

ALASKA MENTAL HEALTH TRUST AUTHORITY
PLANNING COMMITTEE MEETING

January 26, 2016
9:01 a.m.

Taken at:

Alaska Permanent Fund Corporation
Hugh Malone Board Room
801 West 10th Street, Third Floor
Juneau, Alaska

OFFICIAL MINUTES

Trustees present:

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

Trust staff present:

Steve Williams
Jeff Jessee
Miri Smith-Coolidge
Carley Lawrence
Amanda Lofgren
Kevin Buckland
Mike Baldwin
Katie Baldwin-Johnson
Carrie Predeger (via telephone)

Others participating:

Monique Martin, Mary McEwen, DHHS; Kate Burkhart, ABADA and Mental Health Board;
Kathy Craft; Patrick Reinhart, Governor's Council on Disabilities & Special Education.

PROCEEDINGS

CHAIR MICHAEL calls the meeting to order. She asks Ms. Smith-Coolidge to explain the new microphone system.

MS. SMITH-COOLIDGE explains the system, adding that a private conversation while someone else is presenting will be picked up.

CHAIR MICHAEL asks for any announcements.

MR. JESSEE states that a new trustee, Jerome Selby from Kodiak, has been appointed by the Governor. Because he is filling a vacancy, he has been a trustee as of yesterday. He is very excited about joining the board.

CHAIR MICHAEL states that she had an opportunity to interview him, and he is an excellent candidate. She moves on to approval of the minutes of October 21, 2015.

TRUSTEE WEBB makes a motion to approve the minutes for the October 21, 2015 Planning Committee meeting.

CHAIR MICHAEL asks for an approval of the minutes for November 17, 2015.

TRUSTEE NORENE makes a motion to approve the minutes for the November 17, 2015 Planning Committee meeting.

CHAIR MICHAEL recognizes Michael Baldwin.

MR. BALDWIN states that Monique Martin from the Department of Health and Social Services is here to give an update on the Medicaid expansion and reform and redesign.

MS. MARTIN states that she is a healthcare policy adviser in the Office of the Commissioner at DHSS. She continues that there was a big milestone last Friday, which is when the report went live. It is posted to the website and was shared with the Governor's office first. She adds that there has not been a lot of feedback from folks, and Commissioner Davidson will be presenting to the Senate Finance Committee tomorrow morning. She states that one of the things asked for is a very brief overview of the report. Then there will be an introduction of Senate Bill 78, which was the Governor's expansion bill. She encourages folks to tune in to that. She continues that Senator Kelly will be introducing Senate Bill 74, which was his reform bill. Currently, since the report was released, a representative from Agnew::Beck has presented to the Planning Committee several times, and there are no surprises in it. She states that the big part that is new was the actuarial analysis that was completed. That really helped, and it shows in the product of the actuarial analysis. She clarifies, in the executive summary of the report that there is a chart of some of that analysis which has a disclaimer that the total of the actuarial analysis for cost and savings which are not summed because they considered each as a standalone entity; and there will be some opportunities or overlap in savings. The other points she clarifies is that actuarial analysis does not take into account some of the administrative costs to the Department. She explains this more fully. She states that they are working on the Emergency Care Initiative, which is strongly supported by the ASHNHA, the Alaska State Hospital and Nursing Home Association; and we want to take into account that it has a shared savings model. She adds that tomorrow morning at the Senate Finance Committee will be the first opportunity to talk about the report.

MS. LOFGREN explains that the actuarial analysis actually does a five-year projection looking at fiscal year '17 through '21 and the savings. She continues that one of the things learned in this project was the value that an actuarial analysis brings and that there is not that capacity currently in State for that. She states that that is something the Department is really looking at in having actuarial analyses in other projects.

CHAIR MICHAEL asks if the Agnew::Beck report is on-line.

MS. LOFGREN replies that she forwarded a copy of both of them and the article this morning to all. She states that the contract was awarded to Menges to basically look at if the expansion was worthwhile. She continues that that it is very favorable to moving forward with expansion and talks about criminal-justice-engaged individuals definitely benefitting from expansion. She adds that it highlights the capacity of the Department and states that the Department does not currently have the capacity to undergo any significant reform. It has reference to privatization of API, Pioneer Homes, and some of the juvenile justice facilities. It suggests, other than privatization, the Department should consider working with tribal health organizations.

MS. MARTIN expands on the Menges Group report in more detail. She states that the good news is that states that implement Medicaid expansion have less of an impact related to the woodwork effect than states that have implemented it.

MS. LOFGREN states that the other part about the Menges report is that it walks through each of the legislative bills and makes recommendations of whether that is an appropriate component or not.

MS. MARTIN states that she will delve into the numbers in the Menges Group report and their methodology of determining them. She continues that the good news is the expansion population is coming along like Dr. Helvoigt anticipated. She adds that they are getting ready to update the website and have some information on the cost savings to General Fund dollars that are anticipated at the Department. She explains more fully.

A short discussion on the numbers ensues.

MR. JESSEE states the need for a Medicaid reform bill to have some authority to do some of these things. He continues that the Behavioral Health Access Initiative in the Agnew::Beck report is very important to be part of this whole Medicaid reform. He adds that Amanda Lofgren is becoming a real positive resource in working through some of the issues. This is very important work.

TRUSTEE EASLEY asks, in talking about pulling all the legislation together into a comprehensive package, is it foreseen that the managed-care organizations or the forms of capitation would be included in that or will that be further in the future.

MS. MARTIN replies that it is not a recommendation that Agnew::Beck forwarded for consideration. She states that what was heard from folks was the need for some foundational

reforms in the Medicaid system first before jumping too far, which is also a bit of her concern. She expands on this further.

MS. LOFGREN explains that the Administrative Service Organization, the ASO, is recommended in two of the reform initiatives, in the Primary Care as well as the Behavioral Health Access Initiative. She states that essentially the Department would contract with this ASO to actually manage, do the provider networking, the quality, the utilization management, numerous different components of the system where the Department does not have that capacity needed for that contract management for the provider system. That is a huge recommendation.

TRUSTEE EASLEY asks if that was included in any of the legislative bills.

MS. LOFGREN replies that the current bills do not include ASO.

TRUSTEE EASLEY asks if it is private or just another arm of DHSS.

MS. LOFGREN replies that it would be a private group and could be somebody from the Lower 48. There are numerous ASOs all over the country.

A discussion ensues.

CHAIR MICHAEL asks the trustees if they would like a hard copy of the Agnew::Report. She asks Mr. Baldwin to get that out.

TRUSTEE EASLEY asks Mr. Baldwin to explain some of the new categories on the Scorecard.

MR. BALDWIN states that Mary McEwen, with the Health Planning and Systems Development Section of Public Health, has been working on the Scorecard for a number of years. He asks her to explain. He adds that no new categories or indicators have been added.

MS. McEWEN states that the Scorecard has been published for a number of years and is a really useful document because it takes all of this information and distills it down into a single page. She gives a quick review of what it is and what it does. She continues that all of the indicators are the same as last year, and there was a slight change made to one of the questions.

TRUSTEE EASLEY asks if things are getting better or is it just better data.

MS. McEWEN replies that, for some of these, especially traumatic brain injury and falls among the elderly, the data has gotten a lot better; but it also means that it is harder to compare over time because the date is changing.

MR. BALDWIN states that one of the challenges of a Scorecard and having this information is that with a drill-down some backup information is available, but we cannot get into all the causative factors and why there has been a drop and so on.

TRUSTEE DERR states that at No. 16, the percent of arrests involving alcohol or drugs, has gone up by more than 10 percent in one year, which is huge, and the symbol should be a red X.

TRUSTEE WEBB states that it has some severe limitation as a data source because it is dependent on a lot of different things, and from everything he knows, that massively understates the percentage of actual arrests that involve alcohol or drugs. He explains this.

TRUSTEE EASLEY states that suicide went from 23.5 to 22.3, and the percent of adults reporting serious thoughts of suicide were the same. She asks why they did not get the same grade.

MS. McEWEN replies that the reason it gets the needs improvement symbol is based on the criteria that it is more than 15 percent worse than the national.

MR. BALDWIN states that it is kind of within a normal range of variation and it is kind of stabilized.

TRUSTEE WEBB adds that the best data we have is being used.

MR. BALDWIN states that data is key and the more support into the infrastructure and data analytics will give thick data. This is what is supporting the big data and the story around it.

CHAIR MICHAEL asks for any other questions. She thanks Ms. McEwen and states appreciation for all her work. She calls a 15-minute break.

(Break taken.)

MR. BALDWIN states that next is the FY15 Performance Summary of the MHTAAR projects that the Trust-funded. It is in the packet on page 59. He recognizes Carrie Predeger.

MS. PREDEGER states that the Trust issues grants from two different fund sources: The Authority Grant funds, which go to community organizations around Alaska; and then the Mental Health Trust Authority Authorized Receipts, or MHTAAR funds, which go to State agencies for specific operating and capital projects around the state. The grants team, which consists of Luke Lind, the grant administrator, and myself, the grants accountability manager, is currently managing 167 active grant projects; 120 of which are Authority Grants, and 47 are FY16 MHTAAR grants. She continues that today she will review the FY15 MHTAAR grant performance summary. This will provide an overview of the MHTAAR projects that made up 55 percent of the total amount of funding that was awarded by the Trust in FY15. These project roll-ups are provided annually, and it is important to note that projects differ each year both in their type and scope. She states that in FY15, 45 MHTAAR grants were awarded for a total of \$8,517,200. Grants were categorized by project type, either capacity-building, capital equipment, data and planning, direct service, outreach, or Workforce Development and Training projects. The majority of MHTAAR projects for FY15 were direct service in nature, encompassing about 29 percent of all projects, and just over 39 percent of the total MHTAAR funding. The next section looks at grants by focus area. She continues that 32 of the 45

MHTAAR projects were associated with a specific focus area, with 16 of those projects belonging to Disability Justice and seven were in the Housing Focus Area. The other focus areas for FY15 were funded primarily with Authority Grant funds.

MR. WILLIAMS asks for any questions.

TRUSTEE DERR comments a concern that 16 out of those grants are in the Disability Justice Area which Steve Williams is also the COO. She states that split of grants and carrying a double load is the concern.

MR. WILLIAMS states that Trustee Derr's point is well taken. He spends a big chunk of time not specifically on the grant itself, but working with the entities and the overarching goal.

CHAIR MICHAEL states that Trustee Derr's comment was good, and the more that can be delegated the better because of his high-level position.

MS. PREDEGER moves and looks at grants by government entity. For FY15 the University of Alaska System and the Division of Behavioral Health under DHSS received the greatest amount of funding and had the most number of grant projects out of the 18 entities listed. This was identical to FY14. They were the top two grantees for a number of projects, as well as funds. She moves on to the numbers served. Every October, when grantees complete their annual MHTAAR status report, they are asked to provide the number of unduplicated individuals served in each of the four categories. She adds that the core categories are always the same: Primary beneficiaries, secondary beneficiaries, outreach and education, and professionals trained as a result of the project. In FY15, 10,365 Trust beneficiaries were served, with a total of 21,877 individuals served or impacted by projects.

TRUSTEE DERR states that a question that concerned her last year and again this year is that the primary beneficiaries continues to drop. It dropped last year significantly and dropped again this year. Then the total number of beneficiaries has almost halved from FY13. She asks if the reason for this is known.

MS. PREDEGER replies that the Bring the Kids Home Initiative had several grants which had quite a few total beneficiary numbers, and outreach, especially. She continues that the impact is from taking away those projects, and having a lot less total projects each fiscal year since that focus area has wound down.

MR. BALDWIN states that at one point there were 15 or 16 projects that had high beneficiary numbers and FY15 was the last Bring the Kids Home grant. He continues, that is why the numbers have been progressively dropping.

TRUSTEE WEBB states that the nature of the types of grants changed and putting more money into capacity building, like Medicaid reform, may change the number of beneficiaries. He continues that there is a need to dive deeper into this to get a real sense of those kinds of changes.

TRUSTEE DERR states that the focus areas are still the same and wonders, if in the analysis, it is known why the drop continued.

A discussion ensues.

TRUSTEE WEBB states that he is hearing that included in the broad overview would be an analysis of some of the key policy issues, what changed, why did it happen, how will that trend play out, and what is expected for the future.

The discussion continues.

MS. PREDEGER states that those are great suggestions and agrees to a bit more of a dive into why those numbers have changed. One side note is that the grantees have, over the years, also been able to more accurately report both the numbers and in performance measures how the beneficiaries are doing. She continues that gradually more accurate data is being received. She moves on to project performance and how the grantees did. She states that Trust staff evaluates each project and assigns a rating of either red, yellow, green, which are all color-coded. Grants receiving the yellow or red status rating are projects that are of concern to staff. The assigned Trust staff member works with the grantees to address any of those areas of concern. Of the 45 grants awarded in FY15, three received a red status rating and four received a yellow status rating. All the remaining 37 received a green rating.

CHAIR MICHAEL asks which projects got the red rating.

MS. PREDEGER replies that they were the Department of Corrections research analyst position, the Department of Corrections rural reentry and FAASD education pilot. The third project was an Office of Children's Services project for early intervention and infant learning. It was the Positive Parenting Training. There being no questions, she moves to the next section: Are the Trust beneficiaries better off as a result of these projects and are things looking better? She goes through the numbers and completes her report.

CHAIR MICHAEL asks for any other questions.

TRUSTEE WEBB comments that the report is really thought-provoking and asks the Chair if, at a Planning Committee meeting in the not-too-distant future, these can be looked at and spend some in-depth time talking about where to go and what impact a change in directions might look like.

TRUSTEE NORENE agrees, stating that it is healthy for the trustees to see the grants and prioritize.

TRUSTEE EASLEY asks Ms. Lofgren how she sees an impact on the funding of MHTAAR and Authority Grants when those waivers are in place.

MS. LOFGREN replies that that is a big question and thinks there will be an impact.

TRUSTEE DERR suggests a refresher course on the grants program.

MR. JESSEE states that it would be very timely to do that.

TRUSTEE SMITH states that it would be useful to see a trend line over maybe a five-year period.

TRUSTEE DERR asks if there has been a discussion on this as the absolutely No. 1 priority, and are the other focus areas going to be done away with.

CHAIR MICHAEL replies that discussion has not been had, but it seems that this issue is becoming bigger and bigger and the total impact is an unknown.

TRUSTEE DERR states that it is an unknown until the end of the Legislature and what they decide. She continues, that conversation should be had after the Legislature adjourns.

This discussion continues.

CHAIR MICHAEL asks Mr. Jessee for any comments.

MR. JESSEE states that the right questions are being asked and there is this potentially transformative environment. He continues that the right information is being asked for, and for the next several months there are regular Planning Committee meetings scheduled where this dialogue can continue. He adds that this is going in the right direction for the dialogue and eventually to make some formal sort of policy decisions.

The discussion continues.

MR. BALDWIN moves to some updates on some of the efficacy issues and recognizes Ms. Lawrence.

MS. LAWRENCE begins going over a few things that will be presented tomorrow at the House and Senate Finance Committees showing where the discrepancies are between the GF/MH, what trustees recommended, and then versus what is in the proposed Governor's budget. She goes through the slides from the budget piece beginning with the FY17 operating increments. There was only one GF/MH that the trustees proposed for the telehealth where it was zeroed out in the Governor's proposed budget.

MR. JESSEE states that it is something that is important to make the system more efficient over time and moves on to the next slide which is more challenging because it has all the housing pieces in there. He goes through it in greater detail.

MS. LAWRENCE asks for any questions on the budget items.

TRUSTEE WEBB states that each one of the items is defensible and directly affects the lives of the beneficiaries on an everyday basis. He continues the need to be prepared to state the belief that these are really important and should not back off on them.

MS. LAWRENCE shows a snapshot of a few of the bills that are being watched and advocated for, which is also on the website. She states that there is a list of bills that Teri Tibbett with ABADA and AMHB tracks and goes over every Friday. She invites the trustees to participate in that teleconference every week.

CHAIR MICHAEL asks if she will take a minute and explain each.

MR. JESSEE states that SB 91, which is Senator Coghill's bill that is going to hopefully incorporate to a greater degree the recommendations of the Criminal Justice Commission in terms of justice reform. That will be a big bill. Title 4 is going to be scaled back, which he explains in greater detail. The opioid overdose drugs, Narcan or Naloxone, the drug administered when someone is in a heroin overdose that saves their life. He moves on to HB 234 which is increasing the ability to bill for Medicaid or for telemedicine, which is very helpful from the Trust's perspective. He states that then there is the alcohol tax and talks briefly about that.

MS. LAWRENCE states that this is just a snapshot, and the list is not exhaustive.

A short discussion ensues.

CHAIR MICHAEL asks for any questions.

TRUSTEE DERR states that there was a memo in the packets in regard to Workforce Development which was not on the agenda. She was wondering why that was in there.

MR. BALDWIN explains that it is part of the ongoing reporting on the Workforce Development. The trustees had asked for ongoing updates. It may not be a formal agenda item, but is always there to keep all informed.

CHAIR MICHAEL asks for any other questions or comments. There being none, she asks for a motion to adjourn.

TRUSTEE NORENE makes a motion to adjourn the Planning Committee meeting.

TRUSTEE WEBB seconds.

CHAIR MICHAEL thanks all.

(Planning Committee adjourned at 11:29 a.m.)