

# **State of Alaska FY2023 Governor's Operating Budget**

## **Department of Health 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: the Divisions of Health Care Services; Behavioral Health; 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: 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 and psychiatric evaluation; and approval.
- Direct Waiver Services: Five 1915 (c) Medicaid Home and Community Based Waivers: Intellectual and Developmental Disabilities (IDD); Alaskans Living Independently (ALI); Adults with Physical and Developmental Disability (APDD); Children with Complex Medical Conditions (CCMC); Individualized Supports Waiver (ISW).
- The 1915 (k) Home and Community Based Services State Plan: Community First Choice.
- Additional services to supplement the state plan services have been approved in the Section 1115 Waiver

Demonstration Project.

- 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 2021

1115 Medicaid Waiver Demonstration Project: The Division of Behavioral Health has continued to phase in implementation of the approved 1115 Waiver and onboarded federal claiming through weekly check writes issued by its Administrative Service Organization (ASO) for Behavioral Health services.

American Rescue Plan Act: The Division of Senior and Disabilities Services (SDS) submitted a spending plan to the Centers for Medicare and Medicaid Services for the Home and Community-Based Services (HCBS) funding initiative through the American Rescue Plan Act (ARPA). The department has received partial approval.

Electronic Visit Verification: In FY2021 the Division of Senior and Disabilities Services successfully implemented an Electronic Visit Verification (EVV) to provide independent validation. The implementation of EVV will reduce waste, fraud, and abuse; provide robust data to monitor compliance and improve quality of care.

State Plan: As federal and state policies changed, Department of Health and Social Services (DHSS) made many updates to the Medicaid State Plan – the written agreement between the state and federal government outlining the details of the state’s Medicaid program - as required to ensure continued compliance.

- The department submitted to the Centers for Medicare and Medicaid Services (CMS) a Medicaid state plan amendment substantially rewriting behavioral health services to align with the 1115 Waiver. After significant negotiation, including the involvement of Department of Law and significant collaboration with Tribal Health Organizations, CMS approved the amendment.

Renewal of Waivers: Achieved renewal from the U.S. Centers for Medicare and Medicaid Services for four of the SDS’s five home and community-based Medicaid waivers: Intellectual and Developmental Disabilities, Alaskans Living Independently, Adults with Physical and Developmental Disabilities, and Children with Complex Medical Conditions waivers (The fifth waiver, the Individualized Supports waiver, is on a different renewal cycle.)

Medicaid Reform: Finalized a report with contractor Public Consulting Group (PCG) on Alaska Medicaid Strategy: Recommended Reform Principles and Savings Initiatives. Began work with tribal partners to explore Indian Managed Care.

### Pandemic Response:

- Successfully applied for flexibilities from the Centers for Medicare and Medicaid Services to address the public health emergency and ease provider burdens, including:
  - A comprehensive 1135 Medicaid Waiver,
  - Disaster State Plan Amendments (SPA), and
  - The 1915 (c) Appendix K, a standalone appendix that DHSS utilized during the public health emergency to request amendments to approved 1915 (c) waivers. The Appendix K has provided flexibilities to the DHSS home and community-based waiver authority.
- Modified and suspended many existing regulations to assist with access to care.
  - One area of specific growth has been services which use telehealth as a method of delivery. Early in the public health emergency, many elective and allied healthcare services were suspended for a period of time. This led to a decrease in claims and accessibility to healthcare in many sectors, most noticeably in behavioral health. Increasing flexibilities for telehealth has more than compensated for this decrease and allowed for the continued delivery, and even growth, of services.
  - Telehealth has continued to grow as a method of delivering healthcare services, and DHSS is exploring ways to make some of these flexibilities permanent.
- Distributed COVID relief funding and developed plans for effective use of ARPA and Coronavirus Relief Response and Relief Act (CRRSA).

## Key Component Challenges

Addressing residential issues associated with the COVID-19 public health emergency including reversing action on

multiple federal regulations and waivers associated with federal management of the pandemic.

Due to the requirements around essential health benefits for adults in the Affordable Care Act (ACA), there functionally are no optional Medicaid state plan benefits that can be reduced.

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.

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.

The department continues 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 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.

### **Significant Changes in Results to be Delivered in FY2023**

- Transition from public health emergency regulatory and operating environment to a post COVID-19 pandemic landscape which may differ significantly from the pre-pandemic period.
- 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 states.
- Continued reporting of results for the 1115 Behavioral Health Waiver and the Behavioral Health ASO.
- Implementing the Public Consulting Group roadmap for the Medicaid system, including engagement with key stakeholders.
- The department is currently developing an HIE vendor RFP under the “best value” process. The current vendor contract expires in May of 2022.

### **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
<p><b>Contact:</b> Sylvan Robb, Division Director <b>Phone:</b> (907) 465-1630 <b>E-mail:</b> <a href="mailto:sylvan.rob主@alaska.gov">sylvan.rob主@alaska.gov</a></p>

**Component Detail All Funds**  
**Department of Health**

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

Formula Component

	FY2021 Actuals	FY2022 Conference Committee	FY2022 Authorized	FY2022 Management Plan	FY2023 Governor	FY2022 Management Plan vs FY2023 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	67,376.0	74,009.0	74,009.0	74,009.0	74,009.0	0.0	0.0%
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	2,082,476.4	2,303,644.4	2,282,644.4	2,282,644.4	2,327,644.4	45,000.0	2.0%
78000 Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
<b>Totals</b>	<b>2,149,852.4</b>	<b>2,377,653.4</b>	<b>2,356,653.4</b>	<b>2,356,653.4</b>	<b>2,401,653.4</b>	<b>45,000.0</b>	<b>1.9%</b>
<b>Fund Sources:</b>							
1002 Fed Rcpts (Fed)	1,595,256.4	1,736,243.5	1,732,743.5	1,732,743.5	1,732,743.5	0.0	0.0%
1003 G/F Match (UGF)	443,623.3	499,333.3	481,833.3	481,833.3	526,833.3	45,000.0	9.3%
1004 Gen Fund (UGF)	39,434.8	38,679.4	38,679.4	38,679.4	38,776.9	97.5	0.3%
1005 GF/Prgm (DGF)	0.0	210.0	210.0	210.0	210.0	0.0	0.0%
1007 I/A Rcpts (Other)	250.0	5,218.8	5,218.8	5,218.8	5,218.8	0.0	0.0%
1037 GF/MH (UGF)	69,507.5	81,780.8	81,780.8	81,780.8	82,155.8	375.0	0.5%
1108 Stat Desig (Other)	1,682.9	15,495.3	15,495.3	15,495.3	15,495.3	0.0	0.0%
1168 Tob Ed/Ces (DGF)	97.5	97.5	97.5	97.5	0.0	-97.5	-100.0%
1246 Recid Redu (DGF)	0.0	375.0	375.0	375.0	0.0	-375.0	-100.0%
1247 Med Recov (DGF)	0.0	219.8	219.8	219.8	219.8	0.0	0.0%
<b>Unrestricted General (UGF)</b>	<b>552,565.6</b>	<b>619,793.5</b>	<b>602,293.5</b>	<b>602,293.5</b>	<b>647,766.0</b>	<b>45,472.5</b>	<b>7.5%</b>
<b>Designated General (DGF)</b>	<b>97.5</b>	<b>902.3</b>	<b>902.3</b>	<b>902.3</b>	<b>429.8</b>	<b>-472.5</b>	<b>-52.4%</b>
<b>Other Funds</b>	<b>1,932.9</b>	<b>20,714.1</b>	<b>20,714.1</b>	<b>20,714.1</b>	<b>20,714.1</b>	<b>0.0</b>	<b>0.0%</b>
<b>Federal Funds</b>	<b>1,595,256.4</b>	<b>1,736,243.5</b>	<b>1,732,743.5</b>	<b>1,732,743.5</b>	<b>1,732,743.5</b>	<b>0.0</b>	<b>0.0%</b>
<b>Positions:</b>							
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**

**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 FY2022 Conference Committee To FY2022 Authorized *****												
<b>FY2022 Conference Committee</b>												
	ConfCom	2,377,653.4	0.0	0.0	74,009.0	0.0	0.0	2,303,644.4	0.0	0	0	0
1002 Fed Rcpts		1,736,243.5										
1003 G/F Match		499,333.3										
1004 Gen Fund		38,679.4										
1005 GF/Prgm		210.0										
1007 I/A Rcpts		5,218.8										
1037 GF/MH		81,780.8										
1108 Stat Desig		15,495.3										
1168 Tob Ed/Ces		97.5										
1246 Recid Redu		375.0										
1247 Med Recov		219.8										
<b>DSH For Qualifying Hospitals That Serve Medicaid and Uninsured Individuals</b>												
	Veto	-3,500.0	0.0	0.0	0.0	0.0	0.0	-3,500.0	0.0	0	0	0
1002 Fed Rcpts		-3,500.0										
Funding for disproportionate share hospital (DSH) payments for FY2022 were included in two sections of HB69. Section 1 and Section 18(b) totaling \$16 million. DSH funding should be contemplated on an annual basis as both the need and the federal program is subject to change. This veto of DSH funding from HB69 section 1 is not a rejection of ongoing funding for the program. In FY2023, and future fiscal years, DSH funding will be evaluated annually to determine the appropriate level of need and availability in each fiscal year. \$9 million of DSH funding for FY2022 remains in the operating budget under section 18(b).												
<b>Medicaid Program Reduction</b>												
	Veto	-17,500.0	0.0	0.0	0.0	0.0	0.0	-17,500.0	0.0	0	0	0
1003 G/F Match		-17,500.0										
Increased federal reimbursement due to COVID-19 will allow the Department of Health and Social Services to implement sustainable reductions.												
<b>Subtotal</b>		<b>2,356,653.4</b>	<b>0.0</b>	<b>0.0</b>	<b>74,009.0</b>	<b>0.0</b>	<b>0.0</b>	<b>2,282,644.4</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
***** Changes From FY2022 Management Plan To FY2023 Governor *****												
<b>Match Requirement for Increased Medicaid Utilization</b>												
	Inc	45,000.0	0.0	0.0	0.0	0.0	0.0	45,000.0	0.0	0	0	0
1003 G/F Match		45,000.0										

Medicaid is an open-entitlement program and therefore available to any eligible Alaskan. As the COVID-19 pandemic winds down, there has been an increase in utilization rates and provider costs. During the federal public health emergency (PHE), the federal medical assistance percentage (FMAP) was increased; when the PHE ends the enhanced FMAP will also end. Medicaid program cost projections are inclusive of several factors including population growth, demographic changes, services utilization, and price changes. The Medicaid program will also initiate cost saving measures through implementing Section 1945 Health Homes and Medicaid eligibility redeterminations due to the PHE ending.

**Change Record Detail - Multiple Scenarios with Descriptions**  
**Department of Health**

**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
<b>Replace Authority Unavailable due to Alaska Constitution Article IX Section 17(d)</b>												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		97.5										
1037 GF/MH		375.0										
1168 Tob Ed/Ces		-97.5										
1246 Recid Redu		-375.0										
<b>Totals</b>		<b>2,401,653.4</b>	<b>0.0</b>	<b>0.0</b>	<b>74,009.0</b>	<b>0.0</b>	<b>0.0</b>	<b>2,327,644.4</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

The enactment of Article IX, Section 17(d) of the Alaska Constitution transferred available balances of funds used by this appropriation to the Constitutional Budget Reserve Fund (CBR); a process commonly referred to as the "CBR sweep". Budget authority that cannot be satisfied with projected fiscal year 2023 revenue collections are replaced with unrestricted general funds to ensure continuity of service.



**Line Item Detail (1676)**  
**Department of Health**  
**Services**

**Component:** Medicaid Services (3234)

<b>Line Number</b>	<b>Line Name</b>		<b>FY2021 Actuals</b>	<b>FY2022 Management Plan</b>	<b>FY2023 Governor</b>
3000	Services		67,376.0	74,009.0	74,009.0
<b>Object Class</b>	<b>Servicing Agency</b>	<b>Explanation</b>	<b>FY2021 Actuals</b>	<b>FY2022 Management Plan</b>	<b>FY2023 Governor</b>
<b>3000 Services Detail Totals</b>			<b>67,376.0</b>	<b>74,009.0</b>	<b>74,009.0</b>
3000	Education Services	Education services	467.9	0.0	0.0
3001	Financial Services	Financial Services	59,073.5	17,724.8	17,724.8
3003	Information Technology	Operations and Maintenance, Xerox Corporation.	132.2	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	3,000.0	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	0.0	2,400.0	2,400.0
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**Line Item Detail (1676)**  
**Department of Health**  
**Services**

**Component:** Medicaid Services (3234)

Object Class		Servicing Agency	Explanation	FY2021 Actuals	FY2022 Management Plan	FY2023 Governor
			<b>3000 Services Detail Totals</b>	<b>67,376.0</b>	<b>74,009.0</b>	<b>74,009.0</b>
			Claiming (TMAC), per recipient, per quarter, for outreach activities.			
3005	Health Services		Pharmacy Benefit Management System, Xerox Corporation.	0.0	120.0	120.0
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		Behavioral Health contracts	6,339.4	8,000.0	8,000.0
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	Admin - Department-wide	Reimbursable services agreement with Department of Law for legal services	500.0	0.0	0.0
3024	Inter-Agency Legal	Health - Medicaid Services (3234)	Reimbursable services agreement with Department of Law for legal services	43.3	0.0	0.0
3024	Inter-Agency Legal	Law - Department-wide	Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services	300.0	230.0	230.0
3024	Inter-Agency Legal	Law - Department-wide	Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services - Program Integrity	476.7	269.0	269.0
3038	Inter-Agency	Courts - Department-wide	Inter-agency management/consulting	40.0	0.0	0.0

**Line Item Detail (1676)**  
**Department of Health**  
**Services**

**Component:** Medicaid Services (3234)

<b>Object Class</b>	<b>Servicing Agency</b>	<b>Explanation</b>	<b>FY2021 Actuals</b>	<b>FY2022 Management Plan</b>	<b>FY2023 Governor</b>	
<b>3000 Services Detail Totals</b>			<b>67,376.0</b>	<b>74,009.0</b>	<b>74,009.0</b>	
	Management/Consulting	services				
3038	Inter-Agency Management/Consulting	Health - Information Technology Services (2754)	Inter-agency management/consulting services	3.0	0.0	0.0

**Line Item Detail (1676)**  
**Department of Health**  
**Grants, Benefits**

**Component:** Medicaid Services (3234)

<b>Line Number</b>	<b>Line Name</b>		<b>FY2021 Actuals</b>	<b>FY2022 Management Plan</b>	<b>FY2023 Governor</b>
7000	Grants, Benefits		2,082,476.4	2,282,644.4	2,327,644.4
<b>Object Class</b>	<b>Servicing Agency</b>	<b>Explanation</b>	<b>FY2021 Actuals</b>	<b>FY2022 Management Plan</b>	<b>FY2023 Governor</b>
		<b>7000 Grants, Benefits Detail Totals</b>	<b>2,082,476.4</b>	<b>2,282,644.4</b>	<b>2,327,644.4</b>
7001	Grants	Grants	75,668.6	0.0	0.0
7002	Benefits	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.  This also includes payments for services for Medicaid clients newly eligible through Medicaid expansion.	2,003,405.5	2,282,644.4	2,327,644.4
7003	Sub-Recipient Pass-Through Grants	Pass-through grants	3,402.3	0.0	0.0

**Revenue Detail (1681)**  
**Department of Health**

**Component:** Medicaid Services (3234)

Revenue Type (OMB Fund Code) Revenue Source	Component	Comment	FY2021 Actuals	FY2022 Management Plan	FY2023 Governor
<b>5002 Fed Rcpts (1002 Fed Rcpts)</b>			<b>1,595,256.4</b>	<b>1,732,743.5</b>	<b>1,732,743.5</b>
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.	1,595,256.4	1,730,147.9	1,730,147.9
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
<b>5005 GF/Prgm (1005 GF/Prgm)</b>			<b>93.3</b>	<b>210.0</b>	<b>210.0</b>
5103 Program Receipts - Charges for Services		Program Receipts related to the Working Disabled Program and the Health Insurance Program.	93.3	210.0	210.0
<b>5007 I/A Rcpts (1007 I/A Rcpts)</b>			<b>250.0</b>	<b>5,218.8</b>	<b>5,218.8</b>
5301 Inter-Agency Receipts	Admin - Department-wide	Reimbursable Service Agreement	250.0	0.0	0.0
5301 Inter-Agency Receipts	Health - 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	0.0	500.0	500.0

**Revenue Detail (1681)**  
**Department of Health**

**Component:** Medicaid Services (3234)

<b>Revenue Type (OMB Fund Code)</b> <b>Revenue Source</b>	<b>Component</b>	<b>Comment</b>	<b>FY2021 Actuals</b>	<b>FY2022 Management Plan</b>	<b>FY2023 Governor</b>
5301 Inter-Agency Receipts	Health - Designated Eval & Treatment (1014)	exams (DE-25 Exams). 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	Health - 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	Health - 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
<b>5108 Stat Desig (1108 Stat Desig)</b>			<b>1,682.9</b>	<b>15,495.3</b>	<b>15,495.3</b>
5203 Statutory Dsgntd Prgm Rcpts Hlth/Hmn Svcs - 3rd Prty Clctns		Tribal Medicaid Administrative Claiming (TMAC) receipts for outreach activities.	699.3	1,200.0	1,200.0
5204 Statutory Dsgntd Prgm Rcpts Hlth & Hmn Svcs - Chrsgs 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 - Chrsgs for Svcs		Administrative fees collected for providing emergency medical transportation services	0.0	10,727.8	10,727.8
5206 Statutory Designated Program Receipts - Contracts		Statutory Designated Program Receipts Collected from schools for Medicaid School Based Services.	983.6	3,468.5	3,468.5
<b>5246 Recid Redu (1246 Recid Redu)</b>			<b>0.0</b>	<b>375.0</b>	<b>0.0</b>
5246 Recidivism Reduction Selective Sales		Recidivism Reduction Fund	0.0	375.0	0.0

**Revenue Detail (1681)**  
**Department of Health**

**Component:** Medicaid Services (3234)

Revenue Type (OMB Fund Code) Revenue Source	Component	Comment	FY2021 Actuals	FY2022 Management Plan	FY2023 Governor
Use Taxes					
<b>5247 Med Recov (1247 Med Recov)</b>			<b>0.0</b>	<b>219.8</b>	<b>219.8</b>
5247 Medicaid Monitory Recovery		Medicaid Recovery for Health Care Medicaid Reform, Senate Bill 74.	0.0	219.8	219.8
<b>6092 MHTAAR (1092 MHTAAR)</b>			<b>0.0</b>	<b>0.0</b>	<b>0.0</b>
6691 Mental Health Trust Auth Auth Rec - Miscellaneous		Mental Health Trust Authority Authorized Receipts	0.0	0.0	0.0
<b>6168 Tob Ed/Ces (1168 Tob Ed/Ces)</b>			<b>0.0</b>	<b>97.5</b>	<b>0.0</b>
6811 Tobacco Use Education and Cessation Fund - Tobacco Settlemnt		Tobacco Use Education and Cessation Fund	0.0	97.5	0.0

**Inter-Agency Services (1682)**  
**Department of Health**

**Component:** Medicaid Services (3234)

				FY2021 Actuals	FY2022 Management Plan	FY2023 Governor
<b>Component Totals</b>				<b>1,363.0</b>	<b>499.0</b>	<b>499.0</b>
With Department of Administration				500.0	0.0	0.0
With Department of Health				46.3	0.0	0.0
With Department of Law				776.7	499.0	499.0
With Judiciary				40.0	0.0	0.0
Object Class	Servicing Agency	Explanation	FY2021 Actuals	FY2022 Management Plan	FY2023 Governor	
3024	Inter-Agency Legal	Admin - Department-wide	500.0	0.0	0.0	
		Reimbursable services agreement with Department of Law for legal services				
3024	Inter-Agency Legal	Health - Medicaid Services (3234)	43.3	0.0	0.0	
		Reimbursable services agreement with Department of Law for legal services				
3024	Inter-Agency Legal	Law - Department-wide	300.0	230.0	230.0	
		Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services				
3024	Inter-Agency Legal	Law - Department-wide	476.7	269.0	269.0	
		Reimbursable Services Agreement with Department of Law - Medicaid Program Legal Services - Program Integrity				
3038	Inter-Agency Management/Consulting	Courts - Department-wide	40.0	0.0	0.0	
		Inter-agency management/consulting services				
3038	Inter-Agency Management/Consulting	Health - Information Technology Services (2754)	3.0	0.0	0.0	
		Inter-agency management/consulting services				