

HOUSE FINANCE COMMITTEE
February 4, 2010
9:10 a.m.

9:10:03 AM

CALL TO ORDER

Co-Chair Hawker called the House Finance Committee meeting to order at 9:10 a.m.

MEMBERS PRESENT

Representative Mike Hawker, Co-Chair
Representative Bill Stoltze, Co-Chair
Representative Bill Thomas Jr., Vice-Chair
Representative Allan Austerman
Representative Mike Doogan
Representative Anna Fairclough
Representative Neal Foster
Representative Les Gara
Representative Mike Kelly
Representative Woodie Salmon

MEMBERS ABSENT

Representative Reggie Joule

ALSO PRESENT

Dr. William Doolittle, Chairman, Board of Trustees, Alaska Mental Health Trust Authority; Jeff Jessee, Chief Executive Officer, Alaska Mental Health Trust Authority

PRESENT VIA TELECONFERENCE

None

SUMMARY

HB 300 APPROP: OPERATING BUDGET/LOANS/FUNDS

HB 300 was HEARD and HELD in Committee for further consideration.

HB 302 APPROP: MENTAL HEALTH BUDGET

HB 302 was HEARD and HELD in Committee for further consideration.

The following department presented an overview:

Alaska Mental Health Trust Authority

#hb300

#hb302

HOUSE BILL NO. 300

"An Act making appropriations for the operating and loan program expenses of state government, for certain programs, and to capitalize funds; making supplemental appropriations; making appropriations under art. IX, sec. 17(c), Constitution of the State of Alaska; and providing for an effective date."

HOUSE BILL NO. 302

"An Act making appropriations for the operating and capital expenses of the state's integrated comprehensive mental health program; and providing for an effective date."

[9:10:39 AM](#)

ALASKA MENTAL HEALTH TRUST AUTHORITY

DR. WILLIAM DOOLITTLE, CHAIRMAN, BOARD OF TRUSTEES, ALASKA MENTAL HEALTH TRUST AUTHORITY, introduced the Alaska Mental Health Trust Authority (AMHTA) staff members present in the room.

[9:12:35 AM](#)

Representative Kelly commented on the excellent credentials of Dr. Doolittle.

Co-Chair Stoltze thought that the AMHTA Board was very professional and he voiced appreciation for them.

Co-Chair Hawker shared similar sentiments.

JEFF JESSEE, CHIEF EXECUTIVE OFFICER, ALASKA MENTAL HEALTH TRUST AUTHORITY, admitted that the AMHTA staff was

impressive and high performing. He turned to a handout entitled, "House Finance Committee FY 2011 Budget". He began with slide 2, listing the Trust beneficiaries.

Mr. Jessee listed the Trust advisors as shown on slide 3. He discussed the Trust funding - slide 4. He emphasized the cooperation between, and alignment with, state agencies. He referred to the annual report, which is included in the members' packets. He referred to page 8, which shows how the Trust has fared in weathering the economic storm.

Mr. Jessee clarified, at Co-Chair Hawker's request, the Trust's involvement with the Permanent Fund. The Trust's cash funds are invested by the Permanent Fund Corporation. The Trust's funding for 2010 is only about 10 percent less than it previously was in 2008. It is predicted to be flat in 2011. It is one of the most resilient foundation funds in the country.

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Mr. Jessee described joint FY 2011 legislative priorities - slide 5. He reported a plan to increase the adult dental Medicaid reimbursement cap and to establish a regular and periodic schedule of rate reviews for home and community-based services. Other priorities are to support a 10-year plan to reduce homelessness, and to fund a community-coordinated transportation system.

Co-Chair Stoltze shared his experience with AMHTA in his district, such as the partnership with the Boys' and Girls' Club. Mr. Jessee related AMHTA's attempt to work with partnerships.

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Mr. Jessee identified AMHTA's formula for success - slide 6. It involves identifying the problem, bringing experts to the table, and developing focused strategies. The entire effort must be monitored and data driven.

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Representative Kelly asked whether churches are involved in collaboration with AMHTA. Mr. Jessee spoke of Faith-Based Initiatives such as the Salvation Army and the Covenant House currently in the system. He agreed that more could be

done to approach religious organizations for help. Co-Chair Hawker suggested Mr. Jessee add churches to the list of collaborators. Mr. Jessee agreed that was a good idea and stressed that AMHTA could use the help. He was open to all offers.

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Mr. Jessee described the five program focus areas - slide 7. There are two objectives; one is to give the committee a general idea of what is to be accomplished and the other is related to budget recommendations.

Mr. Jessee shared information about Bring the Kids Home program - slide 8. He referred to a flyer included in the members packet entitled, "Alaska Continues to Bring the Kids Home" (copy on file). He noted an opportunity for more people to be involved.

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Co-Chair Hawker noted the irony that a meeting was to be held at a church.

Co-Chair Stoltze asked if there was a long-term plan for the Eklutna facility. Mr. Jessee related that one of the cornerstones of Bring the Kids Home (BTKH) is to keep the children in their Native communities. There is 100 percent Medicaid reimbursement for BTKH. The original plan was to build cottages in Eklutna; however, it was deemed not practical and not cost effective. The decision was made to redesign the building and put it on the Native Medical Center campus. The project has been cancelled due to the cost projected by South Central Foundation. The state could not guarantee it could meet those costs.

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Co-Chair Stoltze expressed his disappointment.

Mr. Jessee returned to the discussion of BTKH, which was started in FY 06. He termed it one of the most successful initiatives the Trust has undertaken. He shared statistics about attendance and cost. It was felt that in-state services would save money and that has turned out to be true. Slide 9 shows projected BTKH reinvestment. He

projected a phase-out of BTKH by 2013 if "the game plan" is maintained. He stressed the importance of the investment.

[9:41:12 AM](#)

Mr. Jessee shared results for beneficiaries - slide 10. The Residential Psychiatric Treatment Center (RPTC) recidivism rate has gone from 20 percent to 3.4 percent. Returning youth home and ensuring quality were successful goals.

Representative Austerman requested more information about waning support for community-based issues. Mr. Jessee said the next slide held that information. He continued to explain the reasons behind the successes of BTKH. The Trust invested hundreds of thousands of non-Medicaid dollars originally for individualized services. The idea was not popular, but turned out to be very successful. Less than 1 percent of kids who have received individualized services funds have ended up in higher level RPTC care. He shared examples of the kinds of services provided.

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Mr. Jessee turned to the FY 2011 budget - slide 11. The Trust continues to provide support for BTKH. He described the differences between what the Trust recommended and the governor's budget. He mentioned the challenges and the need to be successful in funding.

Co-Chair Hawker asked if General Fund/Mental Health funds are incremental. Mr. Jessee said they were incremental. He added that it is the Trust's view that it means reinvesting the dollars saved that would go to out-of-state placement. Co-Chair Hawker concluded that no ground was lost from previous investments. Mr. Jessee said that was correct.

[9:46:43 AM](#)

Representative Salmon asked what the tribal/rural system development funding was. Mr. Jessee replied that it consists of giving seed money to tribal health organizations so that they can start to plan their system of care.

Representative Doogan asked why the differences in the two columns were there. Mr. Jessee said it was due to financial constraints, not a philosophical difference.

Representative Kelly pointed out that some requests require continued funding. He approved of the funding mechanism of AMHTA. The presentation helps to understand excellence and the need to support it.

[9:50:17 AM](#)

Mr. Jessee added another metaphor.

Co-Chair Hawker agreed with Representative Kelly. Several years ago the Trust was too far ahead and now it is back on track.

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Representative Gara spoke of agency pressure on legislators. He appreciated the methodology of AMHTA. He wondered about the cost of the Behavior Rehabilitation Services (BRS) rate increase, the early childhood mental health increase, foster parent/parent services, and peer navigation. He wondered about the impacts of not fully funding those items.

Mr. Jessee explained the BRS service, which are group homes that OCS operates. The quality of care or overall capacity will decline if not fully funded; however, there would not be dire consequences in 2011. There will be pressure over time to maintain quality services with costs increasing.

Mr. Jessee spoke of foster parent service as not as high of a priority. Peer navigation will be an important item down the road. It involves parents and kids mentoring others. Early childhood mental health is new, but important as a prevention tool. It receives some Trust money.

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Representative Gara asked if peer navigation and early childhood mental health funds go to actual services. Mr. Jessee responded that peer navigation funds do not, but early childhood funds do.

Co-Chair Stoltze spoke of natural resources assets and the public concern about environmental issues outweighing human needs. He emphasized the importance of developing resources in order to achieve goals. Mr. Jessee spoke of a plan to

exchange Trust lands. He maintained that there is more than one way to accommodate different interests and achieve a goal. The Trust is developing other ways to grow the Trust.

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Representative Kelly concurred with Co-Chair Stoltze.

Vice-Chair Thomas did not agree with taking public lands in exchange for wilderness lands. He noted he represents Prince of Wales land and would like to see jobs created on timber lands. He suggested maximizing Trust land use.

Vice-Chair Thomas asked if the Mental Health General Funds increments are one-time requests. Mr. Jessee said they would go into the base. Vice-Chair Thomas thought the total of that column was about \$3.8 million.

[10:07:20 AM](#)

Mr. Jessee turned to slide 12 - disability justice. He spoke of the difficulties and strategies of dealing with incarcerated beneficiaries. Co-Chair Hawker restated the problem of working with the inmates and wondered how many have addiction problems. Mr. Jessee replied that a very large percentage have addiction problems. Co-Chair Hawker opined that it would be difficult to address the substance abuse issue. Mr. Jessee agreed that it is a large problem. Co-Chair Hawker suggested addressing substance abuse prevention objectives. Mr. Jessee shared the two main themes related to incarceration; housing and addiction.

[10:10:12 AM](#)

Mr. Jessee discussed the strategic thinking between cooperating entities - slide 13. He returned to slide 12 to make a point about limited housing options.

Co-Chair Hawker asked for further information about item 3 on slide 13 - reducing the use of jails as described under Title 47. He asked what was needed to protect people from themselves.

Mr. Jessee mentioned there were three issues related to Title 47. One is mental health commitments. The state of Alaska has requirements if a person is a danger to

themselves or to the community. Another Title 47 commitment is the alcohol commitment, which entails a different process. The care and custody in that instance is a provider or organization. The big resistance to that commitment example is that the state is obligated to provide the services and many end up filling up jails in the case of alcohol holds.

Co-Chair Hawker inquired what the unduplicated count was.

[10:15:49 AM](#)

Mr. Jesse remarked that the unduplicated count may be very high, but may be just "one-time".

Co-Chair Hawker mentioned the success of Senator Ellis' pilot project.

Co-Chair Stoltze remarked on the "thousands" number. He wondered if it referred to a number of people or to occurrences.

Mr. Jesse remarked that it is both. There are thousands on hold and many come in duplicate times. In Anchorage and Fairbanks, the facilities can identify those who come in multiple times. This requires one kind of strategy. In some areas it might be people coming in for the first time.

[10:18:45 AM](#)

Representative Kelly was watching carefully the Cliff Row program. He believed that the holds are too short for mental health and alcohol and something needs to be done to provide longer help. The Cliff Row center effort sends a strong message for mandatory holds. He blamed the liberal lawyers for not letting the community help those people.

[10:22:36 AM](#)

Co-Chair Hawker shared Representative Kelly's passion.

Mr. Jessee spoke of frustrations about lack of long-term treatment facilities. He spoke of a pledge to get residential beds in place. Representative Kelly referred to slide 10 and the importance of showing results from programs. He was willing to provide more funding for programs that work.

Dr. Doolittle addressed the issue of alcoholism and the need to emphasize the alcoholic's inability to make reasonable decisions.

Representative Gara recalled the history of support for substance abuse treatment services. He did not know where the needs were currently for treatment beds. Mr. Jessee replied that the Trust is nowhere near where they need to be. The need is not more prominent in the budget recommendations because it is a huge problem and it would take more of a focused effort by more than the Trust. He reported on the staggering costs to the state from substance abuse. It will require a partnership to solve the problem.

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Representative Gara emphasized that he is serious about finding a solution. He requested more information in order to advocate. He thought it was insane that there is a waiting list at the heroin treatment facility. He wanted to know the gap between what is being done and what should be done. Mr. Jessee offered to work on the issue.

Co-Chair Hawker recalled the history of BTKH, the pace of investment, and outcomes. That mission was accomplished. The legislature put critical resources into developmental disability resources. He maintained that critical priorities were determined and funded. He saw that the topic may now be chemical addiction and noted that the legislature is willing to help.

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Representative Doogan inquired how many Alaskan's would have to be "dried out" to end the problem and how successful might that be. Mr. Jessee shared statistics about who needed treatment: ages 12-17 - 1000; adults 18 and older - 20,000. The question is how many can be helped. He suggested a focused effort with partnerships involved. He added that sexual assault and domestic violence are directly related. He held those examples out as a place to start.

Representative Doogan suggested if the number of alcohol abusers could be cut in half, a certain amount of the

budget could be eliminated. He was looking for a reasonable goal. Mr. Jessee reported that a target is needed. He did not think that looking at the large numbers would work, but rather a specific goal should be identified.

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Representative Doogan thought that more of the budget should be spent on a definite path. He wanted to have a direction to proceed.

Co-Chair Hawker had a hard time with the statistics Mr. Jessee provided. He thought alcohol was involved in crimes committed 90 percent of the time. Mr. Jessee agreed. He commented that it is hard to describe the road when you don't know where you want to go.

[10:43:14 AM](#)

Representative Kelly spoke of his experience on the Corrections Subcommittee. He reported 60 percent recidivism in prisoners, and 92 percent are incarcerated as a result of chemical abuse issues. He believed that jobs were the answer. He suggested spending money on programs that are successful.

Vice-Chair Thomas spoke of domestic violence and sexual assault being related to jobs. He opined that jobs are lost during land exchanges. He suggested developing mines.

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Representative Salmon related that he comes from a small village that has a high alcoholism rate, and he believed that lack of jobs is a factor. He suggested that rehabilitation is successful only if the person wants help. He also thought self-worth was very important.

Dr. Doolittle thought the Trust was sensitive to jobs being important for rehabilitation. Housing programs incorporate a job element into the programs. He agreed that there is an emotional element, but sometimes it is not known what will work to turn addiction around. He said it is a problem that needs to be solved.

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Co-Chair Hawker wished to hear the remainder of the presentation at 1:30.

Representative Kelly mentioned that committee members value this information.

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[1:44:18 PM](#) RECONVENED

Co-Chair Hawker reconvened the overview with the Mental Health Trust Authority.

[1:46:59 PM](#)

Mr. Jessee continued with the disability justice area. It breaks down into 3 phrases: keep the beneficiaries out of the correctional system, determine what to do when they are in correctional facilities, and what can be done to prevent them from coming back into the correctional system.

Mr. Jessee referred to slide 14 - Therapeutic Courts. He pointed out that therapeutic courts are very effective at keeping people from entering the criminal justice system. He shared a story. He encouraged people to attend therapeutic court sessions. The court supervises people throughout the entire program, not just when sentenced. The program works better as a positive experience when people recognize their achievements.

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Representative Gara suggested that money needs to be spent where it is actually doing some good. He asked if it was true that therapeutic courts would be more effective if there were more treatment services available.

Mr. Jessee agreed that it was true. More money for substance abuse services would help therapeutic courts. Money is now being given to the courts to help fund this treatment goal. Therapeutic courts should not be the place someone needs to go for treatment. There needs to be more money and help before a crime is committed.

Representative Gara asked if the proposed money in the budget is sufficient. Mr. Jessee believed it sufficient for FY 2011.

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Mr. Jessee referred to the Adult Guardianship Mediation project as a way to get people out of the Superior Court System through mediation.

Mr. Jessee showed on slide 15 what was ahead for FY 2011. Trust assets will be used for training programs for criminal justice personnel, to sustain and expand therapeutic models and practices, for transitional planning for beneficiaries, and to develop alternatives to incarceration for beneficiaries who require protective custody.

Representative Kelly asked if there were also state funds allocated for therapeutic courts.

Mr. Jessee replied that the next page would show that information. There is base funding for the Anchorage Mental Health Court.

Co-Chair Hawker inquired if slide 15 shows proposed incremental funding for FY 2011. Mr. Jessee replied that slide 15 shows FY 2011 Trust funded elements. Co-Chair Hawker asked if it is new money. Mr. Jessee explained that some of it is a continuation of FY 2009 funds.

Co-Chair Hawker remarked that some is for maintenance and some is new money. He wondered which state agency administers the funds. Mr. Jessee explained that a lot is managed through the Department of Corrections, the Department of Health and Social Services, and the Alaska Court System.

Co-Chair Hawker commented that it seems like the funding crosses state agency lines. He suggested that it would be good to have all allocations for therapeutic courts under a central administration.

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Mr. Jessee agreed with that. To be successful with the initiative, many different agencies need to be brought together, so a point person would be helpful. Program officers have fulfilled that role and the court system has done a good job implementing the court regime.

Mr. Jessee moved to slide 16, which shows some of the GF/MH requests: sustain and expand therapeutic models and practices, transitional planning for beneficiaries involved with the criminal justice system, and develop alternatives to incarceration for beneficiaries who require protective custody. Services need to be added to the budget to stop recidivism.

Mr. Jessee brought up the Bethel Project as an example of how to develop alternatives to incarcerations under Title 47. He hoped to get this fully funded. The goal is to get people out of jail and out of the emergency room. The Bethel Project is a high priority.

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Representative Salmon questioned the difference in success rate between regular courts and therapeutic courts. Mr. Jessee replied that therapeutic courts are far more successful. He offered to provide the data.

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Mr. Jessee continued to slide 17 - Workforce Development. He noted the difficulty in getting and retaining health care staff. There are more than 20 partners working in the workforce area. He focused on the strategic thinking and the key focus areas in workforce development. Often supervision and support are key to job retention.

Mr. Jessee referred to results for beneficiaries on page 18. He listed training throughout Alaska of professionals, students and participants. The goal is to help people progress through professions, so more than entry level jobs are offered.

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Mr. Jessee moved to slide 19, looking ahead to FY 2011. One of the goals is to begin a psychiatric residency program. He talked about the need to replace those that leave the mental health profession and to stop those that come into the system for temporary or short-term work.

Co-Chair Hawker said he knew a person who wanted to start residential psychiatric training. He wondered if the program would start in 2011.

Mr. Jessee said the program is just in the awareness phase, and will not be starting next year. He reported that he sees tremendous support throughout the field for starting the program. There are other providers who will be contributing money, which will require less state funding.

Co-Chair Hawker agreed the program needs to be grounded and awareness raised in order to make the program happen. He felt expectations needed to be managed at a reasonable level.

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Representative Austerman saw problems with conflicting state and federal laws regarding mental health services. There are people who would like to move forward, but they are hindered by federal and state regulations.

Mr. Jessee asked if Representative Austerman was referring to income and resource limits. Some federal programs allow income sheltering, but it continues to be problematic. Medicaid coverage could be lost if people earn too much money. Some federal rules are a limiting factor. Representative Austerman asked if there was a solution. Mr. Jessee said there may be some aid in the public assistance arena. The primary health insurance program is Medicaid, which requires maintaining eligibility.

Representative Austerman commented that so many cases deal with people who just need help with finding a job, but their diagnosis gets in the way.

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Mr. Jessee agreed it was a frustrating situation. He said that in order to be able to be served in the behavioral health system in Alaska, clients need to follow many federal rules. That applies to Medicaid services, as well as to domestic violence and sexual assault services.

Mr. Jessee continued with slide 19 and discussed expanding student loan repayment and other incentive strategies for professionals, implementing a clinical PhD program in psychological internship in Alaska, and supporting increments of UA health programs to continue progress in workforce development.

2:18:08 PM

Mr. Jessee talked about slide 20 regarding the Trust's commitment in the recruitment and retention of qualified employees, and in training and education goals.

Mr. Jessee referred to slide 21, which is about trying to get the state to help with developing workforce capacity. There is not much success shown in these areas in the existing governor's budget. Without qualified people to run them, there is no reason to fund programs.

Co-Chair Hawker remarked that many agencies talk about how important jobs are to individuals. He wanted to know if the right priorities were being funded. He questioned if the focus should be on funding jobs.

Mr. Jessee believed that the majority of people who work for mental health programs are not necessarily beneficiaries. He clarified that the funding for job training was for the workforce that works with beneficiaries. He noted that there were many people in recovery who work in the field; however, there is not a direct relationship to the qualified workforce.

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Representative Joule asked about beneficiaries who try to get work. He wondered if past crime history is a negative factor. Mr. Jessee agreed it was a significant problem because it is hard to get a job if you have committed a crime. It becomes difficult to find employment and housing for those who have committed a felony. Sometimes DHSS waivers are effective.

Representative Joule noted that addiction counselors who have overcome past addictions make a big difference to those they serve. Mr. Jesse agreed.

2:25:34 PM

Mr. Jessee continued with slide 22 - obtaining affordable and appropriate housing. It is a difficult problem, but has shown some of the greatest successes. The problem is the large numbers of homeless people in Alaska. The fastest

growing homeless population is families with children. There are 8,000 people discharged from corrections without any identifiable housing arrangement. He stressed the significance of that statistic.

Co-Chair Hawker asked for help understanding that statistic. Mr. Jessee explained that the question of whether the 8,000 people had housing was not asked of them; however, the expectation was that the situation is probably not the best for long-term success. There is a need to work with that population to find good housing so they are not as likely to fall back into addiction or crime. Many are showing up in shelters.

Co-Chair Hawker questioned the term "discharge planning".

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Co-Chair Hawker brought up prison demographics and noted that 40 percent of the prison population was Alaskan Native, and a better discharge plan was needed for that population.

Representative Joule remarked that upon discharge, if mandatory substance abuse programs have not been completed, and those services are not offered at home, Alaska Natives may be released to Anchorage where there is no family housing.

Vice-Chair Thomas referred to the "blue ticket" which sent discharged people to another community. Often the homeless are ignored. He mentioned that many homeless are Vietnam veterans who do not admit they have a problem.

Mr. Jessee listed the Trust's committed partners and strategic thinking plans for solving housing issues. He spoke of the "three-legged stool" of housing solutions; support service funding, operational support, and capital funding.

Mr. Jessee returned to the topic of frequent abusers. He maintained that there is a simple solution: find housing for them. This solution has proven to be effective in the Lower 48 when other fixes didn't work. The most notable example of success in Alaska is in Anchorage with the purchase of a motel which would offer housing to this population.

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Representative Kelly did not see a happy ending in this. He was worried about the problem of providing public housing to people who don't own it and therefore don't take care of it. He would like to see more progress before he can support public housing as an option. He thought that sometimes suffering would help motivate people more than giving them too much. He believed that poverty is a powerful motivator.

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Mr. Jessee turned to slide 23 to look at results for beneficiaries of the Bridge Home program. The graph shows good results in dramatic reductions in admissions to the Alaska Psychiatric Institute (API), in readmission to the Department of Corrections (DOC), and a reduction in days spent in API and in DOC. All beneficiaries are not created equal, but results can be delivered by providing housing to men in their 40's to 50's who are chronically addicted, medically and intellectually compromised, and severely damaged in many ways. Otherwise, the result is probably death. The community will pay one way or the other if these people are not helped.

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Co-Chair Hawker had similar concerns about providing public housing. He did not want to create an attractive lifestyle for addicted persons.

Representative Gara commented that the legislature must make decisions based on the greatest need and the greatest merit. Mr. Jessee must advocate for the most sympathetic to the least sympathetic people. Representative Gara expressed concern that transitional housing for the more sympathetic will be jeopardized by the unpopularity of the unsympathetic people. He concurred with Mr. Jessee's work on the Housing First program.

Mr. Jessee thought it was time to try something different for the chronic population that is not going away. Many in Anchorage just want to cut their losses and get on with helping this population.

2:51:24 PM

Co-Chair Hawker mentioned that some Anchorage politicians are willing to look at this process out of desperation and not because they support it. Mr. Jessee agreed. The situation is viewed as a sense of desperation.

Representative Gara remarked that a lot of money spent on something may not equal a great success. He brought up a concern about putting this kind of housing into an established neighborhood. Mr. Jessee asked Representative Gara to find an acceptable place it could go. Representative Gara countered that it should not go in a residential area. Mr. Jessee offered to continue the discussion later.

2:55:14 PM

Mr. Jessee turned to slide 25 showing budget recommendations. He stressed that he was very pleased with funding support from AHFC and OMB for the base Homeless Assistance Program.

Mr. Jessee moved to slide 26 - Trust Beneficiary Projects Initiative. The goal is to prove up, over time, the "value added" of beneficiary-driven programs. He looked forward to working toward ending domestic violence and sexual assault.

2:58:14 PM

Representative Fairclough mentioned that meetings were being held throughout the state on domestic violence and sexual assault, along with mental health issues. All key players at the highest level will come together to help bring solutions to this issue together. The governor and other legislators will also participate. She requested help and support from all Alaskans.

HB 300 and HB 302 were heard and HELD in Committee for further consideration.

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ADJOURNMENT

The meeting was adjourned at 3:02 PM