



September 3, 2021

## **SFY 2022 – DBH Guidance Document #2**

### **Guidance Document for Agencies using AKAIMS for Electronic Health Record AKAIMS Flexibilities Related to Cyberattack**

#### **Background**

On May 18, 2021, the Department of Health and Social Services (DHSS) identified the website dhss.alaska.gov as the target of a malware attack. As a result, several Division of Behavioral Health services were impacted, including Alaska's Behavioral Health and Substance Abuse Management System (AKAIMS).

AKAIMS Electronic Health Record (EHR) users were initially notified of the cyberattack on May 19, 2021, via DBH eMemo.

As a result of the cyberattack, DHSS had to restrict user access to public facing applications and AKAIMS EHR users were required to revert to paper documentation systems to maintain business operations. This resulted in cumbersome workflows and difficulty in managing quality assurance functions.

At this time there is no estimated date for the access to AKAIMS and other public facing applications to be restored.

#### **Purpose**

The purpose of this guidance document is to advise AKAIMS EHR users of flexibilities DBH is extending to assist in reducing the administrative burden this outage has created.

#### **Guidance**

Beginning May 18, 2021, and until further notice, providers utilizing the AKAIMS EHR functionality will be held harmless from specific regulatory clinical documentation requirements. The following provisions are intended to describe the flexibilities instituted for AKAIMS EHR users:

- The behavioral health screening as defined in 7 AAC 135.100 is not required to be dated prior to the assessment signature date. The behavioral health screening must be incorporated into any assessments used to develop a treatment plan for services after the conclusion of the hold harmless period.

- Professional behavioral health assessments as defined in 7 AAC 135.110 are not required to have a final signature prior to the development of the treatment plan or provision of behavioral health services. The professional behavioral health assessment will need to be finalized with appropriate signatures after the hold harmless period.
- The behavioral health treatment plan as defined in 7 AAC 135.120 does not require a finalized assessment or a signature by the directing clinician or client prior to delivering services. The agency is responsible to ensure the services are still delivered at an adequate skill level as defined in 7 AAC 135.120 (b)(2).
- The requirement for review of a treatment plan every 90 days, as defined in 7 AAC 135.120 (f) is waived during the hold harmless period. The agency is responsible to ensure an active treatment plan that meets the requirements of 7 AAC 135.120 is in place at the conclusion of the hold harmless period to bill Alaska Medicaid.
- Services may be delivered without a finalized treatment plan during the hold harmless period.
- Contemporaneous Record Keeping according to 7 AAC 105.230 (d)(7) and 7 AAC 105.230 (h) is required during the hold harmless period.

All other components of 7 AAC 105.230 remain in effect to demonstrate necessary information required for billing Alaska Medicaid.

Providers should keep documentation of processes instituted and followed during the entirety of the AKAIMS EHR outage.

***Questions regarding this guidance may be directed to [mpassunit@alaska.gov](mailto:mpassunit@alaska.gov). In the Subject Line please note: AKAIMS EHR Flexibilities***