

Monthly Provider Meeting

January 26, 2026, noon



DEPARTMENT OF
**PUBLIC HEALTH &
HUMAN SERVICES**

SDMI Provider Questionnaire

Annual SDMI Provider Questionnaire

- ❖ SDMI sends out a provider questionnaire annually in July each year by email for CMS performance measure data due.
- ❖ Is required for providers to fill out.
- ❖ Link to form in email: completed through Microsoft Forms.
- ❖ Questions (Fiscal Year/Dates are updated each year)
 1. Was staff trained to identify, address and/or prevent unauthorized use of restrictive interventions, seclusion and/or restraints during Fiscal Year 2025 (07/01/2024 to 06/30/2025)?
 2. Do you have policies in place prohibiting the use of restrictive interventions during Fiscal Year 2025 (07/01/2024 to 06/30/2025)?
 3. For BIA or Life Coaches only: (if not applicable, please put in "N/A")
What is the number of BIA/Life Coach providers who received 8hrs of behavioral health training for treatment and recovery for SDMI members during Fiscal Year 2025 (07/01/2024 to 06/30/2025)?






Questions?

Seclusion and Restraint

- Our currently approved Waiver application with CMS states:
 - The state does **NOT** permit or prohibits the use of restraints, restrictive interventions and/or seclusion during the course of the delivery of Waiver services.
 - Therefore, the State is responsible for detecting the unauthorized use of restraints, restrictive interventions and/or seclusion.





HCBS SDMI
120- Bill of
Rights and
Responsibilities

- (1) SDMI HCBS waiver members must be assured of the following rights:
 - (a) the right to choose to receive waiver services in the community or reside in a nursing facility;
 - (b) the right to refuse services, or to request a change in caregiver without fear of reprisal or discrimination;
 - (c) the right to choose among services that are available and appropriate and are delivered by the qualified provider of your choice;
 - (d) the right to appeal any denial of Medicaid coverage for services;
 - (e) the right to expect that all medical, psychological, and financial records will be kept confidential;
 - (f) the right to be free of coercion, discrimination, or reprisal for exercising your right to file a complaint or grievance;
 - (g) the right to consult with an attorney, advocate, or legal representative;
 - (h) the right to be free from physical restraint or isolation (seclusion) from waiver providers;
 - (i) the right to be free from abuse and neglect;

SDMI HCBS 500 Serious Occurrence Report

- (1) A “serious occurrence” means a critical incident, including abuse, neglect, and exploitation as defined by Montana Code Annotated, 52-5-803, involving a member which affects the health, welfare, or safety of the member under the circumstances listed below.
 - (1) Types of serious occurrences that must be reported are as follows:
 - (k) all use of restrictive interventions, seclusion, or restraints;

What is a restrictive intervention?



- Restrictive interventions can include:
 - seclusion
 - physical restraint
 - isolation time-out
 - protective devices used to reduce behavior that is injurious to the person, others or property.





What is restraint?

- **Restraint:** means any method (chemical or physical) of restricting a person's freedom of movement that prevents them from independent and purposeful functioning. This includes seclusion, controlling physical activity, or restricting normal access to the resident's body that is not a usual and customary part of a medical diagnostic or treatment procedure to which the resident or the authorized representative has consented.

Examples of Restraint:

Considered Restraint (Not Allowed)

- Holding or immobilizing a member's arms, body, or movement
- Using belts, straps, chairs, or devices to restrict movement
- Standing in a doorway to physically prevent exit
- Using medication **solely to control behavior** (chemical restraint)
- Threats, intimidation, or coercion that restrict freedom of choice

What is seclusion?

- **Seclusion** means involuntarily confining a member alone in a space they cannot freely exit.

Examples of Seclusion:

Considered Seclusion (not allowed):

Locking a door

Holding a door shut

Telling a member they must stay in a room until calm

Using “time-out” in a way the member cannot refuse



Questions?

PROVIDER EDUCATION



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SDMI Provider Education

Purpose of the program

The goal of the SDMI HCBS waiver program is to keep members independent in the community for as long as possible and to promote the health and independence of Medicaid members who have a severe disabling mental illness.

AWARE Inc. is the contracted case management agency for the SDMI waiver program



SDMI Provider Education General Policy

SDMI services must not be provided and cannot be billed when an individual is on the SDMI waiting list.

The SDMI waiver program is not an entitlement program and is subject to enrollment criteria.



SDMI Provider Education Reporting Requirements

Any requests to add additional residential services and/or setting locations must be submitted to the program central office staff for review.

If you are interested in providing additional services, you must make a request through the program by contacting Jennifer Bergmann. The program will review the request and then provide you with confirmation if you are authorized to provide the additional requested service(s).



SDMI Provider Education Eligibility Verification Requirements

The [General Information for Providers Manual](#), under the Member Eligibility and Responsibilities section, states member eligibility may change monthly. Providers must verify eligibility at each visit and before providing services.

Please remember it is the providers' responsibility to check each SDMI member's eligibility every month prior to providing services to ensure coverage.



SDMI Provider Education Room and Board

Room and Board for SDMI waiver members is \$545. Federal rules prohibit the SDMI waiver program from paying Room and Board. The rate for Room and Board is not set by the SDMI program, it is established by The Department of Public Health and Human Services.



SDMI Provider Education

Links to resources

[Severe Disabling Mental Illness SDMI Home and Community Based HCBS Waiver Program \(mt.gov\)](#)

This is our program specific webpage, which provides important links, updates, letters and memos, mental health training links, as well as our approved waiver application. Some of the links that can be accessed through this site include:

[SDMI HCBS Waiver Manual \(mt.gov\)](#): SDMI Medicaid Waiver Policy Manual

[Residential Habilitation Provider List](#): up-to-date list of residential habilitation providers



SDMI Provider Education

Links to resources - continued

[AWARE SDMI Mobile Directory Contact List](#): up-to-date list of AWARE case management staff phone numbers and email addresses

[88 \(mt.gov\)](#): Montana Medicaid Provider Site-SDMI specific as shown below:

This site includes links to the provider manuals, Medicaid Rules and Regulations (CFR, MCA and ARM), fee schedules (SDMI), provider notices, as well as other resources)



SDMI Provider Education

Links to resources

[Chapter 85 General Medicaid Services](#)

1. 37.85.414 MAINTENANCE OF RECORDS AND AUDITING

(1) All providers of service must maintain records which fully demonstrate the extent, nature and medical necessity of services and items provided to Montana Medicaid recipients. The records must support the fee charged or payment sought for the services and items and demonstrate compliance with all applicable requirements.

a) All records which support a claim for a service or item must be complete within 90 days after the date on which the claim was submitted to Medicaid for reimbursement. A record that is required to be signed and dated, including but not limited to an order, prescription, certificate of medical necessity, referral or progress note, is not complete until it has been signed and dated.



SDMI Provider Education

Links to resources - continued

[Code of Federal Regulations \(Title 42\)](#)

<https://leg.mt.gov/> (Choose “Laws & Bills”
then “Montana Statutes – MCA”)

Applicable Section: Title 53, Chapter 6

[Administrative Rules of Montana \(Title 37\)](#)



SDMI Provider Education

Links to resources

Montana HCBS Website:

[Home and Community Based Service \(mt.gov\)](#)

This webpage is the central hub for information on the transition to fully compliant HCBS settings. It includes stakeholder communications, changes to the transition plan as it is revised, finalized results of onsite assessments and remediation status.



SDMI Provider Education

Links to resources

Montana Healthcare Programs Provider Enrollment Website: **[providerenrollment \(mt.gov\)](https://providerenrollment.mt.gov)**

This webpage is the primary provider enrollment site and includes online services, resources by provider type, provider enrollment, as well as the ability to sign up for the Claim Jumper. The Claim Jumper is published monthly and provides important announcements to providers; therefore, it is highly encouraged to register to receive the notifications.



SDMI Provider Education

Links to resources

Electronic Visit Verification (EVV) Website:

[Electronic Visit Verification \(mt.gov\)](#)

This webpage is dedicated to electronic visit verification information. EVV is a technology that automates the gathering of service information by capturing time, attendance and care plan information entered by a home care worker at the point of care. EVV is limited to specific personal care services found here: **[EVV Services \(mt.gov\)](#)**.

Please email questions to: **EVVQuestions@mt.gov**



SDMI Provider Education

Links to resources

Office of Public Assistance Website:

[Montana DPHHS - SNAP, TANF, LIHEAP and Health Coverage Assistance Application \(mt.gov\)](#)

Montana Public Assistance Helpline 1-888-706-1535



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SDMI Provider Education

Questions about billing/claim:

Please contact your AWARE Inc. case management team first to verify all information on your prior authorization as entered for billing purposes, is correct.

If it appears all billing information is entered correctly from the prior authorization and you continue to have questions, please contact Conduent.

Provider Relations for general claims questions, questions about enrollment, and provider payments and denials.



SDMI Provider Education

Montana Medicaid Provider Relations

Questions about billing/claim:

Telephone:

(800) 624-3958 In/Out of state

(406) 442-1837 Helena

IVR (24/7 verify member eligibility, payments, enrollment status etc.)

(800) 714-0060

Email:

MTEnrollment@conduent.com

MTPRHelpdesk@conduent.com



SDMI Provider Education

Questions regarding how to provide SDMI services

Please refer to and review the SDMI policy manual, and if further clarification is needed, contact the AWARE Inc. case management team.



SDMI Provider Education

How to stay informed!!

- ✓ Sign up for the Claim Jumper_communications
- ✓ Attend the SDMI Monthly Provider Calls
- ✓ Keep your eyes on the websites for updated information



SDMI Provider Education

The SDMI Team

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