	Line 14
Extended State Plan Service	Speech Therapy	Line 14

Supports for Participant Direction	Supports Brokerage	Line 14
Other Service	Adult Companion Services	Line 30
Other Service	Adult Foster Support	Line 30
Other Service	Assisted Living	Line 30
Other Service	Behavioral Support Services	Line 30
Other Service	Caregiver Training and Support	Line 30
Other Service	Community Transition Services	Line 30
Other Service	Environmental Modifications/Adaptive Equipment	Line 30
Other Service	Individual Goods and Services	Line 30
Other Service	Meals	Line 30
Other Service	Nutritionist	Line 30
Other Service	Personal Care	Line 30
Other Service	Personal Emergency Response System (PERS)	Line 30
Other Service	Personal Supports	Line 30
Other Service	Private Duty Nursing	Line 30
Other Service	Remote Monitoring Equipment	Line 30
Other Service	Remote Monitoring	Line 30
Other Service	Retirement Services	Line 30
Other Service	Supported Employment - Co-Worker Support	Line 30
Other Service	Supported Employment - Individual Employment Support	Line 30
Other Service	Supported Employment - Small Group Employment Support	Line 30
Other Service	Transportation	Line 30

### **Administrative Costs**

Administrative costs will not be included in the cost neutrality limit, but the state must separately track and report administrative costs that are directly attributable to the HCBS waiver on Forms 64.10 Waiver and/or 64.10P Waiver. Federal financial participation (FFP) will be available for direct (i.e. salaries, plan of care development, level of care assessments and eligibility determination for benefits) and applicable indirect administrative costs to the state within the scope of the waiver.

Should you require further clarification regarding HCBS financial reporting on the Form CMS-64, please contact Gary Williams at [gwilliams3@cms.hhs.gov](mailto:gwilliams3@cms.hhs.gov) or (307) 772-2110.