

1915(I) MEDICAID STATE PLAN AMENDMENT HOME AND COMMUNITY-BASED BEHAVIORAL HEALTH SERVICES

The 1915(i) program allows Medicaid to pay for home and community-based services to support members with behavioral health conditions including mental illness, substance use disorders, and/or brain injury to live in the community rather than an institution.

1915(i) ELIGIBILITY

To receive 1915(i) services, members must:

- Be currently enrolled in ND Medicaid or Medicaid Expansion
- Have income of 150% or below of the federal poverty level
- Have a qualifying behavioral health diagnosis (a list of qualifying diagnoses can be found attached to the 1915(i) Eligibility Form – [SFN 741](#))
- Have a qualifying [WHODAS 2.0](#) (World Health Organization Disability Assessment Schedule) score

1915(i) providers that assist members in applying for 1915(i) services must inform the member of other available 1915(i) providers that are available to them in their area.

The 1915(i) program may not serve individuals residing in institutions. The member's 1915(i) care coordinator will verify that the setting(s) where the member receives services is a home and community-based setting.

The care coordinator will assist eligible members with developing their 1915(i) plan of care and submit referrals to additional service providers as needed. Conflict of interest standards apply.

1915(i) PROVIDERS

Interested providers must

- Enroll with ND Medicaid as a 1915(i) provider, this includes providers already enrolled with ND Medicaid. Most providers, including providers such as Federally Qualified Health Centers (FQHCs) that are generally reimbursed on an encounter basis, can provide 1915(i) services, as long as they enroll as 1915(i) providers and follow 1915(i) requirements.

- Meet prescribed qualifications specific to each service.
 - Individual providers must affiliate with an enrolled 1915(i) group provider.
 - Group providers are responsible for maintaining qualifications required for their group enrollment and overseeing qualifications for individuals affiliated with their group.

THIRD PARTY LIABILITY AND CLIENT SHARE

1915(i) providers are not required to bill other insurances for 1915(i) services prior to billing Medicaid. It is the provider's responsibility to verify a member's Medicaid eligibility status and 1915(i) enrollment prior to providing services to the member.

Client Share is applicable to the 1915(i). Visit the 1915(i) website for all 1915(i) related resources and additional information:

<https://www.behavioralhealth.nd.gov/1915i>.

1915(i) Policies

Policies specific to 1915(i) services may be found at the 1915(i) Resources page <https://www.hhs.nd.gov/1915i/resources>.

1915(i) SERVICES

Prior authorization of services is required.

Remote service delivery (telehealth) is allowable as specified within each service. Remote support/telehealth limits, codes, and modifiers are available at <https://www.hhs.nd.gov/sites/www/files/documents/1915i/1915i%20Codes.Rates.Limits.pdf>.

POLICY UPDATES

2.16.24- Policy updated to remove language requiring provider enrollment in both Medicaid Expansion and traditional Fee-for-Service Medicaid

Service Type	Description	Age	Billing Code	Modifier (if applicable)
Care Coordination	Coordinates participant care, develops plan of care and assists eligible members with gaining access to needed 1915(i) and other services.	0+	H2015 ^T	
Training and Supports for Unpaid Caregivers	Service directed to individuals providing unpaid support to a recipient of 1915(i) services. Services are provided for the purpose of preserving, educating, and supporting the family and/ or support system of the individual.	0+	H0039* ^T	UK
Community Transition Services	Non-recurring basic household set-up expenses for members transitioning from certain institutions to a private residence where the person is directly responsible for his or her own living expenses.	0+	T5999	
Benefits Planning	Assists eligible members considering employment with making informed decisions regarding public benefits and work incentives. Counselors are knowledgeable on public benefits, including Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), Medicare, Medicaid etc.	0+	H2021*	U3
Non-Medical Transportation	Assists eligible members with transportation needs to gain access to services, activities, and resources, as specified by their plan of care.	0+	T2003	
Respite	Provided to eligible members unable to care for themselves. Furnished on a short-term basis because of the absence or need for relief of persons who normally provide care for the member.	0 to 21	T5999	

Service Type	Description	Age	Billing Code	Modifier (if applicable)
Prevocational Training	Assists eligible members with developing general, non-job-task-specific strengths and skills that contribute to paid employment.	6 months prior to 18 th birthday	H2023 ^T	
Supported Education	Assists eligible members who want to start or return to school or formal training with a goal of achieving skills necessary to obtain employment.	5+	H2025* ^T	U3
Supported Employment	Assists eligible members with obtaining and keeping competitive employment at or above the minimum wage.	14+	H2025* ^T	U4
Housing Support Services	Assists eligible members with accessing and maintaining stable housing in the community.	6 months prior to 18 th birthday	H2021* ^T	U4
Family Peer Support	Delivered to families caring for an eligible member, under the age of 18, by trained and certified Peer Support Specialists with lived experience as a parent or primary caregiver who have navigated child-serving systems on behalf of their child(ren) with social, emotional, developmental, health and/or behavioral health care needs.	0 to 18	H0038* ^T	UK
Peer Support	Trained and certified individuals with lived experience as recipients of behavioral health services promote hope, self-determination, and skills to eligible members to achieve long-term recovery from a behavioral health disorder.	18+	H0038 ^T	

*This service can be billed for individual or group setting. If group setting is provided, modifier UA must be appended to the line and reimbursement will be 25% of the allowed amount.

^TThis service may be delivered remotely.