## ADDITIONAL REGULATION NOTICE INFORMATION (AS 44.62.190(d))

- 1. Adopting agency: Department of Health & Social Services
- 2. General subject of regulation: <u>Medicaid Coverage</u>, <u>Revised Requirements for a Mental Health</u> <u>Physician Clinic</u>.
- 3. Citation of regulation (may be grouped): 7 AAC 135.
- 4. Department of Law file number, if any: 2019200141.
- 5. Reason for the proposed action:
  - (X) Compliance with federal law or action (identify): The Medicaid service titled *interactive psychiatric assessment using equipment and devices* is no longer a recognized service by the Centers for Medicare & Medicaid Services (CMS).
  - (X) Compliance with new or changed state statute
  - () Compliance with federal or state court decision (identify):
  - () Development of program standards
  - ( ) Other (identify):\_\_\_\_\_
- 6. Appropriation/Allocation: <u>General Fund Medicaid</u>, <u>Mental Health</u>, <u>& Federal Funds</u>.

7. Estimated annual cost to comply with the proposed action to: A private person: <u>\$0.</u> Another state agency: <u>\$0.</u> A municipality: <u>\$0.</u>

8. Cost of implementation to the state agency and available funding (in thousands of dollars):

Initial Year	Subsequent
FY2020	Years
\$	\$
\$	\$
\$460.8	\$
\$307.2	\$
\$	\$
\$	\$
\$	\$
	FY2020 \$ \$ \$460.8

9. The name of the contact person for the regulation:

Name: Rick Calcote

Title: <u>Mental Health Clinician III</u> Address: <u>3601 C St., Suite 878, Anchorage, AK 99503</u> Telephone: <u>(907) 269-3617</u> E-mail address: <u>rick.calcote@alaska.gov</u>

- 10. The origin of the proposed action:
  - \_\_X\_\_ Staff of state agency
  - \_\_\_\_\_ Federal government
  - \_\_\_\_\_ General public
  - \_\_\_\_\_ Petition for regulation change<sup>7</sup>
  - \_\_\_\_\_ Other (identify):\_\_\_\_

Date: 2.27 - (9 11.

Cali 15. Prepared by:\_

[signature]

Name (printed): <u>Rick Calcote</u> Title (printed): <u>Mental Health Clinician III</u> Telephone: <u>(907) 269-3617</u>