



*Questions regarding this guidance may be directed to [mpassunit@alaska.gov](mailto:mpassunit@alaska.gov) in the Subject Line please note: COVID Guidance*

April 9, 2020

DBH COVID Guidance Document #5

This guidance document will address services provided in the following residential settings:

- Acute Psychiatric Hospital
- Psychiatric Residential Treatment Facilities (PRTF)
- Residential Behavioral Rehabilitation Services Level II – IV
- Residential Substance Use Disorder (SUD) under Community Behavioral Health Services (CBHS)

On April 2, 2020 the Centers for Medicaid/Medicare Services (CMS) approved portions of Alaska's 1135 Waiver request. The effective dates of the 1135 Waiver are as follows:

- Start Date: March 1, 2020
- End Date: Upon termination of the public health emergency, including any extensions

The 1135 Waiver approved State of Alaska Medicaid to extend authorizations and modify pre-approval requirements. Each of the above listed residential providers will have different procedures during this time of emergency.

**Free-Standing Acute Psychiatric Hospital (excluding DET beds) and PRTF Facilities:**

Medicaid Recipients currently admitted with a current authorization:

- The authorization will be extended until the individual can secure a safe and secure discharge
- It is not recommended that an individual remain in an Acute or a PRTF setting longer than required; however, if there is no safe discharge due to COVID-19 then the individual can remain in the facility and the current prior authorization will remain effective.

New placements in Acute or PRTF:

- New placements in both Acute and PRTF settings must continue to go through a Prior Authorization process before the individual is admitted to the facility. Providers must continue to follow all admission procedures as outlined in the Behavioral Health Inpatient Psychiatric Review Manual found at:

- <http://qualishealth.org/sites/default/files/AK-Behavioral-Health-Provider-Manual-current.pdf>

The prior authorization process for new admissions remains critical as often DBH staff assist in making travel arrangements to insure a safe and secure transport. It is also important for DBH staff maintain records and track Acute and PRTF admissions during this time of emergency. Once an individual is admitted with a Prior Authorization, this authorization will remain place and there is no need to request continuance authorizations

Providers ***must continue to enter all Utilization Review (UR)*** notes into the Comagine JIVA system and ***must submit critical incident reports*** as outlined in the Behavioral Health Inpatient Psychiatric Review Manual found at:

<http://qualishealth.org/sites/default/files/AK-Behavioral-Health-Provider-Manual-current.pdf>

During this time of emergency the frequency of UR notes in JIVA are set at:

- Acute Psychiatric – every seven (7) days
- PRTF – every 30 days

Even though the prior authorization process is suspended upon admission, the Utilization Review notes are critical for the ongoing Case Management services that Comagine will continue to provide.

***UR notes for individuals remaining in care due to lack of safe discharge providers must indicate in the UR notes all efforts the provider is pursuing to secure a safe discharge. The client must continue to actively participate in treatment services until discharge is available.***

#### **Residential Behavioral Rehabilitation Services Level II - IV:**

Youth currently admitted to a Level II – IV Residential will have their current Prior Authorization extended for as long as needed. Providers can maintain youth in a residential services until a safe and secure discharge is available.

New admissions to Level II – IV residential services are not required to obtain a Prior Authorization upon admission.

Providers who provide these services under the RCCY grant must continue to document the admissions and continued need for services as outlined in the Residential Behavioral Rehabilitation Services Handbook 2019 found at:

<http://dhss.alaska.gov/dbh/Documents/TreatmentRecovery/RBRS%20Documents/BRS%20Handbook%202019%20effective%207-1-2019.pdf>

Providers who provide these services under CBHS services must continue to document the admissions and continued need for services as outlined in 7 AAC 135.

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**When a youth must remain in care after completing treatment and cannot discharge due to COVID 19 related issues, providers must document this in the daily progress notes and indicate efforts to secure a safe discharge.**

**Residential Substance Use under CBHS:**

Individuals seeking services in a CBHS Residential SUD facility do not require prior authorization or ongoing authorization approvals to enter and remain in the facility.

However, if an individual in a Residential SUD program completes treatment and has no safe discharge plan due to COVID 19 related issues, providers can maintain the individual in services and bill the daily residential SUD rate. The client must continue to actively participate in treatment services until discharge is available.

Providers must continue to document daily progress note for these individuals and note in each progress note “continued stay due to lack of safe discharge – COVID 19”.