# Alaska's Efforts to Improve Behavioral Health Outcomes for Children

Dr. Anne Zink, Chief Medical OfficerEmily Ricci, Deputy Commissioner

Heather Carpenter, Health Care Policy Advisor





### **Behavioral Health Funding**

Medicaid, grants, general fund expenditures, and other payers are the State's primary tools to support a broader range of services and provide Alaskans with access to services not typically covered by Medicaid.



### Medicaid Behavioral Health Services in Alaska



- Alaska is a Medicaid fee-for-service state.
- Alaska relies on non-government entities to provide most direct care services.
- Service availability depends on whether providers offer those services, and which payment mechanisms they accept.
- Rural geography and diffuse population centers pose significant challenges to the provision of behavioral health care services.

### 1115 Demonstration Waiver Improved Access to Behavioral Health Services

#### **Improvements:**

- Allows state to cover services not typically covered by Medicaid.
- Expands Medicaid-covered services to include at risk Alaskans.
- Reduces reliance on late-stage crisis services.
- Emphasis on early-stage outreach, prevention, and intervention.
- Uses innovative services delivery systems.

#### **Unrealized Benefits:**

- The second part of the waiver went into full effect May 2020 through emergency regulations, 2 months after the start of the pandemic.
- Utilization of all the 1115 waiver could only begin once reimbursement became available in May 2020.
- Benefits of the 1115 waiver are still being implemented by a growing number of providers.
- Plan submitted to CMS for waiver renewal February 27, 2023.

### 3 Key Focus Areas Going Forward



**Medicaid Reimbursement Structure and Participation** 



**Expanding Methods of Service Delivery and Facility Types** 



**Establish and Expand Crisis Stabilization Services** 

# Medicaid Reimbursement Structure and Participation



Increased Rates for 1115 Services.

- Increased Rates for Home and Community Based Services.
- Rebased Rates for Home and Community Based Services.
- Rebasing Rates for Community Behavioral Health Providers.

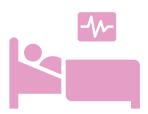


# **Expanding Methods of Service Delivery and Facility Types**



- 1) Increase utilization of existing services.
- 2) Fully implement new telehealth statute and regulations.
- 3) Additional non-Medicaid efforts:
  - Psychiatric Emergency Services (PES) Program.
  - Broadband Task Force.
  - Stakeholder Engagement.
  - Provider Education.
- 4) Identify and address gaps in the continuum of care.
  - Fully implement HB 172, 1115 and other areas of effort.

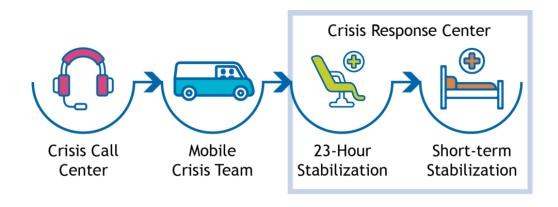
## Crisis Stabilization Services Reduce the Need for a Higher Level of Care



- 1) Statewide crisis call center.
- 2) Centrally deployed, 24/7 mobile crisis teams.
- 3) 23-hour and short-term stabilization.

#### What is the Crisis Now Framework?

Someone to Talk to, Someone to Respond and a Place to Go

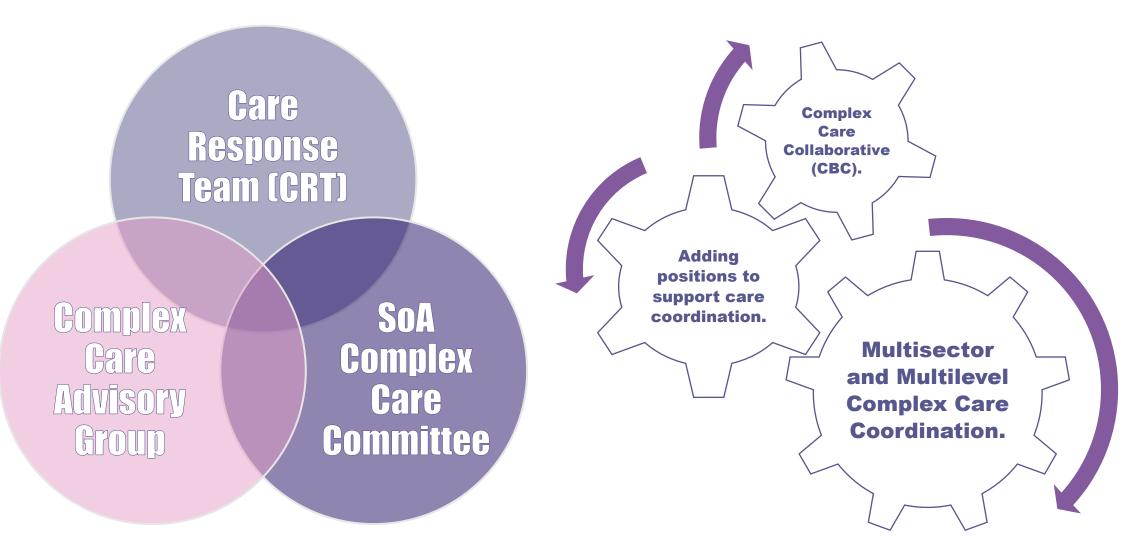


### Supporting Alaskans Close to Home

- 1) Today, there are 73 children on Medicaid receiving care out of state.
- 2) Since December 2020 (start of DOJ investigation), Alaska has reduced the number of children on Medicaid receiving care out of state by 25.5%.
- 3) Out of state care is an option of last resort.
- 4) Children placed out of state are closely monitored by dedicated staff to coordinate care and ensure facility compliance.



### **Improving Complex Care Coordination**



#### **Tribal Collaboration**

- Tribal collaboration is essential in addressing Alaska's behavioral health needs.
- Tribal Health Organizations (THO) are vital partners in providing services in their regions and communities.
- For many rural communities, THOs are the only Medicaid enrolled provider.
- DOH and DFCS have designated tribal liaison positions.
- Alaska Medicaid utilizes the Medicaid Tribal Task Force, Tribal Behavioral Health Directors, and Medicaid Tribal Consultation to partner with tribes.

### **Near Term Efforts in Progress**

- Developing Infrastructure for Complex Care Coordination.
- Increase Utilization of Waivers.
- Increase Behavioral Health Infrastructure.
- Developing Workforce.
- Improving Provider Support.



#### What's Next?

- Initiate a steering committee to determine goals, recommended approach, and timeline, and outline necessary resources to develop statewide and regional plans.
- Focus on statewide and regional services.
- Draft plan will be shared publicly, welcome robust public comment statewide, and involve listening session in specific regions.
- Final plan be shared with the legislature and other governmental agencies.

### **Questions?**



### 907-269-7800

Dr. Anne Zink, Chief Medical Officer

Emily Ricci, Deputy Commissioner

Heather Carpenter, Health Care Policy Advisor