

	Addictive and Mental Disorders Division Severe and Disabling Mental Illness, Home and Community Based Services Waiver Manual
	Date effective: July 1, 2020 Date revised:
Policy Number: <i>SDMI HCBS 380</i>	Subject: Respite

Definition

Respite is a service furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the member. Respite care may be provided in the member’s residence or by placing the member in another private residence, adult residential setting, or licensed nursing facility.

Determination of Need

Respite may be provided to members unable to care for themselves that, in the absence of respite care, would require institutional level of care.

Provider Requirements

- (1) Respite may be provided by:
 - (a) a personal care/home health agency that are a business incorporated under the laws of the state of Montana and must be properly insured to provide personal care services;
 - (b) a nursing facility; or
 - (c) an assisted living facility.
- (2) Respite provided to a member in nursing facility cannot exceed 30 days at a time due to the settings regulation.
- (3) Providers listed in (1) must be enrolled as a Montana Medicaid provider.
- (4) Direct care staff must:
 - (a) be at least 18 years of age;
 - (b) within 30 days of hire receive training in abuse reporting, incident reporting, client confidentiality, and any specialty training relating to the need of the member served, as outlined in the person-centered recovery plan.
 - (c) possess the ability to complete documentation requirements of the program.

- (d) agree to a state criminal background check; and
- (e) possess a valid driver's license and proof of automobile liability insurance if transporting the member.

Service Requirements

- (1) Respite may be made available to members who receive foster care for the relief of a foster care provider, provided that there is no duplication of payment. When respite is furnished for the relief of a foster care provider, foster care services may not be billed during the period that respite is furnished.
- (2) Respite care may not be furnished for the purpose of compensating relief or substitute staff for any other residential habilitation setting including assisted living, intensive mental health group home, mental health group home, or adult group home.

Utilization

- (1) Respite is based on the member's assessed need and are limited to additional services not otherwise covered under Medicaid state plan.