



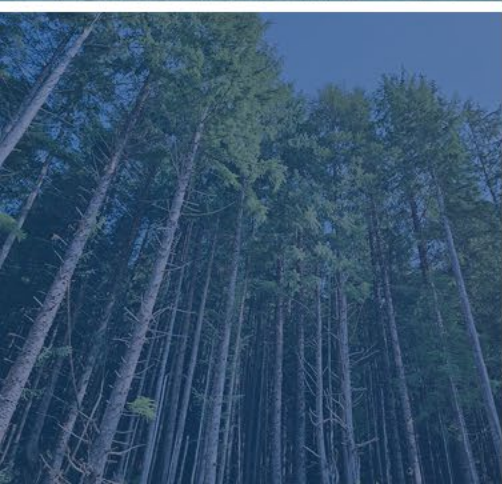
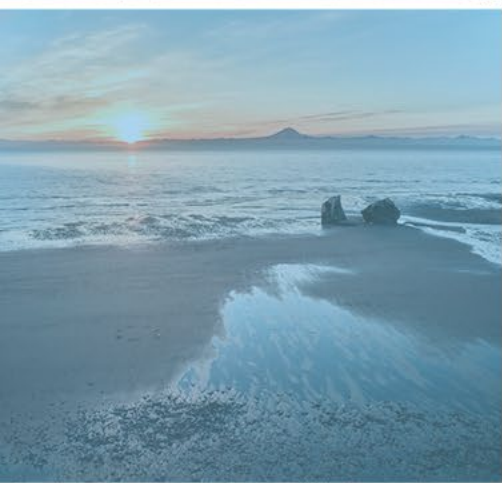
# The Alaska Mental Health Trust Mini-Grant Follow-up April 24, 2025

# Purpose for today:

- Follow-up to the October 2024 presentation
- Present survey and listening session findings
- Share additional data
- Opportunity for dialogue and next steps







# Mini-Grant Program: An Overview

- Established in FY99
- Overseen by the Trust since FY08
- Provides grants up to \$2,500 to Trust beneficiaries via community organizations
- Community organizations apply on behalf of Trust beneficiaries
- Due to regulatory constraints, the Trust cannot award grants directly to individuals
- Supports Behavioral Health (BH), Alzheimer's Disease and Related Dementias (ADRD), and Developmental Disabilities (DD)

# Survey and Listening Session: Purpose and Scope

## Purpose:

- Gather feedback to improve the mini-grant program and address beneficiary needs

## Scope:

- March 2025 survey and listening session evaluated the DD, BH, and ADRD mini-grant programs





# Survey and Listening Session: Objectives and Participation

## Objectives:

- Assess program accessibility and eligibility
- Evaluate guideline clarity and application processes
- Identify unmet Trust beneficiary needs and challenges
- Gather suggestions for program enhancement

## Participation:

- 95 survey completes (10% response rate)
- 13 participants in the listening session, including representatives from community agencies, caregivers, and beneficiaries



# Survey & Listening Session: Key Themes

## Eligibility & Identification:

- Recipients are typically clients of partner agencies
- Clients are identified via family requests, team meetings, or clinician referrals.

## Clarity of Guidelines:

- Generally clear, but more straightforward outlines of acceptable items/services requested

## Greatest Client Needs:

- Housing assistance, communication support, therapy supplies, technology (e.g., laptops), furniture



# Survey & Listening Session: Challenges & Unmet Needs

## Challenges

- Administrative burden
- Difficulties providing proof of delivery
- Complicated Medicaid denial requirements

## Unmet Needs

- Rising costs for direct services (e.g., respite care)
- Funding limitations on high-demand items (e.g., beds, home modifications).



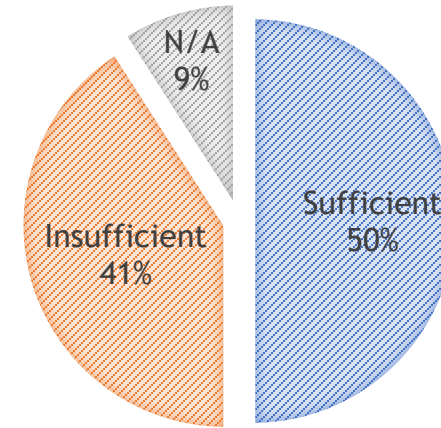
# Survey & Listening Session: Challenges & Unmet Needs

## Processing Time

- Simple cases: 1-5 hours
- Complex cases: Weeks to months (documentation delays, shipping)

## Administrative Cost Feedback

- Current reimbursement: \$100 per grant



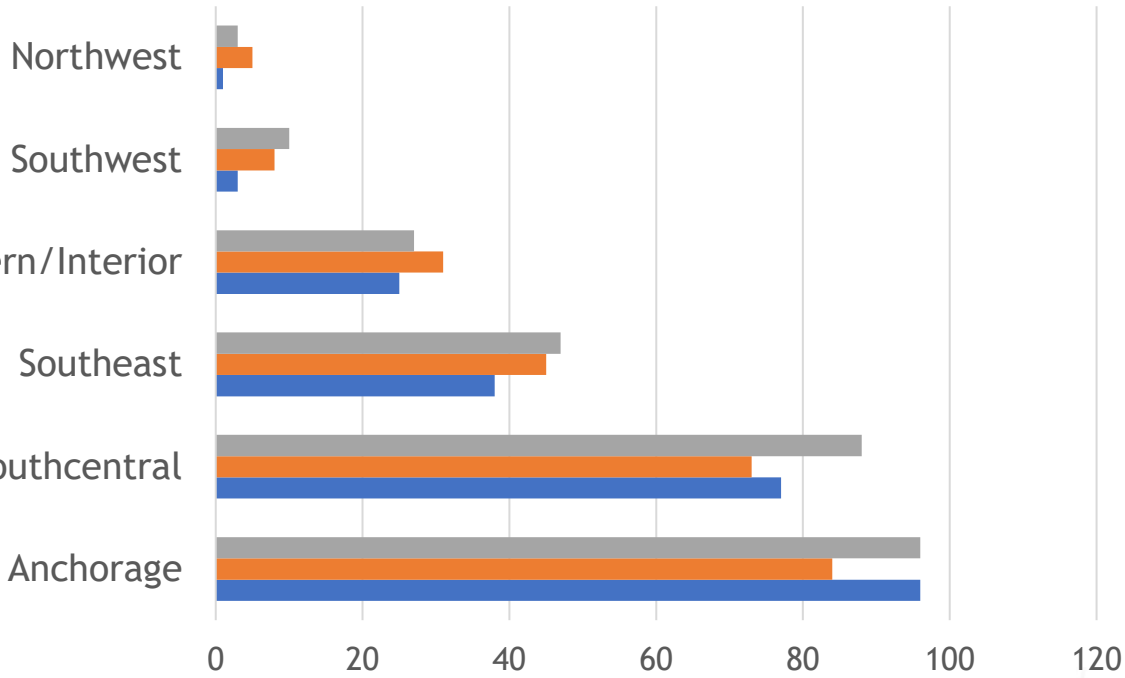
Suggested increases: \$150 - \$500 (higher staff time/costs)





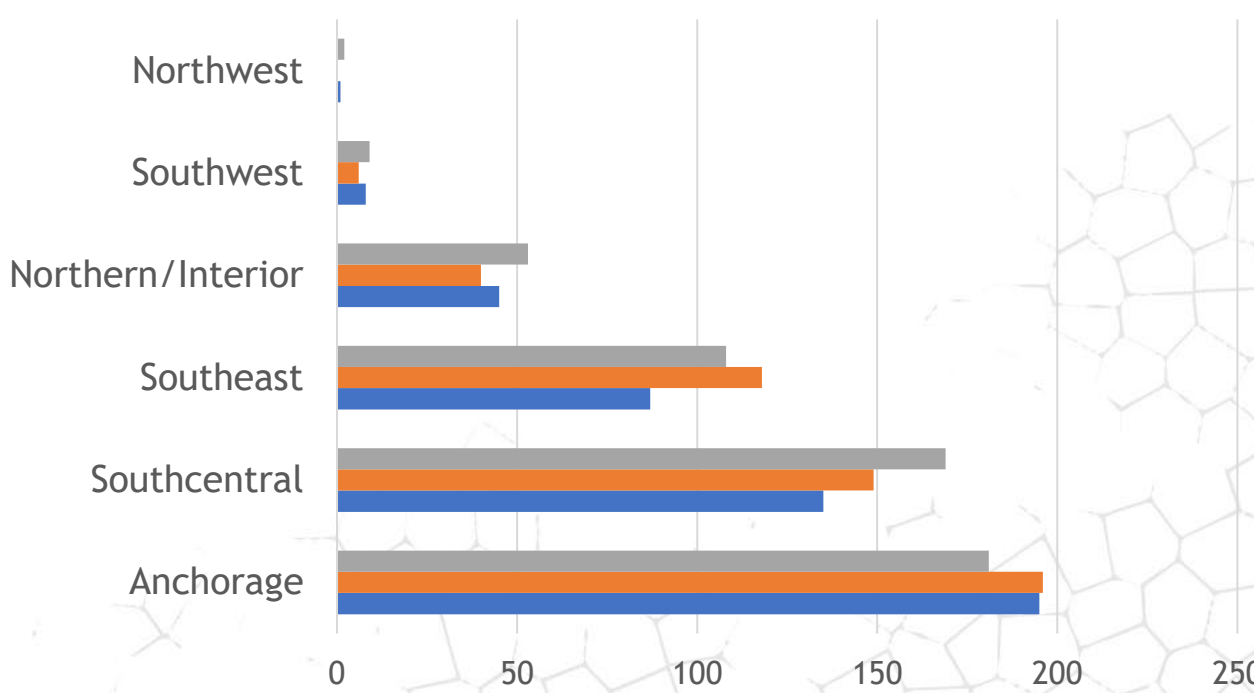
# Trends in Regional Distribution, DD & BH, FY21→ FY23

Developmental Disabilities



	Anchorage	Southcentral	Southeast	Northern/Interior	Southwest	Northwest
FY23	96	88	47	27	10	3
FY22	84	73	45	31	8	5
FY21	96	77	38	25	3	1

Behavioral Health

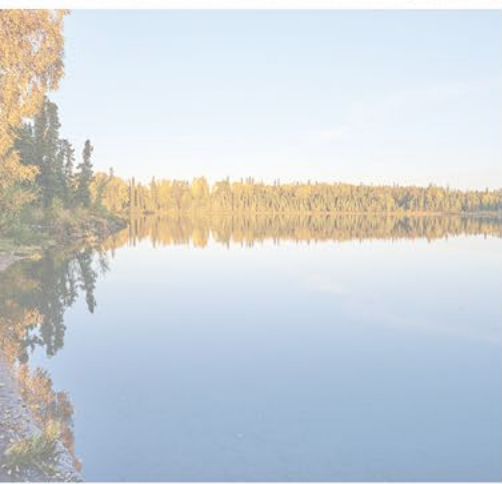


	Anchorage	Southcentral	Southeast	Northern/Interior	Southwest	Northwest
FY23	181	169	108	53	9	2
FY22	196	149	118	40	6	0
FY21	195	135	87	45	8	1



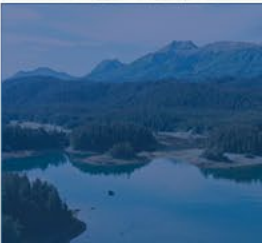
# Key Takeaways from March Outreach

- Beneficiaries & partners highly value the program
- Guidelines generally clear
- Administrative burden
- Clarify and update guidelines (in progress)
- Consider the impact of rising costs for goods and services



# Identified Next Steps

- Increase access in underrepresented regions
  - Targeted outreach to tribal partners & rural providers
  - Expand communication activities in select areas
- Monitor, evaluate, and refine the program
  - Revise guidelines, and focus on acceptable items
  - Update data collection, revise grant application process



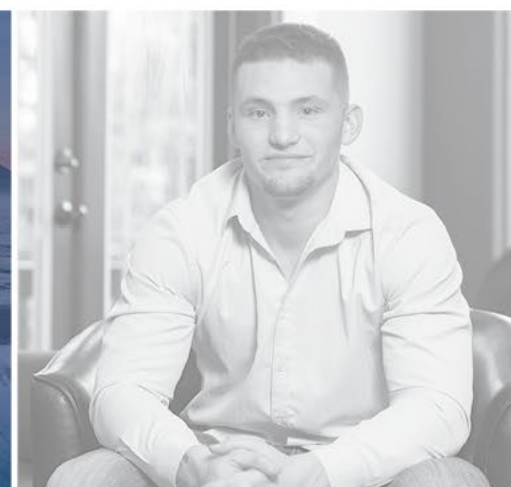
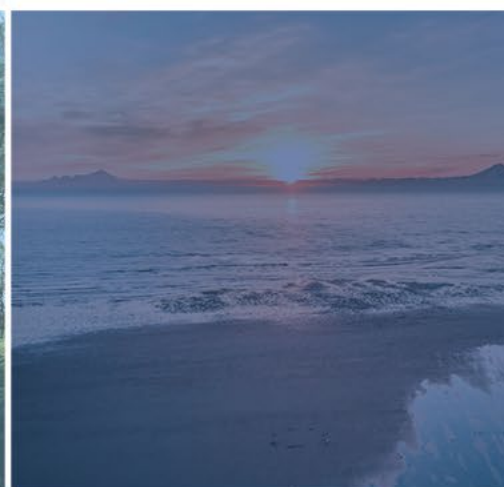


# Discussion: Future of the Program

## Considerations:

- Grant Program Format
  - Status quo/incremental improvements?
  - Updating the model (in-house vs. outsource admin)?
  - Regional grant programs to help balance geographical differences?
- Investment Amount
  - Increase individual amount?
  - Increase overall program investment?





Thank You

