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State/Territory Name: Montana

State Plan Amendment (SPA) #: 18-0026

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DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Denver Regional Office
1961 Stout Street, Room 08-148
Denver, CO 80294



REGION VIII - DENVER

April 16, 2018

Marie Matthews, Medicaid & CHIP Director
Montana Department of Public Health & Human Services
P.O. Box 4210
Helena, MT 59604

Dear Ms. Matthews:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number MT-18-0026. This amendment eliminates coverage of denturist and denture services for individuals aged 21 and older. The limit can be exceeded if determined medically necessary for individuals aged 20 and younger.

Please be informed that this State Plan Amendment was approved today, with an effective date of March 1, 2018. We are enclosing the summary page and the amended plan page(s).

In order to track expenditures associated with this amendment, Montana should follow the CMS -64 reporting instructions outlined in Section 2500 of the State Medicaid Manual (SMM).

For those individuals whose expenditures qualify for the newly eligible federal medical assistance percentage report on the Form CMS-64.9 VIII Waiver, those not enrolled in the new adult group, claims should be reported on the Form CMS-64.9 Base.

For Denturist Services, the expenditures should be reported on Line 9 A - Other Practitioners Services - Reg Payments.

If you have any questions regarding this SPA please contact Barbara Prehmus at (303) 844-7472.

Sincerely,



Richard C. Allen
Associate Regional Administrator
Division for Medicaid & Children's Health Operations

cc: Sheila Hogan, Department Director
Duane Preshinger
Jo Thompson
Mary Eve Kulawik

MONTANA

Denturists provide services under their own license within their scope of practice as defined under Montana Code Annotated and the Administrative Rules of Montana.

Denturist Services are not a covered benefit for Medicaid members age 21 and older. Limits to the Dental Services program may be overridden for Medicaid members age 20 and under if medically necessary.

Services considered experimental are not a benefit of the Montana Medicaid Program. Experimental services include all procedures, items and prescribed drugs:

1. Considered experimental by the U.S. Department of Health and Human Services (HHS) or any other appropriate federal agency.
2. Provided as part of a control study, approved by HHS or any other appropriate federal agency to demonstrate whether the item, prescribed drug or procedure is safe and effective in curing, preventing, correcting or alleviating the effects of certain medical conditions; and,
3. Which may be subject to question but not covered in #1 and #2 above. These services will be evaluated by the Department's designated medical review organization.

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