

DEFINITION

Environmental Accessibility Adaptations are ~~those~~ physical adaptations to ~~the a member's~~ home, ~~required by the member's service plan, which are necessary~~ needed to ensure the ~~member's~~ health, welfare, ~~and and~~ safety, or ~~increased functional independence in the home of the member, or which enable the member to function with greater independence in the home, and without which the member would require institutionalization.~~ ~~The procedure code for this service also includes reimbursement for consultation.~~

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GENERAL SERVICE REQUIREMENTS

~~When providing this service, the Case Management Team (CMT) must always take into account the nature of the member's disease or disability. If there is a reasonable expectation that the member's condition will deteriorate, this factor must be taken into account when making the modification.~~

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Requirements for consideration of Environmental Accessibility Adaptations include:

1. ~~The service adaptations must be medically functionally~~ necessary and relate specifically to the member's ~~medical diagnosis~~ disability or functional needs. ~~If there is a reasonable expectation that the member's condition will deteriorate, this factor must be taken into account when making modifications.~~ ~~This must be documented in the member's service plan;~~
2. ~~The adaptations must provide for the member's accessibility, increased independence, or safety in the home.~~
- 2-3. ~~The service adaptations must be based on a reasonable expectation that the item environmental adaptation will improve the member's functional abilities and without such the member would require institutionalization; or the ability of a caregiver or service provider to maintain the member in the home.~~
3. ~~The service must provide a direct medical or remedial benefit to the member;~~
4. ~~The service must be an approved service listed in the BSW application;~~
- 5-1. ~~A prior authorization for service cannot be authorized or given to the provider prior to the member receiving the service; the service must be received by the member prior to payment by Big Sky Waiver. An Environmental Accessibility Adaption cannot be separated into multiple referrals or multiple prior authorizations; all supplies and labor costs for one Environmental Accessibility Adaption must be included in one referral and one prior authorization;~~

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6. The service must provide for the member's accessibility, increased independence or safety in the home, and without which the member would require institutionalization;

7.4. The service plan must include specific documentation supporting that the service is the adaptations must be the most adequate modification and be a cost-effective approach option to meet the needs of the member;

8.5. The service adaptations may include the installation of specialized electrical and plumbing systems to accommodate the medical equipment and supplies that are necessary needed for the welfare of the member;

9. The service An adaptation is limited to a one-time purchase;

NOTE:

6. The Department at its discretion may authorize an exception to this limit. Any such exception Exceptions must be prior authorized.

10.7. The service Adaptations cannot include general housing or appliance maintenance, including but not limited to plumbing, heating systems, and leisure items;

11.8. The service cannot include the construction of more than one ramp in a residence;

12.9. The service cannot include those adaptations or improvements to the home which are not of direct medical or remedial benefit to the waiver member and within the bounds of the service plan, such as carpeting, roof repair, central air conditioning, etc.;

13.10. The service All adaptations shall must be provided in accordance with applicable state and local building codes;

14.11. The service shall All adaptations must meet Americans with Disabilities Act (ADA) and American National Standard Institute (ANSI) standards and specifications when feasible; and

~~The CMT must pursue all other potential third party sources of coverage (including, but not limited to, natural supports, Medicare, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), Community First Choice (CFC) and Medicaid State Plan). All third party sources must be evaluated and exhausted prior to the authorization of services; documentation that needed items are not coverable by another payer source must be present in the member's case record.~~

~~The following products are not covered by EPSDT; an EPSDT denial is not required for the following:~~

~~1. Environmental Accessibility Adaptations;~~

~~2.1. Vehicle Modifications; and~~

~~3.1. Service Animals.~~

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COMPETITIVE BID PRIOR AUTHORIZATION REQUIREMENTS

Members needing Environmental Accessibility Adaptations costing \$5,000 or more must make a reasonable effort to obtain two estimates or bids.

Environmental Accessibility Adaptations in excess of \$5,000 must be prior authorized by the Regional Program Officer (RPO); refer to BSW 403. The prior authorization must include at least two estimates or bids. All bids must include an estimate of the costs to include a detailed list of the amount of materials, the amount of labor (number of hours to complete the project and amount charged per hour), and other miscellaneous costs.

These estimates should accompany the prior authorization. Provider costs of submitting an estimate or bid are not payable by the Big Sky Waiver program. In general, the lowest bid must be accepted; however, a member may choose a bid that is within 10% difference of the lowest bid may be accepted at the member's choice. If two bids cannot be obtained, documentation must be present to show what efforts were made to secure multiple bids. Situations involving one bid require review and approval by the Regional Program Officer.

PRIOR AUTHORIZATION

Regional Program Officers must prior authorize Environmental Accessibility Adaptations costing \$25,000 or more.

A prior authorization for Environmental Accessibility Adaptations cannot be authorized or given to the provider prior to the member receiving the service; the service must be received by the member prior to payment by Big Sky Waiver.

A prior authorization for service cannot be authorized or given to the provider prior to the member receiving the service; the service must be received by the member prior to payment by Big Sky Waiver. An Environmental Accessibility Adaption cannot be separated into multiple referrals or multiple prior authorizations; all supplies and labor costs for one Environmental Accessibility Adaption must be included in one referral and one prior authorization.

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INSTITUTIONAL STAY

Under certain circumstances, adaptations may be completed while an individual is still in the hospital or nursing home. In those instances, if the member is unable to return to the residence (e.g., death or alternate placement), payment for services provided prior to hospital discharge can be reimbursed by Medicaid. However, the CMT ase management team must have ~~completed a~~ completed Service Plan plan in place before the adaptation work started (DPHHS SLTC 135) or Service Plan Short Form (DPHHS SLTC 135B) prior to the commencement of such services for reimbursement to be approved. Contact the RPO regional program officer for more information or for approval and process.

PROVIDER REQUIREMENTS

Providers must be licensed as a contractor in Montana.

Individuals who are legally responsible for members may provide Environmental Accessibility Adaptation services if they are licensed in accordance with state regulations and are enrolled as a Medicaid provider.

Payment for this service may be made to legally responsible individuals, if program criteria are met. Refer to BSW 604-1. The CMT must pursue all other potential third party sources of coverage (including, but not limited to: natural supports, Medicare, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), Community First Choice (CFC) and Medicaid State Plan). All third party sources must be evaluated and exhausted prior to the authorization of services; documentation that needed items are not coverable by another payer source must be present in the member's case record.

The following products are not covered by EPSDT; an EPSDT denial is not required for the following:

- Environmental Accessibility Adaptions;
- Vehicle Modifications; and
- Service Animals.

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