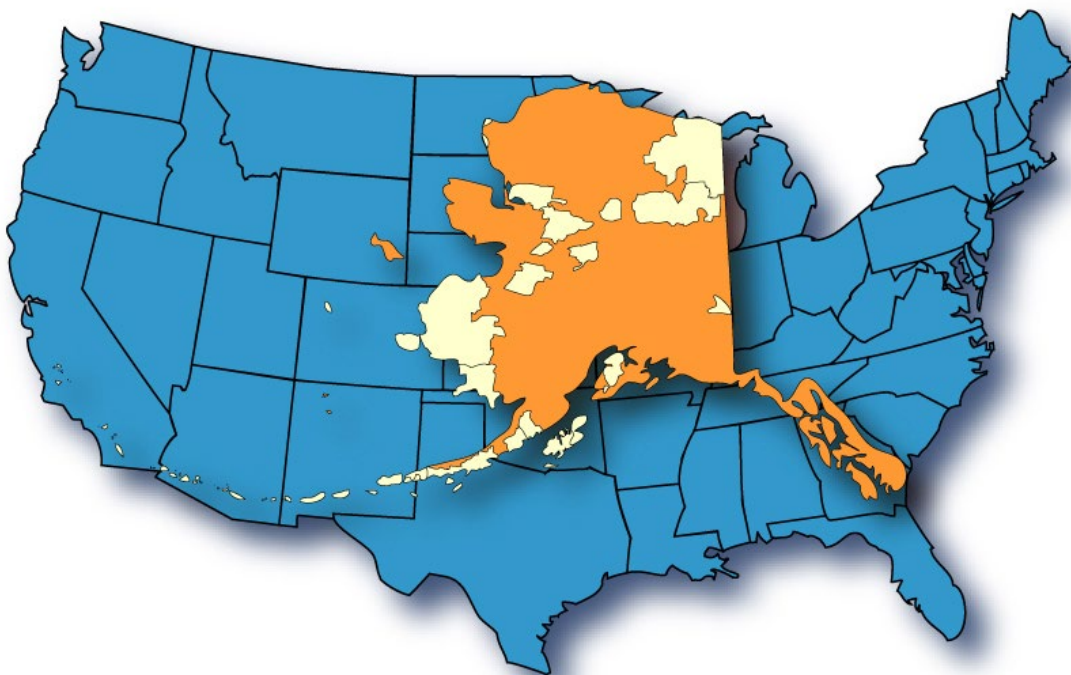


# ALASKA MEDICAID ACCESS MONITORING REVIEW PLAN



2021 REPORT

## TABLE OF CONTENTS

Executive Summary.....	3
Background .....	4
Beneficiaries, Services and Regions .....	6
Medicaid Services .....	6
Provider Adequacy.....	9
Rate Adequacy .....	12
Utilization .....	14
Monitoring Access.....	16
2021 Report Findings .....	17
Appendix A: Alaska Economic Regions .....	18
Appendix B: AK Medicaid Providers (active, instate) by State Fiscal Year.....	19
Appendix C: AK Medicaid Providers (active, instate) by State Fiscal Year and Alaska Economic Regions .....	20
Appendix D: Alaska Medicaid Provider Payment Methodologies .....	25
Appendix E: AK Medicaid Services by Provider Type, State Fiscal Year, and Month of service based on Dates of Service from Claims data .....	27
Appendix F: Public Notice .....	41

## Executive Summary

Alaska Medicaid’s Access Monitoring Review Plan (AMRP) was developed in accordance with section 1902(a)(30)(A) of the Social Security Act and 42 CFR 447.203 and 447.204 to assess beneficiary access to Medicaid covered services. Alaska’s AMRP was initially submitted to the federal Centers for Medicare and Medicaid Services (CMS) in July 2016. Evaluations of beneficiary access that were conducted in compliance with the plan for State Fiscal Year (SFY) 2017 and SFY 2018 affirmed that Alaska Medicaid reimbursement rates were “sufficient to enlist enough providers so that care and services are available... at least to the extent that such care and services are available to the general population...”

Alaska Medicaid must submit the results of the evaluations performed under Alaska Medicaid’s AMRP to CMS every three years. The AMRP must also be updated and submitted to CMS with State Plan Amendment (SPA) requests that will have the effect of reducing provider rates for services paid under fee-for-service payment arrangements.

In January of 2020, the Secretary of Health and Human Services declared a Public Health Emergency. The Secretary authorized waivers and flexibilities to allow access and promote access to care during the COVID-19 pandemic. On March 13, 2020, the President of the United States declared a national emergency and the nation aggressively responded to COVID-19. Under CMS guidance<sup>1</sup> most hospitals stopped providing elective procedures. Non emergent medical services were paused; including but not limited to physician services, chiropractic, dental, optometry, therapies, and mental health. Some of these services had a short pause then were provided via telehealth. In its response, the State of Alaska Department of Health and Social Services (DHSS), now the Department of Health (DOH) as of July 1, 2022, issued health mandates, emergency regulations, and temporary policy changes to the Alaska Medicaid program. While there was a distinct decrease in Medicaid services in SFY 2020, the decrease slowed down in SFY 2021. The State continued to provide access to care by expanding telehealth, lifting certain requirements to increase flexibilities, and increasing relief.

Based on the AMRP methods of review completed through SFY 2021 that evaluated provider enrollment, beneficiary utilization and provider payment rates, the State of Alaska concludes that Alaska’s Medicaid fee-for-service payments remain in compliance with and support the access standards in Section 1902(1)(30)(A) of the Social Security Act and 42 CFR 447.203 and 447.204.

Alaska Medicaid allows providers to submit claims for services up to one year after the service is delivered. This allowance limits the program’s ability to evaluate recipient utilization and provider enrollment for at least one year after the end of the fiscal year. This report provides a complete analysis of provider enrollment, and recipient utilization through SFY 2021.

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<sup>1</sup> [CMS Adult Elective Surgery and Procedures Recommendations](#)

## Background

Administered by the Alaska Department of Health (DOH), the Alaska Medicaid program provides health care coverage for eligible low-income individuals including children, pregnant women, individuals with disabilities, elderly, parents of eligible children, and other eligible adults. The Alaska Medicaid program is providing coverage to 36.6 percent of Alaska's residents.

In SFY 2021, Alaska Medicaid provided coverage to approximately 267,729 beneficiaries with total expenditures of approximately \$2.34 billion.

Alaska is unique in terms of its geography, size, and population. Covering more than 663,300 square miles, Alaska is the largest state in the country, and is larger than the next three largest states (Texas, California, and Montana) combined. Uncharacteristic for its size, Alaska has the third lowest population in the United States with just 734,323 residents. With a population density of 1.1 persons per square mile, a road system accessible only by a fraction of the state, and numerous remote communities and villages, Alaska uses a framework of state, tribal, and federal resources to ensure sufficient access to health care services for its Medicaid beneficiaries.

On January 4, 2016, CMS adopted regulations at 42 C.F.R. sections 447.203 and 447.204 that require state Medicaid programs to ensure beneficiaries have access to covered services to the extent as such services are available to the public. The Alaska Medicaid AMRP was developed in accordance with these regulations and must at a minimum focus on the following service categories when delivered under fee-for-service payment arrangements:

- Behavioral health services
- Home health services
- Physician specialist services
- Pre- and post-natal obstetric services including labor and delivery
- Primary care services

Federal regulations also require the AMRP to review and monitor for three years any service affected by a Medicaid provider rate reduction to ensure beneficiary access is not significantly impacted by the reduction. A downturn in Alaska's economy led the state to implement cost containment strategies in SFY 2016, SFY 2017, and SFY 2018. In SFY 2016 and SFY 2017, Alaska implemented cost containment strategies that suspended customary inflation adjustments for specified Medicaid providers. Additional cost containment measures were implemented in SFY 2018, which sustained the suspension of inflation adjustments, as well as implemented a one-year, 5 percent reduction in payment rates for professional services paid under the federal resource-based value scale (RBRVS). Given these changes to Medicaid rates, the AMRP must also monitor access to the following additional services through SFY 2023:

- Ambulatory surgery center services
- Inpatient and outpatient hospital services
- Nursing facility services
- Professional services

In SFY 2019, cost containment measures implemented in SFY2018 were reversed and inflation was granted. On January 1, 2019, a rebase increase to community behavioral health services of about 20 percent was implemented. In SFY 2020, a one-year, 5 percent rate reduction was applied to all providers except primary care providers, critical access hospitals, federally qualified health centers, services priced at Medicare rates such as durable medical equipment and hospice, providers paid at billed charges such as taxis, and select other providers whose rates have not been adjusted in several years such as private duty nursing services. Annual inflation was also withheld for providers who typically receive inflation. In SFY 2020 additional cost containment strategies were adopted, requiring the following provider types to also be subject to AMRP monitoring thru 2023:

- Additional Behavioral Health services, Behavioral Health Autism, and Behavioral Analyst services
- Transportation and Lodging services
- Personal Care services
- Nursing services
- Dental services

In SFY 2021, the 5 percent rate reduction was reversed, and inflation was granted.

To fulfill federal AMRP monitoring requirements, Alaska Medicaid applies the same evaluation and review criteria to all services covered under the plan. All services are reviewed at the same time for reliability purposes as well. Using these strategies ensures access is evaluated consistently and facilitates the monitoring of the impact of rate reductions on access.

## Beneficiaries, Services and Regions

### Medicaid Beneficiaries

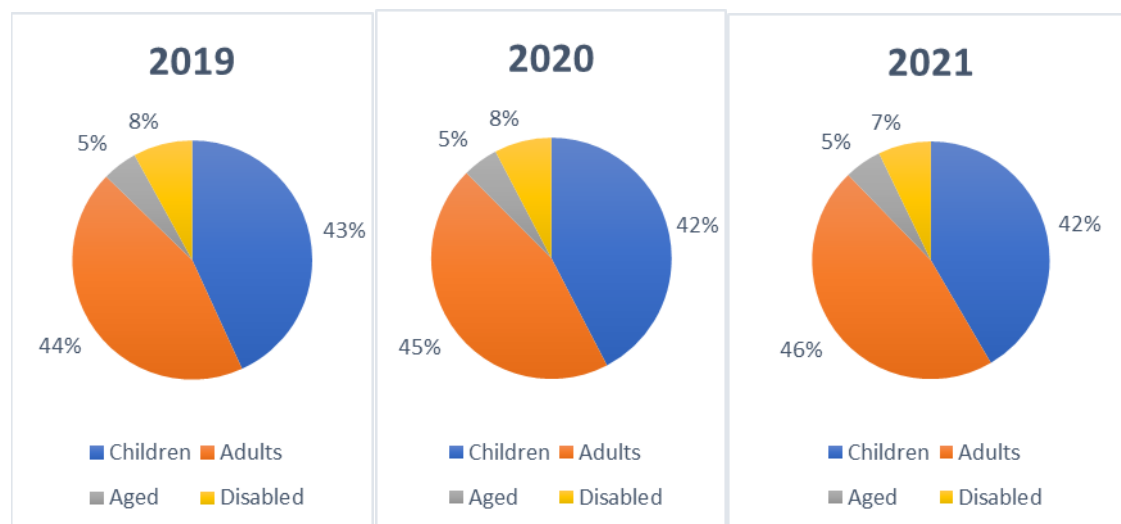
On September 1, 2015, the State of Alaska expanded its Medicaid program (Medicaid expansion) to cover individuals between the ages of 19 and 64, who have no dependent children, earn less than 133% of the federal poverty level for Alaska, and are otherwise ineligible for any other Medicaid or Medicare program.

To protect the members’ privacy and for ease of reporting, eligible individuals (see “Background” on page 3) have been grouped by Eligibility Category. Children include all children age birth through 20 years old. Adults are members who are 21 through 64 years old. The Aged group includes members 65 years of age and older, while the Disabled group includes members with a permanent disability as described by the Social Security Administration.

Figure 1. Alaska Medicaid Beneficiary Enrollment by Eligibility Category PER STATE FISCAL YEAR

Eligibility Category	2019	2020	2021
Children	111,520	110,406	111,286
Adults	113,855	117,705	123,651
Aged	12,232	12,490	13,549
Disabled	20,657	20,066	19,243
Total	258,264	260,667	267,729

Figure 2. Distribution of Alaska Medicaid Beneficiary Enrollment by Eligibility Category Per state fiscal year



### Medicaid Services

The Alaska Medicaid program covers all mandatory services required under 42 U.S.C. 1396 – 1396p, plus several optional and waiver services. Alaska Medicaid’s AMRP primarily focuses on the five service categories paid under fee-for-service payment arrangements required in the federal regulations. These service categories include primary care services; physician specialist services; behavioral health services; pre- and post-natal obstetric services including labor and deliver; and home health services. This plan also includes a review of additional services paid under fee-for-service arrangements when the state takes action to reduce payment rates for such services. Waiver services are not included in the AMRP.

## Medicaid Regions

Alaska’s unique geography and multitude of small communities poses challenges to the delivery of health care services. These challenges affect all Alaskans, not just those participating in Medicaid. The federal Medicare program uses “Medicare Advantage County Types” (MACT) for evaluating Medicare access issues. When considering Alaska’s uniqueness, the MACT classifies 16 of Alaska’s 19 boroughs as “Counties with Extreme Access Considerations [CEAC].”<sup>2</sup> Alaska’s Medicare CEAC regions consist of small towns, villages, and bush communities. The distance of these communities from a health facility can range from 14 air miles to over 1,190 air miles.

In addition to the CEACs, the MACT classifies each of Alaska’s largest communities into different categories. According to the MACT, Alaska’s most populous region, the Anchorage Municipality, is classified as a metro area; the next largest community, Fairbanks, is classified as a micro area; and the third largest community, Juneau, is classified as a rural area. All other communities are classified as CEACs.

Alaska Medicaid considered use of the Medicare MACT defined geographic areas during development of the AMRP. However, after analyzing several of the individual CEACs, it was discovered that the populations in many of these areas are so small, reporting data in the AMRP on a CEAC community-by-community basis could violate federal Health Information Portability and Accountability Act (HIPAA) regulations. Due to the level of detail provided, such a breakout could allow a reader to determine an individual’s identity and Medicaid status by comparing the data to other basic, publicly available community information.

To ensure privacy and HIPAA compliance, rather than utilize the MACT described above, Alaska is drawing from the objective time and distance standards used by its Department of Labor and Workforce Development (DOLWD) for population and census work. The DOLWD organizes Alaska into six economic regions. Alaska Medicaid has chosen to use these regions to fulfill the requirements of the AMRP (see Appendix A for a map of the regions). Figure 3 includes a breakdown of the six economic regions utilized by the AMRP, including the overall population and the boroughs or census areas in each.

Figure 3. Alaska Economic Regions annual state population

ALASKA ECONOMIC REGIONS	2019 Total Population	2020 Total Population	2021 Total Population
<b>Anchorage/Mat-Su</b> <b>Anchorage, City and Municipality of</b> <b>Matanuska-Susitna Borough</b>	398,283	398,235	398,502
<b>Gulf Coast</b> <b>Kenai Peninsula Borough</b> <b>Kodiak Island Borough</b> <b>Valdez-Cordova Census Area</b>	80,866	80,989	81,492
<b>Interior</b> <b>Denali Borough</b> <b>Fairbanks North Star Borough</b> <b>SE Fairbanks Census Area</b> <b>Yukon-Koyukuk Census Area</b>	109,847	110,822	111,306
<b>Northern</b> <b>Nome Census Area</b> <b>North Slope Borough</b> <b>Northwest Arctic Borough</b>	27,432	27,359	28,261

<sup>2</sup> See CY2015 MA HSD Provider and Facility Specialties and Network Adequacy Criteria Guidance. Verified August 15, 2022. [https://www.cms.gov/Medicare/Medicare-Advantage/MedicareAdvantageApps/Downloads/MA\\_Network\\_Adequacy\\_Criteria\\_Guidance\\_Document\\_1-10-17.pdf](https://www.cms.gov/Medicare/Medicare-Advantage/MedicareAdvantageApps/Downloads/MA_Network_Adequacy_Criteria_Guidance_Document_1-10-17.pdf)

ALASKA ECONOMIC REGIONS	2019 Total Population	2020 Total Population	2021 Total Population
<b>Southeast</b> Haines Borough Hoonah-Angoon Census Area Juneau, City and Borough of Ketchikan Gateway Borough Petersburg Borough Prince of Wales-Hyder Census Area Sitka, City and Borough of Skagway Borough, Municipality of Wrangell, City and Borough of Yakutat	72,373	72,118	72,494
<b>Southwest</b> Aleutians East Borough Aleutians West Borough Bethel Census Area Bristol Bay Borough Dillingham Census Area Kusilvak Census Area Lake and Peninsula Borough	42,206	42,043	42,268
<b>Total State Population</b>	731,283	731,566	734,323



## Provider Adequacy

### Adequacy

Using the methodology described in the Monitoring Access section below, the Alaska Medicaid program affirms that to date there are an adequate number of Medicaid providers to ensure beneficiaries have access to care, to the extent as such care and services are available to the general public.

In SFY 2021, Alaska Medicaid had 20,866 enrolled in-state providers and 8,009 out-of-state providers. These providers were active for at least some part of SFY 2021, however may not have been active for the entire year. On average, the program received 700 applications for new provider enrollments each month during SFY 2021. The provider enrollment application includes an optional field that allows the provider to indicate whether it is accepting new patients. Approximately 95.6% of in-state Alaska Medicaid providers accept new patients.

To ensure sufficient access to care for Medicaid beneficiaries residing in the more remote locations in Alaska, the Alaska Medicaid program has a robust transportation benefit with a budget of \$54.1 million in SFY 2021. The transportation services covered under the Alaska Medicaid program include an emergency response program for ground, water, and air transport, as necessary. Access is further enhanced through extensive telehealth capabilities throughout the state, much of which is possible through partnerships with tribal health entities. Currently approximately 250 Alaskan communities have telehealth capability and telehealth is being utilized throughout the state.

To begin analysis of provider adequacy in response to rate adjustments, federal regulations require the state to submit an analysis of provider enrollment for the three months prior to adoption of the rate adjustment, and for three months after. A final analysis is required after a complete data set is available. Appendix B includes the final analysis of provider enrollment for SFY 2019 through SFY 2021. With the implementation of cost containment strategies in SFY 2020, enrollment for providers affected by the rate adjustments is being monitored through SFY 2023 to determine if adjustments are needed.

As previously described, in addition to the service providers operating in Alaska's six economic regions, Alaska Medicaid employs a system of state, tribal, and federal supports to ensure sufficient access to care for its Medicaid beneficiaries. For those in the most remote locations, the program includes a robust transportation budget, an emergency response program that includes ground, water, and air transport, and extensive telehealth coverage.

Within the provider community, Alaska has an extensive network of 676 statewide safety-net providers.<sup>3</sup>

A safety-net provider is defined by two distinguishing characteristics: the provider maintains an "open door" policy offering services to all patients regardless of ability to pay; and a substantial share of the provider's patient mix consists of Medicaid beneficiaries and the uninsured.

### Provider Enrollment Review

Alaska Medicaid annually reviews enrollment levels in each provider service category covered under the AMRP. An annual loss of 10 percent or less of providers in any service category is deemed acceptable due to natural attrition such as retirement, death, relocation out-of-state, etc. Enrollment in the following provider service categories (Figure 4) are subject to annual AMRP review:

#### Provider Types under Review

- 001 - General Hospital
- 002 - Inpatient Psychiatric Hospital
- 003 - Residential Psychiatric Treatment
- 010 - SNF/ICF Facility
- 020 - Physician
- 021 - Health Professional Group

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<sup>3</sup> Directory of Alaska Health Care Safety Net Providers.

<https://health.alaska.gov/dph/Emergency/Pages/healthcare/SafetyNetDirectory.aspx> Verified August 2022.

- 025 - Chiropractor
- 030 - Dentist
- 033 - Physician Assistant
- 034 - Advanced Practice Registered Nurse
- 035 - Optometrist
- 036 - Podiatrist
- 039 - Physical Therapist
- 040 - Speech Therapist / Language Pathologist
- 041 - Occupational Therapist
- 042 - Psychologist
- 043 - Audiologist
- 044 - Hearing Aid Supplier
- 045 - Outpatient Occ, Speech, and PT Center
- 046 - Direct Entry Midwife
- 051 - Federally Qualified Health Center
- 054 - Family Planning Clinic
- 058 - Private Duty Nursing Agency
- 059 - Hospice
- 060 - Home Health Agency
- 061 - Care Coordination Agency
- 062 - Ambulatory Surgical Center
- 063 - Licensed Practical Nurse
- 064 - Registered Nurse
- 068 - Care Coordinator
- 075 - Optician
- 076 - Medical Supplier
- 081 - Radiology Provider
- 082 - Ground Ambulance Service
- 086 - Wheelchair Van Services
- 087 - Prematernal Home
- 088 - Hotel/Motel with Restaurant
- 089 - Hotel/Motel without Restaurant
- 094 - Personal Care Assistant
- 095 - Personal Care Agency
- 097 - Free Standing Birthing Center
- 102 - Air Ambulance
- 107 - Behavioral Health
- 108 - Behavioral Rehabilitation Services Center
- 112 - ESRD Free Standing or Independent Facility
- 114 - Nutritionist
- 116 - Dietician
- 117 - Certified Registered Nurse Anesthetist
- 123 - Board Certified Behavior Analyst
- 124 - Board Certified Asst Behavior Analyst
- 125 - Autism Behavior Technician
- 127 - Licensed Marriage and Family Counselor
- 128 - Licensed Professional Counselor
- 129 - Peer Support Specialist
- 130 - Substance Use Disorder Counselor
- 131 - Behavioral Health Clinical Associate
- 132 - MH Professional Clinician

Providers are identified by determining the number of rendering providers delivering Medicaid services in each service category. For some provider types, such as behavioral health providers, an agency is identified as the rendering provider although individual providers deliver the services. When agencies are identified as the rendering provider, the number of available providers is underreported.

## Provider Enrollment Findings

From July 1, 2020, to June 30, 2021, the overall in-state Alaska Medicaid provider base increased by 20.02%. Various individual Provider Type groups saw increases and decreases within their individual provider type group. There was an increase of 9.59% of the providers, inclusive of out-of-state providers, under the AMRP review thus, access to care from a provider adequacy perspective remains intact.

## Rate Adequacy

### Adequacy

Medicaid rates in Alaska are deemed sufficient to ensure access to care for Alaska Medicaid beneficiaries at least to the extent that such care and services are available to the general public if they meet one of the following: (1) are greater than or equal to Medicare rates; (2) are calculated from and reimburse for provider costs; or (3) pay a percentage of charges that is equivalent to reimbursing at cost. For payment rates that do not fall into one of the categories above, a complete analysis of the rate and methodology will be performed for any service category experiencing an overall statewide provider enrollment decrease of 10 percent or more following a reduction in rates.

Since most services are rendered via multiple provider types, the services are aligned as service categories rather than individual services. As such, there may be multiple Medicaid reimbursement rates and rate development methodologies in each service category.

For example, the behavioral health service category consists of five provider types. One of the provider types, inpatient psychiatric, has a Medicaid rate based on costs reported on Medicare Cost Reports. Another of the provider types included in this category, psychologist, has a Medicaid rate based on Medicare's resource-based relative value scale (RBRVS), adjusted for Alaska. The inpatient psychiatric Medicaid rate is sufficient to ensure access to care for Alaska Medicaid beneficiaries at least to the extent that such care and services are available to the general public because it reimburses those providers for allowable costs. The Medicaid rate for psychologists is deemed sufficient to ensure access to care for Alaska Medicaid beneficiaries at least to the extent that such care and services are available to the general public because it reimburses providers at an amount that is equal to or greater than Medicare reimbursement for the same services.

### Rate Development Methodology

Alaska Medicaid's rate structure can be summarized into three main categories and a catch all: Cost; Charge; Resource Based Relative Value Scale (RBRVS); and Other. The following is an overview of how the different rates are composed:

**Cost Based Rate** – Prospective cost-based rates are calculated using Medicare Cost Reports, working trial balance, audited financial statements, and other supporting documentation. These rates are based on allowable costs, establishing a rate based on historical information.

**Charge Based Rate** – A charge-based rate is a reimbursement based on actual charges determined after the service has been provided. Alaska pays based on a percent of the charged amount typically within certain limits.

**RBRVS** – Resource Based Relative Value Scale (RBRVS) is based on the provider's work, their expenses and liability insurance costs. This payment rate is used by CMS and other providers. In December 2018, Medicaid rates for services like those provided in the Medicare program were compared to the corresponding Medicare rates. The analysis identified that Medicaid rates continue to exceed Medicare rates for those services. For professional services paid at RBRVS, Alaska Medicaid adopts the federal Relative Value Units (RVUs) and the federal Geographic Practice Cost Indices (GPCIs). The only difference in the rates are the conversion factors (CF). Alaska Medicaid's CF for SFY 2021 was 41.52; Medicare's CF for Calendar Year (CY) 2021 was 34.89. The larger CF for Alaska Medicaid means professional services were reimbursed 19.01% above Alaska Medicare rates during SFY 2021.

**Other** – "Other" services fall into the catch all category because they have rates that were set using methodologies that don't fall into the three main categories. These other rates include services that are set at Medicare rates, are modeled methodology rates, or are fee schedule rates.

## Provider Rate Findings

Based on the analysis of each provider type for each category of service subject to the AMRP, Alaska Medicaid concludes that at the writing of this report, all corresponding provider rates remain sufficient to ensure access to care for Medicaid beneficiaries, at least to the extent that such care and services are available to the general public. Appendix C includes the rate methodology for each of the provider types covered under Alaska Medicaid's AMRP.

## Utilization

### Quantitative Measures

This section uses two systems of measurement. The first utilizes quantitative measure of Medicaid claims for services rendered by providers to Medicaid beneficiaries for dates of service occurring in SFY 2021. The second employs a qualitative survey to evaluate patient experience.

Access to care is largely driven by provider adequacy, and provider adequacy is greatly incentivized and maintained by program payment rates. Access to care is deemed sufficient when there is an adequate number of providers delivering services at existing Medicaid provider payment rates. The analysis of provider enrollment in SFY 2020 and 2021 reveals an increase of 20.18% in overall enrollment. With this established, the AMRP next evaluates utilization to ensure there are no disruptions or imbalances that could compromise access to care.

Medicaid beneficiary service utilization is measured by provider type and reviewed by region to identify any signs of disruption or imbalance. Region assignment is determined by the recipient's location rather than where the service is physically rendered. Due to Alaska's unique geography and low overall population, many beneficiaries travel to other regions to receive services. Using the beneficiary's home locale reveals the extent to which Medicaid beneficiaries from each region access and use services, rather than the extent services are delivered in a particular region. Federal regulations require the AMRP to provide a review of utilization for the three months prior to adoption of a rate adjustment and for three months after, and then a final analysis after a year of complete data is available.

Figure 5 includes a table of Medicaid recipient utilization data for State Fiscal Years 2019, 2020, and 2021. The table reflects the average number of services an Alaska Medicaid beneficiary receives during the year.

As Medicaid enrollment increases (See Figure 1), the average number of utilization encounters is expected to decrease. This trend is reflected in Figure 5. A greater than 10% reduction per enrollee encounters will be reviewed to ensure beneficiary access to providers has not been impacted by a reduction in the provider rates. Service utilization information was derived from claims paid by the Alaska Medicaid program during the applicable year.

Figure 5. Medicaid Utilization – Average number of Encounters per Enrollee per state fiscal year

Program	2019	2020	2021
<b>Children</b>	10.82	9.95	9.12
<b>Adults</b>	13.53	12.60	13.41
<b>Aged</b>	41.17	37.52	33.89
<b>Disabled</b>	72.09	71.32	64.32
<b>Average Overall</b>	18.35	17.19	16.32

### Qualitative Survey

Alaska Medicaid uses the Consumer Assessment of Health Plans and Systems Experience of Care Survey (CAHPS) to measure patient experience and access to care from the patient's perspective for primary care services delivered to children. In SFY 2020, the State issued a competitive solicitation for qualified vendors to complete the SFY 2021 survey and report; Symphony Performance Health Analytics was the successful bidder. The SFY 2021 report is based on services provided from October 1, 2020, thru March 1, 2021, and is solely focused on children's services at this time as opposed to both children and adults as done in the past. It is important to note that this review period was during the onset of the Covid Pandemic.

The CAHPS survey results identify areas of opportunity (where improvement in performance could be made) and strengths (or "power"). The survey results showed that Alaska's Medicaid program is strong in customer service courtesy and respect, getting routine care, rating of personal doctors. There are

opportunities for improvement in processes such as making forms easier to complete, in the availability of services, getting urgent care, overall feelings towards specialists, as well as customer service information provision during the pandemic.

### Utilization Findings

Utilization appears to have decreased by 2.47% overall from SFY 2020 to SFY 2021. Utilization per month for each state fiscal year demonstrates a fluctuation of services month to month. For SFY 2021 the fluctuation occurred early in the SFY due to Covid-19. It is notable that several provider groups saw a fluctuation of services with an increase of services in the last quarter of SFY2021; there are a few outliers Speech Therapy, audiologist, Direct entry midwife, Family planning, prematernal home and private duty nursing. For some providers, service limits were imposed in SFY 2020 and are being reflected in SFY 2021. A tribal entity, Yukon Kuskokwim Health Center closed its prematernal home in Bethel, this explains the decrease in services in these areas. See Appendix E.

## Monitoring Access

To ensure continued access to care for Medicaid Beneficiaries, Alaska Medicaid regularly monitors Medicaid enrollment and claims data related to the number of enrolled beneficiaries, number of enrolled providers, provider payment rates, utilization, system quality, and results of any corrective actions necessary to support access. Each year these items are evaluated to identify and analyze trends related to beneficiary access to care. CMS has reviewed and accepted the following actions the program will take during the annual review process should the analysis reveal a downward trend in any of the areas notice below:

### Rate Changes

In the event a Medicaid fee-for-service payment rate is decreased, the corresponding service will be added to the AMRP for a review period of three years. Prior to making the decision to decrease a Medicaid fee-for-service rate, Alaska Medicaid will evaluate the most recent data trends from its AMRP to ensure access to care is sufficient at the time the rate is reduced.

### Enrolled Providers

At least once each fiscal year, Alaska Medicaid will identify the number of enrolled providers by category of service and region. If the analysis reveals greater than a 10 percent reduction in the number of providers delivering a specific service, Alaska Medicaid will extensively research the circumstances leading to the reduction in providers.

### Utilization

At least once each state fiscal year, Alaska Medicaid will identify the volume of Medicaid services rendered by provider type and region. A greater than 15 percent drop in utilization that corresponds with a 10 percent loss of providers delivering the service will be extensively reviewed.

### System Quality

At least once each state fiscal year, Alaska Medicaid will review results from the Consumer Assessment of Health Plans and Systems Surveys to evaluate patient experience and system quality for primary care services.

### Corrective Action

If at any point Alaska Medicaid finds that access to care is not sufficient, it will assess the precise circumstances causing the deficiencies and take immediate corrective action. In addition, if analysis of the provider enrollment and utilization components of the AMRP reveal that a 10 percent reduction in the number of providers delivering a specific service has resulted in lower levels of utilization, Alaska Medicaid will extensively evaluate the precise circumstances for the reduction in providers and take immediate action to preserve access to the service.



## 2021 Report Findings

The Alaska Medicaid program has seen an increase (20.02%) in overall statewide provider enrollment from 2020 through 2021 as noted in the Provider Enrollment Findings section of this report. At the same time, beneficiary enrollment decreased slightly by 1.61%. Utilization measured by the number of Medicaid encounters per beneficiary decreased by 5.05%; this is explained by the continuation of the Covid-19 pandemic and the change in provider enrollment policies.

After having reviewed provider enrollment, payment rates, and utilization as required under the AMRP, the State of Alaska concludes that Alaska's Medicaid fee-for-service payments continue to comply with and support the access standards in Section 1902(a)(30)(A) of the Social Security Act and 42 CFR 447.203 and 447.204.

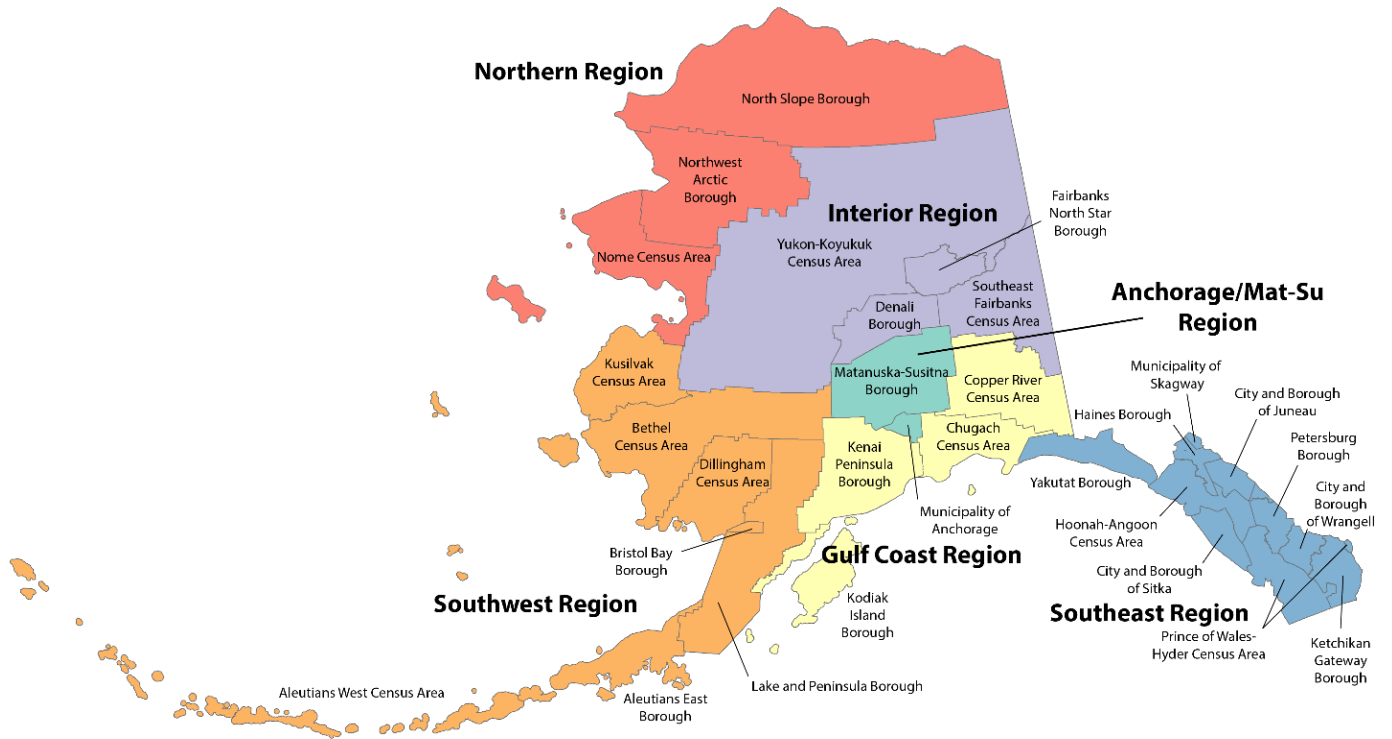
## Report Submission and Public Input

Alaska's AMRP is submitted to the federal Centers for Medicare and Medicaid Services (CMS) at least every three years. The report was first submitted to CMS in 2016. This interim report was required for submission of a State Plan Amendment (SPA) that had the effect of adjusting provider rates. The SPA submission followed rate adjustments that were made in SFY 2020. These adjustments include a 5 percent reduction in rates for all providers except primary care providers, critical access hospitals and federally qualified health centers; as well as withhold of inflation for SFY 2020. This follows the inflationary increase granted in SFY 2019 along with the return of the 5 percent rate cuts for the SFY 2018 affected provider type hospitals and ambulatory surgery centers. This also follows a January 1, 2019, rebase increase to community behavioral health services of about 20 percent. The 2020 final report includes the three months prior and post utilization evaluation for the services affected by the SFY 2020 rate adjustments.

Prior to submission to CMS, Alaska Medicaid presented the results of the AMRP for review to the Alaska Medical Care Advisory Committee (MCAC) on September 21, 2022, for feedback and approval. The AMRP was publicly noticed for purposes of sharing the interim results and receiving public comment. The AMRP was posted for public comment on September 22, 2022 and remained active for comment closing at the end of business on October 28, 2022. There were two public comments received. Appendix F includes a copy of the public announcements.

Appendix A: Alaska Economic Regions

# Alaska Economic Regions



Source: Alaska Department of Labor and Workforce Development, Research and Analysis Section

## Appendix B: AK Medicaid Providers (active, instate) by State Fiscal Year

Provider Types	2019 Statewide	2020 Statewide	2021 Statewide
1-General Hospital	20	19	17
2-Inpatient Psychiatric Hospital	3	3	3
3-Residential Psychiatric Treatment	5	4	4
10-SNF/ICF Facility	21	21	20
20-Physician (MD)	6,566	6,298	6,719
21-Health Professional Group	1006	1,006	1,065
25-Chiropractor	177	172	174
30-Dentist	798	761	807
33-Physician Assistant	630	666	722
34-Advanced Practice Registered Nurse	992	972	1093
35-Optometrist	178	180	190
36-Podiatrist	27	29	29
39-Physical Therapist	615	641	725
40-Speech Therapist / Language Pathologist	224	210	241
41-Occupational Therapist	235	244	279
42-Psychologist	71	77	88
43-Audiologist	48	42	46
45-Outpatient Occ, Speech, and PT center	16	15	15
46-Direct Entry Midwife	45	44	43
51-Federally Qualified Health Center	23	22	23
54-Family Planning Clinic	5	5	5
58-Private Duty Nursing Agency	1	1	1
60-Home Health Agency	14	18	16
61-Care Coordination Agency	131	128	117
62-Ambulatory Surgical Center	20	19	19
63-Licensed Practical Nurse	114	102	106
64-Registered Nurse	136	176	189
68-Care Coordinator	248	237	213
75-Optician	12	8	7
76-Medical Supplier	105	111	111
81-Radiology Provider	1	1	1
82-Ground Ambulance	49	47	48
86-Wheelchair Van Services	9	8	9
87-Prematernal Home	3	3	3
88-Hotel/Motel with Restaurant	34	34	32
89-Hotel/Motel without Restaurant	25	27	27
94-Personal Care Assistant	6041	5425	6109
95-Personal Care Agency	63	66	68
97-Free Standing Birthing Center	14	15	16
102-Air Ambulance	18	18	18
107-Behavioral Health	134	241	382
108-Behavioral Rehabilitation Service	24	20	20
112-ESRD Free Standing or Independent Facility	9	9	9
117-Certified Registered Nurse Anesthetist	158	143	156
123-Board Certified Behavior Analyst	23	31	43
125-Autism Behavior Technician	60	103	168
127-Licensed Marriage and Family Counselor	.	1	6
128-Licensed Professional Counselor	.	25	86
129-Peer Support Specialist	.	17	55
130-Substance Use Disorder Counselor	.	171	311
131-Behavioral Health Clinical Associate	.	86	1381
132-MH Professional Clinician	.	23	271

## Appendix C: AK Medicaid Providers (active, instate) by State Fiscal Year and Alaska Economic Regions

Provider Types	2020 ANCHORAGE/MAT- SU REGION (1)	2021 ANCHORAGE/MAT- SU REGION (1)	% Change 2020- 2021	2020 GULF COAST REGION (2)	2021 GULF COAST REGION (2)	% Change 2020- 2021	2020 INTERIOR REGION (3)	2021 INTERIOR REGION (3)	% Change 2020-2021
1-General Hospital	5	4	-20.00%	6	6	0.00%	1	1	0.00%
2-Inpatient Psychiatric Hospital	3	3	0.00%						
3-Residential Psychiatric Treatment	4	4	0.00%						
10-SNF/ICF Facility	5	5	0.00%	6	6	0.00%	1	1	0.00%
20-Physician (MD)	3,867	4,161	7.60%	479	502	4.80%	584	597	2.23%
21-Health Professional Group	647	684	5.72%	142	149	4.93%	114	124	8.77%
25-Chiropractor	119	119	0.00%	24	25	4.17%	14	14	0.00%
30-Dentist	397	422	6.30%	97	103	6.19%	88	95	7.95%
33-Physician Assistant	337	370	9.79%	55	59	7.27%	110	115	4.55%
34-Advanced Practice Registered Nurse	524	575	9.73%	97	112	15.46%	83	99	19.28%
35-Optometrist	111	114	2.70%	15	15	0.00%	19	23	21.05%
36-Podiatrist	15	15	0.00%	2	2	0.00%	4	4	0.00%
39-Physical Therapist	375	426	13.60%	74	82	10.81%	97	109	12.37%
40-Speech Therapist / Language Pathologist	139	164	17.99%	22	19	-13.64%	28	33	17.86%
41-Occupational Therapist	168	191	13.69%	29	35	20.69%	25	28	12.00%
42-Psychologist	58	68	17.24%	4	4	0.00%	6	6	0.00%
43-Audiologist	24	25	4.17%	2	2	0.00%	4	6	50.00%
45-Outpatient Occ, Speech, and PT center	8	8	0.00%	3	3	0.00%	2	2	0.00%
46-Direct Entry Midwife	24	23	-4.17%	6	6	0.00%	6	7	16.67%

Provider Types	2020 ANCHORAGE/MAT- SU REGION (1)	2021 ANCHORAGE/MAT- SU REGION (1)	% Change 2020- 2021	2020 GULF COAST REGION (2)	2021 GULF COAST REGION (2)	% Change 2020- 2021	2020 INTERIOR REGION (3)	2021 INTERIOR REGION (3)	% Change 2020-2021
51-Federally Qualified Health Center	9	10	11.11%	6	6	0.00%	3	3	0.00%
54-Family Planning Clinic	1	1	0.00%	2	2	0.00%	1	1	0.00%
58-Private Duty Nursing Agency	1	1	0.00%						
60-Home Health Agency	8	8	0.00%	3	3		1	1	0.00%
61-Care Coordination Agency	85	77	-9.41%	22	21		9	9	0.00%
62-Ambulatory Surgical Center	15	15	0.00%	1	1	0.00%	1	1	0.00%
63-Licensed Practical Nurse	100	102	2.00%		2		2	2	0.00%
64-Registered Nurse	161	170	5.59%		1		15	17	13.33%
68-Care Coordinator	152	138	-9.21%	34	31	-8.82%	18	16	-11.11%
75-Optician	5	5	0.00%				3	2	-33.33%
76-Medical Supplier	69	69	0.00%	22	22	0.00%	11	11	0.00%
81-Radiology Provider							1	1	0.00%
82-Ground Ambulance	5	6	20.00%	14	14	0.00%	9	9	0.00%
86-Wheelchair Van Services	8	9	12.50%						
87-Prematernal Home									
88-Hotel/Motel with Restaurant	14	13	-7.14%	2	2	0.00%	5	5	0.00%
89-Hotel/Motel without Restaurant	19	19	0.00%	1	1	0.00%	3	3	0.00%
94-Personal Care Assistant	3,659	4,146	13.31%	826	943	14.16%	396	447	12.88%
95-Personal Care Agency	38	40	5.26%	9	10	11.11%	4	4	0.00%
97-Free Standing Birthing Center	11	11	0.00%	2	3	50.00%	1	1	0.00%
102-Air Ambulance	5	5	0.00%	1	1	0.00%	3	3	0.00%
107-Behavioral Health	117	163	39.32%	34	42	23.53%	35	48	37.14%
108-Behavioral Rehabilitation Service	5	5	0.00%	2	2	0.00%	5	5	0.00%
112-ESRD Free Standing or Independent Facility	6	6	0.00%	1	1	0.00%	1	1	0.00%

Provider Types	2020 ANCHORAGE/MAT- SU REGION (1)	2021 ANCHORAGE/MAT- SU REGION (1)	% Change 2020- 2021	2020 GULF COAST REGION (2)	2021 GULF COAST REGION (2)	% Change 2020- 2021	2020 INTERIOR REGION (3)	2021 INTERIOR REGION (3)	% Change 2020-2021
117-Certified Registered Nurse Anesthetist	99	104	5.05%	19	19	0.00%	11	18	63.64%
123-Board Certified Behavior Analyst	26	36	38.46%	2	2	0.00%	3	5	66.67%
125-Autism Behavior Technician	82	130	58.54%	3	5	66.67%	17	31	82.35%
127-Licensed Marriage and Family Counselor	.	2		.	1		.	.	
128-Licensed Professional Counselor	12	29	141.67%	1	14	1300.00%	8	11	37.50%
129-Peer Support Specialist	9	27	200.00%	7	24	242.86%	1	3	200.00%
130-Substance Use Disorder Counselor	110	173	57.27%	10	36	260.00%	51	86	68.63%
131-Behavioral Health Clinical Associate	69	788	1042.03%	14	137	878.57%	2	106	5200.00%
132-MH Professional Clinician	14	166	1085.71%	7	43	514.29%	2	17	750.00%

Provider Types	2020 NORTHERN REGION (4)	2021 NORTHERN REGION (4)	% Change 2020-2021	2020 SOUTHEAST REGION (5)	2021 SOUTHEAST REGION (5)	% Change 2020-2021	2020 SOUTHWEST REGION (6)	2021 SOUTHWEST REGION (6)	% Change 2020-2021
1-General Hospital	2	2	0.00%	5	4	-20.00%			
2-Inpatient Psychiatric Hospital									
3-Residential Psychiatric Treatment									
10-SNF/ICF Facility	2	2	0.00%	6	5	-16.67%	1	1	0.00%
20-Physician (MD)	291	332	14.09%	809	833	2.97%	268	294	9.70%
21-Health Professional Group	3	5	66.67%	95	98	3.16%	5	5	0.00%
25-Chiropractor	1	1	0.00%	14	15	7.14%			
30-Dentist	42	47	11.90%	76	81	6.58%	61	59	-3.28%
33-Physician Assistant	31	34	9.68%	63	67	6.35%	70	77	10.00%
34-Advanced Practice Registered Nurse	62	71	14.52%	117	130	11.11%	89	106	19.10%
35-Optometrist	8	11	37.50%	17	17	0.00%	10	10	0.00%
36-Podiatrist	1	1	0.00%	7	7	0.00%			
39-Physical Therapist	10	11	10.00%	74	86	16.22%	11	11	0.00%
40-Speech Therapist / Language Pathologist	2	3	50.00%	18	21	16.67%	1	1	0.00%
41-Occupational Therapist	1	1	0.00%	20	23	15.00%	1	1	0.00%
42-Psychologist	2	1	-50.00%	4	6	50.00%	3	3	0.00%
43-Audiologist	5	6	20.00%	6	6	0.00%	1	1	0.00%
45-Outpatient Occ, Speech, and PT center				2	2	0.00%			
46-Direct Entry Midwife	3	3	0.00%	5	4	-20.00%			
51-Federally Qualified Health Center				1	1	0.00%	3	3	0.00%
54-Family Planning Clinic				1	1	0.00%			
58-Private Duty Nursing Agency									
60-Home Health Agency				6	4	-33.33%			
61-Care Coordination Agency	2	2	0.00%	9	7	-22.22%	1	1	0.00%
62-Ambulatory Surgical Center				1	1	0.00%	1	1	0.00%
63-Licensed Practical Nurse									
64-Registered Nurse					1				
68-Care Coordinator	7	6	-14.29%	19	17	-10.53%	7	5	-28.57%

Provider Types	2020 NORTHERN REGION (4)	2021 NORTHERN REGION (4)	% Change 2020-2021	2020 SOUTHEAST REGION (5)	2021 SOUTHEAST REGION (5)	% Change 2020-2021	2020 SOUTHWEST REGION (6)	2021 SOUTHWEST REGION (6)	% Change 2020-2021
75-Optician									
76-Medical Supplier				9	9	0.00%			
81-Radiology Provider									
82-Ground Ambulance	3	3	0.00%	12	12	0.00%	4	4	0.00%
86-Wheelchair Van Services									
87-Prematernal Home	1	1	0.00%				2	2	0.00%
88-Hotel/Motel with Restaurant	3	3	0.00%	6	5	-16.67%	4	4	0.00%
89-Hotel/Motel without Restaurant				4	3	-25.00%		1	
94-Personal Care Assistant	20	23	15.00%	387	416	7.49%	137	134	-2.19%
95-Personal Care Agency	2	1	-50.00%	10	10	0.00%	3	3	0.00%
97-Free Standing Birthing Center				1	1	0.00%			
Provider Types	3	3	0.00%	5	5	0.00%	1	1	0.00%
107-Behavioral Health	3	18	500.00%	49	68	38.78%	3	43	1333.33%
108-Behavioral Rehabilitation Service	2	2	0.00%	5	5	0.00%	1	1	0.00%
112-ESRD Free Standing or Independent Facility				1	1	0.00%			
117-Certified Registered Nurse Anesthetist				11	13	18.18%	3	2	-33.33%
123-Board Certified Behavior Analyst									
125-Autism Behavior Technician				1	2	100.00%			
127-Licensed Marriage and Family Counselor	.	.		1	3	200.00%	.	.	
128-Licensed Professional Counselor	.	6		4	24	5	.	2	
129-Peer Support Specialist	.	.		.	1		.	.	
130-Substance Use Disorder Counselor	.	2		.	5		.	9	
131-Behavioral Health Clinical Associate	.	24		1	249	248	.	77	
132-MH Professional Clinician	.	20		.	24		.	1	



## Appendix D: Alaska Medicaid Provider Payment Methodologies

<b>Provider Type Code with Description</b>	<b>Payment Methodology</b>
001 - General Hospital	Cost
002 - Inpatient Psychiatric Hospital	Cost
003 - Residential Psychiatric Treatment	Cost
010 - SNF/ICF Facility	Cost
020 - Physician (MD)	RBRVS/ Above Medicare
021 - Health Professional Group	RBRVS/ Above Medicare
025 - Chiropractor	RBRVS/ Above Medicare
030 - Dentist	RBRVS/ Above Medicare
033 - Physician Assistant	RBRVS/ Above Medicare
034 - Advanced Practice Registered Nurse	RBRVS/ Above Medicare
035 - Optometrist	RBRVS/ Above Medicare
036 - Podiatrist	RBRVS/ Above Medicare
039 - Physical Therapist	RBRVS/ Above Medicare
040 - Speech Therapist / Language Pathologist	RBRVS/ Above Medicare
041 - Occupational Therapist	RBRVS/ Above Medicare
042 - Psychologist	RBRVS/ Above Medicare
043 - Audiologist	RBRVS/ Above Medicare
044 - Hearing Aid Supplier	Cost
045 - Outpatient Occ, Speech, and PT Center	RBRVS/ Above Medicare
046 - Direct Entry Midwife	RBRVS/ Above Medicare
051 - Federally Qualified Health Center	Cost
054 - Family Planning Clinic	Charges
058 - Private Duty Nursing Agency	Charges
059 - Hospice	Other
060 - Home Health Agency	Other
061 - Care Coordination Agency	Other
062 - Ambulatory Surgical Center	Other
063 - Licensed Practical Nurse	Other
064 - Registered Nurse	Other
068 - Care Coordinator	Other
075 - Optician	RBRVS/ Above Medicare
076 - Medical Supplier	Charges
081 - Radiology Provider	RBRVS/ Above Medicare
082 - Ground Ambulance Service	Other
086 - Wheelchair Van Services	Other
087 - Prematernal Home	Other
088 - Hotel/Motel with Restaurant	Other
089 - Hotel/Motel without Restaurant	Other
094 - Personal Care Assistant	Other
095 - Personal Care Agency	Other
097 - Free Standing Birthing Center	Other
102 - Air Ambulance	Other
107 - Behavioral Health	Other
108 - Behavioral Rehabilitation Services Center	Other

Provider Type Code with Description	Payment Methodology
112 - ESRD Free Standing or Independent Facility	Charges
114 - Nutritionist	RBRVS/ Above Medicare
116 - Dietician	RBRVS/ Above Medicare
117 - Certified Registered Nurse Anesthetist	RBRVS/ Above Medicare
123 - Board Certified Behavior Analyst	Other
124 - Board Certified Asst Behavior Analyst	Other
125 - Autism Behavior Technician	Other
127 - Licensed Marriage and Family Counselor	Other
128 - Licensed Professional Counselor	Other
129 - Peer Support Specialist	Other
130 - Substance Use Disorder Counselor	Other
131 - Behavioral Health Clinical Associate	Other
132 - MH Professional Clinician	Other

- 1 80% of billed charges
- 2 Paid under former Medicare "Grouper" methodology
- 3 75% of state weighted average of 1day vaginal hospital stay
- 4 Fee Schedule

## Appendix E: AK Medicaid Services by Provider Type, State Fiscal Year, and Month of service based on Dates of Service from Claims data.

### 001 - General Hospital

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	19,670	21,228	19,033	-10.34%
B-August	20,584	20,550	18,345	-10.73%
C-September	19,012	20,241	19,680	-2.77%
D-October	20,835	20,865	20,900	0.17%
E-November	18,936	19,795	19,066	-3.68%
F-December	18,914	20,583	19,046	-7.47%
G-January	22,555	22,132	20,165	-8.89%
H-February	21,002	20,246	18,838	-6.95%
I-March	21,888	17,257	22,439	30.03%
J-April	22,220	11,343	22,482	98.20%
K-May	22,027	15,442	21,691	40.47%
L-June	19,854	17,547	20,718	18.07%

### 002 - Inpatient Psychiatric Hospital

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	106	102	82	-19.61%
B-August	113	113	101	-10.62%
C-September	129	116	89	-23.28%
D-October	121	104	94	-9.62%
E-November	113	94	78	-17.02%
F-December	91	112	65	-41.96%
G-January	93	113	77	-31.86%
H-February	121	128	77	-39.84%
I-March	133	99	74	-25.25%
J-April	118	74	108	45.95%
K-May	109	65	106	63.08%
L-June	99	70	131	87.14%

## 003 - Residential Psychiatric Treatment Center

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	393	422	989	134.36%
B-August	395	398	924	132.16%
C-September	420	399	935	134.34%
D-October	394	410	1,064	159.51%
E-November	408	406	1,024	152.22%
F-December	433	491	1,134	130.96%
G-January	441	475	1,150	142.11%
H-February	423	446	1,017	128.03%
I-March	490	469	1,190	153.73%
J-April	488	411	1,074	161.31%
K-May	496	477	1,062	122.64%
L-June	488	958	919	-4.07%

## 010 - SNF/ICF Facility

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	629	646	694	7.43%
B-August	644	649	658	1.39%
C-September	632	632	667	5.54%
D-October	631	661	665	0.61%
E-November	629	663	674	1.66%
F-December	624	666	678	1.80%
G-January	625	658	670	1.82%
H-February	619	652	675	3.53%
I-March	641	675	649	-3.85%
J-April	647	650	668	2.77%
K-May	636	673	661	-1.78%
L-June	644	689	645	-6.39%

## 020 - Physician (MD)

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	1,743	1,848	1,368	-25.97%
B-August	2,076	1,647	1,353	-17.85%
C-September	1,758	1,756	1,501	-14.52%
D-October	2,034	1,862	1,329	-28.63%
E-November	1,814	1,537	1,197	-22.12%
F-December	1,571	1,600	1,300	-18.75%
G-January	2,204	1,909	1,303	-31.74%
H-February	1,837	1,472	1,234	-16.17%
I-March	1,857	1,245	1,480	18.88%
J-April	2,135	1,094	1,614	47.53%
K-May	1,978	1,272	1,310	2.99%
L-June	1,565	1,413	1,360	-3.75%

## 021 - Health Profession Group

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	114,610	120,272	111,755	-7.08%
B-August	125,253	122,208	111,449	-8.80%
C-September	112,181	120,072	114,475	-4.66%
D-October	127,859	129,178	118,892	-7.96%
E-November	111,773	111,632	101,942	-8.68%
F-December	104,093	112,434	105,746	-5.95%
G-January	129,704	129,379	110,864	-14.31%
H-February	120,599	118,577	109,014	-8.06%
I-March	126,047	101,265	127,359	25.77%
J-April	131,784	75,584	126,930	67.93%
K-May	126,933	92,499	118,419	28.02%
L-June	112,709	109,917	122,823	11.74%

## 025 – Chiropractor

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	80	58	51	-12.07%
B-August	119	56	54	-3.57%
C-September	118	64	65	1.56%
D-October	116	74	55	-25.68%
E-November	76	54	70	29.63%
F-December	62	56	79	41.07%
G-January	69	58	54	-6.90%
H-February	64	37	60	62.16%
I-March	81	45	95	111.11%
J-April	80	16	77	381.25%
K-May	76	45	80	77.78%
L-June	59	54	77	42.59%

## 030 – Dentist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	17,817	12,593	15,247	21.08%
B-August	21,090	16,015	15,630	-2.40%
C-September	18,140	25,484	16,434	-35.51%
D-October	20,294	16,745	16,233	-3.06%
E-November	17,233	12,150	12,880	6.01%
F-December	14,796	11,873	13,620	14.71%
G-January	19,881	18,981	14,713	-22.49%
H-February	17,961	16,713	15,405	-7.83%
I-March	19,334	11,062	18,298	65.41%
J-April	20,619	2,020	17,806	781.49%
K-May	18,688	8,360	15,346	83.56%
L-June	16,042	14,301	16,344	14.29%

## 034 - Advanced Practice Registered Nurse

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	185	211	187	-11.37%
B-August	242	198	198	0.00%
C-September	200	206	209	1.46%
D-October	206	198	199	0.51%
E-November	181	189	211	11.64%
F-December	197	175	183	4.57%
G-January	237	178	199	11.80%
H-February	183	161	212	31.68%
I-March	203	153	229	49.67%
J-April	253	207	184	-11.11%
K-May	217	184	166	-9.78%
L-June	218	176	175	-0.57%

## 039 - Physical Therapist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	77	61	56	-8.20%
B-August	85	72	34	-52.78%
C-September	61	37	48	29.73%
D-October	63	77	38	-50.65%
E-November	56	67	32	-52.24%
F-December	45	50	37	-26.00%
G-January	72	56	29	-48.21%
H-February	45	40	42	5.00%
I-March	58	33	59	78.79%
J-April	55	9	38	322.22%
K-May	83	20	59	195.00%
L-June	67	50	57	14.00%

## 040 - Speech Therapist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	318	219	265	21.00%
B-August	282	249	252	1.20%
C-September	291	235	233	-0.85%
D-October	351	295	255	-13.56%
E-November	265	176	230	30.68%
F-December	231	193	208	7.77%
G-January	320	285	185	-35.09%
H-February	288	284	169	-40.49%
I-March	245	242	223	-7.85%
J-April	296	267	207	-22.47%
K-May	224	248	178	-28.23%
L-June	258	309	164	-46.93%

### 041 - Occupational Therapist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	46	21	57	171.43%
B-August	70	29	92	217.24%
C-September	47	29	105	262.07%
D-October	44	37	103	178.38%
E-November	64	48	93	93.75%
F-December	57	64	118	84.38%
G-January	87	57	116	103.51%
H-February	73	40	115	187.50%
I-March	66	45	136	202.22%
J-April	69	29	146	403.45%
K-May	83	47	126	168.09%
L-June	29	55	81	47.27%

### 042 – Psychologist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	80	104	70	-32.69%
B-August	82	78	57	-26.92%
C-September	80	95	67	-29.47%
D-October	95	71	72	1.41%
E-November	94	62	52	-16.13%
F-December	86	55	57	3.64%
G-January	104	88	54	-38.64%
H-February	134	78	65	-16.67%
I-March	104	62	61	-1.61%
J-April	125	52	65	25.00%
K-May	93	56	93	66.07%
L-June	108	76	82	7.89%

### 043 – Audiologist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	26	52	25	-51.92%
B-August	34	39	25	-35.90%
C-September	27	18	35	94.44%
D-October	25	35	16	-54.29%
E-November	37	17	18	5.88%
F-December	21	20	12	-40.00%
G-January	41	25	29	16.00%
H-February	29	32	22	-31.25%
I-March	39	32	25	-21.88%
J-April	36	14	38	171.43%
K-May	13	17	18	5.88%
L-June	23	29	21	-27.59%

## 044 - Hearing Aid Supplier

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	228	144	114	-20.83%
B-August	252	154	157	1.95%
C-September	199	111	153	37.84%
D-October	236	161	159	-1.24%
E-November	196	119	110	-7.56%
F-December	171	115	162	40.87%
G-January	199	159	139	-12.58%
H-February	113	148	148	0.00%
I-March	123	146	141	-3.42%
J-April	133	99	131	32.32%
K-May	157	113	132	16.81%
L-June	131	131	161	22.90%

## 045 - Outpatient Occup, Speech, and PT Center

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	1,134	1,190	1,028	-13.61%
B-August	1,263	1,022	1,021	-0.10%
C-September	997	956	1,073	12.24%
D-October	1,215	1,257	1,095	-12.89%
E-November	1,015	973	912	-6.27%
F-December	853	930	829	-10.86%
G-January	1,175	1,113	983	-11.68%
H-February	1,109	1,194	947	-20.69%
I-March	1,056	909	1,110	22.11%
J-April	1,216	826	1,062	28.57%
K-May	1,224	803	931	15.94%
L-June	1,123	1,011	1,084	7.22%

## 046 - Direct Entry Midwife

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	23	29	50	72.41%
B-August	25	20	35	75.00%
C-September	18	14	51	264.29%
D-October	34	27	50	85.19%
E-November	39	26	72	176.92%
F-December	29	26	106	307.69%
G-January	53	26	69	165.38%
H-February	35	29	62	113.79%
I-March	25	35	38	8.57%
J-April	33	30	21	-30.00%
K-May	31	76	26	-65.79%
L-June	36	72	41	-43.06%



## 051 - Federally Qualified Health Center

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	5,606	5,742	5,542	-3.48%
B-August	6,521	6,074	5,488	-9.65%
C-September	5,632	6,098	5,813	-4.67%
D-October	5,982	6,661	5,975	-10.30%
E-November	5,044	5,251	5,031	-4.19%
F-December	4,598	5,388	5,618	4.27%
G-January	6,029	6,128	5,916	-3.46%
H-February	5,628	5,814	5,943	2.22%
I-March	5,888	4,579	6,702	46.36%
J-April	6,460	4,435	6,357	43.34%
K-May	6,061	4,841	5,566	14.98%
L-June	5,264	5,552	6,126	10.34%

## 054 - Family Planning Clinic

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	358	304	267	-12.17%
B-August	393	311	258	-17.04%
C-September	301	325	233	-28.31%
D-October	357	368	294	-20.11%
E-November	337	288	186	-35.42%
F-December	252	245	241	-1.63%
G-January	337	316	258	-18.35%
H-February	279	302	259	-14.24%
I-March	312	256	269	5.08%
J-April	339	232	160	-31.03%
K-May	368	241	135	-43.98%
L-June	331	265	154	-41.89%

## 058 - Private Duty Nursing Agency

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	538	449	453	0.89%
B-August	531	444	458	3.15%
C-September	544	416	430	3.37%
D-October	459	419	405	-3.34%
E-November	480	404	423	4.70%
F-December	461	480	366	-23.75%
G-January	462	513	410	-20.08%
H-February	429	514	383	-25.49%
I-March	446	488	387	-20.70%
J-April	482	419	357	-14.80%
K-May	497	469	396	-15.57%
L-June	458	443	350	-20.99%

059 – Hospice

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	12	9	11	22.22%
B-August	8	13	13	0.00%
C-September	9	13	20	53.85%
D-October	9	17	18	5.88%
E-November	7	15	19	26.67%
F-December	8	16	20	25.00%
G-January	9	16	16	0.00%
H-February	8	9	10	11.11%
I-March	10	15	19	26.67%
J-April	5	18	24	33.33%
K-May	9	19	19	0.00%
L- June	8	14	25	78.57%

060 - Home Health Agency

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	90	113	136	20.35%
B-August	104	98	119	21.43%
C-September	91	96	130	35.42%
D-October	123	104	124	19.23%
E-November	127	94	135	43.62%
F-December	112	128	120	-6.25%
G-January	90	132	137	3.79%
H-February	87	127	125	-1.57%
I-March	117	123	171	39.02%
J-April	112	111	138	24.32%
K-May	114	107	136	27.10%
L- June	111	118	139	17.80%

061 - Care Coordination Agency

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	3,928	4,308	4,536	5.29%
B-August	3,877	4,342	4,130	-4.88%
C-September	3,901	4,271	4,482	4.94%
D-October	4,268	4,196	4,232	0.86%
E-November	4,002	4,326	4,664	7.81%
F-December	4,047	4,282	4,570	6.73%
G-January	4,223	4,299	4,635	7.82%
H-February	4,072	4,410	4,536	2.86%
I-March	4,221	4,754	4,665	-1.87%
J-April	4,328	4,683	4,648	-0.75%
K-May	4,292	4,580	4,617	0.81%
L- June	4,336	4,592	4,730	3.01%

## 062 - Ambulatory Surgical Center

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	514	469	546	16.42%
B-August	580	542	505	-6.83%
C-September	506	520	507	-2.50%
D-October	622	632	545	-13.77%
E-November	476	508	448	-11.81%
F-December	421	487	481	-1.23%
G-January	566	615	482	-21.63%
H-February	550	564	564	0.00%
I-March	552	406	607	49.51%
J-April	634	128	623	386.72%
K-May	635	381	577	51.44%
L-June	526	469	519	10.66%

## 075 – Optician

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	22	20	11	-45.00%
B-August	46	14	19	35.71%
C-September	32	21	20	-4.76%
D-October	39	21	14	-33.33%
E-November	39	14	14	0.00%
F-December	27	16	15	-6.25%
G-January	56	30	17	-43.33%
H-February	51	29	23	-20.69%
I-March	73	10	20	100.00%
J-April	43	9	39	333.33%
K-May	45	13	30	130.77%
L-June	24	23	22	-4.35%

## 076 - Medical Supplier

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	9,381	11,699	11,475	-1.91%
B-August	10,073	11,480	11,204	-2.40%
C-September	9,289	10,384	11,345	9.25%
D-October	10,414	10,816	11,525	6.56%
E-November	10,136	10,421	10,882	4.42%
F-December	9,849	10,769	11,124	3.30%
G-January	9,907	11,055	10,485	-5.16%
H-February	9,685	10,938	10,334	-5.52%
I-March	9,923	11,363	11,625	2.31%
J-April	10,161	11,255	11,334	0.70%
K-May	10,111	10,923	10,483	-4.03%
L-June	9,710	11,291	11,363	0.64%

## 081 - Radiology Provider

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	31	28	29	3.57%
B-August	45	37	8	-78.38%
C-September	8	10	9	-10.00%
D-October	7	18	14	-22.22%
E-November	11	9	14	55.56%
F-December	4	13	5	-61.54%
G-January	11	5	5	0.00%
H-February	6	14	10	-28.57%
I-March	16	7	7	0.00%
J-April	19		20	
K-May	25	10	29	190.00%
L-June	21	9	27	200.00%

## 082 - Ground Ambulance

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	2,509	2,726	2,406	-11.74%
B-August	2,601	2,512	2,368	-5.73%
C-September	2,210	2,494	2,309	-7.42%
D-October	2,443	2,390	2,352	-1.59%
E-November	2,249	2,412	2,282	-5.39%
F-December	2,464	2,554	2,306	-9.71%
G-January	2,564	2,606	2,418	-7.21%
H-February	2,256	2,430	2,020	-16.87%
I-March	2,540	2,317	2,498	7.81%
J-April	2,514	1,813	2,473	36.40%
K-May	2,556	2,298	2,488	8.27%
L-June	2,466	2,211	2,476	11.99%

## 086 - Wheelchair Van Services

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	1,646	1,617	1,911	18.18%
B-August	1,854	1,659	2,036	22.72%
C-September	1,609	1,600	1,959	22.44%
D-October	1,728	1,812	2,326	28.37%
E-November	1,326	1,594	2,147	34.69%
F-December	686	1,551	2,156	39.01%
G-January	1,037	1,679	2,238	33.29%
H-February	1,112	1,697	2,217	30.64%
I-March	1,062	1,303	2,634	102.15%
J-April	1,132	815	2,483	204.66%
K-May	1,271	938	2,373	152.99%
L-June	1,609	1,218	2,487	104.19%

## 087 - Prematernal Home

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	116	120	87	-27.50%
B-August	128	144	87	-39.58%
C-September	126	114	82	-28.07%
D-October	114	133	79	-40.60%
E-November	99	131	8	-93.89%
F-December	113	121	6	-95.04%
G-January	136	131	6	-95.42%
H-February	133	132	12	-90.91%
I-March	128	126	8	-93.65%
J-April	166	94	14	-85.11%
K-May	142	125	6	-95.20%
L-June	129	95	16	-83.16%

## 088 - Hotel/Motel with Restaurant

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	2,994	2,935	1,710	-41.74%
B-August	2,936	2,964	1,890	-36.23%
C-September	2,979	3,352	1,918	-42.78%
D-October	3,416	3,661	1,932	-47.23%
E-November	3,009	2,938	1,611	-45.17%
F-December	2,877	3,040	1,386	-54.41%
G-January	3,492	3,654	1,677	-54.11%
H-February	3,490	3,321	1,646	-50.44%
I-March	3,722	2,397	2,104	-12.22%
J-April	3,897	611	2,145	251.06%
K-May	3,669	1,099	2,253	105.00%
L-June	3,030	1,716	2,144	24.94%

## 089 - Hotel/Motel without Restaurant

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	760	735	401	-45.44%
B-August	812	693	421	-39.25%
C-September	732	695	436	-37.27%
D-October	800	760	530	-30.26%
E-November	616	692	519	-25.00%
F-December	628	578	581	0.52%
G-January	596	774	728	-5.94%
H-February	550	669	888	32.74%
I-March	631	456	1,002	119.74%
J-April	792	77	990	1185.71%
K-May	839	138	383	177.54%
L-June	702	311	231	-25.72%

## 095 - Personal Care Agency

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	27,093	24,292	19,614	-19.26%
B-August	26,329	23,377	20,130	-13.89%
C-September	25,505	23,187	19,179	-17.29%
D-October	26,235	23,085	19,277	-16.50%
E-November	24,770	21,482	19,107	-11.06%
F-December	25,384	21,967	18,911	-13.91%
G-January	25,329	21,328	18,384	-13.80%
H-February	22,984	19,672	16,145	-17.93%
I-March	25,512	21,132	19,442	-8.00%
J-April	24,650	18,817	18,765	-0.28%
K-May	24,601	19,779	18,710	-5.40%
L-June	23,555	19,535	17,608	-9.86%

## 097 - Free Standing Birthing Center

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	138	170	179	5.29%
B-August	190	167	149	-10.78%
C-September	180	160	195	21.88%
D-October	184	152	207	36.18%
E-November	164	97	157	61.86%
F-December	94	141	199	41.13%
G-January	206	168	177	5.36%
H-February	140	165	184	11.52%
I-March	152	180	201	11.67%
J-April	136	194	210	8.25%
K-May	197	173	169	-2.31%
L-June	195	183	83	-54.64%

## 102 - Air Ambulance

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	298	331	295	-10.88%
B-August	309	318	267	-16.04%
C-September	278	280	277	-1.07%
D-October	283	268	241	-10.07%
E-November	273	276	155	-43.84%
F-December	279	250	174	-30.40%
G-January	320	282	202	-28.37%
H-February	240	319	151	-52.66%
I-March	301	255	191	-25.10%
J-April	320	184	230	25.00%
K-May	326	298	269	-9.73%
L-June	330	273	295	8.06%

## 107 - Behavioral Health

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	50,686	61,387	58,444	-4.79%
B-August	51,270	61,129	56,908	-6.91%
C-September	47,782	60,561	57,779	-4.59%
D-October	52,752	68,897	61,709	-10.43%
E-November	48,475	61,729	57,441	-6.95%
F-December	46,016	60,109	61,325	2.02%
G-January	53,356	64,817	61,398	-5.27%
H-February	50,540	60,841	59,793	-1.72%
I-March	57,395	59,755	65,596	9.77%
J-April	60,391	59,557	62,306	4.62%
K-May	59,370	57,118	58,002	1.55%
L-June	56,097	59,006	58,344	-1.12%

## 108 - Behavioral Rehabilitation Services

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	385	219	300	36.99%
B-August	410	151	405	168.21%
C-September	313	209	356	70.33%
D-October	414	137	400	191.97%
E-November	370	168	345	105.36%
F-December	375	217	338	55.76%
G-January	393	214	360	68.22%
H-February	317	204	323	58.33%
I-March	471	240	334	39.17%
J-April	334	224	329	46.88%
K-May	320	271	323	19.19%
L-June	351	270	288	6.67%

## 112 - ESRD Free Standing or Independent Facility

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	547	660	585	-11.36%
B-August	560	655	628	-4.12%
C-September	529	636	643	1.10%
D-October	584	659	538	-18.36%
E-November	628	591	567	-4.06%
F-December	649	578	562	-2.77%
G-January	629	585	463	-20.85%
H-February	616	582	424	-27.15%
I-March	686	589	488	-17.15%
J-April	710	641	461	-28.08%
K-May	721	568	560	-1.41%
L-June	707	544	545	0.18%

116 - Dietician

Service Month	2019	2020	2021	% Change from 2020 to 2021
L- June			1	100.00%

117 - Certified Registered Nurse Anesthetist

Service Month	2019	2020	2021	% Change from 2020 to 2021
A-July	3	.	.	
B-August	3	1	.	
C-September	2	2	1	
D-October	1	1	.	
E-November	.	.	2	
F-December	1	.	.	
G-January	.	.	1	
H-February	1	.	2	
I-March	1	.	.	
J-April	2	.	.	
K-May	1	.	.	
L- June	.	.	1	



## Appendix F: Public Notice

This is confirmation that the Alaska Medicaid Program posted the Access Monitoring Review Plan (AMRP) on the [State of Alaska Public Notice page](#) for public comment. The report was available for two weeks, starting September 22, 2022, and closing October 28, 2022.

### Alaska Medicaid Access Monitoring Review Plan 2021 Final Report

Public comment is invited on the draft Department of Health Alaska Medicaid Access Monitoring Review Plan (AMRP) 2021 Final Report. Federal regulations require the department to annually review beneficiary access to providers enrolled to deliver services under the state Medicaid program. In addition to the annual requirement, the regulations also require an interim report when rates are adjusted for providers receiving payment under fee-for-service payment arrangements. The AMRP is due every three years, but interim reports are due more frequently should there be rate adjustments. The Alaska Medicaid AMRP 2021 Final Report is required in response to rate adjustments in state fiscal years 2019, 2020, and 2021.

The draft report is attached for public review and comment. Those interested in providing comment may do so by submitting comments through email to [heidi.barnes@alaska.gov](mailto:heidi.barnes@alaska.gov). You may enter your comments directly in the email or attach a Word document or PDF to your message.

Public comment will be accepted until close of business on Friday, October 28th, 2022.

#### Attachments, History, Details

##### Attachments

[Access Monitoring Review Plan 2021 .pdf](#)

##### Revision History

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Michael J. Dunleavy,  
Governor State of Alaska

Adam Crum, Commissioner  
Department of Health

3601 C Street, Suite 902  
Anchorage, Alaska 99503  
Phone: (907) 269-7800

<https://health.alaska.gov/>

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