

State of our State

- **Update on Major Reforms & Investments**
 - Medicaid Reform and Redesign
 - Monique Martin, Gen Moreau-Johnson
 - Psychiatric/SUD Care System
 - Randall Burns, Katie Chapman, Andy Jones
 - Housing & Homelessness
 - Daniel Delfino
- **Criminal Justice Reform and Reinvestment**
 - Adam Rutherford, Brad Myrstol, Susan Di Pietro, Alysa Wooden, Gen Moreau-Johnson
- **Workforce and Provider Perspectives**
 - Kathy Craft, Tom Chard, Jerry Jenkins, Lizette Stiehr

Substance Use Disorder (SUD) Path to Recovery





Treatment and Recovery Grant Funding for FY 2018 by Service Area and Program Type

Service Area	PES	SED	SMI	SUD Res	SUD Out	Detox	Opioid	Support	Direct	Not Direct	TOTAL
Anchorage	\$1,297,384	\$2,721,971	\$4,856,450	\$4,684,116	\$1,566,080		\$1,284,662	\$23,499,386	\$454,533	\$18,859,520	\$20,383,542
Bethel	\$873,300	\$216,309	\$161,362	\$804,021	\$234,405					\$1,088,930	\$3,778,347
Copper Center	\$94,415	\$40,666	\$41,366		\$39,566						\$216,013
Cordova	\$59,329	\$86,276	\$92,659		\$92,659						\$330,926
Dillingham	\$67,563	\$67,563	\$68,268	\$77,541	\$27,971						\$308,906
East Aleutian Islands	\$49,495	\$57,869	\$38,771		\$112,531						\$258,666
Fairbanks	\$609,933	\$1,008,747	\$1,477,345	\$953,061	\$275,149	\$1,341,749	\$1,026,601	\$93,153			\$6,785,738
Homer	\$278,640	\$118,700	\$167,812								\$565,212
Juneau	\$194,777	\$794,675	\$1,199,748	\$442,543	\$449,449	\$54,636	\$350,000	\$210,153			\$3,696,041
Kenai / Soldotna	\$180,000	\$299,502	\$299,544	\$100,000	\$653,929	\$1,000,000	\$275,092	\$104,640			\$2,873,117
Ketchikan / Metlakatla	\$101,940	\$387,118	\$318,338	\$5,000	\$73,035						\$940,191
Kodiak	\$96,142	\$234,266	\$399,595		\$113,418						\$953,391
Kotzebue	\$192,144	\$64,904	\$64,904		\$923,140						\$1,245,192
McGrath	\$50,045	\$4,838	\$22,924		\$6,785						\$84,587
Nenana	\$227,638		\$22,924		\$6,785						\$242,443
Nome	\$228,528	\$131,126	\$24,780		\$768,654				\$100,000	\$1,253,118	\$2,356,096
Palmer / Wasilla	\$500,927	\$473,949	\$943,024	\$964,740	\$1,417,018				\$150,000	\$137,485	\$4,587,112
Petersburg / Wrangell	\$373,488	\$64,830	\$121,208		\$241,452				\$101,175		\$902,153
SEARHC Region	\$94,112		\$308,212	\$67,272	\$321,042						\$790,638
Seward	\$40,168		\$142,847		\$135,368						\$318,403
Sitka	\$245,582	\$491,445	\$80,000	\$109,225	\$150,000						\$1,076,252
TCC Region	\$439,291	\$62,000	\$111,069	\$278,546	\$154,129				\$1,000,000	\$2,045,046	\$3,930,971
Utqiagvik	\$542,874	\$12,771	\$31,527		\$155,074						\$742,246
Valdez	\$92,956	\$35,340	\$58,245		\$113,479						\$300,019
West Aleutian / Pribilof	\$58,155	\$38,730	\$69,770		\$107,063						\$273,801
Other Statewide Grants	\$2,041,549							\$692,620		\$531,088	\$3,265,247
TOTAL	\$6,988,875	\$9,455,244	\$11,050,288	\$8,486,045	\$8,312,522	\$386,445	\$2,936,355	\$4,704,602	\$705,788	\$2,876,345	\$57,746,387

Program Type Grouping	
PES Psychiatric Emergency Services	SUD Outpatient Adult - Outpatient - SA Women & Children - Outpatient - SA Youth & Family Outpatient - SA SA Treatment for OCS
SED SED Youth & Family Outpatient - MH Youth Residential - MH	Withdrawal Management Detoxification
SMI Adult Residential/Supportive Housing SMI - Outpatient - MH	Opioid Outpatient Opioid Treatment Program - SA
SUD Residential Adult Residential - SA Women & Children Residential - SA Youth Residential - SA	Support Services Peer and Consumer Supports Other Direct Services Trauma Informed Behavioral Health Services Therapeutic Court Other Not Direct Services Sobering Center, Service Patrol, Referral, etc.

Program Type

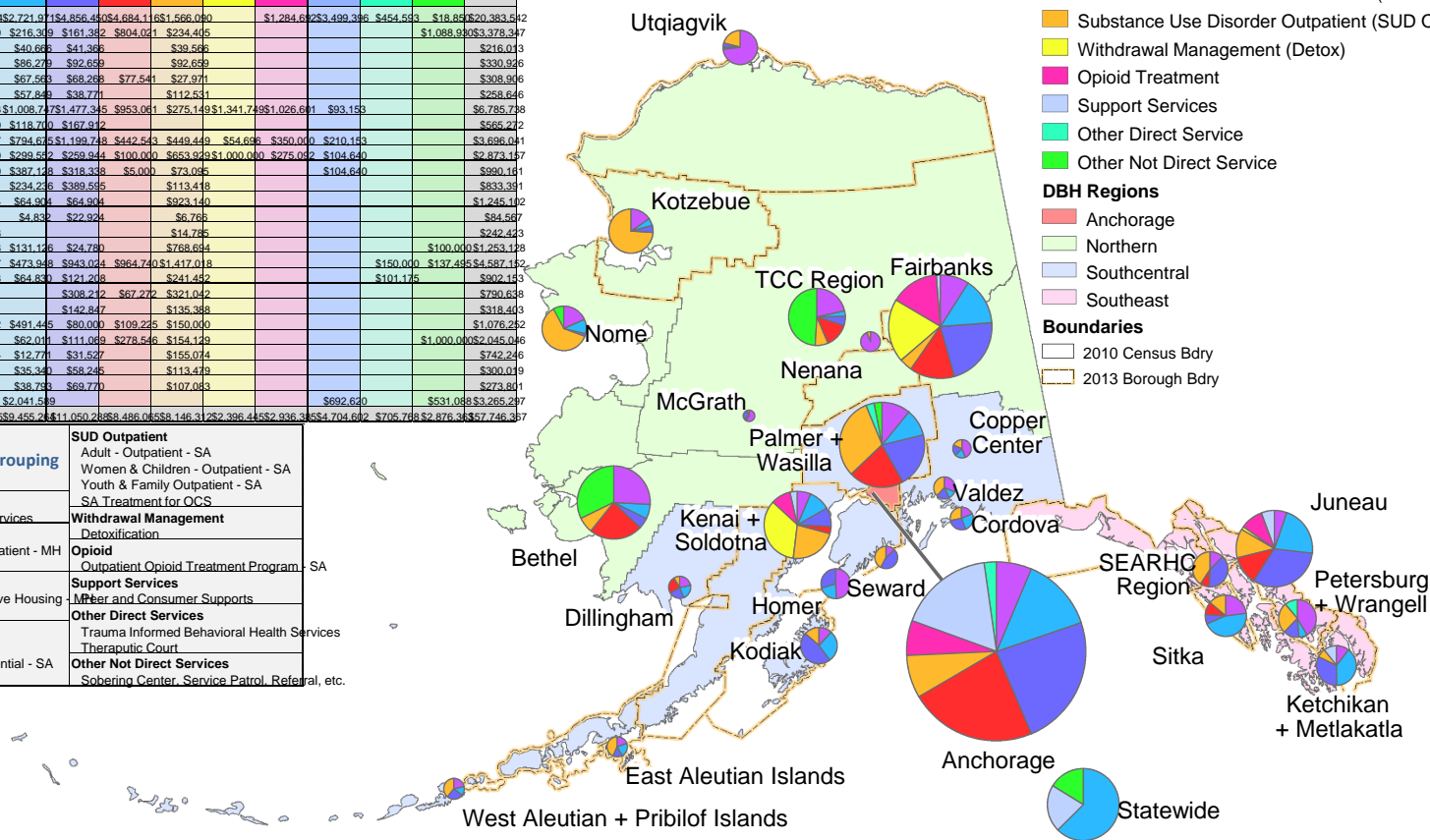
- Psychiatric Emergency Services (PES)
- Severe Emotional Disturbance (SED) Youth
- Serious Mental Illness (SMI) Adult
- Substance Use Disorder Residential (SUD Res)
- Substance Use Disorder Outpatient (SUD Out)
- Withdrawal Management (Detox)
- Opioid Treatment
- Support Services
- Other Direct Service
- Other Not Direct Service

DBH Regions

- Anchorage
- Northern
- Southcentral
- Southeast

Boundaries

- 2010 Census Bdry
- 2013 Borough Bdry





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Alaska Department of Health and Social Services
Division of Behavioral Health

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Health and Social Services > Behavioral Health

Welcome to Behavioral Health

HEALTHY ALASKA Medicaid Redesign
Click here for information and eligibility facts.

Randall Burns
Director

"Partners promoting healthy communities."

Mission & Values

Complex Behavior Collaborative
Serve clients with challenging behaviors? Help is available.

Worried about a VULNERABLE ADULT?
1-800-478-9996

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Alaska Psychiatric Institute
Behavioral Health Systems & Policy
Prevention and Early Intervention
Fetal Alcohol Spectrum Disorder
Medicaid Provider Assistance Services
Behavioral Health Quality Assurance Section

Treatment Bed Availability
BRS Residential Services
Residential SUD
Psych Inpatient, Crisis, ER

Initiatives
Complex Behavior Collaborative
Disaster Planning
Evidence Based Practices
Integrated Housing & Services
Health Information Technologies
Medicaid Behavioral Health Collaborative

The Department's Medicaid redesign and reform efforts
include applying to put in place an 1115 Behavioral Health Medicaid Demonstration Waiver to provide greater system flexibility and offer a broader range of alternative services to fill existing service gaps and reduce Alaska's reliance on crisis services. In addition, the State will contract with an Administrative Services Organization (ASO) to offer an improved system of care management. To learn more, please visit our Medicaid Reform in Alaska page.

Regulations Governing Medicaid Coverage and Payment of Autism Services

Behavioral Health Continuum of Care
The Division of Behavioral Health has a commitment to improving the quality of life of Alaskans through the right service to the right person at the right time. The continuum of care represents a commitment to mitigating the risk of behavioral health with prevention and early intervention, ensuring Alaskans are served effectively at the lowest level of care possible while recognizing that the most acute and chronic conditions require a corresponding increased level of services.

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Alaska Department of Health and Social Services
Division of Behavioral Health

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Health and Social Services > Behavioral Health > Residential Substance Use Disorder (SUD)

Residential Substance Use Disorder (SUD) Treatment Bed Availability

Residential Substance Use Disorder (SUD) Treatment Programs offer organized treatment services that feature a planned and structured regimen of care in a 24-hour residential setting. They are staffed 24 hours a day and provide individual, group and family therapy, recovery skills development, relapse prevention and emotional coping strategies for persons experiencing a substance use disorder.

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Sections
AKAIMS
Alaska Psychiatric Institute
Behavioral Health Systems & Policy
Prevention and Early Intervention
Fetal Alcohol Spectrum Disorder
Medicaid Provider Assistance Services
Behavioral Health Quality Assurance Section

Treatment Bed Availability
BRS Residential Services
Residential SUD
Map of Locations
Bed Availability
Psych Inpatient, Crisis, ER

Initiatives
Complex Behavior Collaborative
Disaster Planning
Evidence Based Practices
Integrated Housing & Services
Health Information Technologies
Medicaid Behavioral Health Collaborative
Performance Management
System

FIND A LOCATION Residential SUD
BED AVAILABILITY Residential SUD
Joan Houlihan
Program Coordinator

Current Events & Announcements

> Substance misuse and addiction treatment

Are you finding it difficult to stop using alcohol, prescription medications or other substances? If you've thought about cutting down or stopping, here is a list of providers, [Substance Use Disorder Treatment Providers 4/2/18](#), or see the links under Treatment Bed Availability at right.

Here are resources for information on opioids (prescription pain medications, heroin and more) and treatment options:

- > [Opioids Fact Sheet](#)
- > [Heroin and Opioid Use in Alaska \(http://opioids.alaska.gov\)](http://opioids.alaska.gov)
- > [Decisions in Recovery: A new treatment tool for Opioid Use Disorder](#)

List of Alaska providers who offer opioid misuse treatment:

- > [Medication Assisted Treatment Providers - Updated 12/12/17](#)
- > [DHSS Answers to Questions Received Through Public Comment Related to the Proposed Autism Services Regulations](#)



Substance Use Disorder Treatment

Challenges

Limited Capacity

Workforce

Stigma

Opportunities

1115 Waiver

Recovery Movement

Technology

Integration of Care



Kathryn Chapman, LCSW, MAC

State Opioid Treatment Authority

Division of Behavioral Health

Kathryn.chapman@Alaska.gov

907-465-4959

DBH Integrated Housing and Recovery Supports

Housing

Permanent Supportive Housing

“Housing First”

Scatter Site and Single Site

Integrated Affordable

Low Barriers Voluntary Services

Employment

“Employment First”

Individual Placement and Supports



Integrated Competitive Supports

Shift from Assess-Train-Place to

Place-Train-Assess Satisfaction

Peer Support

Recovery Driven

“Lived Experience” Qualified

Certified Supervised

DBH Supported Programs

Housing

- Moving Home Program: 150 Tenant based vouchers (AHFC) + Services (DHSS Sponsoring Agencies) = greater than 90% Retention
- ACT: Multi-disciplinary team with wrap-around services (DBH) + housing subsidies (AHFC) = reduced API usage (50% at 1 year), reduced Drug and Alcohol use (25% of pre-program usage)
- ICM: Intensive Case Management (DBH) + housing subsidies (AHFC) = reduced use of Anchorage Safety program (70%), encounters with Fire (34%) and Police (39%) reduced drug and alcohol use
- 811 PRA Integrated housing for people with disabilities in Assisted Living Homes: Project-based subsidy (AHFC/HUD and DHSS) + services (DHSS) + transition funds (Trust) = first 10 apartments recently identified for pilot phase
- API/ADRD: Community Living in ALH (DBH) for individuals in API/DET's with dementia—3 placed, 3 being evaluated for placement = Improved life quality + decreased cost
- ISA: individualized funding (DBH) for move-in expenses and to avert evictions supports all housing programs = improved access and retention

DBH Funded Programs

Supported Employment: Individual Placement and Supports (IPS) and Clubhouse

6 Programs throughout the state (Kenai Peninsula, Juneau, Anchorage)

1 program to IPS fidelity, 1 certified as a Clubhouse, 3 participating in training to achieve IPS fidelity, 1 pilot to be awarded funding for FY2019

Trust support for development of employment with DBH by providing support for training and fidelity reviews and facilitating collaboration with DVR

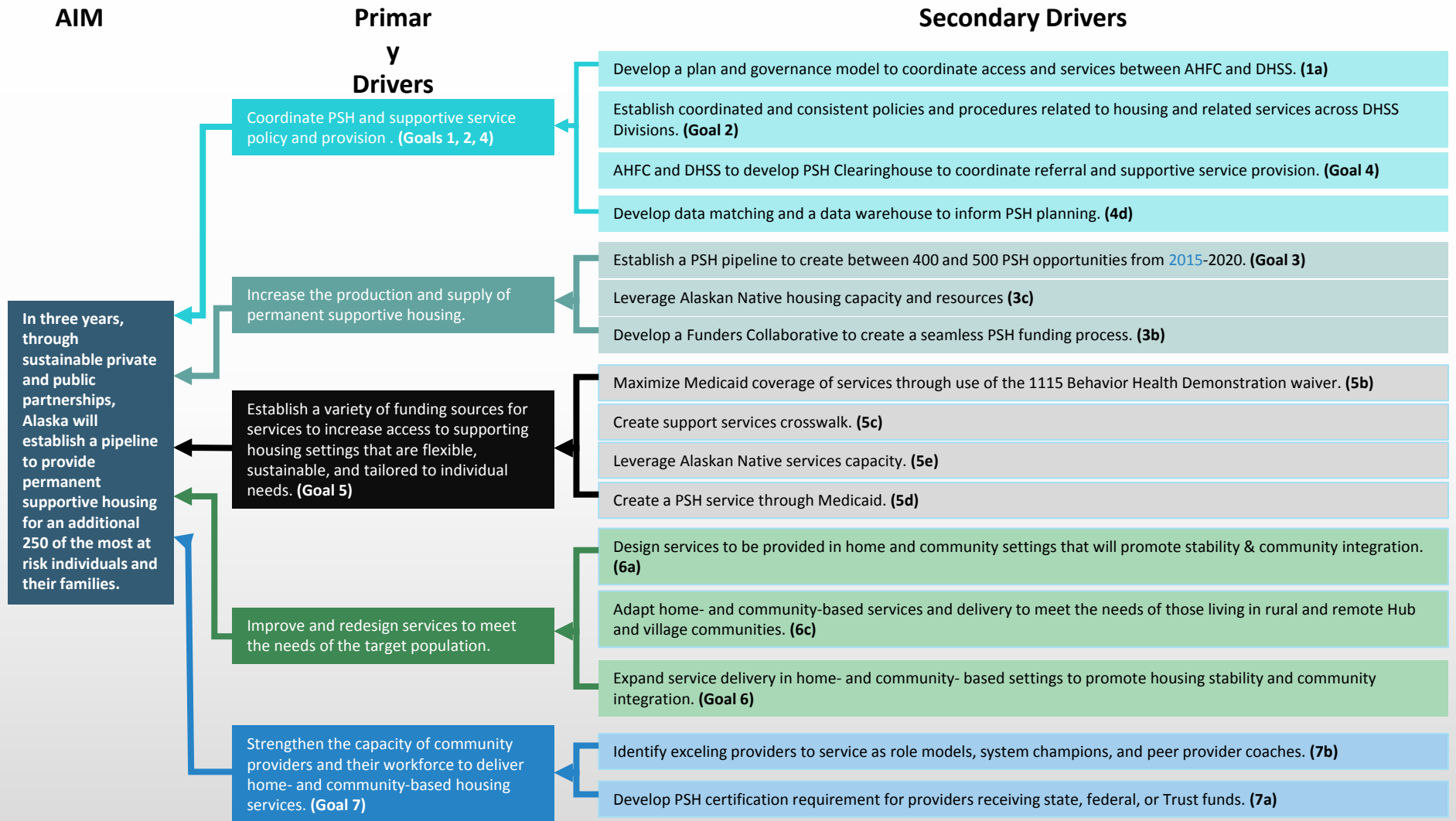
Peer Support Workforce Implementation

3 Workgroups to develop Certification and Training, Education and Advocacy and Collaboration among BH, SUD, Re-Entry DOC, Youth and Families

Provider Survey indicated that there is interest in expanding a peer workforce especially if there is a credentialing process

IAP CMS Technical Assistance to Strengthen Partnerships between Medicaid and Housing

- Used existing PSH Plan as foundation to strengthen partnerships (refer to next slide—Driver Diagram). This plan has been adopted by the Alaska Council on the Homeless.
- Stakeholders: DBH, SDS, Health Care Services, AHFC, AAHA, HUD, AK Coalition on Housing and Homelessness, Governor' Office, plus other ad hoc members (ICA, DOC)
- Accomplishments: Draft crosswalks on funders for housing and services and revised action plan (to be finalized in early July), data sharing workgroup (ongoing) developing mechanism to share data between the HMIS and Health Care Services, improved understanding of resources and needs
- Need to do: develop specific shared definitions of services (e.g. case management, pre-tenancy and tenancy supports, develop better and sustainable funding mechanisms for housing subsidies and services (funders collaborative)



Needs, Gaps, Questions

- The Unknown! What services will CMS approve through 1115 or SPA to support improved housing, employment and general recovery outcomes?
- The Job To Do! Develop descriptive definitions of commonly used service terms, e.g. case management, pre-tenancy and tenancy supports, community-based recovery supports
- Major Gap 1! Alternative and diverse funding for support services that may not be billable to Medicaid
- Major Gap 2! Available affordable housing: Alaska needs increased housing subsidies (“tenant-based” allows families to carry the subsidy with them; “project-based” may give more assurance on long term housing project sustainability but less choice)
- An Identified Need! Continued training on the Evidenced-Based Supported Employment Program, e.g. IPS
- Another Need! Improved collaboration among stakeholders and partners, including cost sharing for employment, housing, and development of a robust, peer workforce
- Question! How do we facilitate the continued development of a culture that embraces recovery-oriented systems of care?