

AGING STRATEGIC ALIGNMENT PROJECT

State Profile for

MONTANA

Home- and Community-based Services for Older Adults and Adults with Physical Disabilities

Background

- Montana's 60+ population was 192,524 in 2008 (19.9% of the state's total population), with 8.5% below the federal poverty level.¹
- The 60+ population is projected to be 317,288 in 2025 (30.6% of the state's total population).²
- About 23.8% of all households in 2007 had one or more persons age 65 years and older and 42.4% of persons age 65 years and older had a disability.³
- Of the 110,403 Medicaid beneficiaries in the state in 2003, 8.0% were aged, 15.1% were blind and disabled, 16.7% were Dual Eligible, and 8.9% were HCBS waiver beneficiaries.⁴
- Medicaid expenditures for institutional long-term care were 55.0% of total long-term-care expenditures, compared to 45.0% for HCBS in fiscal year 2007.⁵

Abbreviations

AAA	Area Agency on Aging
ADL	Activities of Daily Living
AoA	Administration on Aging
CMS	Centers for Medicare and Medicaid Services
HCBS	Home- and Community-based Services
IADL	Instrumental Activities of Daily Living
MRDD	Mental Retardation and Developmental Disabilities
OAA	Older Americans Act
PACE	Program of All-inclusive Care for the Elderly
SUA	State Unit on Aging

¹ Department of Health and Human Services, Administration on Aging. (2009). *AGing Integrated Database (AGID): American Community Survey (ACS) demographic data 2004-2007 and state-level population estimates data 2000-2008* [Data files]. Available from <http://198.136.163.234/default.asp>

² Department of Health and Human Services, Administration on Aging. (2009). *Aging statistics: Projected future growth of the Older population; By state: 2005-2030; Aged 60 and above* [Data files]. Available from http://www.aoa.gov/AoARoot/Aging_Statistics/future_growth/future_growth.aspx.

³ Reimbursement and Research Department, American Health Care Association. (2006, August 29). *The state long-term health care sector 2005: Characteristics, utilization, and government funding*. Washington, DC: Author.

⁴ U.S. Census Bureau, 2007 American Community Survey, United States and States. *Percent of households with one or more people 65 years and over (R1104) and Percent of people 65 years and over with a disability (R1803)*.

⁵ Burwell, B., Sredl, K., & Eiken, S. (2008, September 26). *Medicaid long term care expenditures FY 2007*. Eagan, MN: Thomson Reuters.

Government Structure to Manage HCBS Assessment Process

- **SUA:** Aging Services Bureau, Senior and Long Term Care Division, Department of Public Health and Human Services.
www.dphhs.mt.gov/sltc
- **State Medicaid Agency:** Community Services Bureau, Senior and Long Term Care Division, Department of Public Health and Human Services.
www.dphhs.mt.gov/programsservices/medicaid.shtml
- Montana has a consolidated agency for long-term-care programs (i.e., the Senior and Long Term Care Division under the Department of Public Health and Human Services). The following agencies are consolidated and handle long-term care: Aging Services Bureau (SUA), Community Services Bureau (Medicaid HCBS) and Nursing Facility Bureau.
- The Director of Montana's SUA reports to the Administrator of the Division of Senior and Long Term Care. The Administrator reports to Director of the Department of Public Health and Human Services, who in turn reports to the Governor.
- Montana has 10 Area Agencies on Aging.

Single Point of Entry (SPE)/Aging and Disability Resource Center (ADRC)

- Montana has ADRC sites but its ADRC is not statewide.
- All the ADRC sites have a physical (bricks and mortar) infrastructure; none of the ADRC sites operate under a virtual model.
- In addition to serving older adults, including veterans and those with Alzheimer's disease and related dementias, Montana's ADRC serves the physically disabled and family caregivers of older adults and those with physical disabilities.

Medicaid

- For Medicaid applicants, in determining functional eligibility for nursing home pre-admission, Montana does not require an in-person assessment by someone other than nursing home staff. The assessment is conducted over the phone, unless there is a denial of the claim. In the latter case, an on-site and in-person assessment is required.
- Contractors are responsible for conducting the functional assessment. The assessment is conducted using the Preadmission Screening and Resident Review (PASRR).

Non-Medicaid

- For non-Medicaid applicants in Montana, nursing home pre-admission assessment is not performed by someone other than nursing home staff.
- All non-Medicaid applicants are assessed prior to nursing home admission.
- Assessment using the PASRR Level 1 screen is conducted by contractors over the phone. This assessment is common to both Medicaid and non-Medicaid applicants. However, nursing home staff conduct their own internal assessment using the Minimum Data Set.

State Medicaid Plan

- Montana provides HCBS through the state Medicaid plan.
- Refer to Table 1 for specific services provided.
- **PACE:** Montana has two PACE sites. These became operational in October of 2008. One site is in Yellowstone County and the other is located in Livingston. Montana plans to have 130 participants in its PACE program within three years.

Medicaid Waivers

- Montana has two waivers that provide HCBS to older adults and/or adults with physical disabilities. These

are: Big Sky Bonanza (BSB) Independence Plus and Home and Community Based Services for the Elderly and Disabled.

- **Big Sky Bonanza (BSB) Independence Plus:** This program targets individuals from birth to death but not any specific diagnostic group. Both consumers and their caregivers are eligible for services. Consumers and their caregivers take care of obtaining and providing services and can hire and fire their service providers (see section on Consumer Direction). The asset limit for an individual is \$2,000 and for a couple it is \$3,000.
- **Home and Community Based Services (HCBS) for the Elderly and Disabled Waiver:** This waiver serves all age groups and is not limited to specific target populations. The goal is to help individuals remain in their homes rather than receive services in a hospital or nursing facility. The asset limit for an individual is \$2,000 and for a couple it is \$3,000. This program offers consumer-directed options.
- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered under each program.

CMS-funded Programs and Grants

- Montana does not have any CMS-funded programs or grants that provide HCBS to older adults and/or adults with physical disabilities.

State-funded HCBS Programs

- Montana has one state-funded program that provides HCBS to older adults and/or adults with physical disabilities. This is: Senior Services.
- **Senior Services:** This program does not target any specific population. There are no income or asset limitations for the program; however, sliding fees are used to provide some services.
- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered.

Locally Funded HCBS Programs

- *Information not reported.*

OAA-funded Programs and Grants

- Refer to Table 1 for services provided through Title III of the OAA.
- Montana sometimes uses cost-sharing mechanisms or sliding fee scales in the delivery of Title III services.
- Montana has one OAA-funded grant that provides HCBS to older adults and/or adults with physical disabilities. This is: Alzheimer's Disease and Demonstration Grant.

Social Service Block Grants (SSBG) and Community Service Block Grants (CSBG) for HCBS

- Montana does not use SSBG to provide HCBS for older adults and/or adults with physical disabilities.
- Montana does not use CSBG to provide HCBS for older adults and/or adults with physical disabilities.

Consumer Direction

- Montana offers consumer-directed options. The HCBS programs in the state that offer consumer direction are: BSB Independence Plus waiver and the HCBS for the Elderly and Disabled waiver.
- Models of consumer direction available in the state include: modified Cash and Counseling (BSB Independence Plus waiver). Medicaid pays the provider agencies but the consumer has control over his or her budget. The consumer does not receive cash or vouchers directly. Consumers work with an independent advisor who acts as their advocate and helps them select services and navigate the system.
- Those permitted to provide services under consumer direction in Montana are: provider agencies, spouses, adult children, other family members, friends, and legal guardians and the parents of a minor child.

- Montana has six fiscal intermediaries in the state. However, consumers are allowed to use other fiscal intermediaries that are not on the official list.

Managed Care

- Montana does not have HCBS programs run by managed care health plans.

Major Accomplishments and Initiatives

- Montana's SUA staff is concerned about the country's economic situation and its effect on the provision of HCBS to those in need. As the baby boomers are beginning to turn 65 years old, the demand for services is likely to increase without a corresponding increase in funding.

Table 1: Types of Home- and Community-based Services Provided Under Montana's Programs for Older Adults and Adults with Physical Disabilities

Types of Services	Program Type / Funding Source				
	Medicaid Waivers		State-funded Programs	State Medicaid Plan	OAA Title III
	BSB (Big Sky Bonanza) Independence Plus	HCBS for Elderly and Disabled	Senior Services		
Adult Day Care / Adult Day Health	X	X			X
Assisted Living		X			
Caregiver Services / Respite / Education	X	X	X		
Case Management / Care Coordination	X	X			X
Chore / Homemaking	X	X	X		X
Companion Services / Socialization Activities	X	X			
Employment	X	X			
Equipment / Supplies / Modifications / Assistive Technology	X	X		X	
Health Promotion Activities	X	X	X		
Home Health / Personal Care	X	X	X	X	X
Information / Assistance / Referral	X	X	X		X
Legal Assistance / Financial Advice	X	X	X		X
Medical / Dental / Medication Care	X	X		X	
Mental and Behavioral Health Services	X	X		X	
Nursing	X	X			
Nutrition / Meals	X	X	X		X
Personal Supports for Community Living / Transitioning	X	X			
Rehabilitation / Therapy	X	X		X	
Residential Services		X			
Transportation	X	X	X	X	X
Other/Unspecified HCBS	X	X			

Table 2: Selected HCBS Programs for Older Adults and Adults with Physical Disabilities in Montana

Program Type / Funding Source	Program Name	Ages Served	Nursing Home Level of Care Required	Entity Responsible for Functional Assessment	Entity Responsible for Financial Assessment	Entity Responsible for Case Management	Waiting List (Number)	Consumer Direction Option
Medicaid Waivers	BSB (Big Sky Bonanza) Independence Plus	0+	Yes	State agency; Non-profit (other than AAA or CIL)	State agency: Office of Public Assistance	Department of Public Health and Human Services, Senior and Long Term Care Division, Community Services Bureau	No	Yes
	HCBS for elderly and disabled	0+	Yes	State agency; Non-profit (other than AAA or CIL)	State agency: Office of Public Assistance	Department of Public Health and Human Services, Senior and Long Term Care Division, Community Services Bureau	Yes (500)	Yes
State-funded Programs	Senior Services	60+	No	No functional assessment	No financial assessment	Area Agency on Aging	No	No