

## Taneeka Hansen

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**From:** Newman, Anthony (HSS) <anthony.newman@alaska.gov>  
**Sent:** Tuesday, February 16, 2016 7:48 PM  
**To:** Taneeka Hansen  
**Cc:** Woods, Sarah B (HSS); Davidson, Valerie J (HSS); Sherwood, Jon (HSS); Ashenbrenner, Chris (HSS); Martin, Monique R (HSS); Erickson, Deborah L (HSS); Martin, Monique R (HSS); Brodie, Margaret C (HSS); Peterson, Darwin R (GOV); Wilcox, Lacy J (GOV); McClanahan, Natasha S (GOV)  
**Subject:** RE: HB 227 questions

Taneeka,

In response to committee members' questions from the Tuesday 2/2 hearing, please see below.

1. Representative Vazquez would like to know all grants to behavioral health providers to date for FY15 and FY 16. She would also like a list of all the grantees for the same time period, if possible.

As noted earlier, this information is available from the web at:

<http://dhss.alaska.gov/fms/Documents/FY16GrantBook.pdf>

<http://dhss.alaska.gov/fms/Documents/FY15GrantBook.pdf>

2. Regarding the audits, Representative Seaton would like to know what 0.75% of providers would look like, generally. In partial response to this Jon Sherwood noted that there are different provider classifications (only some of which get audited?) and that the department has been averaging in the 30s. The committee would like to see a list of these different provider classifications and what 0.75% would mean for each group in terms of auditing. You can provide that as the number of provider audits last year, or the average over the last few years, whichever is easier to provide.

Our most recent data pull showed 5,823 active Medicaid billing providers. 0.75% of 5,823 would be 44 providers.

For audit purposes, we have classified providers along Medicaid Division Authority and Responsibility lines. In the past our audits have been split roughly like this:

Health Care Services	45% to 50%
Senior and Disabilities Services	35% to 40%
Behavioral Health	10% to 15%

3. Representative Vazquez would like to have the citation of the federal regulations on a fiscal note. In my notes, it appears she was talking about Fiscal note 2, DHSS-MAA. In that case, I believe she was talking about the federal cost sharing regulations at the end of the fiscal narrative, however if that is not your memory from the meeting you may have to check with Representative Vazquez's office.

Federal regulations on Medicaid premiums and cost sharing are found at 42 CFR 447.51 – 42. CFR 447.57.

4. Finally, during the discussion of fiscal note 3, rate review, Representative Vazquez requested a list of all the different FMAPS we could expect under the 1115 waivers required to pursue the demonstration projects listed in the fiscal note. Understanding that we cannot know the FMAP for certain because you negotiate with the Federal government to keep the waiver cost neutral, please list the expected FMAPS for administration, Denali kid care, tribal, normal, etc.

Under an 1115 waiver, CMS must determine that the costs to the federal government are cost neutral. Therefore, the waiver may contain a limitation on the amount of federal money that will be provided regardless of the underlying match rate, depending on what the State proposed. However, we can identify the match rates that would be used to calculate cost neutrality. These are the same match rates that would apply if the costs were incurred under the regular Medicaid program.

Administration

Basic Administrative costs: 50%  
Enhanced Administrative costs: 75%  
System development costs: 90%

Services

Regular FMAP	50%
CHIP eligible	88%
Family Planning	90%
Medicaid Expansion	90-100% (depending on the year)
Tribal Eligible	100%

Should the State's proposal include services that could not be covered under federal rules or cover people who are not be eligible for Medicaid under federal rules, then CMS might impose a limit on the total federal match for expenditures under the waiver.

Thanks, and please let us know if this information generates any additional questions.

Tony

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**From:** Taneeka Hansen [<mailto:Taneeka.Hansen@akleg.gov>]  
**Sent:** Friday, February 05, 2016 5:17 PM  
**To:** Newman, Anthony (HSS)  
**Subject:** Committee questions from week of Feb 1-5

Good evening Tony,

Thank you for your work on the bills this week. Here are the questions I have written down from Tuesday, the **presentation of HB 227**.

Representative Vazquez would like to know all grants to behavioral health providers to date for FY15 and FY 16. She would also like a list of all the grantees for the same time period, if possible.

Regarding the audits, Representative Seaton would like to know what 0.75% of providers would look like, generally. In partial response to this Jon Sherwood noted that there are different provider classifications (only some of which get audited?) and that the department has been averaging in the 30s. The committee would like to see a list of these different provider classifications and what 0.75% would mean for each group in terms of auditing. You can provide that as the number of provider audits last year, or the average over the last few years, whichever is easier to provide.

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Taneeka Hansen  
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Representative Paul Seaton  
Committee Aide, Health and Social Services  
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