



Therapeutic Treatment Home Services (TTH) & Home-Based Family Treatment (HBFT) Services for Youth Overview

April 2024



Agenda / Objectives

- 1 Overview of Youth Therapeutic Treatment Home Services and Home-Based Family Treatment Services
- 2 Therapeutic Treatment Home Services
- 3 Home-Based Family Treatment Services Levels 1, 2 and 3
- 4 Case Scenario
- 5 Additional Resources

Therapeutic Treatment Home Services and Home-Based Family Treatment Services Standards

Therapeutic Treatment Home Services: [Alaska Behavioral Health Provider Service Standards & Administrative Procedures for Behavioral Health Provider Services \(state.ak.us\)](#) 7AAC 139.400
Pages 21-24

Home Based Family Treatment Services – Level 1: [Alaska Behavioral Health Provider Service Standards & Administrative Procedures for Behavioral Health Provider Services \(state.ak.us\)](#)
7 AAC 139.150 Pages 9-12

Home Based Family Treatment Services – Level 2: [Alaska Behavioral Health Provider Service Standards & Administrative Procedures for Behavioral Health Provider Services \(state.ak.us\)](#)
7 AAC 139.150 Pages 13-16

Home Based Family Treatment Services – Level 3: [Alaska Behavioral Health Provider Service Standards & Administrative Procedures for Behavioral Health Provider Services \(state.ak.us\)](#)
7 AAC 139.150 Pages 17-20

Therapeutic Treatment Home Services and Home-Based Family Treatment Services Regulations

The regulation for Therapeutic Treatment Home Services is located at [Alaska Admin Code \(akleg.gov\)](https://akleg.gov/codes/7AAC/139.400) code 7AAC 139.400

The regulation for Home Based Family Treatment Services is located at [Alaska Admin Code \(akleg.gov\)](https://akleg.gov/codes/7AAC/139.150) code 7 AAC 139.150

Therapeutic Treatment Home Services (TTH)

Therapeutic Treatment Home Services – Service Description

Therapeutic Treatment Home VS Therapeutic Foster Home

A Therapeutic Treatment Home is based on clinically diagnosed issues that can be treated in a home like environment and in the community. It is a TREATMENT LEVEL OF CARE, with an assessment, treatment plan and with highly trained house parents who can teach and practice needed skills to manage their diagnosis. The emphasis of a Therapeutic Treatment Home is the least restrictive level of treatment a child needs to successfully address their diagnosis and other clinically significant issues.

A Therapeutic Foster Home often have children who have clinically diagnosed issues but the first and primary issue is one of child PLACEMENT by a child protection agency and secondly, addressing their clinical issues in an outpatient clinic with support by the foster parents.

Therapeutic Treatment Home Services – Service Components

Service Components:

Integrated behavioral health assessment or age-appropriate assessment
Trauma-informed services.

Development of cognitive, behavioral, and other trauma-informed therapies reflecting a variety of treatment approaches provided to the child/youth on an individual and/or family basis.

Crisis intervention and support services.

Structured daily activities including the development, improvement, monitoring, and reinforcing of age-appropriate social, communication and behavioral skills.

Linkage to medication services and medication administration if the child is prescribed medication.

Therapeutic Treatment Home Services – Contraindicated Services

- Children's Residential Treatment Level 1 and Level 2
- Adult Mental Health Residential Level 1 and Level 2
- Psychiatric Residential Treatment Facility
- ASAM Level 3.1
- ASAM Level 3.3
- ASAM Level 3.5 (adolescent)
- ASAM Level 3.5 (adult)
- ASAM Level 3.7 (adolescent)
- ASAM Level 3.7 (adult)

Therapeutic Treatment Home Services – Contraindicated Services (Continued)

- ASAM Level 4.0
- ASAM Level 3.2 withdrawal management
- ASAM Level 3.7 withdrawal management
- ASAM Level 4.0 withdrawal management

Exceptions:

Therapeutic Treatment Home services and CRT Level 1/CRT Level 2 or PRTF services may be billed concurrently for up to 12 calendar days per year as part of a discharge plan from a residential treatment facility for a child.

Therapeutic Treatment Home Services – Service Requirements

Therapeutic treatment home services must:

- Be provided in a licensed foster home under 7 AAC 50 by at least one licensed foster parent.
- Include trauma-informed care by licensed foster parents and other providers within this manual as qualified for therapeutic treatment services, who have received documented training or education in principles of trauma informed care.
- Be provided under the direction and supervision of a community behavioral health services provider approved under 7 AAC 136.020.
- A Mental Health Professional Clinician provides clinical supervision of foster parents and services provided to the child.
- Licensed foster homes furnishing Therapeutic Treatment Home services are responsible for meeting all applicable state statutes and regulations for foster homes in Alaska. While licensure for foster homes is required, TTH is a level of care treatment service and not foster care placement. As such, TTH is based on medical need and must be clinically supported.

Therapeutic Treatment Home Services – Target Population and Service Frequency Limits, Relationship to Other Services

Target Population:

Children/adolescents under age 21 with severe mental, emotional, or behavioral health needs and who cannot be stabilized in a less intensive home setting.

Service Frequency Limits: 90 days per SFY service authorization required to extend limit.

Service Code: H2020 V2, 1 unit equals 1 day

Relationship to Other Services:

Therapeutic Treatment Homes Services may be provided concurrently with any service listed in the standards manual that is not otherwise contraindicated. Respite as defined in 7 AAC 130.280 is not paid for under Therapeutic Treatment Homes.

Therapeutic Treatment Home Services – Additional Information

Programs may employ a multidisciplinary team of professionals to perform Therapeutic Treatment Home service(s).

All minimum service requirements must be met to bill for the daily rate. If all minimum service requirements are not met, a provider may bill individually for the services the member participated in on that day.

It is recommended that programs employ a caseworker, which may be the mental health professional, to be the main point of contact for the treatment team and manage the treatment planning and coordination.

It is recommended that providers and foster homes providing Therapeutic Treatment Home services integrate the applicable standards adopted by the Alaska chapter of the Family Focused Treatment Association (FFTA) for Therapeutic Foster Care (TFC) Parents and Child Placement Agencies (CPA).

Home-Based Family Treatment Services (HBFT) Level 1

Home-Based Family Treatment Services- Level 1 – Service Description

Home-Based Family Treatment (HBFT) services are designed to be a community-based early intervention service. HBFT includes treatment and wrap-around services provided in the home and/or in the community to reduce the need for inpatient hospitalization and residential services for children/adolescents. There are three levels of intensity/acuity for HBFT.

HBFT Level 1 is a prevention/early intervention service for individual/family units focused on engagement. HBFT Level 1 is for individuals at risk of out of home placement and/or at risk of developing a mental, emotional, behavioral, or SUD disorder. HBFT Level 1 provides support, education, training, and resources during home visits or in the community. As the emphasis is on prevention, HBFT Level 1 services are geared toward developing safety and stability in the home, maintaining and strengthening support systems, and providing resources to the family to decrease the need for more intensive treatment interventions.

Home-Based Family Treatment Services- Level 1 – Service Components

Service Components include:

- Crisis diversion and intervention planning
- Case coordination and referral
- Ongoing monitoring for safety and stability in the home
- Skill development including:
 - Assisting parents to utilize developmentally appropriate interventions/strategies to restore functioning and provide structure/support for children with emotional/behavioral problems
 - Communication, problem-solving and conflict-resolution skill building
 - Life/social skills required to restore functioning and provide structure and support for children with emotional and behavioral problems
 - Self-regulation, anger management, and other mood management skills for children, adolescents, and parents
- Peer supports and navigation
- Clinical services (with clinical assessment and treatment plan)
- Family services plan
- Linkage to medication services

Home-Based Family Treatment Services- Level 1- Contraindicated Services

Mental Health Exclusions:

- Home-Based Family Treatment Level 2 and Level 3
- Intensive Outpatient Program
- Partial Hospitalization Program
- Children's Residential Treatment Level 1 and Level 2
- Adult Mental Health Residential Level 1 and Level 2
- Psychiatric Residential Treatment Facility

Exceptions:

HBFT Level 1, 2, or 3 may be billed concurrently with Children's Residential Treatment (CRT) Level 1 or Children's Residential Treatment (CRT) Level 2 or Psychiatric Residential Treatment Facility (PRTF) for up to 30 calendar days per year as part of a discharge plan from a residential treatment facility.

Home-Based Family Treatment Services- Level 1- Contraindicated Services (Continued)

SUD Exclusions:

- ASAM Level 1.0
- ASAM Level 2.1
- ASAM Level 2.5
- ASAM Level 3.1
- ASAM Level 3.3
- ASAM Level 3.5 (adolescent)
- ASAM Level 3.5 (adult)
- ASAM Level 3.7 (adolescent)
- ASAM Level 3.7 (adult)
- ASAM Level 4.0
- ASAM Level 3.2 withdrawal management
- ASAM Level 3.7 withdrawal management
- ASAM Level 4.0 withdrawal management

Home-Based Family Treatment Services- Level 1- Service Requirements

Service Requirements:

HBFT Level 1 providers must use a screening tool to identify an individual's problems with one or more social determinants of health. Providers are not required to conduct an individual assessment or develop a treatment plan.

For HBFT Level 1, select Z codes from the ICD-10 are allowable as a primary diagnosis. See the DBH website for the most up to date ICD-10 coding guidelines.

HBFT Level 1 services are provided according to a family services plan developed by the provider in collaboration with the family. The family services plan must include protective factors for any other natural supports in the home and out of home placement, along with any risk factors related to the development of substance use and/or mental health disorder.

Home-Based Family Treatment Services- Level 1- Target Population, Service Code and Authorization, Relationship to Other Services and Additional Information

Target Populations:

Individuals under 21 years of age at risk of out-of-home placement or diagnosed with or at risk to develop a mental, emotional, or behavioral disorder or substance use disorder as determined by a screening conducted under 7 AAC 135.100.

Service Code: H1011 V2 and 1 unit = 15 minutes

Service Authorization: No service authorization required

Relationship to Other Services: HBFT Level 1 may be provided concurrently with any service listed in standards manual that is not otherwise contraindicated.

Programs may employ a multidisciplinary team of professionals to work in their HBFT Level 1 program(s).

Home-Based Family Treatment Services- Level 1- Service Location

Service Location:

No inpatient or residential settings allowed under this service. Services may be provided in outpatient settings including:

02 - Telehealth, patient not located at home

03 - School

04 - Homeless Shelter

10 - Telehealth, patient located at home

12 - Home

14 - Group Home

18 - Place of Employment

23 - Emergency Room

53 - Community Mental Health Center

99 - Other appropriate place of service

If the service is provided via telehealth, then the appropriate telehealth modifier must be appended.

Home-Based Family Treatment Services (HBFT) Level 2

Home-Based Family Treatment Services- Level 2 – Service Description

HBFT is designed to be a community-based early intervention service. HBFT includes treatment and wrap-around services provided in the home and/or in the community to reduce the need for inpatient hospitalization and residential treatment for children/adolescents. There are three levels of intensity/acuity for HBFT.

HBFT Level 2 is a community or home-based early intervention service focused on providing treatment services to reduce the need for hospitalization or residential care. HBFT Level 2 provides clinical services, including an assessment and treatment plan. Services may include family, group and individual therapy designed to focus on crisis diversion and skill building for the family. The emphasis is on early intervention to ensure services are available to the family to learn interventions and strategies to restore functioning. Services include ongoing monitoring for safety and stability for the family as well as providing referral resources.

The difference between HBFT Level 2 and Level 3 is the service frequency and risk level of the individual receiving the service.

Home-Based Family Treatment Services- Level 2 – Service Components

Service Components:

- Crisis diversion and intervention planning
- Case coordination and referral
- Ongoing monitoring for safety and stability in the home
- Skill development including:
 - Assisting parents to utilize developmentally appropriate interventions/strategies to restore functioning and provide structure/support for children with emotional/behavioral problems
 - Communication, problem-solving and conflict-resolution skill building
 - Life/social skills required to restore functioning and provide structure and support for children with emotional and behavioral problems
 - Self-regulation, anger management, and other mood management skills for children, adolescents, and parents
- Peer supports and navigation
- Clinical services (with clinical assessment and treatment plan)
- Comprehensive family assessment
- Family, group, and individual therapy
- Linkage to medication services

Home-Based Family Treatment Services- Level 2 – Contraindicated Services

Mental Health Exclusions:

- Home-Based Family Treatment Level 1 and Level 3
- Partial Hospitalization Program
- Children's Residential Treatment Level 1 and Level 2
- Adult Mental Health Residential Level 1 and Level 2
- Psychiatric Residential Treatment Facility

Exceptions:

HBFT Level 1, 2, or 3 may be billed concurrently with CRT Level 1 or CRT Level 2 or PRTF for up to 30 calendar days per year as part of a discharge plan from a residential treatment facility.

Home-Based Family Treatment Services- Level 2 – Contraindicated Services (Continued)

Substance Use Disorders (SUD) Exclusions:

- ASAM Level 2.5
- ASAM Level 3.1
- ASAM Level 3.3
- ASAM Level 3.5 (adolescent)
- ASAM Level 3.5 (adult)
- ASAM Level 3.7 (adolescent)
- ASAM Level 3.7 (adult)
- ASAM Level 4.0
- ASAM Level 3.2 withdrawal management
- ASAM Level 3.7 withdrawal management
- ASAM Level 4.0 withdrawal management

Home-Based Family Treatment Services- Level 2 – Service Requirement and Target Populations

Service Requirements Expectations:

HBFT Level 2 providers must complete an assessment and develop an initial treatment plan in accordance with 7 AAC 139.100. The assessment includes how family relationship and family dynamics impact the individual's identified problems.

Service engagement is more frequent and more in depth than HBFT Level 1. Intensity is determined by the treatment plan.

Target Populations:

Individuals under 21 years of age at high risk of out-of-home placement. “High risk” means a person who may have at least one or more adverse childhood experiences based on the clinical assessment.

Home-Based Family Treatment Services- Level 2 – Service Location Information

Service Location:

No inpatient or residential settings allowed under this service. Services may be provided in outpatient settings including:

02 - Telehealth, patient not located at home

03 - School

04 - Homeless Shelter

10 - Telehealth, patient located at home

12 - Home

14 - Group Home

18 - Place of Employment

23 - Emergency Room

53 - Community Mental Health Center

99 - Other appropriate place of service

If the service is provided via telehealth, then the appropriate telehealth modifier must be appended

Home-Based Family Treatment Services- Level 2 – Service Location Information

Service Frequency/Limits: None

Service Code: H1011 V2 TF 1 unit = 15 minutes

Service Authorization: No service authorization required

Relationship to Other Services: HBFT Level 2 may be provided concurrently with any service listed in standards manual that is not otherwise contraindicated.

Additional Information: Programs may employ a multidisciplinary team of professionals to work in their HBFT Level 2 program(s).

Home-Based Family Treatment Services (HBFT) Level 3

Home-Based Family Treatment Services- Level 3 – Service Description Components

HBFT is designed to be a community-based early intervention service. HBFT includes treatment and wrap-around services provided in the home and/or in the community to reduce the need for inpatient hospitalization and residential treatment for children/adolescents. There are three levels of intensity/acuity for HBFT.

HBFT Level 3 is a community-based or home-based early intervention service focused on providing treatment services to reduce the need for hospitalization or residential care. HBFT Level 3 provides clinical services, including an assessment and treatment plan. Services may include family, group and individual therapy designed to focus on crisis diversion and skill building for the family. The emphasis is on early intervention to ensure services are available to the family to learn interventions and strategies to restore functioning. Services include ongoing monitoring for safety and stability for the family as well as providing referral resources.

The difference between HBFT Level 3 and Level 2 is the service frequency and risk level of the individual receiving the service.

Home-Based Family Treatment Services- Level 3 – Service Components

Service Components:

- Crisis diversion and intervention planning
- Case coordination and referral
- Ongoing monitoring for safety and stability in the home
- Skill development including:
 - Assisting parents to utilize developmentally appropriate interventions/strategies to restore functioning and provide structure/support for children with emotional/behavioral problems
 - Communication, problem-solving and conflict-resolution skill building
 - Life/social skills required to restore functioning and provide structure and support for children with emotional and behavioral problems
 - Self-regulation, anger management, and other mood management skills for children, adolescents, and parents
- Peer supports and navigation
- Clinical services (with clinical assessment and treatment plan)
- Comprehensive family assessment
- Family, group, and individual therapy
- Linkage to medication services
- As applicable coordination with the children's/youth's case worker or probation officer to assure appropriate placement/supervision and community services

Home-Based Family Treatment Services- Level 3 – Contraindicated Services

Mental Health Exclusions:

- Home-Based Family Treatment Level 1 and Level 2
- Partial Hospitalization Program
- Children's Residential Treatment Level 1 and Level 2
- Adult Mental Health Residential Level 1 and Level 2
- Psychiatric Residential Treatment Facility

Exceptions:

HBFT Level 1, 2, or 3 may be billed concurrently with CRT Level 1 or CRT Level 2 or PRTF for up to 30 calendar days per year as part of a discharge plan from a residential treatment facility.

Home-Based Family Treatment Services- Level 3 – Contraindicated Services (Continued)

Substance Use Disorders (SUD) Exclusions:

- ASAM Level 2.5
- ASAM Level 3.1
- ASAM Level 3.3
- ASAM Level 3.5 (adolescent)
- ASAM Level 3.5 (adult)
- ASAM Level 3.7 (adolescent)
- ASAM Level 3.7 (adult)
- ASAM Level 4.0
- ASAM Level 3.2 withdrawal management
- ASAM Level 3.7 withdrawal management
- ASAM Level 4.0 withdrawal management

Home-Based Family Treatment Services- Level 3 – Service Requirements Expectations and Target Populations

Service Requirements Expectations:

HBFT Level 3 providers must complete an assessment and develop an initial treatment plan in accordance with 7 AAC 139.100. The assessment addresses how family relationship and family dynamics impact the individual's identified problems. Service engagement is more frequent and in depth than HBFT Level 2. Intensity is determined by the treatment plan.

Target Populations:

Individuals under 21 years of age at imminent risk of out-of-home placement or who has been discharged from a residential treatment program, psychiatric hospital, or juvenile detention facility.

"Imminent risk" means a person who has been in out-of-home placement or is at risk of being in out-of-home placement in state or tribal custody for issues that could lead to out-of-home placement.

Home-Based Family Treatment Services- Level 3 – Service Location Information

Service Location:

No inpatient or residential settings allowed under this service. Services may be provided in outpatient settings including:

02 - Telehealth, patient not located at home

03 - School

04 - Homeless Shelter

10 - Telehealth, patient located at home

12 - Home

14 - Group Home

18 - Place of Employment

23 - Emergency Room

53 - Community Mental Health Center

99 - Other appropriate place of service

If the service is provided via telehealth, then the appropriate telehealth modifier must be appended.

Home-Based Family Treatment Services- Level 3 – Additional Information

Service Frequency/Limits: None

Relationship to Other Services: HBFT Level 3 may be provided concurrently with any service listed in standards manual that is not otherwise contraindicated.

Service Code: H1011 V2 TG 1 unit = 15 minutes

Service Authorization: No Service Authorization required

Additional Information: Programs may employ a multidisciplinary team of professionals to work in their HBFT3 program(s).

Case Scenario

Youth Therapeutic Treatment Homes – Case Scenario

James a charming and engaging 12-year-old boy, was referred to the ACME Therapeutic Treatment Home after his grandparents were unable to meet his treatment needs in their home. He had a very rough start on life, born with Fetal Alcohol Syndrome to a young mother with developmental disabilities and mental health issues. She tried to care for herself and her baby, but often they found themselves living on the streets. Other times, she placed James with relatives. Through all these moves, uncertainty, and trauma, he became more defiant and his behaviors more difficult to manage as he lagged further and further behind in social skills, self-regulation and struggled in school. In 5th grade James was physically abused while living with his uncle.

Youth Therapeutic Treatment Homes – Case Scenario (continued)

Tantrums, anger, high levels of anxiety, extreme nightmares and aggression were the behaviors that quickly overwhelmed James’s first foster family as he struggled to adapt to yet another home and make sense of his life. Intensive intervention was needed to help James heal from a life of trauma and develop the skills that would help him thrive. He was admitted into ACME Therapeutic Treatment Home, an evidence-based treatment program where children are matched with highly trained Professional Treatment home Parents. The Home Parents and the clinical team deliver intensive individualized intervention focused on developing pro-social behaviors in the home, school, and community and move each child into the carefully chosen and prepared “aftercare home” within 6 to 9 months of treatment.

Youth Therapeutic Treatment Homes – Case Scenario (continued)

James's treatment goals involved helping him develop a sense of safety and trust, empathy towards others, learn acceptable social skills and make positive friends, and live cooperatively in the home. James, his home parents, and his clinical team practiced these skills over and over, adding more complexity as he mastered goals and celebrated each positive step. He developed a positive and supportive relationship with his home parents as they taught, coached, and celebrated his successes. He enjoys showing off his good manners, demonstrating his gentlemanly approach to others, and has made good friends. His natural charm and sweetness have enhanced his ability to advocate for himself, and he has learned how to ensure that his needs are met in a positive way.

Youth Therapeutic Treatment Homes – Case Scenario (continued)

Given the amount of dysfunction in his family of origin, the team needed to work closely with James' grandparents. Through the grandparents' regular visits, involvement in the Therapeutic Treatment Home program, and supporting James's healing process, they have committed to be his forever family. James has made significant progress in the program and has developed the skills he will need to thrive. As he graduates from the Therapeutic Treatment Home program, the team recommends Home Based Family Treatment Level 3 and work slowly to HBFT level 1.

Youth Therapeutic Treatment Homes – Case Scenario (continued)

Applying the CALOCUS/CASII Dimensions

Risk of Harm:

James has experienced tantrums, anger, high levels of anxiety, extreme nightmares and aggression and impulsivity with minimal consequences for self or others (2 rating)

Functional Status:

James has a history of trouble in relationships with peers, adults, and/or family, but without episodes of physical aggression (3 rating)

Youth Behavioral Health Residential Treatment – Case Scenario (continued)

Applying the CALOCUS/CASII Dimensions

Co-Morbidity: Developmental, Medical, Substance Use and Psychiatric:

James had a very rough start in life as he was born with Fetal Alcohol Syndrome which might have adversely affected his presenting condition, and/or may require significant augmentation or alteration of treatment for the presenting condition or co-morbid condition, or adversely affects the presenting condition (3 rating)

Recovery Environment (Environmental Stress):

James's mother has developmental disabilities and mental health issues, and he was disruptive at his first foster placement which overwhelmed the foster parents. There was a disruption of family/social milieu with the absence of his mother due to her own psychiatric issues (3 rating)

Youth Behavioral Health Residential Treatment – Case Scenario (continued)

Applying the CALOCUS/CASII Dimensions

Recovery Environment (Environmental Support):

James has the support of his home parents, the clinical team and his grandparents who have limited ability to respond appropriately to child's developmental needs and/or problems but are working toward meeting his needs or addressing the problems which lead to his treatment (3 rating)

Resiliency and Treatment History:

James has been working with his clinical team to learn techniques to feel a sense of safety and trust, empathy towards others, learn acceptable social skills, make positive friends and live cooperatively in the home. The significant ability to manage recovery has been demonstrated for extended periods, but has required formal supports or ongoing care in alternative supportive relationships (2 rating)

Youth Therapeutic Treatment Homes – Case Scenario (continued)

Treatment Acceptance and Engagement (Child/Adolescent Subscale):

James has been able to develop a trusting, positive relationship with his home parents, the clinical team and has made significant progress since being in the program which is impressive where he was at time of admission (2 rating)

Treatment Acceptance and Engagement (Parent/Caretaker Subscale):

James's grandparents have been working hard with understanding and supporting James in his treatment through their regular visits, involvement in the Therapeutic Treatment Home program and supporting James's healing process, they have committed to be his forever family (2 rating)

Youth Therapeutic Treatment Homes – Case Scenario (continued)

Applying the CALOCUS/CASII Dimensions

Clinical Rationale:

Based on the clinical information provided, James meets criteria for CALOCUS/CASII Service Intensity Level 3 High Intensity Community Based Services due to acting out, anxiety, extreme nightmares and aggression and an inability to care for himself needing the support and stabilization due to current symptoms.

The Provider will provide interventions to address the participant's current symptoms/chronic conditions/barriers including psychotherapy, medication, and patient and family education to ensure James's needs have been fully addressed. He will transition to CALOCUS/CASII Service Intensity Level 2 – Home Based Family Therapy – Level 3 and working his way to Home Based Family Therapy – Level 1.

James will learn new skills for a successful transition to a stable recovery-positive lifestyle to maintain community tenure.

Additional Resources

State of Alaska, Division of Behavioral Health Website

[Division of Behavioral Health \(alaska.gov\)](https://alaska.gov)



State of Alaska, Division of Behavioral Health 1115 Website

[1115 Behavioral Health Medicaid Waiver \(alaska.gov\)](https://alaska.gov)

The screenshot shows the website for the Alaska Department of Health, Division of Behavioral Health. The page title is "1115 Behavioral Health Medicaid Waiver". The navigation menu includes Home, Divisions and Agencies, Services, News, and Contact Us. The breadcrumb trail is: DHSS Reorganization > Department of Health > Behavioral Health > 1115 Behavioral Health Medicaid Waiver. The main content area is divided into three columns. The left column is titled "How to get help" and provides contact information for the Medicaid Services Section. The middle column is titled "1115 Behavioral Health Medicaid Waiver" and contains two paragraphs of text. The right column is a sidebar with a "Behavioral Health" header and a "Sections" header, listing various services and sections.

State of Alaska myAlaska My Government Resident Business in Alaska Visiting Alaska State Employees

Alaska Department of Health
Division of Behavioral Health

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Home Divisions and Agencies Services News Contact Us

DHSS Reorganization > Department of Health > Behavioral Health > 1115 Behavioral Health Medicaid Waiver

How to get help

The Medicaid Services Section is available to help providers with Medicaid-related questions and offer technical assistance with facility waiver requests, billing, rates, or other questions related to the 1115 waiver process:

mpassunit@alaska.gov
907-269-3600
Brad.Lentz@alaska.gov

1115 Behavioral Health Medicaid Waiver

Medicaid Section 1115 Demonstration Waivers provide states with flexibility to test new approaches within Medicaid to aid in redesigning and improving their health systems without increasing costs.

Alaska's 1115 Waiver

In January 2018, Alaska applied to the Centers for Medicare and Medicaid Services (CMS) for approval of an 1115 behavioral health waiver at the direction of the Alaska Legislature through SB 74. The intent is to create a data-driven, integrated behavioral health system of care for Alaskans experiencing serious mental illness, severe emotional disturbance, substance use disorder (SUD), co-occurring substance use and mental illness, and at-risk families and children.

At the guidance of CMS, the SUD component was broken out separately from the rest of the behavioral health services to move it forward more quickly in response to the growing opioid epidemic. It

Behavioral Health

- Home
- Director's Office
- Communications
- Core Services
- Division Contacts
- Well-Being Alaska

Sections

- AKAIMS
- Behavioral Health Systems & Policy
- Prevention and Early Intervention
- Fetal Alcohol Spectrum Disorder
- Medicaid Provider Assistance Services
- Behavioral Health Quality Assurance Section

Optum Alaska Website

<https://alaska.optum.com>

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Alaska - Optum Provider Portal

PARTICIPANT QUICK LINKS

- Resources & Tools
- Participant Newsletter

PROVIDER QUICK LINKS

- Sign up for Alerts
- Provider Express
- Provider Billing Services
- Service Authorizations

EXTERNAL OPTUM SITES

- Find a Provider
- Live & Work Well
- Supports and Services Manager

OPTUM ALASKA

One person, one family, one community at a time. Every individual and every family has a unique road to wellness, health, and hope. Every community has its own ways to support and assist the people who live there.

Optum manages outpatient behavioral health benefits for Alaska Medicaid participants. It is our commitment to help transform Alaska's behavioral health outpatient system by focusing on helping people reach recovery in their own health journey.

By working collaboratively with the State of Alaska to implement the goals set forth by the State and to deliver quality, efficient and effective changes, we will achieve better outcomes for Alaskans and transform the behavioral health system.

Career Opportunities

Optum Nondiscrimination Notice and Language Services, see [here](#).

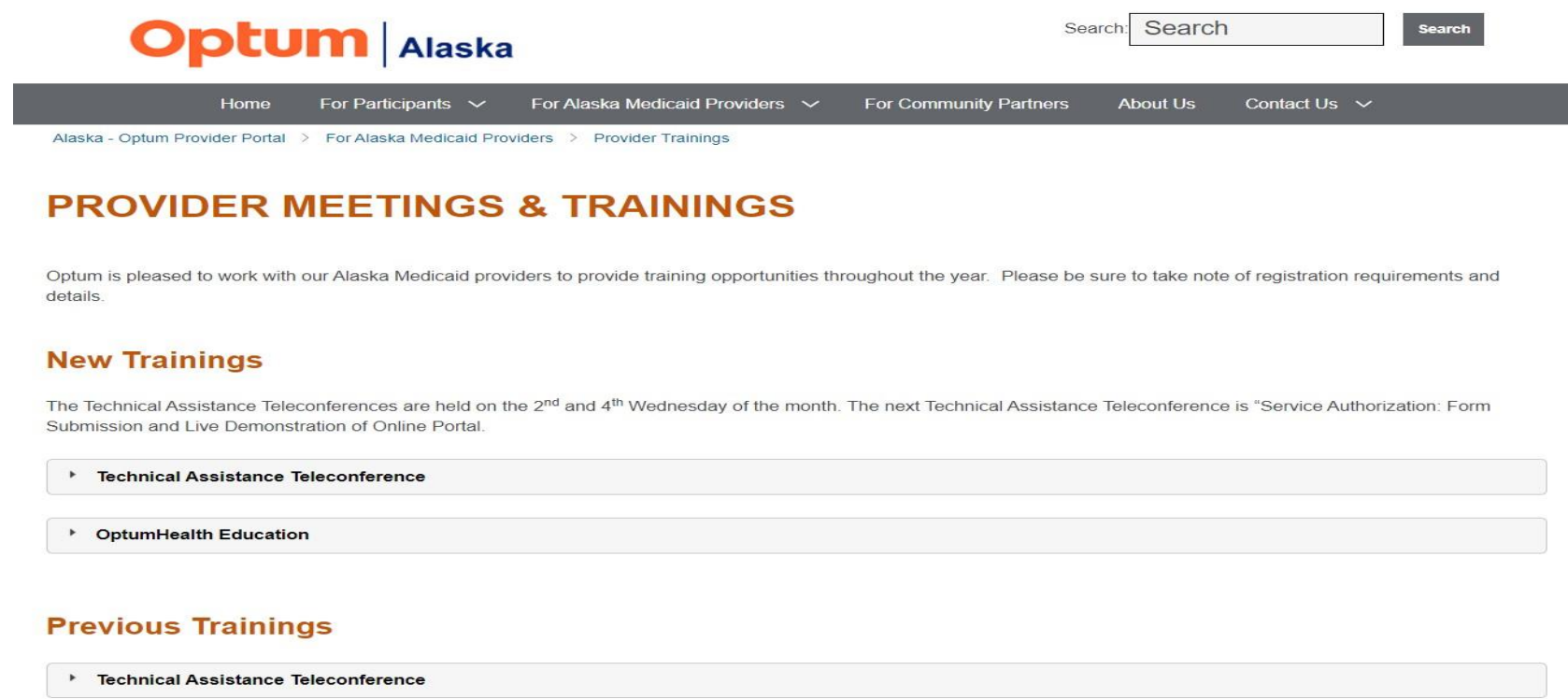
You have the right to get help and information in your language at no cost. To request an interpreter, call (800) 225-8764.

[español \(Spanish\)](#); [如果您說中文 \(Chinese\)](#); [한국어 \(Korean\)](#); [hrvatski \(Croatian\)](#); [Việt \(Vietnamese\)](#); [العربية \(Arabic\)](#); [Deutsch \(German\)](#); [Tagalog \(Tagalog\)](#); [русском \(Russian\)](#); [français \(French\)](#); [日本語 \(Japanese\)](#); [românește \(Romanian\)](#); [فارسی \(Farsi\)](#); [українською мовою \(Ukrainian\)](#); [Kreyòl ayisyen \(Haitian Creole\)](#); [हिंदी \(Hindi\)](#); [português \(Portuguese\)](#); [Ikirundi \(Bantu-Kirundi\)](#); [नेपाली \(Nepali\)](#)



Optum Alaska Provider Trainings Webpage

[Optum Alaska - Provider Trainings](#)



The screenshot shows the Optum Alaska website's provider training page. At the top left is the 'Optum | Alaska' logo. To the right is a search bar with the text 'Search' and a 'Search' button. Below the logo is a navigation menu with links: 'Home', 'For Participants', 'For Alaska Medicaid Providers', 'For Community Partners', 'About Us', and 'Contact Us'. A breadcrumb trail reads 'Alaska - Optum Provider Portal > For Alaska Medicaid Providers > Provider Trainings'. The main heading is 'PROVIDER MEETINGS & TRAININGS'. A paragraph states: 'Optum is pleased to work with our Alaska Medicaid providers to provide training opportunities throughout the year. Please be sure to take note of registration requirements and details.' Under 'New Trainings', a paragraph explains: 'The Technical Assistance Teleconferences are held on the 2nd and 4th Wednesday of the month. The next Technical Assistance Teleconference is "Service Authorization: Form Submission and Live Demonstration of Online Portal."'. Below this are two expandable items: 'Technical Assistance Teleconference' and 'OptumHealth Education'. Under 'Previous Trainings', there is one expandable item: 'Technical Assistance Teleconference'.

Contact Information for Optum Alaska

The Optum Alaska Call Center:

Phone: (800) 225-8764

Hours: 8 a.m. to 6 p.m. AKST, Monday through Friday

Optum Alaska Provider Relations:

Email: akmedicaid@optum.com

Please ensure that any email inquiries sent to Provider Relations are sent securely if PHI is present. General inquiries that do not contain PHI can be sent via regular unsecure email. When submitting an inquiry to Provider Relations, please be sure to include the following:

- Non-PHI (regular email)
- Date of Service
- Provider Name and NPI/TIN
- Reason for the inquiry (as much detail as possible)

Q&A

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