

## MEETING AGENDA

**Meeting:** Board of Trustee  
**Date:** September 7-8, 2016  
**Time:** 8:30 AM  
**Location:** Trust Authority Building, 3745 Community Park Loop, Anchorage  
**Teleconference:** Sep 7: (866)-469-3239 / Session No: 806 480 909 # / Attendee No: #  
Sep 8: (866)-469-3239 / Session No: 804 200 949 # / Attendee No: #  
**Trustees:** Russ Webb (Chair), Mary Jane Michael (Vice Chair), Larry Norene  
 (Secretary/Treasurer), Laraine Derr, Paula Easley, Jerome Selby, Carlton Smith

### Wednesday, September 7, 2016

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<b>8:15a</b>	
<b>Call to Order – Russ Webb, Chair</b>	
Roll Call	
Approval of Agenda	
Approval of Minutes	
• May 2, 2016	6
• May 4, 2016	12
• June 15, 2016	41
Ethics Disclosure	
Review of Guiding Principles	47
Current Bylaws	56
<b>8:20</b>	
<b>Board Elections</b>	
<b>8:45</b>	
<b>Mission Moment</b>	
<b>9:00</b>	
<b>Statutory Advisor Update</b>	
Valerie Davidson	
Commissioner, Department of Health & Social Services	
<b>10:00</b>	
<b>Break</b>	
<b>10:10</b>	
<b>Partner Update</b>	
Dean Williams, Commissioner, Department of Corrections	
<b>11:10</b>	
<b>Committee Reports</b>	
Planning Committee	65
• Stakeholder Feedback	

## Wednesday, September 7, 2016 (Continued)

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<b>11:45</b>	<b>Working Lunch</b>	
	• <b>Committee Reports</b>	
	Resource Management	69
	• Icy Cape Mining Prospects - Executive Session	
<b>1:30p</b>	<b>Approvals FY17 July Small Projects</b>	71
	Small Project Application Spreadsheet	73
<b>1:45</b>	<b>Committee Reports</b>	
	Finance Committee	75
<b>2:15</b>	<b>Statutory Advisor Updates</b>	
	Denise Daniello, Executive Director	
	Alaska Commission on Aging	81
<b>2:45</b>	<b>Statutory Advisor Updates</b>	
	Patrick Reinhart, Executive Director	
	Governor's Council on Disabilities and Special Education	93
<b>3:15</b>	<b>Break</b>	
<b>3:30</b>	<b>Statutory Advisor Updates</b>	
	Kate Burkhart, Executive Director	
	Alaska Mental Health Board /	
	Advisory Board on Alcoholism and Drug Abuse	106
<b>4:00</b>	<b>Recess</b>	
<b>4:15</b>	<b>Public Comment</b>	54

## Thursday, September 8, 2016

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<b>8:30</b>	<b>Call to Order Announcements</b>	
<b>8:45</b>	<b>FY18/19 Budget Deliberations</b>	124
<b>10:15</b>	<b>Break</b>	
<b>10:30</b>	<b>FY18/19 Budget Deliberations</b>	124
<b>12:15p</b>	<b>Working Lunch</b>	
<b>1:30</b>	<b>FY18/19 Budget Deliberations</b>	124
<b>2:45</b>	<b>Break</b>	
<b>3:00</b>	<b>FY18/19 Budget Deliberations</b>	124
<b>3:30</b>	<b>Executive Session</b>	
<b>4:30</b>	<b>Adjourn</b>	

## Future Meeting Dates

### Full Board of Trustee / Planning / Resource Management / Finance 2016 / 2017 / 2018

(Updated – August 17, 2016)

#### **Planning Committee Dates:**

- October 20, **2016** (Thu)
- **January 5, 2017** (Thu)
- **April 13, 2017** (Thu)
- **August 1-2, 2017** (Tue, Wed)
- **October 17, 2017** (Tue)
- **January 4, 2018** (Thu)
- **April 12, 2018** (Thu)
- **Jul 31- Aug 1, 2018** (Tue, Wed)
- **October 17, 2018** (Wed)

#### **Resource Management Committee Dates:**

- October 20, **2016** (Thu)
- **January 5, 2017** (Thu)
- **April 13, 2017** (Thu)
- **August 3, 2017** (Thu)
- **October 17, 2017** (Tue)
- **January 4, 2018** (Thu)
- **April 12, 2018** (Thu)
- **Aug 2, 2018** (Thu)
- **October 17, 2018** (Wed)

#### **Finance Committee Dates:**

- October 20, **2016** (Thu)
- **January 5, 2017** (Thu)
- **April 13, 2017** (Thu)
- **August 3, 2017** (Thu)
- **October 17, 2017** (Tue)
- **January 4, 2018** (Thu)
- **April 12, 2018** (Thu)
- **August 2, 2018** (Thu)
- **October 17, 2018** (Wed)

## Future Meeting Dates

Full Board of Trustee / Planning / Resource Management / Finance  
2016 / 2017 / 2018

(Updated – August 17, 2016)

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### **Full Board of Trustee Meeting Dates:**

- November 17, **2016** (Thu) – Anchorage – TAB
  
- **January 25-26, 2017** (Wed, Thu) – JUNEAU
- **May 4, 2017** (Thu) – TBD
- **September 6-7, 2017** (Wed, Thu) – Anchorage – TAB
- **November 16, 2017** (Thu) – Anchorage – TAB
  
- **January 24-25, 2018** (Wed, Thu) – JUNEAU
- **May 9, 2018** (Wed) – TBD
- **September 5-6, 2018** (Wed, Thu) – Anchorage – TAB
- **November 15, 2018** (Thu) – Anchorage – TAB

**Minutes for the  
May 2, 2016  
Full Board of Trustee  
Meeting**

ALASKA MENTAL HEALTH TRUST AUTHORITY  
SPECIAL FULL BOARD OF TRUSTEES MEETING

May 2, 2016  
11:27 a.m.

Taken at:

3745 Community Park Loop, Suite 120  
Anchorage, Alaska

**OFFICIAL MINUTES**

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Trustees present:

Russ Webb, Chair  
Laraine Derr (via telephone)  
Paula Easley (via telephone)  
Mary Jane Michael  
Jerome Selby  
Larry Norene

Trust staff present:

Jeff Jessee  
Steve Williams  
Miri Smith-Coolidge  
Kevin Buckland

TLO staff present:

John Morrison  
Craig Driver  
Michelle Steelman

**PROCEEDINGS**

CHAIR WEBB calls the Mental Health Trust Board of Trustees to order and does a roll call. He asks for a motion to approve the agenda.

TRUSTEE SELBY makes a motion to approve the agenda.

TRUSTEE NORENE seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB asks for any ethics disclosures. Hearing none, he moves to the first item on the agenda, the Texas building acquisition. He asks Mr. Morrison for a brief, nonconfidential overview.

MR. MORRISON states that this first opportunity is to acquire a building in North Austin totaling a little over 100,000 square feet of building space and a little shy of nine acres of total space. He continues that it is leased to a diverse blend of tenants and has a good history of being tenanted and is a good product to add to the Trust portfolio of buildings.

CHAIR WEBB asks about the expected return from this investment.

MR. MORRISON states the expected returns, conservatively speaking, would be an IRR on a 20-year hold north of 10 percent. They are expecting an average cash-on-cash return over that same 20-year hold period of a little over 14 percent. He continues that it would be reasonable to estimate that the distributable income revenue from the property might average around \$600,000 per year.

CHAIR WEBB states that it is a significant contribution to the Trust's spendable income. He asks if there are motions to carry forward with this transaction.

TRUSTEE MICHAEL makes a motion that the Alaska Mental Health Trust Board of Trustees approve the action as described herein wherein the Trust Land Office forms and manages a single-purpose entity limited liability corporation owned in full by the Trust for the purpose of acquiring, owning, and operating the proposed property, that being the Texas building acquisition.

TRUSTEE NORENE seconds.

*There being no objection, the motion is approved.*

TRUSTEE MICHAEL makes a motion that the Alaska Mental Health Trust Board of Trustees approve the proposed action to fund the newly formed LLC with principal from the Trust Authority Development Account, fund code 3320, to acquire the property, up to \$9,500,000. This funding will include purchase price net of loan acquired, entity formation expenses, legal review, closing, and due diligence costs as necessary to complete the transaction, as presented.

TRUSTEE SELBY seconds.

*There being no objection, the motion is approved.*

TRUSTEE MICHAEL makes a motion that the Alaska Mental Health Trust Board of Trustees concur with the proposed action to complete the financing of the proposed property.

*There being no objection, the motion is approved.*

TRUSTEE MICHAEL makes a motion that the Alaska Mental Health Trust Board of Trustees approve an increase to the property budget appropriation in the amount of \$2,128,725.

*There being no objection, the motion is approved.*

TRUSTEE MICHAEL makes a motion that the Alaska Mental Health Trust Board of Trustees delegate to the Executive Director of the TLO the authority to determine if it is necessary to modify or cancel this transaction.

*There being no objection, the motion is approved.*

CHAIR WEBB states that the next item is the Washington joint venture building development proposal.

MR. MORRISON states that this is an opportunity to joint venture with Panattoni Development to build a roughly 200,000-square-foot cross-dock warehouse facility in Everett, Washington. He continues that this opportunity has several benefits, one of which is that it gives the Trust the ability to potentially acquire another asset in one of our geographical markets at a rate that both compensates the Trust for the risks that it will take in participating in the development process, and that allows having a property in the area that fits within the program for return on expectations. This property, based on an eventual acquisition on stabilization and 20-year potential hold, would have a net present value of roughly \$4-and-a-half million, a 20-year IRR approaching 11 percent, and an average cash-on-cash return of over 15 percent. He adds that, based on conservative estimates, over a 20-year hold, would provide approximately \$725,000 a year of income revenue distribution.

CHAIR WEBB asks about this being a joint venture and the process of selecting Panattoni as a potential partner.

MR. MORRISON replies that the TLO analyzed several different opportunities to participate in joint ventures with various partners. He states that Panattoni is a world-class merchant developer who builds millions of square feet of space exactly like the space anticipated in this joint venture. He continues that it also gives a variety of different ways to successfully and amicably dissolve the partnership, either through a buyout of them on stabilization or we can together, as partners, take the product to a third party in the open market for divestiture.

CHAIR WEBB states that there are other mitigators previously discussed that protect the Trust in entering into this joint venture. He asks Mr. Morrison to tell a little about those.

MR. MORRISON explains that one of the mitigators is the access and employment of an exceptionally well-qualified legal team at Davis Wright Tremaine who are well-versed and commonly guide clients through these types of transactions. He continues, due to the nature of the agreement, the mechanics and economics of the transaction are such that it aligns the Trust interest so that the greatest financial reward is perfectly in line with the Trust, which is to deliver a marketable, stabilized project that is the most valuable project possible at the lowest cost. He adds that, even though the project is still greenfield, four letters of intent have been received ranging from a little less than half of the building to the entire building, and some of the letters of intent have come from Fortune 500 companies.

TRUSTEE SELBY makes a motion, based on the recommendation of the Resource Management Committee, that the Alaska Mental Health Trust Board of Trustees approve the action as described herein wherein the Trust Land Office forms a single-purpose entity joint venture limited liability company with Panattoni Development Company for the purpose of acquiring, owning, developing, and operating the proposed property.

*There being no objection, the motion is approved.*

TRUSTEE SELBY makes a motion, based on the Resource Management Committee recommendation, that the Alaska Mental Health Trust Board of Trustees authorize the Executive Director of the TLO to represent the Trust's interests in the transaction by working with the development partner to ensure a successful project, including, but not limited to, decisions about modifications to the project plan, leasing, tenant improvements, financing, and buying out Panattoni at project stabilization.

*There being no objection, the motion is approved.*

TRUSTEE SELBY makes a motion, based on the Resource Management Committee recommendation, that the Alaska Mental Health Trust Board of Trustees approve the proposed action to fund the newly formed LLC with principal from the Trust Development Account, fund code 3320, to complete the proposed action, up to \$11 million. This funding will include payments to be made as part of the development process, the eventual purchase price net of loan acquired, entity formation expenses, legal review, closing, and due diligence costs as necessary to complete the transaction, as presented.

*There being no objection, the motion is approved.*

TRUSTEE SELBY makes a motion, based on the Resource Management Committee's recommendation, that the Alaska Mental Health Trust Board of Trustees concur with the proposed action to complete the financing and subsequent purchase of the sale of the proposed property.

*There being no objection, the motion is approved.*

MR. MORRISON clarifies that it is a "purchase or sale."

CHAIR WEBB states that it should state "purchase or sale of the proposed property." He asks for any objections to the motion as clarified.

*There being no objection, the motion is approved.*

TRUSTEE SELBY makes a motion, based on the Resource Management Committee's recommendation, that the Alaska Mental Health Trust Board of Trustees delegate to the

Executive Director of the TLO the authority to determine if it is necessary to modify or cancel this transaction.

*There being no objection, the motion is approved.*

CHAIR WEBB asks for any other items to be discussed. There being none, he asks for a motion to adjourn.

TRUSTEE NORENE makes a motion to adjourn the meeting.

TRUSTEE MICHAEL seconds.

CHAIR WEBB adjourns the meeting.

(Full Board of Trustees Special Meeting adjourned at 11:46 a.m.)

**Minutes for the  
May 4, 2016  
Full Board of Trustee  
Meeting**

ALASKA MENTAL HEALTH TRUST AUTHORITY

FULL BOARD MEETING

May 4, 2016

8:30 p.m.

Taken at:

Alaska Mental Health Trust Authority  
3745 Community Park Loop, Suite 120  
Anchorage, Alaska

**OFFICIAL MINUTES**

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Trustees present:

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

Trust staff present:

Jeff Jessee  
Steve Williams  
Miri Smith-Coolidge  
Kevin Buckland  
Michael Baldwin  
Katie Baldwin-Johnson  
Amanda Lofgren  
Carrie Predeger  
Heidi Wailand  
Valette Keller  
Carley Lawrence  
Luke Lind  
Kat Roch

Trust Land Office present:

John Morrison  
Michelle Steelman  
Others participating:

Kathy Craft; Heather Ireland; Shelly Atkinson; Dave Kulper; Lori DeStefano; Commissioner Valerie Davidson; Sana Efird; Monique Martin; Diane Casto; Nancy Burke; Joyanne Geisler (via Speakerphone); Shirley Holloway (via Speakerphone); Laura Baez (via speakerphone); Martha Schoenthal; Doreen Whitworth (via Speakerphone); Dr. Aron Wolf; Bernie Ruskin; Lynn Paterna; Kim Champney; Jeanne Gerhardt-Cyrus; Betsy Chivers; Francine Harbour; Brandon Williams; Lilly Wurtz; Stephanie O'Connor; DeWayne Harris; Lesley Thompson.

## **PROCEEDINGS**

CHAIR WEBB convenes the Full Board meeting and calls the roll. He states that Trustee Smith is not able to be here. He welcomes the newest trustee, Jerome Selby. He thanks Trustee Michael for graciously hosting staff, trustees and others last night. He moves to approval of the agenda. He suggests one change in the agenda and that would be to move the approvals of FY16 small projects to 11:00, and the Planning Committee after that. He states that there will be a need for an executive session and that would make the transition easier. He asks for a motion to approve the agenda.

TRUSTEE NORENE makes a motion to approve the agenda.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB moves to the approval of the minutes from January 27 and 28, February 23, February 26, and March 16.

TRUSTEE NORENE makes a motion to approve the minutes of January 27, 2016.

TRUSTEE DERR seconds.

*There being no objection, the motion is approved.*

TRUSTEE NORENE makes a motion to approve the minutes of February 23, 2016.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

TRUSTEE NORENE makes a motion to approve the minutes of February 26, 2016.

TRUSTEE SMITH seconds.

*There being no objection, the motion is approved.*

TRUSTEE NORENE makes a motion to approve the minutes of March 16, 2016.

TRUSTEE SELBY seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB asks for any ethics disclosures. There being none, he skips the review of the guiding principles and bylaws and adds that they are available on the Web site, in the packet, and to the public. He moves on, stating that the officers' elections will be in September and asks if there are any issues with that.

MR. JESSEE states that this meeting is when the nominating committee process is set up so they can come forward in September with a slate.

CHAIR WEBB states that in August of 2014, trustees approved a \$30,000 grant to expand the school-based health center at Begich Middle School. He continues that by offering on-site behavioral health services, this project would expand offerings of the healthy spot school-based health center to include behavioral health services on site in order to support students' success in school. He introduces Heather Ireland and Shelley Atkinson, who will talk about the grant services available to students and the positive impact it has had for students' success.

MS. IRELAND states that Dave Kuiper, from Christian Health Associates, and Lori DiStefano, from Volunteers of America, are also present. She continues that school-based health centers started offering medical services at Clark Middle School in 2010 and then at Begich in 2014. Since that time, over 2,500 medical appointments, primarily physicals, have been provided for students. She adds that, in 2014, the school board asked about behavioral health services and, at that time, came to the Trust looking for support. She explains how that money was spent and states that, at the end of the calendar year, they looked at what differences this program made for these students. She continues that there was a huge decrease in the discipline issues with the administration and an increase in their attendance compared to students that were not receiving the services. She adds that there was not a huge change in grades at this time. She asks Shelley Atkinson to talk about some of her observations.

MS. ATKINSON states that this program is wonderful and illustrates how beneficial it is by talking about one of the students that was involved and helped by this program. She continues that Begich is a Title 1 school and right now is the largest middle school in the state. She adds that having this as one of the many options is enormous.

MS. IRELAND states that the grant funding from both the Trust and Providence has helped serve these students and looks forward to continuing. She adds that expansion of the program to other schools for both medical and behavioral health services is being looked at. She asks for any questions.

TRUSTEE MICHAEL asks how it works and how a child is identified.

MS. IRELAND replies that there are a couple of different entry points. She states that it started with the administrators, counselors and the school nurse identifying those with high needs.

Then, a process was developed for the teachers to identify students and tell the school counselors. The other way is through the comprehensive physicals which screen for both depression and anxiety. She explains in greater detail.

A short discussion ensues.

MR. JESSEE asks if a possible strategy could be helping parents become healthier which would be another way of helping the kids become healthier.

MS. IRELAND replies that Volunteers of America has a program called Parenting with Love and Limits. This program works more with the whole family unit.

MR. JESSEE also asks about the uninsured children and why they are not eligible for Denali Kid Care.

MS. IRELAND replies that some kids are not eligible because they have not been in America for more than five years, and another piece is getting reimbursements; TRICARE will not cover it. Another issue is that the child is Medicaid-eligible, but the parents did not submit the necessary paperwork to renew. She adds that the renewal process is cumbersome and overwhelming for some of the families.

MR. JESSEE states that this is sort of a trauma-informed care approach and asks if they are looking to get an adverse childhood experience score on the kids for some idea of how they are falling out along the ACES continuum.

MS. IRELAND replies that it was considered but was deemed irrelevant, and if help is needed then help will be given.

CHAIR WEBB thanks Ms. Ireland for all the work being done and moves on to the statutory adviser and partner updates with Commissioner Davidson.

COMMISSIONER DAVIDSON thanks all and states that Senate Bill 91 is still happening and gives credit to Jeff Jessee for all the ways he taught her how to do her job. In moving forward, this relationship and the Trust's willingness to allow him to be able to work with the Department in this way is incredibly helpful. She states that in this challenging budget time, Medicaid, in its current form, is not sustainable. Governor Walker stated that he was not only interested in Medicaid expansion, but also sees that this expansion could serve as a catalyst to true Medicaid reform. She continues that the Department is absolutely committed to Medicaid reform. She adds that in moving forward with reform, the efforts on reducing the recidivism rate in the criminal justice system is also moving forward. She states the belief that behavioral health reform is the key, explains this more fully, and adds that this is an opportunity to do a complete overhaul of the behavioral health system. She continues, describing some of the challenges in greater detail. She talks about being able to pursue a 1115 waiver with the Centers for Medicare and Medicaid Services, with CMS, which will allow doing things differently. She states that the path to a 1115 waiver for behavioral health services is the right way to go and explains the reasoning. She thanks the Trust for all of the resources that have been provided to the

Department that allow them to be where they are today. She moves on to Senate Bill 74 and talks about the opportunities available through it. She then gives an update on API. She states that Melissa Ring tendered her resignation, and we are looking to recruit for that position. She continues that there is one vacancy for a psychiatrist and two vacancies in psychiatric health practitioners, and adds that there are candidates for all three positions. She states that an issue with API is preventing assaults and have initiated a trauma-informed care opportunity training for better crisis prevention and intervention. She continues that one of the things that this initiative requires is that the hospital CEO or the medical director must be contacted prior to contacting the physician on duty for discharge situations where APD indicates that someone is going to be removed from the facility. Some of the other challenges is a high number of requested evaluations for competence to stand trial and no special funding to meet that need. She adds that it is not a statutory mandate and has been unfunded for some time. The issue of forensic evaluations is being addressed and reviewed by the Alaska Criminal Justice Commission, and there is the continuing challenge with timely discharge. She states that, as part of the Senate Bill 74, they will be working with the Trust to solicit a contractor to do the feasibility study for API, and the effectiveness of privatizing those services. She adds that the RFP should be issued on May 16. She moves on to the budget, explaining as she goes along. She states that Representative Neuman, co-chair of the House Finance Committee, made a proposal to add \$30 million in detox treatments and sobering centers. A grand total of \$30 million to be spent over three years as part of the FY16 funds which will be part of the supplemental. She adds that the budget process is not done yet, and we are hopeful that the money stays in. She continues explaining the budget. She thanks all, and reiterates her thanks and heartfelt appreciation.

CHAIR WEBB asks for any questions or comments.

TRUSTEE DERR states that over the years the Trust has put thousands of dollars into the MMIS system. She asks for an update on that.

COMMISSIONER DAVIDSON replies that some improvements have been made, but not in all areas. She states that there are the old claims that need to be reprocessed and there are the new-day claims that are being focused on because that is what people need to be able to run their businesses. She continues that over 90 percent of the new-day claims are processing correctly. She states that the preauthorizations for some behavioral health services continue to be a challenge. She adds that about \$29 or \$30 million in claims are being processed weekly, which is more than the old system. She continues that as Xerox fixes the bugs in the system, those fixes create new and different bugs. She states that certification from the Centers for Medicaid and Medicare Services has been requested for the system, which is expected to happen this summer.

TRUSTEE EASLEY states that providers have been and continue to complain about the paperwork at the state and federal level. She asks if there are any advocates in CMS or anywhere else that are addressing the problem of paperwork.

COMMISSIONER DAVIDSON replies that several conversations have taken place about the issue of being more efficient, but all the paperwork is killing the providers, which inhibits the ability to provide better service.

CHAIR WEBB asks for any other comments or questions.

MR. JESSEE states that the relationship with this Administration and the Department is very good. He continues that, from the Trust perspective, this healthcare and Medicaid reform has taken a lot of staff work; particularly Katie Baldwin-Johnson and Amanda Lofgren, who have spent a lot of time working on the Medicaid reform issues. He thanks the Department for being open and positive in working on these issues.

TRUSTEE MICHAEL comments on the focus on policy and the future.

CHAIR WEBB comments that a fundamental change is being made to the system of care that will persist for at least one generation, and that opportunity and challenge only comes along once in a lifetime. He states appreciation for the partnership and sharing the information openly and being forthright. He thanks Commissioner Davidson.

COMMISSIONER DAVIDSON thanks all and introduces Sana Efird, the assistant commissioner; Diane Casto, who is back from the Department of Corrections; and Monique Martin, healthcare policy adviser.

CHAIR WEBB calls a break.

(Break.)

CHAIR WEBB states that next on the agenda is the CEO update, and recognizes Jeff Jessee.

MR. JESSEE began by stating that Dr. Doolittle passed away on April 25 and reminds all of how Dr. Doolittle got involved in the Trust. He was a long-time military physician and then was in private practice in Fairbanks for many years. Dr. Doolittle got involved in the Trust because during his medical practice he had seen many people who were Trust beneficiaries come to him for other issues and was very frustrated that he could not do enough for them, and that often there were no other resources out there to help with the behavioral health issues. As a trustee, and as Chair, he always wanted to focus on what the impact on the beneficiaries would be and how many beneficiaries would be served. He continues that Dr. Doolittle was very important to the Trust, and his loss is deeply felt.

CHAIR WEBB states that he had the pleasure and honor to work with Dr. Doolittle both when he was a staff member at the Trust and then as a trustee. He continues that Dr. Doolittle was enormously respected both in his community and on the Trust. It is a tremendous loss for the community, and certainly for the Trust and his family.

TRUSTEE DERR states that he was lucid and did well at the end. She adds that she will miss him.

MR. JESSEE states that he had an opportunity, as directed by the trustees, to meet with the Trust Land Office to talk about PR planning. He asks Carley Lawrence for a brief update.

MS. LAWRENCE states that she and Mr. Jessee met with John Edwin and talked about the PR and marketing needs and being more proactive and developing a comprehensive communications plan. One of the things talked about was developing some of the materials needed in preparation for their travel to South Africa for the mining conference. She continues with the need for a corporate packet that could be updated easily, Web site, PR, corporate brochure, a lot of different corporate materials needed for different audiences and different business units. She adds that it was a very fruitful conversation, and more planning needs to be done.

MR. MORRISON states that the TLO is excited in taking the next steps in all the marketing efforts.

MR. JESSEE asks for any questions on that. There being none, he moves on to the creation of the opioid task force. He states that Kate Burkhart has done a great job of pulling it all together and figuring out the timing of the membership. She will talk more about this in her update. He continues on, stating that the Annual School of Addictions has been going on with over 400 addiction professionals from across the state. He adds that they were challenged to be engaged and be a part of this collaborative iterative process in going forward. This was a call to action. He asks Ms. Baldwin-Johnson to continue.

MS. BALDWIN-JOHNSON states that it was a two-hour session, an interactive table conversation. They were asked about what the overarching opportunities and challenges were to the high-level reform, the pressures on the workforce in general; and the considerations in moving and supporting the system that is changing over time. There was a lot of discussion and then there was some time to report back out. The session was recorded and there was someone capturing everything. She continues that the information is being synthesized and will be posted on the Annual School Web site; shared with Department of Health and Social Services, the folks working re-entry; and the University. It will be a good platform for a lot of the people working on it.

MR. JESSEE adds that it is not a one-time shot. The plan is to keep them engaged so feedback from the profession can continue. He states that another important thing is that the Department of Labor has become more connected to the Trust, particularly through some of the issues around re-entry in the criminal justice reformation, looking at how people get employed. He continues that there was concern from key stakeholders and providers about some of the ways the Department was going at developing their programs. He asks Kathy Craft to continue.

MS. CRAFT recaps that in December an MOA was signed with the Department of Labor and Workforce Development for a portion of her time to work on their five-year grant to set up registered apprenticeships. She states that one of the things in the federal grant was to set up a healthcare academy to do exploratory introductory classes for people, which was designed and will start this month. The first one is on introductions to health career occupations, and the other one is for introductions to the medical office. She continues that the courses have been designed

and they have been working with ANTHC, with the federal DOL, to set up registered apprenticeships for behavioral health aides. This need was identified in the behavioral health systems capacity. The hope is to train 120 more behavioral health aides across the state in this five-year time period. She adds that Southcentral Foundation is setting up behavioral health technicians with the hope of having 75 additional behavioral health technicians trained in this five-year period, who will also end up with the two-year CDC license, chemical dependency counselors. She states that an advisory council will be formed and finalized in June.

MR. JESSEE states that he is very excited about the advisory council and the partnership with the Department of Labor. He asks Ms. Lofgren to talk about the DD system planning.

MS. LOFGREN states that last October, the Trust and the Alaska Training Center and AADO, which is the provider association for developmental disabilities, hosted a leadership consortium training, which was a week-long intensive training for the providers, executive directors within the provider associations across the State, to come together and not only work on professional leadership goals and objectives, but also as a system. She continues that afterwards all felt compelled to carry on the work that was started, but needed to bring on more people within the system to help buy into the direction that was needed to go, and also address the significant changes that need to happen. This needs to be done as a system across the state, together and collectively; to work with beneficiaries and their families, direct service providers and leadership to develop a unified, shared vision for the DD system and where it is going for the next 30 years. She states that Roy Scheller is concerned about the fact that the new generation of leaders do not have the firsthand experience of what it was like to work in an actual institution for intellectual and developmental disabilities. She continues that the plan is to have an intergenerational take on the knowledge of previous executive directors to help inform and train the next cohort of leadership in October.

MR. JESSEE asks about the dementia care initiative.

MS. LOFGREN states that the Department presented an initiative specific to dementia care that looked at modifying the current nursing facility level of care criteria to qualify for the 1015(c) waiver service. She continues that oftentimes individuals with dementia do not qualify for the waiver due to the fact that their cognitive impairments have not progressed to the point where their physical impairment overrides the cognitive impairment; meaning that if they can bathe themselves or dress themselves with prompting and cueing, they might not qualify. So if the Department was to modify that nursing facility level of care, what would that look like; and what would the threshold be to modify to. In addition, the Pioneer Homes do not require individuals to apply for Medicaid waiver, and so, the dementia care initiative also incorporated Pioneer Home. She states that the decision was made that the project actually fit better with the Home and Community Service Reform through the 1915(i) and (k). However, the 1915(i) and (k) does not modify the existing nursing facility level of care. It takes the current one and puts it in place for the (k). She continues that the first stakeholder meeting was held which brought together all of the providers and the system-of-care components that serve individuals with ADRD. She adds that they did figure out a way to leverage the data to be able to drill into it to really quantify the number of individuals that are denied level of care. She states that it is really important to be

able to articulate the actual data; know what actuary analysis is, be able to run it and show the costs that will impact the system. She adds that there will be more to come on this.

MR. JESSEE asks about IAP.

MS. LOFGREN states that the CMS has an Innovation Accelerator Program: Seven states were awarded this technical assistance component to sit down and look at what Medicaid services can be utilized to provide supportive housing services. She continues that there were three technical assistance sessions, and every state had to go through every single one of their Medicaid services to see if that could be used for supportive housing or not. She adds that CMS awarded the technical assistance which happened to be the TAC, the Technical Assistance Collaborative, to help develop the permanent supportive housing strategic plan. She states that tenancy support is absolutely essential, transition services, components of case management, and also those independent living skills essential for social rehab services.

MR. JESSEE recognizes Steve Williams.

MR. WILLIAMS states that stepping up refers to a national initiative that is being sponsored by the Council of State Governments, the American Psychiatric Association, and also the National Association of Counties; to forward the movement of trying to address the prevalence of folks with mental health disorders inside corrections, nationally. He continues that the Council of State Governments has been engaged in this effort for probably 15-plus years. This was an initiative where teams nationally submitted an application to attend the summit, were selected, and met for two days in Washington, D.C. He states that Alaska submitted an application and was accepted. The team included himself, Judge Stephanie Rhoades; Karen Forrest, Deputy Commissioner from Health and Social Services; Laura Brooks, the medical director for Corrections; and Kathy Trawver from the University, who is a professor in the School of Social Work. He continues that it was a great opportunity to gather from national speakers what has been going on, what new things are in, and then, also, to connect up with some of the national federal funders to hear about current available opportunities and what the State might apply for. He adds that there is a bunch of money around in Second-Chance Act funding. He states that the impact to Alaska is twofold and is going to help to inform the Criminal Justice Commission's work. He continues that a behavioral health work group has been formed with the hope to start feeding into the next phase of the Commission's work in moving forward. He adds that, in June, the Planning Committee agenda will include a full update on the workforce focus area which was requested last year. He moves to the Denardo Center in Fairbanks and states that work with the TLO on how that plays out will continue which depends on the Legislature approving the budget. He continues that the intent would be to come back to either the Planning Committee or the Resource Management Committee meeting in August for an update.

MR. JESSEE asks for a decision later on bringing this to Resource Management or to Planning in August.

TRUSTEE NORENE asks if there is a need to make a decision on the current application or just hold it.

MR. JESSEE replies that, currently, there are a number of interested parties and one has put an offer on the table. He states that they are prepared to lease the building now. He continues that this was worked through with the TLO, telling them that there is another possibility that is very critical to the beneficiaries, the possibility of a sobering center, and we are not in a position to commit to lease that facility to them at this time.

MR. WILLIAMS states that this was discussed, and we are very willing to continue on the issue.

CHAIR WEBB briefly explains the issue, and then moves to a discussion on how to resolve it.

MR. MORRISON asks for some clear direction. He states that he went through the verbatim from the meeting where this was discussed and the issue is that there was no motion.

The discussion continues.

CHAIR WEBB states that a financial decision to maintain that facility and keep it available for future uses needs to be made. He adds that it has already been budgeted.

TRUSTEE MICHAEL states that she is in favor of holding off until August, but would like an update at that time to see what progress has been made.

TRUSTEE NORENE concurs.

TRUSTEE SELBY states that it would make sense to send it to the Resource Committee meeting in August, which would be the right place for that discussion in preparation for the September Board meeting.

CHAIR WEBB agrees, and states that no formal action is needed.

MR. JESSEE concludes his report.

CHAIR WEBB states that next on the agenda is the Resource Management Committee report.

TRUSTEE NORENE states that there are a number of items, consultations that need approval, and asks Mr. Morrison to continue.

MR. MORRISON states that there are two consultations and two approvals. The first consultation item is for a negotiated sale of six lots, two located in the community of Elfin Cove, to the Community of Elfin Cove for \$143,000. There is a motion coming forward from Resource Management for Board consideration.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the negotiated land sale of six parcels in Elfin Cove, Alaska, to the community of Elfin Cove for a purchase price of \$143,000.

*There being no objection, the motion is approved.*

MR. MORRISON states that next is for a placer lease on Fox Creek to an individual named Randal Powelson with an anticipated \$5,000 annual rental over the term of the lease that would be offset by successful extraction of gold, which will be payable at a 10-percent royalty.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the negotiated lease of Trust mineral estate on Fox Creek for exploration and development of placer gold, as proposed.

*There being no objection, the motion is approved.*

MR. MORRISON states that the third item is for \$175,000 to complete an airborne magnetic survey and some other related work at Icy Cape this summer.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees approve the expenditure of funds for parcel research and exploration of the parcel known as Icy Cape in the amount of \$175,000. These funds do not lapse.

CHAIR WEBB states that this was discussed at length and is a tremendous opportunity for the Trust to develop spendable income long into the future if this resource development plays out. He continues that this is one of the strategies that is being taken to further explore and then to market the mineral resources at Icy Cape.

MR. MORRISON clarifies that income from successful operation of this area would not be principal income, but is integral to help generate the additional income, revenue that is being sought.

*There being no objection, the motion is approved.*

MR. MORRISON states that the next item for approval is broken into two parts; one motion in the first section, and then three motions in the second section. The first section has to do with the FY16 real estate budget for the Real Estate Management Plan properties. These funds are fully collected and disbursed within the various properties at the property level. He continues that the first motion is for administrative reasons to allow entry of those activities on the accounting system.

TRUSTEE NORENE makes a motion that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees concur with the recommendation to approve the incremental building expenditures totaling \$5,759,700 budgeted for fiscal year 2017 to be paid by the property manager from rents and other income collected from the properties.

TRUSTEE DERR asks why, since the FY17 budget is coming up in August, this is being done now.

MR. MORRISON replies that it was discussed over the course of time that these property budgets do not naturally follow the State budgeting process. He states that it was determined, for business reasons, the need for approving budgets much closer to the actual time of the budget year.

*There being no objection, the motion is approved.*

MR. MORRISON states that the next section is also dealing with real estate budgets, but are for the programmatic properties. Some of the money needed is for capital costs and coming from the TADA account; the other money is going to be routed through the regular checking account from one other account to clear it out. He adds that there are three motions to complete all the tasks necessary.

TRUSTEE NORENE states that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees authorize the CFO to transfer the balance of the facility maintenance account, IRIS fund 3322, to the Alaska Mental Health Settlement income account, IRIS fund 1092, to partially fund the fiscal year 2017 operating costs of Program-Related Investment Properties in the amount of \$105,787.

*There being no objection, the motion is approved.*

TRUSTEE NORENE states that the Resource Management Committee recommends that the Alaska Mental Health Trust Authority Board of Trustees approve an appropriation from the Trust Authority Development Account, TADA/IRIS fund 3320, in the amount of \$70,000 for capital costs of Program-Related Investment Properties for fiscal year 2017. The appropriation shall not lapse. The CFO is authorized to transfer the full amount to a third-party property manager, upon the request of the TLO.

*There being no objection, the motion is approved.*

TRUSTEE NORENE states that the Resource Management Committee recommends that the Alaska Mental Health Authority Board of Trustees approve an appropriation from Alaska Mental Health Settlement income account, IRIS fund 1092, in the amount of \$142,200 for operating costs of Program-Related Investment Properties for fiscal year 2017, which appropriation shall not lapse. The CEO is authorized to transfer the full amount to a third-party property manager, upon the request of the TLO.

TRUSTEE DERR states that the TLO is requesting \$212,000, and when adding up the numbers there is over a \$100,000 difference in what is being requested in the motions.

MR. MORRISON explains that the first motion is transferring the balance of the facilities maintenance account to the checking account, and then only requesting the \$142,200.

TRUSTEE NORENE states that the record will reflect Mr. Buckland's agreement.

MR. MORRISON asks if that clarifies everything.

TRUSTEE DERR replies yes.

*There being no objection, the motion is approved.*

MR. MORRISON states that there is nothing further to report at this time.

TRUSTEE NORENE concludes the Resource Management Committee's report.

TRUSTEE DERR asks what happened with the motions from yesterday's Resource Management Committee's meeting.

MR. MORRISON replies that a special board meeting was held after to handle those motions.

CHAIR WEBB states that the next item on the agenda is the small projects approval.

MR. JESSEE states that the requested motion is to approve the recommended FY16 small projects for the March application period in the amount of \$34,000

TRUSTEE NORENE states the need for an overall financial direction. He asks if there are time-critical issues on these that would put their programs in jeopardy.

MR. JESSEE explains that the funding for the small projects has been approved in the budget, publicized on the Web site, we've taken the applications, and then grantees are informed about when the trustees will take action on them. He adds that there is an expectation on the part of the grantees that a decision on these would be made at this meeting. He states that, from a relationship perspective, everyone has already gone through the application process, the PEC has met; there has been a lot of effort put into these particular projects.

TRUSTEE DERR states that Trustee Norene moved to table; a second is needed, and then the motion is not debatable.

TRUSTEE NORENE explains his feelings and states that there has been no change; no acknowledgment of a potential change; and no plan coming forward.

TRUSTEE DERR states that this was discussed and put in for small projects in the budget last fall. She continues that it was a lengthy discussion on whether to continue to include them or not, and at the time included the money for small projects.

TRUSTEE SELBY states that the credibility of the Trust is such that these folks were asked for proposals, are way into this project, and have already been approved. He continues that he has a problem with telling these folks that there is a change in the policy on small projects, especially since a grant application was prepared and a funding decision was expected at this meeting. He

adds, that is not appropriate. He states that the way to deal with it as a board is to get it on the table, discuss it at the next board meeting, and decide going forward about doing small projects in the future

TRUSTEE SMITH asks if Trustee Norene can comment briefly on the clarity and the direction going forward.

TRUSTEE NORENE replies that it will take a lot of discussion and should possibly be in a retreat setting to freely discuss the future direction.

TRUSTEE MICHAEL realizes that the process is slow, but supports continuing it. She states that there should be information by the August meeting.

MS. BALDWIN-JOHNSON goes through the process that staff does in preparation.

TRUSTEE NORENE states that he is just expressing his impatience on the long term of the process.

MR. JESSEE explains that business is being done as usual, going through the process in greater detail. He states that the State has a huge fiscal crisis, but the Trust income is very stable. He continues that a very resilient economic outlook has been developed, and he thinks that there is also some significant value in the Trust being a rock in the midst of rolling seas. He adds that he would not necessarily recommend a wholesale abandonment of all of the strategies, such as mini-grants and small projects.

The discussion continues.

TRUSTEE DERR makes a motion to approve the recommended FY16 small projects from the March application period in the amount of \$34,000.

TRUSTEE SELBY seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB moves to the Planning Committee.

TRUSTEE MICHAEL forgoes doing a lengthy comment on the Planning Committee, other than to say that there is a brief summary on the last three Planning Committee meetings and what topics were covered under those meetings. She thanks the trustees for participating. She moves to a Medicaid reform and redesign update, and recognizes Ms. Lawrence.

MS. LAWRENCE gives a brief update on some of the major bills that the Trust was advocating for and tracking. She asks Mr. Jesse to talk about SB165.

MR. JESSEE states that SB165 is the changes to Title 4, the Alcohol Beverage Control Board statutory framework, which passed and accomplished two major things. He continues that it

fundamentally changed how the minor consuming of alcohol laws are handled; it moved from more of a criminal into more of a civil-type approach. He states that the other change was in the membership of the Alcohol Beverage Control Board itself. He continues that it no longer considers the background of the executive director; there is not a seat for public health. He adds that there will be two industry, one rural, one public, and one public safety. He states that the Title 4 steering committee felt that the compromise was appropriate.

MS. LOFGREN states that there has been a significant amount of work happening in terms of those bullet items around new assessment tools, the 1115 contract coordination with Charlie Curie and Stephanie Colston. She continues that CMS has issued some guidance and a 1400-page rule on managed care. There was also guidance submitted that clarifies how Medicaid can be used for returning citizens, which is huge. It clarifies that Medicaid services can be provided in halfway houses, for parolees, and several other different components within the system. She goes through some more in greater detail.

TRUSTEE MICHAEL recognizes Nancy Burke.

MS. BURKE states that she provided a time line for trustees and some of the bullets of things that have been accomplished. She continues that the plan that the Mayor and partners have agreed on is to focus in on the people who are homeless in Anchorage and the move to coordinate the structures for financing, for housing, and for services around those people has proved to be very logical and the right thing to do, but is still challenging. She adds that there are many different time lines, processes, methods for resources, going out, that make it a challenge to coordinate those services around people. One of the main goals is tracking 100 people over three years, focusing on them, developing the number of homeless and watching the dashboard. The second thing is to realign how financing works for these individuals, explaining in greater detail. She states that there has been a tremendous amount of infrastructure in the Municipality that has become aligned with the Mayor's initiative. She continues that there are two meetings, one on May 11, which is a joint meeting of the Public Safety Committee and the Homeless Committee to talk about safety on the trails and camping in neighborhoods over the summer; then, on May 18, the next regular Homeless Committee meeting of the Assembly will be held. She adds that those are tremendous opportunities for joint meetings with the Planning Committee, if Trustees are interested.

MR. ASHMAN states that he is with the Division Manager for Housing and Community Services; the other half of the department is the Public Health Department. The programs the Division administers are the aging and disability resource centers. He continues that they also manage the emergency preparedness for the Municipality on the public health side; the Anchorage safety patrol and safety center, which is for the Title 47 noncriminal holds. There are eight domestic violence programs, and we also manage the HUD programs. He states that the budget for development and services for 2016 is about \$4.3 million and goes over a few of the items in there. He adds that many of the people worked with are direct beneficiaries of the Trust.

TRUSTEE MICHAEL states that there were some excess revenues in the city budget which the Mayor dedicated a portion of to the homeless projects. She asks for more information about that.

MS. BURKE states that the Assembly reviewed and approved the Mayor's request for \$425,000 to go to the homeless initiative. This funding increased the staffing ratio, clinical services, and some innovative projects that she describes in more detail.

TRUSTEE DERR asks if all this is Anchorage centric.

MS. BURKE replies yes, the proposal submitted was a joint Mat-Su and Anchorage proposal.

A short discussion on the homelessness count ensues.

TRUSTEE MICHAEL thanks Ms. Burke and Mr. Williams, and concludes the Planning Committee report.

CHAIR WEBB asks if there are a couple of items that the Trust should consider in executive session.

MR. JESSEE replies that there are two things. First is a proposed grant to the Municipality of Anchorage for three years to fund Ms. Burke's position with the Municipality, and then there is a real estate opportunity.

TRUSTEE DERR makes a motion to go into executive session to consider personnel and financial matters.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

(Executive Session from 12:25 until 1:37 p.m.)

CHAIR WEBB asks for a motion to adjourn the Executive Session.

TRUSTEE SELBY makes a motion to adjourn the Executive Session.

TRUSTEE EASLEY seconds.

*There being no objection, the motion is approved.*

TRUSTEE MICHAEL makes a motion to approve a Trust-funded Municipality of Anchorage Housing and Homeless Coordinator for three years, FY17, FY18, and FY19, with approval of \$178,200 in Authority grant funding for FY17.

TRUSTEE NORENE seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB adds that this will be subject to an agreement and grant conditions that will be worked out with direction given to the CEO. He states that next on the agenda is the Finance Committee report, and recognizes Trustee Smith.

TRUSTEE SMITH begins with the cash management report and asks Mr. Buckland to continue.

MR. BUCKLAND goes through the cash management report, explaining and answering questions as he goes along.

CHAIR WEBB states that lunch has arrived, and we will resume the Finance Committee report at 2:00 p.m.

(Break.)

CHAIR WEBB calls the meeting back to order and recognizes Trustee Smith to continue the Finance Committee report.

TRUSTEE SMITH moves to the first approval item, which is the Aging and Disability Resource Center Authority Grant. He recognizes Amanda Lofgren.

MS. LOFGREN states that this project is part of the FY17, 3.9 Medicaid reform funding that trustees approved. This is just to allocate it to specific grantees. She also gives a bit of background on the pilot project.

TRUSTEE DERR asks about the number of beneficiaries and if that is the whole ADRC network

MS. LOFGREN states that Joyanna Geisler, from Kenai Peninsula, can answer that.

MS. GEISLER replies that Martin Lawrence with Senior and Disability Services gathered the numbers and those are beneficiary numbers from all of the ADRCs.

MS. LOFGREN states that the numbers are actually very accurate in terms of the number of beneficiaries being served. She continues that it would be the statewide system and there are five Aging and Disability Resource Centers: Anchorage, Bristol Bay, Kenai Peninsula, Southeast Alaska, and Mat-Su. She adds that the balance of the state is served by the State rural long-term care coordinator position.

TRUSTEE DERR comments that the grant is for pilot programs at Kenai, Mat-Su and Southeast, and these numbers are for the entire state.

MS. LOFGREN replies yes.

TRUSTEE SMITH makes a motion to approve FY17 Authority Grant allocation for Medicaid reform, implementation report, 1915 (i) and (k) options funding, in the amount of \$400,000 for the purpose of the Aging and Disability Resource Centers' pilot project expansion. The funds for this project will be allocated to the fiscal agents listed in the below table.

CHAIR WEBB states that this was a new item and does require a second.

TRUSTEE MICHAEL seconds.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the Item No. 2 is a transfer to Finance, August 2015, Trustee approved \$1.59 million which is DHSS Medicaid expansion appropriations. He asks Mr. Buckland to continue.

MR. BUCKLAND states that the amount stated was \$1.59 million, and the figure was \$1,590,700. He continues that this motion is to authorize the draw from budget reserves to finance the August 2015 approval that trustees made for the Medicaid expansion that was made available to the Department of Health and Social Services, which was to be an RPL or revised program legislative, that the LB&A Committee decided not to act upon. This would allow the funds to be withdrawn from the Permanent Fund.

TRUSTEE SMITH makes a motion that the Finance Committee recommends that the Full Board of Trustees authorize the transfer of \$1,590,700 from the Alaska Permanent Fund budget reserve accounts to the Mental Health Settlement income account to finance the FY2016 DHSS Medicaid expansion funds approved in August, 2015. The CFO may fulfill this motion with one lump sum or multiple transfers.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the next item is advance appropriation request for future TADA real estate acquisition.

MR. BUCKLAND states that this request is to be able to prime the pump and have something ready in the structure so when a real estate acquisition comes about the funds are readily available to get to the Trust Land Office so that the due diligence process can begin and can demonstrate financial ability to lenders and sellers. He continues that this request is to put a placeholder, \$20 million appropriation, in the TADA that can be drawn upon in the future.

A short question-and-answer session ensues.

TRUSTEE SMITH makes a motion that the Finance Committee recommends that the Full Board of Trustees authorize the CFO to establish a \$20 million appropriation from the Trust Authority Development Account, TADA/IRIS fund 3320, for a future real estate acquisition. These funds do not lapse.

MR. BUCKLAND states that there was an amended motion that went through the Finance Committee and reads it into the record:

The Board of Trustees approves the Finance Committee's recommendation to authorize the CFO to establish a \$20 million appropriation from the Trust Authority Development Account,

TADA/IRIS fund 3320, for future real estate acquisition, which will be subject to Full Board of Trustee approval. These funds do not lapse.

*There being no objection, the motion is approved.*

TRUSTEE SMITH moves to Medicaid reform funding options, and asks Mr. Jessee to continue.

MR. JESSEE states that this is to approve the Finance Committee's recommendation to fund the Medicaid reform elements that were negotiated with the Department and the Legislature during the SB74 process.

TRUSTEE SMITH makes a motion that the Board of Trustees approves the Finance Committee's recommendation to instruct staff to implement a reversion of previously approved Authority funds totaling \$3,804,400 to make funding available for Medicaid reform ABLE Act and technical assistance to providers through MHTAAR and Authority funds during FY16-FY17. The funding reversion consists of \$2,736,300 originally authorized in FY13 through FY15; \$781,000 originally authorized in FY16; and a \$287,100 reduction of initial commitments originally planned for FY17.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the items listed for RMC were covered earlier and moves on to partnership. This item is the behavioral health aide training, curriculum and materials development and implementation. He recognizes Ms. Baldwin-Johnson.

MS. BALDWIN-JOHNSON gives a recap of the overview of this project that was provided to the Finance Committee. This is for \$125,000 to support development of the next phase of the behavioral health aide manual, which is a continuation of support that has been provided to this project and this effort to develop, specifically, the adult and elder section of the behavioral health aide manual.

CHAIR WEBB notes that this was discussed at length during the Finance Committee. He had a couple of questions that were answered sufficiently regarding how this fits in with a much larger project and was convinced that this is worthy of Trust support.

TRUSTEE EASLEY notes that a manual was distributed to trustees, and it is an amazing manual for the information that it contains.

TRUSTEE SMITH makes a motion that the Board of Trustees approves the Finance Committee's recommendation for a \$125,000 FY17 partnership grant to the Alaska Native Tribal Health Consortium for the behavioral health aide training curriculum and materials development and implementation project.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that next is also a partnership and the proposal is domestic violence shelter improvement.

MS. BALDWIN-JOHNSON states that this project is the second year of a two-year effort that was partnered with the Alaska Community Foundation, Foraker, and several other funding partners to pool funding to look at the deferred maintenance issues of domestic violence shelters across the state of Alaska. This funding is fulfilling the next piece of Trust commitment to the project.

TRUSTEE SMITH makes a motion that the Board of Trustees approve the Finance Committee's recommendation for a \$100,000 FY17 partnership grant to the Alaska Community Foundation for the statewide domestic violence improvements initiative.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the next item is also a partnership. It is the Hydaburg Naa Iwaans, Big Cedar Project, and that is Hydaburg Cooperative Association.

MS. BALDWIN-JOHNSON states that this funding for \$75,000 is the remaining match needed to complete the funding package for this. There are several community groups that are supportive of this. She continues that this is supporting them in construction of the Big Cedar house and is an important project to the community. It provides not only a place for their gatherings and their cultural events, but is also a place where people that reside outside of the community are coming back to.

TRUSTEE SMITH makes a motion that the Board of Trustees approve the Finance Committee's recommendation for a \$75,000 FY16 partnership grant to the Hydaburg Cooperative Association for the Hydaburg Naa Iwaan's Big Cedar Project.

*There being no objection, the motion is approved.*

TRUSTEE SMITH states that the other items are listed as no action required.

CHAIR WEBB states that they are informational items for the Board as a follow-up to actions taken at the Finance Committee. They are in the authority of the Finance Committee to take and do not require full board action.

TRUSTEE DERR asks Mr. Buckland how the asset allocation RFP is coming.

MR. BUCKLAND replies that there is a draft asset allocation RFP. He states that he needs to get together with Trustee Smith for any further comments or refinement, and then it could be ready to go forward.

TRUSTEE SMITH concludes the Finance Committee report.

CHAIR WEBB recognizes Denise Daniello, the executive director of the Alaska Commission on Aging, to give an update.

MS. DANIELLO states appreciation for the opportunity to provide these updates. She continues that she will talk about updates on the ongoing legislative session. She goes through the highlights of the various bills that the Commission took action on that affect senior Trust beneficiaries and other older Alaskans. Then she looks forward into FY2018 at funding that may be at risk for senior programs, given the current fiscal situation. She states concern about the Alaska senior benefits program because it is 100 percent GF-funded and is at risk. The other program is the grant-funded services. These are the lowest-cost services that serve the greatest number of seniors; almost 26,000 seniors, in FY2015. She continues to the national scene and looks at some of the Congressional action that affects legislation and budget items for Americans with Alzheimer's disease, as well as other older Americans. She states that the Older Americans Act was reauthorized in April. This provides funding for all the different services for seniors, including elder protection, senior meals, transportation, vocational training for seniors, and much more. In terms of legislation for Americans with Alzheimer's disease, the National Alzheimer's Association has three federal priorities. The first being an increase in base funding for Alzheimer's research by at least \$400 million in the coming year. The second priority is to improve access to care planning through the Health Outcomes Planning and Education or HOPE Act for Alzheimer's disease. This would add comprehensive care planning as a covered service under Medicare. Third is to educate providers on palliative and house hospice care through the Palliative Care and Hospice Education and Training Act. This is new legislation that is aimed at providing training in palliative and hospice care to healthcare professionals to launch an education campaign about the benefit of these services, and to fund research. She then shares some other items of interest that the Commission is working on that includes amending the funding formula for the Alaska State Plan for Senior Services, as well as Older Americans activities. She continues through her presentation, explaining as she goes along.

TRUSTEE SMITH asks what the impact would be long term if the cuts are sustained.

MS. DANIELLO replies that a different business model will need to be figured out. She states that, initially, they will be working with SDS who have agreed to provide some help with admin support. She continues that she will also be looking to the MASS program, the Mature Alaskans Seeking Skills training program, to have somebody who will be there to answer the phone and greet people. This is being done for the first year. The second year is when one of the planner positions will be lost, which is an important position. She adds that they will do the best that they can do.

CHAIR WEBB thanks Ms. Daniello and welcomes Patrick Reinhart, executive director of the Governor's Council on Disabilities and Special Education.

MR. REINHART begins with legislative priorities, HB76, the council statute, a cleanup of the enabling statute. He states that the Governor signed the bill this morning and it is law. He continues that HB77, the Disability Training and ID bill, has gone through both the House and the Senate and is stuck in Senate Rules. He adds that it did get a lot of support in both the House and the Senate. HB188, the ABLE Act passed, and he thanks the Trust for stepping forward in

helping to develop the program within the State. He continues his presentation, moving to the capital budget items and going through this in greater detail. He moves to the FASD work group and states that they helped create the special education regulation that include children with FASDs. The Medicaid ad hoc committee has been very busy analyzing numerous regulations published by SDS and others. He states that there are still a lot of fears, ADA lawsuit fears, and there is still a long way to go to convince employers that hiring people with disabilities is good for their bottom line. He completes his presentation.

CHAIR WEBB thanks Patrick and calls a break.

(Break.)

CHAIR WEBB calls the meeting back to order. He states that the next item on the agenda is from Kate Burkhart, the executive director of the Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse.

MS. BURKHART states that she will talk about legislation that has or will pass, as well as budget decisions that have been made that affect the constituents and shared beneficiaries. She continues that none of the revenue bills that were proposed by the Governor have passed, although there seems to be a commitment in House Finance to do something with HB245. She adds that they formally supported the bills related to the alcohol tax and tobacco tax. However, they did appreciate and support the consideration of all forms of revenue to help support critical State services. She continues her presentation on the legislation, explaining as she goes along. She states that there is a table of items of interest out of the conference committee motion sheets and has included some information about some of the increments that either affect programs or beneficiaries directly. She explains this in greater detail as she continues her presentation. She states that the future looks a little grim. She continues that General Fund programs are the ones that are receiving the most scrutiny because that is where the deficit is. She adds that, unfortunately, these programs are often the ones that service beneficiaries and constituents with the basic daily needs like food, shelter, cash assistance, education, health, safety, and transportation. She states gratefulness that the funds for the homelessness assistance program and the supportive housing programs were not reduced this year from last year's amounts. She moves on to the Alaska Opioid Policy Task Force, which is the brainchild of a group of Alaskans that went to a 50-state convening in D.C. last fall and learned that many other states have a statewide policy task forces related to heroin and opioids to help guide state responses to what is happening. She explains this in greater detail, adding that this multi-dimensional approach to the problem will be used; and will also employ the participatory processes that the boards have used in the past that have been previously shared, especially around suicide prevention. She adds that the first meeting is May 20 and will be video-conferenced in Juneau, Anchorage, and Fairbanks, and teleconferenced statewide. She states that the task force members were determined by a steering committee with the goal of funding a diverse and representative group of people from around the state. She continues that all of these folks have connections to their community coalitions, their professional organizations and their stakeholder groups, and will be relying on those to ensure that communities have more than ample opportunity to contribute and inform the work that is being done. One new item is what Central Peninsula General Hospital shared that is related to IV drug users in Kenai, Soldotna and the surrounding regions which will be an

interesting part of the conversation. She states that they will be moving forward and having regular updates and then will have a slate of recommendations to share with executive and legislative branches, as well as communities, in the fall. She states appreciation for Trustee Norene's comments, as well as the comments in the Planning Committee report, about the need to be ready to respond as beneficiaries and programs that serve beneficiaries come forward in the next year needing help because of the restriction and constriction in State resources, and the trustees' commitment to really thinking that through. She thanks all.

TRUSTEE EASLEY asks if either of the boards would be willing to send some kind of a resolution of support to Representative Murphy as his bill addressed so many things that the Trust wants.

MS. BURKHART states that there are a couple things that are the hiccups of this bill. The most contentious part of it is what is being called assisted outpatient treatment, which is actually forced involuntary outpatient treatment. She explains this in greater detail.

CHAIR WEBB asks for any further comments or questions. There being none, he thanks Ms. Burkhart. He states that is the end of the agenda items and asks for any other things to take up before the meeting is adjourned, and then public comments will begin at 4:30.

MR. JESSEE states that a retreat for May 17<sup>th</sup> was talked about earlier, and we need some guidance on this.

A discussion ensues.

CHAIR WEBB asks for a motion to adjourn.

TRUSTEE NORENE makes a motion to adjourn the meeting.

TRUSTEE MICHAEL seconds.

*There being no objection, the meeting is adjourned.*

CHAIR WEBB states that public comment begins at 4:30 p.m.

(Full board of Trustees Meeting adjourned at 4:20 p.m.)

## **PUBLIC COMMENT**

CHAIR WEBB reconvenes for the purpose of taking public comment. He states that participants who address issues relating to Trust beneficiaries have priority. He asks all to be respectful and try to adhere to the guidelines. He recognizes Dr. Aron Wolf.

DR. WOLF states that he is a technical advisor for all on the peer review programs and is here as the acting interim director of CHOICES, Inc., which is one of the programs funded by the Trust for a long time. He thanks the trustees for their continued support of the program and begins a

short update. He states that the Soteria part of the program was closed at the end of the last fiscal year. A lot of those people are in the case management program, which is carrying forward. He continues that they have three very exciting programs going on. The first is the Homeless Housing Act program that consists of a team of 10 professionals and nonprofessionals. The focus is on housing, health and work. There are 36 people on by the end of the first year of the grant. The second program is the case management program, which has been on since CHOICES started. He states that the CARF accreditation, three years of national accreditation, was received for this program. He continues that this program provides counseling, group therapy, housing, and coordinates with ACT about housing and jobs. The third program is the Peer Bridger Program, which is another grant. It is an in-reach program to API and to the Providence mental health program. He explains that the peer counselors go into the institutions, meet with patients and help them transition to an outpatient follow-up to either of the other programs. He adds that both of the institutions seem very pleased with this in the coordination of the program. He states that CHOICES is focusing a lot on sustainability. Medicaid is the principal source of nongrant funding and will be working with the State to expedite how Medicaid funding can work best for a nonprofit program like this. He continues that the board is also focusing on fundraising and has a team for the visitor industry charity walk on Friday the 13<sup>th</sup>. He invites any and all to sign up and join the CHOICES, Inc. team. He adds that they also want to focus on individual sustainability for all of the programs going forward. He asks for any questions.

TRUSTEE DERR asks if Dr. Wolf could come back and report about the positive benefits of the Soteria program before it was closed.

DR. WOLF replies that it wound up being funding issues, and he will give a synopsis of the data surveys on it.

MR. JESSEE states that it can be put on the Planning Committee agenda, if the Chair is okay with that.

CHAIR WEBB asks for any other comments or questions. He thanks Dr. Wolf and recognizes Shirley Holloway.

MS. HOLLOWAY thanks all for the opportunity to address the board. She states that her involvement with NAMI came about through tragedy; her daughter, who was living with mental illness, took her own life. She continues that she wanted family and friends to donate to an organization that could help individuals like her daughter, in her memory, rather than send flowers. She adds that she did not know of any and randomly suggested NAMI Anchorage. She contacted them and the executive director, Francine Harbour, and the board chair, Denise Swenson, offered to come and meet with the entire family and a few close friends. She states that this visit meant a lot, and she offered her assistance if it was every needed. She continues that before she knew it, she was serving on the NAMI Alaska board of directors. She adds that NAMI has been a blessing and has been a part of her recovery process. She states that she is dedicated to helping NAMI with the critically important outreach efforts to engage and involve more individuals living with mental illness via their families. People with mental illness recover, and she adds that no one ever said those words to her. She thanks the Trust for the

funding provided to NAMI Anchorage and NAMI Juneau, and encourages, in the next fiscal year, increasing that support. She asks if, in the future, one of the agenda items could be learning more about NAMI and its signature programs and the impact it has on individuals living with mental illness and their families. She thanks all for their time and consideration.

CHAIR WEBB renders his sympathy for the tragedy suffered in her family and asks the Planning Committee Chair, in the future, setting aside some time for a NAMI presentation. He recognizes Jeanne Gerhardt-Cyrus.

MS. GERHARDT-CYRUS states that she is from Kiana and is the coordinator for the Governor's Council work group on FASD. She continues that she is also a parent of multiple children with prenatal exposure and a case manager for the CAPI program. She states that she is here to ask the Trust for formal support of this population of people with FASDs in the way of supported TBI through ABIN, Alaska Brain Injury Network. She continues that the vast majority of people with FASDs do not qualify for services through other programs. They do not meet the eligibility requirements for developmental disabilities, yet this is a disability that occurs prior to birth and therefore is developmental. She adds that it does not meet the definition for a traumatic brain injury even though it is an organic brain injury, a physical brain difference and is not a mental illness. There are no services in the state of Alaska for this population. She asks for an opportunity to meet with the appropriate committee to further discuss and work on ways to formally provide support to this population in the way that ABIN does for the TBI population. Thank you.

CHAIR WEBB thanks Ms. Gerhardt-Cyrus, and suggests the Planning Committee.

MS. CHIVERS states that she is Betsy Chivers and is one of two case managers working with a provider agreement with the State of Alaska Department of Health and Social Services, case-managing individuals who have the diagnosis of FASD that come through one of the diagnostic teams. She continues that she works with the Anchorage team and has the largest caseload in the state. She adds that she has worked with 10 families and 13 individuals; her youngest client is six, and her oldest client is 34. She states that the cost of providing services to individuals with this diagnosis is astronomical for any state, and Alaska is not the only state facing these huge issues with this population. She continues that once the diagnosis is received and the client is under 12, there are a multitude of different services that can be accessed; but once the person ages out there is relatively nothing there to help. She adds that this is a 100-percent preventable organic brain disorder, and while she applauds what is being done, there definitely is more that needs to be done. She thanks all.

TRUSTEE MICHAEL states that she had the privilege of presenting the 2016 awards for the Alaska Alliance for Direct Support Careers, and acknowledges that Betsy Chivers received the Outstanding Direct Service Professional of the year for her work in FASD.

(Applause.)

CHAIR WEBB recognizes Brandon Williams.

MR. WILLIAMS states that he is Brandon Williams and is currently serving as the training and development manager of NAMI Anchorage. He continues that he has been a part of NAMI Anchorage for over a decade, since being a teenager, and credits them with saving his mother's life and his family. He adds that his mother began to manifest signs of bipolar disorder when he was a teenager, which got progressively worse. Roles were reversed and he became the caregiver and comforter for his mother. This went on for a long time and was a rough situation. His mother attempted suicide and was checked into the community mental health center. A diagnosis was finally made, but even with that and medication his mother had no hope until she found NAMI Anchorage. She found her peers and found the idea that recovery is possible. He states that she eventually pulled out of where she was and is now a fully functioning, able-bodied, contributing member of society. In fact, she started working for NAMI Anchorage and eventually become the executive director, Francine Harbour. He thanks all and appreciates the Trust's continued support of NAMI Anchorage.

CHAIR WEBB thanks Mr. Williams and recognizes Francine Harbour.

MS. HARBOUR states that it is harder for her to hear that story than to tell it from her experience, and adds that NAMI Anchorage saved her life. There is nonjudgmental, positive regard for whoever walks through that door no matter what they look like, no matter what they smell like, no matter what they are acting like. She continues that the bottom line is that the Trust has been supportive for seven years. She adds that she was there in the beginning in 2006 when the very first Trust Beneficiary Project Initiative grants were written. She states that she worries every night about the future of NAMI Anchorage. All she knows is that it works and it works without clinicians. She continues that the Trust gets more bang for their buck with them than with the clinicians, and she does truly appreciate them.

CHAIR WEBB thanks Francine for having the courage to tell her story. He continues that it takes tremendous courage to come up and speak about your own experiences. He recognizes Lilly Wurtz.

MS. WURTZ states that she is a new employee and member of NAMI Anchorage. She continues that this is her first time advocating after being trained in partners and policy-making training. She is a lifelong Alaskan resident and a senior sociology major at UAA. She adds that she is also a person who experiences bipolar disorder and has struggled for over a decade with the challenges that mental illness brings, sexual assaults, dropping out of high school and the chronic depression for years. Because of this, gainful employment has been difficult. She states that her recent employment in a meaningful and challenging position has allowed her to begin to work towards becoming more independent and self-sufficient. She continues that being among her peers, in a supportive environment, has increased her self-confidence and helped her believe that she can be successful in the workforce. She adds that this organization will help other people achieve their goals and sincerely hopes that the funding under the Beneficiary Project Initiative Grant continues. Thank you.

CHAIR WEBB asks for any questions or comments.

MS. HARBOUR comments that every single person who works at NAMI Anchorage is a consumer, every one of the board members is a consumer or family member, except for the one provider on the board. She states that they are the essence of the Beneficiary Project Initiative because they do it. It has taken several years and Shirley Holloway to get to the point of finally being ready to do serious fundraising. It has taken a long time and a lot of dedication to get to this point.

CHAIR WEBB recognizes Stephanie O'Connor

STEPHANIE O'CONNOR states that she is a consumer with NAMI Anchorage, diagnosed with bipolar disorder and would not be where she is today without NAMI Anchorage. She continues that she has been a member for more than five years and goes through the programs that they offer. She adds that it is a vital program that runs on a skeleton crew that has made a big difference in her life. She thanks the Trust for giving to a program that makes a difference. Thank you.

CHAIR WEBB recognizes Dewayne Harris.

MR. HARRIS states that he would like to take the opportunity to introduce himself and thank the trustees for the ongoing support of the Alaska Mental Health Consumer Web. He continues that he came on board as the executive director in December and has been blessed to work with some very dedicated beneficiaries that come to work six days a week, provide tremendous, phenomenal services to the participants. He adds that they are a recovery-based program that requires all participants to pass a Breathalyzer, which is the first success of the day. As a peer-driven program, they have the privilege of seeing the benefits of beneficiaries serving beneficiaries. The Web provides a safe, sober, supportive environment so that the participants can begin the process of setting goals, gaining skills, and being connected and linked to resources in the community. He gives a short update and states that the collaboration in the community provides the opportunity to most effectively serve the population.

CHAIR WEBB thanks Mr. Harris and asks for anyone else.

MS CHAMPNEY states that she is Kim Champney, president of the Alaska Association on Developmental Disabilities, or AADD. She also works for REACH, a provider agency in Juneau. AADD is an association of developmental disability providers that represents agencies that support thousands of Trust beneficiaries with developmental disabilities. She continues that they are facing big shifts in Medicaid reform and value their partnership with stakeholders like the Trust and the State. She adds that State staff has an overwhelming number of mandates that trickle down to providers and is grateful to be partners. It makes a big difference. She thanks the Trust for that support.

CHAIR WEBB asks for anyone else to comment.

MS. GERHARDT-CYRUS states that there have been major challenges in raising her daughter and shares that she was largely responsible for having the youth conference in April and

presented at the International Conference on Disabilities and Diversity in Honolulu last week on self-advocacy. She adds that everybody can be successful. Thank you.

CHAIR WEBB states that Public Comment has ended and states that they will meet tomorrow morning at 8:15 at the Trust Land Office.

(Full Board meeting adjourned at 5:30 p.m.)

**Minutes for the  
June 15, 2016  
Full Board of Trustee  
Meeting**

ALASKA MENTAL HEALTH TRUST AUTHORITY  
FULL BOARD OF TRUSTEES MEETING

June 15, 2016  
4:11 p.m.

Taken at:

Alaska Mental Health Trust Authority  
3745 Community Park Loop, Suite 120  
Anchorage, Alaska

**OFFICIAL MINUTES**

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Trustees present:

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

Trust staff present:

Steve Williams  
Jeff Jessee  
Kevin Buckland  
Katie Baldwin-Johnson  
Carrie Predeger  
Heidi Wailand  
Valette Keller  
Carley Lawrence  
Michael Baldwin  
Debbie Delong

Trust Land Office:

John Morrison

Others participating:

Kathy Craft; Denise Daniello, Alaska Commission on Aging (via telephone); Kate Burkhart, Alaska Mental Health Board and Advisory Board on Alcohol and Drug Abuse (via telephone).

## PROCEEDINGS

CHAIR WEBB calls the meeting to order and notes that all trustees are present with the exception of Jerome Selby. He asks for any items to be added to the agenda. He states that he would like to put some discussion on how to get the Trust Land Office legal advice that may be needed in a timely manner that may be needed.

TRUSTEE SMITH asks to add a brief report on the contact with the Pew Charitable Trusts.

TRUSTEE MICHAEL makes a motion to approve the agenda, as amended.

TRUSTEE NORENE seconds.

*There being no objection, the motion is approved.*

CHAIR WEBB looks at the Review and Reconsideration of the FY17 Budget and states that it was gone through in detail in the Planning Committee. He continues that there were no motions to make any changes to the budget. He explains that everything was within the ability of staff to do. He asks Trustee Smith for a report on the contacts with Pew.

TRUSTEE SMITH states that he was asked to contact the Pew Charitable Trusts about their experience with reviewing board governance issues. He continues that he talked to Suzanne Morris, Pew Partnership Civic Change Leadership Chair, who has a national reach in working with larger nonprofits. She indicated that the board has just finished an up/down board-of-governance review, and she is happy to share it with the Trust as a courtesy.

CHAIR WEBB states that the folks at Pew have a lot of experience, and the hope was that they could provide some guidance on how to approach that.

TRUSTEE SMITH adds that she has been involved in national leadership initiatives at the local level and is highly interested in working with the Trust, offering some thoughts about where this focusing on best practices could go. He states that he is glad to do that.

CHAIR WEBB states that there have been some difficulties with getting legal advice in a timely or potentially any manner because of the difficulties at the Department of Law. He asks John Morrison to describe the situation.

MR. MORRISON states that there are two issues, one of which should be talked about in executive session. In general, there is a larger issue. He continues that the Trust is able to hire legal counsel to protect Trust interests without seeking further approval from any outside agency. He explains that the TLO, which is a part of DNR, is required to request that first through the Commissioner's office and the AG, and that approval ultimately goes all the way to the AG or someone who has been delegated the authority to hire counsel. He clarifies that many times the issues are well served efficiently and economically by the Attorney General's office. They are responsive to the needs and are able to do it at a fairly low cost. He continues that, in recent years, there are more situations where a conflict of interest with either DNR or another State

agency is felt; and we are not allowed to either seek outside counsel or get sufficient counsel from the AG's office. He adds that there have been other situations where access to outside counsel was denied because the AG's office felt, contrary to our belief, that they could meet the needs with their expertise. Quite frankly, there have been times that the AG's office does not have the available expertise needed to address specific issues. He states that the thought was that the Trust hire outside counsel to only represent Trust interests. It would be good to have a system to access legal counsel outside of the current system being used.

CHAIR WEBB asks if the Trust needs legal assistance, can it hire legal assistance.

MR. JESSEE replies yes.

CHAIR WEBB states that it is probably not in the Trust's long-term interest to simply be denied the ability to get counsel, particularly in light of some of the staff reductions in the Department of Law. He continues that it is increasingly difficult to just get regular advice from the Department of Law.

MR. MORRISON states that staff believes that we are generally relegated to the bottom of the list when it comes to who gets what representation in the Attorney General's office.

CHAIR WEBB asks what mechanism could be put in place to enable going out and getting the legal advice needed to protect the Trust's interests when it is needed. He asks if money is one issue.

MR. JESSEE replies that money is one issue.

MR. MORRISON states that, in general, the money to address these issues is available.

CHAIR WEBB asks what the other issue is.

MR. JESSEE asks if this is about a discrete type of advice amenable to one contract, or is it about potentially multiple general or business expertise.

MR. MORRISON replies that he thinks that it will develop on its own over the course of time, and sometimes there is not a choice when legal advice is needed.

TRUSTEE MICHAEL suggests it would be better to get a real estate law firm on board that can be called when needed.

MR. MORRISON states that part of the issue is the diverse nature of what the TLO does and does not believe there is one law firm in existence that could help with all of the various issues. He continues that there are two separate issues: The ability to hire an attorney, and the procurement process to actually get the services.

The discussion continues.

CHAIR WEBB states that Trustee Norene could hold a Resource Management Committee meeting and clearly define the need and write down a process for the long term. He asks if immediate assistance is needed.

MR. MORRISON replies that there is an issue that will need assistance, but we do not have to do anything today.

TRUSTEE NORENE suggests putting it on the agenda for the next Resource Management Committee and try to come up with a recommendation. He then asks the Chair to address the letter from Jim Gottstein. He adds that he is bringing attention to the issue. He asks if staff has a suggestion about it.

MS. BALDWIN-JOHNSON states that he was very interested in connecting the Trust with a doctor and actually brought him to the office. She continues that he had a presentation which is recorded and available on YouTube. She adds that he wants to raise awareness and bring information to the trustees. She was not sure if there was anything needing action.

MR. JESSE states, on the medication issue, there are extremes on the continuum. There are physicians that believe in medication first and asking questions later is the way to go. The other extreme is no medications, they are all toxic and do not take any. He continues that people presenting information and a different perspective can benefit beneficiaries in that they may fall in a different place on that continuum than the Trust itself.

MR. BALDWIN states that this is on the list for a Planning Committee meeting; it just has not been worked out yet. It will most likely be after the September board meeting.

MR. JESSEE moves back to the lawyer situation and states that there is no way to obligate some '16 monies to get ahead of it now.

MR. MORRISON states that he expects this particular issue to play out and would not be very fund-intensive in 2017. If it mushroomed to a bigger issue, it would be FY18 before it became expensive.

CHAIR WEBB frames the issue as he views it: If the TLO is having an issue that requires legal expertise of a particular sort that is not available, the Resource Management Committee or that committee chair is made aware of it. Someone is bringing the matter forward that indicates that the Trust's interests are at risk. He asks for any other issues, and recognizes Paula Easley.

TRUSTEE EASLEY states that she was looking at the other focus areas, and it would be nice to have a target for housing.

CHAIR WEBB agrees and asks staff to give some serious thought to looking at the focus areas and trying to identify and quantify getting closer to it and what is needed to get there. He asks for any other questions or comments. There being none, he asks for a motion to adjourn.

TRUSTEE NORENE makes a motion to adjourn the meeting.

TRUSTEE MICHAEL seconds.

*There being no objection, the meeting is adjourned.*

(Board of Trustees meeting adjourned at 4:45 p.m.)

**The Trust's  
Guiding Principles /  
Mission Statement /  
Trust Budget  
Process Flowcharts**

## Trust Guiding Principles

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**To improve the lives of Trust beneficiaries, 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 program results;

Inclusion of early intervention and prevention components in programs;

Provision of reasonably necessary beneficiary services based on ability to pay.

Approved 5-12-09, Board of Trustee meeting

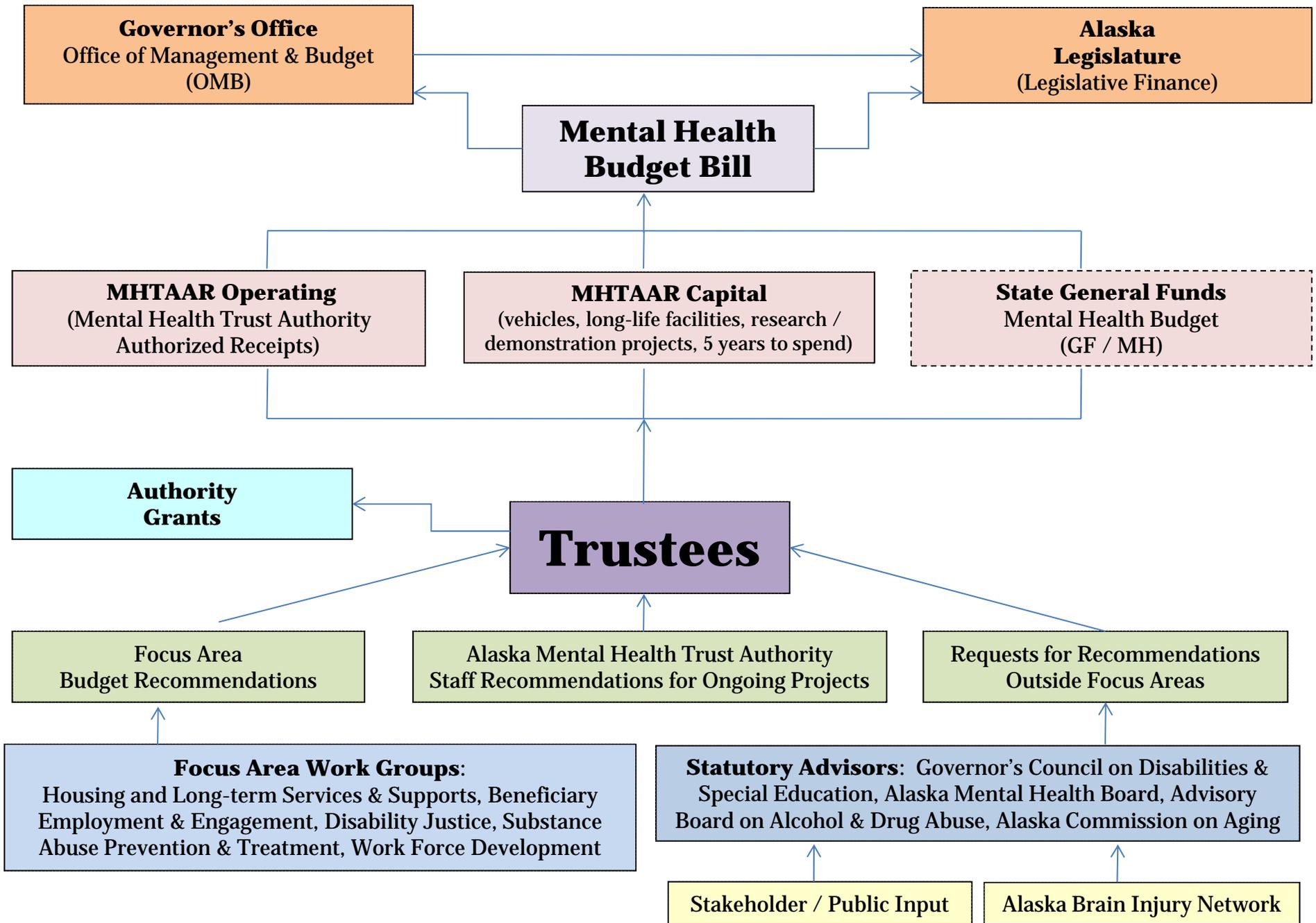
## Trust Mission Statement

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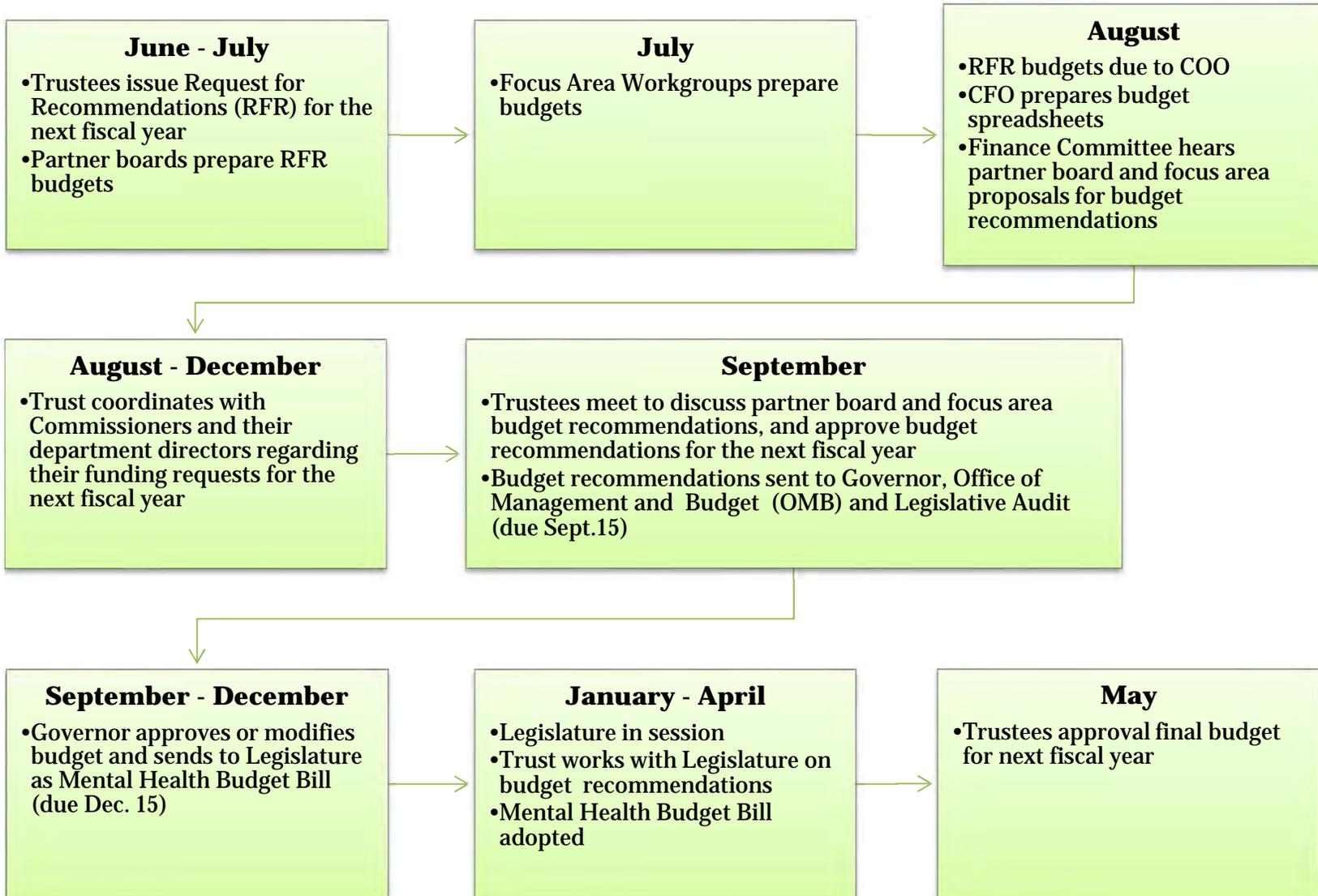
The Alaska Mental Health Trust Authority (The Trust) administers the Mental Health Trust to improve the lives of beneficiaries. Trustees have a fiduciary responsibility to protect and enhance trust assets in perpetuity for the beneficiaries. The Trust provides leadership in advocacy, planning, implementing and funding of the Comprehensive Integrated Mental Health Program; and acts as a catalyst for change.

Approved 5-12-09, Board of Trustee meeting

# Alaska Mental Health Trust Authority Budget Process



## Annual Mental Health Budget Bill Process

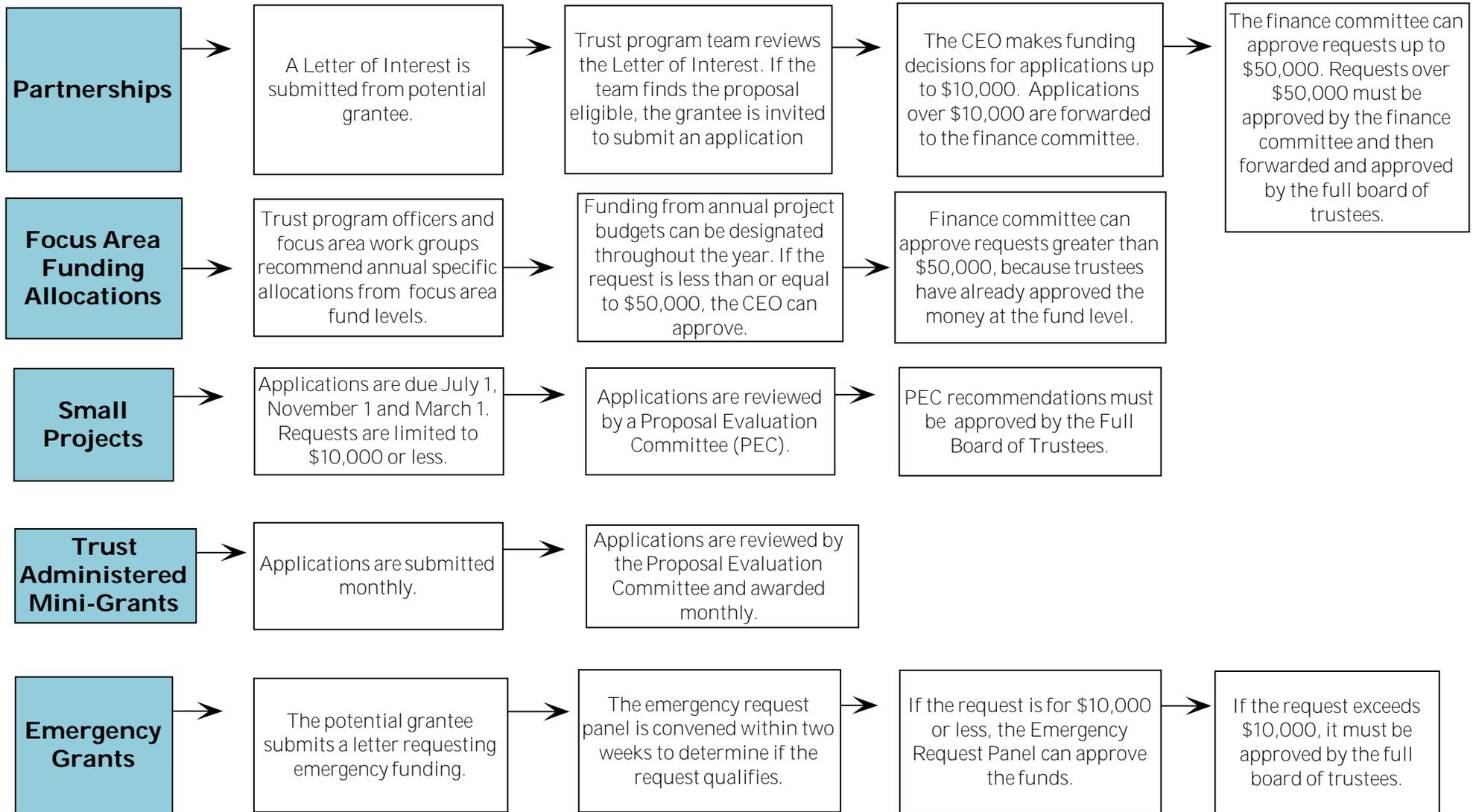


Note: timeline represents those items in the green boxes in the chart entitled "Alaska Mental Health Budget Process"

02/18/16

# Grant Approval Process for Authority Grant Funds

All annual budgets are approved by the full board of trustees at the September meeting



Note: this chart depicts those items included in the blue box labeled "Authority Grants" on the chart entitled "Alaska Mental Health Trust Authority Budget Process"

# Trust Annual Calendar

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
<b>Board Administration</b>												
Trustee reports due to APOC – <b>Mar 15</b>			XX									
Trustee committee assignments					XX							
Officer elections									XX			
Board evaluations										XX	XX	
CEO evaluation											XX	
<b>Trust Administration</b>												
Legislature convenes	XX											
Trustees present budget to House/ Senate Finance Committees	XX	XX										
Legislature adjourns				XX								
Request for Recommendations (RFR) issued to partner boards April 30				XX								
Fiscal year ends <b>June 30</b>						XX						
Fiscal year begins <b>July 1</b>							XX					
RFRs due from partner boards <b>July 30</b>							XX					
Advocacy Summit											XX	
Staff drafts Trust office budget for next fiscal year								XX				
Staff coordinates w/DHSS on budget								XX	XX	XX	XX	XX
Trustee meeting to approve next fiscal year budget									XX			
Trust budget recommendations due <b>September 15</b> to Governor/ Legislative Finance									XX			
Financial audit begins							XX					
Financial audit completed										XX		
Staff coordinates with OMB/DHSS on budget recommendations										XX	XX	XX
Trustees meet to finalize budget											XX	
Governor's budget released <b>December 15</b>												XX

04/17/15

# Trust

## Alaska Mental Health Trust Authority

### PUBLIC COMMENT GUIDELINES

<b>WHEN?</b>	<ul style="list-style-type: none"> <li>▪ The Trust bylaws call for a public comment period during all regular meetings of the Full Board of Trustees. See page 2 of this document for the relevant bylaw.</li> <li>▪ Full Board meetings usually are held in late January/early February, May, September and November. Public comment typically occurs at the close of the first meeting day. Public notice is issued for all meetings. Meeting information and agendas are posted on The Trust’s website <a href="http://www.mhtrust.org">www.mhtrust.org</a>.</li> </ul>
<b>PURPOSE?</b>	The public comment period allows individuals to inform and advise the Board of Trustees about issues, problems or concerns. It is not a hearing.
<b>PROTOCOL?</b>	<ul style="list-style-type: none"> <li>▪ Individuals are invited to speak for up to three minutes.</li> <li>▪ A speaker may be granted the latitude to speak longer than the 3-minute time limit only by the Board Chair or by a motion adopted by the Full Board of Trustees.</li> <li>▪ Participants addressing issues relating to Trust beneficiaries will have priority order.</li> <li>▪ Speakers are not permitted to criticize or attack others.</li> <li>▪ Anyone providing comment should do so in a manner that is respectful of the Board of Trustees and all meeting attendees. The Board Chair maintains the right to stop public comments that contain inappropriate or inflammatory language or behavior.</li> </ul>

### FREQUENTLY ASKED QUESTIONS

<b>How can someone provide comments?</b>	IN PERSON - please sign up for public comment using the clipboard provided by Trust staff during the Trustee meeting.
	VIA TELECONFERENCE – please call the meeting teleconference number on a telephone hard line. To prevent audio feedback, do not call on a speaker phone or cell phone. You may use the mute feature on your phone until you are called to speak, but do not put the call on hold because hold music disrupts the meeting. If this occurs, we will mute or disconnect your line.
	IN WRITING – send comments to the address or fax number below or email <a href="mailto:steve.williams@alaska.gov">steve.williams@alaska.gov</a> . Note that, if you wish your comments distributed to Trustees prior to a meeting, all comments should be received at least two days prior to the meeting to allow time to distribute them to Trustees.
<b>Where is The Trust office?</b>	The Trust Authority Building is located at 3745 Community Park Loop in Anchorage.
<b>What is the call-in number?</b>	Complete dialing instructions and the call-in number are posted on our website. Find the meeting under current upcoming meetings and click on the link to find the meeting agenda, call-in information and any meeting documents. Problems? Email <a href="mailto:info@mhtrust.org">info@mhtrust.org</a> .
<b>Is public comment taken at Trustee committee meetings?</b>	Public comment is not regularly scheduled during Trustee committee meetings. Written comments are always welcome and may be submitted to the Trustees at any time to the address or fax number below or email <a href="mailto:steve.williams@alaska.gov">steve.williams@alaska.gov</a> . Note that, if you wish your comments distributed to Trustees prior to a committee meeting, all comments must be received two days prior to the meeting to allow time to distribute them to Trustees.
<b>What is the process for commenting on projects on Trust land?</b>	Public comment regarding projects on Trust land is most effective when provided early in the decision process. Trust land is managed by the Trust Land Office (TLO) on behalf of the Trust Authority. Written comment is sought by the TLO on a per-project basis. Before each project, the TLO consults with the Board of Trustees and issues a “best interest decision and public notice” regarding the project. The best interest decision and instructions for submitting comments are posted on the <a href="#">Trust Land Office website</a> , through the <a href="#">State of Alaska Online Public Notices</a> and in local newspapers. Following the comment period, the TLO may affirm, revise or rescind the best interest decision regarding the project. Of course, public comment regarding any Trust land issue may be provided to the Trustees at any time at the address or fax number below, by email to <a href="mailto:steve.williams@alaska.gov">steve.williams@alaska.gov</a> or at Trustee meetings as described above.
<b>For additional information:</b>	Call Steve Williams, Chief Operating Officer, at 907-269-7697 or email <a href="mailto:steve.williams@alaska.gov">steve.williams@alaska.gov</a> if you have additional questions.

# ALASKA MENTAL HEALTH TRUST AUTHORITY

## BYLAWS

### ARTICLE V MEETINGS\*

Section 6. The Trust Authority will schedule at least one period for public comment during each regularly scheduled Trust Authority meeting. Prior to beginning the public comment period, the presiding officer will specify any limitation on content or topics to be addressed. She or he should read or may paraphrase the following procedural constraints:

- (a) The purpose for having public comment is to allow persons the opportunity to provide information to the Trust Authority and to advise the Trust Authority about problems and issues.
- (b) The public comment period will not be considered a hearing and cannot be used for that purpose. Organizations are required to request hearings in advance in writing, and when granted by the Trust Authority, the hearing must be given public notice in accordance with law.
- (c) Public comments will normally be held to a maximum of three minutes per speaker. A waiver to the time limit may be granted by order of the Chair or motion adopted by the Trust Authority.
- (d) The public comment period is not to be used in order to criticize or attack specific individuals.
- (e) The Trust Authority may not take action during the comment period, but may take matters under advisement.
- (f) The Trust Authority may consider matters identified during the public comment period under new business, but may defer such matters to a subsequent meeting in order to complete the original agenda or to provide notice to the public that the item will be on the Trust Authority's agenda.
- (g) In order to afford the maximum amount of time to the public, responses or comments by Trust Authority members or Trust Authority staff during public comment periods will be held to a minimum.

\* Excerpted from Alaska Mental Health Trust Authority Bylaws adopted May 2014. All statutes, regulations and bylaws governing The Trust can be found on our website

<http://mhtrust.org/about/governance/statutes/>

May 2014

# **Current Trust Bylaws**

1  
2  
3 ALASKA MENTAL HEALTH TRUST AUTHORITY  
4 BYLAWS

5  
6 ARTICLE I  
7 NAME

8  
9 The name of this organization is the Alaska Mental Health Trust Authority.  
10 Common usage and abbreviation may be "The Trust" or "Trust Authority."

11  
12 ARTICLE II  
13 MISSION

14  
15 Section 1. The Trust Authority acts in the best interest of the beneficiaries of The Trust. Its  
16 mission is:

17  
18 The Alaska Mental Health Trust Authority (The Trust) administers the Mental Health Trust to  
19 improve the lives of beneficiaries. Trustees have a fiduciary responsibility to protect and  
20 enhance trust assets in perpetuity for the beneficiaries. The Trust provides leadership in  
21 advocacy for and planning, implementing and funding of the Comprehensive Integrated  
22 Mental Health Program; and acts as a catalyst for change.

23  
24  
25 ARTICLE III  
26 BOARD OF TRUSTEE  
27 MEMBERSHIP AND TERMS OF OFFICE

28  
29 Section 1. Trust Authority composition:

30 (a) The Trust shall be governed by its board of trustees.

31  
32 (b) The Trust Authority Board of Trustees here after referred to as the Trust Authority,  
33 consists of seven members appointed by the governor and confirmed by the  
34 legislature. The members appointed under this subsection shall be appointed based  
35 upon their ability in financial management and investment, in land management, or in  
36 services for the beneficiaries of The Trust.

37  
38 (c) A member of the board is entitled to:

- 39 1. An honorarium of \$200 each day spent at a meeting of the board, at a meeting of  
40 a subcommittee of the board, or as a representative of the board. The sliding  
41 scale will be \$50 for less than 2 hours, \$100 for 2 to 4 hours, \$150 for 4 to 6 hours  
42 and \$200 for 6 hours or more. Any conflicts will be resolved by the Executive  
43 Committee; and  
44 2. Per Diem and travel expenses are authorized for boards and commissions under  
45 AS 39.20.180.  
46

1 Section 2. Term of office, vacancies, and removal:

- 2 (a) The members of the Trust Authority serve staggered five-year terms. A member  
3 shall continue to serve until the member's successor is appointed and confirmed by  
4 the legislature.  
5
- 6 (b) A vacancy occurring in the membership of the Trust Authority shall be filled within 60  
7 days by appointment of the governor for the unexpired portion of the vacated term.  
8
- 9 (c) The governor may remove a member of the Trust Authority only for cause, including  
10 incompetence, neglect of duty, misconduct in office, poor attendance, or lack of  
11 contribution to the Trust Authority's work.  
12

13 A member being removed for cause shall be given a copy of the charges and  
14 afforded an opportunity to publicly present a defense in person or by counsel upon  
15 not less than 10 days' written notice. If a member is removed for cause, the governor  
16 shall file with the lieutenant governor a complete statement of all charges made  
17 against the member and the governor's findings based on the charges, together with  
18 a complete record of the proceedings. The removal of a member for cause  
19 constitutes a final administrative order. A member seeking to appeal the governor's  
20 removal of a member for cause under this subsection shall file a notice of appeal with  
21 the superior court under AS 44.62.560.  
22

- 23 (d) Except for a trustee who has served two consecutive five-year terms, a member of  
24 the Trust Authority may be reappointed. A member of the Trust Authority who has  
25 served two consecutive five-year terms is not eligible for reappointment to the Trust  
26 Authority until one year has intervened. (§ 26 ch 66 SLA 1991).  
27

28 ARTICLE IV  
29 OFFICERS AND DUTIES  
30

31 Section 1. The Trust Authority, by a majority vote of its membership, shall annually elect a  
32 Chair, Vice Chair, and Secretary/Treasurer and other officers it considers  
33 necessary from its membership.  
34

35  
36 Section 2. The officers must be elected by a majority vote at the September meeting, and  
37 their term of office shall start on October 1 and shall end on the following  
38 September 30.  
39

40 Section 3. Officers may be re-elected to the office in which they serve by vote of the  
41 membership of the Trust Authority as above.  
42

43 Section 4. In the event of the resignation, death, or removal from the Trust Authority, of the  
44 Chair, the Vice-Chair will succeed to the office of the Chair.  
45

46 Section 5. If an office of the Trust Authority becomes vacant, an election shall be held to fill  
47 the vacancy at the next regular meeting of the Trust Authority following the

1 vacancy. In the interim, the Chair may appoint a member to serve until the  
2 election is held.

3  
4 Section 6. The duties of the officers shall be as follows:

5 (a) Chair

- 6 1. Call all meetings. Preside at all meetings.
- 7 2. Appoint Committees and Chairs of Committees.
- 8 3. Serve as ex-officio (voting) member of all Committees.
- 9 4. Serve as the Trust Authority's official representative during his/her term.
- 10 5. Operate and conduct the business and affairs of the Trust Authority according  
11 to the statutes, regulations, bylaws and policies adopted by the Trust  
12 Authority.
- 13 6. Approve Trust Authority meeting agenda.

14  
15 (b) Vice Chair

- 16 1. Assist the Chair in the discharge of his/her duties and preside at meetings in  
17 the absence of the Chair.
- 18 2. Keep a list of actions taken by motion at each meeting and place items  
19 requiring follow-up on the agenda for the next meeting.
- 20 3. Act as the parliamentarian for the Trust Authority.
- 21 4. Perform other duties described in these Bylaws or in accordance with statutes,  
22 regulations, by-laws and policies adopted by the Trust Authority.

23  
24 (c) Secretary/Treasurer

- 25 1. Sign to authenticate Trust Authority meeting minutes after Board approval for  
26 the record. Upon request, attest to the authenticity of Trust Authority by-laws,  
27 and approved motions.
- 28 2. Perform other duties assigned by the Trust Authority or the Executive  
29 Committee.

30  
31 ARTICLE V  
32 MEETINGS  
33

34 Section 1. The Trust Authority will meet at least four times each fiscal year. Committees will  
35 meet as necessary to accomplish their responsibilities.

36  
37 Section 2. Special meetings of the Trust Authority may be held at such time and place as  
38 the Chair may order; or when any four Trustees request to the CEO a meeting be  
39 scheduled.

40  
41 Section 3. Reasonable public notice of Trust Authority and Committee meetings shall be  
42 provided in accordance with AS 44.62.310. Meetings of the Trust Authority and  
43 its Committees are subject to the Open Meetings Act, AS 44.62.310 and  
44 44.62.312.

45  
46 Section 4. A quorum at all meetings shall consist of a simple majority of currently appointed  
47 Trust Authority members. One-half of the Trust Authority membership of a  
48 Committee constitutes a quorum at a Committee meeting for conducting and

1 exercising the powers of the Trust Authority, but in no event shall consist of less  
2 than two members.

3  
4 Section 5. No member of the Trust Authority may designate a proxy.

5  
6 Section 6. The Trust Authority will schedule at least one period for public comment during  
7 each regularly scheduled Trust Authority meeting. Prior to beginning the public  
8 comment period, the presiding officer will specify any limitation on content or  
9 topics to be addressed. She or he should read or may paraphrase the following  
10 procedural constraints:

- 11
- 12 (a) The purpose for having public comment is to allow persons the opportunity to provide  
13 information to the Trust Authority and to advise the Trust Authority about problems and  
14 issues.
  - 15
  - 16 (b) The public comment period will not be considered a hearing and cannot be used for  
17 that purpose. Organizations are required to request hearings in advance in writing, and  
18 when granted by the Trust Authority, the hearing must be given public notice in  
19 accordance with law.
  - 20
  - 21 (c) Public comments will normally be held to a maximum of three minutes per speaker. A  
22 waiver to the time limit may be granted by order of the Chair or motion adopted by the  
23 Trust Authority.
  - 24
  - 25 (d) The public comment period is not to be used in order to criticize or attack specific  
26 individuals.
  - 27
  - 28 (e) The Trust Authority may not take action during the comment period, but may take  
29 matters under advisement.
  - 30
  - 31 (f) The Trust Authority may consider matters identified during the public comment period  
32 under new business, but may defer such matters to a subsequent meeting in order to  
33 complete the original agenda or to provide notice to the public that the item will be on  
34 the Trust Authority's agenda.
  - 35
  - 36 (g) In order to afford the maximum amount of time to the public, responses or comments  
37 by Trust Authority members or Trust Authority staff during public comment periods will  
38 be held to a minimum.

39  
40 Section 7. Meetings of the Trust Authority may be conducted by teleconference or  
41 videoconference in accordance with AS 44.62.312(a)(6) provided that with  
42 respect to a matter which requires the consideration of documents a member  
43 participating by teleconference or videoconference may vote only on those  
44 matters to which he or she has access to said documents.

45  
46 Section 8.

- 47 (a) Formal actions by The Trust are accomplished through adoption of motions.  
48

1 (b) Motions must be proposed by a Committee or Trust Authority member.

2  
3 (c) Copies of motions on the agenda will be available to the public at the opening of the  
4 Trust Authority meeting.

5  
6 Section 9. A document becomes an official Trust Authority document only upon approval of  
7 the Trust Authority. Any document not approved by the Trust Authority shall be  
8 clearly marked "DRAFT".

9  
10 ARTICLE VI  
11 COMMITTEES

12  
13 The Trust Authority Chair may designate Ad Hoc Committees or task forces to  
14 accomplish special purposes. Persons other than Trust Authority members may serve on  
15 the Trust Authority's Ad Hoc Committees and task forces; however, such persons may not  
16 be voting members of such committees, only appointed committee members may vote on  
17 committee actions. (The Chair of the Board of Trustees is a voting member of each  
18 committee, article IV, section 6 (a)) Committee actions must be reported to the Trust  
19 Authority at the next regular Trust Authority meeting.

20  
21 ARTICLE VII  
22 EXECUTIVE COMMITTEE

23  
24 Section 1. The Executive Committee of the Trust Authority is composed of three officers,  
25 the Chair, the Vice Chair, and the Secretary/Treasurer. The Chief Executive  
26 Officer shall participate as requested at Executive Committee meetings.

27  
28 Section 2. The Executive Committee:

29 (a) Has full authority within the limits of established Trust Authority priorities, policies, and  
30 procedures to act on behalf of the Trust Authority between regularly scheduled  
31 meetings with a dollar limit of \$500,000.00 on expenditures.

32  
33 (b) Evaluates the Chief Executive Officer's performance in carrying out policies,  
34 procedures, and directions of the Trust Authority before the November Trustee  
35 meeting.

36  
37 (c) Refers matters to other Committees for reports to the Trust Authority.

38  
39 (d) Monitors activities of the Trust Authority through the Standing Committees.

40  
41 (e) Reviews corporate performance measures, analyzes them, and brings them to the  
42 Trust Authority with recommendations.

43  
44 (f) Approves the annual corporation audit and forwards to the state for inclusion in the  
45 state financial statements within timeframes set by the state department of  
46 Administration.

47 (g) Reviews Memorandums of Agreement (MOAs) that involve the Trust Authority  
48 and other governmental entity's except the Department of Natural Resources in

1 respect to the Trust Land Office and recommends to the Board of Trustees for  
2 approval.

3  
4 Section 3. The Executive Committee will meet no less than two times a year.  
5

6  
7 ARTICLE VIII  
8 STANDING COMMITTEES  
9

10 Standing Committees and their Chairs will be appointed by the Chair.  
11

12 (a) The Resource Management Committee:

- 13 • Develops policies and plans for protecting, enhancing, and managing the Trust's  
14 non-cash resources in the best interests of the beneficiaries.
- 15 • Implements plans at the direction of and on behalf of The Trust in accordance with  
16 Trust statutes and regulations.
- 17 • Approves disposals with an annual lease rental more than \$50,000 and not to  
18 exceed \$200,000; and disposals with sale revenues more than \$100,000 and less  
19 than \$500,000. This authority includes disposals that could produce revenues in the  
20 form of royalties that exceed this revenue limit if the disposal is an extension or  
21 expansion of an existing lease that has previously been subject to the consultation  
22 process, so long as any expansion or addition to that lease does not exceed 25% of  
23 the original lease acreage. All approvals for new disposals of interest that include  
24 royalties shall be approved by The Trust Authority.
- 25 • Approves project-specific expenditures from the principal, budget reserves or the  
26 facility maintenance account up to \$50,000.
- 27 • Reviews Trust Authority Memorandum of Agreement with the Department of  
28 Natural Resources for management of the Trust Land Office and recommends for  
29 approval to Board of Trustees.
- 30 • Reviews annual operating budget for TLO and recommends approval to Finance  
31 Committee.
- 32 • Evaluates, along with DNR, the Executive Director of the TLO annually.  
33

34 (b) The Planning Committee:

- 35 • Identifies and forecasts the status and needs of beneficiaries.
- 36 • Develops program policies and plans to meet needs and improve the  
37 circumstances of beneficiaries; and recommends to the Trust Authority for approval  
38 as appropriate.
- 39 • Evaluates the implementation of approved policies and plans affecting  
40 beneficiaries.  
41

42 (c) The Finance Committee:

- 43 • Develops policies for investment and fiscal management for approval by the Trust  
44 Authority.
- 45 • Oversees the implementation of approved investment and fiscal management  
46 policies.
- 47 • Reviews the administrative budgets for The Trust and Trust Land Office and then  
48 recommends to the Trust Authority for approval.

- 1 • Approves expenditure of authority funds to implement Trust Authority-approved  
2 Focus Area allocations or bundles of an unlimited amount for a state fiscal year so  
3 long as the total annual budget approved for this purpose for the same fiscal year is  
4 not increased.
- 5 • Approves authority funds for individual Partnership Grants, General Authority  
6 Grants and Trust Directed Projects in amounts up to \$50,000 awarded to a specific  
7 recipient.
- 8
- 9 • Recommends to the Trust Authority individual Partnership, General Authority  
10 Grants and Trust Directed Projects in amounts over \$50,000 for each specific  
11 recipient.
- 12 • Approves Changes of Intent for MHTAAR grants involving the carry-over from one  
13 state fiscal year to the next.
- 14

15 ARTICLE IX  
16 CHIEF EXECUTIVE OFFICER  
17

18  
19 Section 1. The Trust Authority shall hire and appoint a Chief Executive Officer as provided  
20 by law.

21  
22 Section 2. The Chief Executive Officer is responsible for ensuring the staffing, planning,  
23 organizing, coordinating, and directing all activities necessary to fulfill the  
24 powers, duties, and purpose of the Trust Authority.

25  
26 Section 3. The Trust Authority will evaluate the performance of the Chief Executive Officer  
27 after the first six months of employment. Thereafter, the Chief Executive Officer's  
28 performance shall be evaluated annually by the Executive Committee.

29  
30 Section 4. Termination of employment of the Chief Executive Officer is by simple majority of  
31 the seven trustees.

32  
33 Section 5. Authorizes disposition of assets with an annual lease rental of \$50,000 or less  
34 and/or total sale revenues of \$100,000 or less.

35  
36 Section 6. Designates funds for contracts or grants in amounts up to \$50,000 each to a  
37 specific recipient so long as the Focus Area project or bundle is within the scope  
38 and amount previously approved by the Trust Authority but had not already been  
39 designated to a specific agency.

40  
41 Section 7. Approves authority grants in amounts up to \$10,000 for purposes that are  
42 allowed under AS 47.30.056 totaling not more than the total approved for this  
43 purpose annually by the Trust Authority for Trust Directed Projects.

44  
45 Section 8. Executes transactions previously approved by the Trust Authority.

46  
47 Section 9. The Chief Executive Officer will provide fiscal oversight of the Trust Land Office  
48 on behalf of The Trust Authority.

1  
2  
3 ARTICLE X  
4 PARLIAMENTARY AUTHORITY  
5

6 Unless otherwise provided by law or these Bylaws, the Trust Authority's procedures  
7 shall be governed by Robert's Rules of Order Newly Revised.  
8

9  
10 ARTICLE XI  
11 ETHICS  
12

13 Section 1. Trust Authority members are required to comply with AS 39.52.010 -39.52.960,  
14 the Alaska Executive Branch Ethics Act.  
15

16 Section 2. In addition to complying with the requirements of the Alaska Executive Branch  
17 Ethics Act, Trust Authority members shall refrain from influencing or attempting  
18 to influence their fellow Trust Authority members, or the Trust Authority's staff, to  
19 take any official action or make any recommendation for official action with  
20 respect to the state's funding, direct or indirect, of an organization with which  
21 they are associated.  
22

23 Section 3. Trust Authority members are required to comply with the Conflict of Interest  
24 Declaration as stipulated in the Alaska Executive Branch Ethics Acts.  
25

26  
27 ARTICLE XII  
28 AMENDMENT OF BYLAWS  
29

30 These Bylaws may be amended at any regular or special meeting of the Trust  
31 Authority by a two-thirds vote of Trust Authority members provided that written notice and  
32 copies of the proposed amendment have been submitted to the members 30 days prior to  
33 the meeting or by unanimous vote without notice.  
34

# **Planning Committee Report**

## MEMO

**To:** Mary Jane Michael, Planning Committee Chair  
**From:** Michael Baldwin, Evaluation & Planning Officer  
**Thru:** Jeff Jesse, Chief Executive Officer  
**Date:** August 26, 2016  
**Re:** Planning Committee Report

There have been three Planning Committee meetings since the last board report on May 4<sup>th</sup>, 2016. The meetings occurred on June 15, July 26, and August 9<sup>th</sup> and 10<sup>th</sup>, 2016.

While there have been a variety of agenda item topics across the meetings, there have been three main themes connecting all meetings: Medicaid and criminal justice reform and planning for a changing fiscal climate to ensure a comprehensive mental health program, and FY18/19 budget planning.

The specific agenda topics are listed below for each planning meeting.

**June 15, 2016** – Trustees present: Mary Jane Michael, Paula Easley, Laraine Derr, Larry Norene, Carlton Smith, and Russ Webb.

The agenda topics were:

- An update on the current thinking about planning for the Comprehensive Mental Health Program.
- A proposal for a new approach to the Trust's workforce development activities and initiatives.
- A review and proposal for a different approach to the Trust's Pre-Development Program partnership.
- A brief check-in and review of FY16 Capital Project related partnerships.

**July 26, 2016** – Trustees present: Mary Jane Michael, Paula Easley, Laraine Derr (via telephone), Larry Norene, Carlton Smith, and Russ Webb.

The agenda topics were:

- An update from the CEO on key activities or initiatives of note.
- A discussion and report on the status of the Denardo and Fahrenkamp properties in Fairbanks, and potential for occupancy.
- A status report on the Trust-Municipality of Anchorage Housing and Homelessness MOU project.
- A status review and presentation of organizational assessment results of the Beneficiary Projects Initiative peer organizations. There was brief discussion about the need for potential replacement facility or relocation of the Alaska Consumer Mental Health Web.

**August 9<sup>th</sup> & 10<sup>th</sup>, 2016** – Trustees present 8/9/16: Mary Jane Michael, Paula Easley, Laraine Derr, Larry Norene, Jerome Selby, and Russ Webb. Trustees present 8/10/16: Mary Jane Michael, Paula Easley, Laraine Derr, Larry Norene, Jerome Selby, Carlton Smith and Russ Webb.

The agenda topics were:

- An update from the CEO on key activities or initiatives of note.
- A criminal justice reform update focused on invited presentations about SB91, and the activities of Alaska Criminal Justice Commission's Behavioral Health workgroup.
- A Medicaid reform update focused on invited presentations from the Department of Health and Social Services, and the Division of Senior and Disabilities Services on the 1915 i/k/c projects.
- An invited presentation and discussion about reforms, 1115 waivers and ASOs with Trust contractors Charley Curie and Stephenie Colston.
- An overview of the FY18 and FY19 Trust budget framework and stakeholder process to develop funding recommendations for Trustees, and a review of the proposed non-focus area and focus area budget allocations.

The next Planning Committee meeting is scheduled for **Thursday, October 20<sup>th</sup>, 2016**.

## MEMO

**To:** Board of Trustees  
**From:** Amanda Lofgren, Program Officer  
**Thru:** Jeff Jessee, Chief Executive Officer  
**Date:** September 7, 2016  
**Re:** Medical Appliances and Assistive Technology Budget Line Item

At the August planning committee meeting, trustees reviewed the proposed FY18/19 budget. During this review, a request was made to include a \$150,000 MHTAAR placeholder for “Medical Appliances and Assistive Technology.” This line item was previously funded as a capital appropriation for the SensAbility program that purchased assistive technology for beneficiaries who experience sensory impairments such as hearing and visual impairments.

Tapping the potential of assistive technology is widely viewed as a key opportunity for Alaska to improve the quality of life for beneficiaries while also reducing the overall cost of care. Assistive technology is part of a spectrum of health technologies (environmental modifications, assistive technology, remote monitoring, tele-health equipment, etc.). Health technologies have the most impact when they are coordinated with an individual’s care team and included as part of his or her plan of care, service plan, independent living plan, transition plan or treatment plan to ensure alignment with person centered goals. When integrated in this manner, health technology is used to realize specific desired improvements and treatment or service outcomes are measured.

As part of DHSS’s Medicaid reform efforts and budget reduction strategies, DHSS recently convened a stakeholder workgroup to explore the question of how best to increase access and integrate health technologies into the system of care. The product of the health technology work group will include specific recommendations for systematically leveraging assistive and other health technologies to improve the quality and lower the cost of care.

Staff anticipate that a request for seed funding to propel the state’s approach in this arena will stem from this group’s analysis. Through follow-up discussion, the advisory board executive directors and staff agreed that it may be more beneficial to consolidate, and coordinate existing resources in addition to creating system wide policy changes to advance access to technology for beneficiaries. These resources may include:

- Trust Mini-grants
- Flexible special needs housing
- Home modification programs
- Future Medicaid services
- Independent Living Centers discretionary funds
- Nursing Home Transition Program
- Assisted Living Home transition and institutional diversion program

As such, staff do not do recommend allocating funding for a capital increment for Medical Appliances and Assistive Technology budget item at this time.

# **Resource Management Committee Report**

# Memorandum



**To:** Larry Norene, Chair  
Resource Management Committee

**Date:** September 7, 2016

**From:** Michelle Steelman, Executive Assistant

*ms*

**Subject:** August 11, 2016 - Resource Management Committee Summary

---

**Board Approval:** The following action requiring full board of trustee concurrence occurred at the August 11, 2016 RMC meeting:

**Item 2 - FY18 Operating Budget:** The Trust Land Office (TLO) is requesting approval of the FY18 Operating Budget from the board of trustees.

**Recommended Motion:** "The Resource Management Committee recommends that the Alaska Mental Health Trust Authority board of trustees approve the Trust Land Office operating budget for FY18 in the amount of \$4,473,600."

cc: Board of Trustees, Alaska Mental Health Trust  
Jeff Jessee, CEO, Alaska Mental Health Trust Authority  
Steve Williams and Kevin Buckland, Alaska Mental Health Trust Authority  
John S. Morrison, Executive Director, Trust Land Office  
Wyn Menefee, Deputy Director, Trust Land Office

# **FY17 Small Projects Approvals**

## **July 2016**

## MEMO

**To:** Russ Webb, Chairman, Board of Trustees  
**Date:** September 7, 2016  
**Re:** FY17 July Small Project Approval  
**Fiscal Year:** 2017  
**Amount:** \$70,350  
**Grantee:** Multiple Small Project Grantees (attached)  
**Project Title:** FY17 July Small Projects

### **REQUESTED MOTION:**

*Approve the recommended FY17 small projects from the July application period in the amount of \$70,350.*

### **PROJECT DESCRIPTION**

The Trust, in accordance with its mission to improve the lives and circumstances of beneficiaries, awards one-time small project grants of up to \$10,000 to create innovative new program ideas, substantially improve and supplement existing activities, or significantly increase the quality of ongoing projects. The small project grants are available three times a year, July, November, and March.

For the July 2016 application period, the Trust received 17 applications totaling \$147,407. A review committee comprised of Trust staff, with input from the statutory advisory boards met on August 12, 2016 to review the applications and make recommendations to the full Board of Trustees.

Attached is a spreadsheet listing the review committee's recommendations to approve \$70,350 for 8 small project grants.

Attachment: Small Project PEC Recommendations, August 12, 2016.

PEC recommends Trustees approve							
ID	Organization	Title	Brief Description	Request Amount	Location	PEC Recommendation	PEC Comments
7171	Kawerak, Inc.	Kawerak Katirvik Cultural Center	The 20 tribes of the Bering Strait Region all struggle to keep their cultures alive without cultural centers. The tribal non-profit will open the region's first Alaska Native museum and cultural center in 2016 and this grant will help to develop a culturally and artistically meaningful center for the region. Sharing cultural knowledge promotes wellness for at-risk youth. Validating and strengthening cultural identity has been found to be the leading protective factor for mental health in Alaska Native youth.	\$10,000.00	Nome	Recommend approval, \$10,000.00	<i>A culturally appropriate prevention project that targets at-risk youth in multiple communities in rural Alaska. Trust funds will match the Rasmuson Foundation and other corporate sponsors.</i>
7418	Lahaf Inc.	Beans Cafe Creative Intervention Program	The Anchorage Artist Co-op in partnership with Beans Cafe will host a 6 week creative intervention initiative that provides the clients of Beans a platform of self-expression and self-healing while positively impacting the conditions of the campus through collaborative mural projects. Clients will learn the process of preparation, planning, design, application and how to translate thought into art. Through this process, participants will be encouraged to visualize and create the thoughts they may not be able to articulate verbally. Members of the co-op will also provide learning resources and training for those that would like to pursue their craft in a professional capacity with self-sustaining tools.	\$10,000.00	Anchorage	Recommend partial approval, \$5,500.00	<i>This project is an innovative opportunity to connect Trust beneficiaries at Beans Cafe with the local arts community. This collaboration will both provide a creative therapeutic environment and generate aesthetic campus improvements. Partial funding for this will be for the requested supplies.</i>
7420	Miller House School- Juneau School District	Effective Seating	This grant will purchase ergonomic seating for children receiving behavioral supports and residential treatment from Juneau Youth Services while also being served by the Juneau School District. Ergonomic accommodations have been shown to improve the students' ability to focus and remain seated for extended amounts of time during class and in their mental health/substance abuse support groups.	\$10,000.00	Juneau	Recommend approval, \$10,000.00	<i>This project will have a direct positive impact on young Trust beneficiaries by providing ergonomic seating that has been proven to improve their attention and focus. This seating will be used both in their classrooms and in support group settings.</i>
7421	S T A R Inc. A/K/N Standing Together Against Rape	Violence Prevention, Art Therapy and EMDR Therapy	This funding will help STAR to enhance their support groups and trauma therapy to include additional eye movement desensitization and reprocessing (EMDR) and art therapies, and to present Green Dot Bystander training to Trust Beneficiaries. STAR serves individuals who have suffered sexual trauma. Most are living with features of post-traumatic stress disorder (PTSD), depression, phobias, panic attacks and anxiety, recurrent and intrusive thoughts, distressing dreams, flashbacks, and intense physiological distress at the exposure to cues that symbolize or resemble an aspect of the traumatic event(s).	\$10,000.00	Anchorage	Recommend partial approval, \$5,000.00	<i>This project supports trauma therapies for Trust beneficiaries who have experienced domestic violence.</i>
7422	Anchorage Remade	"Dreams re:MADE"	Anchorage re:MADE is a 8,000 sq ft. non-profit store that re-purposes and renews donated items for resale with 100% volunteer efforts. This pilot project, "Dreams re:MADE", will give Trust beneficiaries hope, help them dream, evaluate their gifts and abilities, teach new employment skills, problem solve and empower them to earn extra money by re-purposing a donated item or something that has been rescued from the landfill.	\$9,850.00	Anchorage	Recommend approval, \$9,850.00	<i>This is a creative pilot project to help Trust beneficiaries develop employment skills and opportunities for meaningful community engagement.</i>
7424	Capital Community Broadcasting, Inc. (KTOO)	Recidivism - Don't Go Back	This request is for a multi-media outreach and engagement project focused on one Alaskan's story of recidivism and reentry through his own words and images. The project will result in a video documentary and companion public radio and web stories which will reach audience across Alaska and beyond on KTOO's various media platforms, including 360 North, Alaska Public Radio, www.ktoo.org and social media.	\$10,000.00	Juneau	Recommend approval, \$10,000.00	<i>A statewide outreach project to educate Alaskans on recidivism and reentry from the perspective of a Trust beneficiary.</i>
7430	Polaris House	Polaris House- A smoke free recovery environment	This request will provide supports to assist Polaris House members to access tobacco cessation medications, support groups and educational opportunities for stopping tobacco use. Polaris House will provide a smoke free environment where there is plenty of peer support to support a smoke free life-style during each weekday and during our varied and numerous social events.	\$10,000.00	Juneau	Recommend approval, \$10,000.00	<i>Tobacco usage is a significant health concern for Trust beneficiaries and has been shown to shorten their lifespan. This project provides a direct benefit, and supports beneficiaries in achieving a healthier lifestyle while still receiving needed services.</i>
7433	Nililchik Traditional Council	Resilient Alaska Youth Program	The purpose of this program is to offer a safe place for at-risk youth to congregate after school where they can be part of team building exercises and activities in order to increase youth resiliency, while decreasing teen alcohol, drug and tobacco abuse, as well as suicide through educational panels and discussions. The youth in Nililchik currently don't have an outlet for artistic expression, so this program will allow teens to discover their inner creative genius with project-based activities that will also touch on Alaskan cultures and traditions.	\$10,000.00	Nililchik	Recommend approval, \$10,000.00	<i>This prevention project targets at-risk youth to increase resiliency through artistic expression and meaningful community engagement, and a safe place for after school activities.</i>

Total recommended to be approved

\$70,350.00

## PEC recommends Trustees decline

<u>ID</u>	<u>Organization</u>	<u>Title</u>	<u>Brief Description</u>	<u>Request Amount</u>	<u>Location</u>	<u>PEC Recommendation</u>	<u>PEC Comments</u>
7419	Alaska Community Integrity	Recovery Community and Local Currency Creation	This project will introduce the concept of a recovery cooperative/community to local consumers of homeless services. It will seek individual participants willing to create a cooperative. The cooperative would then share in creating a local currency where the cooperative members can acknowledge their individual debt without the service provider feeling the need to immediately redeem or cash-in that debt. It is expected the current providers of services to the homeless and those in recovery in the broader sense would then become willing participants in a local currency, perhaps to the point of administering the issuance and redemption of that currency.	\$4,300.00	Soldotna	Recommend Decline	<i>Although innovative, this request lacks community support and concrete deliverables.</i>
7423	Anchorage Neighborhood Health Center	Expanded Mental Health Services in Primary Care	The goal of this project is to expand the range of behavioral health clinical modalities provided by ANHC. It will provide access to psychological testing, specialty and innovative treatments like Eye Movement Desensitization and Reprocessing (EMDR). EMDR is a treatment approach which has been empirically validated in over 24 randomized studies of trauma victims. It is also planned to develop a journal helping our patients integrate into their life the skills they acquired while in treatment.	\$10,000.00	Anchorage	Recommend Decline	<i>This request is for core program operating funding which is not appropriate through the small project program. The proposed expansion does not fit with the primary care/behavioral health integration model.</i>
7425	Alaska State Association For Guardianship And Advocacy	ASAGA Interactive Website	The Alaska State Association for Guardianship and Advocacy recognizes the need for both statewide training and support for private, non professional guardians and conservators. ASAGA is creating a website that will allow for trainings to be posted, as well as an interactive forum to post questions and both gain and provide support to fellow family guardian and conservators while being facilitated by professionals.	\$4,320.00	Anchorage	Recommend Decline	<i>Not appropriate for small project funding. This request will be forwarded to the Trust program team for additional programmatic review.</i>
7426	REACH	Outsider Art Fair Exhibit	The Canvas Art Studio and Gallery would like to explore exhibition at the Outsider Art Fair as an avenue for expanding arts employment opportunities and exposure for artists who experience disabilities. The Outsider Art Fair exhibits work of untrained artists in New York City. The Canvas would like to explore this avenue by attending, exhibiting the work of 5-6 artists with disabilities currently exhibiting at the Canvas, and creating promotional materials for the work that we do and the artists we support.	\$8,000.00	Juneau	Recommend Decline	<i>Not appropriate for small project funding. Requesting funds to support exhibiting and marketing artwork out of state.</i>
7427	Nordic Skiing Association of Anchorage	Healthy and Active Anchorage All Year Long	Through trails, programs and events, the Nordic Skiing Association of Anchorage ensures Anchorage is active, healthy and positive through movement and activity all year long. NSAA will provide winter recreation opportunities that are accessible and affordable to all, especially Anchorage's youth, instilling a love for healthy living and making Anchorage one of the best places to live.	\$10,000.00	Anchorage	Recommend Decline	<i>This project is not specifically targeted at Trust beneficiaries.</i>
7428	First Christian Methodist Episcopal Church	Steps2Success	This grant will give youth and their families the opportunity to create strategies and delivery models to address transition issues based on the needs of the families. Parents are aware that their children will need supports continually throughout their lives, and are asking for assistance in navigating the service systems, especially during times of transition. Additionally, an increasing number of youth statewide are entering transition ages, needing post-secondary services, housing, employment, financial support, social opportunities, and community supports.	\$10,000.00	Anchorage	Recommend Decline	<i>This is for ongoing operating expenses, which are not funded through the small project program.</i>
7429	Polaris House	Social Services Improvement Project	The goal of this project is to stimulate interest and participation of club members in normal community social events and activities. i.e. Holiday celebrations, Tribal ceremonies, etc.	\$3,500.00	Juneau	Recommend Decline	<i>The PEC recommended another Polaris House grant this funding cycle, and the Trust will only fund one project per organization.</i>
7431	Access Alaska Inc.	Youth Summer Project	This project will provide job skills development, training and on the job skill training for 10 youths who experience disabilities to work 120 hours of paid employment.	\$10,000.00	Anchorage	Recommend Decline	<i>Not appropriate for small project funding. It is requesting funds to hire a staff person to provide core operating services.</i>
7432	Mat Su Youth Housing (MY House)	Abby's Broken Butterfly Project	Abby is a survivor of a hemispherectomy and has overcome challenges and created a local movement toward awareness about brain disorders and rehabilitation in the aftermath of surgery. She is being recognized Worldwide for her leadership and advocacy for independence. She would like to attend a National conference to gain education and connections, and launch a podcast and a monthly group that can be attended by Skype for those in recovery from brain disorders. She has several key elements donated already, and support from Emmy Award Winning Cinematographer Chas St. George for the filming and broadcasting.	\$7,437.00	Wasilla	Recommend Decline	<i>This request is targeted at only one beneficiary. Will refer to the mini-grant program which is more appropriate for this type of project.</i>

\$67,557.00

# **Finance Committee**

	<b>Item Type</b>	<b>Proposal</b>	<b>Organization</b>	<b>Page #</b>	<b>Proposed Motion</b>
<b>1</b>	Operating Budget - TLO	FY18 Operating Budget	Trust Land Office	<b>77</b>	Recommend the full board of trustees approve the Trust Land Office operating budget for FY18 in the amount of \$4,473,600
<b>2</b>	Operating Budget - Trust	FY18 Operating Budget	The Trust	<b>79</b>	Recommend the full board of trustees approve the Trust operating budget for FY18 in the amount of \$3,899,200
<b>Finance Report - Approved at the August 11, 2016 Finance Committee Meeting</b>					<b>(NO ACTION REQUIRED)</b>
	Partnership	Haven House Transitional Funding	Haven House, Inc.		Approved a \$50,000 FY17 partnership grant to Haven House, Inc. for the Haven House Transitional Funding project.



**To:** Carlton Smith, Chair  
Finance Committee  
**From:** Sarah Morrison  
**Date:** 8/11/2016  
**Re:** FY18 Operating Budget – Item 2  
**Fiscal Year:** 2017  
**Amount:** \$4,473,600

Approval

**Proposed Finance Motion:**

*“The Finance Committee recommends that the Alaska Mental Health Trust Authority board of trustees approve the Trust Land Office operating budget for FY18 in the amount of \$4,473,600.”*

**Background:**

The Trust Land Office (TLO) seeks the recommendation of the Finance Committee for the FY18 operating budget. Please see Exhibit 1 for a breakout of the proposed line items.

**Exhibit(s):**

Exhibit 1 - FY18 Trust Land Office Budget Proposal

	A	B	C	D	E	F
1	<b>TRUST LAND OFFICE OPERATING BUDGET</b>					
2	FY18 Proposal*					
3	*Budget numbers are rounded					
4						
5	<b>Expenditures</b>	<b>FY16 YTD 7-26-2016 <sup>1</sup></b>	<b>FY17 Original</b>	<b>FY17 Mgmt Plan</b>	<b>FY18 Proposal</b>	<b>17-18 %</b>
6	Personal Services <sup>2</sup>	2,457,829	2,783,800	2,884,930	2,954,000	2.4%
7	Travel	90,141	143,000	143,000	143,000	0.0%
8	Services <sup>2,3</sup>	1,278,847	1,414,700	1,334,970	1,320,600	-1.1%
9	Supplies	51,967	56,000	56,000	56,000	0.0%
10	Capital Outlay					0.00%
11	<b>Total</b>	<b>3,878,784</b>	<b>4,397,500</b>	<b>4,418,900</b>	<b>4,473,600</b>	<b>1.24%</b>
12						
13						
14	<b>Revenue</b>	<b>FY16 YTD 6-30-16 <sup>1</sup></b>	<b>FY17 Mgmt Plan</b>	<b>FY18 Proposal</b>	<b>17-18 %</b>	
15	Principal	5,126,422	5,038,000	4,973,000	-1.29%	
16	Income	4,728,735	4,209,000	4,209,900	0.02%	
17	<b>Total</b>	<b>9,855,157</b>	<b>9,247,000</b>	<b>9,182,900</b>	<b>-0.69%</b>	
18						
19	<b>FY18 TRUSTEE REQUEST:</b>					
20	<b>\$4,473,600</b>					
21						
22						
23						
24						
25						
26	Personal Services					
27	FY18 Merit Increase	26,500				
28	Benefits/Other Increases	42,600				
29	Total Increase	69,100				
30						
31						
32	1)Not final - will change during reappropriation					
33	2)FY17 Mgmt Plan includes a line item transfer from Services to Personal Services to fully fund the new PRI position					
34	3)An OMB increment of \$21,400 was added to the FY17 budget for expected health insurance cost increases that have not occurred. The increment was unable to be removed. The funds will be restricted and not spent.					

## MEMO

**To:** Carlton Smith, Finance Committee Chair  
**From:** Jeff Jessee, Chief Executive Officer  
Steve Williams, Chief Operating Officer  
**Date:** August 11, 2016  
**Re:** FY 18 MHT Admin Operating Budget Request

### **REQUESTED MOTION:**

*The Finance Committee recommend that the full board of trustees approve the FY18 Trust Authority MHT Admin budget of \$3,899,200.*

### **BACKGROUND**

Staff have prepared the FY18 Trust Authority office operating budget and requests the Finance Committee recommend the full board of trustees approve the MHT Admin funds as detailed in the attached document.

The budget does not include any provision for Cost of Living Allowances (COLA) for FY18, nor does it include any increase for health insurance costs under the expectation that no increase is likely to occur. If in the event the executive branch negotiates labor contracts and the same increase is extended to exempt staff and the Legislature agrees then Trustees will be requested to ratify the increases.

	A	B	D	F	G
1	<b>MENTAL HEALTH TRUST AUTHORITY</b>				
2	<b>OPERATING BUDGET</b>				
3					
4					
5	<b>FY16 Actual + Projected as of July 8, 2016</b>		<b>FY17 Mgmt Plan</b>		<b>FY18 Proposal</b>
6	<b>EXPENDITURES</b>				<b>17-18 %age</b>
6	1000 Personal Services	2,361,100	2,564,658	2,704,635	5.46%
7	Personal Services	2,305,056	2,518,702	2,645,315	
8	cell phones	3,744	3,456	4,320	
9	Honorarium	52,300	42,500	55,000	
10	2000 Travel	75,837	115,000	127,000	10.43%
11	3000 Services	829,176	921,342	1,000,565	8.60%
12	4000 Supplies	77,401	73,000	67,000	-8.22%
13	5000 Equipment	-	88,000	-	
14	<b>Total</b>	<b>3,343,514</b>	<b>3,762,000</b>	<b>3,899,200</b>	<b>3.65%</b>
15					
16					
17	<b>FY16 Mgmt Plan</b>		<b>FY17 Mgmt Plan</b>		<b>FY18 Request</b>
18	<b>FUNDING SOURCE</b>				
18	MHT Admin	3,468,200	3,762,000	3,899,200	
19					
20					
21					
22					
23	FY2018 Request to TRUSTEES:				
24	<b><u>\$3,899,200</u></b>				
25					
26					
27					
28					
29					
30					

# **Alaska Commission on Aging**

## Presentation to the Alaska Mental Health Trust Authority



Alaska Commission on Aging  
September 7, 2016

"And in the end, it's not the years in your life. It's the life in your years that counts." Edward J. Stieglitz

## Presentation Overview

- Trends in demographic and health risk indicators for Senior Trust Beneficiaries and Older Alaskans
- Participation rates in core senior programs and possible budget impacts in SFY2018
- Key policy and legislative recommendations for Senior Trust Beneficiaries and Vulnerable Older Alaskans
- Alaska Commission on Aging update
- Wrap-Up with remaining questions and discussion

# Senior Trends

Demographic projections and changes in health indicators over time

HELLO  
my name is

**Baby Boomer**

## Senior Demographic Trends

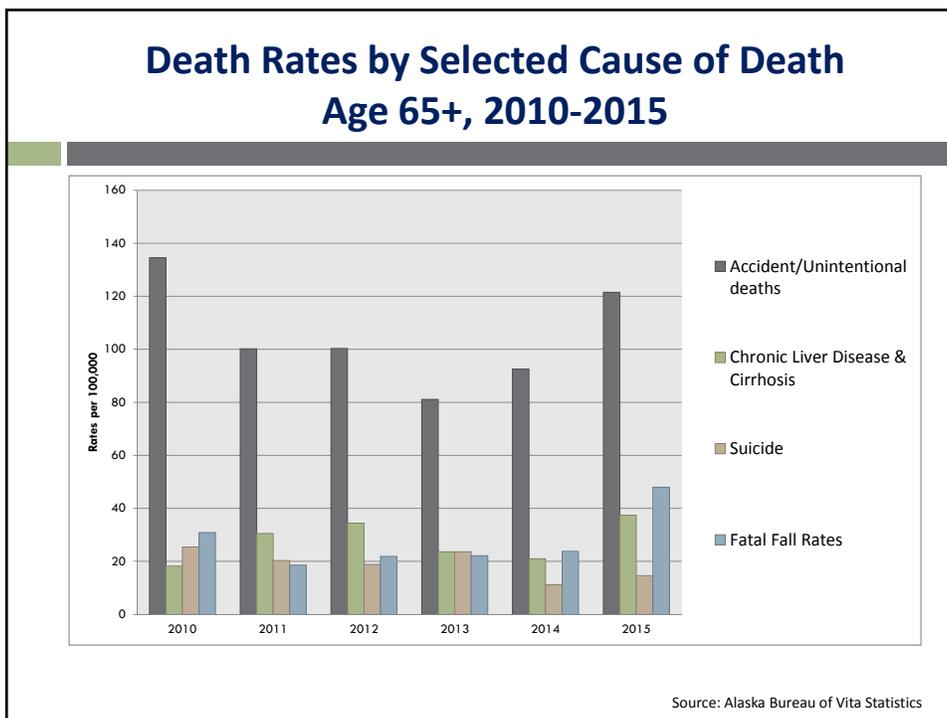
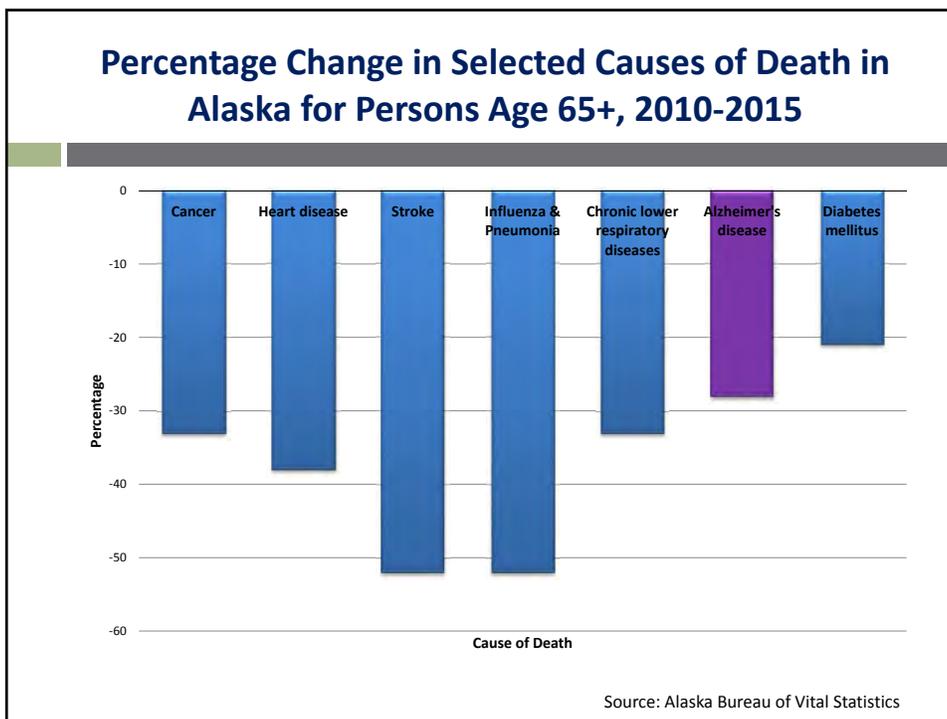
### Projections of Alaskans, Age 60+ and 85+

Year	60+ Population	85+ Population
2012	100,000	10,000
2017	125,000	15,000
2022	150,000	20,000
2027	165,000	25,000
2032	170,000	28,000
2037	165,000	30,000
2042	150,000	30,000

### Projected Number of Alaskans with Alzheimer's Disease

Year	65-74	75-84	85+
2012	2,000	2,000	1,000
2017	2,000	3,000	2,000
2022	2,000	4,000	4,000
2027	2,000	5,000	6,000
2032	2,000	6,000	8,000
2037	2,000	6,000	10,000
2042	2,000	6,000	14,000

Source: Alaska DOLWD Population Estimates and Projections; Alzheimer's Facts and Figures 2016



## Programs serving Senior Trust Beneficiaries and other vulnerable Alaskans

Participation rates for 2010-2015 & possible budget impacts in FY2018

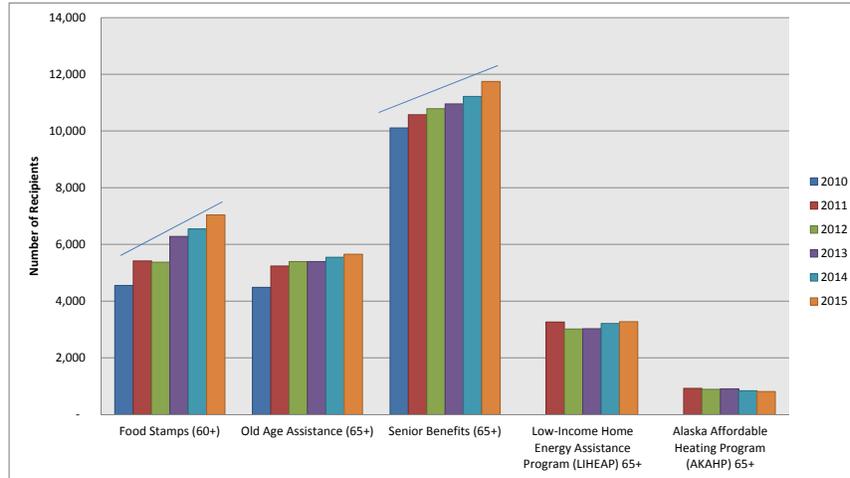


### Count and Percentage of Seniors Participating in Select Programs Providing Financial Assistance, Comparison of FY2010 & FY2015

Program	Numbers of Seniors Served and (% of Population), FY2010	Numbers of Seniors Served and (% of Population), FY2015	Increase / Decrease
Senior Benefits	10,109 (18.0%)	11,746 (15.7%)	+1,637 (-2.3%)
Food Stamps	4,557 (5.0%)	7,042 (5.8%)	+2,485 (+0.8%)
Old Age Assistance	4,485 (8.2%)	5,657 (7.6%)	+1,172 (-0.6%)
Low Income Home Energy Assistance Program (LIHEAP)	2,871 (5.2%)	3,031 (5.1%)	+160 (-0.1%)
Alaska Affordable Heating Program (AKAHP)	776 (1.4%)	815 (1.1%)	+39 (-0.3%)

Source: Division of Public Assistance

### Senior Assistance Program Participation 2010-2015



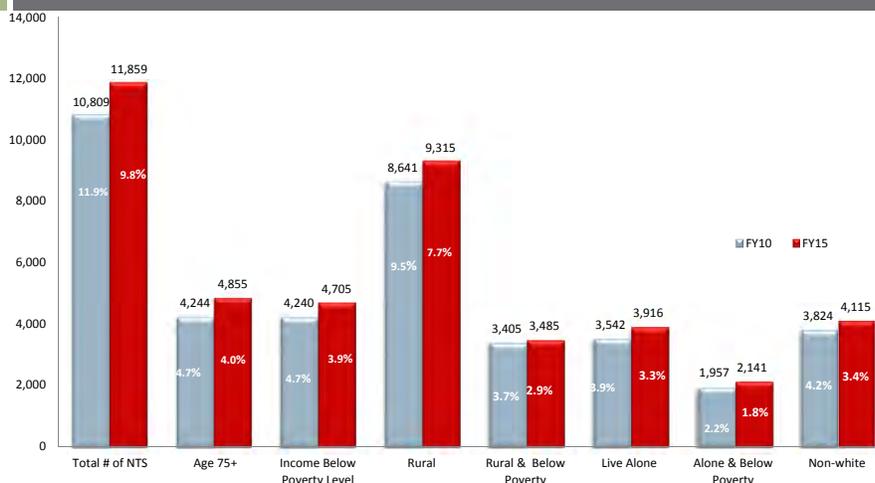
Source: Division of Public Assistance

### Count and Percentage of Seniors Participating in Select Long-Term Support Services, Comparison of FY2011 & FY2015

Program	Numbers of Seniors Served and (Percentage of Population), FY2011	Numbers of Seniors Served and (Percentage of Population), FY2015	Increase / Decrease
Nutrition, Transportation, Support Services, Age 60+	10,654 (10.8%)	11,859 (9.8%)	+1,205 (-1.0%)
Alaskans Living Independently Waiver, Age 65+	1,758 (2.9%)	1,678 (2.2%)	-80 (-0.7%)
Personal Care Services, Age 60+	3,429 (3.5%)	3,496 (2.9%)	+67 (-0.6%)
General Relief, Age 60+	404 (0.41%)	498 (0.41%)	+94 (0% change)
Pioneer Homes	508 (0.86%)	498 (0.67%)	+10 (-.19%)

Source: Division of Senior & Disabilities Services and the Alaska Pioneer Homes

### Nutrition, Transportation, and Supports Recipient Profile, FFY2010 & FFY2015



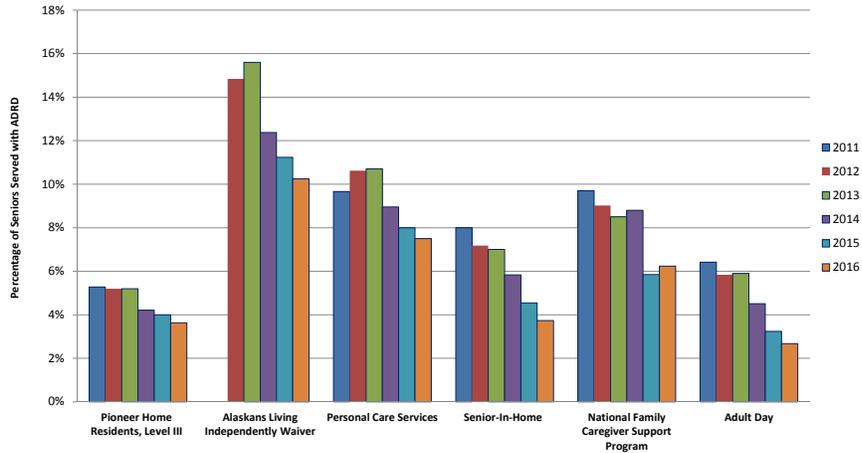
Source: Senior & Disabilities Services SAMS Data

### Count and Percentage of Seniors with Alzheimer’s Disease and Related Dementias Participating in Select Services Comparison of FY2010 & FY2016

Program	Numbers of ADRD Seniors Served and (Percentage of ADRD Population), FY2011	Numbers of ADRD Seniors Served and (Percentage of Population), FY2016	Increase / Decrease
Adult Day	321 (6.4%)	182 (2.7%)	-139 (-3.7%)
Senior In-Home	400 (8%)	254 (3.7%)	-146 (-4.3%)
Family Caregiver Supports	485 (9.7%)	424 (6.2%)	-61 (-3.5%)
Personal Care Services	483 (9.7%)	510 (7.5%)	+27 (-2.2%)
Alaskans Living Independently Waiver	742 (FY2012) (14.9%)	697 (10.3%)	-45 (-4.6%)
Pioneer Homes	261 (5.2%)	247 (3.6%)	-14 (-1.6%)

Source: Division of Senior & Disabilities Services and the Alaska Pioneer Homes

### Continuum of Long-Term Support Services Serving Senior Trust Beneficiaries, FY2011-2016



### Programs Serving Older Alaskans: FY2016-2017 Budget Comparison

Program	FY2016 Budget	Enacted FY2017 Budget	\$ Change FY2016-FY2017
Senior Community Based Grant Services (Senior and Disabilities Services)	<b>\$15,748.8 Total</b> \$9,090.4 UGF \$300.0 MHTAAR \$6,358.4 Federal	<b>\$16,984.0 Total</b> \$9,977.1 UGF \$300.0 MHTAAR \$6,706.9 Federal	<b>+\$1,235.2 Total</b> +\$886.7 UGF \$0 change MHTAAR +\$348.5 Federal
Senior Benefits Payment Program (Public Assistance)	<b>\$20,040.7 Total</b> \$20,036.1 UGF \$4.6 Federal	<b>\$20,029.3 Total</b> \$20,029.3 UGF \$0 Federal	<b>-\$11.4 Total</b> -\$6.8 UGF -\$4.6 Federal
Medicaid Adult Dental (Medicaid Services)	<b>\$15,700.5 Total</b> \$5,765.3 GF/MH \$597.1 UGF \$9,338.1 Federal	<b>\$15,650.3 Total</b> \$2,882.6 UGF \$12,767.6 Federal	<b>-\$50.2 Total</b> -\$2,882.7 GF +\$3,429.5 Federal
Energy Assistance Program (Public Assistance)	<b>\$23,357.9 Total</b> \$9,174.3 UGF \$14,183.6 Federal	<b>\$14,177.3 Total</b> \$0 UGF \$14,177.3 Federal	<b>\$9,180.6 Total</b> -\$9,174.3 -\$6.3 Federal
Medicaid Services (Senior & Disabilities)	<b>\$552,112.8 Total</b> \$265,229.4 GF \$1,068.4 Other \$285,815.0 Federal	<b>\$542,263.3 Total</b> \$251,967.9 GF \$1,068.4 Other \$289,227.0 Federal	<b>-\$9,849.8</b> -\$13,261.5 GF \$0 Change Other +\$3,412.0 Federal

Office of Management & Budget, 2017 DHSS Enacted Budget Component Detail

## Programs Serving Older Alaskans: FY2016-2017 Budget Comparison

Program	FY2016 Budget	Enacted FY2017 Budget	\$ Change FY2016-FY2017
General Relief/Temporary Assisted Living (Senior & Disabilities Services)	<b>\$7,323.9 Total</b> \$7,323.9 GF	<b>\$7,323.9 Total</b> \$7,323.9 GF	<b>\$0 Change</b>
Pioneer Homes (Alaska Pioneer Homes)	<b>\$61,506.4 Total</b> \$34,605.4 UGF \$16,901.4 DGF \$9,368.6 Other \$631.0 Federal	<b>\$60,711.6 Total</b> \$32,292.3 UGF \$17,380.6 DGF \$10,407.7 Other \$631.0 Federal	<b>-\$794.8</b> -\$2,313.1 UGF +\$479.2 DGF +\$1,039.1 Other \$0 Change Federal
Office of Long-Term Care Ombudsman (Department of Revenue, AMHTA)	<b>\$856.6 Total</b> \$454.2 GF/MH 402.4 I/A Receipts	<b>\$859.2 Total</b> \$454.2 GF/MH \$405.0 I/A Receipts	<b>+\$2.6</b> \$0 change GF/MH +\$2.6 I/A Receipts
Senior Citizen Housing Development Program (Alaska Housing Finance Corporation)	<b>\$0 Total</b>	<b>\$3,500.0 Total</b> \$1,750.0 GF \$1,750.0 Other	<b>+\$3,500.0 Total</b> +\$1,750.0 GF +\$1,750.0 Other

Office of Management & Budget, 2017 DHSS Enacted Budget Component Detail

## Take Away Points...

- **Senior Population:** Rapid population growth is expected through 2030 and then slow. Older seniors, age 85+, will increase dramatically during this time frame. For the most part, older Alaskans are healthier than their national counterparts, but are more at risk for behavioral health conditions.
- **Financial Security:** Poverty rates, lower for older Alaskans than U.S. seniors, are increasing slightly for Alaska seniors. Senior demand for public assistance services is growing.
- **Long-Term Support Services for Seniors and those with ADRD:** While programs are gradually serving a larger number of seniors over time, the number and percentage of seniors with dementia *who are receiving services is declining*. This trend could result in the need for higher cost care and reduced quality of life for seniors and their caregivers with unmet needs.
- **Funding for Services:** Funding for senior long-term support services has remained stable for senior grant-funded services but has been markedly reduced for Medicaid-funded services, such as the Alaskans Living Independently waiver and Personal Care Services. State funding for Public Assistance programs is also on the decline.

## Policy & Legislative Recommendations

### For Senior Trust Beneficiaries & Other Vulnerable Alaskans



## Policy & Legislative Recommendations

- **Protect Senior Safety Net**
  - Maintain programs to improve access to health care and appropriate long-term support services
  - Uphold programs that provide financial assistance to those most in need
- **Family Caregiver & Natural Supports**
  - Sustain training, respite, counseling, and other supports
  - Implement Behavioral Risk Factor Surveillance Survey Caregiver Module in 2017
  - Adopt a uniform family caregiver assessment tool to provide person-centered caregiver support and training
- **Services for Senior Trust Beneficiaries with ADRD and other vulnerable older Alaskans**
  - Accelerate exploration of alternative program models to serve persons with dementia in the community
  - Move forward with application of the InterRAI Assessment Tool

## Commission Update

- Passing the Gavel, ACoA Board
- Alaska Commission on Aging Board Meeting



## Introducing ACoA's Chair and Vice Chair

- **David Blacketer**, dedicated to community service and appointed in June 2014, was voted as Chair of the Commission effective July 1, 2016.
- **Marie Darlin**, respected senior advocate, was elected as ACoA's Vice Chair.



ACoA's Board meeting is scheduled for Thursday, September 15. All are welcome!

## Thank you. Questions?



*Grandparents are a delightful blend of laughter, caring deeds, wonderful stories, and love. ~Author Unknown*

National Grandparents' Day, Sunday, September 11, 2016

# **Governor's Council on Disabilities and Special Education**

# Governor's Council on Disabilities and Special Education

September 2016 Board of Trustees Meeting

*Patrick Reinhart, Executive Director*

*Kristin Vandagriff, Planner*



## Some Council News

- New Vice Chair, Maggie Winston
- Kristin Vandagriff, new Planner III
- Autism Ad Hoc Meeting Oct. 4
- Council meeting is Oct 5-6
- Council's 5 Year Plan done has been turned into Administration on Community Living (more later)
- US Senator Dan Sullivan visits Council office on Aug. 26



## Visit with Senator Dan Sullivan



## 2<sup>nd</sup> Annual Disability and Aging Population Summit



The Alaska Disability and Aging  
Coalition Invites You to Attend  
2<sup>nd</sup> Annual Disability and Aging Summit  
October 13 & 14, 2016  
Special Olympics Alaska Sports, Health and  
Wellness Center

## Teddy Bear Picnic

**The Anchorage Teddy Bear Picnic**

- July 23<sup>rd</sup>
- Cuddy Family Park
- Attendance of 2,500
- Part of a larger inclusive playground initiative



Photo credit: Naomi Hodawans

## Developmental Disability Committee Update:

- Waitlist for IDD Waiver; 535 currently waiting
- Partnering with Center for Human Development and Special Olympics
- Commented on Social Security Firearm ban
- Commented on new PCA Regulations
- New assessment tools to replace the ICAP



## Employment & Transportation Committee Update:

- The Business Employment Services Team (BEST)
- The Alaska Association for People Supporting EmploymentFirst (APSE)
- Discovery and Certificate in Employment Services activities
- Project SEARCH Expansion
- Employment First Implementation
- Alaska Disability Benefits 101 website



**Disability Benefits 101**  
working with a disability in Alaska



## Education Committee Update:

- New Chair – David Kohler
- Restraint and seclusion implementation and compliance
- State Systemic Improvement Plan (SSIP) on improving graduation rates
  - Discipline and IDEA
  - Manifestation Determination
  - Suspension & expulsion
  - Disproportionality and
  - Positive Behavior Supports



## Early Intervention Committee Update:

- New chair – Sandra DeHart-Mayor
- Alaska's EI/ILP has moved from OCS to SDS
- Presentation on “Neurorelational Framework”
- Overview of EI/ILP and autism; numbers, screening, assessment tools, interventions, referrals
- Report from a consultant on the referral loop between primary care and ILP



## FASD Workgroup Update:

- FASD Day is 9/9/2016
- Participating in *Addressing Fetal Alcohol Spectrum Disorders in the Justice System*
- Other Health Impairment (OHI) regulation change
  - Has passed through DEED legal
  - Adds FASD of the list of health impairments in OHI regulation
  - A condition can now be diagnosed by a licensed nurse practitioner
  - Alaska is the first state to add FASD to education regulation!



## Autism Workgroup Update:

- Dr Brennan is retiring!
- The state did not receive the autism grant we applied for
- Movement forward on the Project Echo Model
- Development of Family Navigation training
- Coverage of ABA by Medicaid under EPSDT delayed by a year
- Face to face in June, next one is in October



## Medicaid Ad Hoc Committee

- **Provided comment on:**
  - 1915(i) Eligibility and Services draft document
  - SDS IDD Waiver Renewal Application
  - SDS Transition Plan Version 3 to CMS
- **Provided letter of support for SB 74**
- **Received guest presentations from:**
  - Mary James with InterRAI
  - Steve Lutzky with HCBS Strategies
- **Smart Home Technology Sub Group work:**
  - Smart and assistive technology white paper written
  - SimplyHome demonstration given
    - Goal: increase independence and save on long term care costs
    - <http://simply-home.com/index.html>

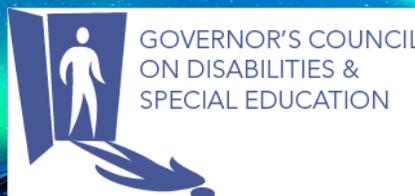


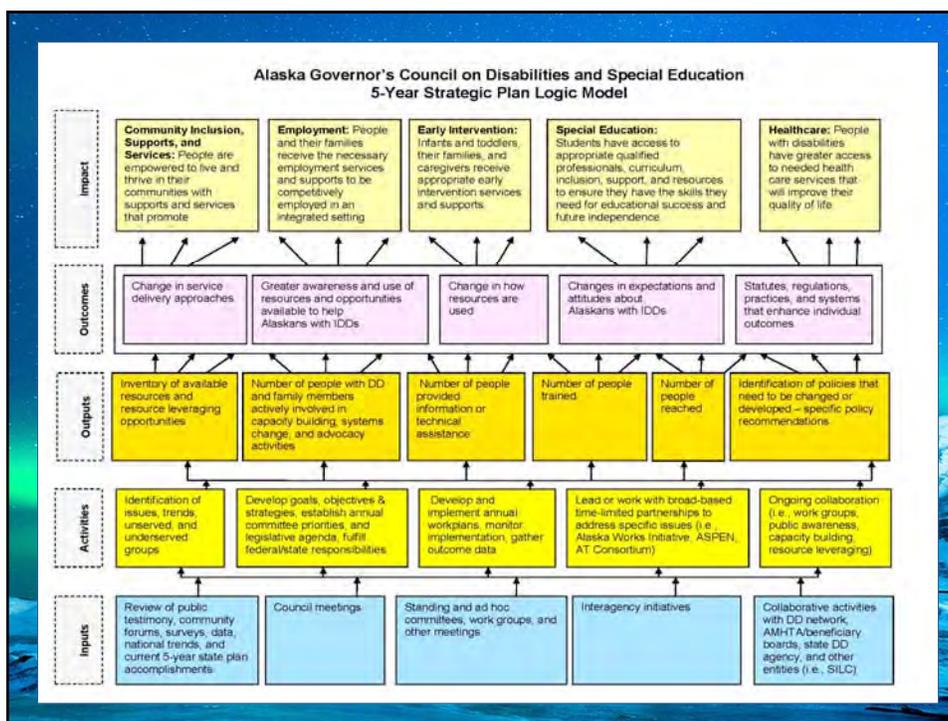
## 5 Year State Plan Highlights

Submitted August 22 with  
FFY 17 & 18 work plans

### 5 Goal Areas

1. Community Inclusion, Supports, and Services
2. Employment
3. Early Intervention
4. Education
5. Healthcare





## 5 Year State Plan Highlights

**Specific objective focus on:**

- Self-Advocacy
- Targeted Disparity Population
  - Neurodevelopmental focus on Autism and FASD
- Planned DD Network Collaboration



**Awaiting review and comments by ACL**

**Public booklet version coming soon!**

## Alaska Mobility Coalition Update

- Board of Directors in charge
- Contract with SILC
- \$1 M in state match funding
- Cadre of Experts for training
- Volunteer Program for Non-Emergency Medical Transportation



## The ABLE Act: Achieving a Better Life Experience

- Alaska ABLE Act Legislation Update:
  - Signed into law by Governor – August 2016
  - GCDSE assisting with next steps with DOR
  - Goal: Late 2016 availability of AK ABLE accounts

National Resource:

<http://www.ablenrc.org/>



## Duramedical ReUse Effort

- No regulations to date, 15 months after HB 161 signed into law!
- Meanwhile, the band is back together and working on:
  1. Pressure on DHHS
  2. Standards for Re Use
  3. Stakeholder meeting in mid November



## Impacts of 2017 Budget

- Community Development Block Grants restored to 2016 levels
- Best Beginnings and early childhood funds were restored
- BASE student allotment cut, then restored, and cut again
- \$26 million in cuts to Medicaid services in SDS

## Concerns for 2018 Budget and Beyond *“Winter is Coming”*



### Keeping a “third” eye on....



- \$13.4 M in Community DD Grants
- Medicaid Reforms = same level and/or better services???
- \$7.4 M Infant Learning Program (ILP) funds
- \$7.3 M General Relief/Assisted Living funding
- Special Ed funding-Districts keep cutting!
- \$247 K ILP training funds

## Questions:



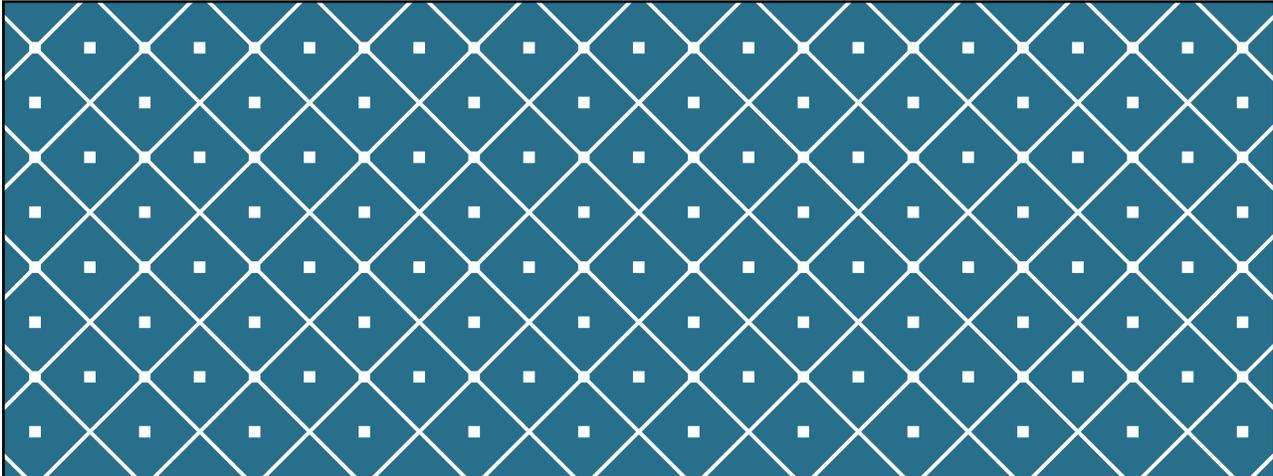
**Patrick Reinhart**  
*Executive Director*

[patrick.reinhart@alaska.gov](mailto:patrick.reinhart@alaska.gov)

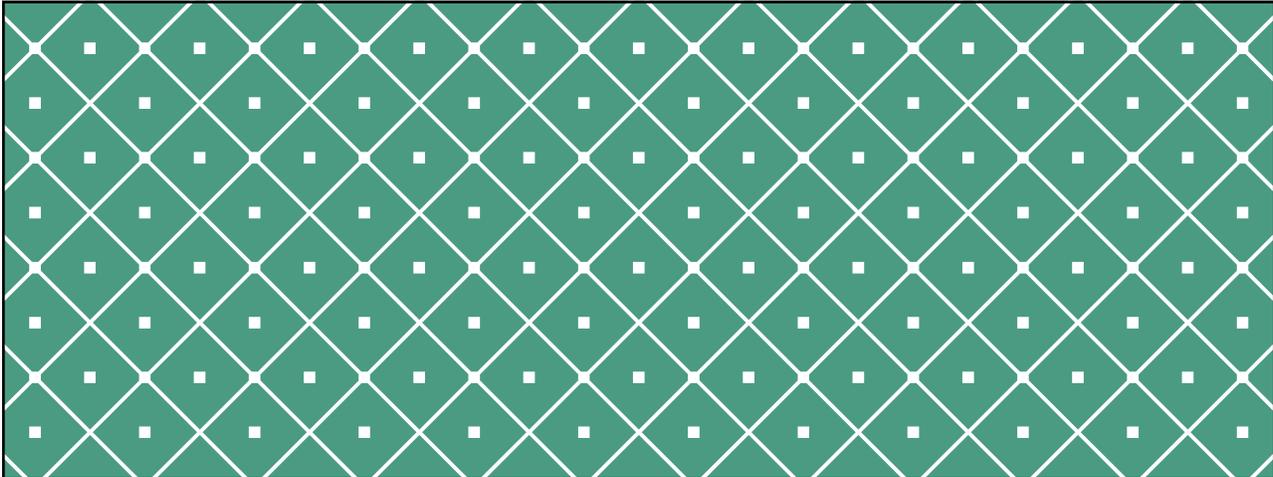
**Kristin Vandagriff**  
*Planner III*

[Kristin.Vandagriff@alaska.gov](mailto:Kristin.Vandagriff@alaska.gov)

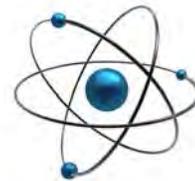
**Advisory Board on  
Alcoholism & Drug  
Abuse /  
Alaska Mental Health  
Board**



FALL, 2016



CORE SERVICES



## STATE-FUNDED CORE SERVICES

Many Alaska Mental Health Trust Authority beneficiaries rely on publicly funded programs to meet their most basic needs:

- Food
- Shelter
- Safety
- Health Care
- Education
- Community Inclusion



## PROGRAMS SUPPORTING BENEFICIARIES' BASIC NEEDS

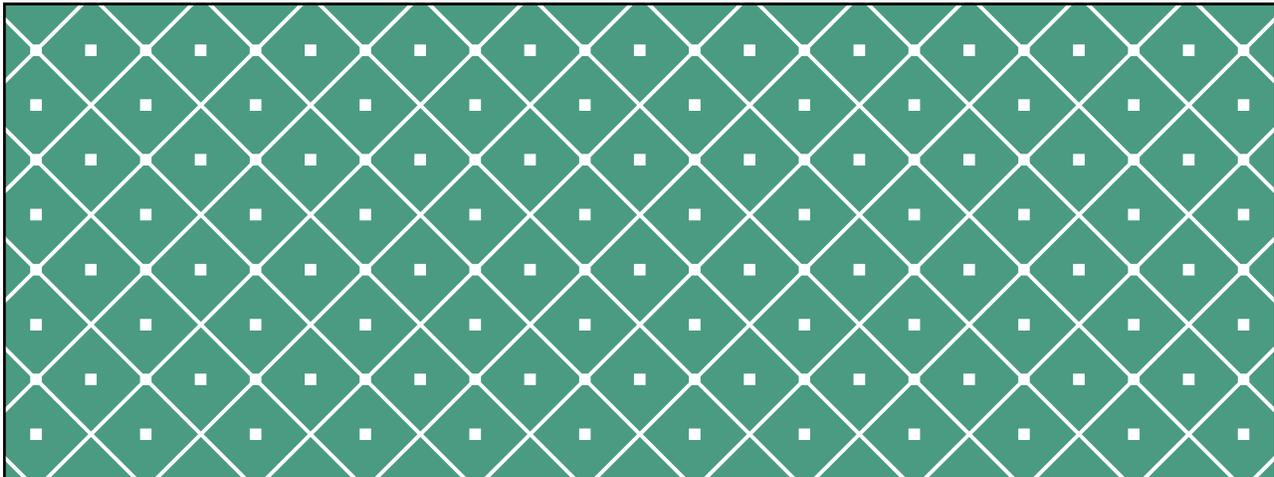
Temporary Assistance for Need Families (TANF)  
 Supplemental Nutrition Assistance Program (SNAP)  
 Women, Infants and Children (WIC)  
 Adult Public Assistance (APA)  
 Medicaid  
 General Fund Health Programs  
 State Employee Health Insurance  
 State Employee Retirement Benefits  
 Pioneer Homes  
 Assisted Living and General Relief

Public Housing  
 Homeless Assistance Program  
 Special Needs Housing  
 Energy and Heating Assistance  
 Base Student Allocation (BSA) for Education  
 Special Education Services  
 Para-Transport and Accessible Transportation  
 State and local law enforcement  
 Village Public Safety Officers  
 Victim's Services



## PROGRAMS SUPPORTING BENEFICIARIES' ACCESS AND INCLUSION IN THE COMMUNITY

Para-Transport and Accessible Transportation  
Peer Support  
Division of Vocational Rehabilitation, Job Centers  
PreK-12 Education  
Special Education  
Post-Secondary Education



## FY17 BUDGET IMPACTS



## CUMULATIVE IMPACT

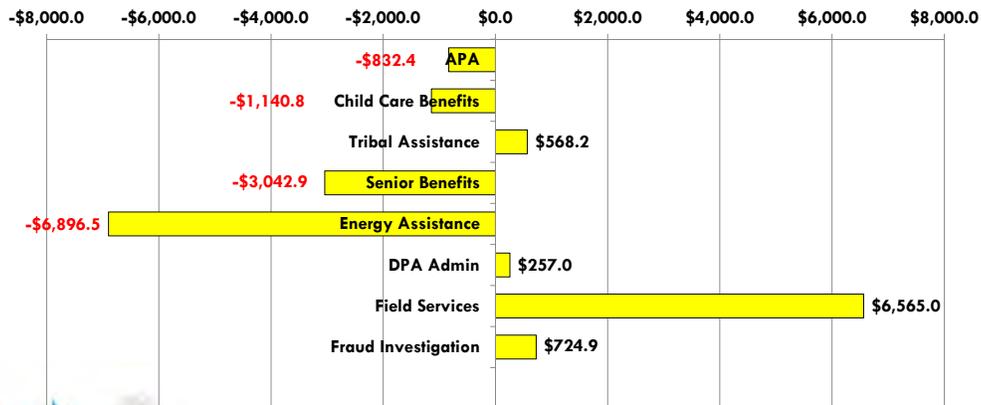
Looking at changes in program budgets compared to the past year does not show the cumulative impact of budget reductions (or increases), nor does it show where implicit and explicit policy shifts have occurred.

Looking at change since FY2013, the peak before the current trough in state revenue and spending, provides a more nuanced picture of how programs serving beneficiaries have fared.



## BASIC NEEDS

Public Assistance Programs, Difference FY13 to FY17 by Category



Source: Legislative Finance, Enacted Budget Reports for FY2013, FY2017

# BASIC NEEDS

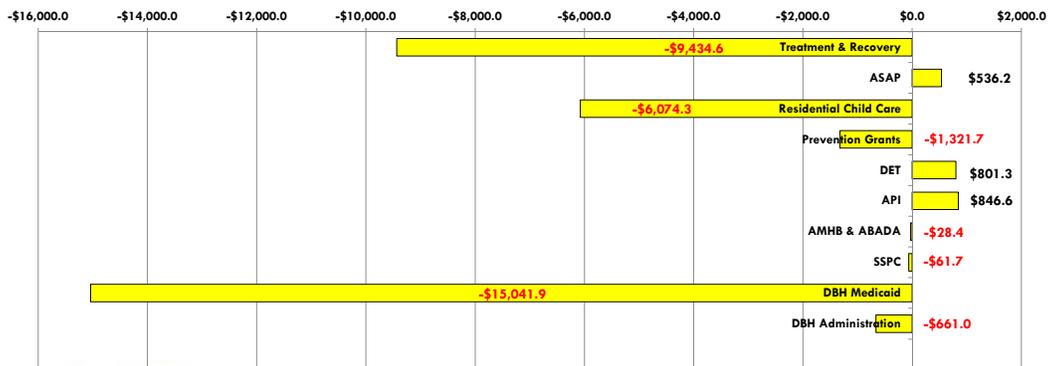
While TANF, SNAP/Food Stamps, and WIC are formula programs (and somewhat insulated from state budget fluctuations), there are public assistance program on which beneficiaries rely that haven't fared as well.

The entire state portion of the heating assistance program was cut in FY17. Reduced demand and reduced cost of heating oil were some of the reasons given for discontinuing the state supplementation of the LIHEAP program. However, community organizations continue to report need for assistance with the costs of heat for needy families, elders, and people with disabilities.



# HEALTH CARE

Behavioral Health Programs, Difference FY13 to FY17 by Category



Source: Legislative Finance, Enacted Budget Reports for FY2013, FY2017

## TREATMENT & RECOVERY GRANTS

Behavioral health treatment and recovery grants were flat funded for many years, despite an attempt in FY2013 to increase funding by \$9 million. Since 2013, these grants have been reduced 12.8%, most dramatically between FY2016 and FY2017. The 8.2% reduction in FY17 is mitigated in part by Medicaid Expansion. The reduction was allocated among grantees by the Division of Behavioral Health with that in mind.

A gradual transition from General Funds to Medicaid, due to Medicaid Expansion and Medicaid Reform, seems to be the accepted plan forward. However, lack of new revenue may force more dramatic reductions in FY2018 than can be mitigated.

It is also important to keep in mind that a certain level of General Funds for grants will be necessary to maintain certain services for beneficiaries which will never be considered “medically necessary” and thereby Medicaid-reimbursable.



## ALCOHOL SAFETY ACTION PROGRAM (ASAP)

ASAP is a key component to the success of SB 91.

ASAP provides substance abuse screening, case management, and monitoring of defendants in misdemeanor drug and alcohol programs. While the program did receive \$30.3 UGF in the fiscal notes attached to SB 91, the program may not be adequately resourced to meet the demand created by the new reliance on pre-trial and probation services to reduce recidivism and corrections costs.



## RESIDENTIAL CHILD CARE

Residential Child Care is the program that supports residential treatment programs for children and youth. These funds also support therapeutic emergency shelter and crisis programs. In FY15, 618 youth were served by these providers.

This is a primarily General Fund program (78% GF or GF/MH), which makes its future less certain in FY2018 and beyond.



## PREVENTION

Behavioral health prevention funding, which is about 2/3 state funding and 1/3 federal funding, has been relatively stable since FY2013. This reflects policymaker support for evidence-based prevention programs – especially those related to suicide, substance abuse, and interpersonal violence.

The reduction in funding since FY2013 is due in part to the fact that the Division of Behavioral Health had been a recipient of the federal Garrett Lee Smith Youth Suicide Prevention Grant for many years. It was not awarded a GLS grant the past year.



## DESIGNATED EVALUATION AND TREATMENT, API

The state psychiatric hospital has been relatively flat funded since FY2013. Designated Evaluation and Treatment (DET) funding supports mental health units in community hospitals. There are currently units in Anchorage, Fairbanks, and Juneau.

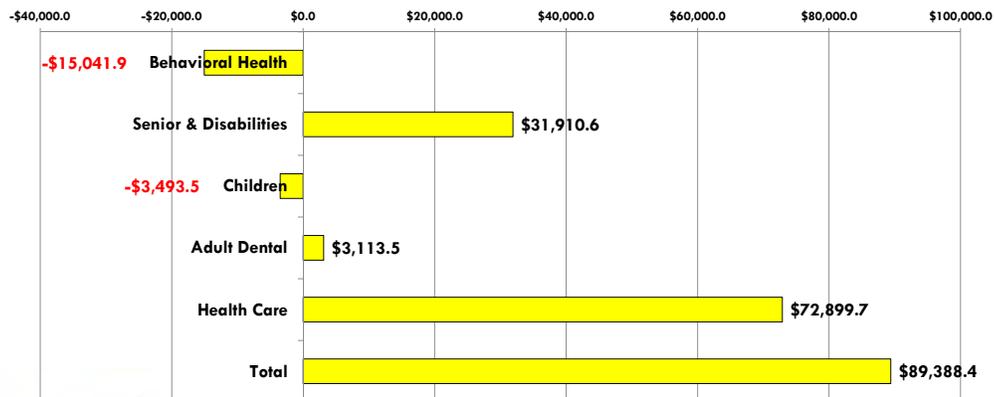
The General Funds appropriated for DET are matched with federal funds. Significant increases to DET were made in FY16 to help address the increased demand for local services.

Currently, the two mental health units in Juneau and Fairbanks, along with the capacity at Providence Hospital in Anchorage, help the system function with the limited capacity at Alaska Psychiatric Institute. This could change depending on the outcome of the API privatization feasibility study. The impact of enhanced care management and coordination expected from the various Medicaid reform initiatives could also change the demand for and provision of DET services.



## MEDICAID

Medicaid Programs, Difference FY13 to FY17 by Category



Source: Legislative Finance, Enacted Budget Reports for FY2013, FY2017



## MEDICAID

Behavioral Health Medicaid and Children's Medicaid were the two Medicaid programs that decreased between FY2013 and FY2015.

Factors in this trend include Bring the Kids Home, which reduced spending for residential psychiatric treatment centers, and reduced utilization of certain programs.

Other Medicaid programs have increased over time. The Adult Dental Medicaid program has grown nearly 25% since FY2013. This particular program may see continued increased scrutiny in FY2018 as legislators look at optional\* Medicaid services as an area for reduction.

*\*more discussion of policy related to optional Medicaid services later*



## PUBLIC HEALTH NURSING

The public health nursing program has borne a significant portion of the public health reductions since FY2013. The \$5.45 million decrease in funds has resulted in a loss of 15 full time positions in the past five years. The Seward Public Health Center closed in 2015.

Public health nurses are a major source of health education and preventative care in rural Alaska. The public health nursing program has responded to the needs of their client population by integrating SBIRT in its service array, in order to better serve individuals and communities.



# HOUSING

Most housing programs that serve beneficiaries rely on a mix of federal, state, and local funds to provide services.

Alaska Housing Finance Corporation reported serving 4,300 households through all its voucher programs, and 13,000 individuals through the Homeless Assistance and special needs housing programs. Approximately 1,845 households live in AHFC public housing.



# HOUSING

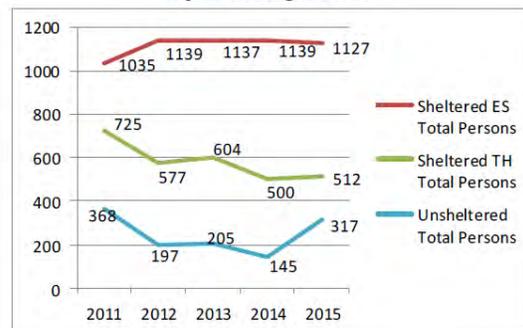
In FY13, the Special Needs Housing Grant component was funded at \$1.75 million (UGF, AHFC) and the Homeless Assistance Program at \$8 million. In FY17, the Special Needs Housing Grant component was funded at \$1.5 million GF/MH and the Basic Homeless Assistance Program at \$7.7 million.



**State of Alaska**  
**Homeless Population**



**Statewide Homeless Population  
By Housing Status**



# HOUSING

Human Services Matching Grants have decreased 23% since FY2013 (\$1,387,000 in FY17).

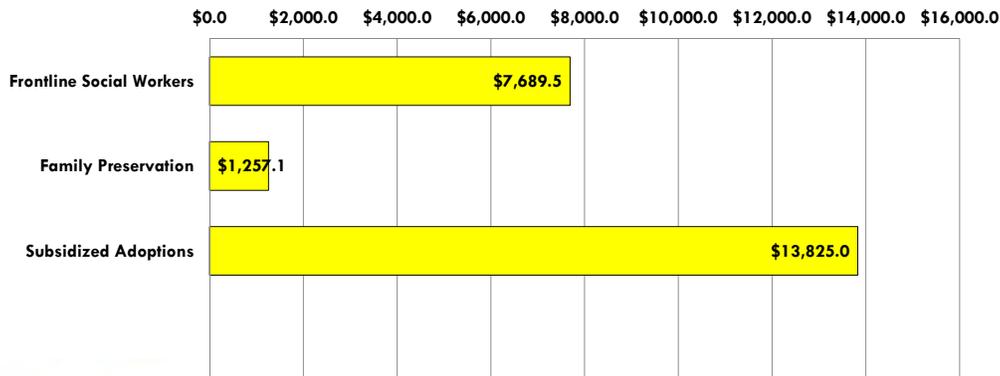
Community Initiative Matching Grants, \$861,700 in FY2017, has decreased 4% since FY2013.

These funds help local communities contribute to many social services programs, including special needs and affordable housing projects.



# SAFETY AND SECURITY

OCS Programs, Difference FY13 to FY17 by Category



Source: Legislative Finance, Enacted Budget Reports for FY2013, FY2017

# SAFETY AND SECURITY

There is continued support among most executive and legislative policymakers for efforts to prevent and mitigate harm to children, improve the timeliness and effectiveness of interventions, and reduce disparities in the child protective services system.

## Alaska Dispatch News

Alaska News

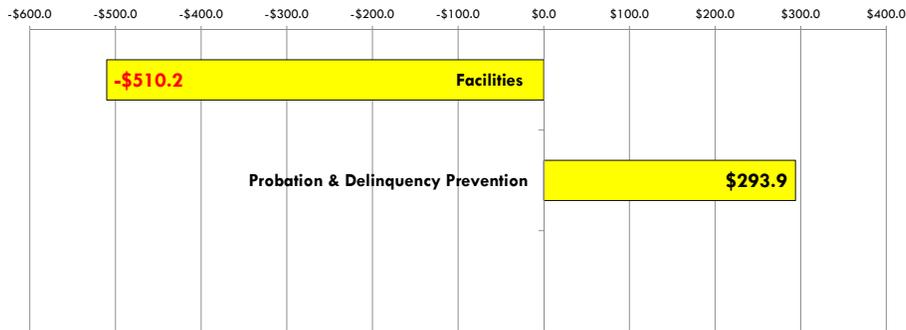
**Report: High numbers of Alaska children -- especially Native children -- in foster care**

Author: [Lisa Demer](#) Updated: May 11 Published December 3, 2014



# SAFETY AND SECURITY

Juvenile Justice Programs, Difference FY13 to FY17 by Category



Source: Legislative Finance, Enacted Budget Reports for FY2013, FY2017

## SAFETY AND SECURITY

In Alaska and nationally, there is a downward trend in the number of youth held in the custody of juvenile justice agencies. This is due in part to investments in evidence-based intervention and probation programs in communities. This is reflected in the shift in resource allocation over time.

While the number of youth in custody has decreased, the needs of those youth – who often experience behavioral health and/or developmental disabilities as well as the consequences of childhood trauma – are more acute.

Last year, there was much discussion about closing one juvenile justice facility and repurposing another. The Ketchikan facility closed in August, 2016. What this means for the Nome facility next year is unclear.



## SAFETY AND SECURITY

The Alaska State Troopers are the only law enforcement available in many rural communities, and play an important support role to law enforcement agencies in hub communities.

The AST budget in FY2013 was \$63,328,800. In FY17, it is \$63,766,500. A significant number of vacant positions were cut from the AST budget in FY16. An additional 7 permanent full-time positions were cut in FY17 (not including wildlife troopers).

The trooper post in Talkeetna closed in 2015. This has had a direct impact on the way the community health center and residents respond to psychiatric and substance use crises, as they now have to wait for officers to come from an hour or more away. The Girdwood post closed this summer.



## EDUCATION

Public schools provide services for the youngest beneficiaries. When school districts must reduce local budgets, the support services that young beneficiaries need to succeed are often the ones that get reduced first. Young beneficiaries in rural school districts also experience disparities due to challenges those districts experience in providing core academic programs and the lack of local access to certain professional services for students with disabilities. While there is enhanced funding (by a factor of 13) for the most disabled students, special needs funding for students with less intensive special education needs does not always stretch far enough.



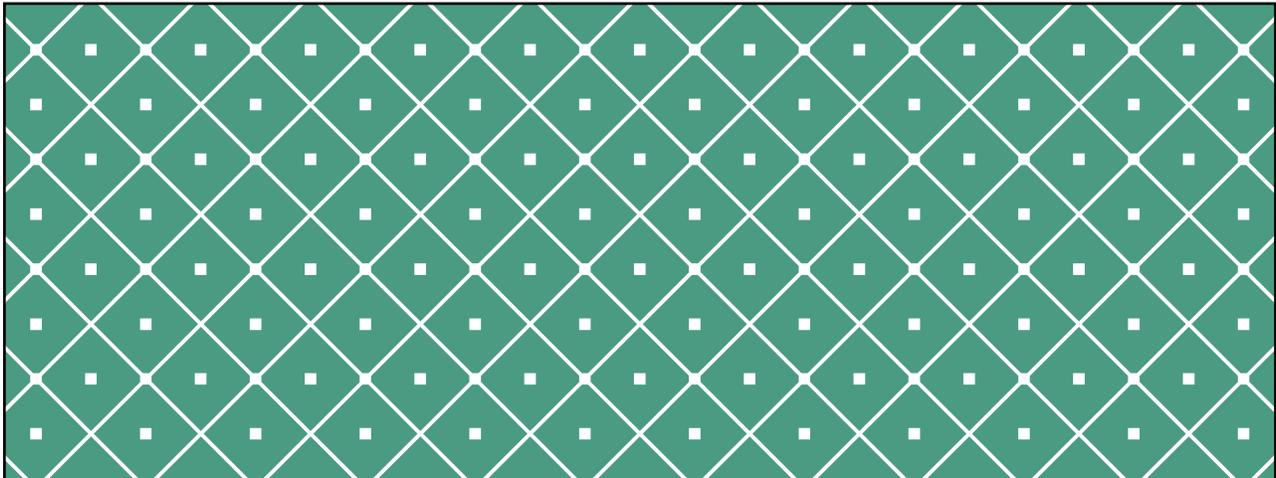
## EDUCATION

In FY2017, K-12 Aid to Schools Foundation Program (which funds the base student allocation) is \$1,214,775,500 (\$1.2b), after Governor Walker's \$6.35 million veto. This is 4% more than in FY2013, when it was \$1,163,762,000.

Because this funding flows according to the number of students, rural/smaller school districts may or may not receive adequate funds to provide core academic programs, leaving aside support services for young beneficiaries.

Overall budget reductions and associated economic constriction has and will continue to impact local effort (city/borough contributions to school district funding), since most communities rely on property taxes and/or sales taxes for those funds.





## POLICY CONSIDERATIONS

### REVENUE

There is no preserving the core services – the programs critical to the health, safety, and welfare of beneficiaries – without expanding and diversifying the revenue streams available for public services.

Whether it is the Governor's [New Sustainable Alaska Plan](#) or some other combination of taxes, fees, and investment revenues – Alaska must have reliable sources of income going into FY2018 and beyond.



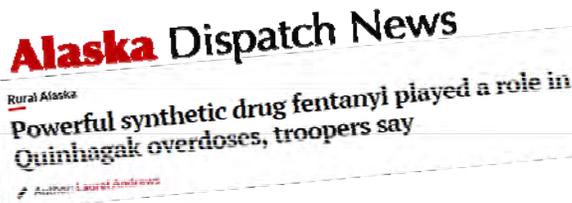
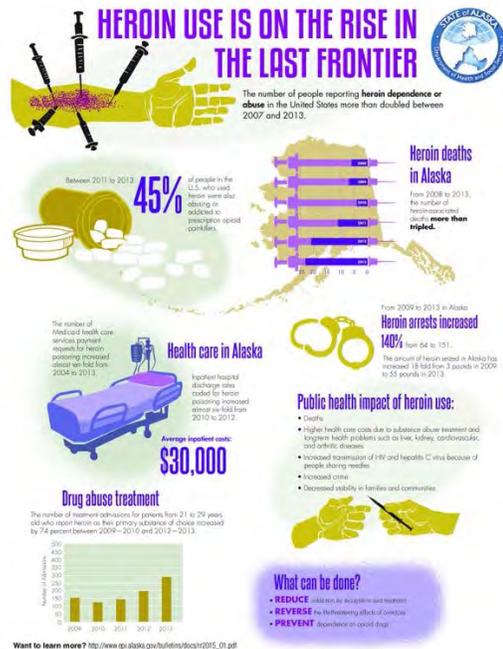
# REFORM

Managing public and policymaker expectations about the monumental reform efforts launched in SB 91 and SB 74 – what a reasonable timeline for implementation is, what savings can be reasonably expected in the short and long-terms, etc. is critical.



# OPIOID ADDICTION

The Alaska Opioid Policy Task Force will have recommendations for policymakers later this Fall. This will be based on evidence, research, and public and stakeholder input.





QUESTIONS, COMMENTS?



J. Kate Burkhart, Executive Director  
431 North Franklin Street  
Juneau, Alaska 99801  
[kate.burkhart@alaska.gov](mailto:kate.burkhart@alaska.gov)

*Thank you!*

# **FY18/19 Budget Spreadsheets**

	A	B	J	K	L	M	N	O	P	Q	R	S
1	<b>Alaska Mental Health Trust Authority</b>											
2	<b>FY18 - FY19 Budget Recommendations for Full Board Consideration</b>											
3	<b>Focus Area Recommendations as of August 2016</b>											
4	<i>(amounts in thousands)</i>											
5												
6	<b>FY18 Recommendations</b>						<b>FY19 Recommendations</b>					
7		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other		Sum of MHTAAR/ MHT Admin & AG	GF/MH	Other		
8												
9	Non-Focus Area Allocations											
10	Trust / TLO Operating Budgets	8,372.8	8,372.8	-	-	-		8,372.8	-	-		
11	Other Non-Focus Area Allocations	5,952.0	887.0	5,065.0	-	-		5,937.0	-	-		
12												
13	Alaska Systems Reform											
14	Medicaid Reform and Redesign (SB74)	5,710.2	4,702.2	1,008.0	100.0	-		6,163.7	100.0	-		
15	Criminal Justice Reform & Reinvestment (SB91)	3,905.3	2,470.3	1,435.0	150.0	-		3,795.3	-	-		
16												
17	Focus Areas:											
18	Housing and Long-Term Services & Supports	1,797.0	1,450.0	347.0	3,350.0	8,100.0		1,806.5	3,350.0	8,100.0		
19	Beneficiary Employment and Engagement	2,225.0	290.0	1,935.0	-	-		2,185.0	-	-		
20	Substance Abuse Prevention and Treatment	450.0	-	450.0	-	-		400.0	-	-		
21	Disability Justice	60.0	-	60.0	-	-		60.0	-	-		
22												
23	Advisory Board Requests	700.0	700.0	-	1,750.0	-		550.0	1,750.0	-		
24												
25	<b>Totals</b>	<b>29,172.3</b>	<b>18,872.3</b>	<b>10,300.0</b>	<b>5,350.0</b>	<b>8,100.0</b>		<b>29,270.3</b>	<b>5,200.0</b>	<b>8,100.0</b>		
26												
27												

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC
5	Non-Focus Area Allocations					Type	FY18 Recommendations					FY19 Recommendations					
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other
7	<b>Trust &amp; TLO Administrative Budgets</b>																
8			DOR	O		3,899.2	3,899.2	-	-	-	3,899.2		3,899.2	3,899.2	-	-	-
9		129	DNR	O		4,473.6	4,473.6	-	-	-	4,473.6		4,473.6	4,473.6	-	-	-
10			<b>Total Trust &amp; TLO</b>			<b>8,372.8</b>	<b>8,372.8</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>8,372.8</b>		<b>8,372.8</b>	<b>8,372.8</b>	<b>-</b>	<b>-</b>	<b>-</b>
11																	
12																	
13	<b>Other Non-Focus Area Allocations</b>																
14																	
15	<b>Grant Making Programs</b>																
16				AG		1,500.0	-	1,500.0	-	-	1,500.0		1,500.0	-	1,500.0	-	-
17		245		AG		250.0	-	250.0	-	-	250.0		250.0	-	250.0	-	-
18			<b>Grant Making Programs Subtotal</b>			<b>1,750.0</b>	<b>-</b>	<b>1,750.0</b>	<b>-</b>	<b>-</b>	<b>1,750.0</b>		<b>1,750.0</b>	<b>-</b>	<b>1,750.0</b>	<b>-</b>	<b>-</b>
19																	
20																	
21	<b>Dental</b>																
22			Anch/Fbks Comm Hlth	AG		240.0	-	240.0	-	-	240.0		240.0	-	240.0	-	-
23			Dental Lifeline Network	AG		30.0	-	30.0	-	-	30.0		30.0	-	30.0	-	-
24			<b>Dental Subtotal</b>			<b>270.0</b>	<b>-</b>	<b>270.0</b>	<b>-</b>	<b>-</b>	<b>270.0</b>		<b>270.0</b>	<b>-</b>	<b>270.0</b>	<b>-</b>	<b>-</b>
25																	
26																	
27	<b>Mini Grants</b>																
28		2338		AG		950.0	-	950.0	-	-	950.0		950.0	-	950.0	-	-
29		2813	Alzheimers' Resource Agency	AG		300.0	-	300.0	-	-	300.0		300.0	-	300.0	-	-
30		124		AG		350.0	-	350.0	-	-	350.0		350.0	-	350.0	-	-
31			<b>Mini Grants Subtotal</b>			<b>1,600.0</b>	<b>-</b>	<b>1,600.0</b>	<b>-</b>	<b>-</b>	<b>1,600.0</b>		<b>1,600.0</b>	<b>-</b>	<b>1,600.0</b>	<b>-</b>	<b>-</b>
32																	
33	<b>Trust Statutory Advisory Boards</b>																
34		605	DHSS/DBH/AMHB-ABADA	O		465.5	465.5	-	-	-	465.5		465.5	465.5	-	-	-
35		105	DHSS/DSDS/GCDSE	O		127.4	127.4	-	-	-	127.4		127.4	127.4	-	-	-
36		151	DHSS/DSDS/ACoA	O		119.1	119.1	-	-	-	119.1		119.1	119.1	-	-	-
37			<b>Trust Statutory Advisory Boards Subtotal</b>			<b>712.0</b>	<b>712.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>712.0</b>		<b>712.0</b>	<b>712.0</b>	<b>-</b>	<b>-</b>	<b>-</b>
38																	
39	<b>Traumatic Brain Injury Efforts</b>																
40			ABIN	AG		160.0	-	160.0	-	-	160.0		160.0	-	160.0	-	-
41			<b>Traumatic Brain Injury Efforts Subtotal</b>			<b>160.0</b>	<b>-</b>	<b>160.0</b>	<b>-</b>	<b>-</b>	<b>160.0</b>		<b>160.0</b>	<b>-</b>	<b>160.0</b>	<b>-</b>	<b>-</b>
42																	
43																	
44	<b>BTKH Maintenance/Monitoring</b>			AG		60.0	-	60.0	-	-	60.0		60.0	-	60.0	-	-
45			<b>BTKH Subtotal</b>			<b>60.0</b>	<b>-</b>	<b>60.0</b>	<b>-</b>	<b>-</b>	<b>60.0</b>		<b>60.0</b>	<b>-</b>	<b>60.0</b>	<b>-</b>	<b>-</b>
46																	

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC	
5	Non-Focus Area Allocations					Type	FY18 Recommendations					FY19 Recommendations						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	
47	<b>Consultative &amp; Technical Assistance Services</b>																	
48					AG	150.0	-	150.0	-	-	150.0		150.0	-	150.0	-	-	
49		2336	Technical assistance for beneficiary groups & Trust initiatives		AG	300.0	-	300.0	-	-	300.0		300.0	-	300.0	-	-	
50			Communications		AG	400.0	-	400.0	-	-	400.0		400.0	-	400.0	-	-	
51		261	Pooled predevelopment core operating maintenance		AG	75.0	-	75.0	-	-	75.0		75.0	-	75.0	-	-	
52		261	Pooled predevelopment individual projects		AG	150.0	-	150.0	-	-	150.0		150.0	-	150.0	-	-	
53	<b>Consultative &amp; Technical Assistance Services Subtotal</b>						<b>1,075.0</b>	<b>-</b>	<b>1,075.0</b>	<b>-</b>	<b>-</b>	<b>1,075.0</b>		<b>1,075.0</b>	<b>-</b>	<b>1,075.0</b>	<b>-</b>	<b>-</b>
54																		
55	<b>Data Evaluation &amp; Planning</b>																	
56			Scorecard Update		O	40.0	40.0	-	-	-	40.0		40.0	40.0	-	-	-	
57			Consultative Services Strategic Planning		AG	100.0	-	100.0	-	-	100.0		100.0	-	100.0	-	-	
58			Behavioral Risk Factor Surveillance System		O	10.0	10.0	-	-	-	10.0		10.0	10.0	-	-	-	
59		1335	Alaska Health Workforce Profile		O	75.0	75.0	-	-	-	75.0		75.0	75.0	-	-	-	
60	<b>Data Evaluation &amp; Planning Subtotal</b>						<b>225.0</b>	<b>125.0</b>	<b>100.0</b>	<b>-</b>	<b>-</b>	<b>225.0</b>		<b>225.0</b>	<b>125.0</b>	<b>100.0</b>	<b>-</b>	<b>-</b>
61																		
62	<b>Other</b>																	
63			Sustaining Alaska 2-1-1		AG	40.0	-	40.0	-	-	40.0		25.0	-	25.0	-	-	
64			Advocacy Training		AG	10.0	-	10.0	-	-	10.0		10.0	-	10.0	-	-	
65		180	AK Autism Resource center		O	50.0	50.0	-	-	-	50.0		50.0	50.0	-	-	-	
66	<b>Other Subtotal</b>						<b>100.0</b>	<b>50.0</b>	<b>50.0</b>	<b>-</b>	<b>-</b>	<b>100.0</b>		<b>85.0</b>	<b>50.0</b>	<b>35.0</b>	<b>-</b>	<b>-</b>
67																		
68	<b>Total Other Non-Focus Area Allocations</b>						<b>5,952.0</b>	<b>887.0</b>	<b>5,065.0</b>	<b>-</b>	<b>-</b>	<b>5,952.0</b>		<b>5,937.0</b>	<b>887.0</b>	<b>5,050.0</b>	<b>-</b>	<b>-</b>
69																		
70	<b>Total Non-Focus Area Allocations</b>						<b>14,324.8</b>	<b>9,259.8</b>	<b>5,065.0</b>	<b>-</b>	<b>-</b>	<b>14,324.8</b>		<b>14,309.8</b>	<b>9,259.8</b>	<b>5,050.0</b>	<b>-</b>	<b>-</b>

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC	
5	Medicaid Reform & Redesign (SB74)					Type	FY18 Recommendations					FY19 Recommendations						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	
7	<b>SB 74 Implementation Investments</b>																	
55			DHSS / SDS (DHSS Medicaid Reform - Project 9 - 1915 i/k Options)	O (FN)		213.8	213.8	-	-	-	213.8		213.8	213.8	-	-	-	
56			DHSS /HCS (Medicaid Reform - Project 10-Health Care Services Staffing Needs)	O (FN)		109.2	109.2	-	-	-	109.2		109.2	109.2	-	-	-	
57			DHSS /HCS (Medicaid Reform - Project 10-Health Care Services Staffing Needs)	O (FN)		199.1	199.1	-	-	-	199.1		199.1	199.1	-	-	-	
58			DHSS / (Medicaid Reform SB74 Fiscal note#63 - Project 8-Workgroups)	O (FN#63)		2.5	2.5	-	-	-	2.5		2.5	2.5	-	-	-	
59			DHSS / (Medicaid Reform - Project 7-Data)	O / C (FN#55)		30.0	30.0	-	-	-	30.0		-	-	-	-	-	
60			DHSS Medicaid Reform - Project 1 - DBH Capacity Assessment / Development	AG		37.5	-	37.5	-	-	37.5		-	-	-	-	-	
61			DHSS Medicaid Reform - Project 2-Provider Capacity Assessment/Development	AG		37.5	-	37.5	-	-	37.5		-	-	-	-	-	
62			DHSS / (Medicaid Reform SB74 - Project 3-1115 Behavioral Health Waiver)	O (FN)		125.0	125.0	-	-	-	125.0		-	-	-	-	-	
63			DHSS / (Medicaid Reform - Project 4-Administrative Services Organization (ASO))	O (FN)		1,750.0	1,750.0	-	-	-	1,750.0		2,650.0	2,650.0	-	-	-	
64			DHSS Medicaid Reform - Project 5-Primary Care Integration	AG		100.0	-	100.0	-	-	100.0		-	-	-	-	-	
65			DHSS / (Medicaid Reform - Project 6-CCBHC Planning Grant)	O (FN)		37.5	37.5	-	-	-	37.5		-	-	-	-	-	
66	<b>Strategy Subtotal</b>						<b>2,642.1</b>	<b>2,467.1</b>	<b>175.0</b>	<b>-</b>	<b>-</b>	<b>2,642.1</b>		<b>3,174.6</b>	<b>3,174.6</b>	<b>-</b>	<b>-</b>	<b>-</b>

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC	
5	Medicaid Reform & Redesign (SB74)					Type	FY18 Recommendations					FY19 Recommendations						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	
67	<b>Trust Related Investments</b>																	
68	<i>Systems and Policy Development</i>																	
69			HCBS Medicaid Reform Program Manager and Aquired and Traumatic Brain Injury (ATBI) Program Research Analyst		DHSS/SDS   Senior & Disabilities Services Administration	O	52.0	52.0	-	-	-	52.0	52.0	52.0	-	-	-	
70	<b>Strategy Subtotal</b>						<b>52.0</b>	<b>52.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>52.0</b>	<b>52.0</b>	<b>52.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	
71																		
72	<i>Increased Capacity, Training and Competencies</i>																	
73		1384	The Alaska Training Cooperative		UAA College of Health	O	984.0	984.0	-	-	-	984.0	984.0	984.0	-	-	-	
74		2347	Workforce Director		UAA COH OHPD	O	146.1	146.1	-	-	-	146.1	146.1	146.1	-	-	-	
75			DD system capacity development (HLTSS)		AK Assn of Developmental Disabilities (AADD)	AG	65.0	-	65.0	-	-	65.0	65.0	-	65.0	-	-	
76		1377	Housing continuum and Assisted Living targeted capacity development training (HLTSS)		UAA/CHD	O	50.0	50.0	-	-	-	50.0	50.0	50.0	-	-	-	
77			ADRD Workforce (HLTSS)		Alzheimers' Resource of Alaska	AG	50.0	-	50.0	-	-	50.0	50.0	-	50.0	-	-	
78			Supported Employment Provider training infrastructure and capacity (BEE)		UAA/CHD	O	65.0	65.0	-	-	-	65.0	65.0	65.0	-	-	-	
79			Peer support workforce (BEE)		Trust	AG	55.0	-	55.0	-	-	55.0	55.0	-	55.0	-	-	
80		1383	Providing Support for Service to Health Care Practitioners(SHARP)		DHSS/DPH/Health Planning & Systems Development		200.0	200.0	-	-	-	200.0	200.0	200.0	-	-	-	
81			Alaska Area Health Education Centers		UAA AHEC (COH)		55.0	55.0	-	-	-	55.0	55.0	55.0	-	-	-	
82			Alaska Psychology Internship Consortium (AK-PIC)		WICHE	AG	63.0	-	63.0	-	-	63.0	59.0	-	59.0	-	-	
83	<b>Strategy Subtotal</b>						<b>1,733.1</b>	<b>1,500.1</b>	<b>233.0</b>	<b>-</b>	<b>-</b>	<b>1,733.1</b>	<b>1,729.1</b>	<b>1,500.1</b>	<b>229.0</b>	<b>-</b>	<b>-</b>	
84																		
85	<i>Behavioral Health Access</i>																	
86			Assisted Living Home transition and institutional diversion (HLTSS)			AG	100.0	-	100.0	-	-	100.0	100.0	-	100.0	-	-	
87		383	Office of Integrated Housing (HLTSS)		DHSS/DBH/ BH Admin	O	122.0	122.0	-	-	-	122.0	122.0	122.0	-	-	-	
88			Senior and Disabilities Division Supported Housing program manager (HLTSS)		DHSS/DSDS/ Admin	O	81.0	81.0	-	-	-	81.0	81.0	81.0	-	-	-	
89			Vocational Coordinator (BEE)		ACMHS	AG	100.0	-	100.0	-	-	100.0	100.0	-	100.0	-	-	
90	<b>Strategy Subtotal</b>						<b>403.0</b>	<b>203.0</b>	<b>200.0</b>	<b>-</b>	<b>-</b>	<b>403.0</b>	<b>403.0</b>	<b>203.0</b>	<b>200.0</b>	<b>-</b>	<b>-</b>	

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC	
5	Medicaid Reform & Redesign (SB74)					Type	FY18 Recommendations					FY19 Recommendations						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	
91																		
92			<i>Home and Community Based Services</i>															
93			Traumatic Brain Injury Resource Navigator (FY17/prior "State of Alaska Acquired and Traumatic Brain Injury (ATBI) Program Resource Navigator (ABIN)")		ABIN	AG	150.0	-	150.0	-	-	150.0	75.0	-	75.0	-	-	
94			System infrastructure and capacity development for ADRD and IDD programs (HLTSS)			AG	250.0	-	250.0	-	-	250.0	250.0	-	250.0	-	-	
95			IT application / Telehealth Service System Improvements (HLTSS)		DHSS/SDS	O	100.0	100.0	-	100.0	-	200.0	100.0	100.0	-	100.0	-	
96			Aging and Disability Resource Center (HLTSS)		1927	DHSS/SDS/Senior Community Based Grants	O	300.0	300.0	-	-	300.0	300.0	300.0	-	-	-	
97			<b>Strategy Subtotal</b>				<b>800.0</b>	<b>400.0</b>	<b>400.0</b>	<b>100.0</b>	<b>-</b>	<b>900.0</b>	<b>725.0</b>	<b>400.0</b>	<b>325.0</b>	<b>100.0</b>	<b>-</b>	
98																		
99			<i>Health Information Technology &amp; Data Analytics</i>															
100			Develop targeted outcome data (HLTSS)		1471	DHSS SDS (FY17/prior AG)	O	80.0	80.0	-	-	80.0	80.0	80.0	-	-	-	
101			<b>Strategy Subtotal</b>				<b>80.0</b>	<b>80.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>80.0</b>	<b>80.0</b>	<b>80.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	
102																		
103			<i>Early Detection &amp; Prevention</i>															
104			Reserved for future use															
105																		
106			<i>Integrated Behavioral Health &amp; Primary Care</i>															
107			Reserved for future use															
108			<b>Medicaid Reform &amp; Redesign (SB74) Total</b>				<b>5,710.2</b>	<b>4,702.2</b>	<b>1,008.0</b>	<b>100.0</b>	<b>-</b>	<b>5,810.2</b>	<b>6,163.7</b>	<b>5,409.7</b>	<b>754.0</b>	<b>100.0</b>	<b>-</b>	
109																		

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC	
5	<b>Criminal Justice Reform and Reinvestment (SB91)</b>					Type	<b>FY18 Recommendations</b>					<b>FY19 Recommendations</b>						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	
7	<b>Trust Related Investments</b>																	
8																		
9	<i>Systems and Policy Development</i>																	
10			DOLWD Employment & Training Services	O		125.0	125.0	-	-	-	125.0		125.0	125.0	-	-	-	
11		3507	DOC/Inmate Health//Behavioral Health	O		101.9	101.9	-	-	-	101.9		101.9	101.9	-	-	-	
12			UAA	O		225.0	225.0	-	150.0	-	375.0		225.0	225.0	-	-	-	
13				AG		15.0	-	15.0	-	-	15.0		15.0	-	15.0	-	-	
14			<b>Strategy Subtotal</b>			<b>466.9</b>	<b>451.9</b>	<b>15.0</b>	<b>150.0</b>	<b>-</b>	<b>616.9</b>		<b>466.9</b>	<b>451.9</b>	<b>15.0</b>	<b>-</b>	<b>-</b>	
15																		
16	<i>Increased Capacity, Training &amp; Competencies</i>																	
17		1480	Muni of Anchorage; Fairbanks	AG		75.0	-	75.0	-	-	75.0		75.0	-	75.0	-	-	
18		3503	ACS/Therapeutic courts	O		15.0	15.0	-	-	-	15.0		15.0	15.0	-	-	-	
19		4299	DOC/Inmate Health/Behavioral Health Care	O		25.0	25.0	-	-	-	25.0		25.0	25.0	-	-	-	
20			UAA/CHD			72.5	72.5	-	-	-	72.5		72.5	72.5	-	-	-	
21			<b>Strategy Subtotal</b>			<b>187.5</b>	<b>112.5</b>	<b>75.0</b>	<b>-</b>	<b>-</b>	<b>187.5</b>		<b>187.5</b>	<b>112.5</b>	<b>75.0</b>	<b>-</b>	<b>-</b>	
22																		
23	<i>Community Prevention</i>																	
24			YWCA	AG		50.0	-	50.0	-	-	50.0		50.0	-	50.0	-	-	
25		582	UAA/CHD	O		110.0	110.0	-	-	-	110.0		-	-	-	-	-	
26		573	UAA/CHD	O		80.0	80.0	-	-	-	80.0		80.0	80.0	-	-	-	
27		2819	DHSS/DBH/BH grants	O		50.0	50.0	-	-	-	50.0		50.0	50.0	-	-	-	
28			<b>Strategy Subtotal</b>			<b>290.0</b>	<b>240.0</b>	<b>50.0</b>	<b>-</b>	<b>-</b>	<b>290.0</b>		<b>180.0</b>	<b>130.0</b>	<b>50.0</b>	<b>-</b>	<b>-</b>	
29																		
30	<i>Community Intervention/Diversion</i>																	
31			DHSS/DBH/Svcs SMI	O		750.0	750.0	-	-	-	750.0		750.0	750.0	-	-	-	
32			<b>Strategy Subtotal</b>			<b>750.0</b>	<b>750.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>750.0</b>		<b>750.0</b>	<b>750.0</b>	<b>-</b>	<b>-</b>	<b>-</b>	
33																		
34	<i>Booking &amp; Screening Practices</i>																	
35	Reserved for future use																	
36																		

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC
5	<b>Criminal Justice Reform and Reinvestment (SB91)</b>					Type	<b>FY18 Recommendations</b>					<b>FY19 Recommendations</b>					
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other
37	<b>In-facility Practices</b>																
38		1935	ACS/Therapeutic Courts	O		204.4	204.4	-	-	-	204.4		204.4	204.4	-	-	-
39			Partner for Progress	AG		155.0	-	155.0	-	-	155.0		155.0	-	155.0	-	-
40		4302	DHSS/DJJ/Probation Services	O		157.7	157.7	-	-	-	157.7		157.7	157.7	-	-	-
41			DOA/PDA	O		193.8	193.8	-	-	-	193.8		193.8	193.8	-	-	-
42			AK Legal Services	AG		90.0	-	90.0	-	-	90.0		90.0	-	90.0	-	-
43	<b>Strategy Subtotal</b>					<b>800.9</b>	<b>555.9</b>	<b>245.0</b>	<b>-</b>	<b>-</b>	<b>800.9</b>		<b>800.9</b>	<b>555.9</b>	<b>245.0</b>	<b>-</b>	<b>-</b>
44	<b>Re-entry</b>																
45	<b>Re-entry</b>																
46		604	AHFC	O		100.0	100.0	-	-	-	100.0		100.0	100.0	-	-	-
47				AG		150.0	-	150.0	-	-	150.0		150.0	-	150.0	-	-
48		571	DOC/Inmate Health/Behavioral Health Care	O		260.0	260.0	-	-	-	260.0		260.0	260.0	-	-	-
49				AG		400.0	-	400.0	-	-	400.0		400.0	-	400.0	-	-
50			Trust	AG		500.0	-	500.0	-	-	500.0		500.0	-	500.0	-	-
51	<b>Strategy Subtotal</b>					<b>1,410.0</b>	<b>360.0</b>	<b>1,050.0</b>	<b>-</b>	<b>-</b>	<b>1,410.0</b>		<b>1,410.0</b>	<b>360.0</b>	<b>1,050.0</b>	<b>-</b>	<b>-</b>
52	<b>Community Aftercare</b>																
53	<b>Community Aftercare</b>																
54	Reserved for future use																
55	<b>Criminal Justice Reform (SB91) Total</b>					<b>3,905.3</b>	<b>2,470.3</b>	<b>1,435.0</b>	<b>150.0</b>	<b>-</b>	<b>4,055.3</b>		<b>3,795.3</b>	<b>2,360.3</b>	<b>1,435.0</b>	<b>-</b>	<b>-</b>
56	<b>Criminal Justice Reform (SB91) Total</b>					<b>3,905.3</b>	<b>2,470.3</b>	<b>1,435.0</b>	<b>150.0</b>	<b>-</b>	<b>4,055.3</b>		<b>3,795.3</b>	<b>2,360.3</b>	<b>1,435.0</b>	<b>-</b>	<b>-</b>
57																	

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC	
5	Housing and Long-Term Services & Supports Focus Area					Type	FY18 Recommendations					FY19 Recommendations						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O)/ Capital (C) / Auth. Grant (AG)		Sum of MHTAAR & AG	MHTAAR	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR & AG	MHTAAR	Authority Grant	GF/MH	Other	
7																		
8																		
9		1468	Muni of Anchorage	AG		85.0	-	85.0	-	-	85.0		85.0	-	85.0	-	-	
10						272.0	-	272.0	-	-	272.0		281.5	-	281.5	-	-	
11																		
12																		
13																		
14		142	DHSS/Facilities	C		300.0	300.0	-	750.0	-	1,050.0		300.0	300.0	-	750.0	-	
15						300.0	300.0	-	750.0	-	1,050.0		300.0	300.0	-	750.0	-	
16																		
17			Alaska Legal Services	AG		75.0	-	75.0	-	-	75.0		75.0	-	75.0	-	-	
18			DOR/AHFC	C		200.0	200.0	-	1,750.0	1,750.0	3,700.0		200.0	200.0	-	1,750.0	1,750.0	
19		149	DOR/AHFC	C		950.0	950.0	-	850.0	6,350.0	8,150.0		950.0	950.0	-	850.0	6,350.0	
20						1,225.0	1,150.0	75.0	2,600.0	8,100.0	11,925.0		1,225.0	1,150.0	75.0	2,600.0	8,100.0	
21																		
22						1,797.0	1,450.0	347.0	3,350.0	8,100.0	13,247.0		1,806.5	1,450.0	356.5	3,350.0	8,100.0	

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC
5	Beneficiary Employment and Engagement Focus Area				Type	FY18 Recommendations					FY19 Recommendations						
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O)/ Capital (C) / Auth Grant (AG)		Sum of MHTAAR/ MHT Admin & AG	MHTAAR / MHT Admin	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR & AG	MHTAAR	Authority Grant	GF/MH	Other
7			Trust	AG		250.0	-	250.0	-	-	250.0		250.0	-	250.0	-	-
8						<b>250.0</b>	<b>-</b>	<b>250.0</b>	<b>-</b>	<b>-</b>	<b>250.0</b>		<b>250.0</b>	<b>-</b>	<b>250.0</b>	<b>-</b>	<b>-</b>
9																	
10																	
11		1482	Trust	AG		1,420.0	-	1,420.0	-	-	1,420.0		1,420.0	-	1,420.0	-	-
12						<b>1,420.0</b>	<b>-</b>	<b>1,420.0</b>	<b>-</b>	<b>-</b>	<b>1,420.0</b>		<b>1,420.0</b>	<b>-</b>	<b>1,420.0</b>	<b>-</b>	<b>-</b>
13																	
14																	
15				AG		100.0	-	100.0	-	-	100.0		100.0	-	100.0	-	-
16		200	DHSS/DSDS/GCDSE	O		150.0	150.0	-	-	-	150.0		150.0	150.0	-	-	-
17						<b>250.0</b>	<b>150.0</b>	<b>100.0</b>	<b>-</b>	<b>-</b>	<b>250.0</b>		<b>250.0</b>	<b>150.0</b>	<b>100.0</b>	<b>-</b>	<b>-</b>
18																	
19																	
20			Trust	AG		85.0	-	85.0	-	-	85.0		85.0	-	85.0	-	-
21			Trust	AG		80.0	-	80.0	-	-	80.0		80.0	-	80.0	-	-
22			DHSS   GCDSE	O		100.0	100.0	-	-	-	100.0		100.0	100.0	-	-	-
23			DOR / Treasury   (Medicaid reform Project 11-Other)	O		40.0	40.0	-	-	-	40.0		-	-	-	-	-
24						<b>305.0</b>	<b>140.0</b>	<b>165.0</b>	<b>-</b>	<b>-</b>	<b>305.0</b>		<b>265.0</b>	<b>100.0</b>	<b>165.0</b>	<b>-</b>	<b>-</b>
25																	
26						<b>2,225.0</b>	<b>290.0</b>	<b>1,935.0</b>	<b>-</b>	<b>-</b>	<b>2,225.0</b>		<b>2,185.0</b>	<b>250.0</b>	<b>1,935.0</b>	<b>-</b>	<b>-</b>

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC
5	Substance Abuse Prevention and Treatment					Type	FY18 Recommendations					FY19 Recommendations					
6		GIFTS ID	Dept/RDU   Component (or recipient)	Operating (O) / Capital (C) / Auth Grant (AG)		Sum of MHTAAR & AG	MHTAAR	Authority Grant	GF/MH	Other	Total		Sum of MHTAAR & AG	MHTAAR	Authority Grant	GF/MH	Other
7	<b>Alaskan's Use Alcohol Responsibly and Avoid Illegal Substances</b>																
8	Partnerships: Recover Alaska		Sultana	AG		230.0	-	230.0	-	-	230.0		230.0	-	230.0	-	-
9	Strategy Subtotal					230.0	-	230.0	-	-	230.0		230.0	-	230.0	-	-
10																	
11	<b>Alaskans: Free From Burdens Created By Alcohol &amp; Substance Abuse</b>																
12	Treatment Access (FY17/prior all funding in SAPT focus area; for FY18 \$500.0 moved to Criminal Justice Reform; \$100.0 remaining in SAPT)		Trust	AG		100.0	-	100.0	-	-	100.0		100.0	-	100.0	-	-
13	Strategy Subtotal					100.0	-	100.0	-	-	100.0		100.0	-	100.0	-	-
14																	
15	<b>Policy, Analysis &amp; Development</b>																
16	Statute Review/Analysis: Title 4		Trust	AG		50.0	-	50.0	-	-	50.0		-	-	-	-	-
17	Strategy Subtotal					50.0	-	50.0	-	-	50.0		-	-	-	-	-
18																	
19	<b>Administration</b>																
20	Focus Area Administration		Trust	AG		70.0	-	70.0	-	-	70.0		70.0	-	70.0	-	-
21	Strategy Subtotal					70.0	-	70.0	-	-	70.0		70.0	-	70.0	-	-
22																	
23	<b>Substance Abuse Prevention and Treatment Focus Area Total</b>						450.0	-	450.0	-	-	450.0	400.0	-	400.0	-	-

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC
5	<b>Disability Justice Focus Area</b>					Type	<b>FY18 Recommendations</b>						<b>FY19 Recommendations</b>				
6		GIFTS ID	Dept/RDU   Component (or recipient)		Operating (O) / Capital (C) / Auth Grant (AG)	<b>Sum of MHTAAR &amp; AG</b>	<b>MHTAAR</b>	<b>Authority Grant</b>	<b>GF/MH</b>	<b>Other</b>	<b>Total</b>		<b>Sum of MHTAAR &amp; AG</b>	<b>MHTAAR</b>	<b>Authority Grant</b>	<b>GF/MH</b>	<b>Other</b>
7	<i>Disability Justice administrative costs</i>																
8	Focus Area Administration				AG	60.0	-	60.0	-	-	60.0		60.0	-	60.0	-	-
9	<b>Strategy Subtotal</b>					<b>60.0</b>	<b>-</b>	<b>60.0</b>	<b>-</b>	<b>-</b>	<b>60.0</b>		<b>60.0</b>	<b>-</b>	<b>60.0</b>	<b>-</b>	<b>-</b>
10																	
11	<b>Disability Justice Focus Area Total</b>					<b>60.0</b>	<b>-</b>	<b>60.0</b>	<b>-</b>	<b>-</b>	<b>60.0</b>		<b>60.0</b>	<b>-</b>	<b>60.0</b>	<b>-</b>	<b>-</b>

	A	B	C	D	N	BO	BP	BQ	BR	BS	BT	BX	BY	BZ	CA	CB	CC
5	<b>Advisory Board Requests</b>					Type	<b>FY18 Recommendations</b>					<b>FY19 Recommendations</b>					
6		GIFTS ID	Dept/RDU   Component (or recipient)		Operating (O) / Capital (C) / Auth. Grant (AG)	<b>Sum of MHTAAR &amp; AG</b>	<b>MHTAAR</b>	<b>Authority Grant</b>	<b>GF/MH</b>	<b>Other</b>	<b>Total</b>		<b>Sum of MHTAAR &amp; AG</b>	<b>MHTAAR</b>	<b>Authority Grant</b>	<b>GF/MH</b>	<b>Other</b>
7	<i>Capital Requests (sponsored by all boards)</i>																
8		Deferred Maintenance <i>(fund in even fiscal years)</i>	DHSS/Dept Support Services   Facilities Management		C	250.0	250.0	-	250.0	-	500.0		-	-	-	-	-
9		Medical Appliances and Assistive Technology	DHSS		C	150.0	150.0	-	500.0	-	650.0		-	-	-	500.0	-
10		Coordinated Community Transportation (FY 2018 - FY 2022 - MHTAAR Lapses June 30, 2022)	DOTPF/Program Development   Alaska Transit Office		C	300.0	300.0	-	1,000.0	-	1,300.0		300.0	300.0	-	1,000.0	-
11		Essential Program Equipment (FY 2018 - FY 2022 - MHTAAR Lapses June 30, 2022) (fund in odd fiscal years)	DHSS/Dept Support Services   Facilities Management		C	-	-	-	-	-	-		250.0	250.0	-	250.0	-
12																-	-
13		<b>Capital Subtotal</b>				<b>700.0</b>	<b>700.0</b>	<b>-</b>	<b>1,750.0</b>	<b>-</b>	<b>2,450.0</b>		<b>550.0</b>	<b>550.0</b>	<b>-</b>	<b>1,750.0</b>	<b>-</b>
14																	
15		<b>Advisory Board Total</b>				<b>700.0</b>	<b>700.0</b>	<b>-</b>	<b>1,750.0</b>	<b>-</b>	<b>2,450.0</b>		<b>550.0</b>	<b>550.0</b>	<b>-</b>	<b>1,750.0</b>	<b>-</b>
16																	