

State of Alaska
FY2021 Governor's Operating Budget

Department of Health and Social Services
Medicaid Services
Component Budget Summary

Component: Medicaid Services

Contribution to Department's Mission

Medicaid is a jointly funded (federal and state) program that provides coverage for the cost of medically necessary health care services for Alaska's low-income children, pregnant women, families, disabled individuals, adults without dependents, and elderly. The program is managed through a contractual relationship with the U.S. Centers for Medicare and Medicaid Services (CMS), articulated in a series of documents, which comprise the State Plan.

The Medicaid program contributes to the department's mission through three distinct service venues:

Provision of adequate and basic health care services to eligible persons.

Access to integrated behavioral health services for individuals experiencing a behavioral health disorder; a serious mental illness and/or a substance use disorder; or at risk of a diagnosis for any of the three.

Facilitate access for individuals with disabilities; seniors; and vulnerable adults ensuring their safety while promoting independence, personal choice, and dignity.

Medicaid services are under the programmatic oversight of three operating divisions within the Department of Health and Social Services - the Divisions of Health Care Services; Behavioral Health Services; and Senior and Disabilities Services.

Core Services

- • Direct Services provided to the client and processed through the Medicaid Management Information System and Administrative Service Organization.
- • Direct Health Care Services include these service categories: inpatient and outpatient hospital, physician, health clinic, surgical clinic, prescribed drugs, durable medical equipment, prosthetic devices, dental, transportation, physical therapy, and occupational therapy.
- • Indirect services include payments for insurance premiums (primarily Medicare), contracts for Medicaid operations and cost containment activities, third-party liability services, subrogation, estate recovery, and supplemental payments to hospitals for uninsured and uncompensated care (Disproportionate Share Hospital program or DSH).
- • Behavioral Health Clinic Services are provided to children and adults who have been identified through an assessment as experiencing an emotional disturbance. Services include the following: crisis intervention; family, individual, or group psychotherapy; intake and psychiatric assessment; psychological testing; and medication management. Clinic services are provided by state-approved outpatient community mental health clinics and mental health physician clinics.
- • Rehabilitation Services are provided to children and adults identified through an assessment as experiencing a severe emotional disturbance, a serious mental illness, or a substance use disorder. Services include assessments, therapeutic behavioral services, comprehensive community support, peer support, recipient support services, medication management, day treatment, case management, structured residential programs, and medical services directly related to substance use and detoxification.
- • Psychological services are limited to medically necessary psychological testing to determine the status of a recipient's mental, intellectual, and emotional functioning. Services require a referral and must include administration of psycho-diagnostic tests, the interpretation of results, and a written report.
- • Inpatient Psychiatric Facility Services are provided to children under 21 years of age who are experiencing a severe emotional disturbance with a documented need for inpatient psychiatric hospital or residential psychiatric treatment center services. Services must be based on certification of an interdisciplinary team that the treatment needs of the patient cannot be met in a community setting; clinical information that includes diagnostic evaluation and a psychiatric evaluation; and approval.
- • Direct client services associated with five 1915 (c) Medicaid Home and Community Based Waivers: Intellectual & Developmental Disabilities (IDD); Alaskans Living Independently (ALI); Adults with Physical and Developmental Disability (APDD); Children with Complex Medical Conditions (CCMC); Individualize Supports

Waiver (ISW)

- • Direct client services associated with the 1915 (k) Home & Community Based Services State Plan: Community First Choice
- • Other direct client senior and disabilities services include Personal Care Services, Intermediate Care Facilities for Individuals with Intellectual and Developmental Disabilities and Nursing Homes.

Major Component Accomplishments in 2019

- The Centers for Medicare and Medicaid Services approved Alaska's section 1115 demonstration project titled Substance Use Disorder Treatment and Alaska Behavioral Health Program authorizing the state to implement additional services to enhance the comprehensive services available under the behavioral health system for children, youth, and adults with, or at risk of, serious mental illness, severe emotional disturbance, and/or substance use disorders.
- Implementation of the Alaska Emergency Medical Transportation program that allows the state to pass-through additional federal reimbursement to municipalities and/or tribes which increase community self-sufficiency.
- Total FY2019 general fund expenditures excluding the FY2018 claims pushed forward for payment in FY2019 were \$623,569,349 or a decrease of 7.3 percent from FY2018.
- Unduplicated Medicaid recipients or the enrollees who actually received a Medicaid service during some point in FY2019 increased only 1.1 percent since FY2018.
- Implementation of the Community First Choice 1915 (k) state plan option increased the federal participation by an additional 6 percent for services provided during the fiscal year.
- Implementation of the Individualized Supports Waiver to replace the community and developmental disabilities 100 percent general fund grant.
- Increased Tribal reclaiming by adding pharmacy and home and community based waiver service provider care coordination.
- Successful implementation of regular and emergency regulation packages and state plan amendments.
- Timely certification and submittal of the state's Medicaid and Children's Health Insurance Program (CHIP) Expenditure and Budget quarterly reports and claims totaling \$2.3 billion annually.
- Processing and issuing an average of \$42 million per week in claims and related transactions.

Key Component Challenges

- The Children's Health Insurance Program (CHIP) enhanced federal medical assistance percentage of 88 percent decreased by 11.5 percent to 76.5 percent in federal fiscal year 2020 and will decrease another 11.5 percent by federal fiscal year 2021.
- Essential adult benefits may not be optional but mandatory due to the choice made by the state regarding using the Medicaid state plan benefits as the alternate benefit plan to avoid cost and complications of multiple plans in the MMIS.
- The opioid crisis continues to strain limited state resources for substance dependence services and chronic pain management.
- Developing and implementing cost saving program updates within compliance of a complex federal and state regulatory environment.
- The transition to the 1115 Behavioral Health Medicaid Demonstration Waiver require considerable agency resources to ensure a fully compliant program, in addition to continuing ongoing operations require that also considerable departmental resources.
- The Division of Health Care Systems Unit continue to be challenged to address multiple large implementation projects, concurrently, to comply with changing department policies and regulations, and state and federal legislation. Many cost containment and Medicaid Reform initiatives are under policy development throughout the department, and nearly each of these initiatives has Systems implications that must be evaluated and scheduled. With a small staff of subject matter experts, this becomes a resourcing challenge.
- Health Care Services Operations Unit is challenged to oversee Medicaid Management Information System (MMIS) claims processing millions of claims annually, submitted by thousands of enrolled providers; research and manual resolution of over a thousand pended claims monthly; provide regulatory oversight and management of more than 30 provider types and services; adjudicate 2nd level appeals for more than 50 enrolled provider types; provide regulatory oversight and management of the operations, publications, and training components of the fiscal agent contract; provide regulatory oversight and management of the

utilization management and case management contracts; provide regulatory oversight and management of the vision services contract; promulgate regulations for more than 40 provider types; and comply with state and federal annual, monthly, and ad hoc reporting requirements.

- Maintain compliance with federal and state requirements to manage the Medicaid waiver programs and meet documentation and timeline requirements. This includes initial assessments, reassessments, level of care determinations, and completed plans of care that must be mailed to each participant.
- Behavioral Health Services has significantly reorganized its staffing sections in order to begin to respond to the impact of the various initiatives approved in SB74 (2016) that impact the Division, working to better position the Division and its staff for the advent of the many changes coming its way. In November 2019, the Division executed a contract with Optum, an Administrative Services Organization. The purpose of an Administrative Services Organization is to work with the Division in implementing and managing 1115 Behavioral Health Medicaid Waiver and Behavioral Health Medicaid services. Contracting with Optum will allow the Division to improve coordination around Medicaid services through supporting providers, managing costs, and achieving efficiencies in the delivery of behavioral health services.

Significant Changes in Results to be Delivered in FY2021

- Implementation of the 1115 demonstration project titled Substance Use Disorder Treatment and Alaska Behavioral Health Program and the utilization of an Administrative Services Organization to increase access to healthcare.
- Continued development of cost containment initiatives including partnering with the National Association of Medicaid Directors to gain an understanding of what is available and “lessons learned” from sister states.
- Development and Implementation of Electronic Visit Verification System for Personal Care Services and Home Health, as required by the 21st Century Cures Act.
- The rate reductions implemented in FY2020 are set to expire in FY2021.
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Statutory and Regulatory Authority

Administrative Code:

7 AAC 43 Medicaid
7 AAC 48 Chronic and Acute Medical Assistance
7 AAC 100 Medicaid Eligibility
7 AAC 105 Medicaid Provider and Recipient Participation
7 AAC 160 Medicaid Program; General Provisions

Alaska Statutes:

AS 36 Public Contracts
AS 37 Public Finance
AS 47.07 Medical Assistance for Needy Persons
AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions
AS 47.25 Public Assistance

Code of Federal Regulations:

2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
42 CFR Chapter IV Centers for Medicare & Medicaid Services, DHHS (continued)
45 CFR Part 95 General Administration-Grant Programs (Public Assistance, Medical Assistance and State Children’s Health Insurance Programs)

Social Security Act:

Title XIX Medicaid
Title XVIII Medicare
Title XXI Children’s Health Insurance Program

Contact Information
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Component Detail All Funds
Department of Health and Social Services

Component: Medicaid Services (3234)
RDU: Medicaid Services (595)

Formula Component

	FY2019 Actuals	FY2020 Conference Committee	FY2020 Authorized	FY2020 Management Plan	FY2021 Governor	FY2020 Management Plan vs FY2021 Governor	
71000 Personal Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
72000 Travel	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
73000 Services	0.0	44,584.2	44,584.2	48,584.2	48,284.2	-300.0	-0.6%
74000 Commodities	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
75000 Capital Outlay	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
77000 Grants, Benefits	0.0	2,111,352.0	2,063,586.5	2,059,586.5	2,338,818.2	279,231.7	13.6%
78000 Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
Totals	0.0	2,155,936.2	2,108,170.7	2,108,170.7	2,387,102.4	278,931.7	13.2%
Fund Sources:							
1002 Fed Rcpts (Fed)	0.0	1,575,591.9	1,577,826.4	1,577,826.4	1,729,455.3	151,628.9	9.6%
1003 G/F Match (UGF)	0.0	446,239.9	396,239.9	396,239.9	515,939.9	119,700.0	30.2%
1004 Gen Fund (UGF)	0.0	38,310.0	38,310.0	38,310.0	38,310.0	0.0	0.0%
1005 GF/Prgm (DGF)	0.0	210.0	210.0	210.0	210.0	0.0	0.0%
1007 I/A Rcpts (Other)	0.0	5,218.8	5,218.8	5,218.8	5,218.8	0.0	0.0%
1037 GF/MH (UGF)	0.0	81,780.8	81,780.8	81,780.8	81,780.8	0.0	0.0%
1092 MHTAAR (Other)	0.0	3,125.0	3,125.0	3,125.0	0.0	-3,125.0	-100.0%
1108 Stat Desig (Other)	0.0	4,767.5	4,767.5	4,767.5	15,495.3	10,727.8	225.0%
1168 Tob Ed/Ces (DGF)	0.0	97.5	97.5	97.5	97.5	0.0	0.0%
1246 Recid Redu (DGF)	0.0	375.0	375.0	375.0	375.0	0.0	0.0%
1247 Med Recov (DGF)	0.0	219.8	219.8	219.8	219.8	0.0	0.0%
Unrestricted General (UGF)	0.0	566,330.7	516,330.7	516,330.7	636,030.7	119,700.0	23.2%
Designated General (DGF)	0.0	902.3	902.3	902.3	902.3	0.0	0.0%
Other Funds	0.0	13,111.3	13,111.3	13,111.3	20,714.1	7,602.8	58.0%
Federal Funds	0.0	1,575,591.9	1,577,826.4	1,577,826.4	1,729,455.3	151,628.9	9.6%
Positions:							
Permanent Full Time	0	0	0	0	0	0	0.0%
Permanent Part Time	0	0	0	0	0	0	0.0%
Non Permanent	0	0	0	0	0	0	0.0%

Change Record Detail - Multiple Scenarios with Descriptions
Department of Health and Social Services

Component: Medicaid Services (3234)
RDU: Medicaid Services (595)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2020 Conference Committee To FY2020 Authorized *****												
FY2020 Conference Committee												
	ConfCom	2,155,936.2	0.0	0.0	44,584.2	0.0	0.0	2,111,352.0	0.0	0	0	0
1002 Fed Rcpts		1,575,591.9										
1003 G/F Match		446,239.9										
1004 Gen Fund		38,310.0										
1005 GF/Prgm		210.0										
1007 I/A Rcpts		5,218.8										
1037 GF/MH		81,780.8										
1092 MHTAAR		3,125.0										
1108 Stat Desig		4,767.5										
1168 Tob Ed/Ces		97.5										
1246 Recid Redu		375.0										
1247 Med Recov		219.8										
Medicaid Hospital-based Mental Health Care Sec13(b) Ch17 SLA2018 P74 L10 (HB286) (FY19-FY20)												
	CarryFwd	2,234.5	0.0	0.0	0.0	0.0	0.0	2,234.5	0.0	0	0	0
1002 Fed Rcpts		2,234.5										
Carry forward the unexpended balance of the appropriation made in Sec13(b) Ch17 SLA2018 P74 L5 (HB286) for Medicaid hospital-based mental health care.												
Sec. 13. DEPARTMENT OF HEALTH AND SOCIAL SERVICES. (b) The sum of \$7,000,000 is appropriated from federal receipts to the Department of Health and Social Services, Medicaid services, health care Medicaid services, for hospital-based mental health care, for the fiscal years ending June 30, 2019, and June 30, 2020.												
Original Appropriation: \$ 7,000.0												
FY2019 Expenditures: \$ 4,765.5												
FY2020 Carryforward: \$ 2,234.5												
Implement Medicaid Services Cost Containment Measures and Reform Initiatives												
	Veto	-50,000.0	0.0	0.0	0.0	0.0	0.0	-50,000.0	0.0	0	0	0
1003 G/F Match		-50,000.0										
The Department of Health and Social Services is working with nationally renowned consultants and the federal government to reform Alaska's Medicaid program. These programs grew when the fiscal picture allowed for growth. The current fiscal reality compels us to reduce the budget and work with federal counterparts to identify innovative reform options.												
The State's fiscal reality dictates a reduction in expenditures across all agencies.												
Reverse Implementation of Medicaid Services Cost Containment Measures and Reform Initiatives												
	Inc	50,000.0	0.0	0.0	0.0	0.0	0.0	50,000.0	0.0	0	0	0
1003 G/F Match		50,000.0										

Change Record Detail - Multiple Scenarios with Descriptions
Department of Health and Social Services

Component: Medicaid Services (3234)
RDU: Medicaid Services (595)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Legislative add-back appropriation made in Chapter 2, SSSLA2019, of HB2001.												
Implement Medicaid Services Cost Containment Measures and Reform Initiatives												
	Veto	-50,000.0	0.0	0.0	0.0	0.0	0.0	-50,000.0	0.0	0	0	0
1003 G/F Match		-50,000.0										
The Department of Health and Social Services is working with nationally renowned consultants and the federal government to reform Alaska's Medicaid program. These programs grew when the fiscal picture allowed for growth. The current fiscal reality compels us to reduce the budget and work with federal counterparts to identify innovative reform options.												
The State's fiscal reality dictates a reduction in expenditures across all agencies.												
Subtotal		2,108,170.7	0.0	0.0	44,584.2	0.0	0.0	2,063,586.5	0.0	0	0	0
***** Changes From FY2020 Authorized To FY2020 Management Plan *****												
Align Authority with Anticipated Expenditures												
	LIT	0.0	0.0	0.0	4,000.0	0.0	0.0	-4,000.0	0.0	0	0	0
Transfer authority from grants to cover anticipated services costs. The remaining grants authority is sufficient to cover anticipated expenditures.												
Subtotal		2,108,170.7	0.0	0.0	48,584.2	0.0	0.0	2,059,586.5	0.0	0	0	0
***** Changes From FY2020 Management Plan To FY2021 Governor *****												
Reverse Mental Health Trust Recommendation												
	OTI	-3,125.0	0.0	0.0	-3,125.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		-3,125.0										
Reverse Mental Health Trust recommendation to reflect zero-based mental health budget.												
Reverse Medicaid Funding Sec13b Ch17 SLA2018 P74 L10 (HB286) (FY19-FY20)												
	OTI	-2,234.5	0.0	0.0	0.0	0.0	0.0	-2,234.5	0.0	0	0	0
1002 Fed Rcpts		-2,234.5										

The sum of \$7,000,000 is appropriated from federal receipts to the Department of Health and Social Services, Medicaid services, health care Medicaid services, for hospital-based mental health care, for the fiscal years ending June 30, 2019, and June 30, 2020.

Original Appropriation: \$ 7,000.0
FY2019 Expenditures: \$ 4,765.5
FY2019 Encumbered: \$ 0.0
FY2020 Carryforward: \$ 2,234.5

Change Record Detail - Multiple Scenarios with Descriptions
Department of Health and Social Services

Component: Medicaid Services (3234)

RDU: Medicaid Services (595)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Second Year Cost Savings from Telehealth: Physician Assistants; Drugs (Ch18 SLA2019 (SB44))												
	FNOTI	-1,000.0	0.0	0.0	0.0	0.0	0.0	-1,000.0	0.0	0	0	0
1002 Fed Rcpts		-700.0										
1003 G/F Match		-300.0										

Senate Bill 44, through the changes to AS 47.05.012 and AS 47.07.065, will provide authority for the Department of Health and Social Services (DHSS) to more frequently update the Alaska Medicaid Preferred Drug List (PDL) and Prior Authorization (PA) Medications List. The department uses the Preferred Drug List (PDL) to assist in the guidance of prescribing clinically beneficial medications for specific drug classes to promote positive health outcomes and cost savings. The department uses the PA Medications List to ensure clinically appropriate use at the individual level.

The department relies on advisory committees (the Alaska Medicaid Drug Utilization Review Committee and the Alaska Medicaid Pharmacy & Therapeutics Committee) to guide decisions by the department in the selection of drugs for the PDL and PA Medications list. The committees meet on a state fiscal year cycle in September, November, January, and April and are publicly noticed and open to the public.

Add Authority for Emer. Medical Transport Service Payments (Ch34 SLA2018 (HB176))

	Inc	21,891.2	0.0	0.0	109.0	0.0	0.0	21,782.2	0.0	0	0	0
1002 Fed Rcpts		11,163.4										
1108 Stat Desig		10,727.8										

Add authority for Emer. Medical Transport Service Payments (Ch34 SLA2018 (HB176)). HB176 directs the department to develop a program to provide supplemental reimbursement to eligible ground/air/water emergency medical transportation service providers for the cost of providing services to medical assistance recipients. The amount of the supplemental reimbursement must be equal to the amount of the federal financial participation that the department receives as reimbursement for the provider's cost for the emergency medical transportation services, less any administrative expenses. The bill stipulates that the amount a provider receives in supplemental reimbursements under the program, when combined with the amount the provider receives from all other sources, including medical assistance reimbursement under the state plan, may not exceed the provider's actual cost for providing emergency medical transportation services to medical assistance recipients.

HB176 allows the department to charge an administrative fee to a provider who participates in the program to cover the department's costs for administering the program. This fee is capped at 20 percent of a provider's costs for providing emergency medical transportation services. The department will charge an administrative fee to pay for one full-time Medical Assistance Administrator II position. Fees to support this program will be collected in the Health Care Medicaid Services component, and funds to support this position will be transferred from the Health Care Medicaid Services component to the Medical Assistance Administration component via a reimbursable services agreement. Fees to support this supplemental payment program will be collected from service providers under statutory designated program receipt authority, since those collections may be used for the single purpose of this supplemental payment program for eligible emergency medical ground transportation claims.

Add Authority for Medicaid Services

	Inc	263,400.0	0.0	0.0	0.0	0.0	0.0	263,400.0	0.0	0	0	0
1002 Fed Rcpts		143,400.0										
1003 G/F Match		120,000.0										

Due to Alaska's Medicaid program being one of the most robust and generous in the nation, nearly 2 out of every 5 Alaskans qualify. Contributing to the cost of the program is the income-based definition of poverty for eligibility purposes for Alaska which is set at 25% above that of the Lower 48 by federal administrative

Change Record Detail - Multiple Scenarios with Descriptions
Department of Health and Social Services

Component: Medicaid Services (3234)

RDU: Medicaid Services (595)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
procedure carried forward from the 1960s.												
<p>In an effort to reduce State costs associated with the Medicaid program, this administration sought legislative assistance in developing a more streamlined process for making changes to the program; however, no statutory changes were enacted, and the Department is still constrained by the current statutory framework – posing a significant challenge to making meaningful changes and common-sense reforms to the state's Medicaid program. Absent relief in the form of a statutory change, the department will continue to face obstacles in its efforts to reform the highest cost Medicaid program in the nation.</p> <p>Additionally, after working with the Centers for Medicare and Medicaid Services, and gathering input from interested stakeholders, a number of cost containment measures were discontinued or could not be implemented as quickly as originally anticipated. Therefore, the Governor is seeking to restore authority to the Medicaid program while the Department continues to work with stakeholders to determine ways to control expenditures while supporting the needs of the Medicaid population.</p>												
Align Authority with Anticipated Expenditures	LIT	0.0	0.0	0.0	2,716.0	0.0	0.0	-2,716.0	0.0	0	0	0
Transfer authority from grants to cover anticipated services costs. The remaining grants authority is sufficient to cover anticipated expenditures.												
Totals		2,387,102.4	0.0	0.0	48,284.2	0.0	0.0	2,338,818.2	0.0	0	0	0

Line Item Detail (1676)
Department of Health and Social Services
Services

Component: Medicaid Services (3234)

Line Number	Line Name		FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
3000	Services		0.0	48,584.2	48,284.2
Object Class	Servicing Agency	Explanation	FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
3000 Services Detail Totals			0.0	48,584.2	48,284.2
3003	Information Technology	Operations and Maintenance, Xerox Corporation.	0.0	190.0	190.0
3003	Information Technology	Information Technology Consulting, Oregon Health and Sciences University.	0.0	155.0	155.0
3003	Information Technology	InterQual License and Software, McKesson Technologies.	0.0	50.0	50.0
3005	Health Services	Utilization and Case Management Services, Qualis Health	0.0	3,300.0	3,000.0
3005	Health Services	Medical Assistance Provider Audits, Myers and Stauffer.	0.0	1,700.0	1,700.0
3005	Health Services	Cost Avoidance and Post Payment Recovery, Health Management Systems, Inc.	0.0	1,750.0	1,750.0
3005	Health Services	Claims Processing Operating Contract, 50 percent Xerox Corporation.	0.0	2,600.0	2,600.0
3005	Health Services	Claims Processing Operating Contract, 90 percent Xerox Corporation.	0.0	1,585.0	1,585.0
3005	Health Services	Claims Processing Operating Contract, 75 percent Xerox Corporation.	0.0	15,675.0	15,675.0
3005	Health Services	Tribal Medicaid Administrative Claiming (TMAC), per recipient, per quarter, for outreach activities.	0.0	2,400.0	2,400.0
3005	Health Services	Pharmacy Benefit Management	0.0	120.0	120.0

Line Item Detail (1676)
Department of Health and Social Services
Services

Component: Medicaid Services (3234)

Object Class		Servicing Agency	Explanation	FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
3000 Services Detail Totals				0.0	48,584.2	48,284.2
			System, Xerox Corporation.			
3005	Health Services		Consumer Assessment of Healthcare Providers and Systems Contract, Datastat Inc.	0.0	50.0	50.0
3005	Health Services		Medicaid Management Information System- Tech Stack	0.0	14,986.7	14,986.7
3005	Health Services		Disproportionate Share Hospital (DSH), Fairbanks Memorial Hospital.	0.0	1,100.0	1,100.0
3005	Health Services		Disproportionate Share Hospital (DSH) Bartlett Regional Hospital.	0.0	253.5	253.5
3006	Delivery Services		Postage, Xerox Corporation.	0.0	210.0	210.0
3011	Other Services		MedExpert International, \$3.85 per member per month.	0.0	475.0	475.0
3011	Other Services		MedExpert Explanation of Benefits	0.0	1,485.0	1,485.0
3024	Inter-Agency Legal	Law - Department-wide	Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services	0.0	230.0	230.0
3024	Inter-Agency Legal	Law - Department-wide	Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services - Program Integrity	0.0	269.0	269.0

Line Item Detail (1676)
Department of Health and Social Services
Grants, Benefits

Component: Medicaid Services (3234)

Line Number	Line Name		FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
7000	Grants, Benefits		0.0	2,059,586.5	2,338,818.2
Object Class	Servicing Agency	Explanation	FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
		7000 Grants, Benefits Detail Totals	0.0	2,059,586.5	2,338,818.2
7002	Benefits	<p>Services for Medicaid clients including: hospitals, physicians, pharmacy, dental transportation, Lab and X-ray, durable medical equipment, audiology, vision, physical therapy, occupational and speech therapy, chiropractic, home health and hospice.</p> <p>This also includes payments for services for Medicaid clients newly eligible through Medicaid expansion.</p>	0.0	2,059,586.5	2,338,818.2

Revenue Detail (1681)
Department of Health and Social Services

Component: Medicaid Services (3234)

Revenue Type (OMB Fund Code) Revenue Source	Component	Comment	FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
5002 Fed Rcpts (1002 Fed Rcpts)			0.0	1,577,826.4	1,729,455.3
5019 Federal - Miscellaneous Grants		Title XIX - Medicaid Federal Collections - The bulk of the federal funding for Medicaid Benefits come from claims reimbursed at the federal medical assistance percentage (FMAP). Additional Medicaid fund sources are ISH (Indian Health Services) at 100% FMAP for specific programs; Enhanced FMAP for the State Children's Health Insurance Program (SCHIP); and, Breast and Cervical Cancer (BCC). Actual collections are based on the proportion of the expenditures eligible for each type of federal reimbursement.	0.0	1,575,230.8	1,726,859.7
5019 Federal - Miscellaneous Grants		Title XXI - Medicaid Federal Collections - Enhanced Federal Medical Assistance Percentage for the State Children's Health Insurance Program (SCHIP).	0.0	2,595.6	2,595.6
5005 GF/Prgm (1005 GF/Prgm)			0.0	210.0	210.0
5103 Program Receipts - Charges for Services		Program Receipts related to the Working Disabled Program and the Health Insurance Program.	0.0	210.0	210.0
5007 I/A Rcpts (1007 I/A Rcpts)			0.0	5,218.8	5,218.8
5301 Inter-Agency Receipts	H&SS - Adult Public Assistance (222)	Medicaid Services Reimbursement from Department of Health and Social Services, Division of Public Assistance, for non-Medicaid eligible clients who receive disability exams (DE-25 Exams).	0.0	500.0	500.0

Revenue Detail (1681)
Department of Health and Social Services

Component: Medicaid Services (3234)

Revenue Type (OMB Fund Code) Revenue Source	Component	Comment	FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
5301 Inter-Agency Receipts	H&SS - Designated Eval & Treatment (1014)	Interagency refinancing match from Department of Health and Social Services, Division of Behavioral Health, for Disproportionate Share Hospital and ProShare. Exact amount will vary depending on the upper payment limits and date of payments.	0.0	4,000.0	4,000.0
5301 Inter-Agency Receipts	H&SS - Public Assistance Admin (233)	Medicaid Services Reimbursement from Department of Health and Social Services, Division of Public Assistance, for disabled children living at home.	0.0	500.0	500.0
5301 Inter-Agency Receipts	H&SS - BH Treatment and Recovery Grants (3099)	Medicaid Services Reimbursement from Department of Health and Social Services, Behavioral Health Treatment and Recovery, Alaska Medicaid Coordinated Care Initiative for Corrections.	0.0	218.8	218.8
5108 Stat Desig (1108 Stat Desig)			0.0	4,767.5	15,495.3
5203 Statutory Dsgntd Prgm Rcpts Hlth/Hmn Svcs - 3rd Prty Clctns		Tribal Medicaid Administrative Claiming (TMAC) receipts for outreach activities.	0.0	1,200.0	1,200.0
5204 Statutory Dsgntd Prgm Rcpts Hlth & Hmn Svcs - Chrgs for Svcs		Statutory Designated Program Receipts Collected from Myers and Stauffer.	0.0	99.0	99.0
5204 Statutory Dsgntd Prgm Rcpts Hlth & Hmn Svcs - Chrgs for Svcs		Administrative fees collected for providing emergency medical transportation services	0.0	0.0	10,727.8
5206 Statutory Designated Program Receipts - Contracts		Statutory Designated Program Receipts Collected from schools for Medicaid School Based Services.	0.0	3,468.5	3,468.5
5246 Recid Redu (1246 Recid Redu)			0.0	375.0	375.0
5246 Recidivism Reduction Selective Sales Use Taxes		Recidivism Reduction Fund	0.0	375.0	375.0

Revenue Detail (1681)
Department of Health and Social Services

Component: Medicaid Services (3234)

Revenue Type (OMB Fund Code) Revenue Source	Component	Comment	FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
5247 Med Recov (1247 Med Recov)			0.0	219.8	219.8
5247 Medicaid Monitory Recovery		Medicaid Recovery for Health Care Medicaid Reform, Senate Bill 74.	0.0	219.8	219.8
6092 MHTAAR (1092 MHTAAR)			0.0	3,125.0	0.0
6691 Mental Health Trust Auth Auth Rec - Miscellaneous		Mental Health Trust Authority Authorized Receipts	0.0	3,125.0	0.0
6168 Tob Ed/Ces (1168 Tob Ed/Ces)			0.0	97.5	97.5
6811 Tobacco Use Education and Cessation Fund - Tobacco Settlemnt		Tobacco Use Education and Cessation Fund	0.0	97.5	97.5

Inter-Agency Services (1682)
Department of Health and Social Services

Component: Medicaid Services (3234)

				FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
Component Totals				0.0	499.0	499.0
With Department of Law				0.0	499.0	499.0
Object Class	Servicing Agency	Explanation		FY2019 Actuals	FY2020 Management Plan	FY2021 Governor
3024	Inter-Agency Legal	Law - Department-wide	Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services	0.0	230.0	230.0
3024	Inter-Agency Legal	Law - Department-wide	Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services - Program Integrity	0.0	269.0	269.0