

1 HOUSE BILL NO. 84

2 INTRODUCED BY P. NOONAN

3 BY REQUEST OF THE SELECT COMMITTEE ON EFFICIENCY IN GOVERNMENT

4
5 A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING IN STATUTE THE 72-HOUR PRESUMPTIVE
6 ELIGIBILITY PROGRAM FOR ADULT CRISIS STABILIZATION SERVICES THAT IS PROVIDED FOR IN
7 ADMINISTRATIVE RULE; REVISING THE RULE REQUIREMENTS IN ORDER TO ALLOW REIMBURSEMENT
8 FOR TWO PSYCHIATRIC DIAGNOSTIC INTERVIEWS IN A 72-HOUR PERIOD AND REIMBURSEMENT FOR
9 CRISIS STABILIZATION SERVICES PROVIDED WITHIN 7 DAYS OF A PERSON'S PREVIOUS DISCHARGE
10 FROM CRISIS STABILIZATION SERVICES; PROVIDING RULEMAKING AUTHORITY; AND PROVIDING AN
11 EFFECTIVE DATE."

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

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15 NEW SECTION. **Section 1. Definitions.** As used in [sections 1 through 5], the following definitions
16 apply:

17 (1) "Adult" means an individual who is 18 years of age or older.

18 (2) "Crisis" means a serious, unexpected situation resulting from an individual's apparent mental illness
19 in which the individual's symptoms are of sufficient severity, as determined by a mental health practitioner, to
20 require immediate care to avoid:

21 (a) jeopardy to the life or health of the individual; or

22 (b) death or bodily harm to the individual or to others.

23 (3) "Crisis stabilization" means development and implementation of a short-term intervention to respond
24 to a crisis in order to:

25 (a) reduce the severity of an individual's symptoms of mental illness; and

26 (b) attempt to prevent the individual from receiving services in a more restrictive environment.

27 (4) "Crisis stabilization services" or "services" means the services allowed under [section 3].

28 (5) "Presumptive eligibility" means a period of up to 72 hours after an individual is found to be in crisis
29 and during which the individual is presumed to be eligible for crisis stabilization services that will be reimbursed
30 by the department.

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2 **NEW SECTION. Section 2. Purpose -- limitations.** (1) (a) The purpose of [sections 1 through 5] is to
3 establish a program through which enrolled providers may be reimbursed by the department when they provide
4 mental health services during a 72-hour period to stabilize an adult who:

5 (i) is in a mental health crisis; and

6 (ii) is uninsured or whose insurance does not adequately cover the cost of the services.

7 (b) Reimbursement for services provided during a presumptive eligibility period is intended to reduce
8 the need for the individual to receive more intensive services in a more restrictive setting.

9 (2) [Sections 1 through 5] are not intended to establish an entitlement:

10 (a) for an individual to receive services under the program; or

11 (b) for a provider to be reimbursed for services delivered to an individual.

12 (3) The department may determine the duration of services to be reimbursed under the program and the
13 types of providers who may receive reimbursement for services.

14 (4) The department or its designee may restrict reimbursement based on:

15 (a) the medical necessity of the services;

16 (b) availability of appropriate alternative services;

17 (c) the relative cost of services; or

18 (d) other relevant factors.

19 (5) (a) Subject to available funding, the department may suspend or eliminate reimbursement for services
20 or otherwise limit services, benefits, or provider participation in the presumptive eligibility program.

21 (b) The department shall provide notice of changes to the program at least 10 days in advance of the
22 date that the changes will be made by:

23 (i) publishing notice in Montana daily newspapers; and

24 (ii) providing written notice to crisis stabilization providers and other interested parties.

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26 **NEW SECTION. Section 3. Crisis stabilization services -- requirements.** (1) In order to qualify for
27 reimbursement under [sections 1 through 5], crisis stabilization services must be delivered in a safe environment
28 to an individual in crisis as required under this section.

29 (2) Crisis stabilization services must:

30 (a) be delivered by an individual or facility that is enrolled with the department to provide services under

1 [sections 1 through 5];

2 (b) be provided in accordance with a plan for crisis stabilization that meets requirements established by
3 the department by rule;

4 (c) include a plan for appropriate followup care; and

5 (d) be medically necessary mental health services that:

6 (i) are delivered in direct response to a crisis in an effort to stabilize the individual in crisis;

7 (ii) provide diagnostic clarity;

8 (iii) are designed to treat symptoms that can be improved during the presumptive eligibility period; and

9 (iv) provide an appropriate alternative to psychiatric hospitalization.

10 (3) Crisis stabilization services include but are not limited to:

11 (a) two psychiatric diagnostic interview examinations during the crisis stabilization period;

12 (b) coordination of care as defined by the department by rule;

13 (c) individual psychotherapy;

14 (d) family psychotherapy conducted with or without the patient;

15 (e) one-to-one community-based psychiatric rehabilitation and support; and

16 (f) crisis management services as defined by the department by rule.

17 (4) The department may not deny payment for medically necessary mental health services that are
18 provided within 7 days of an individual's previous discharge from crisis stabilization services provided under
19 [sections 1 through 5] unless the denial is made pursuant to [section 2] or [section 4].

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21 **NEW SECTION. Section 4. Claims and reimbursement -- exceptions.** (1) The department shall adopt
22 and make available a fee schedule for crisis stabilization services.

23 (2) Claims for crisis stabilization services provided pursuant to [sections 1 through 5] must be submitted
24 to the department as provided by rule.

25 (3) Providers shall accept the amounts payable under this section as payment in full for services
26 delivered to eligible individuals during the presumptive eligibility period.

27 (4) Services delivered to an individual in crisis may not be reimbursed if:

28 (a) the services delivered were not approved for reimbursement by the department; or

29 (b) the provider is not enrolled with the department.

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