BSW 702 Services: Service Limitations and Exclusions

PAYOR OF LAST RESORT

Big Sky Waiver services complement and/or supplement but do not replace the services that are available to members through the Medicaid State Plan and other federal, state, and local public programs as well as the informal supports that families and communities provide. BSW is the payor of last resort, therefore members are required to pursue and exhaust all other legal third-party sources of coverage. Indian Health Services is an exception to the payor of last resort requirement.

SERVICE LIMITATIONS

Case Management Teams (CMTs) are required to monitor member service utilization. CMTs are required to review the utilization report with the member and update the service plan when the member's authorized services are being under or over utilized. CMTs are required to inform providers of service caps limitations and the requirements for prior authorization processes needed to exceed service caps

CMTs are responsible to assist members in managing their services; this includes providing guidance to members regarding the utilization of their services within the specific time-period allotted.

A member cannot carry over a service from one service plan time-period to the next. Any unused services remaining at the end of the service plan time-period expire and cannot be used.

Members cannot utilize services outside of the service plan time—period authorized; services cannot be used in one service plan time-period and accrued in a following service plan time-period(s).

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Commented [KS1]: This is more about how case management works than it is about service limits. I would delete. If deleted, then maybe retitle section carry over.

ROOM AND BOARD

Federal regulations specifically exclude all payment for room and board services except when provided as part of respite care. "Board" is defined as three meals a day or any other full nutritional regiment and does not include meals provided as part of a program of adult day health care or similar facility outside the member's homeservices. Board also does not include the delivery of a single meal to a member at her/his own home through a meals-on-wheels service. "Room" means hotel or shelter type expenses including all pror ty related costs such as rental or purchase of real estate and furnishings, maintenance, ut;" es, and related administrative services.

CASE MANAGEMENT

Federal regulations do not allow a person receive case mail ment funded by Medicaid State Plan Services (Targeted Case Mana_k ment the BSW-B₁₀ ky Waiver program at the same time. This is considered a duplication of service

The Department will not reimburse both a Berry Proserver Case Management provider and a Targeted Case Management provider and

DUAL ENROLLMENT IN BSW AND PART C

Guidelines will be utilized that were developed in a 1995 policy memo, which states that no child can be in Montana Milestones/Part C Early Intervention and the BSW waiver at the same time. Families will be given a choice between these services. Refer to Field Memorandum FY1995 TWO (BSW 799-7).

BSW TRANSITION TO— BONANZA OPTION

Commented [KS2]: Keep? Needed? Especially if this isn't followed? I was re-reading interview notes from Novelene from 2019, about how when a kid qualifies for waiver they take them off Part C. DD requires psychological testing, which is known to be unreliable before age 8. Once testing is done, would put them on DD waiver bc more robust. Not sure why couldn't have kid on Part C and BSW, although waiver is clearly more robust. Does it provide parent training the way C does?

The use of traditional case management and consumer directed financial management and independence advisor services is allowed to occur simultaneously only during the initial transition period to complete enrollment in the Big Sky Bonanza (BSB) option. Note: Billing for these services simultaneously cannot exceed a one-month time frame.

