

**State of Alaska**  
**FY2022 Governor's Operating Budget**

**Department of Health and Social Services**  
**Behavioral Health Prevention and Early Intervention Grants**  
**Component Budget Summary**

**Component: Behavioral Health Prevention and Early Intervention Grants**

**Contribution to Department's Mission**

Ensure that effective community-based behavioral health prevention services are available statewide, incorporating community readiness, planning, partnerships and coalitions, and evidence-based strategies that demonstrate positive outcomes for individuals, families, and communities.

**Core Services**

- Coordinate statewide community-based Fetal Alcohol Spectrum Disorders diagnostic team network to provide local diagnostic services to families and individuals in their home or hub community.
- Coordinate rural case management services for individuals and their families receiving a diagnosis in Bethel, Kenai, Juneau, and Sitka.
- Provide service partner and family training about Fetal Alcohol Spectrum Disorders public awareness and education.
- Increase community support to individuals and families through grants and contracts and the ongoing development of partnerships to decrease the prevalence of Fetal Alcohol Spectrum Disorders across Alaska.
- Provide the foundation funding for Alaska's effort to prevent substance abuse within the state, with a special focus on preventing youth from experimenting with and becoming addicted to alcohol and other drugs.
- Decrease negative impacts of alcohol and substance abuse in Alaska.
- The Community-Based Suicide Prevention Program provides funds to develop data-driven, community-based strategies focused on mental health promotion, prevention of suicide, and increased mental health.
- Provide monitoring and education for tobacco vendors in order to deter sales of tobacco products to underage minors throughout the state.
- The Rural Human Services System Project provides funds to regional agencies to hire, train, and supervise village-based counselors to attend the University of Alaska Fairbanks Rural Human Services Certification program. Rural Human Services trained village-based counselors provide integrated substance abuse and mental health outpatient, aftercare, and support services, as well as prevention and education activities throughout rural and remote Alaska.

**Major Component Accomplishments in 2020**

- Behavioral Health Prevention and Early Intervention Grants funded nineteen comprehensive behavioral health prevention and early intervention grants to local community-based prevention coalitions to complete a five-year funding cycle and a new funding cycle has just begun for FY2020 which will continue into FY2022. Students from over 20 agencies participated in the Rural Human Services program offered at the Interior Alaska Campus and Kuskokwim Campus of the University of Alaska.
- The division supported thirteen alternative schools in their suicide prevention efforts throughout the school year, including You Are Not Alone programs; supported QPR (question/persuade/refer) Gatekeeper training; and adjusted Careline (Alaska's suicide hotline) staffing to meet increased call demand. Successfully implemented the text line project.
- Integrated Division of Behavioral Health staff with the Division of Public Health's Office of Substance Misuse and Addiction Prevention (OSMAP) to better coordinate the federal Partnerships for Success (PFS); the Alaska Prevent Drug/Opioid Overdose (PDO) Initiative's Project HOPE (Harm-reduction, Overdose, Prevention, and Education); and the Fetal Alcohol Spectrum Disorders (FASD) prevention projects.
- The development of Screening and Brief Intervention and Referral to Treatment (SBIRT) trainings have begun to provide screening and intervention for emerging behavioral health issues at multiple entry points such as emergency rooms, pediatrician offices or other early points of entry.

**Key Component Challenges****Comprehensive Behavioral Health Prevention and Early Intervention Grants**

- The integration of the Strategic Prevention Framework into the Comprehensive Behavioral Health Prevention and Early Intervention grants has been successful in several communities. Coalitions of social service agencies, schools, non-profits and local governments are working together to increase community wellness and decrease the misuse of substances. Unfortunately, there are communities still struggling to maintain continuity at the staff and agency level. The Partnership for Success federal award was not received by Alaska this year, which will have a negative impact on communities that relied on that funding for prevention programs.

### **Careline-Suicide Hotline**

- Calls to the Careline have more than doubled. In FY2015 the Careline answered 10,270 calls and in FY2020 20,214 calls were answered. In FY2020 we have seen 6,523 new callers who have never called or used the Careline before. In 2017, the State of Alaska renegotiated the contract with the Alaska Careline, providing additional funds to the call center. These funds provided the opportunity to create an additional 14 shifts a week, or 112 hours of staffing coverage. The increase in funding allowed the Careline to meet the demand for suicide intervention and support; however, demand has continued to rise.
- The division funded additional Careline services, including a “texting” option. Texting continues to be a preferred alternative for the younger population, and we know that suicide is the leading cause of death in Alaska for 15-24 year-old. This targeted strategy will increase text services, so they are available 24/7, an increase from Tuesday-Saturday from 3-11pm. This service is being implemented in FY2021.
- The Careline historically has a call answer rate of approximately 70 percent, for Lifeline calls, (calls to the national suicide prevention number), from Alaskans. This equates to around 200 calls a month to the Lifeline that are not answered in Alaska that are routed to a Lifeline back-up call center. Back-up call centers for the Lifeline are paid a stipend to serve as back-up centers.
- As Lifeline call volume to the Careline has increased, so has the volume of direct dial calls. In addition to the Lifeline, Careline answers six designated lines for direct dial calls - those calls which are directly placed to the center. For direct dial calls to the Careline there is an average answer rate of 92 percent. This exemplary answer rate is despite the continuous increase in calls.
- As the program continues to evaluate call capacity, one measure of capacity is the number of calls that are unanswered in the center. Despite the additional staffing, the Careline continues to be understaffed for the number of calls received. The Careline supervisory team has worked internally to maximize answer rates. The supervisory team continually evaluates call trends, reviews staff answer rates, shifts coverage to account for call trends, and identifies areas for improvement.
- The division has partnered with public health to deliver messages to the public to encourage and support the usage of the Careline because of the stressors of COVID-19.
- Senior Centers were targeted and provided with posters to encourage seniors to reach out during the pandemic.

### **Rural Services**

- Rural Services coordinates with the Indian Health Service Behavioral Health Aide program to eliminate duplication and enhance the efforts of each group. The division is working closely with the University of Alaska Fairbanks to identify ways to strengthen partnerships, better utilize these limited funds, and maximize and sustain the outcomes of the Rural Human Service training program.
- The number of students who graduate from Rural Human Services and want to continue at the University of Alaska Fairbanks is increasing. In addition, a growing number of Rural Human Services and Associates in Arts Human Services students are continuing to the University of Alaska Fairbanks distance Bachelor of Social Work program. The challenge is making sure there are adequate funding sources to assist students who want to continue with their educational pursuits to give Alaska a quality behavioral health work force. It continues to be a challenge to build workforce stability in some regions and to expand advanced level capacity of local workforces with master level supervisors and administrators.

## **Significant Changes in Results to be Delivered in FY2022**

### **Comprehensive Behavioral Health Prevention and Early Intervention Grants**

- A new cohort of communities will have joined the efforts to prevent substance abuse within the state, with a special focus on preventing youth from experimenting with and becoming addicted to alcohol and other drugs as well as more effective and innovative ways to respond to the current opioid crisis.

**Suicide Prevention**

- More people will be able to access help through an expanded Careline text service. The Careline is reaching new callers who have increased participation in the Careline in FY2020 and will continue to expand.
- Development of a First Responder’s Help Line provides a service for those on the front lines of the COVID-19 pandemic and other crisis that stress those responding to the crisis.
- The partnership with public health to deliver messages to encourage and support the usage of the Careline because of the stressors of COVID-19.
- Senior centers will receive more informational posters and other materials to encourage seniors to reach out during the stress of the pandemic.
- Initiative for the best practice model called Zero Suicide, which will involve work with community-based agencies and coalitions to roll out the tenets of this model. This model involves a framework, which helps organizations within a system of care to commit to a safer environment for providing care to those with behavioral health concerns. The core elements include the following: leading, training, identifying, engaging, treating, transitioning, and improvement. This position will utilize this framework to bring individual agencies, as well as the system of care up to a higher level of treatment for individuals who are in crisis

**Rural Services**

- More students will be able to access Behavioral Health Coaching efforts through distance learning and e-modules created by the University of Alaska Southeast supported through the division.

**Alaska Fetal Alcohol Spectrum Disorder Program**

Quantitative data related to Fetal Alcohol Spectrum Disorder diagnosis and case management services have been collected annually. In FY2021, the Fetal Alcohol Spectrum Disorder Program will be partnering with statewide community stakeholders, in conjunction with the Governor’s Council on Disabilities and Special Education’s Fetal Alcohol Spectrum Disorder plan, to assess the provision of quality, relevant supports and services regarding the outcomes of both the Fetal Alcohol Spectrum Disorder diagnostic and case management services.

**Statutory and Regulatory Authority**

AS 28.35.030	Miscellaneous Provisions
AS 47.30.011-061	Mental Health Trust Authority
AS 47.30.470-500	Mental Health
AS 47.37	Uniform Alcoholism & Intoxication Treatment Act
7 AAC 29	Uniform Alcoholism & Intoxication Treatment
7 AAC 78	Grant Programs

**Contact Information**

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**Component Detail All Funds**  
**Department of Health and Social Services**

**Component:** Behavioral Health Prevention and Early Intervention Grants (3098)  
**RDU:** Behavioral Health (483)

Non-Formula Component

	FY2020 Actuals	FY2021 Conference Committee	FY2021 Authorized	FY2021 Management Plan	FY2022 Governor	FY2021 Management Plan vs FY2022 Governor	
71000 Personal Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
72000 Travel	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
73000 Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
74000 Commodities	0.0	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	6,586.3	8,545.3	8,545.3	8,345.3	8,345.3	0.0	0.0%
78000 Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
<b>Totals</b>	<b>6,586.3</b>	<b>8,545.3</b>	<b>8,545.3</b>	<b>8,345.3</b>	<b>8,345.3</b>	<b>0.0</b>	<b>0.0%</b>
<b>Fund Sources:</b>							
1002 Fed Rcpts (Fed)	1,518.4	3,255.0	3,255.0	3,055.0	3,055.0	0.0	0.0%
1037 GF/MH (UGF)	1,660.9	1,728.3	1,728.3	1,728.3	1,728.3	0.0	0.0%
1180 Alcohol Fd (DGF)	3,407.0	3,562.0	3,562.0	3,562.0	3,562.0	0.0	0.0%
<b>Unrestricted General (UGF)</b>	<b>1,660.9</b>	<b>1,728.3</b>	<b>1,728.3</b>	<b>1,728.3</b>	<b>1,728.3</b>	<b>0.0</b>	<b>0.0%</b>
<b>Designated General (DGF)</b>	<b>3,407.0</b>	<b>3,562.0</b>	<b>3,562.0</b>	<b>3,562.0</b>	<b>3,562.0</b>	<b>0.0</b>	<b>0.0%</b>
<b>Other Funds</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0%</b>
<b>Federal Funds</b>	<b>1,518.4</b>	<b>3,255.0</b>	<b>3,255.0</b>	<b>3,055.0</b>	<b>3,055.0</b>	<b>0.0</b>	<b>0.0%</b>
<b>Positions:</b>							
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:** Behavioral Health Prevention and Early Intervention Grants (3098)  
**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 FY2021 Conference Committee To FY2021 Authorized *****												
<b>Conference Committee</b>												
	ConfCom	8,545.3	0.0	0.0	0.0	0.0	0.0	8,545.3	0.0	0	0	0
1002 Fed Rcpts		3,255.0										
1037 GF/MH		1,728.3										
1180 Alcohol Fd		3,562.0										
<b>Subtotal</b>		<b>8,545.3</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>8,545.3</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
***** Changes From FY2021 Authorized To FY2021 Management Plan *****												
<b>Transfer Authority to Behavioral Health Administration for Medicaid Redesign Effort</b>												
	Trout	-200.0	0.0	0.0	0.0	0.0	0.0	-200.0	0.0	0	0	0
1002 Fed Rcpts		-200.0										
<b>Subtotal</b>		<b>8,345.3</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>8,345.3</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
***** Changes From FY2021 Management Plan To FY2022 Governor *****												
<b>Totals</b>		<b>8,345.3</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>8,345.3</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Transfer authority from Behavioral Health Prevention and Early Intervention to Behavioral Health Administration for Medicaid redesign efforts. With the onboarding of the Administrative Services Organization in accordance with the passage of SB 74 Medicaid Redesign Effort, the Division of Behavioral Health is making adjustments in staffing roles and responsibilities to be in alignment with this effort. Realigning the functionality of division staff is necessary to perform oversight and coordination with the Administrative Services Organization and Provider Agencies, for the implementation of the 1115 Demonstration Waiver Project. Additionally, with the decision to move forward with the Administrative Services Organization paying claims, expertise associated with these job classes is necessary for the division to shift the business focus and protect the department from significant liability. As these realignments in roles and responsibilities are achieved, the opportunity to have staff use federal Medicaid Administration federal participation rates is realized. This shift results in a reduced UGF impact, and is allocated to the appropriate federal program.

**Line Item Detail (1676)**  
**Department of Health and Social Services**  
**Grants, Benefits**

**Component:** Behavioral Health Prevention and Early Intervention Grants (3098)

Line Number	Line Name		FY2020 Actuals	FY2021 Management Plan	FY2022 Governor
7000	Grants, Benefits		6,586.3	8,345.3	8,345.3
Object Class	Servicing Agency	Explanation	FY2020 Actuals	FY2021 Management Plan	FY2022 Governor
<b>7000 Grants, Benefits Detail Totals</b>			<b>6,586.3</b>	<b>8,345.3</b>	<b>8,345.3</b>
7001	Grants	Grants for the Prevention and early Intervention of Alcohol and other Substance Abuse	818.0	3,823.2	3,823.2
7002	Benefits		424.5	0.0	0.0
7003	Sub-Recipient Pass-Through Grants	Provider Agreements for Fetal Alcohol Syndrome Diagnostic and case management teams and Prevention and Early Intervention grants to grantees in rural and urban communities	5,343.8	4,522.1	4,522.1

**Revenue Detail (1681)**  
**Department of Health and Social Services**

**Component:** Behavioral Health Prevention and Early Intervention Grants (3098)

Revenue Type (OMB Fund Code) Revenue Source	Component	Comment	FY2020 Actuals	FY2021 Management Plan	FY2022 Governor
<b>5002 Fed Rcpts (1002 Fed Rcpts)</b>			<b>1,518.4</b>	<b>3,055.0</b>	<b>3,055.0</b>
5019 Federal - Miscellaneous Grants		SAMSHA Grants, including: Strategic Prevention Framework Partnership for Success Grant, Project Hope Grant, as well as Substance Abuse Block Grant funding	1,518.4	3,055.0	3,055.0
<b>6180 Alcohol Fd (1180 Alcohol Fd)</b>			<b>0.0</b>	<b>3,562.0</b>	<b>3,562.0</b>
6826 Alcohol/Drug Abuse Treat/Prvntn Fnd-PY Reimbursement Recovry		Alcohol Tax revenue promoting Alcohol and other drug prevention initiatives, rural human services grants, and Alaskans affected by Fetal Alcohol Spectrum Disorder	0.0	3,562.0	3,562.0