

BIG SKY WAIVER REVIEW – CONSTITUENT MEETINGS

DECEMBER 17, 2020 MEETING MINUTES

MEETING OVERVIEW

The Big Sky Waiver review process continued on December 17, 2020. The meeting focused exclusively on the review of updated policies, including:

- 703 Adult Day Health
- 710 Dietetic Services
- 719 Nutrition
- 712 Family Training and Support
- 707 Consultative Clinical and Therapeutic Services
- 720 Occupational Therapy
- 724 Physical Therapy
- 714 Health and Wellness
- 721 Pain and Symptom Management
- 711 Environmental Accessibility Adaptations
- 737 Vehicle Modifications

Work in this meeting was driven by our shared goals defined in the October 22, 2020 meeting:

- **Increase communication.** Increase communication to ensure an increased flow of accurate, consistent information between all stakeholders.
- **Improve waiver functionality.** The waiver should function better, efficiently and effectively supporting members, providers, and managers.

UPDATED DRAFT BSW POLICIES

DPHHS is drafting updates to Big Sky Waiver policies based on decisions made in this review process. Updated policies can be found at the Big Sky Waiver Review webpage: <https://dphhs.mt.gov/sltc/bswreviewworkgroup>.

Policy	Discussion Points
703 Adult Day Health	<ul style="list-style-type: none">• Attendees discussed language around nutrition/meal limitations, which are related to Medicaid room and board limitations. The original language includes one component of the board limitation. The group decided to refer to the board limitations more clearly and completely in the policy.• The policy needs to be further updated to clarify these timeframes/decisions.

Policy	Discussion Points
710 Dietetic Services	<ul style="list-style-type: none"> The group discussed what therapy meant in the context of dietetic services, clarifying that it means swallowing or eating mechanics, and how this differs from speech therapists' work. There is an action item to look at dieticians scope of practice to ensure the policy aligns, and update based on findings.
719 Nutrition	<ul style="list-style-type: none"> The group discussed minor language changes made in the updated draft policy, again talking about the "board" limitations. No further changes were discussed.
712 Family Training and Support	<ul style="list-style-type: none"> DPHHS clarified that this service is used by some members – year to date, four members have used it. The provider requirements are not clear. DPHHS will look at who the providers of this service are and then clarify the policy as needed.
707 Consultative Clinical and Therapeutic Services	<ul style="list-style-type: none"> Attendees discussed whether updated policies should reference medical diagnoses/specific disabilities or functional needs. This policy previously focused on traumatic brain injury, and the updated draft language removed this diagnosis. The decision was made to have policy language focus on functional need and include brain injury as an example. The policy will be updated as discussed.
720 Occupational Therapy	<ul style="list-style-type: none"> The group discussed how the definitions for restorative and maintenance therapies should align with the Medicaid manual. The policy will be reviewed and updated to ensure definition alignment.
724 Physical Therapy	<ul style="list-style-type: none"> The comments for occupational therapy also apply to physical therapy; the policy will be reviewed and updated to ensure the definitions of restorative and maintenance therapies align across the Big Sky Waiver and Medicaid manuals.
714 Health and Wellness	<ul style="list-style-type: none"> Participants talked about the pros and cons of including exhaustive lists of covered services versus including examples with explanatory text such as, "this is not an exhaustive list," or "including, but not limited to." People discussed how having a more open approach promotes person-centered planning and effective case management. The group also discussed how case management teams can use pass-through payments for some health and wellness services when there is not an enrolled Medicaid provider for the needed service in the area (e.g. a gym with adaptive equipment).
721 Pain and Symptom Management	<ul style="list-style-type: none"> The draft policy changes changed language requiring health care professional authorization only prior to initial inclusion in the service plan, versus annually. This change prompted a lot of discussion, with some wanting to retain the annual authorization and some wanting to add this requirement to health and wellness services. Others liked the change because it eliminates administrative processes without sacrificing safety since health professionals are a part of the person-centered planning process updating service plans.

Policy	Discussion Points
711 Environmental Accessibility Adaptations	<ul style="list-style-type: none"> • The group engaged in a lengthy discussion around terminology, debating the relative merits of using the word disease, condition, disability, diagnosis, and health in policy. The group wants to use a strengths-based term inclusive of seniors and people with disabilities using the waiver. • The draft policy was changed to focus on functional versus medical needs, aligning the policy with the approved waiver. • Attendees discussed the updated draft prior authorization level and spending cap, wanting to balance oversight with meeting people’s needs. DPHHS clarified that if a cap is used, there will be a mechanism to exceed the cap based on member needs. • Attendees also discussed the two-bid requirement. • The policy will be rewritten for additional review and feedback.
737 Vehicle Modifications	<ul style="list-style-type: none"> • The policy was updated to clarify that vehicle modifications are covered for new cars and used cars meeting functional parameters, including used cars that have already been modified. • The group expressed concerns with the draft list of covered modifications being too restrictive. • People also expressed concerns about mileage and age limits on used cars, particularly in light of the geographic size of our state. • Participants discussed how the methodology for pricing modifications on a used car should consider depreciation for both the vehicle and the modifications. • The group began to discuss the prior authorization level and caps in the draft policy, sharing concerns the draft limits were too low. Several participants shared the cost of vehicle modifications to accommodate drivers using motorized wheelchairs being slightly over \$100,000.

Stakeholders are welcome to provide additional input on draft policies to Kirsten Smith over email (ksmith@bloomconsult.org).

NEXT STEPS

We will resume Big Sky Waiver review meetings in 2021. The schedule is not yet determined because of the legislative session beginning. The frequency will likely move to every other week. We will be in touch in January once we know more about the legislative calendar.

Updated policies and minutes can be found online at: <https://dphhs.mt.gov/sltc/bswreviewworkgroup>.

The Zoom meeting information will remain the same: <https://us02web.zoom.us/j/84053126840>; Meeting ID: 840 5312 6840; Phone: (346) 248-7799. Feel free to share the details of the meeting with other interested parties – everyone is welcome!

If you have additional feedback you were unable to share in the meeting, please use this survey to let us know what you’re thinking: <https://survey.alchemer.com/s3/6009448/MT-Big-Sky-Waiver-Post-Meeting-Feedback>.

Reach out to Kirsten or Barb anytime with questions or comments. You can reach Kirsten at ksmith@bloomconsult.org or 406/570.0058 and Barb at BarbaraSmith@mt.gov.