

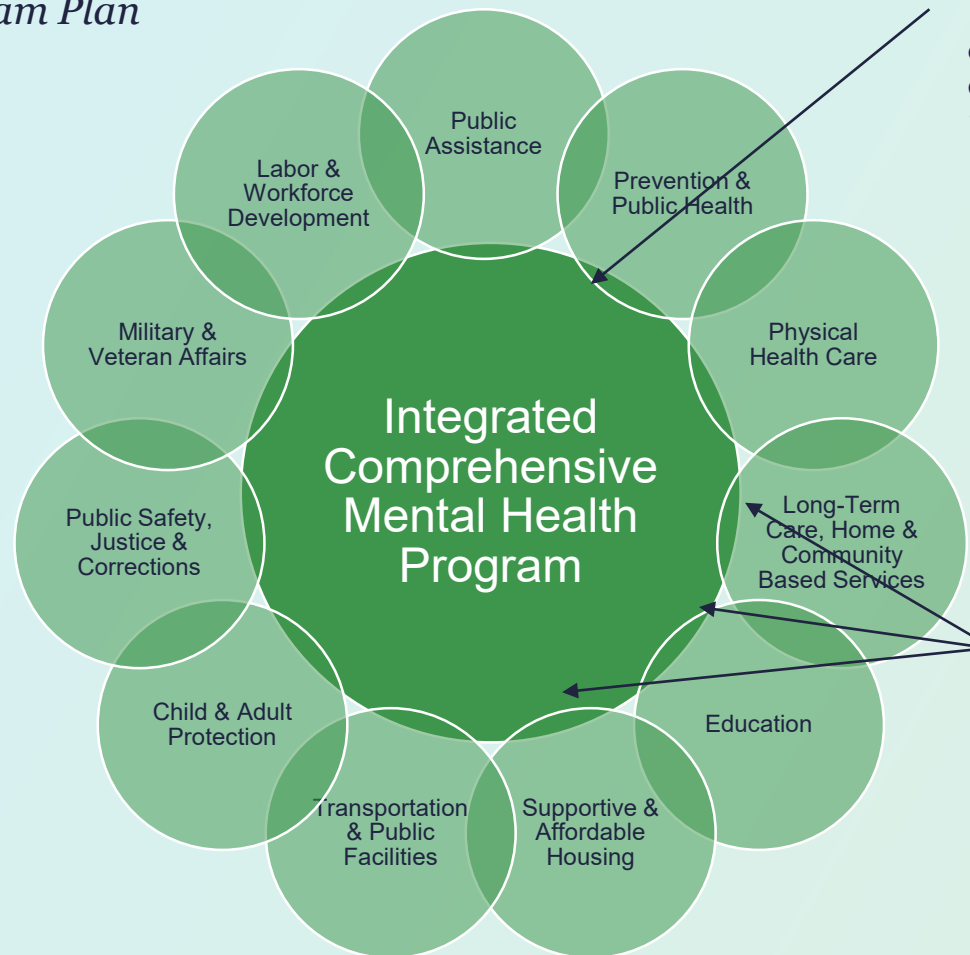
# Strengthening the System:

Alaska's Comprehensive Integrated Mental Health Program Plan, 2020-2024

# Integrated Comprehensive Mental Health Program

*State and Tribal plans inform and are informed by the Comprehensive Program Plan*

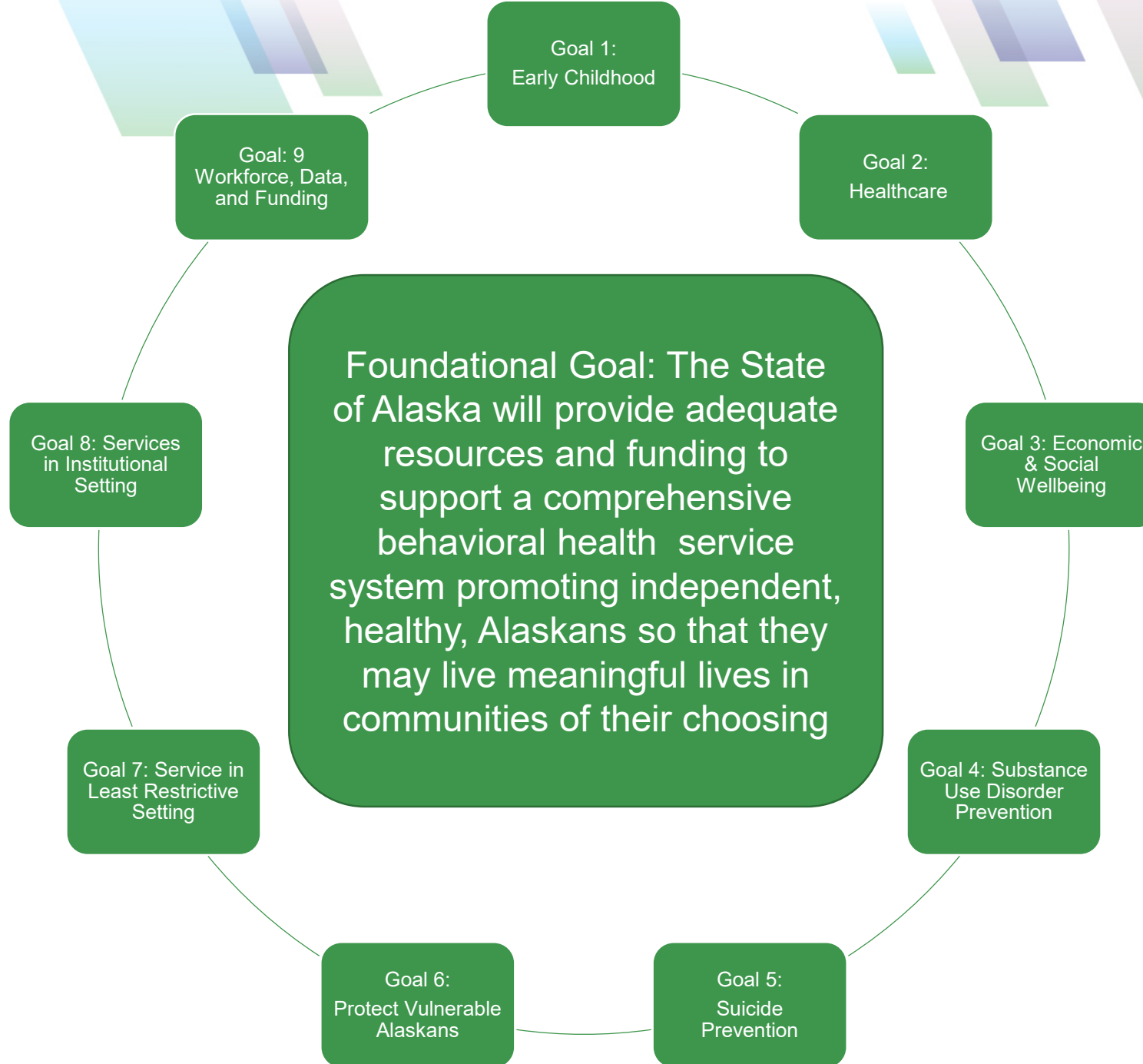
COMPREHENSIVE  
MENTAL HEALTH  
PROGRAM PLAN



**“Core”:**  
Programs supported with funds from the Mental Health Budget or State operating and capital funds clearly allocated to advance the Comprehensive Mental Health Program

**Integrated:**  
Areas of Mission Overlap & Shared Responsibility

LIFESPAN: from the prenatal period through end of life



The plan can be found here:  
<http://dhss.alaska.gov/Commissioner/Pages/MentalHealth/default.aspx>



# Alaska Scorecard 2019

Key Issues Impacting Alaska Mental Health Trust Beneficiaries



Click on the title of each indicator for a link to complete sources and information

Key to symbols: ✓ Satisfactory ↔ Uncertain ✗ Needs Improvement

Most Current U.S. Data Previous Year's Alaska Data Most Current Alaska Data Status

## Health

<b>Suicide</b>					
1	Suicide (rate per 100,000)	14.2	28.9	24.9	✗
2	Percent of adults reporting serious thoughts of suicide	4.3%	5.3%	5.9%	✗

<b>Substance Abuse</b>					
3	Alcohol-induced deaths (rate per 100,000)	9.9	19.8	26.3	↔
4	Percent of adults (age 18+) who engage in heavy drinking	6.5%	8.4%	7.1%	↔
5	Percent of adults (age 18+) who engage in binge drinking	16.2%	17.3%	16.4%	↔
6	Percent of population (age 12 and older) who use illicit drugs	11.4%	16.8%	18.1%	✗
7	Opioid overdose mortality rate	14.6	13.5	8.5	↔

<b>Mental Health</b>					
8	Days of poor mental health in past month (adults ages 18+)	4.0	3.9	3.7	↔
9	Percent of teens who experienced depression during past year	31.5%	33.6%	36.1%	✗

<b>Access</b>					
10	Percent of population without health insurance	8.9%	13.7%	12.6%	↔

## Safety

<b>Protection</b>					
11	Child maltreatment (rate per 1,000)	9.2	15.0	14.2	✗
12	Founded reports of harm to adults (rate per 1,000)	*	1.5	1.3	↔
13	Injuries to older adults (ages 65+) due to falls, hospitalized (rate per 100,000)	1,720	1,069	960	✓
14	Traumatic brain injury, hospitalized non-fatal (rate per 100,000)	*	78.1	78.1	↔

<b>Justice</b>					
15	Percent of incarcerated adults with mental illness or mental disabilities	*	44.1%	44.1%	✗
16	Rate of criminal recidivism for incarcerated adults with mental illness or mental disabilities	*	39.2%	38.9%	↔
17	Percent of arrests involving alcohol or drugs	*	42.5%	43.5%	↔

## Living With Dignity

<b>Accessible, Affordable Housing</b>					
18	Chronic homelessness (rate per 100,000)	29.3	43.8	31.6	↔

<b>Educational Goals</b>					
19	High School Graduation rate for students with disabilities	*	56.9%	59.8%	↔
20	Percent of youth who received special education who are employed or enrolled in post-secondary education one year after leaving school	*	66.1%	68.3%	↔

## Economic Security

21	Percent of income spent on housing if earning minimum wage	*	81.9%	81.6%	✗
22	Average annual unemployment rate	3.9%	7.2%	6.8%	✗
23	Percent of SSI recipients who are blind or disabled and are working	4.8%	6.7%	6.4%	✓

## Prevalence Estimates: Alaska Mental Health Trust Beneficiaries

Alaska Mental Health Trust Beneficiary Population	Estimate	Population Rate
Serious Mental Illness (ages 18+)	29,565	5.4%
Serious Emotional Disturbance (ages 9 to 17)	5,581	6.0%
Any Mental Illness (ages 18+)	112,239	20.5%
Alzheimer's Disease (ages 65+)	8,000	9.2%
Traumatic brain injury (all ages)	11,745	1.6%
Developmental disabilities (all ages)	11,745	1.6%
Dependent on and abuse of alcohol (ages 12 to 17)	1,247	2.1%
Dependent on and abuse of alcohol (ages 18+)	40,570	7.4%
Dependent on and abuse of illicit drugs (ages 18+)	18,834	3.4%

February 2020

# Resources: Alaska Scorecard

## Outcomes and Monitoring

<http://dhss.alaska.gov/Commissioner/Documents/MentalHealth/resources.pdf>



# What is the Alaska Scorecard?

The Alaska Scorecard has been the tool used by many policy makers, advocates, grant writers, Trust staff, etc. to measure the outcomes of the previous Comp Plan, titled *Moving Forward*, from 2007 until 2019.

The scorecard has been updated to reflect the desired outcomes of *Strengthening the System*.



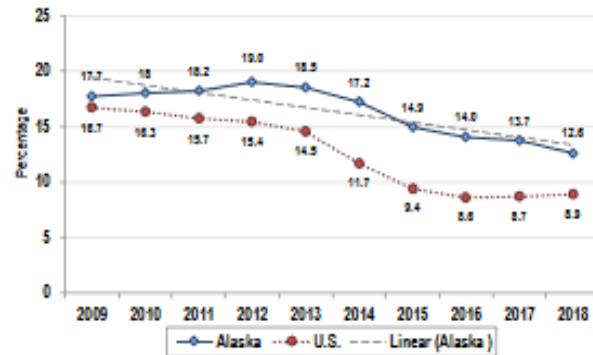
# 2020 Updated Alaska Scorecard Process

- The primary indicators were vetted by the Comp Plan leadership team.
- Narratives to explain the story behind the population health indicators will be finalized in the coming months.
- The leadership team works with data source contacts to ensure baseline data is timely and reliable.
- Scorecard indicators are formatted using a Results Based Accountability (RBA) format.

## Health: Access

### 10. Population without Health Insurance

Percentage of population not covered by health insurance for the year, Alaska and U.S., 2009 – 2018



Source: U.S. Census Bureau (2018). American Community Survey Tables for Health Insurance Coverage, Table HI-05.<sup>47</sup>

#### Summary and Explanation:

- In 2018, 12.6% of Alaska's population was counted as uninsured. Alaska's rate was 42% higher than the U.S. rate of 8.9%.
- The U.S. rate has fallen each year since 2009. The Alaska rate has fallen since 2013, but stayed approximately steady from 2016 to 2018.

#### Other Facts to Know:

- Uninsured rates decreased between 2013 and 2018 following the introduction of the Affordable Care Act. Among states, Alaska had the fifth highest (behind Texas, Oklahoma, Georgia and Florida) proportion of uninsured population in 2018.<sup>48</sup>
- The Census definition of "uninsured" includes American Indian/Alaska Native (AI/AN) people who may have access to IHS-funded services.<sup>49</sup> If otherwise-uninsured American Indians

<sup>47</sup> Available at <https://www.census.gov/data/tables/time-series/demo/health-insurance/aca-hi-2015.html>.

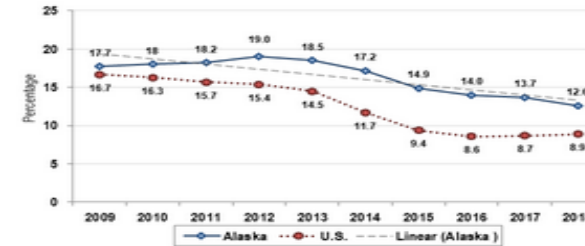
<sup>48</sup> U.S. Census Bureau (2018). American Community Survey Tables for Health Insurance Coverage, Table HI-12. Available at <https://www.census.gov/data/tables/time-series/demo/health-insurance/aca-hi-2015.html>

<sup>49</sup> U.S. Census Bureau (2015). Current Population Reports, P80-253, Health Insurance Coverage in the United States: 2014. "What is Health Insurance Coverage?" Available at <http://www.census.gov/content/dam/Census/library/publications/2015/demo/p80-253.pdf>.

## Healthcare

### Goal 2: Alaskans have Access to Integrated Healthcare Options that Promote Optimal Health, Wellness, and Independence

Indicator: Percentage of population without health insurance in Alaska and U.S., 2009 – 2018



Population: Alaska Statewide

Population Results: *Comp Plan Objective: 2.1: Alaskans have access to integrated healthcare options that promote optimal health, wellness, and independence healthcare services.*

**Story behind the baselines (Info, research, agenda, "causes"):** Without access to and coverage for healthcare services, which include behavioral health in all geographic areas, there is increased risk of Alaska's population having poor physical and mental health outcomes. The Department of Health and Social Services strives to meet the goal of all Alaskans having access to health care services by having 100% of the population with adequate health insurance. In 2018, only 8.9% of Alaskans were uninsured, compared to 12.6% nationally. Even with access to health insurance, barriers continue to exist in receiving services. There are often long wait times for the first appointment for a new patient, and currently, many primary care providers have stopped accepting new patients on Medicare or Medicaid. This wait often leads patients to decide to not access care, seek care in a more expensive setting such as an Emergency Room, or they recover from the acute illness without being examined or provided a diagnosis of illness. Location of services in Alaska also presents as a barrier as air travel is often necessary in order to seek health care. Telehealth appointments can offer a range of necessary services, however barriers such as the type of services offered and limited technology put limits on the telehealth capacity.

#### Partners:

- Centers for Medicare and Medicaid
- Indian Health Services
- Alaska Primary Care Association
- Alaska Behavioral Health Association
- Alaska Mental Health Trust Authority

#### What Works? (Info, research, "solutions"- include no cost/ low cost ideas)

Alaskans must be healthy if the state is to thrive. When a population is healthy, more people attend work and school, participate in their communities, engage in traditional cultural practices, and care for their families. Uninsured rates decreased between 2013 and 2018 following the introduction of the Affordable Care Act. Among states, Alaska had the fifth highest (behind Texas, Oklahoma, Georgia and Florida) proportion of uninsured population in 2018.<sup>51</sup> In many states across the nation, state health departments have partnered with federally qualified health centers (FQHCs) and rural health clinics (RHCs). Insured or uninsured patients can access these facilities which offer a sliding scale fee to those without health insurance. Here in Alaska, Alaska Primary Care Association has 27 FQHCs and is a strong provider offering medical care, behavioral health treatment, and dental services.



# Barriers to Timeline

- Strengthening the System's focus on upstream prevention effort and its emphasis on young children makes it challenging to find established reliable data sources.
- Data timeliness has been an ongoing barrier for new indicators.
- Compiling data from multiple sources slows down the data requests.
- Many of the potential data sources identified are too narrow in scope and focus on the quantity and quality of a specific program or clinical aspect of a specific system.



# Population Based vs. Process Driven

Population Accountability focuses on a large population or geographic area, such as all Alaskans, all Trust beneficiaries, all elders in rural Alaska.

Focus on whole populations without regard to whether they are getting services from anyone or not. It is bigger than any one program.

## Example - Goal 3: Economic & Social Well-Being

- Population: All Alaskans (statewide population)
- Population result: Trust beneficiaries have strong economic and social well-being
- Indicator: Percentage of rental occupied households that exceed 50 percent of household income dedicated to housing (3.1)



# Goal 5 - Suicide Prevention

**5.1 Objective: Coordinate prevention efforts to ensure that Alaskans have access to a comprehensive suicide prevention system.**

- **Indicator: Rate of suicide attempts (rate per 1,000 ED visits).**



# Goal 5 - Suicide Prevention

**5.2 Objective: Support and improve the system to assist individuals in crisis.**

- Indicator: Rate of suicide (rate per 100,000; age adjusted)
- Indicator: Rate of suicide (rate 15-24 year old)



# Goal 7- Services in the Least Restrictive Environment

**7.2 Objective:** Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement.

- **Indicator:** Percentage of Alaskans who meet criteria for an institutional level of care who were served by a home and community-based waiver



# Goal 7- Services in the Least Restrictive Environment

**7.3 Objective: Reduce the number of Trust beneficiaries entering or becoming involved with Alaska's criminal justice or juvenile justice system**

- **Indicator: Percentage of all therapeutic court referrals that were diverted from regular court action and admitted to a therapeutic court.**
- **Indicator: Percentage of all juvenile justice referrals that were diverted from formal court action.**



# Goal 8- Services in Institutional Settings

**8.1 Objective: Establish a standard of care to ensure individuals receive appropriate therapy and supports while residing in psychiatric settings in state or out of state.**

- **Indicator: Readmission to any psychiatric hospital: 30 days (18+ years old)**
- **Indicator: Readmission to any psychiatric hospital: 30 days (younger than 18)**



# What's Next: Digital Format

- Historically the Alaska Scorecard has been a PDF of 60+ pages. The workgroup is encouraging the use of an interactive, web-based software that aligns with RBA's method of producing minimum paper and modernizes how users can interact with the Scorecard.
- The previous Alaska Scorecard is downloaded about 1500+ times per year.



# Comp Plan Position

- The Comp Plan Coordinator position works collaboratively with the Trust to prepare, and periodically revise and amend the Comp Plan.
- The Coordinator will serve as the DHSS lead responsible for alignment of staff and projects within the department, data tracking and evaluation, and full engagement with partners and stakeholders for the most recent plan.
- The Comp Plan position will be posted to workplace Alaska in January.



# MOA- Addendum

- The 2018 MOA for the Comp Plan was updated via an addendum in November 2020 in accordance with the *Review of Agreement* provision.

November 2020 *	<ul style="list-style-type: none"><li>• Final primary indicators chosen</li></ul>
January 15, 2021 *	<ul style="list-style-type: none"><li>• Final narrative written for all primary indicators</li></ul>
February 15, 2021*	<ul style="list-style-type: none"><li>• Finalize data to include baseline data for each indicator</li></ul>
March 1, 2021*	<ul style="list-style-type: none"><li>• Complete the Alaska Scorecard and any corresponding Trust Beneficiary prevalence data</li></ul>
March 15, 2021	<ul style="list-style-type: none"><li>• Completed Scorecard is posted to DHSS website</li></ul>
April 30, 2021	<ul style="list-style-type: none"><li>• Develop an actionable plan to procure and implement web-based interactive scorecard platform.</li></ul>
May 1, 2021	<ul style="list-style-type: none"><li>• Finalize implementation framework and action planning documents</li><li>• Provide a summary of any changes to indicators, indicator targets, and prevalence data for the next annual update</li></ul>
June 15, 2021	<ul style="list-style-type: none"><li>• Convene Comp Plan leadership group to discuss maintenance of effort for the coming years</li></ul>

\* Concurrently working to find a suitable web-based interactive scorecard platform.



# Crisis Continuum of Care

The Scorecard supports the work the Trust does by aiding in date driven decision making.

The scorecard with its new format will help to highlight gaps in the service continuum of care.

It will also guide program officers to direct resources in the areas of the Comp Plan that need significant improvement and or investment.



**Thank You!**