

**State of Alaska
FY2016 Governor Amended Operating
Budget**

**Department of Health and Social Services
Behavioral Health
Results Delivery Unit Budget Summary**

Behavioral Health Results Delivery Unit**Contribution to Department's Mission**

To manage an integrated and comprehensive behavioral health system based on sound policy, effective practices, and open partnerships.

Results

(Additional performance information is available on the web at <https://omb.alaska.gov/results>.)

Core Services

- Identify Behavioral Health needs by population and geography and develop and implement a statewide strategy to meet those needs.
- Develop and maintain a stable, accessible, and sustainable system of behavioral healthcare for Alaskans in partnership with providers and communities.
- Protect and promote the improving behavioral health of Alaskans.
- Provide accessible, quality, active inpatient treatment in a safe and comfortable setting.
- Provide and coordinate interagency behavioral healthcare.

Measures by Core Service

(Additional performance information is available on the web at <https://omb.alaska.gov/results>.)

1. **Identify Behavioral Health needs by population and geography and develop and implement a statewide strategy to meet those needs.**
2. **Develop and maintain a stable, accessible, and sustainable system of behavioral healthcare for Alaskans in partnership with providers and communities.**
3. **Protect and promote the improving behavioral health of Alaskans.**
4. **Provide accessible, quality, active inpatient treatment in a safe and comfortable setting.**
5. **Provide and coordinate interagency behavioral healthcare.**

Major RDU Accomplishments in 2014**Measuring for Performance**

- Using data from FY2014, the division measured access, engagement, retention, quality, and client treatment outcomes of all provider agencies. All outcome measures met the threshold of "clinical and statistical" significance.
- Of the adults with severe mental illness, 75.4 percent showed improvement;
- Of the children / youth with severe emotional disturbance, 69.1 percent showed improvement; and
- Of those with substance abuse and addiction problems, 95.2 percent of youth and 86.2 percent of adults showed improvement.

Tribal / Rural System Development

- Five agencies went through their departmental/program review, and per the reviewers, all five agencies showed a marked improvement from the previous review and it was noted the improvement was connected to enhanced technical assistance that had been provided. All five agencies had their program approval extended. Also, during this timeframe two of the agencies had their National Accreditation extended for another three years and one agency received Commission on Accreditation of Rehabilitation Facilities Accreditation.

Suicide Prevention

- Eight trainers were newly certified throughout Alaska to implement the National Alliance on Mental Illness suicide postvention training model – *Connect*. There are approximately 35 postvention trainers that are implementing

trainings throughout the state. Postvention trainings have occurred in a variety of disciplines to include law enforcement, faith based organizations, education, mental health and substance abuse treatment centers, and social services.

Family Focused Treatment Services

- The Parenting with Love and Limits (PLL) contract provided bi-weekly telephonic supervision to clinicians who have been trained in nine sites in Anchorage (2 sites), Fairbanks (2 sites), Kodiak, Mat-Su, Nome, Ketchikan, and Soldotna.
 - A total of 246 youth and families were served during FY2014, including youth returned to the home from in-state and out-of-state residential treatment and in-state Division of Juvenile Justice facilities. The numbers of youth served in all sites met the anticipated outcomes, and as a result, many youth were brought home early from treatment and were served in the home with their family,
 - In other situations, Parenting with Love and Limits was effectively used to divert potential out-of-home placement, and
 - There were 35 staff fully trained in Parenting with Love and Limits in FY2014. Outcomes are demonstrating that the investment of the state in Parenting with Love and Limits is effective in serving the target population and keeping them in their home communities with their families.
- A Transitional Aged Youth contract using the Transition to Independence Process (TIP) model included site visits to Anchorage, Sitka, Juneau, Fairbanks, Ketchikan, Mat-Su, Nome, and Soldotna in which community-wide stakeholder trainings occurred in addition to grantee focused Transitional Aged Youth training, specifically with program managers and peer facilitators serving young people ages 14-21.
 - During FY2014, 983 transitional aged youth and families were served and positive outcomes resulted. The numbers of youth served in all sites met the anticipated outcomes, and
 - There were 141 unique staff fully trained in the Transition to Independence Process Model in FY2014.

Alaska Psychiatric Institute

- Established a peer support program increasing patient interaction and provided training to staff on recovery.

Key RDU Challenges

Performance Management System

- The Division of Behavioral Health continues to develop and implement a performance management system to ensure an efficient, equitable, and effective system of behavioral health care for Alaskans. The division is applying the results based budgeting framework to inform the performance management system. A performance oriented system requires an integrated data infrastructure system. Related challenges involve budgeting for appropriately skilled research staff to maximize the necessary data collection, analysis, reporting, and application to business and service delivery practices. This ongoing system refinement absorbs a significant amount of leadership time and energy that limits our resources for timely analysis of emerging issues.

Local Psychiatric Emergency Services

- 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, which is the only state-owned psychiatric hospital. The Alaska Psychiatric Institute, which has very limited capacity (80 total beds, with only 50 acute adult beds), has experienced a significant census increase in recent years. This admission pressure has forced the hospital to adopt an “acute care model” that does not allow for complete patient stabilization before the majority of its patients must be discharged in order to provide a bed for another patient. This has led to a higher than desired rate of readmissions to the Alaska Psychiatric Institute within 30 days, ending with the alarming statistic that over 30 percent of Alaska Psychiatric Institute discharges are now readmitted within 180 days of their discharge.

Alaska Psychiatric Institute

- Prevent and manage significant levels of patient violence to assure a safe environment for patients and staff.

System Change Management

- Emerging issues in the national and state landscape have significant implications and challenges for the Division of Behavioral Health.

- Coordination of behavioral health with other non-traditional settings will require changes in business and clinical practice with new resources and skills, including business modeling that balances fiscal, revenue, and clinical management and results in maximum service capacity and delivery of quality care with meaningful outcomes. These efforts at “cross coordination” with behavioral health include primary care, medical home models, corrections, therapeutic courts, and domestic violence/sexual assault providers.
- The Diagnostic and Statistical Manual of Mental Disorders, fifth edition has been released by the American Psychiatric Association. Changes to the Diagnostic and Statistical Manual of Mental Disorders will require modification to regulations and to Alaska's Automated Information Management System “diagnostic page” of the minimal data set. The Diagnostic and Statistical Manual of Mental Disorders includes structural alignment with the tenth revision of the International Statistical Classification of Diseases and Related Health Problems (mandated implementation of 10/2015), and therefore assumes mutual implementation timeframes.

Significant Changes in Results to be Delivered in FY2016

Fetal Alcohol Spectrum Disorder

- With more stability among our Fetal Alcohol Spectrum Disorders Diagnostic Teams and an increase in Fetal Alcohol Spectrum Disorders Case Management Provider Agreements, we anticipate increases in clients receiving both diagnostic services and case management services being offered in more communities.

Designated Evaluation and Treatment Services for Involuntary Commitments

- The reduction to the Medicaid Disproportionate Share Hospital funds will have an impact on services in FY2016. An inability to fully support the Designated Evaluation and Treatment program will have immediate and serious impacts on the Alaska Psychiatric Institute's admissions capacity, overwhelming its ability to serve Alaskans court-ordered to a psychiatric hospital for evaluation and / or treatment.

Community Action Prevention and Intervention Grants

- FY2016 will be the second year of a new four-year grant cycle for our Comprehensive Behavioral Health Prevention and Early Intervention coalition grant program. Year one of the new grant (FY2015) is being spent mostly on community assessment, capacity building, identifying intermediate variables, and selecting strategies to focus on change at the policy, system, and environmental (PSE) level. We shifted our approach for comprehensive proposals, focusing more on a data-driven process; applications from coalitions, not individual agencies; community readiness to act; strategic planning; environmental strategies (strategies to change the conditions that lead to behavioral health concerns such as youth access to alcohol); and looking for uniform population-level change (30-day alcohol use by youth; binge drinking; age of onset for alcohol, marijuana and other drugs, etc.). During FY2016 all twenty comprehensive prevention coalition grantees will move into implementation and evaluation, continuing to carry out the Strategic Prevention Framework with fidelity.

Alaska Psychiatric Institute

- Standardize hospital clinical and business operations to meet the challenges of the Affordable Care Act.

Contact Information
Contact: Sarah Woods, Deputy Director Phone: (907) 465-1631 Fax: (907) 465-2499 E-mail: sarah.woods2@alaska.gov

**Behavioral Health
RDU Financial Summary by Component**

All dollars shown in thousands

	FY2014 Actuals				FY2015 Management Plan				FY2016 Governor Amended			
	UGF+DGF Funds	Other Funds	Federal Funds	Total Funds	UGF+DGF Funds	Other Funds	Federal Funds	Total Funds	UGF+DGF Funds	Other Funds	Federal Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
BH Treatment and Recovery Grants	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	60,995.5	2,242.3	5,835.5	69,073.3
AK Fetal Alcohol Syndrome Pgm	1,082.9	0.0	0.0	1,082.9	1,182.1	0.0	0.0	1,182.1	0.0	0.0	0.0	0.0
Alcohol Safety Action Program	2,229.7	1,301.7	278.4	3,809.8	2,720.4	1,544.2	316.6	4,581.2	2,745.7	1,716.6	316.6	4,778.9
Behavioral Health Grants	24,199.3	1,469.3	3,865.6	29,534.2	25,652.6	1,425.5	3,825.9	30,904.0	0.0	0.0	0.0	0.0
Behavioral Health Administration	7,910.0	356.6	1,807.2	10,073.8	7,546.9	648.9	2,041.6	10,237.4	7,751.1	737.2	2,074.4	10,562.7
BH Prev & Early Intervntn Grants	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	6,598.4	200.0	4,064.0	10,862.4
CAPI Grants	1,974.3	1,441.1	3,187.0	6,602.4	1,836.4	200.0	3,651.9	5,688.3	0.0	0.0	0.0	0.0
Rural Services/Suicide Prevent'n	2,942.1	0.0	335.9	3,278.0	3,579.9	0.0	412.1	3,992.0	0.0	0.0	0.0	0.0
Psychiatric Emergency Svcs	7,334.7	0.0	0.0	7,334.7	7,633.7	0.0	0.0	7,633.7	0.0	0.0	0.0	0.0
Svcs/Seriously Mentally Ill	16,164.0	845.4	855.0	17,864.4	17,330.3	850.0	1,009.5	19,189.8	0.0	0.0	0.0	0.0
Designated Eval & Treatment	5,933.1	0.0	0.0	5,933.1	3,390.7	0.0	0.0	3,390.7	3,957.7	0.0	0.0	3,957.7
Svcs/Severely Emotion Dst Yth	13,233.2	470.0	567.0	14,270.2	14,223.9	116.8	1,000.1	15,340.8	0.0	0.0	0.0	0.0
Alaska Psychiatric Institute	6,444.1	24,901.4	0.0	31,345.5	7,446.9	25,728.1	0.0	33,175.0	7,243.5	26,047.8	0.0	33,291.3
API Advisory Board	7.3	0.0	0.0	7.3	9.0	0.0	0.0	9.0	9.0	0.0	0.0	9.0
AK MH/Alc & Drug Abuse Brds	501.5	470.0	10.1	981.6	541.0	504.0	99.8	1,144.8	549.1	510.5	100.4	1,160.0
Suicide Prevention Council	576.9	17.6	0.0	594.5	662.5	0.0	0.0	662.5	664.6	0.0	0.0	664.6
Residential Child Care	4,239.5	0.0	53.9	4,293.4	4,545.7	0.0	265.4	4,811.1	4,497.2	0.0	267.3	4,764.5
Totals	94,772.6	31,273.1	10,960.1	137,005.8	98,302.0	31,017.5	12,622.9	141,942.4	95,011.8	31,454.4	12,658.2	139,124.4

Behavioral Health
Summary of RDU Budget Changes by Component
From FY2015 Management Plan to FY2016 Governor Amended

All dollars shown in thousands

	<u>Unrestricted</u> <u>Gen (UGF)</u>	<u>Designated</u> <u>Gen (DGF)</u>	<u>Other Funds</u>	<u>Federal</u> <u>Funds</u>	<u>Total Funds</u>
FY2015 Management Plan	78,695.6	19,606.4	31,017.5	12,622.9	141,942.4
One-time items:					
-Behavioral Health Grants	-1,771.0	0.0	-200.0	0.0	-1,971.0
-Behavioral Health Administration	0.0	0.0	-230.4	0.0	-230.4
-Svcs/Seriously Mentally Ill	0.0	0.0	-850.0	0.0	-850.0
-Alaska Psychiatric Institute	0.0	0.0	-75.0	0.0	-75.0
-AK MH/Alc & Drug Abuse Brds	0.0	0.0	-459.0	0.0	-459.0
Adjustments which continue current level of service:					
-BH Treatment and Recovery Grants	46,616.5	15,937.7	2,242.3	5,835.5	70,632.0
-AK Fetal Alcohol Syndrome Pgm	-1,182.1	0.0	0.0	0.0	-1,182.1
-Alcohol Safety Action Program	25.3	0.0	172.4	0.0	197.7
-Behavioral Health Grants	-8,175.3	-15,706.3	-1,225.5	-3,825.9	-28,933.0
-Behavioral Health Administration	424.3	-220.1	318.7	32.8	555.7
-BH Prev & Early Intervntn Grants	4,411.6	2,186.8	200.0	4,064.0	10,862.4
-CAPI Grants	-1,836.4	0.0	-200.0	-3,651.9	-5,688.3
-Rural Services/Suicide Prevent'n	-1,393.1	-2,186.8	0.0	-412.1	-3,992.0
-Psychiatric Emergency Svcs	-7,633.7	0.0	0.0	0.0	-7,633.7
-Svcs/Seriously Mentally Ill	-17,330.3	0.0	0.0	-1,009.5	-18,339.8
-Designated Eval & Treatment	567.0	0.0	0.0	0.0	567.0
-Svcs/Severely Emotion Dst Yth	-14,223.9	0.0	-116.8	-1,000.1	-15,340.8
-Alaska Psychiatric Institute	143.9	0.0	394.7	0.0	538.6
-AK MH/Alc & Drug Abuse Brds	8.1	0.0	465.5	0.6	474.2
-Suicide Prevention Council	2.1	0.0	0.0	0.0	2.1
-Residential Child Care	-48.5	0.0	0.0	1.9	-46.6
Proposed budget decreases:					
-BH Treatment and Recovery Grants	-1,558.7	0.0	0.0	0.0	-1,558.7
-Alaska Psychiatric Institute	-347.3	0.0	0.0	0.0	-347.3
FY2016 Governor	75,394.1	19,617.7	31,454.4	12,658.2	139,124.4

Behavioral Health
Summary of RDU Budget Changes by Component
From FY2015 Management Plan to FY2016 Governor Amended

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>
Amended					