
Trust

Alaska Mental Health
Trust Authority

Stakeholder Input FY 2020 + 21

Beneficiary System, Policy and
Budget

Stakeholder Roles & Expectations

- Provide input from your respective area of expertise
- Look at our system holistically - not just what impacts a specific beneficiary group that is of particular interest to your work
- If you represent a Trust-funded project and/or position - take that "hat" off for purposes of discussion for these two-days

Process Overview

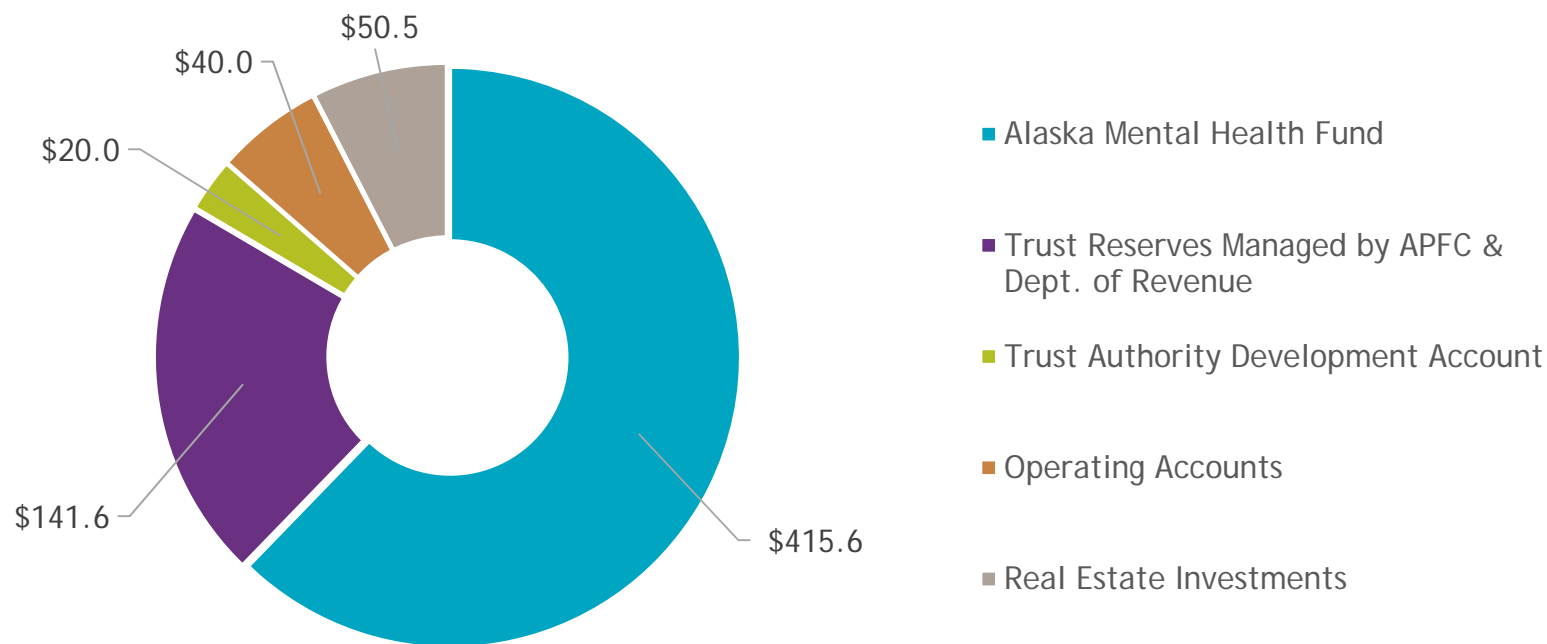
June 20-21	FY20/21 Stakeholder 2-day meeting
June 25	Follow-up survey sent to participants
June 25 - July 20	Program team incorporates results from work session and conducts follow-up with key stakeholders as required
July 6	Stakeholder survey and any additional comments due to the Trust
July 9	Summary report distributed to participants: FY20/21 Budget Stakeholder 2-day meeting
August 1-2	Trust staff present draft budgets to the Trust program and planning committee
August 3-20	Trust staff gather identified additional information and data
September 5-6	Trust staff present draft FY20/21 budgets to the board of trustees for approval



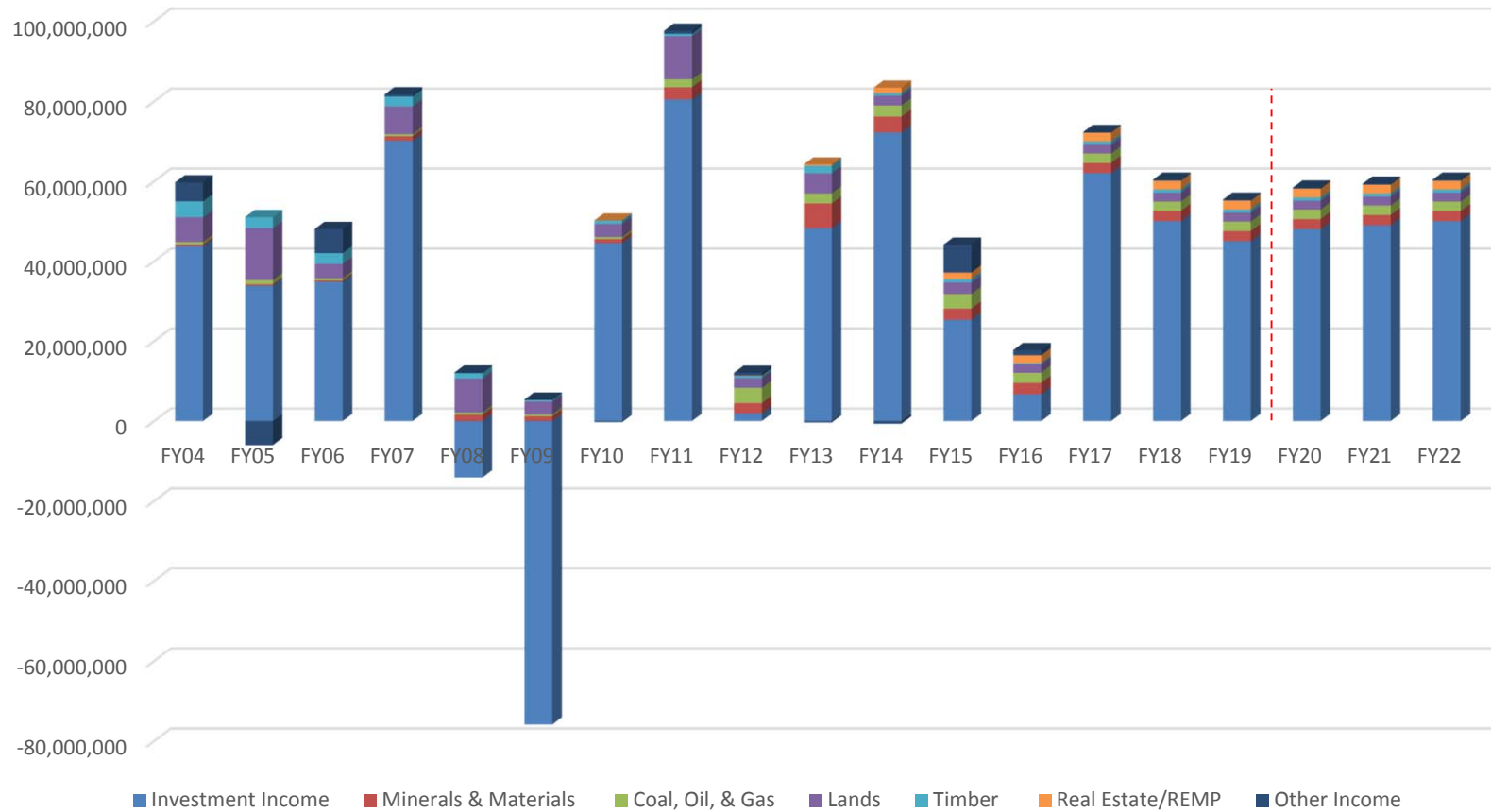
TRUST FINANCIAL STATE

Trust assets are strong and stable...

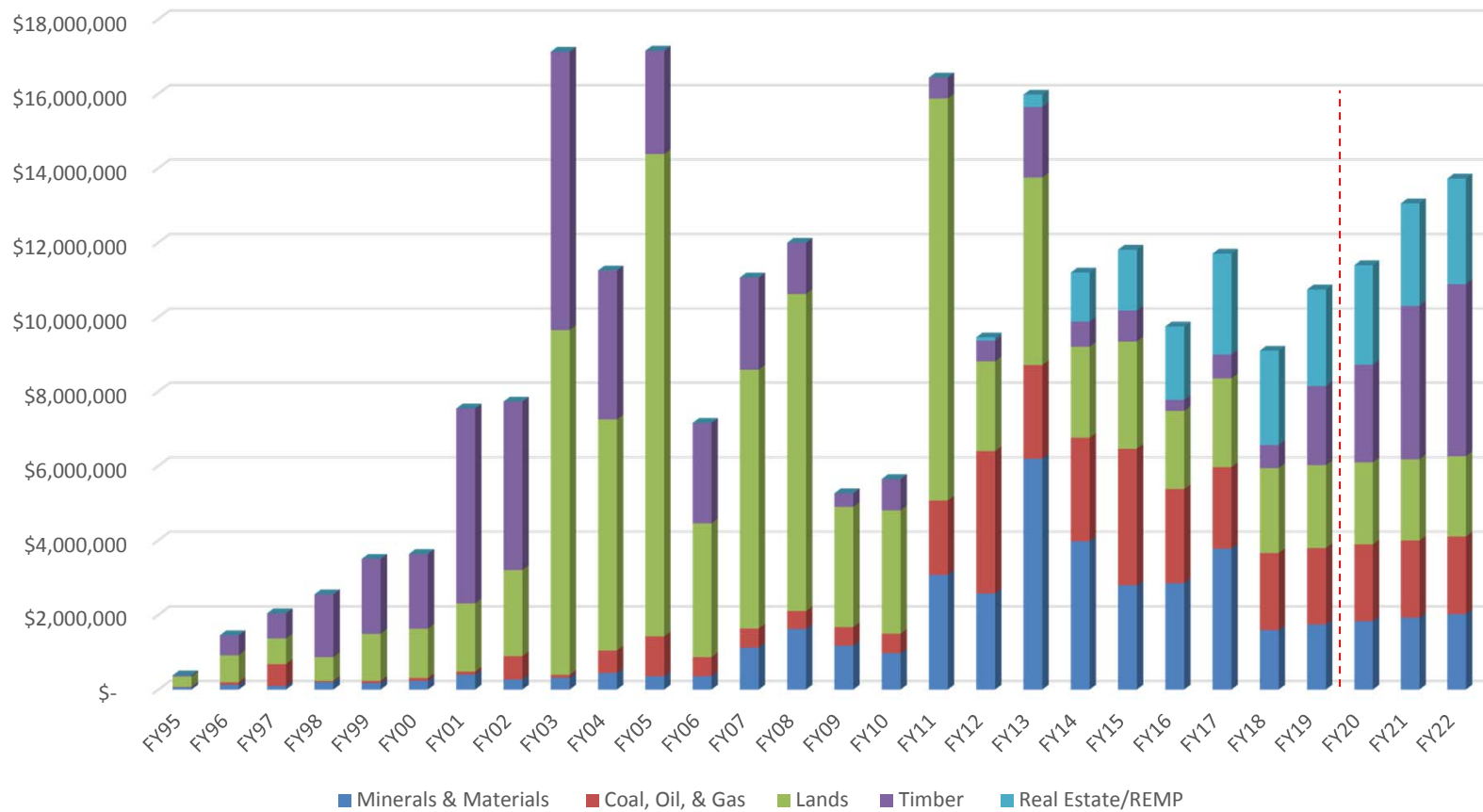
Projected Trust Investments at the close of FY18: \$667 Million



Trust Revenues Historical | Projected Revenues



Trust Land Office Historical | Projected Revenues



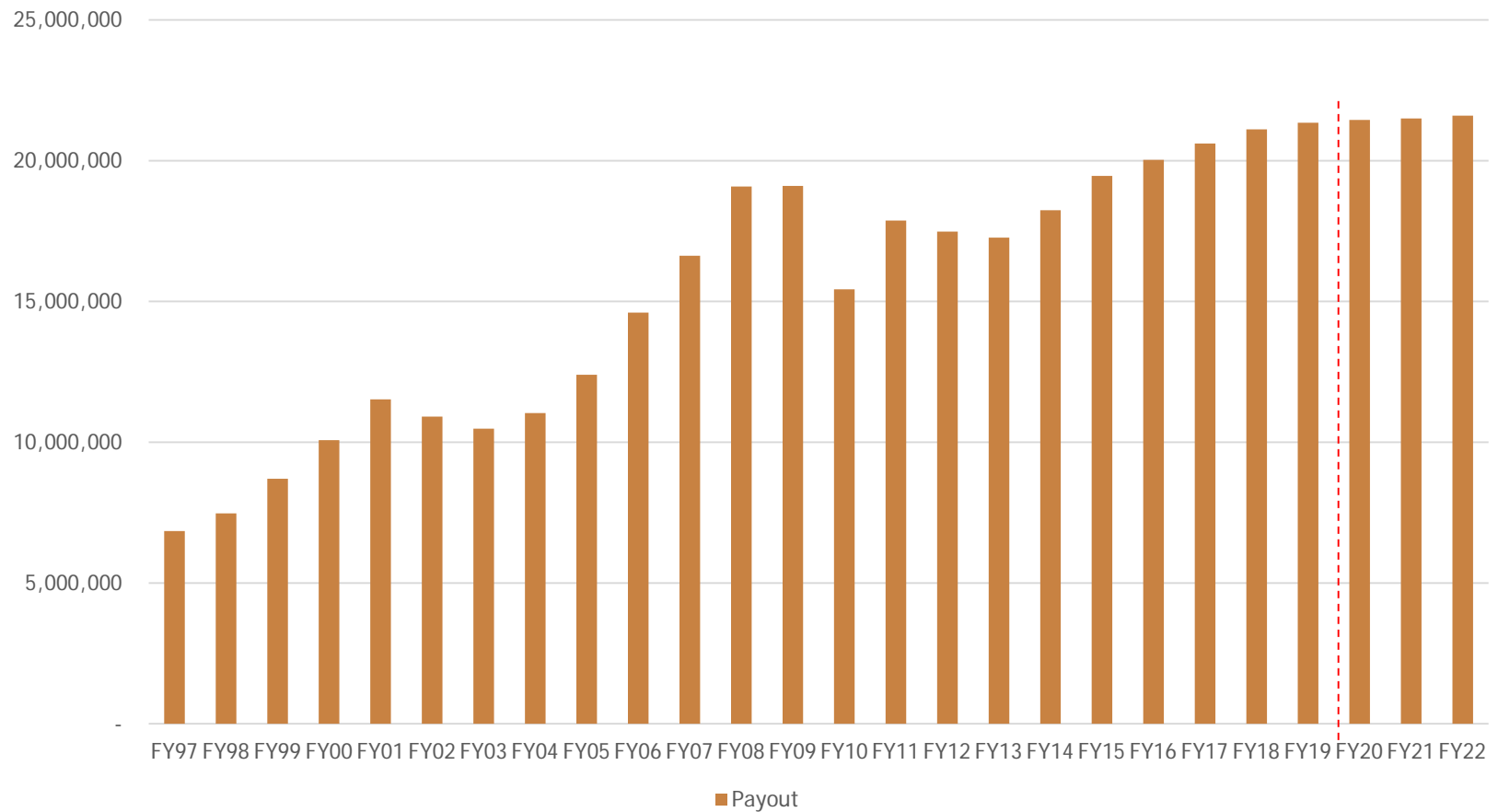
Utilize Percent of Market Value (POMV)

The Trust's base payout is 4.25% of the average value of the fund's cash assets



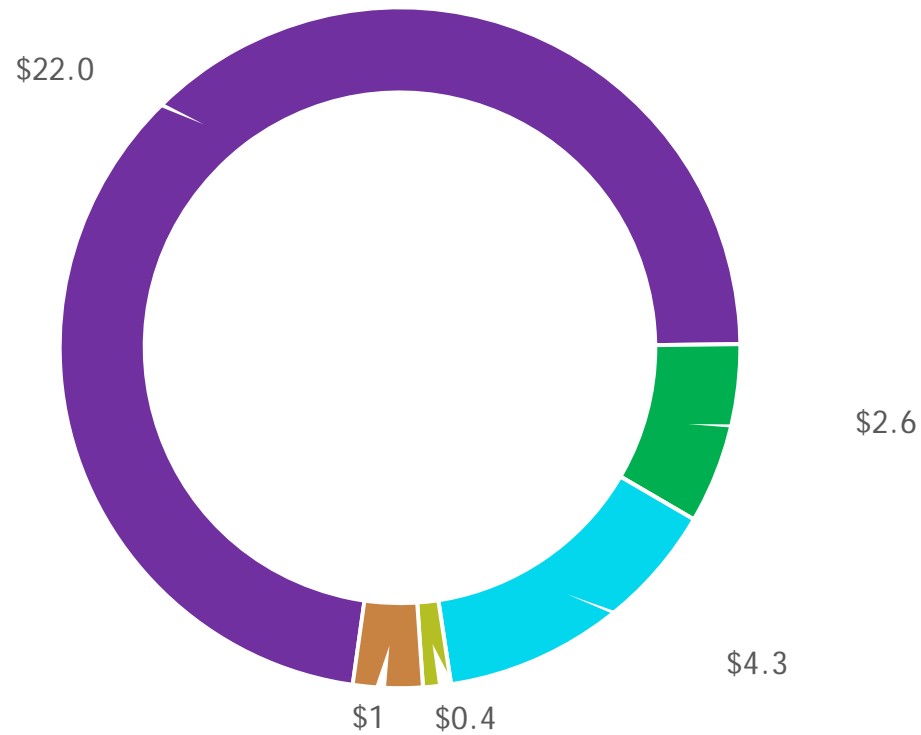
Funding approach ensures relatively stable cash flow from year to year

Historical Annual APFC Payouts | Projections



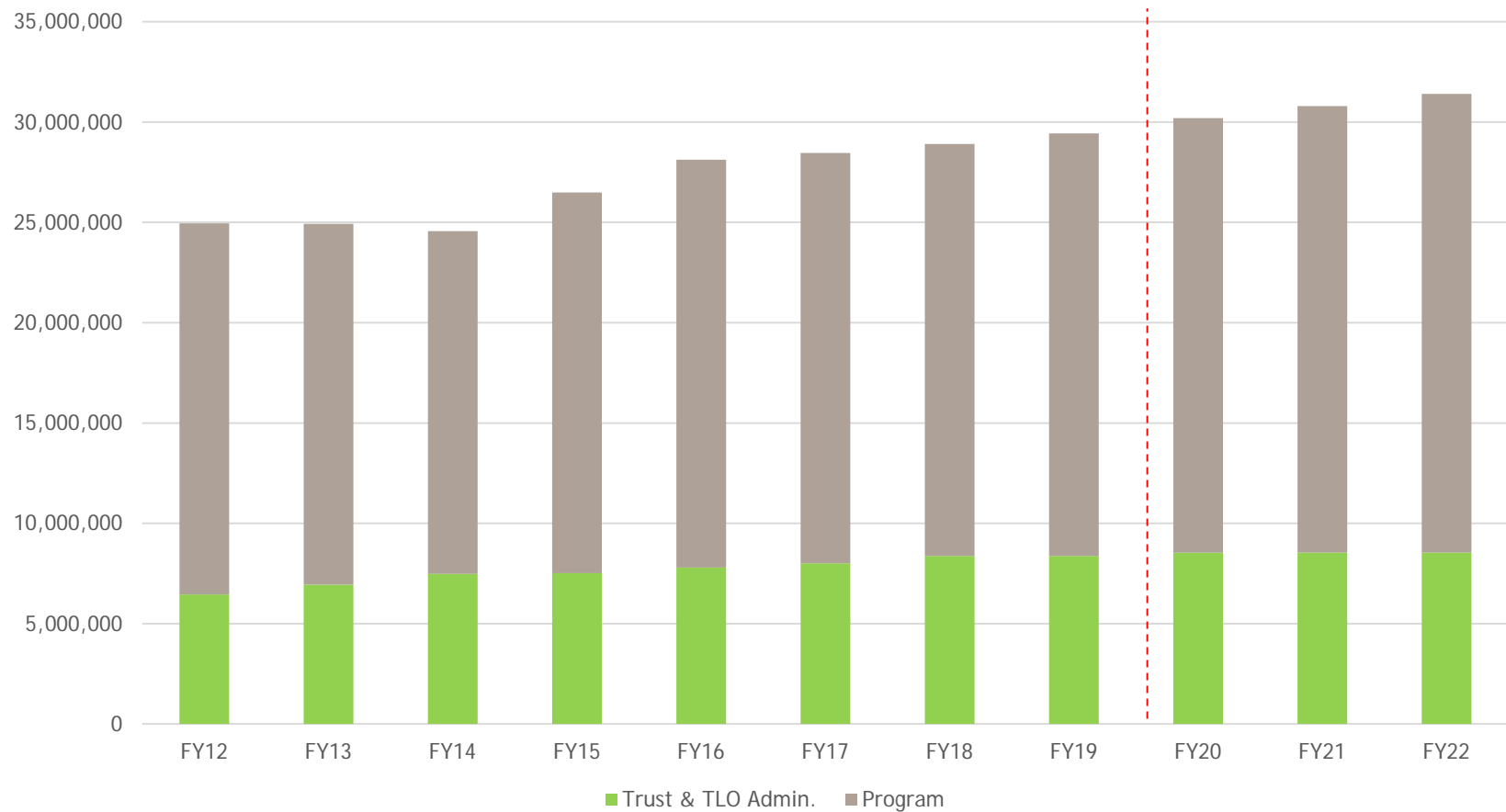
FY19 Trust Budget

FY19 Funding Sources: Total \$30.3 Million



■ Payout ■ Lapsing Appropriations ■ TLO Spendable Income ■ Interest & Other ■ Unobligated Prior Years

Historical & Projected Total Trust Budget





TRUST MISSION AND THEORY OF CHANGE

Defining the Mental Health Program

Alaska Statute 47.30.056

“The integrated comprehensive mental health program for which expenditures are made under this section; shall give priority in service delivery to persons who, as a result of a mental disorder or of a disorder identified in this section; may require or are at risk of hospitalization; or experience such major impairment of self-care, self-direction, or social and economic functioning that

they require continuing or intensive services.”



BENEFITS OF A COMPREHENSIVE INTEGRATED MENTAL HEALTH PROGRAM

- Encompasses all beneficiary groups
- Bridges departments and divisions
- Endures administrations and legislatures
- Clearly delineates the Alaska's publicly-funded mental health program
- Establishes program-level vision and priorities
- Serves as the glue that connects reform efforts
- Evolves as the program evolves



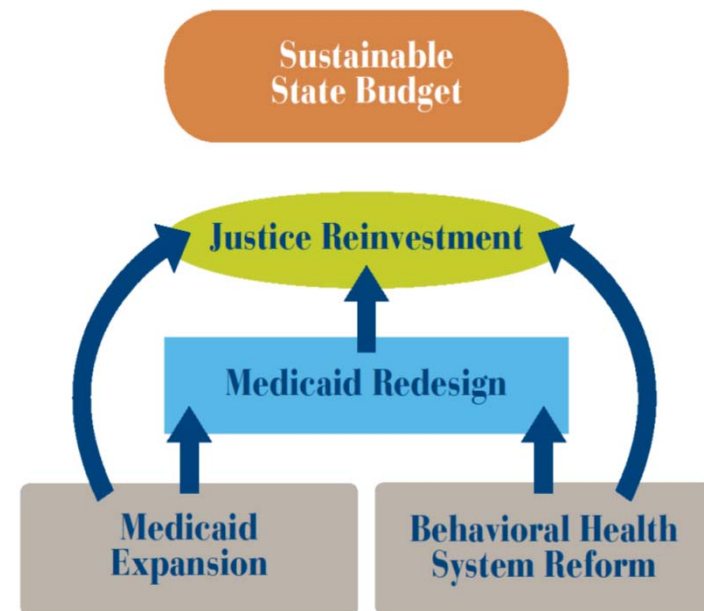
A COMPREHENSIVE INTEGRATED MENTAL HEALTH PROGRAM

Alaska Scorecard 2017		Trust	
Key Issues Impacting Alaska Mental Health Trust Beneficiaries		Alaska Mental Health Trust Authority	
Click on the title of each indicator for a link to complete sources and information			
Key to symbols:	✓ Satisfactory	↔ Uncertain	✗ Needs Improvement
	Most Current U.S. Data	Previous Year's Alaska Data	Most Current Alaska Data
			Status
Health			
Suicide			
1 Suicide (rate per 100,000)	13.5	27.1	25.3 ✗
2 Percent of adults reporting serious thoughts of suicide	4.0%	4.7%	5.2% ✗
Substance Abuse			
3 Alcohol-induced deaths (rate per 100,000)	9.5	20.4	22.9 ✗
4 Percent of adults who engage in heavy drinking	6.5%	8.0%	7.3% ↔
5 Percent of adults who engage in binge drinking	16.4%	20.5%	18.2% ↔
6 Percent of population (age 12 and older) who use illicit drugs	9.8%	12.9%	13.2% ✗
7 Opioid overdose mortality rate	10.4	16.6	15.9 ↔
Mental Health			
8 Days of poor mental health in past month (adults)	3.6	3.6	3.5 ↔
9 Percent of teens who experienced depression during past year	29.9	27.2%	33.6% ✗
Access			
10 Percent of population without health insurance	8.8%	14.9%	14.0% ↔
Safety			
Protection			
11 Child maltreatment (rate per 1,000)	9.1	15.5	16.8 ✗
12 Substantiated reports of harm to adults (rate per 1,000)	*	1.6	1.3 ↔
13 Injuries to elders due to falls, hospitalized (rate per 100,000)	1,783	945	901 ✓
14 Traumatic brain injury, hospitalized non-fatal (rate per 100,000)	*	82.2	86.9 ↔
Justice			
15 Percent of incarcerated adults with mental illness or mental disabilities	*	44.1%	44.1% ✗
16 Rate of criminal recidivism for incarcerated adults with mental illness or mental disabilities	*	39.2%	38.9% ↔
17 Percent of arrests involving alcohol or drugs	*	38.9%	36.9% ↔
Living With Dignity			
Accessible, Affordable Housing			
18 Chronic homelessness (rate per 100,000)	26.9	15.2	34.6 ✗
Educational Goals			
19 Difference between high school graduation rate for students with and without disabilities	*	25.3%	22.2% ↔
20 Percent of youth who received special education who are employed or enrolled in post-secondary education one year after leaving school	*	56.3%	63.8% ↔
Economic Security			
21 Percent of minimum wage income needed to afford average housing	*	77.5%	89.2% ✗
22 Average annual unemployment rate	4.9%	6.5%	6.6% ✗
23 Percent of SSI recipients who are blind or disabled and are working	4.7%	6.6%	6.6% ✓
Prevalence Estimates: Alaska Mental Health Trust Beneficiaries			
Alaska Mental Health Trust Beneficiary Population	Estimate	Population Rate	
Serious Mental Illness (ages 18+)	22,648	4.1%	
Serious Emotional Disturbance (ages 9 to 17)	5,582	6.0%	
Any Mental Illness (ages 18+)	109,729	20.0%	
Alzheimer's Disease (ages 60+)	7,442	9.0%	
Traumatic brain injury (all ages)	11,793	1.6%	
Developmental disabilities (all ages)	13,267	1.8%	
Dependent on and abuse of alcohol (ages 12 to 17)	1,572	2.6%	
Dependent on and abuse of alcohol (ages 18+)	40,031	7.3%	
Dependent on and abuse of illicit drugs (ages 18+)	17,438	3.80%	

1. Medicaid Reform and Redesign

2. Justice Reform Reinvestment

Multi-prong approach: expanding and redesigning Medicaid and reforming the behavioral health system are the foundation for successful criminal justice reform.



A catalyst for change to improve the lives of beneficiaries

Mission & Principles

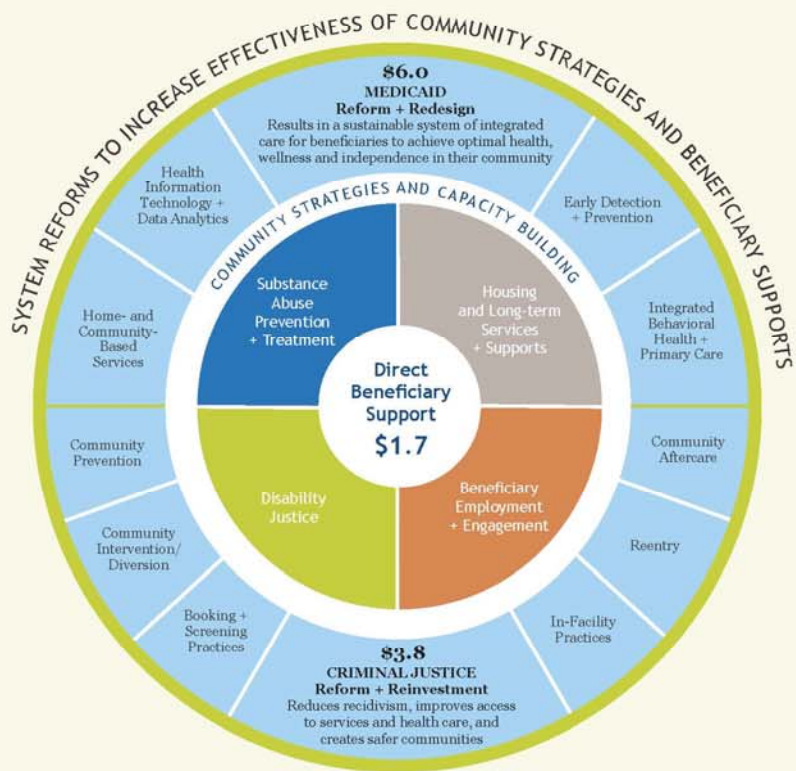
The Trust's mission is to improve the lives of beneficiaries through advocacy, planning, implementing and funding a Comprehensive Integrated Mental Health Program.

The Trust is committed to:

- Education of the public and policymakers on beneficiary needs
- Collaboration with consumers and partner advocates
- Maximizing beneficiary input into programs
- Continually improving results for beneficiaries
- Prioritizing services for beneficiaries at risk of institutionalization or needing long-term, intensive care
- Useful and timely data for evaluating programs
- Inclusion of early intervention and prevention components

Investments

Beneficiary, Community and System



Key Outputs

- ▶ Beneficiaries access quality, integrated, whole person health care
- ▶ Decrease in youth alcohol and substance use and adult binge drinking and illicit substance use
- ▶ Reduce adult and youth involvement in the criminal justice system and reduce criminal recidivism
- ▶ Beneficiaries achieve integrated employment and have access to quality peer support services
- ▶ Beneficiaries can access safe and affordable housing with appropriate community-based social services to maintain tenancy
- ▶ Beneficiaries access effective and flexible person-directed long-term services and supports

Results

- Beneficiaries have improved health
- Adults and children are free of the burdens created by alcohol and substance abuse
- Alaska's workforce meets beneficiary and employer needs
- The criminal justice system effectively accommodates the needs of victims and offenders who are Trust beneficiaries
- Beneficiaries are employed or meaningfully engaged in their communities
- Beneficiaries maintain stable, safe housing
- Beneficiaries live the lives they choose with supports they direct

FY19 budget numbers in millions as approved September 7, 2017.

Trust
Alaska Mental Health
Trust Authority

Day 1 Objectives:

- 1) Create an understanding of the state of our Community
 - Drivers and gaps that are pushing beneficiaries out of community and into institution levels of care
- 2) Generate an awareness of indicators and trends suggesting an increase in beneficiaries receiving services/supports in more restrictive environments
 - Key Question: What is needed to ensure beneficiaries thrive in our communities
- 3) Provide an update on the state of the State's major system reform efforts --- Medicaid and Criminal Justice and other critical service components
- 4) Learn how the Tribal Health Organizations are supporting beneficiaries in communities
- 5) Understand how addressing Alaska's workforce needs is critical to supporting beneficiaries and the success of these system reforms

Day 2 Objectives:

- 1) Create an understanding of the state of our Community
 - Long Term Services and Supports (LTSS) and Intellectual or Developmental Disabilities (IDD)
- 2) Provide an update on the key areas of Trust investment
- 3) Deep dive table discussions
 - Identify key issues to be addressed for beneficiaries to thrive in communities
 - Identify what's required to drive change (financial, policy, legislation, capacity, etc.)
- 4) Learn how the Veterans Administration is supporting beneficiaries in communities
- 5) Report out / Next steps