



**SENIOR & LONG TERM CARE DIVISION
COMMUNITY SERVICES BUREAU
Home Health Policy Manual**

Title: Home Health Policy 601
Section: ADMINISTRATIVE REQUIREMENTS
Subject: Provider Eligibility
Reference: ARM 37.40.702, 42 CFR Part 484
Supersedes: Policy 601, Issued 05/01/1999

**PROVIDER
REQUIREMENTS**

Providers of Home Health services must be:

1. Licensed by the State of Montana;
2. Certified by Medicare; and
3. Enrolled as a Medicaid Provider.

Providers must adhere to all Conditions of Participation found in 42 CFR 484.