

Overview of the Behavioral Health 1115 Medicaid Waiver Demonstration Project

- ▶ The Behavioral Health (BH) Medicaid system is administered through the Division of Behavioral Health (DBH).
- ▶ Behavioral health system redesign and reform is part of the State of Alaska's larger Medicaid reform initiative. 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.

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- ▶ Following legislative direction, system assessments, stakeholder input, and tribal consultation, Alaska filed an application with the Center for Medicaid Services (CMS) for an **1115 Behavioral Health Waiver Demonstration Project**.
- ▶ The 1115 waiver gives states flexibility to (re)design and improve Medicaid services and programs and then to evaluate the impact of the new approaches, including:
 - Expanding eligibility to individuals not otherwise Medicaid or CHIP eligible
 - Providing services not typically covered by Medicaid, including culturally relevant services
 - Using innovative service delivery systems to improve care, increase efficiency, and reduce costs
- ▶ DHSS received approval of the 1115 waiver
 - Approval for the substance use disorder (SUD) implementation plan soon.
 - Waiver negotiations may impact population definitions, services, and timelines.

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The **Alaska Behavioral Health 1115 Demonstration** seeks to 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:

1. 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.
2. Intervene as early as possible in the lives of Alaskans to address behavioral health symptoms before symptoms cascade into functional impairments.
3. Improve the overall behavioral health system accountability by reforming the existing system of care.

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1115 Waiver Target Populations:

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

1. Children, adolescents, and their parents or caretakers with - or at risk of - mental health and/or substance-use disorders.
2. Transitional age youth and adults with acute mental health needs ages 18 and up*.
3. Individuals with substance-use disorders ages 12 and up.

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1115 Waiver Target Regions & Regional Hubs:

The demonstration project focuses on establishing core service capacity in 9 regions with 14 regional hub communities.

Region	Hubs in Region	Region	Hubs in Region
# 1 Anchorage Municipality	1. Anchorage	#6 Western Region	7. Nome
#2 Fairbanks	2. Fairbanks		8. Kotzebue
#3 Interior and Northern	3. Utqiagvik & Fairbanks		9. Bethel
#4 Kenai Peninsula Borough	4. Homer	#7 Northern SE Region	10. Juneau
	5. Soldotna	#8 Southern SE Region	11. Sitka
#5 MatSu Borough	6. Wasilla	#9 Coastal Region	12. Ketchikan
			13. Kodiak
			14. Dillingham

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1115 Waiver Services:

▶ Prevention / Engagement Services:

- SUD and MH Evidence-based Screenings - required screening to identify children and adults w/BH symptoms that may require assessment and service/treatment referrals

▶ Outpatient Intervention Services:

- Medication Assisted Treatment (MAT) Care Coordination
- MAT Treatment (Injectable Naltrexone for alcohol and opioid abuse)
- Intensive Case Management

**State Plan services will also be available to compliment waiver services. State plan services will be confirmed after CMS negotiations are finalized and waiver services are finalized.*

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- ▶ **Community & Recovery Support Services**
 - Includes services such as: Recovery Coaching, Employment Services, Skill Building, Peer Operated Services - and more
- ▶ **Intensive, Community-Based Intervention Services**
 - Assertive Community Treatment (ACT)
 - Home-based Family Treatment
 - Intensive Case Management (ICM)
 - SUD Partial Hospitalization / MH Day Treatment (outpatient services)
 - SUD Intensive Outpatient Services (IOP)

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▶ Acute Residential Services

- Crisis Residential / Stabilization (for ages 5 - 17 and for 18+)
- Therapeutic Foster Care (Therapeutic Treatment Homes)
- Residential Treatment Services
- 23-Hour Crisis Stabilization
- Mobile Crisis Response Services and Peer-Based Crisis Services (calming environments with supports for individuals in crisis; medical supports, no more than two days)

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SUD Fast Track:

- ▶ CMS fast-tracked the SUD portion of the 1115 application.
- ▶ Negotiations on the non-SUD portion of the 1115 project were delayed until the SUD portion was approved.

Why Fast Track?

- ▶ 108 opioid related deaths in Alaska in 2017
- ▶ Difficulties accessing treatment
- ▶ Inappropriate levels of care: Tendency to refer to residential when individuals could be stabilized with medications and recovery supports
- ▶ High utilization of services in acute settings
- ▶ Difficulties accessing step-down services

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Final SUD Implementation Plan Approved March, 2019 - Goal to start services July 2019

- ▶ **Year one:** Anchorage, Mat-Su, Fairbanks, Juneau, Sitka, and possibly other areas & Year two: The rest of the state.
- ▶ **Alaska's plan:**
 1. Universally screen all Medicaid recipients, regardless of setting, using industry recognized, evidenced based SUD screening instruments.
 - Provide Screening, Brief Intervention and Referral to Treatment (SBIRT) in 10 emergency departments (statewide)
 2. Implement ASAM Criteria (3rd edition) to match individuals to appropriate services and tools necessary for recovery
 - Use ASAM criteria to define services across the system
 - Use "Open Beds" application to provide linkages to services

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SUD Implementation Plan

3. Increase SUD treatment options for youth (ages 12-17) and adult (ages 18+) Medicaid recipients
 - More emphasis on step-up step-down options such as intensive outpatient (IOP) and partial hospitalization (PHP)
 - “Institute for Mental Disorders” requirement lifted- increasing residential bed capacity by approximately 66 beds
 - Expand access to pharmacotherapy
 - Ambulatory Withdrawal Management: NEW SERVICE
 - SUD (MAT) Care Coordination * NEW SERVICE
 - Community and Recovery Support Services * NEW SERVICE
 - ASAM Level 3.3 (clinically-managed population-specific high-intensity residential services) (2 programs) * NEW SERVICE

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SUD Implementation Plan

4. Improve SUD provider infrastructure and capacity utilizing industry-recognized standards for certification and ongoing accountability (with residential providers and across the board)
 - Provisional Designations
5. Elevate SUD workforce
 - Certification for Qualified Addiction Professionals
 - Certification for peer support providers

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Next Steps:

- ▶ **Infrastructure Analysis: On-going**
 - Evaluate local infrastructure to house the programs and staff necessary to provide the services listed in the 1115 Waiver.
 - Assess potential locations for services listed in the Waiver for each of the three population groups in each of the Waiver's identified 14 regional hubs.
- ▶ **State Plan and Regulatory Changes:** prior to implementation of the 1115 waiver, changes to the Medicaid State Plan and regulatory changes are anticipated.
 - Changes to the Medicaid State Plan or to administrative regulations will have their own separate public review and comment period.
- ▶ **Stay updated at:** http://dhss.alaska.gov/HealthyAlaska/Pages/Redesign/Redesign_news.aspx