

State of Alaska FY2009 Governor's Operating Budget

Department of Health and Social Services AK Mental Health & Alcohol & Drug Abuse Boards Component Budget Summary

Component: AK Mental Health & Alcohol & Drug Abuse Boards

Contribution to Department's Mission

Advisory Board on Alcoholism and Drug Abuse (ABADA) and the Alaska Mental Health Board (AMHB) Joint Vision: Alaskans Living Healthy and Productive Lives.

ABADA. In partnership with the public, the Advisory Board on Alcoholism and Drug Abuse plans and advocates for policies, programs, and services that help Alaskans achieve healthy and productive lives, free from the devastating effects of the abuse of alcohol and other substances. (Adopted August 1997)

AMHB. The mission of the Alaska Mental Health Board is to ensure an integrated, comprehensive mental health program for persons with mental disorders in Alaska. The board is the state planning and coordinating agency for the purpose of federal and state laws relating to the mental health program for the state. The board is also tasked with evaluating the effectiveness of the program. The board advocates for Alaskans with mental disorders and those who may be at risk of mental disorders.

Core Services

ADVISORY BOARD ON ALCOHOL AND DRUG ABUSE

State statute authorizes the Board to:

Advise the Legislature, the Governor, and state agencies on the following matters:

- special problems affecting mental health that alcoholism or drug abuse may present;
- educational research and public informational activities in respect to the problems presented by alcoholism or drug abuse;
- social problems that affect rehabilitation of alcoholics and drug abusers;
- legal processes that affect the treatment and rehabilitation of alcoholics and drug abusers;
- development of programs of prevention, treatment, and rehabilitation for alcoholics and drug abusers; and
- evaluating the effectiveness of alcoholism and drug abuse programs in the state.

Provide recommendations to the Alaska Mental Health Trust Authority concerning the integrated comprehensive mental health program for chronic alcoholics and the use of money in the mental health trust settlement income account.

Act as the planning and coordinating body for purposes of federal and state laws relating to alcohol, drug and other substance abuse prevention and treatment services.

Prepare and maintain a comprehensive plan of services for the prevention and treatment of alcohol, drug, and other substance abuse.

ALASKA MENTAL HEALTH BOARD

By state statute, the board is the state planning and coordinating agency for the purpose of federal and state laws relating to the mental health program for the state.

On behalf of persons with mental disorders, the board shall:

- Prepare and maintain a comprehensive plan of treatment and rehabilitation services;
- Propose an annual implementation plan consistent with the comprehensive plan and with due regard for the

findings from evaluation of existing programs;

- Provide a public forum for the discussion of issues related to mental health services for which the board has planning and coordinating responsibility;
- Advocate for the needs of persons with mental disorders before the Governor, executive agencies, the Legislature, and the public.

Advise the Legislature, the Governor, the Alaska Mental Health Trust Authority, and other state agencies in matters affecting persons with mental disorders, including, but not limited to, development of necessary services for diagnosis, treatment, and rehabilitation; evaluate the effectiveness of programs in the state for diagnosis, treatment, and rehabilitation; legal processes that affect screening, diagnosis, treatment and rehabilitation;

Provide to the Alaska Mental Health Trust Authority recommendations concerning the integrated comprehensive mental health program for those who are mentally ill or determined to need mental health services by the Legislature, and the use of money in the mental health trust settlement income account; and

Submit periodic reports regarding its planning, evaluation, advocacy, and other activities.

Other duties of the Boards include:

Prepare a shared plan identifying behavioral health prevention and treatment needs of all Alaskans and advocate for a program that meets these needs;

Assist individuals with mental health and substance abuse problems to advocate for themselves and their communities with the Legislature and administration;

Identify long-term sustainable funding mechanisms for behavioral health programs;

Assure that the mental health program is guided by the assertion that recovery from mental illness and substance dependency is possible for all board beneficiaries.

FY2009 Resources Allocated to Achieve Results		
FY2009 Component Budget: \$982,300	Personnel:	
	Full time	7
	Part time	0
	Total	7

Key Component Challenges

- Continue to inform and educate the administration, Legislature and the public regarding the needs of persons represented by the boards including those experiencing mental illness, substance dependence and co-occurring disorders.
- Advocate for sustainable funding for the state’s behavioral health program including flexible funding adequate to ensure availability of needed services identified in the board plan.
- Participate in developing of integrated behavioral health regulations to ensure a rigorous regulatory structure and equitable reimbursement for mental health and substance abuse providers.
- Increase coordination and collaboration between Department of Health and Social Services, the Boards and Commissions, other departments, and their related boards to improve the behavioral health of all Alaskans.
- Continue to address the issues raised by the department’s reorganization and integration of services, placing

emphasis on assessing outcomes and impact on service recipients and communities.

- Strengthen the ABADA and the AMHB joint advocacy plan and include all stakeholders in grassroots advocacy efforts.
- Implement, evaluate and advocate for the ABADA and AMHB Joint Plan.
- With the department and the Trust, ensure the implementation and maintenance of the AKAIMS and Outcomes Identification and Systems Performance Project (OISPP); promote use of this data to respond to state and federal reporting requirements and to track program effectiveness.
- Advocate for sufficient funding to assure strong administrative support from the Department of Health and Social Services for behavioral health program efforts.
- Restore quality assurance processes designed to evaluate and improve the quality of services in both outpatient and inpatient settings that focus on consumer, family and community needs in addition to assessing regulatory compliance.
- Continue to develop a more consumer-centered mental health system promoting greater consumer involvement and leadership in state-level and program-level policy and planning processes.
- Identify the cost savings that result from prevention, early intervention, recovery-oriented programs and services delivered in the least restrictive setting.
- In partnership with the Department of Health and Social Services, implement recommendations from the Senate sponsored Medicaid study, including a proposed Medicaid substance abuse treatment waiver.
- Assess the effectiveness of current funding mechanisms and the resulting program paradigms, and advocate for funding models that balance fiscal sustainability with effective service delivery.
- Continue to assure that the two boards and their joint staff represent the unique needs of their two constituent groups while working together to serve the broader behavioral health needs of those with co-occurring disorders.
- Identify appropriate funding for the boards to perform their statutory roles.
- The boards will convene a working group to develop a Behavioral Health Plan for the state of Alaska. Participants will include the departments of Health and Social Services, Corrections, and Education and Early Development, Alaska Native behavioral health providers as well as private third party payers. The plan will identify existing and needed resources, and outline an interdepartmental strategy for coordinating statewide behavioral health services. The expected outcome is enhanced coordination and efficient provision of prevention and treatment services to all Alaskans.
- The boards' advocacy strategy will focus on the cost of not addressing the identified need for mental health and substance abuse prevention, early intervention and treatment services. Data will reveal the current costs incurred to the state of Alaska in public safety, courts and corrections and projected savings that could be achieved if all Alaskans had access to early and ongoing behavioral health services.

ABADA specific:

Monitor the capacity of the behavioral health system to deliver services to high-risk target populations. This requires reducing the waitlist for people with chronic alcoholism and co-occurring disorders, HIV, pregnant women, women with children, youth and adolescents both in and out of the juvenile justice system.

Advocate for a full continuum of services for those who are alcohol dependent, including availability of secure, involuntary treatment options.

Advocate for and support the Meeting the Challenge Initiative and the development and implementation of the Friends of Recovery.

AMHB specific:

Monitor the capacity of the behavioral health system to deliver services to high risk populations. This requires waitlist reduction for children and families, adolescents and adults with mental illness and co-occurring disorders.

With Alaska Psychiatric Institute's (API) downsizing, ensure adequate community services are available to beneficiaries.

Significant Changes in Results to be Delivered in FY2009

There are no service level changes for FY09.

Major Component Accomplishments in 2007

- With the Trust, the boards participated in a statewide anti-stigma campaign targeting the general public with the message "You Know Me." Using print and broadcast mediums, the boards developed messages designed to educate people on the prevalence of mental illness and substance abuse, the cost to individuals and communities and the importance of treatment.
- The boards helped develop and complete a Trust sponsored study of the impact of Medicaid refinancing on the availability of services to beneficiaries. As members of the study Steering Committee, board staff helped guide the study scope of work, select the contractor and work with the Trust and other boards to monitor progress of the study. The resulting report will be valuable in continuing advocacy efforts to secure additional funding for behavioral health programs and services.
- At the request of the Division of Behavioral Health, and in conjunction with the other beneficiary boards, the boards participated in two projects addressing problems within the behavioral health service system. The Connecting Systems Project studied the reasons why clients were sometimes misdirected or bounced between service systems without receiving needed services, and the API Census Project investigated factors contributing to high census numbers at the state's inpatient psychiatric facility. These projects helped build working relationships while finding solutions to serious system problems.
- Board staff made significant contributions to the Division of Behavioral Health's data development activities. In addition to participating on the division's OISPP Committee, Performance-Based Funding Workgroup, and Comprehensive Integrated Mental Health Plan Research and Data Subcommittee, board staff collected and compiled an unduplicated count of the number of individuals served by the division in FY06. Board staff are currently in the process of collecting this information for FY07.
- As part of the Bring the Kids Home project, a partnership between the Trust and the Division of Behavioral Health, the boards hosted a monthly statewide "Family Voice" teleconference. The call provides a mechanism for youth and their families who are clients of the behavioral health system to share information and contribute their "voice" in the planning and advocacy efforts of the boards.
- The boards participated in the continued development, planning and implementation of the Alaska Mental Health Trust Authority's Focus Areas - Housing; Bring the Kids Home; Disability Justice; Trust Beneficiary Group Initiatives - and the Trust's Request for Recommendations (RFR) process for the FY07 budget.
- The boards strengthened their advocacy efforts through their ongoing work with a statewide, grassroots advocacy network. Advocacy success included passage of bills reauthorizing the Senior Benefits program, reestablishing the Denali KidCare eligibility limit at 175% FPL and strengthening in statute the Department of Health and Social Services duties to serve individuals with co-occurring disorders and pregnant women.

Statutory and Regulatory Authority

ABADA:

AS 47.30.470-500	Welfare, Social Services & Institutions, Mental Health
AS 47.37	Welfare, Social Services & Institutions, Uniform Alcoholism and Intoxication Treatment Act
Section 44.29.100	Advisory board on alcoholism and drug abuse.

AMHB:

AS 47.30.661-666	Welfare, Social Services & Institutions, Mental Health, Alaska Mental Health Board
------------------	--

Contact Information

Contact: Laura Baker, Budget Chief

Phone: (907) 465-1629

Fax: (907) 465-1850

E-mail: Laura.Baker@alaska.gov

**AK Mental Health & Alcohol & Drug Abuse Boards
Component Financial Summary**

All dollars shown in thousands

	FY2007 Actuals	FY2008 Management Plan	FY2009 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	450.8	610.0	641.1
72000 Travel	157.1	66.0	66.0
73000 Services	85.0	236.3	236.3
74000 Commodities	20.2	31.9	31.9
75000 Capital Outlay	0.0	7.0	7.0
77000 Grants, Benefits	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	713.1	951.2	982.3
Funding Sources:			
1002 Federal Receipts	43.4	86.8	88.3
1007 Inter-Agency Receipts	45.0	45.0	45.0
1037 General Fund / Mental Health	307.1	413.3	435.3
1092 Mental Health Trust Authority Authorized Receipts	317.6	406.1	413.7
Funding Totals	713.1	951.2	982.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2007 Actuals	FY2008 Management Plan	FY2009 Governor
Unrestricted Revenues				
None.		0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0
Restricted Revenues				
Federal Receipts	51010	43.4	86.8	88.3
Interagency Receipts	51015	45.0	45.0	45.0
Restricted Total		88.4	131.8	133.3
Total Estimated Revenues		88.4	131.8	133.3

**Summary of Component Budget Changes
From FY2008 Management Plan to FY2009 Governor**

All dollars shown in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2008 Management Plan	413.3	86.8	451.1	951.2
Adjustments which will continue current level of service:				
-Reverse FY2008 MH Trust Recommendation	0.0	0.0	-406.1	-406.1
-FY 09 Health Insurance Increases for Exempt Employees	0.1	0.1	0.0	0.2
-FY 09 Bargaining Unit Contract Terms: General Government Unit	21.9	1.4	10.1	33.4
Proposed budget decreases:				
-Decrease Interagency Receipts	0.0	0.0	-2.5	-2.5
Proposed budget increases:				
-MH Trust: Cont - ABADA/AMHB joint staffing	0.0	0.0	381.1	381.1
-MH Trust: BTKH - Strong family voice: parent and youth involved via AMHB	0.0	0.0	25.0	25.0
FY2009 Governor	435.3	88.3	458.7	982.3

**AK Mental Health & Alcohol & Drug Abuse Boards
Personal Services Information**

Authorized Positions		Personal Services Costs		
	<u>FY2008</u>	<u>FY2009</u>		
	<u>Management</u>	<u>Governor</u>		
	<u>Plan</u>			
Full-time	7	7	Annual Salaries	399,057
Part-time	0	0	COLA	31,273
Nonpermanent	0	0	Premium Pay	5,011
			Annual Benefits	220,357
			<i>Less 2.23% Vacancy Factor</i>	<i>(14,598)</i>
			Lump Sum Premium Pay	0
Totals	7	7	Total Personal Services	641,100

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	1	0	1
Executive Director, Dhss Boards	0	0	1	0	1
Hlth & Soc Svcs Plnr II	0	0	2	0	2
Prog Coordinator	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Totals	0	0	7	0	7