SENATE CONCURRENT RESOLUTION NO. 2

IN THE LEGISLATURE OF THE STATE OF ALASKA

THIRTY-FOURTH LEGISLATURE - FIRST SESSION

BY THE SENATE HEALTH AND SOCIAL SERVICES COMMITTEE

Introduced: 3/12/25
Referred: Health and Social Services, Labor and Commerce

A RESOLUTION

Supporting an all-payer crisis continuum of care and Medicaid reform; and urging the Governor to direct the Department of Health and the division of insurance to develop recommendations for an all-payer model for crisis care.

BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF ALASKA:

WHEREAS, statewide and locally, the state has implemented effective crisis continuum services that have the potential to work in both urban and rural communities, as evidenced by mobile crisis teams meeting or exceeding national benchmarks for community stabilization; and

WHEREAS crisis continuum services, which include crisis call lines, mobile crisis teams, 23-hour crisis stabilization centers, and short-term crisis residential centers, benefit the public by increasing public safety and improving acute behavioral health outcomes; and

WHEREAS, while the state's Medicaid State Plan services and Section 1115 Behavioral Health and Substance Use Disorder waiver services reimburse some of the costs of crisis care, not all components of care are billable to Medicaid, including transportation to subacute mental health facilities and medication dispensed in 23-hour crisis stabilization

centers; and

WHEREAS, while the state's Medicaid does reimburse many crisis services through its 1115 waiver, the reimbursement often does not adequately cover the cost of operations for mobile crisis teams and crisis stabilization services; and

WHEREAS funding streams for crisis continuum services that are not covered by Medicaid, including crisis call center costs and capital costs of constructing inpatient and outpatient facilities, are not adequate to cover the cost of care; and

WHEREAS certain health insurance plans are required by the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 and the No Surprises Act of 2021 to comply with federal parity laws, including coverage of crisis services, and the state lacks a mechanism to assess and report on compliance with those laws; and

WHEREAS crisis care providers must rely on short-term, unstable grant funding to provide essential behavioral health services; and

WHEREAS, because of the uncertain funding mechanisms and billing-related administrative barriers for the cost of care, some providers in the state have discontinued vital crisis services or paused planning for the services; and

WHEREAS innovative, evidence-based policy solutions that help remove administrative red tape and bring all insurers to the table must be considered to ensure the sustainability of crucial crisis services; and

WHEREAS policy changes to maximize Medicaid funds and reduce administrative barriers could include updates to the state's Medicaid State Plan, including rolling appropriate 1115 waiver services into the State Plan and updating the State Plan to include crisis services offered 24 hours a day and seven days a week and to allow for a wider range of crisis providers; and

WHEREAS, to help ensure the sustainability of crisis services with commercial insurers while avoiding an unnecessary burden for providers to contract individually with plans, the state may consider establishing a small assessment on commercial health insurers for each member each month instead of requiring commercial health insurers to cover mobile crisis response, and the state may also consider implementing a 988 telecommunications surcharge, similar to the 911 surcharge, to fund the state's 988 crisis lifeline;

BE IT RESOLVED that the Alaska State Legislature supports an all-payer crisis continuum of care and Medicaid reform to ensure that

(1) all payers support essential crisis services;

(2) red tape and inefficiencies are removed; and

(3) flexible solutions that work for local communities, providers, and the people providers serve are prioritized; and be it

FURTHER RESOLVED that the Alaska State Legislature urges the Governor to direct the Department of Health and the division of insurance to convene public and private payers, key stakeholders, and legislative leaders to develop recommendations for an all-payer model for crisis care.