

# **Advisory Board on Alcoholism and Drug Abuse Alaska Mental Health Board**

## **Quarterly Board Meeting Minutes Ketchikan, Alaska**

September 26 - 28, 2017

### **ABADA Members Present:**

Alavini Lata  
Cathy Bishop - telephonic  
Charles Gorman  
Gunnar Ebbesson  
Philip Licht  
Robert Coghill  
James Duncan  
Lee Breinig  
Renee Schofield

### **AMHB Members Present:**

Brenda Moore  
Sharon Clark  
Christopher Gunderson  
Michael Horton  
Elizabeth Schultz  
Charlene Tautfest  
Stephen Sundby - telephonic

### **ABADA Members Absent:**

Joshua Mathlaw  
Eric Holland - excused  
Megyn Greider - excused  
Michael Kerosky - excused  
Dr. Enlow Walker - excused

### **AMHB Members Absent:**

Bree Swanson - excused  
Francine Harbour  
Joanna Cahoon - excused  
Marieke Heatwole - excused  
Rachelle Stockman - excused  
Renee Hoffard - excused

### **Ex-Officio Members Present:**

Grant Rich for Randall Burns  
Sharon Fishel

### **Staff:**

Pat Sidmore, Acting Executive Director  
Bev Schoonover, Planner II  
Teri Tibbett, Program Coordinator II

### **Ex-Officio Members Absent:**

Adam Rutherford - excused  
Cindy Murphy-Fox - excused  
Cathy Stone - excused

**Tuesday, September 26, 2017**  
**CALL TO ORDER – 9:15 a.m.**

**ETHICS DISCLOSURES**

<b>Sharon Fishel</b>	Department of Education, which receives a federal SAMHSA grant for mental health services, prevention funding from DBH, and a school-based suicide prevention grant from the Statewide Suicide Prevention Council.
<b>Michael Horton</b>	Chugachmiut, which receives Medicaid funding and grant funding through DBH.
<b>Brenda Moore</b>	Christian Health Associates, which receives state grants and is a Medicaid provider.
<b>Robert Coghill</b>	Shareholder in a liquor store.
<b>Charlene Tautfest</b>	Serves on Kenai Peninsula Re-Entry Board and board for Peninsula Community Health Services.
<b>Philip Licht</b>	Set Free Alaska, which receives several state grants for residential and outpatient services and is a Medicaid provider.
<b>Lee Breinig</b>	Works for Choices, which receives funding from DBH and the Trust and bills Medicaid. Is also a Sealaska and Kivilco shareholder.
<b>Christopher Gunderson</b>	Denali Family Services, which bills Medicaid and receives grants from DBH. Also contracts with ANTHC and Providence Alaska Medical Center, which both receive state and federal grants as well as bill Medicaid, Medicare, IHS, TRICARE, and private insurance.
<b>Elizabeth Schultz</b>	Non-profit and community liaison in the Office of the Governor and serves on the Anchorage Coalition to End Homelessness board.
<b>Charles Gorman</b>	Community employment coordinator at Department of Veterans Affairs, a federally funded residential facility.
<b>Gunnar Ebbesson</b>	A family member may be applying for Medicaid
<b>Renee Schofield</b>	Serves on the Ketchikan Substance Abuse Task Force, which has a Drug-Free Community grant.
<b>Cathy Bishop</b>	Nugen's Ranch, a state grant-funded agency and has a family member that could benefit by decisions made by either board.

The other members of the Boards had no conflicts to declare. Guests from the audience and staff members introduced themselves.

**APPROVAL OF MINUTES FROM MAY 2017**

James Duncan **MOVED** to approve the minutes from the May 2017 meeting, **SECONDED** by Brenda Moore. Hearing no objection, the motion **PASSED**.

## **APPROVAL OF THE AGENDA**

Sharon Clark **MOVED** for an amendment to the agenda to define “Other Business” as “Old Business” and “New Business,” **SECONDED** by Alavini Lata. Hearing no objection, the motion **PASSED**.

After other amendments were made to the schedule on the agenda, Charles Gorman **MOVED** to approve the agenda as amended, **SECONDED** by James Duncan. Hearing no objection, the motion **PASSED**, and the agenda was approved as amended.

## **TRADITIONAL AND COMMUNITY WELCOME**

City of Ketchikan Mayor Lew Williams welcomed members of the Boards to Ketchikan. He stated that homelessness is an area that Ketchikan has been focusing on, and they currently have five facilities to house homeless individuals. He shared some of the community and business demographics of Ketchikan with the tourism and fishing industries, and he noted that during the winter they have many individuals who worked in the canneries over the summer who during the winter continue to live on Cannery Road and experience substance abuse problems. He stated that they added a \$42 million surgical wing to their hospital and their aim is to be a regional hospital. He also highlighted that Vigor Shipyard being a year-round facility has been great for the community.

Stephen Bradford, the vice mayor for the Ketchikan Gateway Borough, also welcomed members of the Boards to Ketchikan, and he also thanked Camp 14 and the Ketchikan Indian Community for sponsoring the Boards meeting on their land and in their facility.

Steven Bradford explained that the borough does not have social services powers, although the City of Ketchikan does. He stated that their argument for borough support is that supporting non-profits that deal with social services is improving the quality of life as an economic development issue. The borough is currently having an ongoing debate right now about how to financially support those non-profits. He stated that he believes many of the problems that take place in the borough stem back to mental health issues, addictions, and homelessness.

Steven Bradford stated that in terms of taxes, in the past couple of years they have restructured their property tax so that 100 percent of it goes towards schools. He stated that the combined sales tax for both city and the borough is 6.5 percent, 2 percent of which is the borough. Sales tax generates quite a bit of revenue for the Ketchikan Gateway Borough. They also rely very heavily on the head tax, and they are required to spend those head tax monies on projects that benefit the cruise ship passengers. In terms of sin taxes, they have an excise tax on marijuana, and they have recently added a large excise tax on tobacco. The tobacco tax is required to be dedicated to two purposes, tobacco cessation programs and into the education fund.

Steven Bradford stated that in terms of the marijuana industry in the borough, they have had two retail shops open so far, and they are very successful. One of the businesses is down on the docks and experiences a lot of business from the cruise ship passengers. They are advocating for the lounge opportunity because a lot of those customers would prefer to have a place to consume.

Regarding the opioid epidemic in the state, Steven Bradford stated that they are seeing what he believes are increases in property crimes that are directly related to the opioid crisis and heroin increase. He doesn't believe that the average citizen has made the connection that these property crimes are directly tied to the drug problems. He also speculated that the suicide problems they have in the area are also related to substance abuse issues and mental health problems.

Irene Dundas, president and CEO of the Ketchikan Indian Community (KIT), stated that the issues of the Boards hit very close to her heart, and she shared personal stories of family members and close friends that have suffered from mental health issues and substance use disorders. She stated that on the tribal level, similar to the rest of the state, there are not enough workers and people trained to deal with these issues. Specifically in KIC, they have about 6,000 tribal members and roughly 2,800 users of the clinic, but they have a very small staff to be able to serve that many people. She stated that they cannot recruit doctors fast enough, and they are recruiting for physicians to help deal with opioid addictions. She stated that recently their tribal Council approved almost a full scholarship for any student that wants to do anything in the medical field. That scholarship is expected to go out next year.

Irene Dundas stated that recently the tribal Council authorized a \$1 million expansion to a facility in Ketchikan for behavioral health to try to deal with the increase of patients they are seeing. They are also moving into the area of telehealth to receive assistance outside of the state to help them with their caseloads.

Irene Dundas stated that they also have a problem with elder abuse in the community. KIC is also working to host family groups for foster parents.

In terms of the veteran population, Irene Dundas and Chere Klein stated that there are roughly 1500 native veterans in the area. One of the issues in providing services to them is that they are not identified in the system, and KIC has been working on this issue.

## **BOARD MEMBER UPDATES**

### **Department of Education and Early Development**

Sharon Fishel updated the Boards on a project she has been working on with Pat Sidmore that involves e-learning modules for educator training, particularly the Overcoming ACEs in Alaska Schools. She noted that through funding from the Statewide Suicide Prevention Council, this training is also available to the general public. This course is the first in a series of three courses they will be creating. The second course will be on Trauma-Sensitive Schools, which should go live in the next week. The third course that is in development will be on how to go from a trauma-informed and trauma-sensitive school to being a trauma practicing school, and it will include hands-on techniques for educators.

Sharon Fishel also noted that the Boards will be involved in reviewing an Opioids 101 course for educators that was created by the Office of Substance Misuse and Addiction Prevention. They hope to have that course go live by November or December of this year.

Sharon Fishel stated that Andy Jones and his public information team are creating a Narcan administration course for the public, and the Department of Education is going to add to that course to help educators understand how this applies to them.

Sharon Fishel reported that she and Pat Sidmore have also been peripherally involved in the Alaska Education Challenge and working with the Safety and Well-Being subcommittee on trauma-informed schools and improving school climate and school health for kids.

Pat Sidmore added that Sharon Fishel did a national webinar about Overcoming ACEs in Alaska Schools, and the state of Montana has decided to copy it and use it. He also noted that they have been working with the Trust and the Division to put together a trauma-informed school pilot in Juneau. The program will involve mental health consultants going into three elementary schools for two days a month to work with the adults to change the adults' reactions to behavior. This program is being done in conjunction with the Collaborative Learning for Educational Achievement and Resilience (CLEAR) project through Washington State University. Pat also explained that he and Sharon Fishel are also working with the Alaska Association for School Boards and others to start a trauma-informed school group.

Elizabeth Schultz commented that First Lady Walker is very interested to learn more about the trauma-informed ACEs movement.

### **Trustee Panel**

Robert Coghill announced that he and Charlene Tautfest serve on the panel to review the applications for the vacant Trustee positions. There are two vacancies, and 23 qualified applications have been received.

### **Alaska Psychiatric Institute and Homelessness**

Brenda Moore stated that she and Charlene Tautfest recently facilitated a meeting between the Homeless Coalition, Anchorage's homeless coordinator, various shelters, the program manager from Brother Francis Shelter, and staff of API, to include the chief of social work and the new CEO. The outcome of the meeting was that they determined better data is needed because they know they have some overlap in populations. They connected the data staff at API and the homeless coalition executive director to work on more data. Other outcomes from the meeting include developing better discharge planning to include facilitated applications for benefits as well as placing discharged patients on to the housing prioritization list. Hopefully the end result is to see better coordination between API staff, the homeless coalition, and shelter program staff. Charlene Tautfest also noted that one of the problems is having enough qualified workforce in the state to serve these populations.

Brenda Moore also commented that there are two certificate of need applications that have been submitted by Mat-Su Regional and Alaska Regional for behavioral health treatment beds. Pat Sidmore stated that the Boards wrote a letter in support of both certificate of need applications.

## Staff Update

Pat Sidmore stated that the executive director position has been reposted for the Boards. The first go around in the interview process for the position was unsuccessful.

## 1115 BEHAVIORAL HEALTH MEDICAID WAIVER UPDATE

Pat Sidmore led the members of the Boards through a discussion of the status of pursuing an 1115 Medicaid waiver for behavioral health for the State of Alaska. The federal goal of this program is for it to be cost neutral over a five-year period. The Trust has funded this effort for the Department, and Katie Baldwin-Johnson is their point person on this.

Bev Schoonover stated that this has been a very complicated process. She stated that the legislature directed the Department to pursue this waiver and engage the services of an Administrative Services Organization (ASO). The Department pulled together multiple workgroups, and they have hired three or four different contractors. Gennifer Moreau-Johnson is the project coordinator for this. They have held multiple meetings with the contractors with the outcome of hopefully getting a draft application done by the end of November to put out for public comment as well as having an RFP for contracted services for the ASO completed in the same timeline.

Bev Schoonover explained that all of the Medicaid dollars for behavioral health from the state are going to be funneled into the ASO. In turn, the ASO will take that funding and manage the care for people using the behavioral health system. At this point it is proposed that it will be for both tribal and non-tribal entities, though negotiations are still taking place with the tribal entities.

Bev Schoonover stated that another change that will come with this is the need for providers to be receiving grants from the Division of Behavioral Health as a condition of participation in the Medicaid program. This will allow more private practitioners to join in the Medicaid program, as well as other service providers.

Bev stated that the ASO will also be providing care coordination for people receiving services. The ASO will be focusing on targeted populations and services. The proposed target populations include:

1. Children and adolescents in the child welfare system
2. Individuals with acute mental health needs
3. Individuals with substance use disorders.

The proposed new services will include:

- **Prevention/engagement services:**
  - Mental health and substance use disorder evidence-based screenings
- **Outpatient intervention services:**
  - Medication-assisted treatment care coordination
  - Medication-assisted treatment

- **Intensive community-based intervention services:**
  - Assertive community treatment
  - Home-based family treatment
  - Intensive case management
  - Mental health disorder hospital outpatient services
  - Substance use disorder intensive outpatient services
- **Acute residential services:**
  - Crisis residential stabilization for children and adults
  - Therapeutic foster care
- **Acute intensive community-based services:**
  - 23-hour crisis stabilization
  - Mobile crisis response services
  - Peer-based crisis services
- **Community and recovery support services:**
  - Activities such as recovery coaching; employment services; social, cognitive, daily living skill building; mentoring and coaching; and relapse prevention
- **Current services proposed for phase out:**
  - Behavioral rehabilitation services
  - Recipient support services
  - Comprehensive community support services
  - Therapeutic behavioral health services
  - Alaska screening tool
  - Client status review

Katie Baldwin-Johnson stated that there haven't been any decisions made about whether or not the ASO is going to be entirely statewide or regionally based. The role of the ASO is to work with the existing provider network and new providers that will have to be pulled into that to build the provider network in each region. The intent of 1115 is to fill the gaps in the continuum of care for services to refocus from high-end emergency services to earlier intervention through community-based services. She also further explained that the ASO is taking on the function of managing the services for the Medicaid beneficiary population, which is basically shifting the role of state government into more of a role of contract management with the assumption that there will be cost savings.

Grant Rich discussed the concept of dividing Alaska into different regions with various populations categorized in each region. He noted that things that are still in talks are new types of assessments and credentialing of service providers as well as the service provider settings. He also stated that there is a packet for each of the populations that talks about new services being phased in. The concept of developing these particular populations is because they didn't want any clients left unserved. They are currently working to determine the utilization rates of each of these populations within the various regions of the state, which is a very complex process.

Pat Sidmore stated that the first step in this is the application process, which is in draft form right now. Once the application is released for public comment, DBH has contracted with the Boards to receive the public comment related to this waiver. He believes that given the current staffing

situation with the Boards, they may want to consider creating an ad hoc committee to assist the staff in working through this.

Pat Sidmore, Bev Schoonover, Katie Baldwin-Johnson, and Grant Rich fielded questions from the Board members, and Grant Rich encouraged people to contact him directly for further information.

### **RECESS**

The meeting recessed at 12:04 p.m.

### **SITE VISITS**

Board members engaged in site visits to Vigor Industrial, Ketchikan Correctional Center, Revilla Alternative School, and First City Homeless Shelter.

### **POTLUCK**

Board members co-sponsored a community potluck with Ketchikan Wellness Coalition.

### **Wednesday, September 27, 2017**

### **CALL TO ORDER – 8:00 a.m.**

### **OFFICE OF SUBSTANCE MISUSE AND ADDICTION PREVENTION (OSMAP)**

Andy Jones stated that his new position is with the Office of Substance Misuse and Addiction Prevention (OSMAP), which is a department created in response to the substance misuse and addiction crisis in the state. This office is comprised of individuals from various departments such as Corrections, Alaska State Troopers, and DHSS, who report directly to their commissioners. This group will continue the work of the Governor's priorities, particularly related to opioids. The mission of this office is to bring public and community health approaches to the community working from the ground up. Their three core values are:

1. Community
2. Collaboration
3. Communication

Andy Jones stated that the priorities for the office are:

- To facilitate a multi-sectoral, cross-collaboration environment
- Develop and implement evidence-based policy and strategy
- Foster improved understanding of substance misuse and addiction methods for prevention through training and education
- Assure fiscal sustainability.

Andy Jones stated that OSMAP is not a typical state office, and it lacks the bureaucracies of many of the other state departments. The approach is not a top-down approach but rather from the community on up. They are going to work in the community, by the people in the community, for the community to achieve their common goals by having all of the departments at the table able to collaborate and make decisions based on the community needs.

Andy Jones then reported to the Boards that 8,000 Narcan kits have been distributed statewide, and he updated the Boards on the process to make the Narcan kits in an easy-to-use product for the community at large. He also demonstrated drug-disposal bags that are being distributed statewide for people to dispose of unwanted leftover medications. He noted that 25,000 bags have been distributed and another half million are on order. He also demonstrated the cards that Behavioral Health has been distributing which people can give out that say, “You were given this card because someone cares about you and wants you to stay safe.” The cards also give advice about Narcan and calling 911. People can contact Andy Jones if they would like to receive some cards for distribution.

Andy Jones then displayed the various other fact sheets and informational materials and booklets available through the OSMAP. He stated that the office is also looking to work upstream as much as possible in terms of prevention.

## **BUILDING COMMUNITY SUPPORTS FOR SUBSTANCE USE DISORDER**

Gunnar Ebbesson facilitated a panel of Ketchikan community members that was convened to discuss what supports are in the community for people who have substance use disorders, what they would like to see in the community, and what resources they need. Panelists included Ruth Bullock, Dr. Chad Valadez, Andy Jones, and Reed Harding. Panelists introduced themselves and provided some background into why they are in their current positions. The following are some highlights of common themes heard throughout the course of an in-depth conversation with the Boards:

- Models in the community are to treat addiction without specifying the substances.
- There is great communication between agencies in Ketchikan.
- People are compassionate and care about their community.
- A lot of effort has been placed into tackling the opioid issue through creative means.
- Need to get at the demand issue to determine why people are using.
- Need to ensure good jobs and more low-income housing in the community.
- Need more sober housing and transitional housing after treatment.
- Need more treatment options for youth and other specific subgroups.
- Need more housing for people re-entering after incarceration.
- The opioid epidemic has raised awareness in the community, and more people are talking about it.
- More data has been gathered as a result of the opioid epidemic, which helps support the need.
- Agencies are doing a lot more crisis work than they were 15 years ago.
- Lots of staff burnout.
- Not having a detox center in the area is a huge issue.

- Cartels have a strong foothold in Alaska, and a way to combat that is to slow down the demand.
- Need to continue to have strong police presence in shipping lanes and entry areas for drugs in the state.
- Increase in theft in the community.
- Need to continue to think of ways to build strong communities.
- After SB 91, it's harder to keep people in court-ordered treatment. They walk away and have little consequences other than social consequences.
- Ketchikan recently lost their drug court.
- Need for more peer recovery services for individuals who have been incarcerated.
- SB 91 did not put in place the administrative system necessary for decriminalization to work.
- The change brought about by SB 91 is hard, and people are resistant to change, but in order to make this work, it will require investment at the community level.
- More work could be done in the area of prevention services outreach in the community, but staff resources are low.
- To combat stigma, community members need to tell their stories.
- Very important to keep childhood trauma in mind.
- Continue to look at micro housing modeling and get away from the halfway house model.
- Consider more programs specifically for harm reduction i.e., needle clinics, Housing First.
- Recruiting and keeping qualified staff to the area is difficult.
- Ketchikan has a number of employers who are open to hiring people in recovery.
- A big effort is taking place in Ketchikan to support parents with FASD who have lost custody of their children.

## **UTILIZING DATA FOR COMMUNITY PLANNING ON HOUSING AND HOMELESSNESS ISSUES**

Kimberly Seitz from the Institute for Community Alliances (ICA) presented to the Boards on their function as a nationwide technical support entity serving 11 states to lead the Homeless Management Information System (HMIS), which is a requirement of HUD and AHFC funding. The ICA provides support to the homeless and housing agencies by providing technical assistance, setting up new projects, and providing training for agencies on the data system.

Kimberly Seitz stated that an HMIS is a systematic process for collecting all of the information that is both required and requested by agencies. This process is to provide a more holistic view of the state of homelessness in Alaska. The more agencies are entering information into the system, the more beds are represented, and the better off Alaska is at knowing who is getting services, for how long, why they're being served, and where they are being served. Personal information should be collected in HMIS only:

- 1) When it is needed to provide services,
- 2) When it is needed for another specific purpose of the agency where a client is receiving services;
- 3) Or when it is required by law.

Only lawful and fair means are used to collect personal information.

HMIS Universal Data Elements are elements required to be collected by all projects using the software as an HMIS:

Name	Social Security Number
Date of Birth	Race
Ethnicity	Gender
Veteran Status	Disabling Condition
Project Start Date	Project Exit Date
Destination	Relationship to Head of Household
Client Location	Housing Move-In Date (new in 2017)
Living Situation	

Kimberly Seitz explained that the data is used for:

**Funding** – Private, local, state, federal, others.

**Monitoring & Compliance** – Agencies upholding their promises laid out in grant agreements.

**Evaluation** – Are those needing the services receiving it, and are the services effective?

**Progression** – Are we making progress; and if not, is reallocation needed?

**Typical Users of the System:**

- Case/Program managers
- Shelter staff
- Prevention

**Removing Barriers**

- Easy new user trainings
- License fees
- Technical Assistance
- Data Quality is the measure of success.

Kimberly Seitz explained that in addition to all of the reports generated from this data for use by state and federal agencies, reports can be pulled for agencies specifically for agency use. In terms of the importance of having entities report in this system, Kimberly explained that the time spent gathering and entering accurate and complete data is valued around the state and nation. The data is reviewed and analyzed and helps to make important decisions. Missing or incomplete data is like missing pages from a book.

Kimberly Seitz fielded questions from the Boards and concluded her report.

**ALASKA MENTAL HEALTH TRUST AUTHORITY (AMHTA) UPDATE**

Steve Williams, acting executive director of the AMHTA, and Katie Baldwin-Johnson provided the Boards with the following Trust updates:

## **FY '19 Budget Process**

Intensive in-depth webinars and meetings were held to complete a draft set of FY '18 and '19 budget recommendations in 2016. This year's budget planning session did not require the same in-depth analysis, but it was an opportunity to review what had been accomplished over the last year and the readdress the recommendations that had been developed to ensure they were still appropriate. The Trustees, advisory boards, and other partners were involved in that exercise over the summer, which came to fruition in September when the Trustees approved and adopted the recommendations that will be submitted to the Governor for inclusion in the FY '19 budget. The recommendations are largely comprised of the two overarching goals of Medicaid and criminal justice reform.

## **AMHTA Governance**

The Trustees have been actively engaged in a process to analyze and restructure the governance of the Trust by reviewing the settlement, statutes, regulations, and bylaws by contracting with Catherine Woods of Raven Consulting. She has been working with the Trustees and the Trust leadership staff to integrate the various governance elements to develop a structure that will be more transparent as well as a good foundation for how the Trust sees its next evolution in organizational development. Using the Alaska Permanent Fund Corporation as an effective organizational template, the Trustees have developed charters for governance as well as a clearly defined organizational chart, which consists of executive directors of the Trust Authority and the Land Office reporting to a CEO, who then reports directly to the Trustees. The advisory boards have been very active in this process, and it was very helpful for the Trustees to hear feedback from the advisory boards. There were also opportunities for discussion about having the advisory boards engage in a more meaningful level in Trust decision making processes and Trustee meetings.

Next steps are for the bylaws to be adopted and then the charters adopted by the November 16th meeting. Steve Williams then reviewed the newly created organizational chart, which demonstrates the organizational structure of the Trust as well as all the ancillary advisors and state department connections.

## **CEO Selection and Staffing Updates**

The Trust has been actively recruiting for a CEO for the past three months, and the finalists for the position were interviewed by representatives of the statutory advisors as well as representatives from the Department of Natural Resources, Department of Revenue, and the Department of Health and Social Services. The Trustees will determine the final candidate for the position by taking into account the information provided by the interviewing panel.

The Governor's Office has given approval to hire Jimael Johnson as a program officer, and they are awaiting approval from the Governor's Office to announce the candidate filling one of the two remaining vacant program officer positions.

## **Trustee Seats**

There are currently two vacant Trustee seats. A nomination panel will be convened, which will include members of the beneficiary advisory boards, whose responsibility will be to make recommendations to the Governor.

## **ALASKA BEHAVIORAL HEALTH ASSOCIATION UPDATE**

Tom Chard began his presentation by discussing Medicaid reimbursement rates for community behavioral health centers, and he noted that there is about to be a large shift happening soon in the payment system. He shared with the Boards the history of the Medicaid rates being set in 1991 and then revisited in 2006, 2007, and 2008. Those reimbursement rates have remained the same while healthcare and labor costs have continued to climb. As this system in this state has continued to erode, providers have had to make the decision to only serve those in most need with severe disorders, and those with mild to moderate disorders that would have benefited from services have had little to no access to services.

In March of 2015, the Department held a two-day meeting, and a two-pronged, two-year approach was agreed to. Providers were going to be given an interim increase to hold them over, and then in year two, the math will have been done, and Medicaid rates will be determined that will be of an equitable rate to providers. Extensive work was done to comb through and verify the data, and that work has been completed. Based on all the calculations, it is estimated that the approximately 70 community behavioral health providers have been underpaid about \$40 million per year. In order to pay for this underpaid \$40 million, the State would have to come up with \$11 million, while the remaining \$29 million would come from Medicaid federal matching dollars. He stated that the Governor's budget may reflect a major decrement in the grants line, but there should be an increase in the Medicaid behavioral health line.

Tom Chard explained that another reason he is so happy with this project is that once the regulations go through for the rate methodology, there will be regular rate reviews for the system that occur no later than every four years.

## **SCHOOL-AGE WELLNESS PANEL**

Sharon Fishel facilitated a panel discussion on School-Age Wellness. Community panelists included Bobbie McCreary, Sydney Jones, Mary Eberle, Kurt Lindemann, Debbie Langford, Kris Flora, and Bill Swift. The following are some highlights of common themes heard throughout the course of an in-depth conversation with the Boards:

- School-aged wellness means:
  - Not approaching it from an illness model but rather a strength-based model
  - Educating the whole child
  - School climate
  - Knowing what it means to be a prepared student
  - Sense of safety and available resources
  - Balancing credit requirements and social emotional needs of the students
  - Wellness throughout a child's life span/family wellness

- Nutrition, mental health, academic requirements
- Culturally appropriate
- Love
- Physical wellness
- Racial diversity of staff
- People with a variety of expertise are a great resource in the community and referrals are easily made for children and families.
- Great deal of collaboration and cooperation between the schools and community agencies.
- Work is done to assist kids in being comfortable with themselves and comfortable talking to others.
- Services that are delivered are flexible to meet the needs of the many communities of the area.
- They connect students to resources outside of the schools to connect and engage with after they age out of the school system.
- Consideration on building resiliency is incorporated into the environments.
- Need to continue to have effective networking because the education and mental health systems speak different languages.
- Revilla is in the second year of a Community Prevention grant. It is to focus on relational poverty and the lack of positive relationships in youths' lives.
  - All of Revilla staff are open to talk to the kids to build trust.
  - Engage in out-of-the-classroom activities to build relationships and trust.
  - Every Friday they have a group breakfast with both staff and students where academics is not discussed.
  - Staff and students have shared bathrooms as well.
  - The principal is very available to all students to discuss anything they want to.
- Elementary school practices Positive Behavior Interventions and Support (PBIS).
- Elementary school has flexible seating. Younger teachers are bringing in new out-of-the-box ideas.
- All the school counselors in Ketchikan took trauma-informed training last year.
- Ketchikan entities overall are very informed in trauma.
- Would be nice to have the traditional high school be a more empathetic environment.
- Limiting the number of transitions a student has to make is beneficial, and post transitions in the classroom so students know what to expect.
- Students at Revilla have opportunities to go into the community to see real-world job experiences.
- Alternative schools don't get the same community recognition for achievement that the traditional high schools receive, i.e. sports.
- Need more support in the community for the educational system.

### **PUBLIC TESTIMONY**

Public testimony was heard, and a full transcript was prepared.

### **RECESS**

The meeting recessed at 5:36 p.m.

**Thursday, September 28, 2017**

**CALL TO ORDER – ROLL CALL – 8:00 a.m.**

**AMHB AND ABADA BUSINESS MEETING**

**AMHTA Executive Transition and Governance Project**

Pat Sidmore referred members of the Boards to the Trust charter document they are considering. Charlene Tautfest mentioned that at the final work meeting for these charters, the Boards suggested adding a member from each statutory advisory board to be put on as an ex-officio or ad hoc member to the Trustee meetings to provide input. It is not clear if that is included in the charters or not, but if requested, further comment can be provided before the public comment period closes.

Philip Licht stated that his takeaway overall is that the Trust is really trying to make some good progress to build relationships with their statutory advisors. Their new organizational structure seems to be a step in the right direction. Several comments were made during the meeting regarding the importance of the Trustees relationship with the statutory advisors. One of the only concerns of the advisors was that the Trustees wanted to retain oversight of the decisions of the CEO, which they were hoping that the CEO would have autonomy regarding all the hiring and firing decisions. He also noted that it's not unusual, though, for a board to want to have input into some of the major decisions of a company.

Charlene Tautfest stated that they also suggested the Trustees keep a calendar of advisory board meetings and be invited to attend those meeting.

Pat Sidmore shared a concern that the chair is a voting member on every committee, which may be something the Boards comment about. He also believes that this new organizational structure of the Trust with the charters will ward off tendencies towards strong personalities dominating.

Members of the Boards discussed the possible legislation the Trustees may plan to put forward regarding their ability to make input into their slice of the Permanent Fund Corporation's investment in principal. Pat Sidmore noted that he commented that if this were to take place, the advisory boards should have the ability to comment on it and be part of the legislative process.

It was also noted that any results from the legislative audit of the Trust have not been made public.

**API Governance Seat**

Brenda Moore reported that a resolution was passed for the API Advisory Board to have a representative from the Mental Health Board be a voting member. She stated that she would be willing to continue to be the AMHB representative to the API board, but Charlene Tautfest has also volunteered.

Sharon Clark **MOVED** to appoint Charlene Tautfest to the API Advisory Board, **SECONDED** by Brenda Moore.

During the ensuing discussion, it was noted that Brenda Moore and Charlene Tautfest will be communicating during this transition process, and Brenda would be willing to serve as an alternate if Charlene is unable to attend a meeting. James Duncan suggested a bylaws revision to include an alternate in case the appointee is unable to attend a meeting.

Michael Horton **MOVED TO AMEND** the motion that Brenda Moore is an alternate depending on what the bylaws are for the API governance board. The motion as amended was voted on and **PASSED**.

### **FY'18 Budget Updates**

Pat Sidmore referred members of the Boards to his presentation on the budget and reviewed the comparison between FY '13 and FY '18 and provided some historical perspective to various budget increases and decrements.

One of the aspects of the budget Pat Sidmore highlighted was the fact that the department has realized a \$25 million reduction to behavioral health general funds by capturing \$21 million in federal funds, mostly in Medicaid. He believes this needs to be highlighted to the legislature because they were asked to reduce, and the department was successful. Grant Rich added that half of the treatment and recovery reductions were recognized in the last two fiscal years. The hope is that agencies will bill Medicaid, and Medicaid expansion in particular, when possible. One of the issues is how to nudge agencies and really encourage them to bill Medicaid expansion when possible so that the general fund can be reserved for cases where it's not possible to bill expansion. Pat Sidmore also noted that a big change at the federal level could significantly impact Alaska.

Sharon Clark asked if it was possible the Boards could get a copy of the budget for the Boards to show where the money goes. Pat Sidmore stated that he can send it out to Board members, but also commented that the Boards have no oversight of the budget.

### **FY'18 Legislative Priorities**

Teri Tibbett referred members of the Boards to the legislative report in their packets and noted that it is an updated report from what they received in May. This report reflects the final budget.

Teri Tibbett stated that this is the time of year when the Boards' Legislative Committee determines the Boards' priorities in coordination with the Trust and other beneficiary boards. Two joint priorities the Boards have carried the last two legislative sessions have been maintaining community support services for Trust beneficiaries and making sure there is some kind of a fiscal plan or some revenue measures to pay for those community services.

Volunteers for the Legislative Committee include Robert Coghill, Elizabeth Schultz, James Duncan, Lee Breinig, Charlene Tautfest, Brenda Moore, and Sharon Clark.

Brenda Moore reminded Board members of the Friday legislative teleconferences sponsored by the Trust.

Teri Tibbett also informed the Boards that she is participating on a planning process with the Governor's Council on Disabilities and Special Education to create a five-year plan for FASD. She will report out to the Boards on the progress of that initiative.

### **Officer Elections**

#### **ABADA:**

Renee Schofield nominated Lee Breinig for chair elect, seconded by Robert Coghill. The nomination was accepted, and a vote was taken with all in favor.

Robert Coghill nominated Gunnar Ebbesson as recorder. The nomination was accepted, and a vote was taken with all in favor.

Renee Schofield nominated Robert Coghill as member at-large, seconded by Lee Breinig. The nomination was accepted, and a vote was taken with all in favor.

#### **AMHB:**

The following slate was presented:

- Brenda Moore – chair
- Charlene Tautfest – vice chair
- Sharon Clark – at-large
- Chris Gunderson – treasurer
- Stephen Sundby - secretary

Michael Horton **MOVED** to accept the slate, **SECONDED** by Elizabeth Schultz. A vote was taken, and the motion **PASSED**.

### **Old Business**

#### **Meeting in Barrow**

Robert Coghill **MOVED** that the Executive Committees review the location for their next meeting.

To expound on the motion, Robert Coghill explained that they have had two expensive meetings in a row. They are planning to have a third rural meeting in Barrow as their next meeting, and because the full Board does not have all the facts regarding budgetary resources, he would like the final determination to be made by the Executive Committees once they have all the required information.

Pat Sidmore added that in the last fiscal year the department decided to cost out all of the Boards' administrative support, so the Boards received a \$35,000 bill at the end of the year that they had not budgeted for. He stated that it may make sense for them to be a little bit more

conservative on their second trip of the year given that they do not know what to expect at the end of this fiscal year.

Further discussion on the matter ensued noting that meeting locations are decisions of the full Boards, and the full board decided to go to Barrow at the last meeting. It was also suggested that because of the low attendance at this meeting, they should do an e-mail poll to all members of the Boards to determine how many people will be attending the Barrow meeting to be able to estimate costs. It was also noted that because the Boards have decreased their meeting schedule from three meetings a year to two, there should be ample funding to go to Barrow.

Pat Sidmore stated that he believes they can hold the meeting in Barrow if that is the will of the Boards, but it may cut down on other travel needed for the Boards.

A newsletter highlighting Board member activities was suggested as a way to keep members of the Boards engaged in between meetings, but this may be over burdensome to staff. A suggestion was also made to create a social media account that Board members can communicate through. Bev Schoonover stated that she will look into it, but also noted that there are some intricacies of the Open Meetings Act that may impact that.

Sharon Fishel noted that when the Boards agreed to go from three to two face-to-face meetings a year, they also agreed to hold two teleconference meetings in place of that third meeting, and only one teleconference meeting has actually taken place.

James Duncan **MOVED** to defer the issue to the Executive Committees and for them to keep the full Boards abreast of all changes, **SECONDED** by Gunnar Ebbesson.

Philip Licht recommended that the staff take a closer look at their limited budget information, and if it looks like Barrow will present a challenge, then they take a step back and see about other options.

A vote was taken, and the motion **PASSED**.

### **New Business**

Gunnar Ebbesson engaged the boards in a conversation about Alaska only having behavioral treatment for trauma-affected youth. He stated that the Boards should come up with some solutions to start encouraging local treatment centers to follow evidence-based trauma and attachment-focused treatment by engaging in trauma-engaged education for providers.

Gunnar Ebbesson called for action to ask the Boards and maybe the staff to start to explore youth treatment being trauma engaged in the state, **SECONDED** by Robert Coghill.

Upon further discussion, it was suggested to create a white paper about the issue. It was also suggested to review standards of care.

Brenda Moore **MOVED** that they direct the staff to do some kind of a publishable white paper on the difference between trauma-informed and trauma-engaged care and the outcomes, **SECONDED** by Lee Breinig. A vote was taken, and the motion **PASSED**.

### ***Interview Team***

Pat Sidmore stated that the Boards will utilize the same interview team for the next round of interviews for executive director of the Boards.

### **Spring Meeting Dates**

Robert Coghill **MOVED** to move the dates of the next meeting to the week of April 23<sup>rd</sup>, **SECONDED** by Christopher Gunderson. The motion died.

Pat Sidmore noted that the Boards had already determined the next meeting to take place the week of April 16<sup>th</sup>.

### **DISCUSSION WITH SENATOR DAN SULLIVAN**

Senator Dan Sullivan appeared telephonically to report to the Boards. He stated that in his first two-and-a-half years as senator, he has learned a lot about the issues of addiction and mental health from this board and others, and he has taken a lot of interest. He feels that he has learned the most on this topic than any other topic thus far, and he is trying to take some action on it.

Senator Sullivan appreciated the Wellness Summit at Mat-Su College last year on the challenges of opioid addiction. He stated that the turnout was way beyond what was anticipated with almost 500 in attendance and several hundred more online. He stated that the Comprehensive Addiction and Recovery Act was passed to bring more funds into the state.

Senator Sullivan noted that when he is home in Alaska, he enjoys meeting with people in recovery and getting into issues at a grassroots level. While attending the Mat-Su Opioid Task Force in June, one suggestion that resonated with him was testimony of someone who was only eligible for Medicaid if they earned 138 percent of the poverty level, but they had an opportunity to take a job, but they were going to lose their Medicaid and long-term recovery treatment services. Senator Sullivan stated he brought back to the President and Vice President the concept of de-coupling that so people can take advantage of economic opportunities, and this actually was included in the health care bill that did not pass this past summer. It was a 45 billion dollar fund to fund mental health and addiction services.

Senator Sullivan added that there has been a lot of concern about Medicaid in the various iterations of the federal health care bills. He stated that they were able to get a cost differential into the last bill that took into account the high-cost states like Alaska and Hawaii. It would have been almost a \$4 billion increase to Alaska for Medicaid. He stated that although the second bill also did not make it through, there has been significant progress.

Senator Sullivan stated that he has also co-sponsored the Clay Hunt Suicide Prevention for American Veterans Act. He is also working with another senator from Indiana on legislation

they are calling the National Suicide Hotline that would work with the FCC and the VA to create a more efficient suicide hotline possibly similar to a 911 type of number.

Senator Sullivan stated that there is a lot of bipartisan support and interest on issues of mental health, addiction, and alcohol abuse. He thanked the Boards for all their hard work, and he looks forward to continuing to learn from and work with them.

## **SITE VISIT DEBRIEF AND CLOSING REMARKS**

Members of the Boards combined their site visit comments with their closing remarks of the meeting. Some highlights from the site visits are as follows:

### **Vigor Industrial**

- Wonderful environment, and relationship building within the work environment was vital to recovery.
- This model could be successfully replicated in other businesses.
- They embrace the trauma component and the relationship component.

### **Revilla Alternative School**

- Focus on the importance of relationships, not just academics.
- Principal models this with staff as well as to the kids.
- The school is trauma engaged.
- Nice to see how close the community therapeutic services were to the school.

### **Ketchikan Correctional Center**

- Does not have a mental health unit.
- Arrestees placed in a room called “The Bubble” with a large window that is viewable to passersby. The arrestee is in a gown with no clothes underneath. Was upsetting to see.
- The superintendent and staff were wonderful, but the facility needs to be upgraded.
- Compassionate staff who are passionate about wanting some type of mental health facility.
- Small facility.
- Same people funneling in and out of the correctional system.

### **First City Homeless Shelter**

- Amazing what Ketchikan has been able to accomplish with the homeless.
- The volunteers are incredible.
- The youth center was almost next door to the overnight shelter, which was disconcerting.
- The warming center was a bit dehumanizing. Granted, it’s keeping them safe from death, but there isn’t much else.
- Fascinating that with an unsustainable budget, the warming center is able to remain open every night of the year. Passionate volunteers, and amazed to see the resilience in the community effort.
- They need a new facility.

### **Ketchikan Overall**

- There seem to be many active coalitions and things are being accomplished in a very measured, thoughtful, evidence-based, and human way.
- Apparent there is a lot of collaborations among agencies and entities in the community.
- Public testimony emphasized the need for a detox facility in Ketchikan.
- The people of Ketchikan are very welcoming and friendly.
- Last year Ketchikan's DJJ facility closed, so now the kids have to go to Anchorage or Juneau away from their families.
- Youth organizations work very well together.
- Akeela's JSAP/ASAP program closed the Ketchikan office and moved the oversight to Kenai.

### **ADJOURN**

Renee Schofield **MOVED** to adjourn, **SECONDED** by Philip Licht. Hearing no objection, the motion **PASSED**, and the meeting adjourned at 11:42 a.m.

## MOTIONS

1. James Duncan **MOVED** to approve the minutes from the May 2017 meeting, **SECONDED** by Brenda Moore. Hearing no objection, the motion **PASSED**, Page 2.
2. Sharon Clark **MOVED** for an amendment to the agenda to define “Other Business” as “Old Business” and “New Business,” **SECONDED** by Alavini Lata. Hearing no objection, the motion **PASSED**, Page 3.
3. After other amendments were made to the schedule on the agenda, Charles Gorman **MOVED** to approve the agenda as amended, **SECONDED** by James Duncan. Hearing no objection, the motion **PASSED** and the agenda was approved as amended, Page 3.
4. Sharon Clark **MOVED** to appoint Charlene Tautfest to the API Advisory Board, **SECONDED** by Brenda Moore. During the ensuing discussion, it was noted that Brenda Moore and Charlene Tautfest will be communicating during this transition process, and Brenda would be willing to serve as an alternate if Charlene is unable to attend a meeting. James Duncan suggested a bylaws revision to include an alternate in case the appointee is unable to attend a meeting. Michael Horton **MOVED TO AMEND** the motion that Brenda Moore is an alternate depending on what the bylaws are for the API governance board. The motion as amended was voted on and **PASSED**, Pages 15 – 16.
5. Michael Horton **MOVED** to accept the slate, **SECONDED** by Elizabeth Schultz. A vote was taken, and the motion **PASSED**, Page 17.
6. Robert Coghill **MOVED** that the Executive Committees review the location for their next meeting, Page 17.
7. James Duncan **MOVED** to defer the issue to the Executive Committees and for them to keep the full Boards abreast of all changes, **SECONDED** by Gunnar Ebbesson. Philip Licht recommended that the staff take a closer look at their limited budget information, and if it looks like Barrow will present a challenge, then they take a step back and see about other options. A vote was taken, and the motion **PASSED**, Page 18.
8. Brenda Moore **MOVED** that they direct the staff to do some kind of a publishable white paper on the difference between trauma-informed and trauma-engaged care and the outcomes, **SECONDED** by Lee Breinig. A vote was taken, and the motion **PASSED**, Page 19.
9. Robert Coghill **MOVED** to move the dates of the next meeting to the week of April 23<sup>rd</sup>, **SECONDED** by Christopher Gunderson. The motion died, Page 19.
10. Renee Schofield **MOVED** to adjourn, **SECONDED** by Philip Licht. Hearing no objection, the motion **PASSED**, and the meeting adjourned at 11:42 a.m., Page 21.