

## **Table of Contents**

**State/Territory Name: Alabama**

**State Plan Amendment (SPA) #: AL-19-0012**

This file contains the following documents in the order listed:

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



## Division of Medicaid and Children's Health Operations

September 25, 2019

Stephanie Azar  
Commissioner  
Alabama Medicaid Agency  
501 Dexter Avenue  
Montgomery, AL 36104

Re: Approval of State Plan Amendment AL-19-0012 MIGRATED\_HH.AL HHS

Dear Stephanie Azar:

On August 30, 2019, the Centers for Medicare and Medicaid Services (CMS) received Alabama State Plan Amendment (SPA) AL-19-0012 for MIGRATED\_HH.AL HHS to terminate services offered in AL SPA 14-0001 Health Homes..

We approve Alabama State Plan Amendment (SPA) AL-19-0012 on September 25, 2019 with an effective date(s) of September 30, 2019.

Based on the information provided, we have approved Medicaid State Plan Amendment AL 19-0012 on September X, 2019. The effective date of this amendment is September 30, 2019.

Should you have questions or need further assistance, please contact Alice Hogan of my staff, at (404) 562-7432.

Name	Date Created	
<a href="#">AL 19-0012 Draft Approval Letter</a>	9/24/2019 3:00 PM EDT	

If you have any questions regarding this amendment, please contact Alice Hogan at 4103000686 or [alice.hogan@cms.hhs.gov](mailto:alice.hogan@cms.hhs.gov).

Sincerely,  
Davida R. Kimble  
Acting Deputy Director  
Division of Medicaid and Children's  
Health Operations

## Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

### Package Header

<b>Package ID</b>	AL2019MS0001O	<b>SPA ID</b>	AL-19-0012
<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	8/30/2019
<b>Approval Date</b>	9/25/2019	<b>Effective Date</b>	N/A
<b>Superseded SPA ID</b>	N/A		

### State Information

**State/Territory Name:** Alabama

**Medicaid Agency Name:** Alabama Medicaid Agency

### Submission Component

- State Plan Amendment
- Medicaid
- CHIP

## Submission - Summary

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### SPA ID and Effective Date

**SPA ID** AL-19-0012

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Program Termination - Phase-Out Plan	9/30/2019	AL-14-001

**Page Number of the Superseded Plan Section or Attachment (If Applicable):**

## Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

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### Executive Summary

**Summary Description Including Goals and Objectives** Alabama Medicaid will end the Health Home program on September 30, 2019 and will implement the Alabama Coordinated Health Network (ACHN) Program beginning October 1, 2019 based on the authority of the recently approved 1915 (b) waiver AL-09. The ACHN will provide a single care coordination delivery system that effectively links patients, providers, and community resources in seven defined regions of the state.

### Federal Budget Impact and Statute/Regulation Citation

#### Federal Budget Impact

	Federal Fiscal Year	Amount
First	2020	\$0
Second	2021	\$0

#### Federal Statute / Regulation Citation

ACA Section 2703 (1945 of the Social Security Act)

**Supporting documentation of budget impact is uploaded (optional).**

Name	Date Created	
No items available		

## Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

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### Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

# Submission - Public Comment

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

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<b>Superseded SPA ID</b>	N/A		

Indicate whether public comment was solicited with respect to this submission.

- Public notice was not federally required and comment was not solicited
- Public notice was not federally required, but comment was solicited
- Public notice was federally required and comment was solicited

# Submission - Tribal Input

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

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<b>Superseded SPA ID</b>	N/A		

### Name of Health Homes Program:

MIGRATED\_HH.AL HHS

**One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this state**

- Yes  
 No

**This state plan amendment is likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan.**

- Yes  
 No

**Explain why this SPA is not likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations:** While these programs will end, the ACHN will provide a single care coordination delivery system that will effectively link patients, providers, and community resources in 7 defined regions of the state.

# Submission - Other Comment

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

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## SAMHSA Consultation

### Name of Health Homes Program

MIGRATED\_HH.AL HHS

- The State provides assurance that it has consulted and coordinated with the Substance Abuse and Mental Health Services Administration (SAMHSA) in addressing issues regarding the prevention and treatment of mental illness and substance abuse among eligible individuals with chronic conditions.

Date of consultation
8/6/2019



# Health Homes Program Termination - Phase-Out Plan

MEDICAID | Medicaid State Plan | Health Homes | AL2019MS0001O | AL-19-0012 | MIGRATED\_HH.AL HHS

CMS-10434 OMB 0938-1188

## Package Header

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<b>Approval Date</b>	9/25/2019	<b>Effective Date</b>	9/30/2019
<b>Superseded SPA ID</b>	AL-14-001		
	User-Entered		

## Provide a description of the phase-out or transition plan for the Health Homes Program that is being terminated

### Describe the reason for termination

Alabama Medicaid will end the Health Home program on September 30, 2019 and will implement the Alabama Coordinated Health Network (ACHN) Program beginning October 1, 2019 based on the authority of the recently approved 1915 (b) waiver AL-09

### Describe the overall approach the state will use to terminating the program

The Health Home population will continue to receive care coordination services by nurses and social workers through the ACHN program.

### Indicate method of termination

### Termination effective date

- The state will terminate all participants from the Health Homes Program on the same date 9/30/2019
- The state will phase-out the termination of participation in the Health Homes Program

### Describe the process the state will use to transition all participants and how referrals will be made to other health care providers

The ACHN will provide a single care coordination delivery system that effectively links patients, providers, and community resources in seven defined regions of the state.

The Health Home population will continue to receive care coordination services by nurses and social workers through the ACHN program. With the implementation of the ACHN, Primary Care Physician's (PCPs) will continue to provide a medical home and the focus will be on activity and quality. PCPs that engage with the ACHN will qualify for bonus payments related to quality, cost effectiveness and Patient Centered Medical Home recognition. PCPs that engage with the ACHN, will also receive a higher payment for certain Evaluation and Management codes. Medicaid is hopeful these changes will produce a more quality driven program.

Care coordination services will be provided for the recipients that were previously in the Health Home Program by the ACHN Program beginning November 1, 2019. Before then, recipients can contact the ACHN recipient number for assistance. If you have any questions about this notification of termination, please contact Jerri Jackson at 334-242-5630 or via e-mail at jerri.jackson@medicaid.alabama.gov.

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

*This view was generated on 9/25/2019 11:03 AM EDT*