

State of Alaska FY2014 Governor's Operating Budget

Department of Health and Social Services Psychiatric Emergency Services Component Budget Summary

Component: Psychiatric Emergency Services**Contribution to Department's Mission**

Through the award of competitive grants to community/regional Comprehensive Behavioral Health Centers (CBHCs), the Division works to ensure that local communities are able to provide services that protect and treat residents experiencing psychiatric behavioral health emergencies, recognizing that the goal is always to maintain these individuals in the least restrictive, clinically appropriate treatment, closest to their home community.

Core Services

- Provide help to individuals at the onset of a behavioral health crisis or psychiatric emergency recognizing, even at the earliest stages of the intervention, that the goal is always to maintain the individual in the least restrictive and clinically appropriate (“closest to home”) location.
- Provide an array of emergency services that extends from local crisis intervention and assessment services to brief therapeutic interventions that help stabilize a person and offer follow up with local, community-based behavioral health services.
- Provide competitive grants to comprehensive community behavioral health agencies in order to fund services statewide that are intended to aid individuals experiencing a behavioral health crisis.
- Respond to disasters and coordinate or participate in local, state, and federal emergency response efforts.

Major Component Accomplishments in 2012

- In January 2012, the Division sponsored a Change Agent Conference focused specifically on issues related to the State’s emergency services delivery and response system.
- Crisis prevention and intervention training was provided for the staff of two hospitals (PeaceHealth Ketchikan Medical Center and South Peninsula Hospital) and for the staff of these two communities’ associated behavioral health centers with the goal of helping the staff at these local entities feel more competent in working with difficult, aggressive, acting out patients.
- Significant progress was made in making the results of the University of Alaska Anchorage/Alaska Psychiatric Institute Data Project available to behavioral health agencies invested in the State’s emergency services delivery system.
- Coordination between the Division and the Alaska State Hospital and Nursing Home Association and its member hospitals was significantly increased around mutual areas of interest within the State’s behavioral health emergency services system with a focus on the impact on hospital emergency departments when the Alaska Psychiatric Institute is at, or over, its bed capacity and persons committed to Alaska Psychiatric Institute must be held in local hospital emergency departments awaiting bed availability at Alaska Psychiatric Institute.
- Final roll-out in January 2012 of the significantly revised Alaska State Court System forms that pertain to the emergency detention, evaluation, and involuntary commitment of persons experiencing a mental health crisis.

Key Component Challenges

- Each community in Alaska, be it village or urban center, must have the capacity to respond to behavioral health emergencies including psychiatric. In the event local behavioral health options are not available, the psychiatric emergency must be coordinated by local primary care healthcare professionals with behavioral health backup (sometimes via technology or from a regional hub). Local challenges and solutions are as diverse as the geography and cultures of each Alaska community.
- Rural/Frontier challenges include the ability of small communities to coordinate services in such a manner as to preserve the dignity and respect of the person experiencing the crisis. This includes careful liaison with law enforcement, village-based peace officers, primary care practitioners, and behavioral and community health

aides. A greater emphasis must be placed on developing local, hands on, trauma-informed, crisis intervention skills in order to decrease the number of crisis transfers of local residents out of their home communities for stabilization in a regional or urban hospital.

- Suicide knows no boundaries in the State of Alaska. Prevalence rates are unacceptable, be it in urban, rural or frontier communities. The provision of behavioral health emergency services is often the first response in these crisis situations. Reducing the prevalence requires concerned citizens and the community at large to recognize warning signs and, when possible, to invoke appropriate intervention responses. There also exists a need to train first responders in effectively handling traumatic situations should there be a tragic outcome.
- Psychiatric Emergency Services is a part of the continuum of care and is often a partnership between the local or regional behavioral health provider agency, law enforcement, primary care, and a hospital emergency department. Due to the disparity in resources across the State, the level of coordination and attention to clinically appropriate intervention and postvention strategies requires standardization and continuing education.
- The development of quality local Psychiatric Emergency Services throughout the State, as well as the development of alternatives to hospitalization (such as crisis respite beds), is needed to minimize admissions to Alaska Psychiatric Institute - the State psychiatric hospital - which has very limited capacity (80 total beds, with only 50 acute adult beds) and has experienced a significant census increase in recent years.
- Results of the Alaska Screening Tool, which is conducted with everyone who enters behavioral health treatment, indicate that 58% of the people served in the behavioral health system in Alaska have both substance abuse and mental health issues. Work with people who present with behavioral health crises, needs to include screening and intervention for substance abuse as well as mental health issues. While this component is titled "Psychiatric Emergency Services," attention to substance abuse and dependency must be integrated into screening, assessment, and treatment at all points in the continuum.

Significant Changes in Results to be Delivered in FY2014

- Using the data collected in FY2012 and FY2013, the Division will redirect resources in the FY2014 four-year Comprehensive Behavioral Health Treatment and Recovery grant solicitation to maximize efficiencies and effectiveness so that the right service to the right person is at the right time and at the right cost.
- We expect that implementation of the recommendations from an FY2013 report identifying issues and preliminary recommendations regarding the current operational status of the Division's Designated Evaluation and Stabilization/Designated Evaluation and Treatment Mental Health Treatment Assistance Program and its Secure Patient Transport Program to improve the overall efficiency and effectiveness of these two key Psychiatric Emergency Services programs will occur by and through FY2014.
- The Division will expand statewide crisis prevention and intervention training to include sessions for emergency transport providers (like municipal ambulance services, emergency medical services, or air ambulance services, as well as any potential new secure transport providers and all existing providers). This will result in improvement in the administration of the emergency services system statewide.

Updated Status for FY2013

- A longitudinal (20+ year) study of Alaska Psychiatric Institute admissions, entitled "Current and Historical Admissions Patterns at Alaska Psychiatric Institute," will be completed and published in FY2013. The study was funded with Mental Health Trust Authority Authorized Receipts and managed by the Division's Emergency Services Program Specialist working with Alaska Psychiatric Institute information technology staff and through an emergency mental health services utilization project with the University of Alaska Anchorage's Center for Behavioral Health Research and Services.
- Funded in cooperation with the Alaska Mental Health Trust, a report will be issued containing recommendations for revision of the policies and regulations guiding the conduct of both the Division's Mental Health Treatment Assistance Program at the Designated Evaluation and Stabilization and Designated Evaluation and Treatment sites and the current secure patient emergency transport process. The report, to be issued in 2013, will identify areas of concern and make recommendations for improvement including regulations and statutes.

Statutory and Regulatory Authority

AS 47.30.520 - 620 Community Mental Health Services Act
AS 47.30.655 - 915 State Mental Health Policy
AS 47.30.011 - 061 Mental Health Trust Authority
7 AAC 78 Grant Programs
7 AAC 72 Civil Commitment
7 AAC 71 Community Mental Health Services

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Psychiatric Emergency Services Component Financial Summary			
		<i>All dollars shown in thousands</i>	
	FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	2.9	0.0	0.0
73000 Services	1,458.6	1,885.7	1,426.0
74000 Commodities	0.4	0.0	0.0
75000 Capital Outlay	0.0	0.0	0.0
77000 Grants, Benefits	6,549.0	6,923.3	6,890.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	8,010.9	8,809.0	8,316.1
Funding Sources:			
1004 General Fund Receipts	1,433.3	1,714.4	1,714.4
1037 General Fund / Mental Health	6,394.6	7,094.6	6,601.7
1092 Mental Health Trust Authority Authorized Receipts	183.0	0.0	0.0
Funding Totals	8,010.9	8,809.0	8,316.1

**Summary of Component Budget Changes
From FY2013 Management Plan to FY2014 Governor**

All dollars shown in thousands

	<u>Unrestricted Gen (UGF)</u>	<u>Designated Gen (DGF)</u>	<u>Other Funds</u>	<u>Federal Funds</u>	<u>Total Funds</u>
FY2013 Management Plan	8,809.0	0.0	0.0	0.0	8,809.0
Adjustments which will continue current level of service:					
-Transfer to Seriously Mentally Ill to Consolidate Adult Individual Service Agreements	-363.0	0.0	0.0	0.0	-363.0
-Transfer to Designated Evaluation and Treatment for Hospital and Transport Rate Increases	-129.9	0.0	0.0	0.0	-129.9
FY2014 Governor	8,316.1	0.0	0.0	0.0	8,316.1

Component Detail All Funds
Department of Health and Social Services

Component: Psychiatric Emergency Services (AR23140) (1435)
RDU: Behavioral Health (483)

	FY2012 Actuals	FY2013 Conference Committee	FY2013 Authorized	FY2013 Management Plan	FY2014 Governor	FY2013 Management Plan vs FY2014 Governor	
71000 Personal Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
72000 Travel	2.9	0.0	0.0	0.0	0.0	0.0	0.0%
73000 Services	1,458.6	1,885.7	1,885.7	1,885.7	1,426.0	-459.7	-24.4%
74000 Commodities	0.4	0.0	0.0	0.0	0.0	0.0	0.0%
75000 Capital Outlay	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
77000 Grants, Benefits	6,549.0	6,923.3	6,923.3	6,923.3	6,890.1	-33.2	-0.5%
78000 Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
Totals	8,010.9	8,809.0	8,809.0	8,809.0	8,316.1	-492.9	-5.6%
Fund Sources:							
1004 Gen Fund (UGF)	1,433.3	1,714.4	1,714.4	1,714.4	1,714.4	0.0	0.0%
1037 GF/MH (UGF)	6,394.6	7,094.6	7,094.6	7,094.6	6,601.7	-492.9	-6.9%
1092 MHTAAR (Other)	183.0	0.0	0.0	0.0	0.0	0.0	0.0%
Unrestricted General (UGF)	7,827.9	8,809.0	8,809.0	8,809.0	8,316.1	-492.9	-5.6%
Designated General (DGF)	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
Other Funds	183.0	0.0	0.0	0.0	0.0	0.0	0.0%
Federal Funds	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
Positions:							
Permanent Full Time	0	0	0	0	0	0	0.0%
Permanent Part Time	0	0	0	0	0	0	0.0%
Non Permanent	0	0	0	0	0	0	0.0%

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Psychiatric Emergency Services (1435)

RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2013 Conference Committee To FY2013 Authorized *****												
FY2013 Conference Committee												
	ConfCom	8,809.0	0.0	0.0	1,885.7	0.0	0.0	6,923.3	0.0	0	0	0
1004 Gen Fund		1,714.4										
1037 GF/MH		7,094.6										
Subtotal		8,809.0	0.0	0.0	1,885.7	0.0	0.0	6,923.3	0.0	0	0	0
***** Changes From FY2013 Authorized To FY2013 Management Plan *****												
Subtotal		8,809.0	0.0	0.0	1,885.7	0.0	0.0	6,923.3	0.0	0	0	0
***** Changes From FY2013 Management Plan To FY2014 Governor *****												
Align Authority to Reflect Anticipated Contractual and Grant Expenditures												
	LIT	0.0	0.0	0.0	-312.5	0.0	0.0	312.5	0.0	0	0	0
<p>In recent fiscal years, the services line in the Psychiatric Emergency Service component has been under-utilized. This transfer will move excess authority from the services line to the grant line where it can be awarded to community-based behavioral health agencies for services intended to aid people experiencing a behavioral health crisis. The service array may include crisis intervention, brief therapeutic interventions for stabilization, family, consumer and community wrap-around supports and follow-up services.</p>												
Transfer to Seriously Mentally Ill to Consolidate Adult Individual Service Agreements												
	Trout	-363.0	0.0	0.0	-17.3	0.0	0.0	-345.7	0.0	0	0	0
1037 GF/MH		-363.0										
<p>Transfer general fund/mental health receipt authority from the Psychiatric Emergency Service component to the Seriously Mentally Ill component to consolidate funding for adult individualized services under a single component. Funding for adult crisis respite individual service agreements was originally budgeted under the Psychiatric Emergency Service component, while funding for individualized services to adults with serious mental illness was budgeted under the Seriously Mentally Ill component. Since the target population for the two projects is the same, their separation created unnecessary work to balance the funding between components.</p>												
Transfer to Designated Evaluation and Treatment for Hospital and Transport Rate Increases												
	Trout	-129.9	0.0	0.0	-129.9	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH		-129.9										
<p>In recent fiscal years the services line in the Psychiatric Emergency Service component has been underutilized. A transfer of authority to the Designated Evaluation and Treatment component is necessary to defray a 14–15% increase to the Medicaid daily rates for the two Designated Evaluation and Treatment hospitals (Bartlett Regional Hospital and Fairbanks Memorial Hospital) and the increased transport rates for the statutorily required Title 47 transports.</p>												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
	Totals	8,316.1	0.0	0.0	1,426.0	0.0	0.0	6,890.1	0.0	0	0	0

Line Item Detail
Department of Health and Social Services
Travel

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Line Number	Line Name		FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
72000	Travel		2.9	0.0	0.0
Expenditure Account			FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
	Servicing Agency	Explanation			
72000 Travel Detail Totals			2.9	0.0	0.0
72120	Nonemployee Travel (Instate Travel)		2.9	0.0	0.0

Line Item Detail
Department of Health and Social Services
Services

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Line Number	Line Name		FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
73000	Services		1,458.6	1,885.7	1,426.0
Expenditure Account	Servicing Agency	Explanation	FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
73000 Services Detail Totals			1,458.6	1,885.7	1,426.0
73025		Education Services	43.7	0.0	0.0
73150		Information Technlgy	106.9	0.0	0.0
73650		Struc/Infstruct/Land	1.9	0.0	0.0
73675		Equipment/Machinery	0.2	0.0	0.0
73750		Other Services (Non IA Svcs) Statewide suicide crisis call center contract	0.0	620.2	56.0
73750		Other Services (Non IA Svcs) Spending authority for emergency service system contract not specifically assigned	0.0	0.0	104.4
73802		Disaster Relief	13.4	0.0	0.0
73823		Health	1,265.5	0.0	0.0
73823	H&SS	Health RSA with Health Care Services for DSH Agreement with Providence for Single Point of Entry Psychiatric Services	0.0	1,265.5	1,265.6
73979		Mgmt/Consulting (IA Svcs)	27.0	0.0	0.0

Line Item Detail
Department of Health and Social Services
Commodities

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Line Number	Line Name		FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
74000	Commodities		0.4	0.0	0.0
Expenditure Account	Servicing Agency	Explanation	FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
74000 Commodities Detail Totals			0.4	0.0	0.0
74480	Household & Instit.		0.4	0.0	0.0

Line Item Detail
Department of Health and Social Services
Grants, Benefits

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Line Number	Line Name		FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
77000	Grants, Benefits		6,549.0	6,923.3	6,890.1
Expenditure Account	Servicing Agency	Explanation	FY2012 Actuals	FY2013 Management Plan	FY2014 Governor
77000 Grants, Benefits Detail Totals			6,549.0	6,923.3	6,890.1
77110	Grants	Psychiatric emergency services funded from the Comprehensive Treatment & Recovery Grant Program	6,520.1	6,540.1	6,852.6
77110	Grants		0.0	363.0	0.0
77110	Grants	Emergency client travel	0.0	20.2	37.5
77670	Benefits		28.9	0.0	0.0

Inter-Agency Services
Department of Health and Social Services

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Expenditure Account	Service Description	Service Type	Servicing Agency	FY2012 Actuals	FY2013	
					Management Plan	FY2014 Governor
73802	Disaster Relief	Inter-dept		13.4	0.0	0.0
73802 Disaster Relief subtotal:				13.4	0.0	0.0
73823	Health	Inter-dept		1,265.5	0.0	0.0
73823	Health	Intra-dept	H&SS	0.0	1,265.5	1,265.6
73823 Health subtotal:				1,265.5	1,265.5	1,265.6
73979	Mgmt/Consulting (IA Svcs)	Inter-dept		27.0	0.0	0.0
73979 Mgmt/Consulting (IA Svcs) subtotal:				27.0	0.0	0.0
Psychiatric Emergency Services total:				1,305.9	1,265.5	1,265.6
Grand Total:				1,305.9	1,265.5	1,265.6