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State/Territory Name: Alaska

State Plan Amendment (SPA) #: 20-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 355
Kansas City, Missouri 64106-2898



Medicaid and CHIP Operations Group

April 13, 2020

Adam Crum, Commissioner
Department of Health and Social Services
3601 C Street, Suite 902
Anchorage, AK 99503-7167

RE: Alaska State Plan Amendment (SPA) Transmittal Number 20-0001

Dear Mr. Crum:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of Alaska's State Plan Amendment (SPA) Transmittal Number 20-0001. This SPA adds Licensed Marriage and Family Therapists, as Medicaid practitioners eligible to receive reimbursement.

This SPA was approved on April 13, 2020, with an effective date of March 1, 2020, as requested by the state.

If there are additional questions, please contact me or your staff may contact Maria Garza at maria.garza@cms.hhs.gov or at (206) 615-2542.

Sincerely,

4/13/2020

A solid black rectangular box redacting the signature of James G. Scott.

James G. Scott, Director
Division of Program Operations

Signed by: James G. Scott ->

cc:

Albert Wall, Deputy Commissioner, Medicaid & Health Care Policy

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 20-0001	2. STATE AK
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE March 1, 2020

5. TYPE OF PLAN MATERIAL (*Check One*):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 440.60(a); 42 CFR 447.201; 42 CFR 440.302	7. FEDERAL BUDGET IMPACT: a. FFY 20 \$ 36,576 b. FFY 21 \$ 146,304
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attached Sheet to Attachment 3.1-A, page 2 Attachment 4.19-B, page 1.2a	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): Attached Sheet to Attachment 3.1-A, page 2 Attachment 4.19-B, page 1.2a

10. SUBJECT OF AMENDMENT:
Addition of licensed marriage and family therapists to state plan - other licensed practitioner benefit.

11. GOVERNOR'S REVIEW (*Check One*):

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED does not wish to comment
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: Department of Health & Social Services 3601 C Street, suite 902 Anchorage, AK 99503
13. TYPED NAME: Albert E. Wall	
14. TITLE: Deputy Commissioner/Medicaid Director – Alaska DHSS	
15. DATE SUBMITTED: January 24, 2020	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: January 27, 2020	18. DATE APPROVED: 4/13/20
PLAN APPROVED – ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL: March 1, 2020	20. APPROVED BY:  ICIAL:
21. TYPED NAME: James G. Scott	22. TITLE: Director, Division of Program Operations

23. REMARKS:

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4. c. FAMILY PLANNING SERVICES: Fertility services not covered.
 5. a. PHYSICIAN SERVICES: Physicians services are provided in accordance with regulations at 42 CFR 440.50. A surgical procedure that could be considered experimental, investigative, or cosmetic is not covered, unless that procedure is medically necessary in the course of treatment for injury or illness and has been prior authorized by the medical review section of the division or its designee. A licensed physician provides services directly and supervises direct services provided by physician assistants, advanced nurse practitioners, certified registered nurse anesthetists, certified behavioral health aides I, II, and III, certified behavioral health practitioners, certified community health aides I, II, III, or IV, and certified community health practitioners.
 6. b. OPTOMETRIST SERVICES: Vision services are provided to recipients experiencing significant difficulties or complaints related to vision or if an attending ophthalmologist or optometrist finds health reasons for a vision examination. A second vision exam in a 12-month period must be prior authorized by the division or its designee.
 6. d.1 DIRECT ENTRY MIDWIFE SERVICES: Direct entry midwife services are those services for the management of prenatal, intrapartum and postpartum care that a direct entry midwife is authorized to provide under the scope of practice of her state license.
 6. d.2 TOBACCO CESSATION: Tobacco cessation is provided as face-to-face counseling by a qualified pharmacist to a recipient with a prescription for such service. All counseling encounters must follow general Medicaid documentation requirements for the service provided. Qualified pharmacists are those who have attended at least one continuing education course on Tobacco Cessation in accordance with federal public health guidelines found in the United States Department of Health and Human Services Public Health Services Quick Reference Guide for Clinicians: Treating Tobacco Use and Dependence. Such treatment may include discussing challenges to and strategies for success, behavior triggers, alcohol use, relapse and coordination with prescriber to ensure the correct therapy is employed.
 6. d.3 Qualified pharmacists providing administration of preventive vaccines, as authorized under "Other Licensed Practitioners" at 42 CFR 440.60, will be paid an administration fee for administering vaccines to recipients age 19 years old and above. Qualified pharmacists may administer all medically necessary vaccines, either by injection or intranasally, as authorized by the State within the scope of their practice.
 6. d.4 In accordance with § 42 CFR 440.60(a), the following licensed providers acting within their scope of practice as defined by state law: Licensed Psychologists, Licensed Clinical Social Workers, and Licensed Marriage and Family Therapists.
 7. a-d. HOME HEALTH SERVICES: Home health services are offered in accordance with 42 CFR 440.70. Home health services must be ordered by the attending physician and must be prior authorized by the State Medicaid Agency or its designee.
 - c. Equipment and appliances that require prior authorization by the State Medicaid Agency or its designee are listed in the provider manual.
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OTHER LICENSED PRACTITIONERS

Licensed Psychologists

The state Medicaid program reimburses for services provided by a licensed psychologist operating within their scope of practice.

All covered services are paid at the lesser of the provider's billed charges or the state maximum allowable for the procedures. State developed fee schedule rates are the same for both governmental and private providers of services.

The fee schedule and its effective date are published at <http://dhss.alaska.gov/dbh/Pages/Resources/Medicaidrelated.aspx> .

Licensed Clinical Social Workers

The state Medicaid program reimburses for services provided by a licensed clinical social worker operating within their scope of practice.

All covered services are paid at the lesser of the provider's billed charges or the state maximum allowable for the procedures. State developed fee schedule rates are the same for both governmental and private providers of services.

The fee schedule and its effective date are published at <http://dhss.alaska.gov/dbh/Pages/Resources/Medicaidrelated.aspx> .

Licensed Marriage and Family Therapists

The state Medicaid program reimburses for services provided by a licensed marriage and family therapist operating within their scope of practice.

All covered services are paid at the lesser of the provider's billed charges or the state maximum allowable for the procedures. State developed fee schedule rates are the same for both governmental and private providers of services.

The fee schedule and its effective date are published at <http://dhss.alaska.gov/dbh/Pages/Resources/Medicaidrelated.aspx> .