

ALASKA STATE LEGISLATURE

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North to the Future

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Senate Bill 169 Medicaid: Behavioral Health Coverage CS for SB 169(RLS) Sponsor Statement vsn U

For most of us, Alaska is a great place to live – diverse, challenging, and full of opportunity. But this is not the case for some Alaskans, who experience the negative impacts from opioid misuse, domestic violence, depression, malnutrition, Adverse Childhood Experience Syndrome (ACES), alcoholism and other debilitating problems.

Alaska has mental health care professionals who can provide needed services to Alaskans. However, the system has built-in constraints on where and how providers can offer mental health services, limiting access to many.

The lack of behavioral health care services was discussed at length during the Medicaid Reform initiative in 2016 during deliberations on SB 74. One barrier to care is an existing state regulation mandating that mental health professionals in a behavioral health clinic must have a supervising psychiatrist physically present in their clinic 30% of the time in order to bill Medicaid.

There have been reports that some clinics have up to a 2-year waiting list. That is completely unacceptable; while patients wait, their conditions worsen and often lead to other negative behaviors such as assault, robbery, severe depression and even death.

Supervision of mental health therapists, by a psychiatrist, is mandated by state regulation. Senate Bill 169 appropriately manages this mandate by allowing a **physician** to supervise providers in a clinic either in person or by communication device. This allows use of modern technology to accomplish the supervisory oversight.

With health care services expanding in Alaska via the use of telemedicine, particularly in rural areas, the removal of this barrier opens doors to expand needed behavioral health care treatments to many more Alaskans.

It's 2018, we can't ignore this mounting crisis, and the time to act is now. Please join me in support of SB 169.

Chair Senate Resources Committee
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