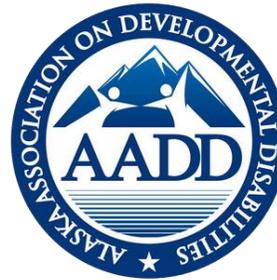


ALASKA HEALTHCARE 101

December 5, 2022 | 12:00-1:15PM

Alaska Healthcare Delivery System Part 2

PRESENTED BY



3-Part Series

- **Nov 30:** Alaska Healthcare Delivery System Part 1
- **Dec 5:** Alaska Healthcare Delivery System Part 2
- **Dec 12:** How We Pay for Healthcare: Medicaid, Medicare, Private Pay

Who You Will Meet

Part 1

Alaska Hospital & Healthcare Association
Alaska Native Health Board
Alaska Primary Care Association
Alaska State Medical Association

Part 2

Alaska Mental Health Trust Authority
Alaska Behavioral Health Association
Alaska Assoc on Dev Disabilities
AARP
Statewide Independent Living Council

What You Will Hear

“Who we are . . . What we do . . . What you need to know”

ALASKA'S HEALTHCARE SYSTEM



nursing homes &
assisted living



community
based
services



aging
population



behavioral
health



hospitals

community
health centers



payers



tribal
health

healthcare
professionals



Trust

Alaska Mental Health
Trust Authority

Steve Williams, CEO

The Trust is an independent state corporation established in 1994, with a seven-member board of trustees.

Trust beneficiaries include Alaskans experiencing:

- Mental illness
- Intellectual/developmental disabilities
- Substance use disorders
- Alzheimer's Disease and related dementia
- Traumatic brain injuries



Where is the Alaska Mental Health Trust Authority in the healthcare delivery system?

- Catalytic funder: grants more than \$20M a year to nonprofits, service providers, state and local governments, and Tribal organizations
- Advocacy, policy, and planning leader
- Focused areas of work
 - Disability Justice
 - Mental Health and Addiction Interventions
 - Beneficiary Employment & Engagement
 - Housing and Home & Community Based Services
 - Workforce Development
 - Early Childhood Intervention and Prevention
- Behavioral health crisis response (Crisis Now)



What you need to know about the Trust

- **Self-funded**
 - Compliments state, private and other funders
 - Trust Land Office
- **Importance of community-based services**
 - Least restrictive environment
 - Minimize need for expensive, acute-level care and institutionalization
- **Access to care, robust continuum of care**
 - prevention, intervention, treatment, and community-based services
- **Workforce**

Essential Beneficiary Supporting Professions:

- *Direct Support Professionals (DSPs) and Personal Care Assistants (PCAs)*
- *Case Managers and Care Coordinators*
- *Community Health Aides and Behavioral Health Aides*
- *Behavioral Health Clinicians*
- *Peer Support Specialists*
- *Psychiatrists, Geriatricians, and Neurologists*

Trust Contacts

Trust

Alaska Mental Health
Trust Authority

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Healthcare 101 Education Series: Behavioral Health

December 5, 2022

Sherrie Wilson Hinshaw, Interim CEO

Alaska Behavioral Health Association (ABHA)

Who we are



- A 501(c)6 trade association comprised of over 70 provider organizations
- Formed in 1996 to help improve the delivery of substance use and mental health treatment services in Alaska
- Behavioral health services are a critical part of the overall well-being of Alaskans, made possible only through provider/member organizations.
- Members range from small community clinics to the largest mental health and drug and alcohol treatment providers in the state.
- Members provide services from prevention and early intervention services to acute, inpatient and residential care.



Members serve all ages,
infants to older adults



20,000

Alaskans served by
members with Medicaid
behavioral health
services annually

Our vision is to advance and elevate the role of behavioral health and whole person care so all Alaskans will thrive

Where we are in the healthcare delivery system



What is behavioral health?

- Broad term that encompasses an individual's internal experience as well as external behaviors that affect their health and well-being.
- Services includes both mental health and substance misuse treatment, as well as promotion of health and well-being, supporting both individuals, families, and communities.

Who provides services?

- Behavioral health clinical associates
- Mental health clinicians
- Substance use disorder counselors
- Peer support providers
- Clinical social workers
- Psychologists
- Psychiatrists
- Nurse providers
= Licensed, credentialed, qualified professionals

Where is care delivered?

Alaskans receive mental health and substance use disorder prevention, treatment, and recovery services from federal, state, and private systems of care.

- Community behavioral health
- Federally Qualified Health Centers
- Public and private hospitals
- Tribal health corporations
- Veteran Health Administration
- Department of Corrections
- Private providers of care

Are services effective?

Treatment is effective. Recovery is possible.

- Treatment prevents costly progression of diseases that cost Alaska millions of dollars in co-occurring diseases
- Mental health & physical health are tied closely together with ACES

We are facing a tremendous need



New studies showing up to 25% of the population is affected by anxiety disorders, the most common mental illness in the US

>50%

Over half of adults with mental illness do not receive treatment

15%

Approximately 15% of youth live with major depression.



Behavioral health affects all of us – we are all either directly impacted or one degree away.



Behavioral health and wellness has become one of the most pressing health crises in the nation - touching every one of us directly or indirectly. Estimated \$400B in direct cost of care and loss of productivity to our economy and society.

What you need to know



- *Current system is at breaking point*
 - Increased needs have added pressure to an already burdened system – resources are not keeping up with demand
 - Low reimbursement rates contribute to workforce shortages and decreased access care
 - Administrative burden contributes to decreased workforce capacity and access to care
- *Collectively need to address lack of parity & comprehensive integration*
 - Behavioral health is financed, structured, regulated separately than the broader healthcare system, contributes to lack of parity
 - Modernize physical and mental health services by aligning service delivery, provider payment, quality measures, and training toward the whole health of individuals and integrated care
- *Behavioral health services are a solution*
 - Invest in programs that promote health and prevent substance misuse and suicide
 - Demonstrated cost savings over higher-cost care settings and disease progressions, with improved physical health outcomes

THANK YOU

Sherrie Wilson Hinshaw, MS, Interim CEO

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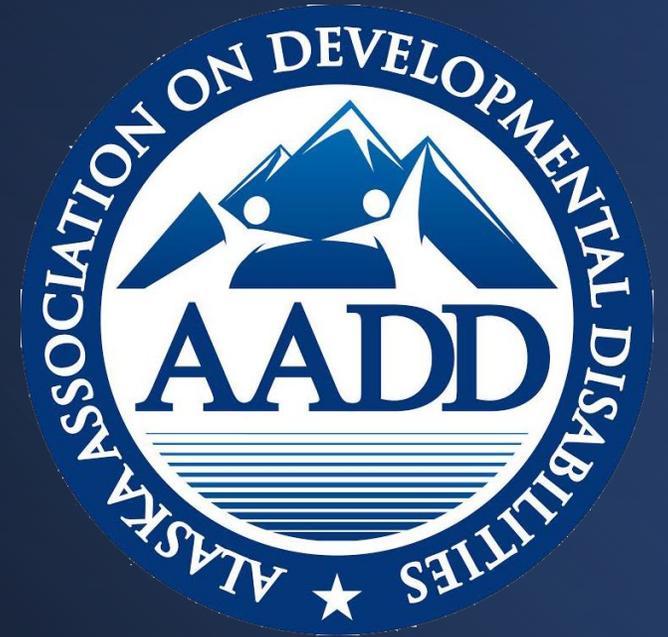
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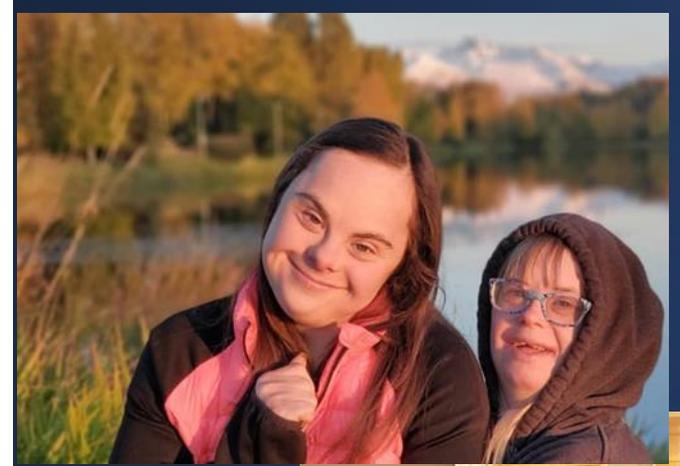
Alaska Association on Developmental Disabilities

Kim Champney, Executive Director



We are the voice of Alaskans with Developmental Disabilities

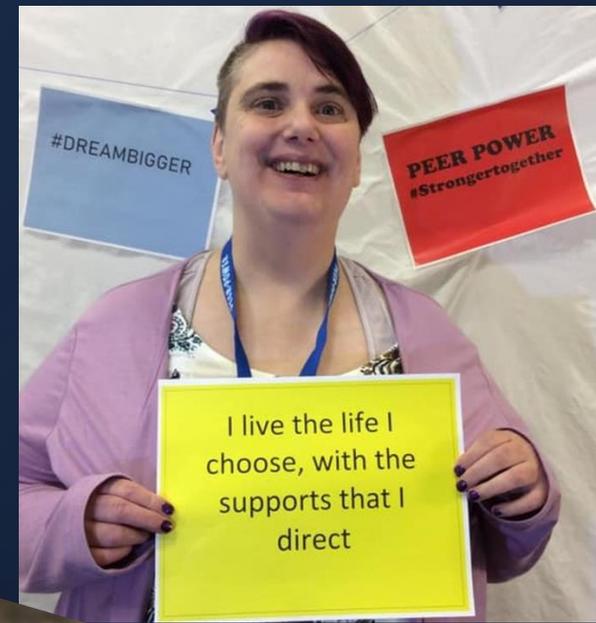
- A trade association 501(c)3 nonprofit
- Representing nearly 70 community-based developmental disability service providers statewide
- Providing services to children, adults and families in their own homes, the community and provider-owned settings (group homes or apartments).

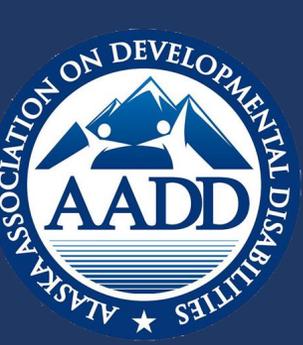




Where are we in the system?

- Typically provide lifelong services
- Over 90% of the funding is Medicaid
- Proven to be more cost-effective than institutional settings
 - *Institutional care vs. SFY 2021 Expense: would have cost more than twice as much**
- Services provided by Direct Support Professionals (DSPs) employed by organizations ranging in size from 2 or 3 clients to 800 clients





What do you need to know?

1. **Waitlist:** The State has maintained a waitlist for services since mid-1990s. Last session HB281 directed Senior & Disabilities Services to create a five-year plan to eliminate the waitlist.
2. **Workers:** Severe worker shortages + no control over pricing structure = system breakdown
3. **Rates:** Reimbursement rates have not been re-established since 2011 - this is impacting access to care. People with higher needs are being served in more expensive, non-community settings.



Kim Champney

Executive Director

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Tentative AADD Fly-In/Key Campaign Dates: February 27-March 1

We are the voice for Alaskans over age 50

Mission: To empower people to choose how they live as they age.

- Non-profit, non-partisan for the 50+
- 77,000 members in Alaska
- Advocacy, education, engagement, and community action
- Alaska has the fastest growing senior population per capita



Where are Older Alaskans in the Healthcare Delivery System?

Alaska's Continuum of Care for Older Alaskans	Community-Based Services	Home-Based Services	Intensive Home and Community-Based Services	Services in a Residential Care Setting	Most Intensive Institutional Services
	<ul style="list-style-type: none"> * Congregate Meals * Public Transportation * Information/Referral/Personal Advocacy * ADRD Education and Support * Health Promotion Activities * Senior Employment Services (MASST) * Independent Living Apartments * Senior Centers * Senior Volunteers 	<ul style="list-style-type: none"> * Home Delivered Meals * Assisted Transportation * Shopping Assistance * Home Repair * Senior Companion Volunteers *Homemaker/Chore 	<ul style="list-style-type: none"> * Adult Day Services * Counseling * Family Caregiver Support * In-Home Respite Care * Home Health Care * Hospice Care * Personal Care 	<ul style="list-style-type: none"> * Assisted Living Homes * Pioneers' Homes 	<ul style="list-style-type: none"> * Acute Care/Hospital * Nursing Home Care * Residential Hospice Care
	Long Term Care Ombudsman				
	Care Coordination/Case Management: personal assessment/plan of care/follow-up				
	Adult Protective Services: investigation and services to abuse/neglect victims				

What You Need to Know About Services for Older Alaskans

- Medicare does not pay for long term care
- Alaska has the highest cost of skilled nursing facility care in the country (4x the cost of providing care at home)
- Staffing shortages are resulting in people not receiving the services they need



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We Are the Voice Of...



- Alaskans with disabilities of all ages, based on the belief that all people can live with dignity, make their own choices, and participate fully in society.
- Focus is on consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, resulting in the integration and full inclusion of individuals with disabilities within the communities of their choice.
- The SILC oversees the delivery of Independent Living Services to persons with disabilities throughout the State to promote a philosophy of Independent Living.
- The SILC must be comprised of a majority of persons with disabilities. The SILC strives to be diverse across both the disability spectrum and geographical areas of the state.
- Having a strong network for independent living in a state or territory is crucial. Collaboration can create a cohesive and unified vision among all stakeholders who have an interest in issues that impact citizens with disabilities.
- The SILC and the Centers for Independent Living (CILs) with stakeholder feedback, write the State Plan for Independent Living (SPIL).

Where We Fit..

State Plan for Independent Living (SPIL)

1. The purpose of the state plan is to describe how the state's network of independent living programs and services will meet the needs of persons with disabilities in the state for the next three years.
2. The SPIL identifies the unique barriers to independent living(IL) facing Alaskans with disabilities and outlines how the IL Network will address these barriers to improve IL Services at community and statewide levels.
3. The SILC coordinates activities with other entities that facilitate the provision of or provide long-term community-based services and supports as outlined in the SPIL

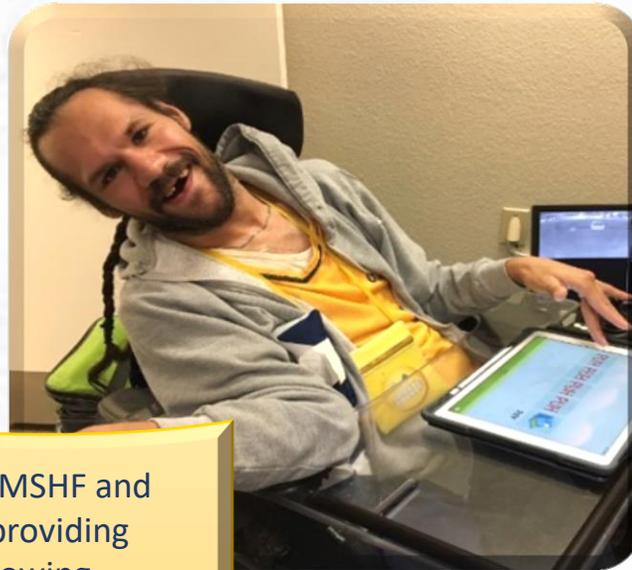
Goals in Current SPIL

1. Transportation
2. Housing
3. Employment
4. Health & Wellness
5. Assistive Technology
6. Diversity
7. Youth Transition
8. IL Network
9. Sustainability

SILC Activities



IL Conference: The SILC, AWIB, DVR, SDS, and the GCDSE, Held a 3-day conference on resources for Independent Living, Recreation, and Employment for Alaskans with Disabilities



Assistive Technology: With grants from MSHF and AMHT, the SILC spearheaded a program providing assistive tech and home modifications allowing participants to live more independently.



Rural Ramps: custom ramps for homes, schools, and smaller airplanes increasing accessibility within communities.





Why We Need Your Voice in Juneau

- **HBCS are the frontline of prevention from overwhelming Alaska's already strained healthcare delivery system. They provide prevention and early intervention before persons decline into the more acute need levels of care.**
- **Cost Savings:** The HBCS waiver programs allow Alaskans with disabilities to remain in their own homes which saved the State \$427,395,653.00 for FY2022 alone. A cost savings percentage of **252%**.
- Studies indicate better physical health and functional fitness of individuals living independently vs institutionalized care.
- Support of HBCS allows Alaskans to make their own decisions regarding the most fundamental aspects of life based on their individual needs within their own communities.



Contact Information

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- Legislative Fly In Dates: February 15th, 16th, 17th 2023

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