

ALASKA MENTAL HEALTH TRUST AUTHORITY

FULL BOARD MEETING

May 4, 2016

8:30 p.m.

Taken at:

Alaska Mental Health Trust Authority  
3745 Community Park Loop, Suite 120  
Anchorage, Alaska

**OFFICIAL MINUTES**

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Trustees present:

Russ Webb, Chair  
Laraine Derr  
Larry Norene  
Paula Easley  
Jerome Selby  
Carlton Smith  
Mary Jane Michael

Trust staff present:

Jeff Jessee  
Steve Williams  
Miri Smith-Coolidge  
Kevin Buckland  
Michael Baldwin  
Katie Baldwin-Johnson  
Amanda Lofgren  
Carrie Predeger  
Heidi Wailand  
Valette Keller  
Carley Lawrence  
Luke Lind  
Kat Roch

Trust Land Office present:

John Morrison  
Michelle Steelman  
Others participating:

Kathy Craft; Heather Ireland; Shelly Atkinson; Dave Kulper; Lori DeStefano; Commissioner Valerie Davidson; Sana Efir; Monique Martin; Diane Casto; Nancy Burke; Joyanne Geisler (via Speakerphone); Shirley Holloway (via Speakerphone); Laura Baez (via speakerphone); Martha Schoenthal; Doreen Whitworth (via Speakerphone); Dr. Aron Wolf; Bernie Ruskin; Lynn Paterna; Kim Champney; Jeanne Gerhardt-Cyrus; Betsy Chivers; Francine Harbour; Brandon Williams; Lilly Wurtz; Stephanie O'Connor; DeWayne Harris; Lesley Thompson.

## **PROCEEDINGS**

CHAIR WEBB convenes the Full Board meeting and calls the roll. He states that Trustee Smith is not able to be here. He welcomes the newest trustee, Jerome Selby. He thanks Trustee Michael for graciously hosting staff, trustees and others last night. He moves to approval of the agenda. He suggests one change in the agenda and that would be to move the approvals of FY16 small projects to 11:00, and the Planning Committee after that. He states that there will be a need for an executive session and that would make the transition easier. He asks for a motion to approve the agenda.

TRUSTEE NORENE makes a motion to approve the agenda.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB moves to the approval of the minutes from January 27 and 28, February 23, February 26, and March 16.

TRUSTEE NORENE makes a motion to approve the minutes of January 27, 2016.

TRUSTEE DERR seconds.

*There being no objection, the motion is approved.*

TRUSTEE NORENE makes a motion to approve the minutes of February 23, 2016.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

TRUSTEE NORENE makes a motion to approve the minutes of February 26, 2016.

TRUSTEE SMITH seconds.

*There being no objection, the motion is approved.*

TRUSTEE NORENE makes a motion to approve the minutes of March 16, 2016.

TRUSTEE SELBY seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB asks for any ethics disclosures. There being none, he skips the review of the guiding principles and bylaws and adds that they are available on the Web site, in the packet, and to the public. He moves on, stating that the officers' elections will be in September and asks if there are any issues with that.

MR. JESSEE states that this meeting is when the nominating committee process is set up so they can come forward in September with a slate.

CHAIR WEBB states that in August of 2014, trustees approved a \$30,000 grant to expand the school-based health center at Begich Middle School. He continues that by offering on-site behavioral health services, this project would expand offerings of the healthy spot school-based health center to include behavioral health services on site in order to support students' success in school. He introduces Heather Ireland and Shelley Atkinson, who will talk about the grant services available to students and the positive impact it has had for students' success.

MS. IRELAND states that Dave Kuiper, from Christian Health Associates, and Lori DiStefano, from Volunteers of America, are also present. She continues that school-based health centers started offering medical services at Clark Middle School in 2010 and then at Begich in 2014. Since that time, over 2,500 medical appointments, primarily physicals, have been provided for students. She adds that, in 2014, the school board asked about behavioral health services and, at that time, came to the Trust looking for support. She explains how that money was spent and states that, at the end of the calendar year, they looked at what differences this program made for these students. She continues that there was a huge decrease in the discipline issues with the administration and an increase in their attendance compared to students that were not receiving the services. She adds that there was not a huge change in grades at this time. She asks Shelley Atkinson to talk about some of her observations.

MS. ATKINSON states that this program is wonderful and illustrates how beneficial it is by talking about one of the students that was involved and helped by this program. She continues that Begich is a Title 1 school and right now is the largest middle school in the state. She adds that having this as one of the many options is enormous.

MS. IRELAND states that the grant funding from both the Trust and Providence has helped serve these students and looks forward to continuing. She adds that expansion of the program to other schools for both medical and behavioral health services is being looked at. She asks for any questions.

TRUSTEE MICHAEL asks how it works and how a child is identified.

MS. IRELAND replies that there are a couple of different entry points. She states that it started with the administrators, counselors and the school nurse identifying those with high needs.

Then, a process was developed for the teachers to identify students and tell the school counselors. The other way is through the comprehensive physicals which screen for both depression and anxiety. She explains in greater detail.

A short discussion ensues.

MR. JESSEE asks if a possible strategy could be helping parents become healthier which would be another way of helping the kids become healthier.

MS. IRELAND replies that Volunteers of America has a program called Parenting with Love and Limits. This program works more with the whole family unit.

MR. JESSEE also asks about the uninsured children and why they are not eligible for Denali Kid Care.

MS. IRELAND replies that some kids are not eligible because they have not been in America for more than five years, and another piece is getting reimbursements; TRICARE will not cover it. Another issue is that the child is Medicaid-eligible, but the parents did not submit the necessary paperwork to renew. She adds that the renewal process is cumbersome and overwhelming for some of the families.

MR. JESSEE states that this is sort of a trauma-informed care approach and asks if they are looking to get an adverse childhood experience score on the kids for some idea of how they are falling out along the ACES continuum.

MS. IRELAND replies that it was considered but was deemed irrelevant, and if help is needed then help will be given.

CHAIR WEBB thanks Ms. Ireland for all the work being done and moves on to the statutory adviser and partner updates with Commissioner Davidson.

COMMISSIONER DAVIDSON thanks all and states that Senate Bill 91 is still happening and gives credit to Jeff Jessee for all the ways he taught her how to do her job. In moving forward, this relationship and the Trust's willingness to allow him to be able to work with the Department in this way is incredibly helpful. She states that in this challenging budget time, Medicaid, in its current form, is not sustainable. Governor Walker stated that he was not only interested in Medicaid expansion, but also sees that this expansion could serve as a catalyst to true Medicaid reform. She continues that the Department is absolutely committed to Medicaid reform. She adds that in moving forward with reform, the efforts on reducing the recidivism rate in the criminal justice system is also moving forward. She states the belief that behavioral health reform is the key, explains this more fully, and adds that this is an opportunity to do a complete overhaul of the behavioral health system. She continues, describing some of the challenges in greater detail. She talks about being able to pursue a 1115 waiver with the Centers for Medicare and Medicaid Services, with CMS, which will allow doing things differently. She states that the path to a 1115 waiver for behavioral health services is the right way to go and explains the reasoning. She thanks the Trust for all of the resources that have been provided to the

Department that allow them to be where they are today. She moves on to Senate Bill 74 and talks about the opportunities available through it. She then gives an update on API. She states that Melissa Ring tendered her resignation, and we are looking to recruit for that position. She continues that there is one vacancy for a psychiatrist and two vacancies in psychiatric health practitioners, and adds that there are candidates for all three positions. She states that an issue with API is preventing assaults and have initiated a trauma-informed care opportunity training for better crisis prevention and intervention. She continues that one of the things that this initiative requires is that the hospital CEO or the medical director must be contacted prior to contacting the physician on duty for discharge situations where APD indicates that someone is going to be removed from the facility. Some of the other challenges is a high number of requested evaluations for competence to stand trial and no special funding to meet that need. She adds that it is not a statutory mandate and has been unfunded for some time. The issue of forensic evaluations is being addressed and reviewed by the Alaska Criminal Justice Commission, and there is the continuing challenge with timely discharge. She states that, as part of the Senate Bill 74, they will be working with the Trust to solicit a contractor to do the feasibility study for API, and the effectiveness of privatizing those services. She adds that the RFP should be issued on May 16. She moves on to the budget, explaining as she goes along. She states that Representative Neuman, co-chair of the House Finance Committee, made a proposal to add \$30 million in detox treatments and sobering centers. A grand total of \$30 million to be spent over three years as part of the FY16 funds which will be part of the supplemental. She adds that the budget process is not done yet, and we are hopeful that the money stays in. She continues explaining the budget. She thanks all, and reiterates her thanks and heartfelt appreciation.

CHAIR WEBB asks for any questions or comments.

TRUSTEE DERR states that over the years the Trust has put thousands of dollars into the MMIS system. She asks for an update on that.

COMMISSIONER DAVIDSON replies that some improvements have been made, but not in all areas. She states that there are the old claims that need to be reprocessed and there are the new-day claims that are being focused on because that is what people need to be able to run their businesses. She continues that over 90 percent of the new-day claims are processing correctly. She states that the preauthorizations for some behavioral health services continue to be a challenge. She adds that about \$29 or \$30 million in claims are being processed weekly, which is more than the old system. She continues that as Xerox fixes the bugs in the system, those fixes create new and different bugs. She states that certification from the Centers for Medicaid and Medicare Services has been requested for the system, which is expected to happen this summer.

TRUSTEE EASLEY states that providers have been and continue to complain about the paperwork at the state and federal level. She asks if there are any advocates in CMS or anywhere else that are addressing the problem of paperwork.

COMMISSIONER DAVIDSON replies that several conversations have taken place about the issue of being more efficient, but all the paperwork is killing the providers, which inhibits the ability to provide better service.

CHAIR WEBB asks for any other comments or questions.

MR. JESSEE states that the relationship with this Administration and the Department is very good. He continues that, from the Trust perspective, this healthcare and Medicaid reform has taken a lot of staff work; particularly Katie Baldwin-Johnson and Amanda Lofgren, who have spent a lot of time working on the Medicaid reform issues. He thanks the Department for being open and positive in working on these issues.

TRUSTEE MICHAEL comments on the focus on policy and the future.

CHAIR WEBB comments that a fundamental change is being made to the system of care that will persist for at least one generation, and that opportunity and challenge only comes along once in a lifetime. He states appreciation for the partnership and sharing the information openly and being forthright. He thanks Commissioner Davidson.

COMMISSIONER DAVIDSON thanks all and introduces Sana Efird, the assistant commissioner; Diane Casto, who is back from the Department of Corrections; and Monique Martin, healthcare policy adviser.

CHAIR WEBB calls a break.

(Break.)

CHAIR WEBB states that next on the agenda is the CEO update, and recognizes Jeff Jessee.

MR. JESSEE began by stating that Dr. Doolittle passed away on April 25 and reminds all of how Dr. Doolittle got involved in the Trust. He was a long-time military physician and then was in private practice in Fairbanks for many years. Dr. Doolittle got involved in the Trust because during his medical practice he had seen many people who were Trust beneficiaries come to him for other issues and was very frustrated that he could not do enough for them, and that often there were no other resources out there to help with the behavioral health issues. As a trustee, and as Chair, he always wanted to focus on what the impact on the beneficiaries would be and how many beneficiaries would be served. He continues that Dr. Doolittle was very important to the Trust, and his loss is deeply felt.

CHAIR WEBB states that he had the pleasure and honor to work with Dr. Doolittle both when he was a staff member at the Trust and then as a trustee. He continues that Dr. Doolittle was enormously respected both in his community and on the Trust. It is a tremendous loss for the community, and certainly for the Trust and his family.

TRUSTEE DERR states that he was lucid and did well at the end. She adds that she will miss him.

MR. JESSEE states that he had an opportunity, as directed by the trustees, to meet with the Trust Land Office to talk about PR planning. He asks Carley Lawrence for a brief update.

MS. LAWRENCE states that she and Mr. Jessee met with John Edwin and talked about the PR and marketing needs and being more proactive and developing a comprehensive communications plan. One of the things talked about was developing some of the materials needed in preparation for their travel to South Africa for the mining conference. She continues with the need for a corporate packet that could be updated easily, Web site, PR, corporate brochure, a lot of different corporate materials needed for different audiences and different business units. She adds that it was a very fruitful conversation, and more planning needs to be done.

MR. MORRISON states that the TLO is excited in taking the next steps in all the marketing efforts.

MR. JESSEE asks for any questions on that. There being none, he moves on to the creation of the opioid task force. He states that Kate Burkhart has done a great job of pulling it all together and figuring out the timing of the membership. She will talk more about this in her update. He continues on, stating that the Annual School of Addictions has been going on with over 400 addiction professionals from across the state. He adds that they were challenged to be engaged and be a part of this collaborative iterative process in going forward. This was a call to action. He asks Ms. Baldwin-Johnson to continue.

MS. BALDWIN-JOHNSON states that it was a two-hour session, an interactive table conversation. They were asked about what the overarching opportunities and challenges were to the high-level reform, the pressures on the workforce in general; and the considerations in moving and supporting the system that is changing over time. There was a lot of discussion and then there was some time to report back out. The session was recorded and there was someone capturing everything. She continues that the information is being synthesized and will be posted on the Annual School Web site; shared with Department of Health and Social Services, the folks working re-entry; and the University. It will be a good platform for a lot of the people working on it.

MR. JESSEE adds that it is not a one-time shot. The plan is to keep them engaged so feedback from the profession can continue. He states that another important thing is that the Department of Labor has become more connected to the Trust, particularly through some of the issues around re-entry in the criminal justice reformation, looking at how people get employed. He continues that there was concern from key stakeholders and providers about some of the ways the Department was going at developing their programs. He asks Kathy Craft to continue.

MS. CRAFT recaps that in December an MOA was signed with the Department of Labor and Workforce Development for a portion of her time to work on their five-year grant to set up registered apprenticeships. She states that one of the things in the federal grant was to set up a healthcare academy to do exploratory introductory classes for people, which was designed and will start this month. The first one is on introductions to health career occupations, and the other one is for introductions to the medical office. She continues that the courses have been designed

and they have been working with ANTHC, with the federal DOL, to set up registered apprenticeships for behavioral health aides. This need was identified in the behavioral health systems capacity. The hope is to train 120 more behavioral health aides across the state in this five-year time period. She adds that Southcentral Foundation is setting up behavioral health technicians with the hope of having 75 additional behavioral health technicians trained in this five-year period, who will also end up with the two-year CDC license, chemical dependency counselors. She states that an advisory council will be formed and finalized in June.

MR. JESSEE states that he is very excited about the advisory council and the partnership with the Department of Labor. He asks Ms. Lofgren to talk about the DD system planning.

MS. LOFGREN states that last October, the Trust and the Alaska Training Center and AADO, which is the provider association for developmental disabilities, hosted a leadership consortium training, which was a week-long intensive training for the providers, executive directors within the provider associations across the State, to come together and not only work on professional leadership goals and objectives, but also as a system. She continues that afterwards all felt compelled to carry on the work that was started, but needed to bring on more people within the system to help buy into the direction that was needed to go, and also address the significant changes that need to happen. This needs to be done as a system across the state, together and collectively; to work with beneficiaries and their families, direct service providers and leadership to develop a unified, shared vision for the DD system and where it is going for the next 30 years. She states that Roy Scheller is concerned about the fact that the new generation of leaders do not have the firsthand experience of what it was like to work in an actual institution for intellectual and developmental disabilities. She continues that the plan is to have an intergenerational take on the knowledge of previous executive directors to help inform and train the next cohort of leadership in October.

MR. JESSEE asks about the dementia care initiative.

MS. LOFGREN states that the Department presented an initiative specific to dementia care that looked at modifying the current nursing facility level of care criteria to qualify for the 1015(c) waiver service. She continues that oftentimes individuals with dementia do not qualify for the waiver due to the fact that their cognitive impairments have not progressed to the point where their physical impairment overrides the cognitive impairment; meaning that if they can bathe themselves or dress themselves with prompting and cueing, they might not qualify. So if the Department was to modify that nursing facility level of care, what would that look like; and what would the threshold be to modify to. In addition, the Pioneer Homes do not require individuals to apply for Medicaid waiver, and so, the dementia care initiative also incorporated Pioneer Home. She states that the decision was made that the project actually fit better with the Home and Community Service Reform through the 1915(i) and (k). However, the 1915(i) and (k) does not modify the existing nursing facility level of care. It takes the current one and puts it in place for the (k). She continues that the first stakeholder meeting was held which brought together all of the providers and the system-of-care components that serve individuals with ADRD. She adds that they did figure out a way to leverage the data to be able to drill into it to really quantify the number of individuals that are denied level of care. She states that it is really important to be



able to articulate the actual data; know what actuary analysis is, be able to run it and show the costs that will impact the system. She adds that there will be more to come on this.

MR. JESSEE asks about IAP.

MS. LOFGREN states that the CMS has an Innovation Accelerator Program: Seven states were awarded this technical assistance component to sit down and look at what Medicaid services can be utilized to provide supportive housing services. She continues that there were three technical assistance sessions, and every state had to go through every single one of their Medicaid services to see if that could be used for supportive housing or not. She adds that CMS awarded the technical assistance which happened to be the TAC, the Technical Assistance Collaborative, to help develop the permanent supportive housing strategic plan. She states that tenancy support is absolutely essential, transition services, components of case management, and also those independent living skills essential for social rehab services.

MR. JESSEE recognizes Steve Williams.

MR. WILLIAMS states that stepping up refers to a national initiative that is being sponsored by the Council of State Governments, the American Psychiatric Association, and also the National Association of Counties; to forward the movement of trying to address the prevalence of folks with mental health disorders inside corrections, nationally. He continues that the Council of State Governments has been engaged in this effort for probably 15-plus years. This was an initiative where teams nationally submitted an application to attend the summit, were selected, and met for two days in Washington, D.C. He states that Alaska submitted an application and was accepted. The team included himself, Judge Stephanie Rhoades; Karen Forrest, Deputy Commissioner from Health and Social Services; Laura Brooks, the medical director for Corrections; and Kathy Trawver from the University, who is a professor in the School of Social Work. He continues that it was a great opportunity to gather from national speakers what has been going on, what new things are in, and then, also, to connect up with some of the national federal funders to hear about current available opportunities and what the State might apply for. He adds that there is a bunch of money around in Second-Chance Act funding. He states that the impact to Alaska is twofold and is going to help to inform the Criminal Justice Commission's work. He continues that a behavioral health work group has been formed with the hope to start feeding into the next phase of the Commission's work in moving forward. He adds that, in June, the Planning Committee agenda will include a full update on the workforce focus area which was requested last year. He moves to the Denardo Center in Fairbanks and states that work with the TLO on how that plays out will continue which depends on the Legislature approving the budget. He continues that the intent would be to come back to either the Planning Committee or the Resource Management Committee meeting in August for an update.

MR. JESSEE asks for a decision later on bringing this to Resource Management or to Planning in August.

TRUSTEE NORENE asks if there is a need to make a decision on the current application or just hold it.

MR. JESSEE replies that, currently, there are a number of interested parties and one has put an offer on the table. He states that they are prepared to lease the building now. He continues that this was worked through with the TLO, telling them that there is another possibility that is very critical to the beneficiaries, the possibility of a sobering center, and we are not in a position to commit to lease that facility to them at this time.

MR. WILLIAMS states that this was discussed, and we are very willing to continue on the issue.

CHAIR WEBB briefly explains the issue, and then moves to a discussion on how to resolve it.

MR. MORRISON asks for some clear direction. He states that he went through the verbatim from the meeting where this was discussed and the issue is that there was no motion.

The discussion continues.

CHAIR WEBB states that a financial decision to maintain that facility and keep it available for future uses needs to be made. He adds that it has already been budgeted.

TRUSTEE MICHAEL states that she is in favor of holding off until August, but would like an update at that time to see what progress has been made.

TRUSTEE NORENE concurs.

TRUSTEE SELBY states that it would make sense to send it to the Resource Committee meeting in August, which would be the right place for that discussion in preparation for the September Board meeting.

CHAIR WEBB agrees, and states that no formal action is needed.

MR. JESSEE concludes his report.

CHAIR WEBB states that next on the agenda is the Resource Management Committee report.

TRUSTEE NORENE states that there are a number of items, consultations that need approval, and asks Mr. Morrison to continue.

MR. MORRISON states that there are two consultations and two approvals. The first consultation item is for a negotiated sale of six lots, two located in the community of Elfin Cove, to the Community of Elfin Cove for \$143,000. There is a motion coming forward from Resource Management for Board consideration.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the negotiated land sale of six parcels in Elfin Cove, Alaska, to the community of Elfin Cove for a purchase price of \$143,000.

*There being no objection, the motion is approved.*

MR. MORRISON states that next is for a placer lease on Fox Creek to an individual named Randal Powelson with an anticipated \$5,000 annual rental over the term of the lease that would be offset by successful extraction of gold, which will be payable at a 10-percent royalty.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the negotiated lease of Trust mineral estate on Fox Creek for exploration and development of placer gold, as proposed.

*There being no objection, the motion is approved.*

MR. MORRISON states that the third item is for \$175,000 to complete an airborne magnetic survey and some other related work at Icy Cape this summer.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees approve the expenditure of funds for parcel research and exploration of the parcel known as Icy Cape in the amount of \$175,000. These funds do not lapse.

CHAIR WEBB states that this was discussed at length and is a tremendous opportunity for the Trust to develop spendable income long into the future if this resource development plays out. He continues that this is one of the strategies that is being taken to further explore and then to market the mineral resources at Icy Cape.

MR. MORRISON clarifies that income from successful operation of this area would not be principal income, but is integral to help generate the additional income, revenue that is being sought.

*There being no objection, the motion is approved.*

MR. MORRISON states that the next item for approval is broken into two parts; one motion in the first section, and then three motions in the second section. The first section has to do with the FY16 real estate budget for the Real Estate Management Plan properties. These funds are fully collected and disbursed within the various properties at the property level. He continues that the first motion is for administrative reasons to allow entry of those activities on the accounting system.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the recommendation to approve the incremental building expenditures totaling \$5,759,700 budgeted for fiscal year 2017 to be paid by the property manager from rents and other income collected from the properties.

TRUSTEE DERR asks why, since the FY17 budget is coming up in August, this is being done now.

MR. MORRISON replies that it was discussed over the course of time that these property budgets do not naturally follow the State budgeting process. He states that it was determined, for business reasons, the need for approving budgets much closer to the actual time of the budget year.

*There being no objection, the motion is approved.*

MR. MORRISON states that the next section is also dealing with real estate budgets, but are for the programmatic properties. Some of the money needed is for capital costs and coming from the TADA account; the other money is going to be routed through the regular checking account from one other account to clear it out. He adds that there are three motions to complete all the tasks necessary.

TRUSTEE NORENE states that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees authorize the CFO to transfer the balance of the facility maintenance account, IRIS fund 3322, to the Alaska Mental Health Settlement income account, IRIS fund 1092, to partially fund the fiscal year 2017 operating costs of Program-Related Investment Properties in the amount of \$105,787.

*There being no objection, the motion is approved.*

TRUSTEE NORENE states that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees approve an appropriation from the Trust Authority Development Account, TADA/IRIS fund 3320, in the amount of \$70,000 for capital costs of Program-Related Investment Properties for fiscal year 2017. The appropriation shall not lapse. The CFO is authorized to transfer the full amount to a third-party property manager, upon the request of the TLO.

*There being no objection, the motion is approved.*

TRUSTEE NORENE states that the Resource Management Committee recommends that the Alaska Mental Health Authority Board of Trustees approve an appropriation from Alaska Mental Health Settlement income account, IRIS fund 1092, in the amount of \$142,200 for operating costs of Program-Related Investment Properties for fiscal year 2017, which appropriation shall not lapse. The CEO is authorized to transfer the full amount to a third-party property manager, upon the request of the TLO.

TRUSTEE DERR states that the TLO is requesting \$212,000, and when adding up the numbers there is over a \$100,000 difference in what is being requested in the motions.

MR. MORRISON explains that the first motion is transferring the balance of the facilities maintenance account to the checking account, and then only requesting the \$142,200.

TRUSTEE NORENE states that the record will reflect Mr. Buckland's agreement.

MR. MORRISON asks if that clarifies everything.

TRUSTEE DERR replies yes.

*There being no objection, the motion is approved.*

MR. MORRISON states that there is nothing further to report at this time.

TRUSTEE NORENE concludes the Resource Management Committee's report.

TRUSTEE DERR asks what happened with the motions from yesterday's Resource Management Committee's meeting.

MR. MORRISON replies that a special board meeting was held after to handle those motions.

CHAIR WEBB states that the next item on the agenda is the small projects approval.

MR. JESSEE states that the requested motion is to approve the recommended FY16 small projects for the March application period in the amount of \$34,000

TRUSTEE NORENE states the need for an overall financial direction. He asks if there are time-critical issues on these that would put their programs in jeopardy.

MR. JESSEE explains that the funding for the small projects has been approved in the budget, publicized on the Web site, we've taken the applications, and then grantees are informed about when the trustees will take action on them. He adds that there is an expectation on the part of the grantees that a decision on these would be made at this meeting. He states that, from a relationship perspective, everyone has already gone through the application process, the PEC has met; there has been a lot of effort put into these particular projects.

TRUSTEE DERR states that Trustee Norene moved to table; a second is needed, and then the motion is not debatable.

TRUSTEE NORENE explains his feelings and states that there has been no change; no acknowledgment of a potential change; and no plan coming forward.

TRUSTEE DERR states that this was discussed and put in for small projects in the budget last fall. She continues that it was a lengthy discussion on whether to continue to include them or not, and at the time included the money for small projects.

TRUSTEE SELBY states that the credibility of the Trust is such that these folks were asked for proposals, are way into this project, and have already been approved. He continues that he has a problem with telling these folks that there is a change in the policy on small projects, especially since a grant application was prepared and a funding decision was expected at this meeting. He

adds, that is not appropriate. He states that the way to deal with it as a board is to get it on the table, discuss it at the next board meeting, and decide going forward about doing small projects in the future

TRUSTEE SMITH asks if Trustee Norene can comment briefly on the clarity and the direction going forward.

TRUSTEE NORENE replies that it will take a lot of discussion and should possibly be in a retreat setting to freely discuss the future direction.

TRUSTEE MICHAEL realizes that the process is slow, but supports continuing it. She states that there should be information by the August meeting.

MS. BALDWIN-JOHNSON goes through the process that staff does in preparation.

TRUSTEE NORENE states that he is just expressing his impatience on the long term of the process.

MR. JESSEE explains that business is being done as usual, going through the process in greater detail. He states that the State has a huge fiscal crisis, but the Trust income is very stable. He continues that a very resilient economic outlook has been developed, and he thinks that there is also some significant value in the Trust being a rock in the midst of rolling seas. He adds that he would not necessarily recommend a wholesale abandonment of all of the strategies, such as mini-grants and small projects.

The discussion continues.

TRUSTEE DERR makes a motion to approve the recommended FY16 small projects from the March application period in the amount of \$34,000.

TRUSTEE SELBY seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB moves to the Planning Committee.

TRUSTEE MICHAEL forgoes doing a lengthy comment on the Planning Committee, other than to say that there is a brief summary on the last three Planning Committee meetings and what topics were covered under those meetings. She thanks the trustees for participating. She moves to a Medicaid reform and redesign update, and recognizes Ms. Lawrence.

MS. LAWRENCE gives a brief update on some of the major bills that the Trust was advocating for and tracking. She asks Mr. Jesse to talk about SB165.

MR. JESSEE states that SB165 is the changes to Title 4, the Alcohol Beverage Control Board statutory framework, which passed and accomplished two major things. He continues that it

fundamentally changed how the minor consuming of alcohol laws are handled; it moved from more of a criminal into more of a civil-type approach. He states that the other change was in the membership of the Alcohol Beverage Control Board itself. He continues that it no longer considers the background of the executive director; there is not a seat for public health. He adds that there will be two industry, one rural, one public, and one public safety. He states that the Title 4 steering committee felt that the compromise was appropriate.

MS. LOFGREN states that there has been a significant amount of work happening in terms of those bullet items around new assessment tools, the 1115 contract coordination with Charlie Curie and Stephanie Colston. She continues that CMS has issued some guidance and a 1400-page rule on managed care. There was also guidance submitted that clarifies how Medicaid can be used for returning citizens, which is huge. It clarifies that Medicaid services can be provided in halfway houses, for parolees, and several other different components within the system. She goes through some more in greater detail.

TRUSTEE MICHAEL recognizes Nancy Burke.

MS. BURKE states that she provided a time line for trustees and some of the bullets of things that have been accomplished. She continues that the plan that the Mayor and partners have agreed on is to focus in on the people who are homeless in Anchorage and the move to coordinate the structures for financing, for housing, and for services around those people has proved to be very logical and the right thing to do, but is still challenging. She adds that there are many different time lines, processes, methods for resources, going out, that make it a challenge to coordinate those services around people. One of the main goals is tracking 100 people over three years, focusing on them, developing the number of homeless and watching the dashboard. The second thing is to realign how financing works for these individuals, explaining in greater detail. She states that there has been a tremendous amount of infrastructure in the Municipality that has become aligned with the Mayor's initiative. She continues that there are two meetings, one on May 11, which is a joint meeting of the Public Safety Committee and the Homeless Committee to talk about safety on the trails and camping in neighborhoods over the summer; then, on May 18, the next regular Homeless Committee meeting of the Assembly will be held. She adds that those are tremendous opportunities for joint meetings with the Planning Committee, if Trustees are interested.

MR. ASHMAN states that he is with the Division Manager for Housing and Community Services; the other half of the department is the Public Health Department. The programs the Division administers are the aging and disability resource centers. He continues that they also manage the emergency preparedness for the Municipality on the public health side; the Anchorage safety patrol and safety center, which is for the Title 47 noncriminal holds. There are eight domestic violence programs, and we also manage the HUD programs. He states that the budget for development and services for 2016 is about \$4.3 million and goes over a few of the items in there. He adds that many of the people worked with are direct beneficiaries of the Trust.

TRUSTEE MICHAEL states that there were some excess revenues in the city budget which the Mayor dedicated a portion of to the homeless projects. She asks for more information about that.

MS. BURKE states that the Assembly reviewed and approved the Mayor's request for \$425,000 to go to the homeless initiative. This funding increased the staffing ratio, clinical services, and some innovative projects that she describes in more detail.

TRUSTEE DERR asks if all this is Anchorage centric.

MS. BURKE replies yes, the proposal submitted was a joint Mat-Su and Anchorage proposal.

A short discussion on the homelessness count ensues.

TRUSTEE MICHAEL thanks Ms. Burke and Mr. Williams, and concludes the Planning Committee report.

CHAIR WEBB asks if there are a couple of items that the Trust should consider in executive session.

MR. JESSEE replies that there are two things. First is a proposed grant to the Municipality of Anchorage for three years to fund Ms. Burke's position with the Municipality, and then there is a real estate opportunity.

TRUSTEE DERR makes a motion to go into executive session to consider personnel and financial matters.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

(Executive Session from 12:25 until 1:37 p.m.)

CHAIR WEBB asks for a motion to adjourn the Executive Session.

TRUSTEE SELBY makes a motion to adjourn the Executive Session.

TRUSTEE EASLEY seconds.

*There being no objection, the motion is approved.*

TRUSTEE MICHAEL makes a motion to approve a Trust-funded Municipality of Anchorage Housing and Homeless Coordinator for three years, FY17, FY18, and FY19, with approval of \$178,200 in Authority grant funding for FY17.

TRUSTEE NORENE seconds.

*There being no objection, the motion is approved.*



CHAIR WEBB adds that this will be subject to an agreement and grant conditions that will be worked out with direction given to the CEO. He states that next on the agenda is the Finance Committee report, and recognizes Trustee Smith.

TRUSTEE SMITH begins with the cash management report and asks Mr. Buckland to continue.

MR. BUCKLAND goes through the cash management report, explaining and answering questions as he goes along.

CHAIR WEBB states that lunch has arrived, and we will resume the Finance Committee report at 2:00 p.m.

(Break.)

CHAIR WEBB calls the meeting back to order and recognizes Trustee Smith to continue the Finance Committee report.

TRUSTEE SMITH moves to the first approval item, which is the Aging and Disability Resource Center Authority Grant. He recognizes Amanda Lofgren.

MS. LOFGREN states that this project is part of the FY17, 3.9 Medicaid reform funding that trustees approved. This is just to allocate it to specific grantees. She also gives a bit of background on the pilot project.

TRUSTEE DERR asks about the number of beneficiaries and if that is the whole ADRC network

MS. LOFGREN states that Joyanna Geisler, from Kenai Peninsula, can answer that.

MS. GEISLER replies that Martin Lawrence with Senior and Disability Services gathered the numbers and those are beneficiary numbers from all of the ADRCs.

MS. LOFGREN states that the numbers are actually very accurate in terms of the number of beneficiaries being served. She continues that it would be the statewide system and there are five Aging and Disability Resource Centers: Anchorage, Bristol Bay, Kenai Peninsula, Southeast Alaska, and Mat-Su. She adds that the balance of the state is served by the State rural long-term care coordinator position.

TRUSTEE DERR comments that the grant is for pilot programs at Kenai, Mat-Su and Southeast, and these numbers are for the entire state.

MS. LOFGREN replies yes.

TRUSTEE SMITH makes a motion to approve FY17 Authority Grant allocation for Medicaid reform, implementation report, 1915 (i) and (k) options funding, in the amount of \$400,000 for the purpose of the Aging and Disability Resource Centers' pilot project expansion. The funds for this project will be allocated to the fiscal agents listed in the below table.

CHAIR WEBB states that this was a new item and does require a second.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the Item No. 2 is a transfer to Finance, August 2015, Trustee approved \$1.59 million which is DHSS Medicaid expansion appropriations. He asks Mr. Buckland to continue.

MR. BUCKLAND states that the amount stated was \$1.59 million, and the figure was \$1,590,700. He continues that this motion is to authorize the draw from budget reserves to finance the August 2015 approval that trustees made for the Medicaid expansion that was made available to the Department of Health and Social Services, which was to be an RPL or revised program legislative, that the LB&A Committee decided not to act upon. This would allow the funds to be withdrawn from the Permanent Fund.

TRUSTEE SMITH makes a motion that the Finance Committee recommends that the Full Board of Trustees authorize the transfer of \$1,590,700 from the Alaska Permanent Fund budget reserve accounts to the Mental Health Settlement income account to finance the FY2016 DHSS Medicaid expansion funds approved in August, 2015. The CFO may fulfill this motion with one lump sum or multiple transfers.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the next item is advance appropriation request for future TADA real estate acquisition.

MR. BUCKLAND states that this request is to be able to prime the pump and have something ready in the structure so when a real estate acquisition comes about the funds are readily available to get to the Trust Land Office so that the due diligence process can begin and can demonstrate financial ability to lenders and sellers. He continues that this request is to put a placeholder, \$20 million appropriation, in the TADA that can be drawn upon in the future.

A short question-and-answer session ensues.

TRUSTEE SMITH makes a motion that the Finance Committee recommends that the Full Board of Trustees authorize the CFO to establish a \$20 million appropriation from the Trust Authority Development Account, TADA/IRIS fund 3320, for a future real estate acquisition. These funds do not lapse.

MR. BUCKLAND states that there was an amended motion that went through the Finance Committee and reads it into the record:

The Board of Trustees approves the Finance Committee's recommendation to authorize the CFO to establish a \$20 million appropriation from the Trust Authority Development Account,

TADA/IRIS fund 3320, for future real estate acquisition, which will be subject to Full Board of Trustee approval. These funds do not lapse.

*There being no objection, the motion is approved.*

TRUSTEE SMITH moves to Medicaid reform funding options, and asks Mr. Jessee to continue.

MR. JESSEE states that this is to approve the Finance Committee's recommendation to fund the Medicaid reform elements that were negotiated with the Department and the Legislature during the SB74 process.

TRUSTEE SMITH makes a motion that the Board of Trustees approves the Finance Committee's recommendation to instruct staff to implement a reversion of previously approved Authority funds totaling \$3,804,400 to make funding available for Medicaid reform ABLE Act and technical assistance to providers through MHTAAR and Authority funds during FY16-FY17. The funding reversion consists of \$2,736,300 originally authorized in FY13 through FY15; \$781,000 originally authorized in FY16; and a \$287,100 reduction of initial commitments originally planned for FY17.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the items listed for RMC were covered earlier and moves on to partnership. This item is the behavioral health aide training, curriculum and materials development and implementation. He recognizes Ms. Baldwin-Johnson.

MS. BALDWIN-JOHNSON gives a recap of the overview of this project that was provided to the Finance Committee. This is for \$125,000 to support development of the next phase of the behavioral health aide manual, which is a continuation of support that has been provided to this project and this effort to develop, specifically, the adult and elder section of the behavioral health aide manual.

CHAIR WEBB notes that this was discussed at length during the Finance Committee. He had a couple of questions that were answered sufficiently regarding how this fits in with a much larger project and was convinced that this is worthy of Trust support.

TRUSTEE EASLEY notes that a manual was distributed to trustees, and it is an amazing manual for the information that it contains.

TRUSTEE SMITH makes a motion that the Board of Trustees approves the Finance Committee's recommendation for a \$125,000 FY17 partnership grant to the Alaska Native Tribal Health Consortium for the behavioral health aide training curriculum and materials development and implementation project.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that next is also a partnership and the proposal is domestic violence shelter improvement.

MS. BALDWIN-JOHNSON states that this project is the second year of a two-year effort that was partnered with the Alaska Community Foundation, Foraker, and several other funding partners to pool funding to look at the deferred maintenance issues of domestic violence shelters across the state of Alaska. This funding is fulfilling the next piece of Trust commitment to the project.

TRUSTEE SMITH makes a motion that the Board of Trustees approve the Finance Committee's recommendation for a \$100,000 FY17 partnership grant to the Alaska Community Foundation for the statewide domestic violence improvements initiative.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the next item is also a partnership. It is the Hydaburg Naa Iwaans, Big Cedar Project, and that is Hydaburg Cooperative Association.

MS. BALDWIN-JOHNSON states that this funding for \$75,000 is the remaining match needed to complete the funding package for this. There are several community groups that are supportive of this. She continues that this is supporting them in construction of the Big Cedar house and is an important project to the community. It provides not only a place for their gatherings and their cultural events, but is also a place where people that reside outside of the community are coming back to.

TRUSTEE SMITH makes a motion that the Board of Trustees approve the Finance Committee's recommendation for a \$75,000 FY16 partnership grant to the Hydaburg Cooperative Association for the Hydaburg Naa Iwaan's Big Cedar Project.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the other items are listed as no action required.

CHAIR WEBB states that they are informational items for the Board as a follow-up to actions taken at the Finance Committee. They are in the authority of the Finance Committee to take and do not require full board action.

TRUSTEE DERR asks Mr. Buckland how the asset allocation RFP is coming.

MR. BUCKLAND replies that there is a draft asset allocation RFP. He states that he needs to get together with Trustee Smith for any further comments or refinement, and then it could be ready to go forward.

TRUSTEE SMITH concludes the Finance Committee report.

CHAIR WEBB recognizes Denise Daniello, the executive director of the Alaska Commission on Aging, to give an update.

MS. DANIELLO states appreciation for the opportunity to provide these updates. She continues that she will talk about updates on the ongoing legislative session. She goes through the highlights of the various bills that the Commission took action on that affect senior Trust beneficiaries and other older Alaskans. Then she looks forward into FY2018 at funding that may be at risk for senior programs, given the current fiscal situation. She states concern about the Alaska senior benefits program because it is 100 percent GF-funded and is at risk. The other program is the grant-funded services. These are the lowest-cost services that serve the greatest number of seniors; almost 26,000 seniors, in FY2015. She continues to the national scene and looks at some of the Congressional action that affects legislation and budget items for Americans with Alzheimer's disease, as well as other older Americans. She states that the Older Americans Act was reauthorized in April. This provides funding for all the different services for seniors, including elder protection, senior meals, transportation, vocational training for seniors, and much more. In terms of legislation for Americans with Alzheimer's disease, the National Alzheimer's Association has three federal priorities. The first being an increase in base funding for Alzheimer's research by at least \$400 million in the coming year. The second priority is to improve access to care planning through the Health Outcomes Planning and Education or HOPE Act for Alzheimer's disease. This would add comprehensive care planning as a covered service under Medicare. Third is to educate providers on palliative and house hospice care through the Palliative Care and Hospice Education and Training Act. This is new legislation that is aimed at providing training in palliative and hospice care to healthcare professionals to launch an education campaign about the benefit of these services, and to fund research. She then shares some other items of interest that the Commission is working on that includes amending the funding formula for the Alaska State Plan for Senior Services, as well as Older Americans activities. She continues through her presentation, explaining as she goes along.

TRUSTEE SMITH asks what the impact would be long term if the cuts are sustained.

MS. DANIELLO replies that a different business model will need to be figured out. She states that, initially, they will be working with SDS who have agreed to provide some help with admin support. She continues that she will also be looking to the MASS program, the Mature Alaskans Seeking Skills training program, to have somebody who will be there to answer the phone and greet people. This is being done for the first year. The second year is when one of the planner positions will be lost, which is an important position. She adds that they will do the best that they can do.

CHAIR WEBB thanks Ms. Daniello and welcomes Patrick Reinhart, executive director of the Governor's Council on Disabilities and Special Education.

MR. REINHART begins with legislative priorities, HB76, the council statute, a cleanup of the enabling statute. He states that the Governor signed the bill this morning and it is law. He continues that HB77, the Disability Training and ID bill, has gone through both the House and the Senate and is stuck in Senate Rules. He adds that it did get a lot of support in both the House and the Senate. HB188, the ABLE Act passed, and he thanks the Trust for stepping forward in

helping to develop the program within the State. He continues his presentation, moving to the capital budget items and going through this in greater detail. He moves to the FASD work group and states that they helped create the special education regulation that include children with FASDs. The Medicaid ad hoc committee has been very busy analyzing numerous regulations published by SDS and others. He states that there are still a lot of fears, ADA lawsuit fears, and there is still a long way to go to convince employers that hiring people with disabilities is good for their bottom line. He completes his presentation.

CHAIR WEBB thanks Patrick and calls a break.

(Break.)

CHAIR WEBB calls the meeting back to order. He states that the next item on the agenda is from Kate Burkhart, the executive director of the Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse.

MS. BURKHART states that she will talk about legislation that has or will pass, as well as budget decisions that have been made that affect the constituents and shared beneficiaries. She continues that none of the revenue bills that were proposed by the Governor have passed, although there seems to be a commitment in House Finance to do something with HB245. She adds that they formally supported the bills related to the alcohol tax and tobacco tax. However, they did appreciate and support the consideration of all forms of revenue to help support critical State services. She continues her presentation on the legislation, explaining as she goes along. She states that there is a table of items of interest out of the conference committee motion sheets and has included some information about some of the increments that either affect programs or beneficiaries directly. She explains this in greater detail as she continues her presentation. She states that the future looks a little grim. She continues that General Fund programs are the ones that are receiving the most scrutiny because that is where the deficit is. She adds that, unfortunately, these programs are often the ones that service beneficiaries and constituents with the basic daily needs like food, shelter, cash assistance, education, health, safety, and transportation. She states gratefulness that the funds for the homelessness assistance program and the supportive housing programs were not reduced this year from last year's amounts. She moves on to the Alaska Opioid Policy Task Force, which is the brainchild of a group of Alaskans that went to a 50-state convening in D.C. last fall and learned that many other states have a statewide policy task forces related to heroin and opioids to help guide state responses to what is happening. She explains this in greater detail, adding that this multi-dimensional approach to the problem will be used; and will also employ the participatory processes that the boards have used in the past that have been previously shared, especially around suicide prevention. She adds that the first meeting is May 20 and will be video-conferenced in Juneau, Anchorage, and Fairbanks, and teleconferenced statewide. She states that the task force members were determined by a steering committee with the goal of funding a diverse and representative group of people from around the state. She continues that all of these folks have connections to their community coalitions, their professional organizations and their stakeholder groups, and will be relying on those to ensure that communities have more than ample opportunity to contribute and inform the work that is being done. One new item is what Central Peninsula General Hospital shared that is related to IV drug users in Kenai, Soldotna and the surrounding regions which will be an

interesting part of the conversation. She states that they will be moving forward and having regular updates and then will have a slate of recommendations to share with executive and legislative branches, as well as communities, in the fall. She states appreciation for Trustee Norene's comments, as well as the comments in the Planning Committee report, about the need to be ready to respond as beneficiaries and programs that serve beneficiaries come forward in the next year needing help because of the restriction and constriction in State resources, and the trustees' commitment to really thinking that through. She thanks all.

TRUSTEE EASLEY asks if either of the boards would be willing to send some kind of a resolution of support to Representative Murphy as his bill addressed so many things that the Trust wants.

MS. BURKHART states that there are a couple things that are the hiccups of this bill. The most contentious part of it is what is being called assisted outpatient treatment, which is actually forced involuntary outpatient treatment. She explains this in greater detail.

CHAIR WEBB asks for any further comments or questions. There being none, he thanks Ms. Burkhart. He states that is the end of the agenda items and asks for any other things to take up before the meeting is adjourned, and then public comments will begin at 4:30.

MR. JESSEE states that a retreat for May 17<sup>th</sup> was talked about earlier, and we need some guidance on this.

A discussion ensues.

CHAIR WEBB asks for a motion to adjourn.

TRUSTEE NORENE makes a motion to adjourn the meeting.

TRUSTEE MICHAEL seconds.

*There being no objection, the meeting is adjourned.*

CHAIR WEBB states that public comment begins at 4:30 p.m.

(Full board of Trustees Meeting adjourned at 4:20 p.m.)

## **PUBLIC COMMENT**

CHAIR WEBB reconvenes for the purpose of taking public comment. He states that participants who address issues relating to Trust beneficiaries have priority. He asks all to be respectful and try to adhere to the guidelines. He recognizes Dr. Aron Wolf.

DR. WOLF states that he is a technical advisor for all on the peer review programs and is here as the acting interim director of CHOICES, Inc., which is one of the programs funded by the Trust for a long time. He thanks the trustees for their continued support of the program and begins a

short update. He states that the Soteria part of the program was closed at the end of the last fiscal year. A lot of those people are in the case management program, which is carrying forward. He continues that they have three very exciting programs going on. The first is the Homeless Housing Act program that consists of a team of 10 professionals and nonprofessionals. The focus is on housing, health and work. There are 36 people on by the end of the first year of the grant. The second program is the case management program, which has been on since CHOICES started. He states that the CARF accreditation, three years of national accreditation, was received for this program. He continues that this program provides counseling, group therapy, housing, and coordinates with ACT about housing and jobs. The third program is the Peer Bridger Program, which is another grant. It is an in-reach program to API and to the Providence mental health program. He explains that the peer counselors go into the institutions, meet with patients and help them transition to an outpatient follow-up to either of the other programs. He adds that both of the institutions seem very pleased with this in the coordination of the program. He states that CHOICES is focusing a lot on sustainability. Medicaid is the principal source of nongrant funding and will be working with the State to expedite how Medicaid funding can work best for a nonprofit program like this. He continues that the board is also focusing on fundraising and has a team for the visitor industry charity walk on Friday the 13<sup>th</sup>. He invites any and all to sign up and join the CHOICES, Inc. team. He adds that they also want to focus on individual sustainability for all of the programs going forward. He asks for any questions.

TRUSTEE DERR asks if Dr. Wolf could come back and report about the positive benefits of the Soteria program before it was closed.

DR. WOLF replies that it wound up being funding issues, and he will give a synopsis of the data surveys on it.

MR. JESSEE states that it can be put on the Planning Committee agenda, if the Chair is okay with that.

CHAIR WEBB asks for any other comments or questions. He thanks Dr. Wolf and recognizes Shirley Holloway.

MS. HOLLOWAY thanks all for the opportunity to address the board. She states that her involvement with NAMI came about through tragedy; her daughter, who was living with mental illness, took her own life. She continues that she wanted family and friends to donate to an organization that could help individuals like her daughter, in her memory, rather than send flowers. She adds that she did not know of any and randomly suggested NAMI Anchorage. She contacted them and the executive director, Francine Harbour, and the board chair, Denise Swenson, offered to come and meet with the entire family and a few close friends. She states that this visit meant a lot, and she offered her assistance if it was every needed. She continues that before she knew it, she was serving on the NAMI Alaska board of directors. She adds that NAMI has been a blessing and has been a part of her recovery process. She states that she is dedicated to helping NAMI with the critically important outreach efforts to engage and involve more individuals living with mental illness via their families. People with mental illness recover, and she adds that no one ever said those words to her. She thanks the Trust for the



funding provided to NAMI Anchorage and NAMI Juneau, and encourages, in the next fiscal year, increasing that support. She asks if, in the future, one of the agenda items could be learning more about NAMI and its signature programs and the impact it has on individuals living with mental illness and their families. She thanks all for their time and consideration.

CHAIR WEBB renders his sympathy for the tragedy suffered in her family and asks the Planning Committee Chair, in the future, setting aside some time for a NAMI presentation. He recognizes Jeanne Gerhardt-Cyrus.

MS. GERHARDT-CYRUS states that she is from Kiana and is the coordinator for the Governor's Council work group on FASD. She continues that she is also a parent of multiple children with prenatal exposure and a case manager for the CAPI program. She states that she is here to ask the Trust for formal support of this population of people with FASDs in the way of supported TBI through ABIN, Alaska Brain Injury Network. She continues that the vast majority of people with FASDs do not qualify for services through other programs. They do not meet the eligibility requirements for developmental disabilities, yet this is a disability that occurs prior to birth and therefore is developmental. She adds that it does not meet the definition for a traumatic brain injury even though it is an organic brain injury, a physical brain difference and is not a mental illness. There are no services in the state of Alaska for this population. She asks for an opportunity to meet with the appropriate committee to further discuss and work on ways to formally provide support to this population in the way that ABIN does for the TBI population. Thank you.

CHAIR WEBB thanks Ms. Gerhardt-Cyrus, and suggests the Planning Committee.

MS. CHIVERS states that she is Betsy Chivers and is one of two case managers working with a provider agreement with the State of Alaska Department of Health and Social Services, case-managing individuals who have the diagnosis of FASD that come through one of the diagnostic teams. She continues that she works with the Anchorage team and has the largest caseload in the state. She adds that she has worked with 10 families and 13 individuals; her youngest client is six, and her oldest client is 34. She states that the cost of providing services to individuals with this diagnosis is astronomical for any state, and Alaska is not the only state facing these huge issues with this population. She continues that once the diagnosis is received and the client is under 12, there are a multitude of different services that can be accessed; but once the person ages out there is relatively nothing there to help. She adds that this is a 100-percent preventable organic brain disorder, and while she applauds what is being done, there definitely is more that needs to be done. She thanks all.

TRUSTEE MICHAEL states that she had the privilege of presenting the 2016 awards for the Alaska Alliance for Direct Support Careers, and acknowledges that Betsy Chivers received the Outstanding Direct Service Professional of the year for her work in FASD.

(Applause.)

CHAIR WEBB recognizes Brandon Williams.

MR. WILLIAMS states that he is Brandon Williams and is currently serving as the training and development manager of NAMI Anchorage. He continues that he has been a part of NAMI Anchorage for over a decade, since being a teenager, and credits them with saving his mother's life and his family. He adds that his mother began to manifest signs of bipolar disorder when he was a teenager, which got progressively worse. Roles were reversed and he became the caregiver and comforter for his mother. This went on for a long time and was a rough situation. His mother attempted suicide and was checked into the community mental health center. A diagnosis was finally made, but even with that and medication his mother had no hope until she found NAMI Anchorage. She found her peers and found the idea that recovery is possible. He states that she eventually pulled out of where she was and is now a fully functioning, able-bodied, contributing member of society. In fact, she started working for NAMI Anchorage and eventually become the executive director, Francine Harbour. He thanks all and appreciates the Trust's continued support of NAMI Anchorage.

CHAIR WEBB thanks Mr. Williams and recognizes Francine Harbour.

MS. HARBOUR states that it is harder for her to hear that story than to tell it from her experience, and adds that NAMI Anchorage saved her life. There is nonjudgmental, positive regard for whoever walks through that door no matter what they look like, no matter what they smell like, no matter what they are acting like. She continues that the bottom line is that the Trust has been supportive for seven years. She adds that she was there in the beginning in 2006 when the very first Trust Beneficiary Project Initiative grants were written. She states that she worries every night about the future of NAMI Anchorage. All she knows is that it works and it works without clinicians. She continues that the Trust gets more bang for their buck with them than with the clinicians, and she does truly appreciate them.

CHAIR WEBB thanks Francine for having the courage to tell her story. He continues that it takes tremendous courage to come up and speak about your own experiences. He recognizes Lilly Wurtz.

MS. WURTZ states that she is a new employee and member of NAMI Anchorage. She continues that this is her first time advocating after being trained in partners and policy-making training. She is a lifelong Alaskan resident and a senior sociology major at UAA. She adds that she is also a person who experiences bipolar disorder and has struggled for over a decade with the challenges that mental illness brings, sexual assaults, dropping out of high school and the chronic depression for years. Because of this, gainful employment has been difficult. She states that her recent employment in a meaningful and challenging position has allowed her to begin to work towards becoming more independent and self-sufficient. She continues that being among her peers, in a supportive environment, has increased her self-confidence and helped her believe that she can be successful in the workforce. She adds that this organization will help other people achieve their goals and sincerely hopes that the funding under the Beneficiary Project Initiative Grant continues. Thank you.

CHAIR WEBB asks for any questions or comments.

MS. HARBOUR comments that every single person who works at NAMI Anchorage is a consumer, every one of the board members is a consumer or family member, except for the one provider on the board. She states that they are the essence of the Beneficiary Project Initiative because they do it. It has taken several years and Shirley Holloway to get to the point of finally being ready to do serious fundraising. It has taken a long time and a lot of dedication to get to this point.

CHAIR WEBB recognizes Stephanie O'Connor

STEPHANIE O'CONNOR states that she is a consumer with NAMI Anchorage, diagnosed with bipolar disorder and would not be where she is today without NAMI Anchorage. She continues that she has been a member for more than five years and goes through the programs that they offer. She adds that it is a vital program that runs on a skeleton crew that has made a big difference in her life. She thanks the Trust for giving to a program that makes a difference. Thank you.

CHAIR WEBB recognizes Dewayne Harris.

MR. HARRIS states that he would like to take the opportunity to introduce himself and thank the trustees for the ongoing support of the Alaska Mental Health Consumer Web. He continues that he came on board as the executive director in December and has been blessed to work with some very dedicated beneficiaries that come to work six days a week, provide tremendous, phenomenal services to the participants. He adds that they are a recovery-based program that requires all participants to pass a Breathalyzer, which is the first success of the day. As a peer-driven program, they have the privilege of seeing the benefits of beneficiaries serving beneficiaries. The Web provides a safe, sober, supportive environment so that the participants can begin the process of setting goals, gaining skills, and being connected and linked to resources in the community. He gives a short update and states that the collaboration in the community provides the opportunity to most effectively serve the population.

CHAIR WEBB thanks Mr. Harris and asks for anyone else.

MS CHAMPNEY states that she is Kim Champney, president of the Alaska Association on Developmental Disabilities, or AADD. She also works for REACH, a provider agency in Juneau. AADD is an association of developmental disability providers that represents agencies that support thousands of Trust beneficiaries with developmental disabilities. She continues that they are facing big shifts in Medicaid reform and value their partnership with stakeholders like the Trust and the State. She adds that State staff has an overwhelming number of mandates that trickle down to providers and is grateful to be partners. It makes a big difference. She thanks the Trust for that support.

CHAIR WEBB asks for anyone else to comment.

MS. GERHARDT-CYRUS states that there have been major challenges in raising her daughter and shares that she was largely responsible for having the youth conference in April and

presented at the International Conference on Disabilities and Diversity in Honolulu last week on self-advocacy. She adds that everybody can be successful. Thank you.

CHAIR WEBB states that Public Comment has ended and states that they will meet tomorrow morning at 8:15 at the Trust Land Office.

(Full Board meeting adjourned at 5:30 p.m.)