

**To:** Trustees  
**From:** Steve Williams, Acting Chief Executive Officer  
Michael Baldwin, Evaluation & Planning Officer  
**Date:** September 5, 2017  
**Re:** Potential Projects for Funding

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At the August 2, 2017, planning committee meeting, Trustee Selby made a request for a list of potential projects or initiatives with direct impacts on beneficiaries or systems that might be funded if there were available unobligated funds.

For this exercise Trust staff explored possible projects with a parameter of \$200,000 to \$300,000.

There is a typical process by which new significant projects are brought to trustees for consideration:

- A need is identified by staff or through key stakeholder input or feedback.
- Staff, stakeholders, partners, and content experts gather more information about the issue or need.
- Staff convene a team to develop a thorough project proposal that includes a detailed budget description, performance measures and, if applicable, criteria for on-going sustainability.
- As part of the project proposal development, staff work with stakeholders to identify the funding source and recipient of the funding. Depending upon the nature and recipient of the funds, a MHTAAR or authority grant funding process is undertaken.

The following list of projects generated by Trust staff, with some input from key partners and or potential grantees, is at the beginning of the typical process. Given the abbreviated timeline the list below is largely meant to give an idea of potential projects with broad concepts for consideration. If directed, these projects may require further vetting and planning with key partners and advisory boards to develop detailed project proposals, budgets and performance measures.

### **Legal Rights – Patient Advocate**

Over the past few years there has been on-going input from community mental health advocates, and key stakeholders about the need for improved monitoring and advocacy for Trust beneficiaries who are receiving care at the Alaska Psychiatric Institute. In partnership with the Disability Law Center of Alaska, this project would pilot the placement of a full-time legal rights-patient advocate from the Disability Law Center of Alaska at the Alaska Psychiatric

Institute. This position would conduct patients' rights training and receive, respond and track patient grievances. Preliminary discussions with the executive director of the Disability Law Center of Alaska indicated that patients are more willing to speak with an outside advocate than they are with existing API staff. After the completion and evaluation of the project, a decision will be made about whether to continue further implementation.

### **Office of Public Advocacy – Public Guardians**

The Office of Public Advocacy (OPA) serves some of the most vulnerable Trust beneficiaries. When compared to other states, national standards and guidelines, the OPA significantly exceeds the client-guardian ratio (20:1), and has been identified as among the highest caseloads (100:1) in the country. Of great concern, at the current level of staffing and support, public guardians are unable to accurately or adequately support and protect the clients. As a result, Trust beneficiaries are at risk of harm or exploitation. While Anchorage as the population center of the state may have existing staff and higher caseloads there are rural communities that would also benefit from having public guardian positions established. Working with OPA, the Trust would provide some matching funds to raise the number of public guardians employed by the state.

### **Individual Service Program Needs**

During the recent FY19 Trust budget and stakeholder process agencies' need for funding to assist Trust beneficiaries in a more flexible manner was identified. The Trust would work with the Division of Behavioral Health, and/or the Division of Senior and Disability Services to offer one-time funding to help address the needs of individual beneficiaries. The intent would be that funding be used to purchase items or services in a more flexible manner than existing sources of funding might currently allow that would assist in treatment, recovery, or support. In the past there has been a similar program within the Division of Behavioral Health targeted towards youth and adults at risk of institutionalization.

### **Behavioral Health Provider HIE Onboarding Incentive Funds**

The Alaska Department of Health and Social Services has secured Health Information Technology for Economic and Clinical Health Act (HITECH) funds from the Centers for Medicare and Medicaid Services (CMS) to connect behavioral health providers to Alaska's health information exchange (HIE). Over the past two years, the Trust has provided funding to match and leverage federal funding to assist in Medicaid reform investments. These monies can be used to support interface development, project management, and training and rollout activities. Lessons learned from other Behavioral Health HIE efforts in other states, indicate incentive funds are important to support behavioral health provider leadership and engagement during clinical transformation. In the process of onboarding it is important to recognize and compensate organizations for their efforts. The Trust, working with the Department of Health and Social Services, would allot a modest pool of funding that could be used to offset some of the costs early adopting providers will experience during the onboarding process. The funds would help incentivize participation in key project design discussions, timely onboarding within a certain specified period, and active monitoring and training to support utilization of the HIE.