


Monthly Provider Meeting

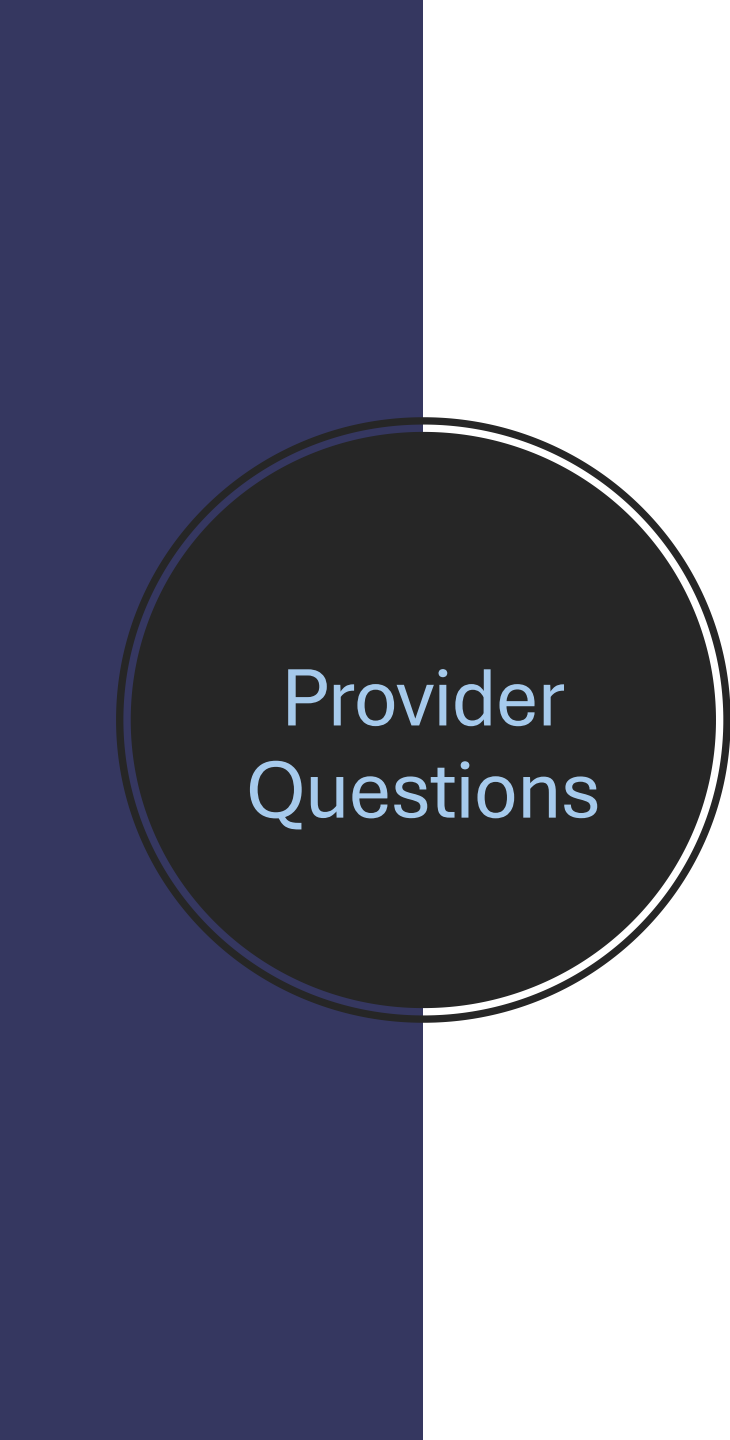
February 23, 2026, noon



DEPARTMENT OF
**PUBLIC HEALTH &
HUMAN SERVICES**

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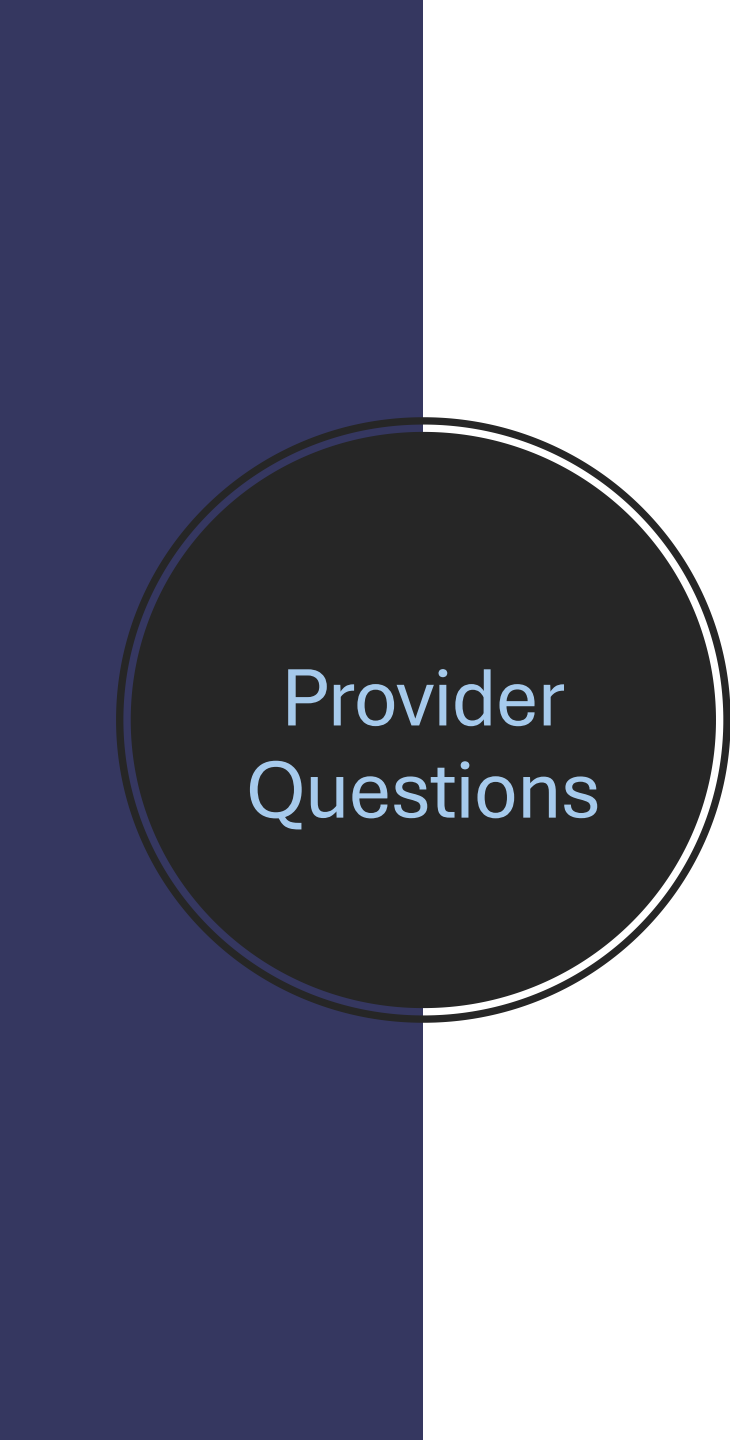
Provider Questions



Provider Questions

Information is being requested on how to address emergency situations in which a resident is physically harming another resident or employee.


- Refer to Licensing
- Although the federal rules governing the SDMI waiver ensures an individual's right of freedom of restraint and does not permit the use of blanket restrictions related to seclusion, restraints and restrictive protocol, it does not prohibit intervention required in an emergency situation. The use of restrictive interventions, seclusion, or restraints requires a provider to follow Serious Occurrence Report policies found in SDMI 500.




Provider Questions

A provider had a member with chicken pox recently. When the member returned to the facility, it was determined they would be contagious for 10 days. The provider requests information on the ability to ask the member to stay in their room for the duration of infection and how that situation should be approached.

- Refer to the Licensing Unit for their requirements: 37.106.2855 INFECTION CONTROL
- Notify your case management team when you become aware of the situation so the CMT can evaluate for a risk assessment.

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Provider Questions




Provider
Questions

Information on the SDMI Enrollment List

- a. There are approximately 375 individuals on the SDMI enrollment list.

- a. There are approximately 10 approved referrals for the SDMI program per month.

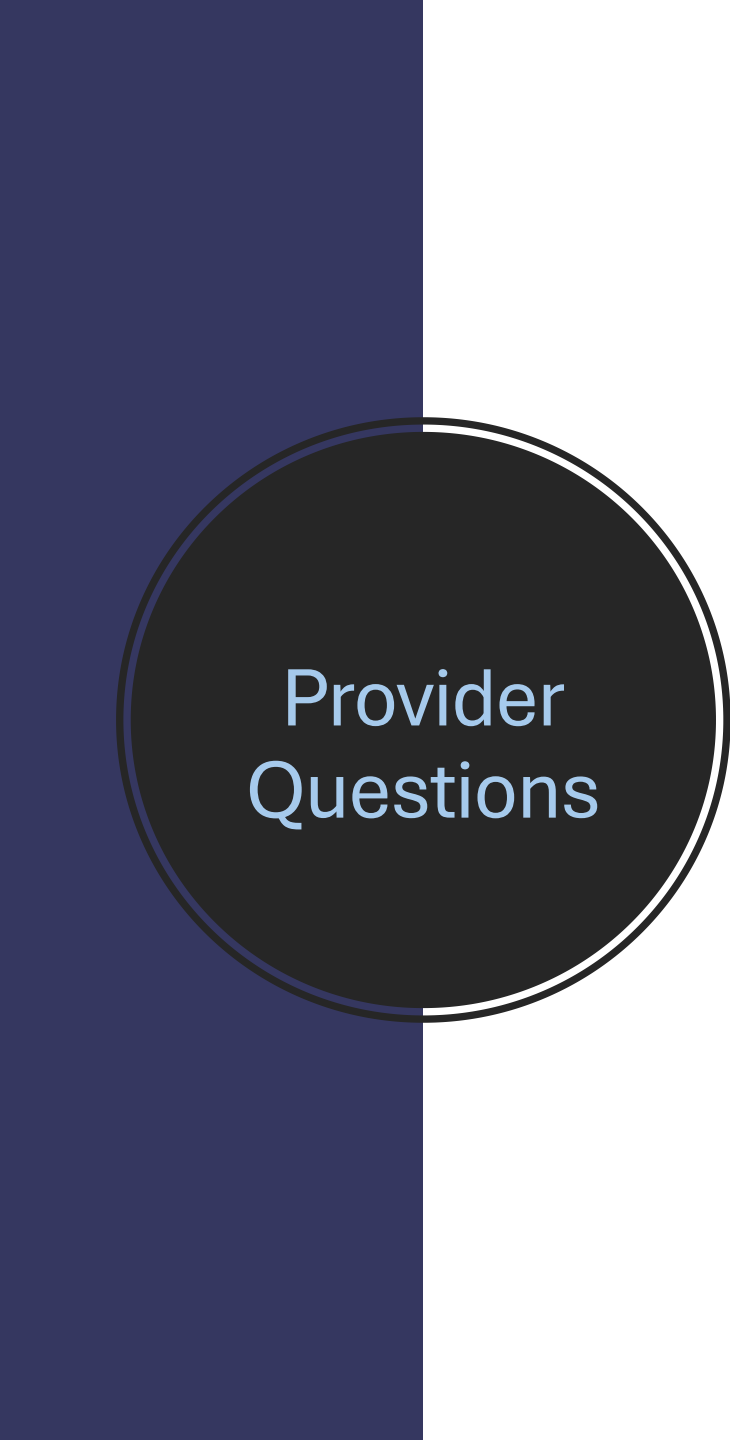


Provider
Questions

Information on referral processing

The approved referrals are added to the wait list as the referral report is received from Mountain Pacific each month.

Requests to confirm a referral has been approved can be responded to daily.




Provider Questions

Information on enrollment requests

We have been working with the OPA on 60 new enrollment evaluations and that list will grow weekly as we continue to work through the enrollment list.

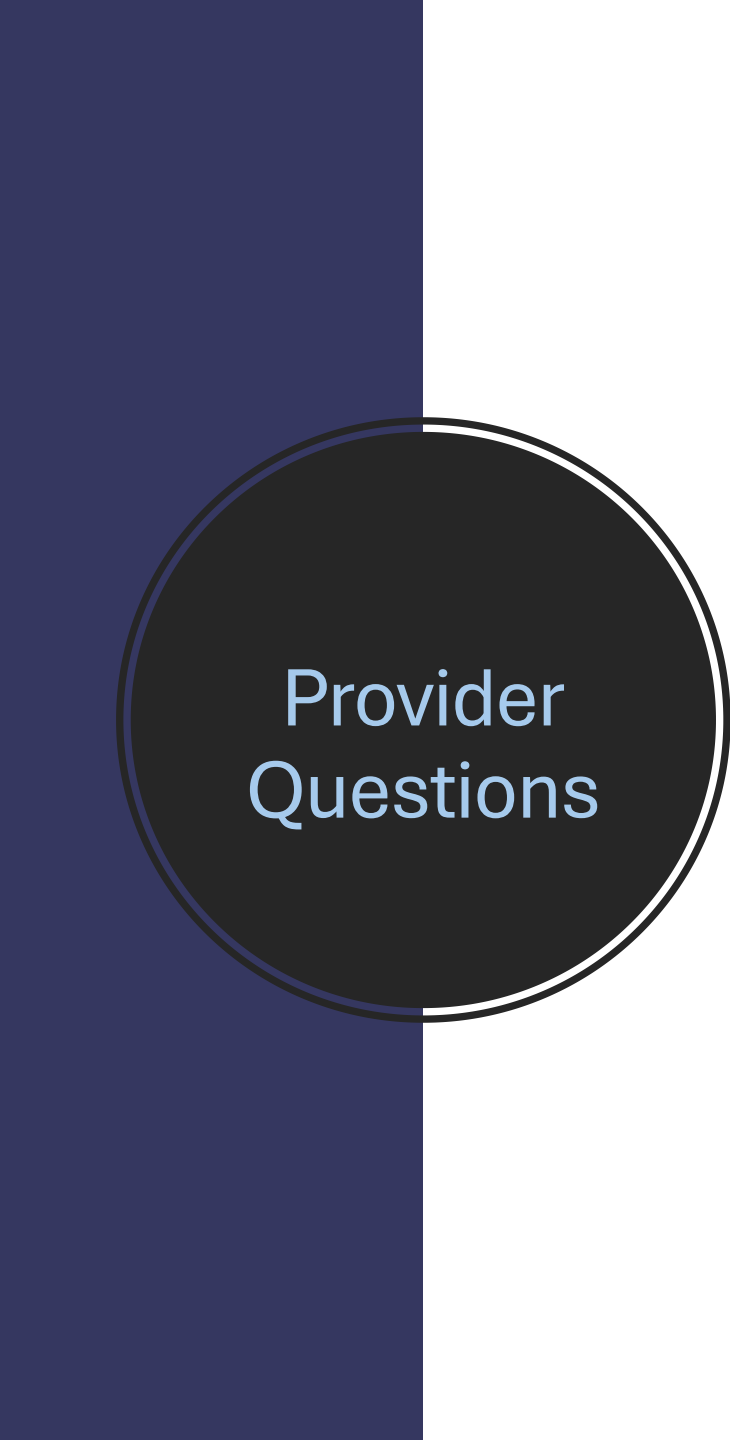
The program's goal is to continue pursuing enrollment evaluations until the enrollment list is exhausted, all new referrals have been evaluated and/or the program meets capacity.



Provider Questions

Information on enrollment processing

The program is pursuing an additional team member to assist with the oversight and management of the referral and enrollment process.




Provider Questions

Additional clarification regarding enrollment list:

- Although the wait list is prioritized based on first-come, first-served, there are individuals on the wait list that were not screened for Medicaid eligibility. Medicaid eligibility is a requirement, and NEW referrals require the individuals to be authorized for Medicaid before a referral may be processed.
- Individuals currently on the enrollment list who do not have Medicaid, will be given 30 days to submit an application for Medicaid when they are selected for potential enrollment.

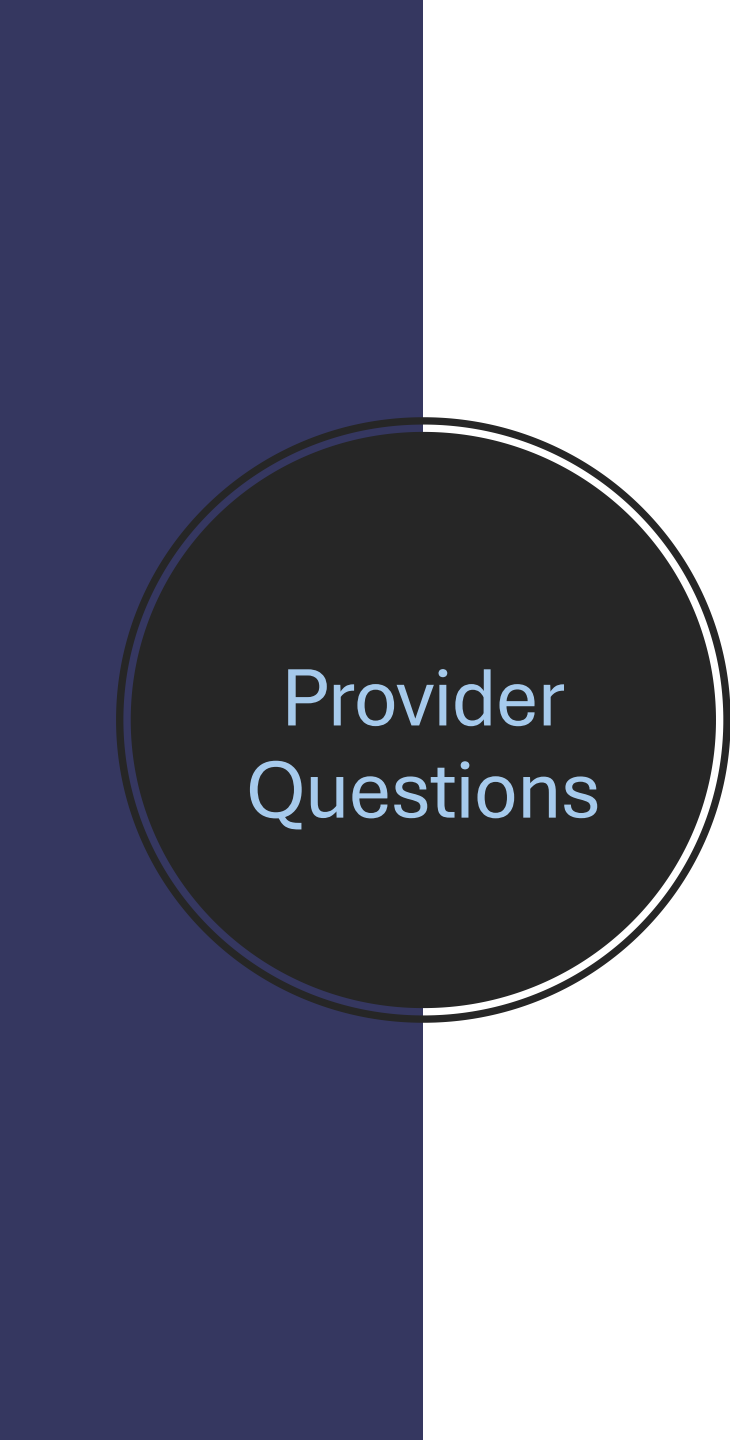


Questions?



Provider
Questions

We will have more information in coming months regarding enrollment data including the types of placements (community or residential habilitation).



Provider Questions

Residential Habilitation providers have requested an update to the prioritization of individuals on the wait list. Specifically, prioritizing individuals who have a potential placement approved.

- A. Any update will require a waiver amendment.
- B. The program is in the process of a waiver renewal. Any amendments will be pursued after the waiver renewal has been approved and finalized by CMS.



Questions?

Referral to enrollment evaluation

Mountain Pacific processes referral requests.

Individuals with an approved Level of Care and SDMI Level of Impairment are forwarded to the SDMI program staff to be placed on the SDMI enrollment list.

Individuals are prioritized for potential enrollment into the program based on first-come, first-served.

Once a person has been selected for potential enrollment, a request is sent to the Office of Public Assistance for a financial eligibility assessment to be completed.

Referral to enrollment evaluation

The OPA submits the financial eligibility determination to the program.

If the individual meets financial eligibility, the program submits the enrollment evaluation request to Aware who completes the program criteria assessment, identifies potential SDMI services and support the member to identify prospective service providers.

The individual is either enrolled into the program or denied based on the member's request, service needs, available of service providers, etc.

Referral to enrollment evaluation

If an individual does not pass the Level of Care and/or Level of Impairment assessments, they are not placed on the enrollment list.

If an individual does not pass the additional program requirements, such as need for services, available service providers, etc, the individual is removed from the enrollment list.

If individuals on the enrollment list do not respond to program requirements and inquiries (such as not keeping a current contact phone number with the program or failing to respond to the requirement to apply for Medicaid) the individual is removed from the enrollment list.

SDMI Provider Education

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