Medicaid Section 1115 Behavioral Health Waiver Demonstration Project

Mental Health Trust Authority November 2019

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

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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.
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.
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.
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
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.
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

Early Intervention & Engagement Services
- Screening
- Assessment
- Community Recovery Support Services
  - Home-based Family Treatment 1

Outpatient Services
- Home-based Family Treatment 2
- Therapeutic Treatment Homes
- Intensive Case Management
- Mobile Outreach & Crisis Response
  - Partial Hospitalization Program
  - Intensive Outpatient Programs

Acute Intervention Services
- Home-based Family Treatment 3
- Peers-Based Crisis Services
  - 23-Hour Crisis Observation & Stabilization
  - Short-term Crisis Stabilization

Residential & Inpatient Services
- Children’s Residential Treatment Services ASAM Level 1
- Crisis Residential Stabilization

- Children’s Residential Treatment Services ASAM Level 2 (RPTC/PRTF)
- Inpatient Psychiatric Hospitalization

- Alcohol Safety Action Program
- DBH Treatment & Recovery Grant-Funded Programs including: Psychiatric Emergency Services, Housing, Employment & Best Practice Models

1115 Waiver | Medicaid state plan | Grant-funded
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, short-term, 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
- Screening
- Assessment
- Community Recovery Support Services

Acute Intervention Services
- Intensive Case Management
- Assertive Community Treatment
- Mobile Outreach & Crisis Response
- Partial Hospitalization Program
- Intensive Outpatient Programs

Residential & Inpatient Services
- Adult Mental Health Residential
- Crisis Residential Stabilization
- Inpatient Psychiatric Hospitalization

Alcohol Safety Action Program

DBH Treatment & Recovery Grant-Funded Programs including: Psychiatric Emergency Services, Housing, Employment & Best Practice Models

1115 Waiver
Medicaid state plan
Grant-funded
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
## DHSS Substance Use Disorder Continuum of Care
### Individuals 12 Years and Older

### Early Intervention & Engagement Services
- Screening
- Assessment
- Community Recovery Support Services
- Intensive Case Management
- Opioid Treatment Services
- Substance Use Care Coordination
  - ASAM 1 – WM & 2-WM Ambulatory Withdrawal Mgmt.
  - Mobile Outreach & Crisis Response
  - ASAM 2.1 – Intensive Outpatient Programs
  - ASAM 2.5 – Partial Hospitalization

### Outpatient Services
- Mobile Outreach & Crisis Response
- Peer-Based Crisis Services
- 23-Hour Crisis Observation & Stabilization
- Short-term Crisis Stabilization
- Medication Assisted Treatment
  - Targeted Case Management
  - Individual, Group & Family Therapy
  - Pharmacological Management
  - Medication Administration
  - Psychological Testing

### Acute Intervention Services
- ASAM 3.2 – WM Clinically Managed Residential Withdrawal Management
- ASAM 3.7 – WM Medically Monitored Inpatient Withdrawal Management
- ASAM 4 – WM Medically Managed Intensive Inpatient Withdrawal Mgmt.
- ASAM 3.1 – Clinically Managed Low-Intensity Residential
- ASAM 3.3 – Clinically Managed, Population Specific, High-Intensity Res.
- ASAM 3.5 – Clinically Managed Medium (Youth) & High (Adult) Intensity Res.
- ASAM 3.7 – Medically Monitored Intensive Inpatient Services
- ASAM 4.0 – Medically Managed Intensive Inpatient Services

### Residential & Inpatient Services
- Inpatient Psychiatric Hospitalization

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**Alcohol Safety Action Program**

**DBH Treatment & Recovery Grant-Funded Programs Including:**
- Psychiatric Emergency Services
- Housing
- Employment & Best Practice Models

**Legend:**
- 1115 Waiver
- Medicaid state plan
- Grant-funded

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*Department of Health & Social Services
Division of Behavioral Health*
Questions?
Clarifications?

Thank you!