Medicaid Section 1115 Behavioral Health Waiver Demonstration Project

Mental Health Trust Authority November 2019

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epartiment of Health and Socials

Our mission is to promote and protect the health and well-being of Alaskans

Gennifer Moreau, Division of Behavioral Health Farina Brown, Division of Behavioral Health October 30, 2019

Behavioral Health Medicaid System

State of Alaska's Behavioral Health (BH) Medicaid system is administered through the Division of Behavioral Health (DBH)

- The BH Medicaid system has served the most acutely disabled children and youth (Seriously Emotionally Disturbed – SED – Children), and the most seriously mentally ill adults (SMI Adults) and covers both clinic and more intense services, including residential and inpatient care.
- Services must be:
 - medically necessary,
 - clinically appropriate, and
 - delivered by eligible providers to (financially and diagnostically) eligible recipients.
- Care is delivered by community behavioral health centers, substance abuse treatment agencies, federally qualified health centers, tribal health organizations, hospitals, and specialty clinics.



Behavioral Health Medicaid System Reform

System redesign and reform began in 2016 with the passage of SB 74. The main goals of the reform efforts are to:

- Improve the effectiveness, efficiency, and integration of the state's behavioral health system.
- Reduce operational barriers and minimize administrative burdens of the existing system for both the State and providers.
- Expand the capacity for community-based mental health and substance use disorder treatment and community supports.
- Support early interventions and timely access to treatment and support services.
- Support peer- and family-based support services and interventions.
- Waive the IMD Exclusion rule.



Behavioral Health Medicaid System Reform

Following legislative direction, stakeholder input, system assessments, and negotiations with the Center for Medicaid and Medicare Services (CMS), Alaska is moving forward with two initiatives for behavioral health system reform:

- Implementation of the Alaska 1115 Behavioral Health Waiver Demonstration Project.
- Implementation of an Administrative Services Organization (ASO) to manage the redesigned statewide system of behavioral health care.



Administrative Services Organization (ASO)

Specific goals for the ASO include:

- Increase access to appropriate behavioral health services.
- Improve health outcomes for Medicaid and non-Medicaid.
- Manage costs of behavioral health service delivery in Alaska.

All activities of the ASO will be performed under the oversight and authority of the state.



Administrative Services Organization

The contract will include some or all of these services:

- Utilization management
- Provider network capacity development and support
- Tribal liaison, child welfare liaison
- Participant outreach
- Communications and support
- Quality and outcomes management
- Data management
- Claims processing



Goals of 1115 Waiver Demonstration

The Alaska Behavioral Health 1115 Demonstration will provide Alaskans with a comprehensive suite of cost-effective, high quality behavioral health services designed to ensure access to the right services at the right time in the right setting.

The waiver will allow the state to:

- Rebalance the current behavioral health system of care to reduce Alaska's over-reliance on acute and institutional-level care and shift to more community or regionally-based care.
- Intervene as early as possible in the lives of Alaskans to address behavioral health symptoms before symptoms cascade into functional impairments.
- Improve the overall behavioral health system accountability by reforming the existing system of care.



Target Populations

This demonstration project focuses on establishing an enhanced set of benefits for three target populations of Medicaid recipients:

- Children, adolescents, and their parents or caretakers with or at risk of – mental health and/or substance-use disorders.
- Individuals with acute mental health needs.
- Individuals with substance-use disorders.

More detailed information about the waiver demonstration's goals and objectives for each of these target populations is found on the 1115 webpage:

http://dhss.alaska.gov/dbh/Pages/1115/



Targeted Services Array for Population 1

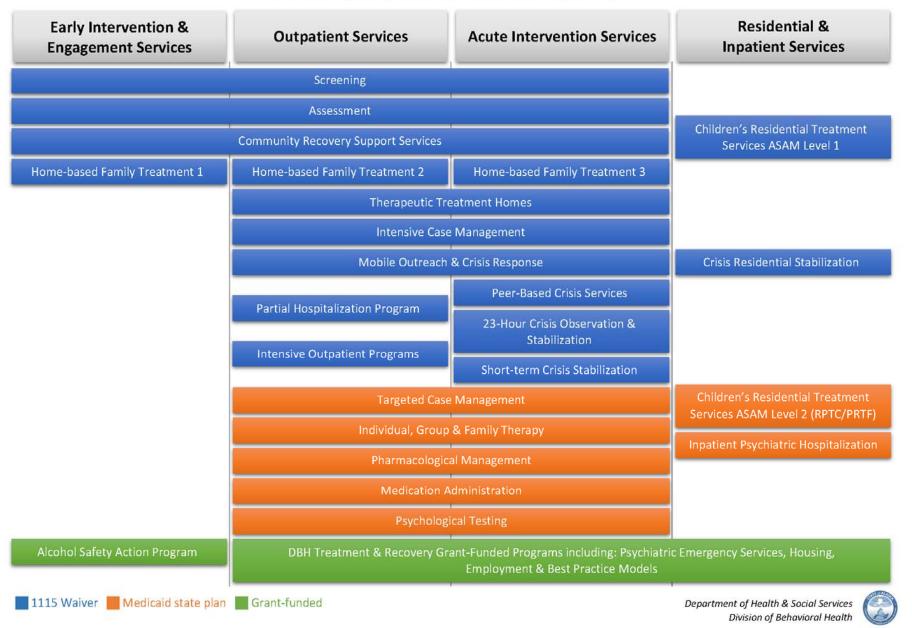
Children under 21 & their families at-risk of mental health or substance use disorders

- Evidence based clinical assessments
- Standardized mental health and SUD screening instruments
- Community-based services
- Home-based family treatment services
- Intensive outpatient
- Intensive case management services

- Partial hospitalization services
- Acute services
- Mobile crisis response services
- 23-hour crisis stabilization services
- Therapeutic foster care
- Residential treatment services



DHSS Mental Health Continuum of Care AT-RISK CHILDREN & ADOLESCENTS AGES 0-21



Targeted Services Array for Population 2

Individuals (ages 18 and over) with acute mental health needs

- Standardized screening and assessment instruments
- Community-based outpatient treatment options, including Assertive Community Treatment
- Intensive case management services
- Partial hospitalization
- Acute intensive services
- 23-hour crisis stabilization services
- Crisis stabilization residential services

- Mobile crisis response
- Community and recovery support services
- Adult mental health residential
- Existing crisis residential and stabilization services, including medically-monitored, shortterm, residential program in an approved (10-15 bed) facilities that provides 24/7 psychiatric stabilization services



DHSS Mental Health Continuum of Care INDIVIDUALS 18 YEARS AND OLDER

Early Intervention & Engagement Services	Outpatient Services	Acute Intervention Services	Residential & Inpatient Services
	Screening		
	Assessment		
Community Recovery Support Services			Adult Mental Health Residential
	Intensive Case	e Management	
	Assertive Comm	nunity Treatment	
	Mobile Outreach & Crisis Response		Crisis Residential Stabilization
	Partial Hospitalization Program	Peer-Based Crisis Services	
	Intensive Outpatient Programs	23-Hour Crisis Observation & Stabilization	
		Short-term Crisis Stabilization	
	Targeted Case	e Management	Inpatient Psychiatric Hospitalization
	Individual, Group & Family Therapy		
	Pharmacological Management		
	Medication Administration		
	Psychological Testing		
Alcohol Safety Action Program	DBH Treatment & Recovery Grant-Funded Programs including: Psychiatric Emergency Services, Housing, Employment & Best Practice Models		
1115 Waiver 📕 Medicaid state pla	Grant-funded		Department of Health & Social Services Division of Behavioral Health

Targeted Services Array for Population 3

Individuals (ages 12 and over) with substance use disorders

- Standardized screening and assessment instruments
- Community and recovery support SUD services
- Community-based outpatient SUD treatment and medication services
- Medication-Assisted Treatment (MAT)
- MAT care coordination
- Intensive SUD case management
- Intensive outpatient SUD services

- Ambulatory withdrawal management
- Acute intensive services will also be made available, including mobile crisis response services and peer-based crisis services
- Adult and youth residential treatment services
- Medically managed and medically monitored inpatient and withdrawal services



Early Intervention & Engagement Services	Outpatient Services	Acute Intervention Services	Residential & Inpatient Services
	Screening		ASAM 3.2 – WM Clinically Managed Residential Withdrawal Management
Assessment			ASAM 3.7 – WM Medically Monitored Inpatient Withdrawal Management
Community Recovery Support Services			
	Intensive Case Management		ASAM 4 – WM Medically Managed Intensive Inpatient Withdrawal Mgmt.
	Opioid Treatment Services		ASAM 3.1 - Clinically Managed Low-
	Substance Use Care Coordination		Intensity Residential
	ASAM 1 – WM & 2-WM Ambulatory	Mobile Outreach & Crisis Response	ASAM 3.3 – Clinically Managed, Populatic Specific, High-Intensity Res.
	Withdrawal Mgmt. Mobile Outreach & Crisis Response	Peer-Based Crisis Services	ASAM 3.5 – Clinically Managed Medium (Youth) & High (Adult) Intensity Res.
	ASAM 2.1 - Intensive Outpatient Programs	23-Hour Crisis Observation & Stabilization	ASAM 3.7 – Medically Monitored Intensiv Inpatient Services
	ASAM 2.5 – Partial Hospitalization	Short-term Crisis Stabilization	ASAM 4. 0 – Medically Managed Intensiv Inpatient Services
	Medication Assisted Treatment		^
	Targeted Case Management		Inpatient Psychiatric Hospitalization
	Individual, Group & Family Therapy		
	Pharmacological Management		
	Medication Administration		
	Psychological Testing		
Alcohol Safety Action Program	DBH Treatment & Recovery Gr	ic Emergency Services, Housing,	

Department of Health & Social Services

Questions?

Clarifications?



