1	HOUSE BILL NO. 274		
2	INTRODUCED BY E. STAFMAN, B. EDWARDS, J. ISALY, M. LEE, P. STRAND, T. CROWE, J. SECKINGER,		
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7			
8	A BILL FOR AN ACT ENTITLED: "AN ACT ESTABLISHING A MEDICAL RESPITE CARE PROGRAM FOR		
9	MEDICAID-ELIGIBLE HOMELESS INDIVIDUALS; PROVIDING RULEMAKING AUTHORITY; ESTABLISHING		
10	REPORTING REQUIREMENTS; PROVIDING A DEFINITION; AND PROVIDING EFFECTIVE DATES."		
11			
12	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:		
13			
14	NEW SECTION. Section 1. Medical respite care program for homeless individuals rulemaking		
15	authority report. (1) There is a medical respite care program for homeless individuals who are eligible for		
16	medical assistance pursuant to Title 53, chapter 6.		
17	(2) The department shall reimburse eligible providers for medical respite care that is offered in a		
18	residential facility to individuals who are experiencing homelessness and who are too ill or frail to recover from		
19	a physical illness or injury but are not ill enough to require hospital care.		
20	(3) Medical respite care consists of short-term housing with supportive medical services for acute		
21	and postacute care. To the extent allowable, medical respite care services include but are not limited to:		
22	(a) development and monitoring of a treatment plan and administration of high-quality postacute		
23	clinical services that are needed to help the patient meet the goals outlined in the treatment plan;		
24	(b) medication management and medication reconciliation, including access to medications,		
25	assistance with medication adherence, and medication education;		
26	(c) immunizations;		
27	(d) screening for communicable diseases;		
28	(e) discharge planning and timelines for transitions into other settings;		

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1	(f)	care coordination and referral management to ensure a patient is following up with medical		
2	appointments as necessary;			
3	(g)	coordination with other levels of services;		
4	(h)	assistance with applying for and accessing social services programs;		
5	(i)	transportation related to hospital visits and medical appointments; and		
6	(j)	meals.		
7	(4)	The department may adopt rules to implement the provisions of this section.		
8	(5)	The department shall report annually by September 1 to the legislature in accordance with 5-		
9	11-210 on:			
10	(a)	the number of homeless individuals served by each medical respite care facility;		
11	(b)	the cost of the program; and		
12	(C)	the reduction of health care costs due to the program's implementation.		
13	(6)	For the purposes of this section, "homeless" has the same meaning as provided in 42 U.S.C.		
14	11302.			
15				
16	NEW :	SECTION. Section 2. Direction to department of public health and human services. The		
17	legislature dire	ects the department of public health and human services to apply no later than January 1, 2026,		
18	to the centers for medicare and medicaid services for a waiver or state plan amendment to allow for			
19	implementation of the medical respite care program provided for in [section 1].			
20				
21	NEW :	SECTION. Section 3. Codification instruction. [Section 1] is intended to be codified as an		
22	integral part of	Title 53, chapter 6, part 1, and the provisions of Title 53, chapter 6, part 1, apply to [section 1].		
23				
24	NEW	SECTION. Section 4. Effective date contingent effective date. (1) Except as provided in		
25	subsection (2)	, [this act] is effective on passage and approval.		
26	(2)	[Section 1] is effective on the date that the director of the department of public health and		
27	human service	es certifies to the code commissioner that the centers for medicare and medicaid services has		
28	approved the o	department's application for a waiver or state plan amendment to implement the medical respite		

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- 1 care program. The director shall submit certification within 10 days after the occurrence of the contingency.
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