

Division of Behavioral Health



Information Resources for Recipients

Recipient/Client Rights

Recipient/Client Eligibility

Alaska Medical Assistance Program

Recipient Resources

- PUBLICATIONS: Benefit Booklet that outlines conditions for coverage of all categories of service within the program

www.hss.state.ak.us/dhcs/PDF/MedicaidRecipientHandbook.pdf

- TELEPHONE: Call Center – Recipient Helpline
 - In Anchorage: 907-644-6800; option 6
 - Toll, free in Alaska: 800-780-9972
 - Coverage and benefit questions
 - Billing inquiries
 - Travel and accommodation procedures
 - Fair Hearing support (if recipient disagrees with action taken by DHSS to deny, stop, suspend, or reduce eligibility or covered services)

Behavioral Health Services

Recipient/Client Rights

Any Client Has the Right to any or all of the following:

- Develop and review their treatment plan
- Request a specific form of treatment (including drugs)
- Refuse a specific treatment (including drugs)
- Be informed of their treatment progress
- Review and read record with staff
- Be informed of the name, purpose and side effects of medications
- Provided with a written summary of treatment including discharge & transitional plans (if requested)
- Confidentiality

The Term “Eligibility” Explored

- 1) Finance and Billing folks primarily think of the term “Eligibility” as it refers to whether a client has been approved through the Division of Public Assistance as **“Eligible for Medical Assistance”** and whether other health care coverage exists – their goal is securing reimbursement for services by patient’s health plan/s
 - Medical Assistance – Medicaid, Denali KidCare, CAMA
 - Other Health Insurance Coverage (Third Party Liability-TPL)
- 2) Clinicians usually think of the term “Eligibility” as it refers to whether a client meets Medical Assistance program requirements as **“Eligible for Rehabilitation Services”** – their goal is ensuring treatment needs are met
 - A child or adult experiencing a maladaptive pattern of substance use
 - A child experiencing a severe emotional disturbance
 - An adult experiencing a serious mental illness

Medical Assistance Programs

- Medical Assistance Programs are administered by each state
 - In Alaska, the program is administered by the Department of Health & Social Services (DHSS)
 - Payments are made directly by the State of Alaska to the health care provider/s furnishing the services
- In general, payment for services is jointly financed by federal and state funds (Medicaid and Denali KidCare)
- The Chronic & Acute Medical Assistance (CAMA) program is funded exclusively with state funds

Medical Assistance Eligibility Medicaid and Denali KidCare

- Before Medical Assistance program dollars can pay for Behavioral Health Services, the individual patient must be eligible for Medicaid or Denali KidCare.
- There are various paths to eligibility and the Division of Public Assistance is responsible for determining eligibility for all categories (except for children who are in State Custody)
- The provider should request to see proof of eligibility at the time of service by viewing the recipient's coupon or card issued by Division of Public Assistance (Medicaid coupon, Denali KidCare Card)

Medical Assistance Eligibility

Chronic & Acute Medical Assistance - CAMA

- CAMA **IS NOT** Medicaid
- CAMA is:
 - 100% state fund Medical Assistance for a limited number of health conditions, and
 - Has very limited coverage
- Recipients with CAMA Eligibility have **no coverage for Community Behavioral Health services**
- CAMA coverage also limits the number of medications a recipient can receive in a month

Coverage by Other Health Plans

- If the recipient is covered (is eligible) for benefits by another public or private health plan, that plan must be billed before billing Medical Assistance
 - Medicare recipients have “Dual Eligibility” under both programs (i.e. disabled adults and adults over age 65 may be eligible under both Medicare and Medicaid)
 - Military and Veteran’s Benefits
 - Private Health Insurance
- The recipient’s card/coupon will include Resource Code and/or Carrier Code to designate the other health plan coverage

Service Categories

Screening, Clinic, Rehabilitation Services

SCREENING

- Behavioral Health Screening (Alaska Screening Tool)
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)

CLINIC

- Professional Behavioral Health Assessments
 - Integrated Assessment
 - Mental Health Assessment
 - Psychiatric Assessment
- Psychological Testing & Evaluation
- Pharmacologic Management
- Psychotherapy Services (individual, group, family, multi-family group)
- Short-term Crisis Intervention
- Facilitation of Telemedicine

REHABILITATION

- Client Status Review (CSR)
- Substance Use Assessment
- Short-term Crisis Stabilization
- Case Management
- Medication Administration
- Therapeutic Behavioral Health Services for Children
- Comprehensive Community Support Services for Adults
- Peer Support Services
- Recipient Support Services
- Residential Substance Use Disorder Treatment Services
- Detoxification Services
- Day Treatment Services (School-based)
- Facilitation of Telemedicine

Eligibility for Services by Service Category

- All recipients are “eligible” to receive services in the “Screening” category
- Eligibility for “Rehabilitation” Services is determined through the outcome of the agency’s screening and assessment efforts
- Recipients who are identified as one of the following are “eligible” to receive services in BOTH “Rehabilitation” as well as “Clinic” service categories:
 - a child with a severe emotional disturbance
 - an adult with an serious mental illness
 - a child or adult with a maladaptive pattern of substance abuse
 - a child or adult experiencing a behavioral health crisis
- Recipients who are NOT identified as experiencing any of the above circumstances, but who may none-the-less have an emotional disturbance, are “eligible” for services in the “clinic” service category only.

Who is eligible for behavioral health services?

CLINIC Services

- An individual who is experiencing a short term crisis
- An individual with a maladaptive pattern of substance use
- A child experiencing an emotional disturbance
- A child experiencing a severe emotional disturbance
- An adult experiencing an emotional disturbance
- An adult experiencing serious mental illness

REHABILITATION Services

- An individual who is experiencing a short term crisis
- An individual with a maladaptive pattern of substance use
- A child experiencing a severe emotional disturbance
- An adult experiencing a serious mental illness

Other Eligibility Considerations

Community Behavioral Health Services providers

- are the only Medical Assistance provider type approved to provide behavioral health “rehabilitation” services
- receive public grant funds to serve the following target population who are in need of “rehabilitation services” as a priority
 - a child with a severe emotional disturbance
 - an adult with an serious mental illness
 - a child or adult with a maladaptive pattern of substance abuse
 - a child or adult experiencing a behavioral health crisis
- may provide services in the “clinic” service category to recipients who are NOT identified as experiencing any of the above circumstances, but who experience an emotional disturbance (ED), HOWEVER, these recipients are NOT the target population according to grant requirements or Chapter 71, and therefore do NOT have priority over the above target population clients
 - An option available to a Community Behavioral Health Services provider agency that is unable to accommodate the treatment of recipients experiencing emotional disturbances (due to the mandate to provide rehabilitation services to their target population) , is to refer recipients with an emotional disturbance to a Mental Health Physician Clinic, a Physician, or an Advanced Nurse Practitioner for their needed clinic services.