

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
701 5th Avenue, Suite 1600, MS/RX-200
Seattle, Washington 98104



Medicaid and CHIP Operations Group

June 25, 2020

Marie Mathews, Medicaid Director
Montana Department of Public Health and Human Services
PO Box 4210
Helena, MT 59604-4210

RE: Behavioral Health Severe Disabling Mental Illness Home and Community Based Wavier Services, MT 0455.R03.00, renewal

Dear Ms. Mathews:

The Centers for Medicare & Medicaid Services (CMS) is approving your request to renew the Behavioral Health Severe Disabling Mental Illness Home and Community Based Services (HCBS) waiver for adults ages 18 and up with mental illness. The CMS Control Number for the renewal is MT 0455.R03.00 and should be referenced on all future correspondence relating to this waiver renewal.

This waiver operates under a concurrent authority with a 1915(b)(4) Fee-for-Service (FFS) Selective Contracting Program waiver, CMS control number MT-06. R01.M00, which is titled HCBS SDMI Case Management Waiver. This 1915(b)(4) waiver allows Montana to restrict beneficiaries to a limited number of waiver case management providers.

For this HCBS waiver, the state has requested a waiver of Section 1902(a)(10)(B) of the Social Security Act in order to waive comparability of services. The waiver has been approved for a five year period with an effective date of July 1, 2020.

The waiver will offer the following supports to its participants: Adult Day Health, Case Management, Residential Habilitation, Respite, Supported Employment, Behavioral Intervention Assistant, Community Transition, Consultative Clinical and Therapeutic Services, Environmental Accessibility adaptations, Health and Wellness, Homemaker Chore, Life Coach, Meals Non-Medical Transportation, Pain and Symptom Management, Personal Assistance Service, Personal Emergency Response System, Private Duty Nursing, and Specialized Medical Equipment and Supplies. The following number of unduplicated recipients and estimates of average per capita cost of waiver services have been approved:

Waiver Year	C Factor Estimates	D Factor Estimates	D' Factor Estimates	G Factor Estimates	G' Factor Estimates
Year 1	600	\$26,140.03	\$12,682.06	\$74,446.40	\$1,520.35
Year 2	650	\$26,777.14	\$13,316.16	\$74,807.52	\$1,596.36
Year 3	750	\$27,092.15	\$13,981.97	\$75,186.71	\$1,676.18
Year 4	750	\$27,495.42	\$14,681.07	\$75,556.21	\$1,759.99
Year 5	750	\$27,911.44	\$15,415.12	\$75,972.83	\$1,847.99

This approval is subject to your agreement to serve no more individuals than those indicated in “C Factor Estimates” shown in the table above. If the state wishes to serve more individuals or make any other alterations to this waiver, an amendment must be submitted for approval. The state may renew the waiver at the end of the five-year period by providing evidence and documentation of satisfactory performance and oversight. It is important to note that CMS’ approval of this waiver solely addresses the state’s compliance with the applicable Medicaid authorities. CMS’ approval does not address the state’s independent and separate obligations under federal laws including, but not limited to, the Americans with Disabilities Act, Section 504 of the Rehabilitation Act, or the Supreme Court’s Olmstead decision. Guidance from the Department of Justice concerning compliance with the Americans with Disabilities Act and the Olmstead decision is available at http://www.ada.gov/olmstead/q&a_olmstead.htm.

We appreciate your cooperation during the waiver renewal process. If there are any questions concerning this information, please contact me at (206) 615-2356 or your staff may contact Laurie Jensen at Laurie.Jensen@cms.hhs.gov or (303) 844-7123.

Sincerely,

David L. Meacham

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L. Meacham -S
Date: 2020.06.25 08:22:27
-07'00'

David L. Meacham, Director
Division of HCBS Operations and Oversight

Enclosure

cc:
Dianne Kayala, CMS