



ADMINISTRATIVE RULES OF MONTANA

37.89.1025 CONTRACTS FOR PAYMENT OF SHORT-TERM INPATIENT TREATMENT

- (1) The department may contract with eligible providers for payment for short-term inpatient treatment to eligible patients as provided in 53-21-1205 and 53-21-1206, MCA, to the extent of available funding.
- (2) Eligible providers include:
 - (a) licensed mental health centers that operate inpatient crisis stabilization programs as defined in ARM 37.106.2027; and
 - (b) hospitals with an inpatient behavioral health unit.
- (3) Documentation of services and outcomes must be provided to the department as required by contract.
- (4) Eligible patients are the subjects of civil commitment petitions under Title 53, chapter 21, part 1, MCA, for whom the following conditions are met:
 - (a) diversion to short-term inpatient treatment has been recommended by the evaluating professional person as provided in 53-21-123(2)(a), MCA;
 - (b) the facility has agreed to accept the patient for up to 14 days inpatient treatment as provided in 53-21-1205, MCA, and 53-21-1206, MCA;
 - (c) the patient has agreed to voluntary short-term inpatient treatment as provided in 53-21-1205, MCA, and 53-21-1206, MCA;
 - (d) the commitment court has ordered a suspension of the civil commitment proceeding for the purpose of short-term inpatient treatment, as provided in 53-21-123(3)(b), MCA; and
 - (e) no known third party has a legal liability to pay for the services provided. Third party liability is defined in ARM 37.85.407, with the exception that the Montana Medicaid program is a third party for the purposes of this rule.
- (5) Each contract with an eligible provider must provide that reimbursement will be made for up to 14 contiguous days of inpatient care for each eligible patient. The 14 day limit must be extended if voluntary treatment is continued pending a hearing scheduled pursuant to 53-21-1205(5), MCA. Reimbursement must be made in the order in which claims from all eligible providers are received by the department until the available funding has been exhausted. The department must notify each eligible provider who has entered into a contract under this rule in writing when 75 percent of the available funding has been exhausted.
- (6) The following rates will apply:

- (a) inpatient hospital behavioral health unit: an all-inclusive rate of \$875 per day, which includes hospitalization, professional fees, laboratory services, medications, minor medical procedures that do not require transfer to another unit of the hospital, evaluating and assessment services, discharge planning, and therapies.
 - (b) inpatient crisis stabilization program: an all-inclusive rate of \$575 per day, which includes crisis facility stay, professional fees, laboratory services related to psychiatric treatment, medications related to psychiatric treatment, evaluating and assessment services, case management, and therapies.
- (7) This rule is effective July 1, 2015.

Authorizing statute(s): 53-21-1202, MCA

Implementing statute(s): 53-21-1202, 53-21-1205, MCA

History: NEW, 2015 MAR p. 1761, Eff. 10/16/15.