



AN ACT PROVIDING FOR PRESUMPTIVE ELIGIBILITY UNDER THE MONTANA MEDICAID PROGRAM FOR CERTAIN HOME AND COMMUNITY-BASED SERVICES FOR PERSONS WITH PHYSICAL DISABILITIES AND PERSONS WHO ARE ELDERLY; PROVIDING A SCREENING PROCESS FOR PRESUMPTIVE ELIGIBILITY; STATING TERMS OF PRESUMPTIVE ELIGIBILITY; PROVIDING DIRECTIONS TO THE DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES; AND PROVIDING EFFECTIVE DATES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Presumptive eligibility for persons with physical disabilities or elderly persons. (1)

(a) Presumptive eligibility under the Montana medicaid program for certain home and community-based services may be granted to a person who has a physical disability or who is elderly upon completion of the following:

- (i) the screening process described in this section; and
- (ii) authorization by the division of the department that administers long-term care services for senior citizens and individuals with physical disabilities.

(b) Home and community-based services covered under the presumptive eligibility determination as provided for in this section include home and community-based services provided under the department's big sky waiver program and community first choice program that are necessary to prevent institutionalization or necessary to successfully transition a patient from a hospital or other institutional setting.

(2) (a) The screening process may be conducted by staff of:

- (i) the division of the department that administers long-term care services for senior citizens and individuals with physical disabilities; or
- (ii) one of the following facilities who have received training and certification from the department

to make presumptive eligibility determinations:

- (A) an area agency on aging or its designated subcontractor;
- (B) a tribal entity;
- (C) a hospital or hospital-affiliated facility; or
- (D) another entity deemed appropriate by the department or the division of the department that

administers long-term care services for senior citizens and individuals with physical disabilities.

(b) Initial training of staff must be completed before an entity is certified to complete presumptive eligibility determinations, and the certification must be renewed annually.

(3) The screening process must include:

- (a) an application as prescribed by the department;
- (b) self-attestation that the applicant meets the income, resource as defined in 20 CFR 416.1201,

and residency requirements of the Montana medicaid program as prescribed in 53-6-131; and

(c) a functional assessment to establish an in-home and community care plan.

(4) The applicant or the applicant's representative shall submit an application for ongoing coverage under the Montana medicaid program as provided in 53-6-131 within 30 calendar days following the applicant's presumptive eligibility determination.

(5) The presumptive eligibility period begins on the date the screening is completed and ends on the date a determination of ongoing Montana medicaid program eligibility is made or at the end of the month following the month of the presumptive eligibility determination, whichever is earlier.

(6) A person may receive services under a presumptive eligibility determination only once within a consecutive 12-month period.

(7) The applicant does not have a right to an administrative hearing on presumptive eligibility.

(8) The department may provide time extensions for the application process and service periods specified in subsections (4) and (5) and provide exceptions to the limit on an individual's ability to qualify for services through presumptive eligibility determinations specified in subsection (6) when the department determines that the extensions or exceptions further the goal of avoiding preventable health declines, institutional placements, or hospitalizations.

Section 2. Notification to tribal governments. The secretary of state shall send a copy of [this act] to each federally recognized tribal government in Montana.

Section 3. Direction to department of public health and human services. The department of public health and human services shall submit to the centers for medicare and medicaid services the appropriate section 1115 waiver application, section 1115 waiver amendment, section 1915(k) state plan amendment, or other state plan amendment to implement the presumptive eligibility program described in [section 1].

Section 4. Codification instruction. [Section 1] is intended to be codified as an integral part of Title 53, chapter 6, part 4, and the provisions of Title 53, chapter 6, part 4, apply to [section 1].

Section 5. Effective date -- contingent effective date. (1) Except as provided in subsection (2), [this act] is effective on passage and approval.

(2) [Section 1] is effective on the date that the director of the department of public health and human services certifies to the code commissioner that the centers for medicare and medicaid services has approved the appropriate section 1115 waiver application, section 1115 waiver amendment, section 1915(k) state plan amendment, or other state plan amendment to implement [section 1]. The director shall submit certification within 7 days of the occurrence of the contingency.

- END -

I hereby certify that the within bill,
SB 72, originated in the Senate.

Secretary of the Senate

President of the Senate

Signed this _____ day
of _____, 2025.

Speaker of the House

Signed this _____ day
of _____, 2025.

SENATE BILL NO. 72

INTRODUCED BY M. YAKAWICH

BY REQUEST OF THE CHILDREN, FAMILIES, HEALTH AND HUMAN SERVICES INTERIM COMMITTEE
AN ACT PROVIDING FOR PRESUMPTIVE ELIGIBILITY UNDER THE MONTANA MEDICAID PROGRAM FOR
CERTAIN HOME AND COMMUNITY-BASED SERVICES FOR PERSONS WITH PHYSICAL DISABILITIES
AND PERSONS WHO ARE ELDERLY; PROVIDING A SCREENING PROCESS FOR PRESUMPTIVE
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