



May 7, 2025

TRANSITION REVIEW COMMITTEE - NURSING HOME AND ASSISTED LIVING FACILITY UPDATE

May survey: Received information from 25 facilities

Only 2 had admitted an individual from MSH

10 had not been contacted by MSH about possible referrals –

This is a significant increase in the number of facilities

Contacted about accepting admissions from MSH

11 had not been contacted about possible referrals

BEHAVIOR ADD-ONS

13 nursing homes responded to our survey about the behavior add-ons

8 have applied for the behavior add-on and all have received some approvals and some disapprovals; 5 of the facilities have never applied for this add-on

The comments vary with most indicating that the approval / disapproval process is fairly quick.

Most who have had approvals state that they are mostly approved at level 1, regardless of the level applied for.

Some have difficulty with the paperwork necessary to actually get paid by Medicaid once approved.

Some believe the process lacks consistency in terms of getting approval
For similar residents with similar documentation

There is an issue with not accepting documentation that is provided by CNAs

MEDICAID ELIGIBILITY ISSUES

Issues about pending Medicaid applications and redeterminations continue and if anything seem to have gotten worse.

Data received from facilities May, 2025 – 27 nursing homes and 10 assisted living

Redetermination-related and New Applications pending – 408 – up from 229

Length of time to get applications approved – 4 to 6 months – current numbers reflect a combination of regular redeterminations and new applications. Generally new applications take longer than the annual redetermination.

Assignment of case workers. Facilities across the board continue to report that case workers do not work on the case and are not available to discuss cases with them until 2 to 3 months after an application filed. Continues to be difficult to discuss cases with anyone.

Payments delayed because of redeterminations and Medicaid pending for these facilities

\$11.7 M (up from \$8.6 M when we reported in October 2024)

NEW DEVELOPMENTS

- Automatic behavior add-on at Level III to nursing facilities to transition an individual from Montana State Hospital.
- The Department has implemented transition grants to support the discharge of patients from MSH to nursing facilities or community settings. The grants are up to \$10,000 per individual per transition from MSH. The grants are to be used for non-recurring expenses such as environmental modifications or specialized medical equipment and staff training specific to the unique needs of the individual.

Recommendation: We recommend that the Department implement for assisted living something similar to what was done with the add-on for skilled nursing facilities. The assisted living behavior management rate should automatically apply to individuals transitioning from MSH. An additional higher tier or tiers should also be implemented to meet the needs of the individual.

Rationale: To improve access to care for those able to leave the State Hospital by making it more likely that a placement will be available in a local assisted living memory care facility. The cost of serving these individuals is high due to increased staffing, training and other specialized services related to their behavioral health needs. These facilities need to know prior to admission that the enhanced rate will be available.

- SB 72 - Presumptive Eligibility for home and community-based services should help with Medicaid determinations for those moving to assisted living or in-home services. Passed legislature and on the way to Governor's Office.

Recommendation: We recommend that the Department implement a presumptive eligibility program for individuals transitioning from the state hospital to a skilled nursing facility or other setting.

Rationale: To improve access to care for those able to leave the State Hospital by making it more likely that a placement will be available in a local skilled nursing facility. A presumptive eligibility process would provide a source of payment for those being discharged who meet Medicaid eligibility requirements. Currently, facilities are asked to admit individuals with Medicaid pending.

- SB 524 – Amending Category D Assisted Living. Passed legislature and transmitted to Governor. This bill amends the Category D statute and requires DPHHS to adopt rules and set a Medicaid payment rate for this level of care. It is a category of care designed to encourage appropriate development of small residential facilities to provide services to individuals with Alzheimer's disease and other behavioral health conditions who present with serious behaviors that make it difficult for them to find a care provider. These 20 bed or less facilities can be attached to another health care facility or can be free standing. The goal is to encourage development of appropriate services for the individuals who have traditionally been admitted to the Spratt Unit at MSH or who are at risk of admission to MSP.

Thank you for the opportunity to update you on these issues. If you have questions or need additional information, please let us know.



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