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State/Territory Name: Alaska

State Plan Amendment (SPA) #: 21-0005

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
September 20, 2021

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 21-0005

Dear Mr. Crum:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 21-0005. This amendment proposes to add licensed professional counselors to the Alaska Medicaid State Plan under the other licensed practitioner benefit.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR § 435.733. This letter is to inform you that Alaska Medicaid SPA 21-0005 was approved on September 20, 2021, with an effective date of June 30, 2021.

If you have any questions, please contact Maria Garza at 206-615-2542 or via email at maria.garza@cms.hhs.gov.

Sincerely,

James G. Scott, Director
Division of Program Operations

cc: Al Wall, Deputy Commissioner, a.wall@alaska.gov
Courtney King, SPA Coordinator, courtney.king@alaska.gov
TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL

FOR: HEALTH CARE FINANCING ADMINISTRATION

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

1. TRANSMITTAL NUMBER: 21-0005
2. STATE AK
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)
4. PROPOSED EFFECTIVE DATE June 30, 2021

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

7. FEDERAL BUDGET IMPACT:
a. FFY 21 $149,328
   b. FFY 22 $597,312

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):
   Attached Sheet to Attachment 3.1-A, page 2
   Attachment 4.19-B, page 1.2a

10. SUBJECT OF AMENDMENT:
This amendment adds Licensed Professional Counselors under the Other Licensed Practitioner benefit.

11. GOVERNOR’S REVIEW (Check One):
   - GOVERNOR’S OFFICE REPORTED NO COMMENT
   - COMMENTS OF GOVERNOR’S OFFICE ENCLOSED
   - NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
   - OTHER, AS SPECIFIED: Does not wish to comment

12. SIGNATURE OF STATE AGENCY OFFICIAL:
   /s/ Albert E. Wall

13. TYPED NAME: Deputy Commissioner of AK DHSS – Medicaid Director

14. TITLE: Deputy Commissioner of AK DHSS – Medicaid Director

15. DATE SUBMITTED: May 20, 2021

16. RETURN TO:
Courtney O’Byrne King
DHSS - Office of the Commissioner
3601 C Street, Suite 902
Anchorage, AK 99503

17. DATE RECEIVED: May 20, 2021
18. DATE APPROVED: September 20, 2021

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: June 30, 2021
20. SIGNATURE OF REGIONAL OFFICIAL: Digitally signed by James G. Scott -S
Date: 2021.09.20 13:15:42 -05'00'

21. TYPED NAME: James G. Scott
22. TITLE: Director, Division of Program Operations

23. REMARKS:
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 In accordance with 42 CFR § 440.60, licensed and qualified pharmacists acting within their scope of practice as defined in state law. Pharmacists, pharmacy interns, and pharmacy technicians are qualified providers of COVID-19 vaccinations per the HHS COVID-19 PRP Act Declaration and authorizations. Qualified pharmacy interns and qualified pharmacy technicians are working under the supervision of a licensed pharmacist.**

6. **d.3 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, Licensed Marriage and Family Therapists, and Licensed Professional Counselors.**

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, nurse practitioner, or physician assistant, 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.
OTHER LICENSED PRACTITIONERS

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.

Licensed Professional Counselors
The state Medicaid program reimburses for services provided by a licensed professional counselor 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 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.