Official Program Name	Montana Passport to Health 1915(b)
State	Montana
Waiver Authority	1915(b)
Date Originally Approved	08/31/1993
Implementation Date	N/A
Expiration Date	04/01/20010
Summary	N/A

PROGRAM SUMMARY:

The State of Montana submitted a proposal under Section 1915(b)(1) of the Social Security Act authority to provide comprehensive medical services to their Medicaid population. Sections waived include 1902(a)(1), Statewideness; 1902(a)(10)(B), Comparability of Services; and 1902(a)(23), Freedom of Choice.

The waiver provides for both a primary care case management program (PCCM) and a disease management program. The disease management portion of the program targets the disease states of asthma, diabetes, chronic health failure, and chronic pain.

The waiver population includes Aid to Families with Dependent Children (AFDC) and AFDC-related recipients as well as Supplemental Security Income (SSI) recipients.

The Passport to Health portion of the waiver operates in all but two counties, McCone and Sanders. Enrollment is mandatory.

The State's quality assurance efforts were significantly enhanced by the devotion of a full-time Quality Assurance Manager to the analysis of quality of care issues and development of interventions where required.

HEALTH CARE DELIVERY:

Approximately 756 providers participate in the waiver program

including pediatricians, family practitioners, internists, general practitioners, obstetricians/gynecologists and gynecologists, federally qualified health centers (FQHCs), rural health centers (RHCs), nurse practitioners, and nurse midwives. Additional providers that are PCPs include physician assistants, sub-specialists, and Indian Health Service Clinics (IHS).

BENEFIT PACKAGE:

The same range and amount of services that are available under the usual Medicaid program are available for waiver enrollees.

EXCLUDED SERVICES:

Services exempt from PASSPORT: anesthesiology; blood lead testing; emergency room screening; emergency room services for emergent conditions; family planning; immunizations; mental health services – inpatient and outpatient – which have as their primary ICD-9 diagnosis one of the following: 290-302, 306-313, and 316; obstetrical services pathology radiology; testing and treatment of sexually-transmitted diseases at Department-designated sites; vision services; vision and dental component of well-child screens. Other: audiology; clinical social workers; community mental health centers; hearing aid; freestanding dialysis clinic; home and community-based waiver services; home dialysis attendant; hospice; Indian Health Service clinics; laboratory and radiology; licensed professional counselors; psychologists; rehabilitation; residential treatment centers; therapeutic foster care; therapeutic youth group homes.

LOCK-IN PROVISION:

Not applicable.

ENROLLMENT BROKER:

The State currently contracts with ACS to perform administrative functions common to Passport; help develop and manage the managed care program; and perform Passport quality assurance and provider relations. The specific activities related to enrollment are: produce video for county office; conduct recipient outreach and education; produce educational material; answer recipient managed care hotline (which is also the general Medicaid hotline available to all recipients); process enrollments, disenrollments, and change of providers; and bring up Passport in new counties.

COST EFFECTIVENESS/FINANCIAL INFORMATION:

The State has provided sufficient data to indicate this waiver program is cost effective.

Last Updated: 3/10/2008.