Alaska Medicaid Section 1115 SUD Demonstration Status Report Operational Updates for SUD Components for Pre-Implementation Period January 1 – June 30, 2019

I. Transmittal Page for the State's SUD Demonstration or SUD Components of Broader Demonstration

The state should complete this Transmittal Title Page at the beginning of a demonstration and submit as the title page of all SUD Monitoring Reports. The content of this transmittal table should stay consistent over time.

State	Alaska
Demonstration Name	Alaska Medicaid Section 1115 Behavioral Health Demonstration (SUD -BHP) (Project Number: 11-W- 00318/0)
Approval Dates	SUD Component: November 28, 2018 BH Component: September 3, 2019
Approval Periods	SUD Component: January 1, 2019 – December 31, 2023 BH Component: September 3, 2019 – December 31, 2023
Demonstration Goals and Objectives	Goal: Create a data-driven, integrated behavioral health system of care for Alaskans with serious mental illness, severe emotional disturbance, and/or substance use disorders. Objectives: Increased rates of identification, initiation, and engagement in treatment Increased adherence to and retention in treatment Reduced overdose deaths, particularly those due to opioids Reduced utilization of emergency departments and inpatient hospital settings for treatment where the utilization is preventable or medically inappropriate through improved access to other more appropriate and focused SUD use/misuse/abuse- related services Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate Improved access to care for physical health conditions among beneficiaries

II. Operational Updates

Describe all operational updates and activity under the demonstration.

The state has made progress on implementation of the SUD component of the 1115 demonstration waiver. The following is a summary of activities between January 1, 2019 through June 30, 2019:

- The Alaska Department of Health and Social Services, Division of Behavioral Health (DBH) issued emergency regulations outlining provider requirements and service criteria and definitions for the new 1115 SUD services. The emergency regulations went into effect July 1, 2019 and were released for public comment on that same date for a 30-day public comment period ending August 8, 2019. Revisions were made to the emergency regulations based on public comment and a final review by the Department of Law. The emergency regulations were made permanent on October 11, 2019 and the revisions to the emergency regulations will be effective on November 10, 2019.
- DBH also drafted sections of an Alaska Behavioral Health Provider Standards and Administrative Procedures Manual related to the new 1115 SUD services. The standards manual details service descriptions, staff qualifications, and service locations, limitations, coding, and rates for all the new SUD services.
- The state has made considerable progress in contracting with an Administrative Services Organization (ASO) to administer waiver benefits, services, and claims processing. We expect the final contract to be signed on October 31, 2019 and services to go live 90-120 days later.
- Representatives from DBH and the Division of Health Care Services have met regularly to discuss MMIS updates, develop State Plan Amendment (SPA) changes, and other operational needs to support implementation of waiver services.
- The state has held a series of webinars, provider roundtables, and taskforce discussions to guide implementation of the SUD components of the waiver:
 - Continuum of Care/1115 Task Force. A task force comprised of providers, associations, and Tribes, was formed to provide advice to the state on behavioral health continuum of care issues and overall 1115 waiver goals, planning, and implementation.
 - Provider Roundtables. A series of provider roundtables were held to solicit feedback on the SUD Implementation Plan. Roundtables were small group discussions that allowed the state to ask questions and receive feedback from those who will be providing SUD waiver services.

- Provider Trainings. A combination of in-person meetings and webinars were held to provide information on provider enrollment and billing for new services.
- The state has also created a distribution list and an email account for stakeholder questions, comments, and suggestions.
- The state has begun drafting the evaluation design for the waiver. The state has
 been participating in a learning collaborative sponsored by the National
 Governors Association, who has provided technical assistance in conjunction
 with the University of Minnesota's State Health Access Data Assistance Center
 (SHADAC) to assist the state in developing driver diagrams, research questions,
 hypotheses, and the analytic methods that will be used to evaluate the waiver.

III. Performance Metrics

Narrative description on the information here regarding the impact of the demonstration in providing insurance coverage to beneficiaries and the uninsured population, as well as outcomes of care, quality and cost of care, and access to care.

No update at this time.

IV. Evaluation Activities

Narrative description of any results of the demonstration to date per the evaluation hypotheses. Additionally, the state shall include a summary of the progress of evaluation activities, including key milestones accomplished, as well as challenges encountered and how they were addressed.

See update regarding evaluation in Section II above.

V. SUD Health IT

Summarize of progress made regarding SUD Health IT.

No update at this time.

VI. Tribal Engagement and Collaboration Developments/Issues

A summary of the state's tribal engagement activities with respect to this demonstration.

During the time period covered by the Monitoring Report numerous significant developments related to Tribal Engagement and Collaboration should be noted.

- State of Alaska regularly participates in ATHS (Alaska Tribal Health System) meetings, including Alaska Native Health Board Mega Meetings and Tribal Behavioral Health Director Quarterly Meetings, and Quarterly Medicaid Tribal Taskforce meetings. The Mega meeting includes a subgroup, the State/Tribal Medicaid Task Force (MTF). Two (Medicaid Task Force) MTF meetings were attended during the reporting period of this Report: January 11, 2019 and May 3, 2019. In addition, one TBHD (Tribal Behavioral Health Director) meeting (March 4th, 2019) was attended during the report period for this report (January 1 to June 30th, 2019). These meetings related to Tribal Engagement and Collaboration are ongoing and routine.
- The State of Alaska often invites ATHS representatives to participate in workgroups and policy meetings.
- As part of the implementation of the Alaska 1115 Medicaid Demonstration Waiver for behavioral health and substance use treatment services, the Division of Behavioral Health (DBH) created a Continuum of Care Work group (also called the Waiver Advisory Group or WAG) inclusive of Tribal Health Organizations which meets periodically to share information and obtain feedback about the waiver.

- As part of the implementation of the Alaska 1115 Medicaid Demonstration Waiver for behavioral health and substance use treatment services, DBH hosted a number of "Roundtables" inclusive of Tribal Health Organizations to discuss aspects of the waiver and gain feedback from providers.
- As part of the implementation of the Alaska 1115 Medicaid Demonstration Waiver, during FY19, DBH contracted for a statewide gap or infrastructure analysis which provided an opportunity for DBH leadership and the contractor to meet with providers in regional hubs across Alaska including: Anchorage, Fairbanks, Utqiagvik Soldotna, Homer, Wasilla, Kotzebue, Nome, Bethel, Juneau, Sitka, Ketchikan, Kodiak, and Dillingham. This provided a robust opportunity for state staff to obtain feedback from tribal providers about the 1115 Waiver Demonstration Project as well as about on-going issues and concerns.
- As part of the implementation of the Alaska 1115 Medicaid Demonstration Waiver, DBH provided technical assistance opportunities for tribal providers and non-tribal providers to support enrollment and service implementation under the waiver.
- Dr. Cody Chipp, a psychologist, along with fellow team members from Alaska Native Tribal Health Consortium (ANTHC) provided insight and feedback to the state regarding 1115 SUD individual rendering provider qualifications for a Qualified Addiction Professional and Peer Support Specialist as it relates to Behavioral Health Associates (a tribal health professional group).

The state and the tribes continue to participate in tribal consultation. Alaska's tribal consultation agreement can be found at: http://dhss.alaska.gov/Commissioner/Pages/TribalHealth/Tribal-Health-Consultation.aspx

VII. Financial/Budget Neutrality Developments/Allotment Neutrality Developments/Issues Identify all significant developments/issues/problems with financial accounting, budget neutrality. Identify the State's actions to address these issues.

Significantly, the Alaska 1115 Medicaid Waiver was submitted 1/31/2018, and the Special Terms and Conditions (STC amendments) were approved on September 3rd, 2019. The approval period is from January 1, 2019 through December 31, 2023. Notably, the regulations went into effect for the 1115 SUD waiver on July 1, 2019, and given the timeframe of these milestones, no claims were processed during the reporting time period covered by this Monitoring Report. The State of Alaska continues to partner with a contract actuarial to ensure three drivers of cost savings (medical, care transitions and additional cost) assumed in the waiver application remain on target.

(NB: Additional costs are identified as: costs anticipated to increase from additional beneficiaries with a behavioral health diagnosis receiving preventive treatment and the addition of new services).

VIII. Enclosures/Attachments

Identify by title any attachments along with a brief description of the information contained in the document.

There are no attachments for this status update.

IX. State Contact(s)

Identify individuals by name, title, telephone, fax, and address so that CMS may contact individuals directly with any questions.

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X. Date Submitted to CMS

Enter the date submitted to CMS in the following format: (mm/dd/yyyy).

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