

Trust

Alaska Mental Health
Trust Authority

Alaskan Seniors
Living Longer Growing Stronger
from the Alaska Commission on Aging



Importance of Medicaid for Trust Beneficiaries

What is Medicaid and who uses it?

- Medicaid is a federal health insurance program paid for with federal and state dollars. In Alaska, Medicaid is managed by the Department of Health & Social Services (DHSS).
- Medicaid health insurance pays for healthcare services for eligible low-income children and families, pregnant women, people with disabilities, the elderly, blind, permanently disabled, and some adults without children between the ages of 19 and 64.
- Medicaid enables eligible Trust beneficiaries¹ access to specialized healthcare services that promote stability, independence, recovery, and productivity in the community. Access to Medicaid-reimbursed health services helps “level the playing field” for people with disabilities and reduces their likelihood of ending up in expensive emergency or institutional care.
- In certain cases, Medicaid can pay for specialized services for people who qualify within the Medicaid system. This happens through a “waiver” system. For example, a person with a developmental disability may qualify for an Intellectual/Developmental Disability (IDD) Waiver and receive specialized services, such as day habilitation, assisted living, transportation support.

Why is Medicaid important for Trust beneficiaries?¹

- When people’s medical needs are met, they are more likely to hold down a job, maintain a stable home, and contribute productively in the community. Healthier employees miss fewer days of work and are better able to provide income and stability for their families.
- State and local governments will pay for their uninsured citizens, either on the back-end with expensive emergency care, nursing homes, or prisons—or on the front-end, with emergency medical and mental health care.
- Trust beneficiaries often need specialized treatment delivered by specialized professionals, who may include case managers and care coordinators, personal care assistants, behavioral health clinicians, day habilitation, and more.
- Community support services help integrate beneficiaries into communities at the lowest level of care. Medicaid reimbursement for these services keeps providers’ doors open and reduces the likelihood beneficiaries will end up in crisis, homeless, or involved with the psychiatric or criminal justice systems.
- Medicaid plays a critical role in the state’s ability to address the opioid and addiction epidemic. Medicaid reimbursement to providers for substance use disorder (SUD) treatment, ensures they can continue to serve low-income and non-paying clients, thus increasing the client’s chance of remaining stable, sober, and a contributing part of the community.
- Medicaid health insurance is available for certain justice-involved individuals on probation or parole who may need specialized treatment, such as addiction counseling, cognitive-behavioral therapy, recovery and peer support.

Alaska's Medicaid reforms have resulted in improved practices and efficiencies

Alaska's Medicaid reforms, passed in 2016,² were enacted to bring efficiencies to the state's Medicaid program, to reduce fraud and waste, save costs through efficiencies, and expand coverage for eligible Alaskans, including Trust beneficiaries. Some of these reforms include:

- Improved practices and better access to telemedicine services, resulting in reduced travel costs and improved healthcare for some rural Alaskans.
- Increased coordination with the tribal health entities, resulting in leveraged resources and better access to services.
- Expanded reimbursement for behavioral health services—addiction and mental health treatment, peer and recovery supports—resulting in improved access to services for Alaskans who previously were “falling through the cracks.”
- Improved reimbursement for preventative services, reducing the need to access expensive emergency services—such as hospitals, residential psychiatric care, police, courts, and corrections.

Outcomes related to Alaska's Medicaid reforms are being gathered and analyzed. The state will soon have three years of implementation data to inform policymakers and stakeholders about trends, results, and effectiveness.

Moving Forward in 2019

In 2018, Alaska submitted an application to the federal Center for Medicaid Services (CMS)

to implement a 1115 Behavioral Health Waiver Demonstration Project. The proposed substance use disorder portion of the application was approved and the department is preparing for implementation.

The 1115 Waiver will pay for specialized services for youth and adults with mental illness and/or substance use disorders, including Alaskans at-risk for involvement with the state's Office of Children's Services (OCS), Division of Juvenile Justice (DJJ), Division of Behavioral Health (DBH), or Department of Corrections (DOC).

Coming up in the 2019 legislative session, policymakers will address Medicaid spending and there will likely be legislation introduced that proposes to change elements of Medicaid policies and funding.

The Trust and partner advisory boards support protecting Medicaid-funded services that help Alaskans with disabilities, including people with mental illness and addiction disorders, the elderly, and others who are compromised in their ability to live safely and normally in their communities.

Alaska currently has the highest unemployment rate in the United States.³ The reforms of 2016 saw better access to healthcare for unemployed and under-insured Alaskans with specialized needs.

Without health insurance vulnerable Alaskans are more likely to rely on emergency rooms, hospitals, or other expensive institutional care, often at state and local expense.

Protect Medicaid health insurance for vulnerable and at-risk Alaskans with disabilities, including mental illness, addiction disorders, the elderly, and people with cognitive impairments.

¹ Trust beneficiaries include Alaskans with mental illness, substance use disorders (SUD), Intellectual/Developmental Disorders (IDD), Alzheimer's disease and related dementia (ADRD), Traumatic Brain Injury (TBI), and fetal alcohol spectrum disorders (FASD).

² Senate Bill 74 related to Medicaid Reform passed in 2016, set a framework for medical assistance reform program into statute: <http://www.akleg.gov/basis/Bill/Detail/29?Root=sb74>

³ U.S. Bureau of Labor Statistics, Local Area Unemployment Statistics, January 2019. <https://www.bls.gov/web/laus/laumstrk.htm>

For more information, go to: www.alaskamentalhealthtrust.org/jointadvocacy