ADDITIONAL REGULATION NOTICE INFORMATION (AS 44.62.190(d))

- 1. Adopting agency: <u>Department of Health & Social Services</u>
- 2. General subject of regulation: <u>Behavioral Health Medicaid Services Transition</u>
- Citation of regulation (may be grouped): <u>7 AAC 135. Medicaid Coverage; Behavioral Health</u> <u>Services; 7 AAC 138. 1115 Substance Use Disorder Waiver Services; 7 AAC 139. Behavioral</u> <u>Health 1115 Waiver Services; 7 AAC 160. Medicaid Program; General Provisions, for the Division</u> <u>of Behavioral Health.</u>
- 4. Department of Law file number, if any: <u>2021200080</u>
- 5. Reason for the proposed action:
 - (X) Compliance with federal law or action (identify): <u>Comply with the state's corrective action</u> <u>plan with the Centers for Medicare & Medicaid Services (CMS).</u>
 - (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>Medicaid/Medicaid Services</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): <u>None.</u>

	Initial Year	Subsequent
	FY	Years
Operating Cost	\$	\$
Capital Cost	\$	\$
1002 Federal receipts	\$	\$
1003 General fund match	\$	\$
1004 General fund	\$	\$
1005 General fund/		
program	\$	\$
Other (identify)	\$	\$

9. The name of the contact person for the regulation: Name: <u>Farina Brown</u> Title: <u>Deputy Director</u> Address: <u>3601 C St., Suite 878, Anchorage, AK 99503</u> Telephone: <u>(907) 269-5948</u> E-mail address: <u>farina.brown@alaska.gov</u>

- 10. The origin of the proposed action:
 - __X__ Staff of state agency
 - __X__ Federal government
 - _____ General public
 - Petition for regulation change⁷
 - _____ Other (identify):_____

11. Date & Prepared by:_____

[signature] Name (printed): <u>Farina Brown</u> Title (printed): <u>Deputy Director</u> Telephone: <u>(907) 269-5948</u>