ALASKA MENTAL HEALTH TRUST AUTHORITY PLANNING COMMITTEE MEETING

January 3, 2014 10:30 a.m.

Taken at:
Alaska Mental Health Trust Authority
3745 Community Park Loop, Suite 200
Anchorage, Alaska 99508

Trustees Present: Paula Easley, Chair Mary Jane Michael Laraine Derr Russ Web Larry Norene

Trust staff present:
Jeff Jessee
Bill Herman
Katie Baldwin-Johnson
Michael Baldwin
Nancy Burke
Miri Smith-Coolidge
Kevin Buckland
Marilyn McMillan
Amanda Lofgren
Natasha Pineda

Others Participating:

Kate Burkhart; Teresa Holt; Charles Boyd; Brenda Bogowith; Mary McEwen.

PROCEEDINGS

CHAIR EASLEY calls the Planning Committee to order at 10:30 a.m. and asks for a roll call. She asks for any announcements.

TRUSTEE WEBB states that the Morningside project has been underway for quite some time. He explains that Morningside Hospital was the place that was Alaska's Mental Health System pre-statehood; and is the reason for the existence of the Mental Health Trust. He explains that the volunteers have been working on finding the records of all the folks sent to Morningside and establishing a database. He states that there will be an event when the Trust is in Juneau to give folks a lot of information about that, give some more background, and recognize the volunteer efforts that have been going on. He adds that it should be a very interesting event.

CHAIR EASLEY adds that the Legislature will be involved as well. She asks for any amendments to the agenda.

MR. HERMAN states that he has two announcements. He continues that the first is the behavioral health system study that is now called a systems assessment. He adds that the RFP has been released and the bidders are supposed to be submitting their proposals on January 21. He states that there will be a PEC February 10, and then there will be a contract on line, and then the 18-month process will begin after a ten-day period of protests, and there should be a contractor on line somewhere around mid-February.

CHAIR EASLEY explains that PEC is Proposal Evaluation Committee.

MR. HERMAN states that the other thing is that he has decided to retire as of May 1 of this year. He adds that he will work with Jeff and Steve on a replacement and a transition play. He continues that it has been great working here, and that he is proud and honored to work for this agency for all these years.

CHAIR EASLEY states that at the retreat there was a discussion on the relationship between the boards and the Trustees, and we were trying to anticipate the best way information could be presented to the Trustees. Some good suggestions were made by the executive directors. She continues that the statement of intent, also referred to as a memorandum of agreement, was reviewed. She states that the committee will be looking at maybe changing it and making it more flexible. She adds that this will be discussed at the February meeting. She moves on to the minutes.

TRUSTEE WEBB makes a motion to approve the minutes of October 31, 2013.

TRUSTEE MICHAEL seconds.

There being no objection, the motion is approved.

CHAIR EASLEY moves into the focus areas and begins with the Beneficiary Employment focus area.

MS. BALDWIN-JOHNSON asks to start with the substance abuse discussion.

FOCUS AREAS

SUBSTANCE ABUSE FOCUS AREA

MS. BALDWIN-JOHNSON states that what is important with the substance abuse focus area is that there are several concurrent efforts that are underway that the Trust staff and others have been actively engaged in. She continues that what is needed is to catalog those efforts and strategies and figure out how those fit into a broader public health framework that can be utilized to guide the planning efforts and strategies for the substance abuse focus area. She states that

they have been actively involved in the Title IV review and rewrite with the Alcohol Beverage Control Board. She continues that there are subcommittees actively looking at the Title IV statutes and proceed with creating better organization to them, and identifying those that actually may need to be revised. She adds that they have not been revised in about 30 years. She states that it has been a very collaborative process and the plan is to consolidate the recommendations from the subcommittees and come back together in March with a broader stakeholder group. She adds that there is a lot of work before final recommendation can be made and come up with a product that can move forward with next session. She moves on to the partnership with Mat-Su Health Foundation which is also connected with the Recover Alaska Initiative, the Children's Trust, and other opportunities for partnering with media and developing communication strategies with the intent of increasing the conversation around alcohol use and abuse and the impact in Alaska. She states that the Trust was a funding partner in the effort through the Alaska Community Foundation, Rasmuson, Children's Trust, Bristol Bay Native Corporation, Providence Health Services, and others, to underwrite the costs of media, reporters and a photo journalist to focus on alcohol-related issues. She moves to the Recover Alaska Initiative and talks about some of the shorter-term strategies that may translate over to strategies to pursue with a statewide media campaign using a positive social norms strategy on communication related to underage drinking, and focusing on shifting some of the norms around that. She asks Mr. Jessee to talk about the Empowering Hope Initiative.

MR. JESSEE states that Senator Kelly has convened a group to look at the issues of the impacts of alcohol. He continues that there are a variety of strategies that the group has come up with; some are relatively new and untested and not without some controversy. He states that there is an interest in looking at making pregnancy tests available by vending machine in bars and liquor stores. He continues that a focus on FAS holds out a lot of promise, adding that there is a willingness to look at a continuum of strategies for pregnant women that need a level of support in order to at least get through that pregnancy without an affected child.

MS. BALDWIN-JOHNSON states that another initiative is focused on trauma and reduction of adverse childhood experiences. She continues that there has been a lot of effort statewide and that there will be some statewide data that will provide a good foundation in figuring out how to move forward with that. She states that it is key to catalog all of the different efforts and strategies to be able to figure out how to fit the broader framework on how to approach this initiative. She asks Trustee Webb if he has anything to add.

TRUSTEE WEBB states that the initiative is intended to be comprehensive, taking a public health population-based approach to a population-based problem being faced in Alaska. He continues that there are many partners and many initiatives and the hope is to use resources to fill gaps where others cannot because they have specific limitations. He states that the first thing is to find out what Alaskans know and believe about this problem and then look at the discrepancies between how the issue is perceived and what is real about the issue. A discussion ensues.

TRUSTEE DERR states a concern of spending more money on more studies.

TRUSTEE NORENE states that the impact will never be advanced until the Native community is drawn in to participate and contribute to the effort, and the Native leaders have dodged the issue.

MS. BALDWIN-JOHNSON states that there are efforts statewide among the Native community and Native leaders to address the issue of alcohol and substance abuse in their communities. She adds that there are Native leaders in the state of Alaska that have been working on a sobriety movement for the past 20 years. She continues that it is important in moving forward to engage those folks that are doing that work, adding that is going to be key.

CHAIR EASLEY states that it is really positive that it is beginning to happen now.

MR. HERMAN states that ANTHC is involved in the behavioral systems assessment, and they want to get together on data gathering and sharing information on their services and their funding.

CHAIR EASLEY moves into the Beneficiary Employment Focus Area.

BENEFICIARY EMPLOYMENT FOCUS AREA

MS. BURKE gives a short outline of the presentation.

MS. LOFGREN states that with the employment initiative there are a lot of opportunities to collaborate with partners and also identify new strategies for increasing outcomes for the Beneficiaries to achieve their employment goals. She gives brief updates on the Disability Employment Initiative and the Employment First Initiative. She states that the Department of Labor and Workforce Development as well as the Department of Health and Social Services have been working on increasing the employment for individuals with disabilities. She mentions that the Governor's Council has been leading several systems changes over the last several years on increasing supported employment and employment services to Beneficiaries and others. She states that it would be helpful to have a consultant do a thorough comprehensive examination of the existing policies and barriers, as well as data. She continues that the data collection and reporting on numbers of Beneficiaries that are currently employed or unemployed is not comprehensive at this time. She adds that this is due to each department and division within the departments collecting that data differently. She states that there is no consistency. She continues that they have met with the Alaska Workforce Investment Board to look at a possible partnership and collaboration with a prevention campaign around some of the choices made that may prevent future employability.

CHAIR EASLEY asks if there is some information on whether there is a high rate of incidence of the barrier crimes in the population that is known.

MS. LOFGREN replies that she does not know. She continues goes through the timeline and what it entails.

CHAIR EASLEY asks for any questions.

TRUSTEE MICHAEL asks if there is a focus on working with the frontline people who work with employers and if there is a focus on the training of staff that actually go to employers and get people employed.

MS. HOLT replies that is one of the big focuses for DBH staff. She states that Sharon Beavers, a program manager for supportive employment, has a background working with employers to recruit employment opportunities for the individuals she worked with. She continues that there is a statewide group working with the national chains and adds the other piece is working with agencies.

CHAIR EASLEY states that Teresa Holt is the executive director of the Governor's Council on Disabilities and Special Education.

TRUSTEE MICHAEL states that, in terms of the initiative, finding and educating employers is the challenge.

A discussion ensues on the subject and its challenges.

TRUSTEE NORENE asks if there is any subsidization of people being employed. He states that subsidization of wages like 10 percent of that would be a heck of a sales gimmick as opposed to a million bucks with the planning.

MS. HOLT replies that specific strategies have not been discussed. She states that there are some incentives as far as tax credits, but no direct subsidy of wages that she is aware of.

A short discussion ensues.

CHAIR EASLEY moves to the Housing Focus Area and recognizes Nancy Burke

HOUSING FOCUS AREA

MS. BURKE states that the housing focus area is well established and this change in focus will allow a look at the population increase for Elders in the State. She adds that with the senior population coming through as a large bubble, the system could skew in a number of different ways. She continues that conversations with the Department of Health and Social Services on the Senior and Disability Services have begun on what is happening nationally with healthcare reform and how to pay for the services that will be needed. She states that the Division that is taking the lead is Senior and Disability Services with Duane Mayes and the assistance of Amy Beckwith. She continues that they have developed some strategies to bring forward and recommend to the Commissioner for public discussion. She states that the Commission on Aging has taken an advocacy lead in requesting from Senior and Disability Services a focus on a State plan for Alzheimer's disease. She continues that there has been a focus on the behavioral health side and are finding the people who require long-term services, who have conditions that will be lifelong, have similar issues to the Elders that need long-term supportive services and talks about some of the barriers to success.

CHAIR EASLEY asks for questions. There being none, she recognizes Bill Herman.

SCORECARD

MR. HERMAN introduces Mary McEwen who works with Health Planning and Systems Development and did the revisions of the Scorecard last year. He states that this year a work group of people from the Boards and Division was added to look at more of the drill-down information. He continues that there is quite a bit of progress and are trying to keep that work group together through spring. He asks Ms. McEwen to go through a bit of the changes that were made and why.

MS. McEWEN states that overall the Scorecard is quite similar in format to last year and previous years. She points out and goes through the changes. She states that all of the data for the columns for the most current Alaska data, the previous year's Alaska data and the most current U.S. data are still there. She continues that two indicators have been changed; No. 2 was formerly suicide attempts was changed because the way that Alaska Trauma Registry is calculating the rate of suicide attempts have changed and is not comparable with previous years; the second change is No. 18, which was the high school graduation rate, and have gone with a more specific in the difference between the high school graduation rate for students with and without disabilities.

CHAIR EASLEY asks about Item 20. She states that the percentage is outrageous.

MS. McEWEN states that Item 20 is percentage of minimum wage income needed to afford average housing and agrees that it is outrageous. She adds that is an indicator used for several years and is based on a national metric which looks at minimum wage as working full time and the fair market rent from HUD for a two-bedroom apartment, and then doing the math on that. She continues that a person would generally need to work two minimum-wage jobs full time to get that.

MS. BURKE states that number that HUD uses comes from the calculation that is becoming slightly out of date and does not reflect much of the United States right now.

A short discussion ensues.

TRUSTEE MICHAEL states that she likes this tool, but worries about homelessness.

The discussion on the Scorecard indicators continues.

MR. HERMAN moves to the memo that looks at the trends over the last five years and talks about the results and differences.

CHAIR EASLEY thanks Mr. Herman and moves on to the budget, and recognizes Trustee Derr.

TRUSTEE DERR asks for a break.

(Lunch break.)

CHAIR EASLEY recognizes Mr. Herman on the programmatic budget item.

MR. HERMAN thanks Kate Burkhart and her staff for developing some information and did walk through all of the transaction details for anything that had relevancy to the Trust. He highlights the areas of concern and goes through them briefly. He asks Ms. Burkhart if the boards have looked more closely at the behavioral health grants and the Medicaid reductions, and if those are being seen as maintenance of effort or actual reductions.

MS. BURKHART replies that the Medicaid reduction is that a great deal of the savings has come through the more strict pharmacy controls rather than therapeutic services. She states that the provider community has not said anything about the impact on their ability to provide therapeutic services or recipient support services. She continues that there have been complaints about the pharmacy controls and the preauthorizations and the requirements around how many psychotropics someone can be on. She adds that is less concern than the reduction in the grant line.

A discussion ensues.

MS. BURKHART states that there are some imminent opportunities for Trustees and Trust staff to help improve the system. She continues that the Department is currently soliciting for care management for high utilizers of services. She adds that looking at the way Medicaid services are reimbursed is something that the Trust and the Boards can bring to the Governor's initiative around Medicaid reform that he is proposing and intends to do rather than expansion. She states that the provider community says that the way they are getting paid right now is insufficient and is a place where Trustees can bring their influence and expertise.

CHAIR EASLEY thanks Ms. Burkhart and recognizes Trustee Webb.

TRUSTEE WEBB states agreement that this is a crisis situation. He continues that Commissioners made it clear that they are going to move away from grants and turn the mental health system into a purely Medicaid-funded system. He adds that is the intent and is what they are going to do. He states that Trustee Norene has pointed out that there are times when the largest community mental health agency in the state simply turns off the switch and will admit no one else, which is an outrage. He continues that as many facts as possible should be gathered to assist and try to influence things. He adds that the Trust needs to start taking on a much greater advocacy role and has a responsibility to advocate.

CHAIR EASLEY recognizes Trustee Michael.

TRUSTEE MICHAEL states that \$50-plus million in State money is being spent on mental health services through grants that are not Medicaid reimbursable. She agrees that the Trust has to advocate protecting the State money and it should be a high priority.

TRUSTEE NORENE states that his concern is reflected in the way he votes when some of these issues come up before the Trustees. He continues that the Trust is spreading too thin and there is a need to reprioritize and need to resolve that in any grant situation the majority of the recipients be a Beneficiary. He adds that he is not saying simple or vast majority, just the term "majority," to give the staff some flexibility analyzing the program. He states that the need is to think about mental health directly. He continues that he is not saying alcohol is not a worthwhile project, but people cannot get service in Anchorage or Fairbanks, but yet gun safes are sent to Togiak.

CHAIR EASLEY asks Mr. Herman if there is any further information or discussion.

MR. HERMAN replies no.

CHAIR EASLEY states that there will not be another Planning Meeting until after going to Juneau. She recognizes Trustee Derr.

TRUSTEE DERR states that the \$650,000 on tobacco compliance was not flagged and asks about it.

MR. HERMAN replies that was a reduction in the federal grant, and smoking is not as strongly related to Beneficiaries as other things; so it was not highlighted.

TRUSTEE WEBB asks about the impact on the capacity for assisted-living licensing with the million dollar reduction in the residential licensing.

MR. JESSEE replies that there is no impact statement on that yet.

A short discussion ensues on the Trust advocacy effort.

MR. JESSEE states that the biggest concern is where actual programs have been reduced and the actual impacts. He recommends going into Full Board, taking care of business, and break until 1:30.

CHAIR EASLEY adjourns the Planning Committee meeting.

(Planning Committee Meeting adjourned at 12:59 p.m.)