

ALASKA LEGISLATURE COMMITTEE FILES 2007-2008 SSSTA 12746

Senator Johnny Ellis
State Capitol, Rm 9
Juneau, AK 99801-1182

March 19, 2007

Dear Senator Ellis,

Covenant House supports SB 100, a bill to expand access to broader substance abuse treatment options, targeting certain populations with higher incidences of addiction. Covenant House is primarily a shelter for homeless and at-risk youth between the ages of 13-20, located in Anchorage. Additionally, Covenant House has a transitional living program serving youth ages 18-20, which includes 10 beds for moms with babies and pregnant young women. Finally, Covenant House has a non-residential Community Services Center which provides educational and job skills services to youth.

One of the frustrations that we face as service providers is finding space in treatment programs for our clients. There are very few programs that specialize in providing substance abuse treatment to youth and those that do exist have long wait lists. Oftentimes those youth in greatest need of help are turned away from programs because there is no space available. Implementing a system that prioritizes certain populations and increases and broadens treatment options will prevent some of the most vulnerable among us from getting stuck in a cycle of addiction.

Identifying certain groups and providing priority treatment for them is an important step forward in controlling the substance abuse epidemic in Alaska. Many young Alaskans in need of treatment are ignored and go untreated only because there are no adequate resources available for these individuals who want help and want to improve their lives.

Thank you for introducing this legislation. Please let us know how we can help to ensure its continued support. I can be reached at (907) 339-4205 or nicole.thibodeau@covhouse.alaska.com.

Sincerely,
Nicole Thibodeau



March 15, 2007

The Honorable Bettye Davis, Chair
Senate Health, Education and Social Services Committee
Alaska State Capital, Room 30
Juneau, AK 99801-1182

RE: SB 100 (Ellis)—Support

Dear Chair Davis:

On the behalf of the members of AARP Alaska, we encourage you and your colleagues on the Senate Health, Education and Social Services Committee to support SB 100, authored by Senator Johnny Ellis.

There are three main reasons why AARP is concerned with substance abuse. The first two reasons involve abuse or neglect cases that stem from substance abuse and how they impact seniors directly. The third reason deal with the impact substance abuse has on seniors indirectly.

First is the classic case in which the person committing the abuse or the neglect has a substance abuse problem. A national study examining "elder abuse" case files from agencies around the country found that severe drinking bouts by the abuser led to harmful incidents in senior abuse cases.

The second case (which is probably as common), is where the older adult has a substance abuse problem. For some older adults it is alcohol; for others it is psychoactive medications. For many it is both. For these individuals getting treatment is very difficult because there is little access to treatment and prevention. In Anchorage, there is only one treatment center at which older adults may seek treatment (Ernie Turner Center).

The third reason why we support this bill has to with grandparenting. Grandparenting is sometimes called the most spiritual of all relationships because it links people entering the world with those on their way out. Grandparenting today, however, is not all Bible stories, sugar cookies and fun. Increasingly, grandparents are rearing their children's children when drug addiction and mental illness make parents unavailable.

AARP is the world's largest organization of grandparents. Our 89,000 AARP members in Alaska are concerned about the impact substance abuse is having on their grandchildren. There are 8,188 grandchildren living with grandparents Alaska. In addition, there are 5,419 grandparenting headed household, which means that 1.5 children are living with their grandparents.

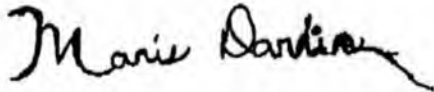
We believe that SB 100 is a substantive bill because it address the concerns of a lot of our members, as well the concerns of others. Furthermore, we believe that providing assistance to those who need help in overcoming their addiction is a good public policy for Alaska.

Therefore, AARP request an "AYE" vote on Senator Ellis's SB 100.

Should you have any questions about our position, please feel free to contact me (586-3637) or Pat Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Senator Joe Thomas
Senator John Cowdery
Senator Kim Elton
Senator Fred Dyson
Senator Johnny Ellis

3200 Providence Drive
P.O. Box 196604
Anchorage, Alaska
99519-6604

Tel 907.562.2211

March 7, 2007

Kate Herring
Office of Senator Johnny Ellis
Capitol Building, Rm. 9
Juneau, AK 99801
(907) 465-6704

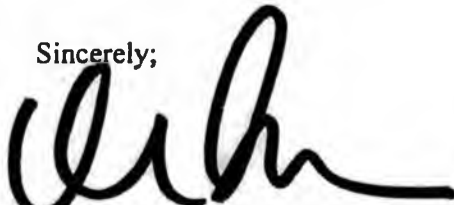
Dear Senator Ellis:

Thank you for the opportunity to read the Senate Bill NO. 100 and give an opinion. I wholeheartedly support SB 100.

For the last five years I have been Medical Director of the Providence Psychiatric Emergency Room, and during this time also worked at the Salvation Army's Clitheroe Enhanced Detox Unit for 3 years. I see SB 100 as a small, yet significant step-in-the-right-direction in caring for the vast number of patients who are suffering from untreated substance abuse in Alaska. The majority of my emergency room psychiatric patients (and we see over 4000/year) have co-existing chemical dependency ("dual-diagnosis"), which certainly contributes to the devastation in their lives. Unfortunately, there are only 8 beds for me to refer patients to (which is a key part in getting onto the path of recovery) in Anchorage. These beds are usually full.

In short, the need in the community is high, the resources low, and the wreckage of the illness on patients (and their families, friends, community) are significant. So it is without reservation, I support SB 100, which addresses the call for added treatment options for Alaskan patients, and suggest some creative solutions, such as the Pilot Project mentioned in section 8. Please feel free to contact me with any questions.

Sincerely;



Marc D. Pellicciaro, M.D.
Medical Director, Psychiatric Emergency Room
Providence Alaska Medical Center
3200 Providence Drive
Anchorage, AK 99508
Phone: (907) 273-7851
Fax: (907) 261-2807
E-Mail: mpellicc@provak.org

STATEMENT OF SUPPORT
Establishing Education Savings Accounts for Foster Children in Alaska

Children in the foster care system face significant challenges when they age out of state care. Often, these children do not have a plan or the means to access job training or post-secondary education. With a program in place whereby concerned organizations and citizens can establish savings accounts in the names of foster children, these children will have opportunities beyond high school.

Alaska's foster children deserve a program that invests in their potential. Alaska should create a program designed to give children in foster care the opportunity to pursue education and job training past the age of 18.

Please add my name/organization to the list of supporters.

Name Drenda Tigner
Organization Presbyterian Hospitality House
Title _____
Signature Drenda M. Tigner Executive Director
Address 209 Earth Wind Ave Fairbanks AK 99701
Phone 907-456-6445 Fax 907-456-6402
Email Drenda.Tigner@aol.com Website www.PhhAlaska.org

I/We would also be willing to:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Publish an article in our newsletter | <input checked="" type="checkbox"/> Mobilize our membership |
| <input checked="" type="checkbox"/> Participate in media events | <input checked="" type="checkbox"/> Help to build a coalition |
| <input checked="" type="checkbox"/> Contact legislators | |

Please return this form to:
Office of Senator Johnny Ellis
State Capitol, Rm. 9
Juneau, AK 99801

STATEMENT OF SUPPORT
Substance Abuse Treatment and Prevention

Addiction is taking a heavy toll on Alaska's people, culture and economy. Alaska ranks #1 in the nation in alcohol-related deaths and Alaskans with substance abuse problems, or co-occurring mental and substance abuse disorders, are more likely to be homeless, spend time in correctional facilities, and become involved in child protective service proceedings. The financial impact of addiction is staggering, costing the state an estimated \$738 million a year in health care costs, accidents, lost productivity, criminal justice and correctional facilities.

Something must change. We support updating Alaska statutes to promote expanding access to a wide spectrum of treatment, identifying those with co-occurring mental health and substance abuse disorders, and addressing substance abuse among youth and populations with higher incidences of addiction.

Please add my name/organization to the list of supporters.

Name Anne Dennis - Choi
Organization The Salvation Army Clitheroe Center
Title Executive Director
Signature Anne Dennis - Choi
Address 1709 Grafton, Suite B, Anchorage, Alaska 99508
Phone (907) 770-8804 Fax (907) 770-8881
Email anne_choi@salvationarmy.org Website http://www.salvationarmy.org/clitheroe
I/We would also be willing to:

- Publish an article in our newsletter ^(maybe)
- Mobilize our membership
- Participate in media events
- Contact legislators

Please return this form to:
Office of Senator Johnny Ellis
State Capitol, Rm. 9
Juneau, AK 99801

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Something must change. We support updating Alaska statutes to promote expanding access to a wide spectrum of treatment, identifying those with co-occurring mental health and substance abuse disorders, and addressing substance abuse among youth and populations with higher incidences of addiction.

Please add my name/organization to the list of supporters.

Name Joseph P. Burns
Organization Nugen's Ranch
Title Night ATTENDANT.
Signature Joseph P. Burns
Address 4006 Steven Dr. #8 Wacilla, AK 99654
Phone 373-7542 Fax _____
Email joeburns@mtaonline.net Website _____

I/We would also be willing to:

Publish an article in our newsletter
 Participate in media events

Mobilize our membership
 Contact legislators

Please return this form to:
Office of Senator Johnny Ellis
State Capitol, Rm. 9
Juneau, AK 99801

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Something must change. We support updating Alaska statutes to promote expanding access to a wide spectrum of treatment, identifying those with co-occurring mental health and substance abuse disorders, and addressing substance abuse among youth and populations with higher incidences of addiction.

Please add my name/organization to the list of supporters.

Name GREG R. PEASE
Organization GASTINEAU HUMAN SERVICES CORPORATION
Title EXECUTIVE DIRECTOR
Signature _____
Address 5597 AISEK ST JUNEAU AK 99801
Phone 907 780 3011 Fax 907 463 3535
Email greg.pease@ghscorp.org Website www.ghscorp.org

We would also be willing to:

- Publish an article in our newsletter
- Participate in media events

- Mobilize our membership
- Contact legislators

Please return this form to:
Office of Senator Johnny Ellis
State Capitol, Rm. 9
Juneau, AK 99801

GASTINEAU HUMAN SERVICES
CORPORATION
"A Chance For Change"

Greg Pease
Executive Director

5597 Aisek Street
Juneau, AK 99801
Phone: (907) 780-3011
Fax: (907) 463-3535
Email: greg.pease@ghscorp.org

Mission Statement

To serve individuals, their families and the community by providing structured residential treatment and employment program opportunities with an emphasis on those persons who are criminal offenders and/or substance abusers.

Kate Herring

From: Sen. Johnny Ellis
Sent: Friday, March 02, 2007 10:56 AM
To: Kate Herring
Subject: FW: March Community Council Update replyD

Supporter file

-----Original Message-----

From: sheila higgins [mailto:higginssheila@hotmail.com]
Sent: Thursday, March 01, 2007 7:47 PM
To: Sen. Johnny Ellis
Subject: RE: March Community Council Update replyD

Dear Senator,

I am behind this all the way. Let me know what I can do to help. This is Alaska's biggest problem and one that has to be delt with.

Like I stated before anything I can do to help.

I neither drink nor drug. I have a glass of wine every 2 to 5 years or so.

Love and light to you your staff and family.

Sheila Higgins

From: "Sen. Johnny Ellis" <Senator_Johnny_Ellis@legis.state.ak.us>
To: "Sen. Johnny Ellis" <Senator_Johnny_Ellis@legis.state.ak.us>
Subject: March Community Council Update
Date: Thu, 1 Mar 2007 13:36:48 -0900

Airport Heights --- South Addition --- Downtown
Fairview --- Government Hill --- North Star --- Rogers Park

This Month in Community Councils

Senator Ellis and Representative Gara spend time with constituent Peggy Burgin last summer.

From
Senator Johnny Ellis

Dear Neighbor,

Session is flying by, and I've been making the most of my time here in Juneau. I recently introduced Senate Bill 100, legislation to fight the epidemic of substance abuse in our state. Please contact my office if you'd like more information on this, or any other legislation we're working on this session.

Below is the Community Council schedule for the month of March. Agenda items are provided when available.

AIRPORT HEIGHTS Thursday, Mar. 29th 7pm. Abbott Loop Community Church
For more information, contact Al Tamagni at atamagni@alaska.net or 349-1736.

Kate Herring

From: Sen. Johnny Ellis
Sent: Tuesday, March 13, 2007 8:55 AM
To: aslpb1@uaa.alaska.edu
Subject: RE: Legislation to Fight Substance Abuse Introduced

You are welcome, Lorne. I will keep pushing.

-----Original Message-----

From: Lorne Preston Bailey [mailto:aslpb1@uaa.alaska.edu]
Sent: Monday, March 12, 2007 9:11 PM
To: Sen. Johnny Ellis
Subject: Re: Legislation to Fight Substance Abuse Introduced

On Wednesday 28 February 2007 12:51 pm, you wrote:

Thank you for working hard at getting people who are addicted to drugs and alcohol, but want to get their life in order the tools they need to do it.

Lorne Bailey

> For Immediate Release: February 28, 2007

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> Legislation to Fight Substance Abuse Introduced

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> Prioritizes Treatment for Pregnant Women, Creates Innovative Pilot Program

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> (JUNEAU) - Today, Sen. Johnny Ellis (D-Anchorage) introduced Senate Bill 100, which aims to stem the tide of alcohol and substance abuse in Alaska.

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> "It's plain and simple; addiction is costing the state too much. It's time for the state to address this problem in a meaningful way," Ellis said. "It's not just about throwing money at the problem; we have to make changes to the system."

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> The cost of drug and alcohol abuse to the state is an estimated \$738 million a year in lost productivity, health care, criminal justice, accidents and public assistance costs. At the same time, a recent study showed that only 15.2 percent of Alaskans who need treatment receive it, and funding for substance abuse treatment fell 52 percent between 2002 and 2007.

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> SB 100 proposes several common-sense changes to the statutes involving substance and alcohol abuse. It would mandate priority treatment for pregnant women in all state-funded substance abuse programs, so that their children will feel fewer effects of their addiction.

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> The bill also creates a pilot program for a secure treatment facility for involuntary commitment cases. The program will target persons with addictions or co-occurring substance abuse and mental health disorders who often present a danger to themselves and others, and chronically

Kate Herring

From: Sen. Johnny Ellis
Sent: Saturday, March 03, 2007 1:46 PM
To: Kate Herring
Subject: FW: Legislation to Fight Substance Abuse Introduced

From: Darrel Hess [mailto:gmpeon@alaska.net]
Sent: Friday, March 02, 2007 4:58 PM
To: Paul Bauer; Pamela Jennings; Ken Stout; Janice Shamberg; Dick Traini; Debbie Ossiander; Dan Sullivan; Dan Coffey; Chris Birch; Allan Tesche; Bill Starr
Cc: Sen. Johnny Ellis; Rep. Les Gara; Mayor Mark Begich; Noel Rea; Allen Kemplen; Dave Brossard; Justina Meyer; Sharon Chamard; Harry Deuber; Lee Ross; Benita White
Subject: Legislation to Fight Substance Abuse Introduced

Members of the Anchorage Assembly,

Johnny Ellis's SB100, including a provision for involuntary commitment and treatment for substance abusers, could be a useful tool in the fight to "clean up" our streets and street corners. For too many years we have let a small group of individuals dictate the quality of life for literally tens of thousands of hard working Anchorage residents.

Title 47 just does not have the teeth needed to make it an effective tool in this effort. I hope that you will all take a look at the pilot involuntary commitment/treatment program in SB100, and offer your support if you feel that it will help our City and our Neighborhoods combat the continuing negative impact of chronic inebriates.

More importantly, the program is the last, best hope for these individuals to turn their lives around. ***Thanks for all that you do for our City and our Neighborhoods, and have a GREAT Weekend!***

Darrel Hess
Chair, Fairview Community Council

From: Darrel Hess [mailto:gmpeon@alaska.net]
Sent: Friday, March 02, 2007 6:30 AM
To: Sen. Johnny Ellis
Cc: Kate Herring; Stephanie Kesler; Bonnie Harris; Allan Tesche; Rep. Les Gara; Mayor Mark Begich; donp@jlproperties.com; Noel Rea; Allen Kemplen; Dave Brossard; Justina Meyer; Sharon Chamard; Harry Deuber; Lee Ross; Benita White
Subject: RE: Legislation to Fight Substance Abuse Introduced

Johnny,

We discussed SB100 at last night's FVCC Executive Board Meeting. The Board was very supportive, especially of a pilot program for involuntary commitment. If successful, this type of program could have a positive impact on the quality of life for thousands of your constituents, and help improve the lives of many addicted individuals.

We will of course write a letter of support. The Board also authorized me to testify by teleconference in support of the bill when it comes up for public hearings. I am copying the Chairs of surrounding Councils, in hopes that they too will offer support for the bill. Thanks for responding to the needs of your constituents.

Darrel

-----Original Message-----

From: Sen. Johnny Ellis
Date: 02/28/07 16:24:20
To: Darrel Hess
Cc: Kate Herring
Subject: RE: Legislation to Fight Substance Abuse Introduced

I do need a letter of support from any council willing to provide one. Thx.

From: Darrel Hess [mailto:gmpeon@alaska.net]
Sent: Wednesday, February 28, 2007 4:22 PM
To: Sen. Johnny Ellis
Cc: Allan Tesche; Rep. Les Gara; Noel Rea; Allen Kemplen; Dave Brossard; Justina Meyer; Sharon Chamard; Harry Deuber; Lee Ross; Benita White
Subject: Re: Legislation to Fight Substance Abuse Introduced

Johnny,

Let us know if you need a letter of support, etc from the FVCC. Involuntary commitment is the only way we are going to cure some individuals and get them off the streets. It's about time!

Darrel

-----Original Message-----

From: Sen. Johnny Ellis

Kate Herring

From: Sen. Johnny Ellis
Sent: Wednesday, February 28, 2007 4:12 PM
To: Linda Kellen
Cc: Kate Herring
Subject: RE: Legislation to Fight Substance Abuse Introduced

Hi Linda,

Thanks for your msg. and words of support. Alcohol control and substance abuse related bills always have a hard time since there are powerful economic interests arrayed against them. The lobbyists for the liquor industry are on top of every bill and every detail that impacts their clients.

I am pretty optimistic that Rep Meyer and Senator French will work out a good ignition interlock bill this year. The future of the other bills is less clear.

KTUU News in Anchorage has done a pretty good series on substance abuse issues. The key is publicity that gains the attention of legislators and the governor as well as personal contact with these policy makers and budget writers. Pls encourage folks who think as we do to speak out ASAP. Thx for your help. I will keep pushing. ---Johnny Ellis

From: Linda Kellen [mailto:celticdivaak@yahoo.com]
Sent: Wednesday, February 28, 2007 1:58 PM
To: Sen. Johnny Ellis
Subject: Re: Legislation to Fight Substance Abuse Introduced

Senator Ellis:

I appreciate that you have introduced SB100 and am especially heartened to see treatment at the heart of it.

However, I am concerned about the status of the other substance abuse related bills and wonder what it bodes for yours:

HB14 - Alcohol purchase restriction - it hasn't moved since Jan 16th

HB19 - Ignition Interlock - as of Feb 21 it has been revised in 2 committes and is now it its 3rd. Should we be prepared for this Bill to die on the vine?

And it seems in some ways we are backsliding:

- HB51 - Recorking - This bill has already passed the House - a bill which gives the appearance of being MORE lax on substance abuse and blurs the lines between the seperate liquor licenses...and...

- HB19 - Ignition Interlock - Repeals AS 28.15.201(d) and 28.15.201(e), removing treatment/counseling in any form as a sentencing or probationary requirement.

I have been a long-time supporter of you and Sen Davis wholeheartedly and I know where your "hearts" lie. However, is there something those of us who are serious about treatment and prevention should do

with the rest of these people to try and get things moving and what form of communication has the most impact?

Thanks!

Linda Kellen Biegel
3001 Sheldon Jackson St. Unit A
Anchorage, AK 99508
907-339-9537

"Sen. Johnny Ellis" <Senator_Johnny_Ellis@legis.state.ak.us> wrote:

For Immediate Release: February 28, 2007

Legislation to Fight Substance Abuse Introduced *Prioritizes Treatment for Pregnant Women, Creates Innovative Pilot Program*

(JUNEAU) - Today, Sen. Johnny Ellis (D-Anchorage) introduced Senate Bill 100, which aims to stem the tide of alcohol and substance abuse in Alaska.

"It's plain and simple; addiction is costing the state too much. It's time for the state to address this problem in a meaningful way," Ellis said. "It's not just about throwing money at the problem; we have to make changes to the system."

The cost of drug and alcohol abuse to the state is an estimated \$738 million a year in lost productivity, health care, criminal justice, accidents and public assistance costs. At the same time, a recent study showed that only 15.2 percent of Alaskans who need treatment receive it, and funding for substance abuse treatment fell 52 percent between 2002 and 2007.

SB 100 proposes several common-sense changes to the statutes involving substance and alcohol abuse. It would mandate priority treatment for pregnant women in all state-funded substance abuse programs, so that their children will feel fewer effects of their addiction.

The bill also creates a pilot program for a secure treatment facility for involuntary commitment cases. The program will target persons with addictions or co-occurring substance abuse and mental health disorders who often present a danger to themselves and others, and chronically recycle through existing non-secure treatment services. This group draws heavily on law enforcement, corrections, the court system and community services, and could be better served by a secure detoxification facility, where they could then continue into a treatment setting.

"Involuntary commitment for alcohol treatment is a last resort but we must hold people accountable for chronic and costly alcohol abuse," Sen. Ellis said of the pilot program. "This legislation is long over due. These common-sense changes will save money, and help the thousands of Alaskans addicted to alcohol and other drugs," said Jeff Jessee, CEO of The Alaska Mental Health Trust Authority.

SB 100 is currently awaiting a hearing in the Senate Health, Education & Social Services Committee.

For more information, contact Kate Herring at 465-3704 or Kate_Herring@legis.state.ak.us

Kate Herring

From: Sen. Johnny Ellis
Sent: Thursday, March 01, 2007 11:01 AM
To: Deborah Rickard
Subject: RE: Legislation to Fight Substance Abuse Introduced
Follow Up Flag: Follow up
Flag Status: Red

Deb,

My thoughts exactly. Its good to hear it from someone who has been there.

From: Deborah Rickard [mailto:homefree25@msn.com]
Sent: Wednesday, February 28, 2007 10:10 PM
To: Sen. Johnny Ellis
Subject: RE: Legislation to Fight Substance Abuse Introduced

Dear Senator Ellis,

Bravo and it is so true. I am supportive of treatment and involuntary comittment certainly since so many are just program wise and seem to know what to do to make our recovery rate lower. I am 20 years clean and sober so I know the drill as I have served to sponsor a whole lot of people over the years. I didn't enjoy getting in trouble so chose to avoid the consortium of twisted realities. Frankly, I like to stay in the now and watch everything grow for the greater good. People who live on the street can't get off the ride without a serious effort and continued long-term care. I learned to celebrate living in Alaska and got into recovery in Alaska. I prefer living as close to normal as possible. Personally, I believe too much money goes into corrections facilities that aren't serving the purpose of rehabilitation. Sadly, there are too many people who simply fall through the cracks. I fight substance abuse by staying on a vigilant note. As long as there is a market for the substances there will be those whom abuse it and ruin the lives of loved ones. I

know about this too. The fact is, people have to want sobriety to achieve it and running it down their throats doesn't work. The legislation would make it easier to contain the victim of substance abuse with order and structure long enough for them to get the hang of it. The enforcement is the hard part with our police being few in number. I know you are really working hard to mend this state and am proud to be in contact with you. It's an honor and I appreciate your diligence.deb

Subject: Legislation to Fight Substance Abuse Introduced
Date: Wed, 28 Feb 2007 12:51:20 -0900
From: Senator_Johnny_Ellis@legis.state.ak.us
To: Senator_Johnny_Ellis@legis.state.ak.us

For Immediate Release: February 28, 2007

Legislation to Fight Substance Abuse Introduced *Prioritizes Treatment for Pregnant Women, Creates Innovative Pilot Program*

(JUNEAU) - Today, Sen. Johnny Ellis (D-Anchorage) introduced Senate Bill 100, which aims to stem the tide of alcohol and substance abuse in Alaska.

Kate Herring

From: Sen. Johnny Ellis
Sent: Thursday, March 01, 2007 10:43 AM
To: Arthur Curtis
Subject: RE: Legislation to Fight Substance Abuse Introduced
Follow Up Flag: Follow up
Flag Status: Red

Art,

Thx for your feedback. I cannot remember the name of that program either. When it comes to substance abuse policy, we are considering all the options. ---Johnny

From: Arthur Curtis [mailto:artcurtis@gci.net]
Sent: Wednesday, February 28, 2007 6:31 PM
To: Sen. Johnny Ellis
Subject: Re: Legislation to Fight Substance Abuse Introduced

Dear Johnny,

Your SB 100 sounds sensible. And I would support additional sensible ways to help people who need treatment. The program in Anchorage (can't remember the name) which allows people to remain in the program housing even after planned binges has a high success rate. (People gradually reduce their binges). I wonder if such a program is could be more widely used.

Art

On Feb 28, 2007, at 12:51 PM, Sen. Johnny Ellis wrote:

For Immediate Release: February 28, 2007

Legislation to Fight Substance Abuse Introduced

***Prioritizes Treatment for Pregnant Women, Creates
Innovative Pilot Program***

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: 2
 Bill Version: SB 100
 (S) Publish Date: 3/21/07
 Dept. Affected: Health & Social Services

Revision Date/Time (Note if correction):

Title SUBSTANCE ABUSE/MENTAL HEALTH PROGRAMS

RDU Behavioral Health

Component Behavioral Hlth Medicaid Svcs

Sponsor ELLIS

Requester SENATE (HES)

Component No. 2660

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims	*	*	*	*	*	*
Miscellaneous						
TOTAL OPERATING	*	*	*	*	*	*

CAPITAL EXPENDITURES						
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CHANGE IN REVENUES (0)						
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
Other(Specify Type-do not abbreviate)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: _____

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

The fiscal note for Behavioral Health Medicaid Services component is indeterminate.

Section 8 of SB100 requires the department to fund a pilot project for a secure detoxification and treatment center of at least 10 beds for persons involuntarily committed under AS 47.37.190. To the extent that the persons receiving care in the pilot project are Medicaid eligible and that the services are covered under the Medicaid state plan, costs could accrue to Medicaid.

Continued page 2

Prepared by: Stacy Toner, Acting Director
 Division: Behavioral Health
 Approved by: Karleen Jackson, Commissioner
 Agency: Department of Health and Social Services

Phone 465-2817
 Date/Time 03/14/2007
 Date 03/15/2007

**FISCAL NOTE
FN # 2**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

The total cost for services in the pilot project are estimated at \$1,700.0 GF per year. Depending on the actual number of Medicaid eligible persons, the services provided, and the quantity of services, some of the costs could be shifted to Medicaid which has joint state/federal funding. This would not change the total expenditures, but would change the fund source. The amount of potential federal funds that would replace GF is estimated to be between \$0 and \$913.9 in SFY08.

The number of Medicaid eligible persons for this pilot project is expected to be very small. Typically only 10% of the substance abuse treatment is Medicaid eligible. That would mean that on average, of the 10 beds only 1 might be charged to Medicaid. It is difficult to predict how many eligible persons would actually be directed to the pilot project. Section 4 of the bill outlines the populations targeted for the pilot. The pregnant women and youth populations could be Medicaid eligible if they are low income; however, prisoners are not eligible.

Not all the services would be Medicaid eligible. Section 4 outlines services, including clinical services, which could be covered under Medicaid; however, the job training and employment services are not covered. This uncertainty is the reason for the indeterminate fiscal note.

FISCAL NOTE

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

Fiscal Note Number: 1
 Bill Version: SB 100
 (S) Publish Date: 3/21/07
 Dept. Affected: Health & Social Services

Revision Date/Time (Note if correction): 3/9/2007
 Title SUBSTANCE ABUSE/MENTAL HEALTH PROGRAMS

RDU Behavioral Health
 Component Behavioral Health Administration

Sponsor ELLIS
 Requester SENATE (HES)

Component No. 2665

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services	257.8	257.8	257.8	257.8	257.8	257.8
Travel						
Contractual	26.4	26.4	26.4	26.4	26.4	26.4
Supplies	6.6					
Equipment						
Land & Structures						
Grants & Claims	1,700.0	1,700.0	1,700.0	1,700.0	1,700.0	1,700.0
Miscellaneous						
TOTAL OPERATING	1,990.8	1,984.2	1,984.2	1,984.2	1,984.2	1,984.2
CAPITAL EXPENDITURES						
CHANGE IN REVENUES (0)						

FUND SOURCE (Thousands of Dollars)

FUND SOURCE	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
1002 Federal Receipts						
1003 GF Match						
1004 GF	1,990.8	1,984.2	1,984.2	1,984.2	1,984.2	1,984.2
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
Other(Specify Type-do not abbreviate)						
TOTAL	1,990.8	1,984.2	1,984.2	1,984.2	1,984.2	1,984.2

Estimate of any current year (FY2007) cost: _____

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

POSITIONS	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Full-time	3	3	3	3	3	3
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

SB 100 (section 2, AS 47.37.030 (9)-(11)) allows the Department to a) implement programs that accurately identify and appropriately treat persons with substance abuse or co-occurring disorders; b) establish a secure enhanced detoxification and treatment center for involuntarily committed persons who are at risk to physically harm them self or others; and c) develop and implement a substance abuse treatment system using evidence-based, research-based, consensus-based; or promising practices that promote independence, recovery, employment, education, ongoing community-based treatment, housing, and other aspects of harm reduction.

SB 100 (section 3, AS 47.37.040 (22)-(23)) requires the Department to a) apply, whenever possible, evidence-based, research-based, consensus-based substance abuse and co-occurring substance abuse and mental health

Prepared by: Stacy Toner, Acting Director
 Division Behavioral Health
 Approved by: Karleen Jackson, Commissioner
 Agency Department of Health and Social Services

Phone 465-2817
 Date/Time 03/13/2007
 Date 03/15/2007

**FISCAL NOTE
FN # 1**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

(hereafter referred to as "co-occurring disorders") treatment practices and remove barriers that prevent the use of those practices; and b) collaboration with cross-jurisdictional, cross-agency, and cross-cultural organizations in implementing programs for co-occurring disorders treatment.

SB 100 (section 4, AS 47.37.045 (f)-(i)) also requires the Department to grant priority to a proposed program that a) provides preference to a pregnant woman for substance abuse treatment by moving her up on a waiting list for the program and by streamlining the admissions process; b) is an alternative to incarceration for nonviolent offenders; c) provides rehabilitation services to prisoners with substance abuse problems; d) provides demonstrated outcomes in harm reduction; e) is based on scientifically sound principles of prevention and treatment; f) provides job training or employment opportunities after completion of treatment; g) provides youth treatment; h) focuses on drug and alcohol abuse prevention; i) addresses alcohol or substance abuse in targeted populations with demonstrated need; j) the Department may not fund a program that has been previously funded but that has not shown satisfactory outcomes; and k) the Department may not deny funding to a program that uses faith-based strategies, so long as the strategies are effective for preventing or treating substance abuse.

SB 100 (section 5, AS 47.37.120 (b)) requires the Department to include a strategy for expanding substance abuse treatment services and reducing waiting lists for eligible participants in a substance abuse prevention or treatment program.

SB 100 (section 6, AS 47.37.130(b)(6)-(7)) also requires the Department to establish standards that are consistent with scientifically sound principles for measuring outcomes. This also applies for facilities and is created in section 7, AS 47.37.140 (g).

Finally, SB 100 (section 8) requires the Department to create a pilot project that would incorporate all of the elements of the bill. The Department would be required to select and fund a non-profit or municipal agency with a regional and accessible support network to operate a secure detoxification and treatment center for at least ten person who are involuntarily committed under AS 47.37.190. The center must provide the right to adequate care and individualized treatment and must provide sufficient staff and resources to ensure the availability of an adequate number of trained crisis responders. The center would be a 24-hour facility. The facility would employ clinical staff who have been trained in and use integrated and comprehensive screening and assessment practices, provide intensive case management services for persons who have been incapacitated by alcohol or drugs, including persons who are diagnosed with co-occurring disorders. The pilot project would terminate no later than July 1, 2012 and an evaluation report with outcome measures, including baseline data would be required. The final report would be due to the legislature by September 30, 2012.

This fiscal note represents the contractual and administrative costs associated with the expanded services required of the Department, specifically in the establishment of a secure enhanced detoxification and treatment facility, (section 8). Section 2 of the bill will not be implemented within this five-year budget cycle. However, inflationary considerations may be assumed for Section 2 as they apply to Section 8, while realizing that fiscal calculations for section 8 are based on a ten bed facility. Furthermore, the other sections of the bill do not have additional fiscal impacts on the Division, as they are already enmeshed in the Division's mission and day-to-day operating budget.

CONTINUED PAGE 3

**FISCAL NOTE
FN # 1**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

Assumptions for Pilot Project

The State of Washington recently passed a similar bill through their senate process and began a pilot project (April 2006) in Skagit County, Washington. Pioneer Center North (PCN) with Pioneer Human Services and the North Sound Mental Health Administration (NSMHA) received the contract from the Washington State Department of Substance Abuse Services Administration in the amount of \$2.2 million per year. The Request for Proposals was a limited solicitation such that only counties or existing mental health administrations could apply so that the infrastructure would already be in place and construction costs would be limited.

A review of the seventeen grantee agencies that provide psychiatric emergency, detoxification, and residential substance abuse services to adults in Alaska for FY 07 shows the average grant amount to be \$1.1 million. (See table.)

Akeela Treatment Services, Inc.	\$ 616,611.00	Adult Residential
Alaska Addiction Rehab Service - Nugen's Ranch	\$ 757,629.00	Adult Residential
ARC of Anchorage	\$ 420,702.00	Adult Residential
Bristol Bay Area Health Corporation	\$ 1,100,200.00	Psychiatric ES
Central Peninsula General Hospital	\$ 10,000.00	Adult Residential
Cook Inlet Tribal Council, Inc.	\$ 322,912.00	Adult Residential
Fairbanks Native Association	\$ 1,700,333.00	Detoxification
Gateway Center for Human Services	\$ 1,030,520.00	Psychiatric ES
Maniilaq Association	\$ 1,431,626.00	Psychiatric ES
Norton Sound Health Corp.	\$ 1,240,169.00	Psychiatric ES
Rainforest Recovery Center	\$ 621,100.00	Detoxification
Salvation Army - Clitheroe Center	\$ 3,982,030.00	Detoxification
Seaview Community Services	\$ 340,680.00	Psychiatric ES
Sitka Counseling and Prevention Services	\$ 823,168.00	Psychiatric ES
Southcentral Foundation	\$ 683,741.00	Psychiatric ES
SouthEast Alaska Regional Health Consortium	\$ 578,700.00	Psychiatric ES
Yukon-Kuskokwim Health Corporation	\$ 3,252,962.00	Psychiatric ES
Average	\$ 1,112,534.29	

We assume that we would also issue a limited grant solicitation (Request for Proposals) such that applicants would have to have a demonstrated level of infrastructure and tangible evidence of collaboration with other agencies such as the Alaska Court System and the Department of Corrections as required in section 8 of the bill. Based on the review of the Alaska system and the information gathered from the Washington pilot project, we would offer a grant in the amount of \$1.7 million.

With any grant program or pilot project, there are significant administrative costs involved, including the need for additional staff. We estimate that in order to successfully and effectively

CONTINUED ON PAGE 4

**FISCAL NOTE
FN # 1**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

administer the pilot project as proposed in SB 100, the following positions will be needed:

1.0 FTE Probation Officer II, Range 16: provide training and triage with therapeutic courts to the successful applicant or grantee, screening and referral.

1.0 FTE Health Facility Surveyor II, Range 20: provide project oversight, training and technical assistance to the successful applicant or grantee, monitor for grant regulation and report compliance, monitor performance/outcome/evaluation measures of successful grantee.

1.0 FTE Research Analyst III, Range 18: compile data on overall pilot project including performance measure, outcome indicators/measures, prepare evaluation report.

Total Cost:

Personal Services: \$257.8

The expansion in services as a result of the establishment of the pilot project and creation of an enhanced secure detoxification and treatment center creates the need for a Probation Officer II, a Health Facility Surveyor II, and a Research Analyst III to evaluate the the project. These annual costs are estimated to be:

Probation Officer II (Range 16 at a cost of \$75.7, including benefits, per position).

Health Facility Surveyor II (Range 20 at a cost of \$96.5, including benefits, per position).

Research Analyst III (Range 18 at a cost of \$85.6, including benefits, per position).

Contractual:

Annual costs for office space, phones and supplies are calculated at a cost of \$8,800 per additional staff for a total of \$26,400.

Supplies:

With the additional administrative costs, a one time cost for computers and software will be required with a cost of \$2,200 for each additional staff for a total of \$6,600.

Grant line:

\$1.7 million Grants through competitive RFP

SB

1000

SENATE COMMITTEE REPORT

DATE: 3/21/07

FURTHER: Finance

DATE TURNED
IN TO OFFICE: _____

State Affairs Committee considered SENATE BILL NO. 100

SB 100 SUBSTANCE ABUSE/MENTAL HEALTH PROGRAMS

"An Act relating to substance abuse and mental health disorder prevention and treatment programs; and relating to long-term secure treatment programs for persons with substance abuse or co-occurring substance abuse and mental health disorders."

and recommends:

- [] be replaced with [] SCS or CS SB 100 (STA)
- [] adopt previous [] SCS or [] CS _____ (_____)
- [] attached amendment(s)
- [] adopt _____ Letter of Intent
- [] further referral to _____ Committee

SENATE BILL:	
<input checked="" type="checkbox"/>	Same Title
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<hr/>	
HOUSE BILL:	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	Technical Title Change
<input type="checkbox"/>	New Title w/ SCR # _____

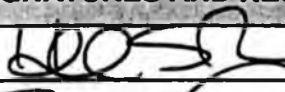

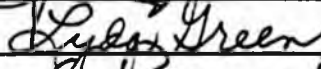
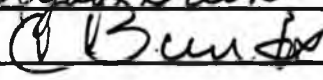

NEW FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#

PREVIOUS FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#
HSS	03/21		✓		2
HSS	03/21	✓			1

[] APPROPRIATION - no fiscal note

SIGNATURES AND RECOMMENDATIONS:	PRINTED LAST NAME	DO PASS	DO NOT PASS	NO REC	AMEND
	French	x			
	French			x	
	Green			✓	
	Bunker		✓		
CHAIR 	McInure			✓	

Alaska State Legislature

Session:
State Capitol, Rm. 125
Juneau, AK 99801
Phone: (907) 465-2995
Fax: (907) 465-6592



Interim:
716 W 4th Avenue, Suite 430
Anchorage, AK 99501-2133
Phone: (907) 269-0250
Fax: (907) 269-0249

Senator Lesil McGuire
Chair, Senate State Committee

Fax

To: Leg Legal **From:** Shalon Szymanski, SSTA Committee Aide

Fax: 2029 **Pages:**

Phone: **Date:** March ²⁹~~28~~, 2007

Re: Final CS Request **CC:**

Urgent **For Review** **Please Comment** **Please Reply** **Please Recycle**

e Comments:

ALASKA STATE LEGISLATURE

Sen. Lesil McGuire, Chair
Sen. Gary Stevens, Vice-Chair
Sen. Lyda Green
Sen. Hollis French
Sen. Con Bunde



State Capitol, Room 125
Juneau, AK 99801-1182
(907) 465-2995
Fax (907) 465-6592

SENATOR LESIL McGUIRE
CHAIR, STATE AFFAIRS

Memorandum

To: Leg. Legal

From: Shalon Szymanski, Committee Aide
Senate State Affairs Committee

Date: March 29, 2007

Re: Final CS Request (SB 100)

Please create a Final Committee Substitute (STA) for work order # 25-LS0151\N.

SB 100 did pass out of committee today and we would like to have it read across tomorrow during floor session.

Thank you!

25-LS0151\N
Mischel
3/27/07

CS FOR SENATE BILL NO. 100()

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-FIFTH LEGISLATURE - FIRST SESSION

BY

**Offered:
Referred:**

Sponsor(s): SENATORS ELLIS, French

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to substance abuse and mental health disorder prevention and**
2 **treatment programs; and relating to long-term secure treatment programs for persons**
3 **with substance abuse or co-occurring substance abuse and mental health disorders."**

4 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

5 *** Section 1.** The uncodified law of the State of Alaska is amended by adding a new section
6 to read:

7 **FINDINGS AND INTENT.** (a) The legislature finds that a substantial number of
8 persons have co-occurring substance abuse and mental health disorders and that identification
9 and integrated treatment of co-occurring disorders is critical to successful outcomes and
10 recovery.

11 (b) It is the intent of the legislature to

12 (1) support the Department of Health and Social Services in its efforts to
13 implement programs that accurately identify and provide appropriate treatment for persons
14 with substance abuse or co-occurring substance abuse and mental health disorders;

1 (2) increase treatment availability to persons with substance abuse or co-
2 occurring substance abuse and mental health disorders;

3 (3) improve treatment outcomes by expanding evidence-based, research-
4 based, and consensus-based treatment practices and removing barriers that prevent
5 implementation of those practices.

6 * **Sec. 2.** AS 47.37.030 is amended to read:

7 **Sec. 47.37.030. Powers of department.** The department may

8 (1) plan, establish, and maintain programs for the prevention and
9 treatment of alcoholism, drug abuse, and misuse of hazardous volatile materials and
10 substances by inhalant abusers;

11 (2) make contracts and award grants necessary or incidental to the
12 performance of its duties and the execution of its powers, including contracts with the
13 grants to public and private agencies, organizations, and individuals, to pay them for
14 services rendered or furnished to alcoholics, intoxicated persons, drug abusers, or
15 inhalant abusers; to the maximum extent possible, contracts and grants must be for a
16 period of two years; contracts under this paragraph are governed by AS 36.30 (State
17 Procurement Code);

18 (3) solicit and accept for use a gift of money or property or a grant of
19 money, services, or property from the federal government, the state, or a political
20 subdivision of it or a private source, and do all things necessary to cooperate with the
21 federal government or any of its agencies in making an application for a grant;

22 (4) administer or supervise the administration of the provisions relating
23 to alcoholics, intoxicated persons, drug abusers, and inhalant abusers of state plans
24 submitted for federal funding under federal health, welfare, or treatment legislation;

25 (5) coordinate its activities and cooperate with alcoholism, drug abuse,
26 and inhalant abuse programs in this and other states, and make contracts and other
27 joint or cooperative arrangements with state, local, or private agencies for the
28 treatment of alcoholics, intoxicated persons, drugs abusers, and inhalant abusers, and
29 for the common advancement of alcoholism, drug abuse, and inhalant abuse programs
30 in this and other states;

31 (6) keep records and engage in research and the gathering of relevant

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statistics;

(7) do other acts necessary to implement the authority expressly granted to it;

(8) acquire, hold, or dispose of real property or any interest in it, and construct, lease, or otherwise provide treatment facilities for alcoholics, intoxicated persons, drug abusers, and inhalant abusers; however, the department shall encourage local initiative, involvement, and financial participation under grants-in-aid whenever possible in preference to the construction or operation of facilities directly by the department; contracting and construction under this paragraph are governed by AS 36.30 (State Procurement Code);

(9) strengthen and enhance the process for identifying people who have co-occurring mental health and substance abuse disorders;

(10) establish a secure enhanced detoxification and treatment center for persons involuntarily detained because they are likely to inflict physical harm to self or others; in this paragraph, "enhanced" means the ability to treat co-occurring mental health and substance abuse disorders;

(11) develop and implement a substance abuse treatment system using evidence-based best practices or, if evidence-based best practices do not exist, research-based practices, that includes a procedure for adapting the practices to new situations and for collaboration with consumer-based programs; if research-based practices are not known or available, the department may include consensus-based or, if funds are available, promising practices; a practice must promote independence, recovery, employment, education, ongoing community-based treatment, housing, and other aspects of harm reduction.

* Sec. 3. AS 47.37.040 is amended to read:

Sec. 47.37.040. Duties of department. The department shall

(1) develop, encourage, and foster statewide, regional, and local plans and programs for the prevention of alcoholism and drug abuse and treatment of alcoholics, intoxicated persons, drug abusers, and inhalant abusers in cooperation with public and private agencies, organizations, and individuals, and provide technical assistance and consultation services for these purposes;

1 (2) coordinate the efforts and enlist the assistance of all public and
2 private agencies, organizations, and individuals interested in prevention of alcoholism,
3 drug abuse, and inhalant abuse, and treatment of alcoholics, intoxicated persons, drug
4 abusers, and inhalant abusers;

5 (3) cooperate with the Department of Corrections in establishing and
6 conducting programs to provide treatment for alcoholics, intoxicated persons, drug
7 abusers, and inhalant abusers in or on parole from penal institutions;

8 (4) cooperate with the Department of Education and Early
9 Development, school boards, schools, police departments, courts, and other public and
10 private agencies, organizations, and individuals in establishing programs for the
11 prevention of alcoholism, drug abuse, and inhalant abuse, and treatment of alcoholics,
12 intoxicated persons, drug abusers, and inhalant abusers, and preparing curriculum
13 materials for use at all levels of school education;

14 (5) prepare, publish, evaluate, and disseminate educational material
15 dealing with the nature and effects of alcohol and drugs, and the misuse of hazardous
16 volatile substances;

17 (6) develop and implement, as an integral part of treatment programs,
18 an educational program for use in the treatment of alcoholics, intoxicated persons,
19 drug abusers, and inhalant abusers that includes the dissemination of information
20 concerning the nature and effects of alcohol, drugs, and hazardous volatile substances;

21 (7) organize and foster training programs for all persons engaged in
22 treatment of alcoholics, intoxicated persons, drug abusers, and inhalant abusers, and
23 establish standards for training paraprofessional alcoholism, drug abuse, and inhalant
24 abuse workers;

25 (8) sponsor and encourage research into the causes and nature of
26 alcoholism, drug abuse, and inhalant abuse, and the treatment of alcoholics,
27 intoxicated persons, drug abusers, and inhalant abusers, and serve as a clearinghouse
28 for information relating to alcoholism, drug abuse, and inhalant abuse;

29 (9) specify uniform methods for keeping statistical information by
30 public and private agencies, organizations, and individuals, and collect and make
31 available relevant statistical information, including number of persons treated,

1 frequency of admission and readmission, and frequency and duration of treatment;

2 (10) conduct program planning activities approved by the Advisory
3 Board on Alcoholism and Drug Abuse;

4 (11) review all state health, welfare, and treatment plans to be
5 submitted for federal funding, and advise the commissioner on provisions to be
6 included relating to alcoholics, intoxicated persons, drug abusers, and inhalant
7 abusers;

8 (12) assist in the development of, and cooperate with, alcohol, drug
9 abuse, and inhalant abuse education and treatment programs for employees of state
10 and local governments and businesses and industries in the state;

11 (13) use the support and assistance of interested persons in the
12 community, particularly recovered alcoholics, drug abusers, and inhalant abusers, to
13 encourage alcoholics, drug abusers, and inhalant abusers to voluntarily undergo
14 treatment;

15 (14) cooperate with the Department of Public Safety and the
16 Department of Transportation and Public Facilities in establishing and conducting
17 programs designed to deal with the problem of persons operating motor vehicles while
18 under the influence of an alcoholic beverage, inhalant, or controlled substance, and
19 develop and approve alcohol information courses required to be taken by drivers under
20 AS 28.15 or made available to drivers to reduce points assessed for violation of traffic
21 laws;

22 (15) encourage hospitals and other appropriate health facilities to
23 admit without discrimination alcoholics, intoxicated persons, drug abusers, and
24 inhalant abusers and to provide them with adequate and appropriate treatment;

25 (16) encourage all health insurance programs to include alcoholism
26 and drug abuse as a covered illness;

27 (17) prepare an annual report covering the activities of the department
28 and notify the legislature that the report is available;

29 (18) develop and implement a training program on alcoholism and
30 drug abuse for employees of state and municipal governments, and private institutions;

31 (19) develop curriculum materials on drug and alcohol abuse and the

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misuse of hazardous volatile substances for use in grades kindergarten through 12, as well as a course of instruction for teachers to be charged with presenting the curriculum;

(20) develop and implement or designate, in cooperation with other state or local agencies, a juvenile alcohol safety action program that provides alcohol and substance abuse screening, referral, and monitoring of persons under 18 years of age who have been referred to it by

(A) a court in connection with a charge or conviction of a violation or misdemeanor related to the use of alcohol or a controlled substance;

(B) the agency responsible for the administration of motor vehicle laws in connection with a license action related to the use of alcohol or a controlled substance; or

(C) department staff after a delinquency adjudication that is related to the use of alcohol or a controlled substance;

(21) develop and implement, or designate, in cooperation with other state or local agencies, an alcohol safety action program that provides alcohol and substance abuse screening, referral, and monitoring services to persons who have been referred by a court in connection with a charge or conviction of a misdemeanor involving the use of a motor vehicle, aircraft, or watercraft and alcohol or a controlled substance, referred by a court under AS 28.35.028, or referred by an agency of the state with the responsibility for administering motor vehicle laws in connection with a driver's license action involving the use of alcohol or a controlled substance;

(22) whenever possible, apply evidence-based, research-based, and consensus-based substance abuse and co-occurring substance abuse and mental health disorders treatment practices and remove barriers that prevent the use of those practices;

(23) collaborate with first responders, hospitals, schools, primary care providers, developmental disability treatment providers, law enforcement, corrections, attorneys, the Alaska Court System, community behavioral treatment providers, Alaska Native organizations, and federally funded

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programs in implementing programs for co-occurring substance abuse and mental health disorders treatment.

* Sec. 4. AS 47.37.045 is amended by adding new subsections to read:

(f) In addition to the priority given under (d) of this section, the department shall grant a priority to a proposed program or project under (c)(5) of this section if the proposed program or project provides prompt substance abuse treatment for a pregnant woman by advancing the woman on a waiting list for the program or project and by streamlining paperwork for admission of the woman to the program.

(g) In addition to the priorities given under (d) and (f) of this section, the department shall grant a priority to a proposed program or project under (c)(5) of this section if the proposed program or project

- (1) creates alternatives to incarceration for nonviolent offenders;
- (2) provides rehabilitation services to prisoners who have substance abuse problems;
- (3) measures and demonstrates a high rate of harm reduction for participants;
- (4) is based on scientifically sound principles of prevention and treatment;
- (5) provides job training or employment opportunities after completion of substance abuse treatment;
- (6) provides youth treatment;
- (7) focuses on drug and alcohol abuse prevention;
- (8) addresses alcohol or substance abuse in targeted populations that have statistically higher incidences of alcohol or substance abuse problems; or
- (9) addresses co-occurring mental health and substance abuse disorders.

(h) The department may not fund a proposed program or project that has been previously funded under this section unless the applicant provides satisfactory evidence of success of the program or project.

(i) The department may not deny funding for a program under this section solely on the basis that the program relies on faith-based strategies so long as the

1 strategies are effective for preventing or treating substance abuse.

2 * **Sec. 5.** AS 47.37.120 is amended by adding a new subsection to read:

3 (b) The comprehensive program carried out under this section must include a
4 strategy for expanding substance abuse treatment services and reducing waiting lists
5 for eligible participants in a substance abuse prevention or treatment program and
6 must include one or more of the factors listed under AS 47.37.045(g).

7 * **Sec. 6.** AS 47.37.130(b) is amended to read:

8 (b) The program of the department must include

9 (1) emergency treatment provided by a facility affiliated with or part of
10 the medical service of a general hospital;

11 (2) inpatient treatment;

12 (3) intermediate treatment;

13 (4) outpatient and follow-up treatment; [AND]

14 (5) standards for alcohol safety action programs; the standards may
15 vary in their requirements and stringency according to the population, price level,
16 remoteness, access to transportation, and availability of ancillary services of the area
17 to be served; a program must meet the applicable standards before it is approved by
18 the department as an alcohol safety action program; the standards required under this
19 paragraph shall be established in a manner that provides protection of the health,
20 safety, and well-being of clients of the affected programs and protection for the
21 affected programs from exposure to malpractice and liability actions;

22 (6) the priorities created under AS 47.37.045(f) and (g); and

23 (7) standards that are consistent with scientifically sound
24 principles for measuring outcomes.

25 * **Sec. 7.** AS 47.37.140 is amended by adding a new subsection to read:

26 (g) The standards established for facilities under this section must be based on
27 scientifically sound evidence and be consistent with the priorities created under
28 AS 47.37.045(f) and (g).

29 * **Sec. 8.** The uncodified law of the State of Alaska is amended by adding a new section to
30 read:

31 **PILOT PROJECT FOR THE TREATMENT OF PERSONS INCAPACITATED BY**

1 ALCOHOL OR DRUGS, INCLUDING PERSONS WITH CO-OCCURRING SUBSTANCE
 2 ABUSE AND MENTAL HEALTH DISORDERS. (a) A pilot project to integrate crisis
 3 response and involuntary treatment and effectively implement the provisions of AS 47.37.170
 4 - 47.37.270 for adults who are incapacitated by alcohol or drugs, including persons with co-
 5 occurring substance abuse and mental health disorders, is established within the Department
 6 of Health and Social Services.

7 (b) The commissioner of health and social services shall implement the pilot project
 8 established under this section by selecting and funding a program that

9 (1) is operated by a nonprofit or municipal agency with a regional and
 10 accessible support network that meets the requirements of this section;

11 (2) includes the establishment and operation of a secure detoxification and
 12 treatment center for at least 10 persons involuntarily committed under AS 47.37.190; the
 13 center must provide the right to adequate care and individualized treatment;

14 (3) coordinates with existing community resources to provide

15 (A) an adequate number of trained crisis responders 24 hours a day,
 16 seven days a week; and

17 (B) adequate medical and legal support to petition for and meet the
 18 legal requirements for protective custody, detention, and involuntary commitment
 19 under AS 47.37.190 - 47.37.270;

20 (4) employs clinicians or clinical staff who have been trained in and use
 21 integrated and comprehensive screening and assessment practices;

22 (5) provides intensive case management services for persons who

23 (A) have been incapacitated by alcohol or drugs, including persons
 24 who are diagnosed with co-occurring substance abuse and mental disorders; and

25 (B) have a history of repeated use of crisis intervention services;

26 (6) is directed toward reducing the need for crisis medical, substance abuse,
 27 and mental health services including emergency room admissions, hospitalizations,
 28 detoxification programs, inpatient psychiatric admissions, emergency medical services, and
 29 ambulance services;

30 (7) reduces the involvement of individuals in the criminal justice system
 31 including arrests, bookings, jail days, violations of conditions of bail or probation, and

New

1 reduces criminal justice costs including costs of police, corrections, prosecution, defense, and
2 the courts in cases involving substance abuse or in which substance abuse is a contributing
3 factor;

4 (8) where appropriate and available, coordinates client services with

5 (A) therapeutic courts;

6 (B) public assistance services;

7 (C) primary care providers;

8 (D) Department of Corrections personnel;

9 (E) federal program managers and agencies;

10 (F) churches and other faith-based organizations;

11 (G) community behavioral treatment providers;

12 (H) attorneys;

13 (I) the Alaska Court System;

14 (9) assesses and reports outcomes of the program, including documentation of
15 the reduced need for services as described under (6) and (7) of this subsection:

16 (10) agree to cooperate with the department to provide requested data and
17 information related to the program.

18 (c) The pilot project shall terminate not later than July 1, 2012, and include not more
19 than one year for planning and accumulation of baseline data, two years for implementation,
20 and two years for evaluation. The commissioner shall evaluate the pilot project and make a
21 preliminary report to the legislature by January 1, 2011, and a final report by September 30,
22 2012. The evaluation must include a description of outcomes, including

23 (1) the efficiency rate of evaluation and treatment within 72 hours after
24 detention;

25 (2) the cost-effectiveness of the project in comparison with other residential
26 treatment programs, emergency room visits, law enforcement and judicial involvement, and
27 other available resources for crisis intervention and treatment of persons who are
28 incapacitated by alcohol or drugs;

29 (3) a comparison of outcomes for the pilot program and other residential
30 treatment programs, emergency room visits, law enforcement and judicial involvement, and
31 other available resources for crisis intervention and treatment of persons who are

1 incapacitated by alcohol or drugs;

2 (4) a comparison of crisis response rates and outcomes of the pilot project and
3 other crisis response programs operating in the same region;

4 (5) the effect of the pilot project on the treatment programs operating in the
5 same region;

6 (6) the rate of vocational training and employment for program participants.

7 (d) At the conclusion of the pilot project under this section, the department shall
8 propose legislation that would establish a comprehensive involuntary treatment act that
9 includes a unified set of standards, rights, obligations, and procedures for adults and children
10 who are either incapacitated by alcohol or drugs, mentally ill, or both.

11 (e) In this section,

12 (1) "incapacitated by alcohol or drugs" has the meaning given in
13 AS 47.37.270;

14 (2) "secure detoxification and treatment center" means a residential facility
15 that is either part of another facility or is a separate facility that provides intake, assessment,
16 and treatment of persons incapacitated by alcohol or drugs, including persons with co-
17 occurring substance abuse and mental health disorders, in a locked or otherwise protected and
18 confidential setting.

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: 2
 Bill Version: SB 100
 (S) Publish Date: 3/21/07
 Dept. Affected: Health & Social Services

Revision Date/Time (Note if correction):

Title SUBSTANCE ABUSE/MENTAL HEALTH PROGRAMS

RDU Behavioral Health

Component Behavioral Hlth Medicaid Svcs

Sponsor ELLIS

Requester SENATE (HES)

Component No. 2660

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims
Miscellaneous						
TOTAL OPERATING
CAPITAL EXPENDITURES						
CHANGE IN REVENUES (0)						

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
Other(Specify Type-do not abbreviate)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: _____

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

The fiscal note for Behavioral Health Medicaid Services component is indeterminate.

Section 8 of SB100 requires the department to fund a pilot project for a secure detoxification and treatment center of at least 10 beds for persons involuntarily committed under AS 47.37.190. To the extent that the persons receiving care in the pilot project are Medicaid eligible and that the services are covered under the Medicaid state plan, costs could accrue to Medicaid.

Continued page 2

Prepared by: Stacy Toner, Acting Director
 Division: Behavioral Health
 Approved by: Karleen Jackson, Commissioner
 Agency: Department of Health and Social Services

Phone 465-2817
 Date/Time 03/14/2007
 Date 03/15/2007

**FISCAL NOTE
FN # 2**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

The total cost for services in the pilot project are estimated at \$1,700.0 GF per year. Depending on the actual number of Medicaid eligible persons, the services provided, and the quantity of services, some of the costs could be shifted to Medicaid which has joint state/federal funding. This would not change the total expenditures, but would change the fund source. The amount of potential federal funds that would replace GF is estimated to be between \$0 and \$913.9 in SFY08.

The number of Medicaid eligible persons for this pilot project is expected to be very small. Typically only 10% of the substance abuse treatment is Medicaid eligible. That would mean that on average, of the 10 beds only 1 might be charged to Medicaid. It is difficult to predict how many eligible persons would actually be directed to the pilot project. Section 4 of the bill outlines the populations targeted for the pilot. The pregnant women and youth populations could be Medicaid eligible if they are low income; however, prisoners are not eligible.

Not all the services would be Medicaid eligible. Section 4 outlines services, including clinical services, which could be covered under Medicaid; however, the job training and employment services are not covered. This uncertainty is the reason for the indeterminate fiscal note.

FISCAL NOTE

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

Fiscal Note Number: 1
 Bill Version: SB 100
 (S) Publish Date: 3/21/07
 Dept. Affected: Health & Social Services

Revision Date/Time (Note if correction): 3/9/2007
 Title SUBSTANCE ABUSE/MENTAL HEALTH PROGRAMS

RDU Behavioral Health
 Component Behavioral Health Administration

Sponsor ELLIS
 Requester SENATE (HES)

Component No. 2665

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services	257.8	257.8	257.8	257.8	257.8	257.8
Travel						
Contractual	26.4	26.4	26.4	26.4	26.4	26.4
Supplies	6.6					
Equipment						
Land & Structures						
Grants & Claims	1,700.0	1,700.0	1,700.0	1,700.0	1,700.0	1,700.0
Miscellaneous						
TOTAL OPERATING	1,990.8	1,984.2	1,984.2	1,984.2	1,984.2	1,984.2
CAPITAL EXPENDITURES						
CHANGE IN REVENUES (0)						

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	1,990.8	1,984.2	1,984.2	1,984.2	1,984.2	1,984.2
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
Other(Specify Type-do not abbreviate)						
TOTAL	1,990.8	1,984.2	1,984.2	1,984.2	1,984.2	1,984.2

Estimate of any current year (FY2007) cost: _____

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time	3	3	3	3	3	3
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

SB 100 (section 2, AS 47.37.030 (9)-(11)) allows the Department to a) implement programs that accurately identify and appropriately treat persons with substance abuse or co-occurring disorders; b) establish a secure enhanced detoxification and treatment center for involuntarily committed persons who are at risk to physically harm them self or others; and c) develop and implement a substance abuse treatment system using evidence-based, research-based, consensus-based; or promising practices that promote independence, recovery, employment, education, ongoing community-based treatment, housing, and other aspects of harm reduction.

SB 100 (section 3, AS 47.37.040 (22)-(23)) requires the Department to a) apply, whenever possible, evidence-based, research-based, consensus-based substance abuse and co-occurring substance abuse and mental health

Prepared by: Stacy Toner, Acting Director
 Division Behavioral Health
 Approved by: Karleen Jackson, Commissioner
 Agency Department of Health and Social Services

Phone 465-2817
 Date/Time 03/13/2007
 Date 03/15/2007

**FISCAL NOTE
FN # 1**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

(hereafter referred to as "co-occurring disorders") treatment practices and remove barriers that prevent the use of those practices; and b) collaboration with cross-jurisdictional, cross-agency, and cross-cultural organizations in implementing programs for co-occurring disorders treatment.

SB 100 (section 4, AS 47.37.045 (f)-(i)) also requires the Department to grant priority to a proposed program that a) provides preference to a pregnant woman for substance abuse treatment by moving her up on a waiting list for the program and by streamlining the admissions process; b) is an alternative to incarceration for nonviolent offenders; c) provides rehabilitation services to prisoners with substance abuse problems; d) provides demonstrated outcomes in harm reduction; e) is based on scientifically sound principles of prevention and treatment; f) provides job training or employment opportunities after completion of treatment; g) provides youth treatment; h) focuses on drug and alcohol abuse prevention; i) addresses alcohol or substance abuse in targeted populations with demonstrated need; j) the Department may not fund a program that has been previously funded but that has not shown satisfactory outcomes; and k) the Department may not deny funding to a program that uses faith-based strategies, so long as the strategies are effective for preventing or treating substance abuse.

SB 100 (section 5, AS 47.37.120 (b)) requires the Department to include a strategy for expanding substance abuse treatment services and reducing waiting lists for eligible participants in a substance abuse prevention or treatment program.

SB 100 (section 6, AS 47.37.130(b)(6)-(7)) also requires the Department to establish standards that are consistent with scientifically sound principles for measuring outcomes. This also applies for facilities and is created in section 7, AS 47.37.140 (g).

Finally, SB 100 (section 8) requires the Department to create a pilot project that would incorporate all of the elements of the bill. The Department would be required to select and fund a non-profit or municipal agency with a regional and accessible support network to operate a secure detoxification and treatment center for at least ten person who are involuntarily committed under AS 47.37.190. The center must provide the right to adequate care and individualized treatment and must provide sufficient staff and resources to ensure the availability of an adequate number of trained crisis responders. The center would be a 24-hour facility. The facility would employ clinical staff who have been trained in and use integrated and comprehensive screening and assessment practices, provide intensive case management services for persons who have been incapacitated by alcohol or drugs, including persons who are diagnosed with co-occurring disorders. The pilot project would terminate no later than July 1, 2012 and an evaluation report with outcome measures, including baseline data would be required. The final report would be due to the legislature by September 30, 2012.

This fiscal note represents the contractual and administrative costs associated with the expanded services required of the Department, specifically in the establishment of a secure enhanced detoxification and treatment facility, (section 8). Section 2 of the bill will not be implemented within this five-year budget cycle. However, inflationary considerations may be assumed for Section 2 as they apply to Section 8, while realizing that fiscal calculations for section 8 are based on a ten bed facility. Furthermore, the other sections of the bill do not have additional fiscal impacts on the Division, as they are already enmeshed in the Division's mission and day-to-day operating budget.

CONTINUED PAGE 3

**FISCAL NOTE
FN # 1**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

Assumptions for Pilot Project

The State of Washington recently passed a similar bill through their senate process and began a pilot project (April 2006) in Skagit County, Washington. Pioneer Center North (PCN) with Pioneer Human Services and the North Sound Mental Health Administration (NSMHA) received the contract from the Washington State Department of Substance Abuse Services Administration in the amount of \$2.2 million per year. The Request for Proposals was a limited solicitation such that only counties or existing mental health administrations could apply so that the infrastructure would already be in place and construction costs would be limited.

A review of the seventeen grantee agencies that provide psychiatric emergency, detoxification, and residential substance abuse services to adults in Alaska for FY 07 shows the average grant amount to be \$1.1 million. (See table.)

Akeela Treatment Services, Inc.	\$ 616,611.00	Adult Residential
Alaska Addiction Rehab Service - Nugen's Ranch	\$ 757,629.00	Adult Residential
ARC of Anchorage	\$ 420,702.00	Adult Residential
Bristol Bay Area Health Corporation	\$ 1,100,200.00	Psychiatric ES
Central Peninsula General Hospital	\$ 10,000.00	Adult Residential
Cook Inlet Tribal Council, Inc.	\$ 322,912.00	Adult Residential
Fairbanks Native Association	\$ 1,700,333.00	Detoxification
Gateway Center for Human Services	\$ 1,030,520.00	Psychiatric ES
Maniilaq Association	\$ 1,431,626.00	Psychiatric ES
Norton Sound Health Corp.	\$ 1,240,169.00	Psychiatric ES
Rainforest Recovery Center	\$ 621,100.00	Detoxification
Salvation Army - Clitheroe Center	\$ 3,982,030.00	Detoxification
Seaview Community Services	\$ 340,680.00	Psychiatric ES
Sitka Counseling and Prevention Services	\$ 823,168.00	Psychiatric ES
Southcentral Foundation	\$ 683,741.00	Psychiatric ES
SouthEast Alaska Regional Health Consortium	\$ 578,700.00	Psychiatric ES
Yukon-Kuskokwim Health Corporation	\$ 3,252,962.00	Psychiatric ES
Average	\$ 1,112,534.29	

We assume that we would also issue a limited grant solicitation (Request for Proposals) such that applicants would have to have a demonstrated level of infrastructure and tangible evidence of collaboration with other agencies such as the Alaska Court System and the Department of Corrections as required in section 8 of the bill. Based on the review of the Alaska system and the information gathered from the Washington pilot project, we would offer a grant in the amount of \$1.7 million.

With any grant program or pilot project, there are significant administrative costs involved, including the need for additional staff. We estimate that in order to successfully and effectively

CONTINUED ON PAGE 4

**FISCAL NOTE
FN # 1**

**STATE OF ALASKA
2007 LEGISLATIVE SESSION**

BILL NO. SB 100

ANALYSIS CONTINUATION

administer the pilot project as proposed in SB 100, the following positions will be needed:

1.0 FTE Probation Officer II, Range 16: provide training and triage with therapeutic courts to the successful applicant or grantee, screening and referral.

1.0 FTE Health Facility Surveyor II, Range 20: provide project oversight, training and technical assistance to the successful applicant or grantee, monitor for grant regulation and report compliance, monitor performance/outcome/evaluation measures of successful grantee.

1.0 FTE Research Analyst III, Range 18: compile data on overall pilot project including performance measure, outcome indicators/measures, prepare evaluation report.

Total Cost:

Personal Services: \$257.8

The expansion in services as a result of the establishment of the pilot project and creation of an enhanced secure detoxification and treatment center creates the need for a Probation Officer II, a Health Facility Surveyor II, and a Research Analyst III to evaluate the the project. These annual costs are estimated to be:

Probation Officer II (Range 16 at a cost of \$75.7, including benefits, per position).

Health Facility Surveyor II (Range 20 at a cost of \$96.5, including benefits, per position).

Research Analyst III (Range 18 at a cost of \$85.6, including benefits, per position).

Contractual:

Annual costs for office space, phones and supplies are calculated at a cost of \$8,800 per additional staff for a total of \$26,400.

Supplies:

With the additional administrative costs, a one time cost for computers and software will be required with a cost of \$2,200 for each additional staff for a total of \$6,600.

Grant line:

\$1.7 million Grants through competitive RFP

ALASKA STATE LEGISLATURE
Senator Johnny Ellis



Sponsor

Statement

SB 100 Substance Abuse Bill

Addiction is taking a heavy toll on Alaska's people, culture and economy. Alaska ranks #1 in the nation in alcohol-related deaths and Alaskans with substance abuse problems, or co-occurring mental and substance abuse disorders, are more likely to be homeless, spend time in correctional facilities, and become involved in child protective service proceedings. Substance abuse tears apart families; in 2004, 81% of all reported harm against a child cases involved illicit drugs. The financial impact of addiction is staggering, costing the state an estimated \$738 million a year in health care costs, accidents, lost productivity, criminal justice and correctional facilities. Something must change.

At the same time, Alaska is falling behind in providing treatment to those who need help in overcoming their addiction. According to the 2002 Integrated Substance Abuse Treatment Needs Assessment for Alaska, only 15.6% of Alaskans in need of substance abuse treatment received it. We can, and must do better.

Senate Bill 100 proposes several common sense changes to Alaska's statutes regarding drug and alcohol abuse in order to improve the quality of and access to treatment and prevention. The legislation:

- Mandates priority treatment for pregnant women seeking help in overcoming addiction. Reducing the incidence of Fetal Alcohol Spectrum disorders will save large sums of money.
- Creates a pilot program in a secure setting for involuntary commitment cases. This small, but enormously expensive group of persons with addictions or co-occurring substance abuse and mental health disorders chronically recycle through non-secure treatment services and as a result present a danger to themselves and others. This population draws heavily on law enforcement, corrections, the court system, and community services.
- Gives priority to state grantees who utilize evidence-based programming, as well as programs that address substance abuse prevention, addiction within prisons, among youths, and in rural Alaska.
- Encourages the Department of Health and Social Services to develop a process to identify people with co-occurring mental and substance abuse disorders, so that this population can be better served.
- Ensures that effective faith-based strategies for treating substance abuse are not discriminated against in statute.

Most Alaskans have been touched by substance abuse, whether it is a personal struggle with addiction, or watching a friend or relative battle with this deadly condition. I ask you to support for SB 100 and its common-sense steps to strengthen the fight against drugs and alcohol abuse in our state.

LEGAL SERVICES

DIVISION OF LEGAL AND RESEARCH SERVICES
LEGISLATIVE AFFAIRS AGENCY
STATE OF ALASKA

(907) 465-3867 or 465-2450
FAX (907) 465-2029
Mail Stop 3101


State Capitol
Juneau, Alaska 99801-1182
Deliveries to: 129 6th St., Rm. 329

MEMORANDUM

March 6, 2007

SUBJECT: SB 100 Sectional Analysis (Work Order No. 25-LS0151\V)

TO: Senator Johnny Ellis
Attn: Kate Herring

FROM: Jean M. Mischel
Legislative Counsel 

You have requested a sectional summary of the above-described bill.

As a preliminary matter, note that a sectional summary of a bill should not be considered an authoritative interpretation of the bill and the bill itself is the best statement of its contents. If you would like an interpretation of the bill as it may apply to a particular set of circumstances, please advise.

Section 1. Provides legislative findings and intent supporting treatment programs for persons with substance abuse and co-occurring substance abuse and mental health disorders.

Section 2. Amends the powers of the Department of Health and Social Services to add specified co-occurring substance abuse and mental health treatment programs.

Section 3. Amends the duties of the Department of Health and Social Services to require specified types of treatment and collaborations for co-occurring substance abuse and mental health disorders.

Section 4. Modifies and establishes priorities for grant programs related to substance abuse and mental health treatment.

Section 5. Establishes standards for the comprehensive program developed and implemented by the Department of Health and Social Services for the treatment and prevention of substance abuse.

Section 6. Adds standards pertaining to priorities listed in sec. 4 of the bill for the Department of Health and Social Services' comprehensive program for the treatment and prevention of substance abuse.

Section 7. Requires that standards established for public and private treatment facilities

Senator Johnny Ellis

March 6, 2007

Page 2

be based on scientifically sound evidence and be consistent with priorities established under sec. 4.

Section 8. Establishes within the Department of Health and Social Services a pilot project to integrate crisis response and involuntary treatment of adults incapacitated by alcohol or drugs, including persons with co-occurring substance abuse and mental health disorders.

JMM:ljw
07-114.ljw



Municipality of Anchorage



1501 Bragan Street • Anchorage, Alaska (USA) 99501 • Telephone: (907) 744-8500 • <http://www.muni.org>

Mayor Mark Beylich

Anchorage Police Department

Honorable Johnny Ellis
State Senate
Alaska State Capitol, Room 9
Juneau, Alaska 99801-1182

Dear Senator Ellis:

I appreciate your efforts regarding Senate Bill 100, which proposes some common sense changes to state statutes involving substance abuse. Mandating treatment for pregnant women who seek help in overcoming addiction, supporting DHHS in their efforts to more effectively deal with citizens who are doubly afflicted with mental and substance abuse disorders, and ensuring collaboration with and support of effective faith based efforts that deal with substance abuse are all noteworthy and doable.

As first responders, the specter of substance abuse and mental illness is prevalent throughout our daily contacts with citizens from all walks of life. Any effort by the state to ensure a better manner for addressing these problems, particularly in regard to a program focused on and supportive of involuntary commitments of those persons saddled with substance abuse and mental health disorders who pose a risk to themselves and others, is appreciated.

Once again, I am in support of SB 100 and appreciate your efforts.

Sincerely,

Rob Heun
Chief of Police

Community, Security, Prosperity

Senator Johnny Eliis
State Capitol, Rm 9
Juneau, AK 99801-1182

March 19, 2007

Dear Senator Ellis,

Covenant House supports SB 100, a bill to expand access to broader substance abuse treatment options, targeting certain populations with higher incidences of addiction. Covenant House is primarily a shelter for homeless and at-risk youth between the ages of 13-20, located in Anchorage. Additionally, Covenant House has a transitional living program serving youth ages 18-20, which includes 10 beds for moms with babies and pregnant young women. Finally, Covenant House has a non-residential Community Services Center which provides educational and job skills services to youth.

One of the frustrations that we face as service providers is finding space in treatment programs for our clients. There are very few programs that specialize in providing substance abuse treatment to youth and those that do exist have long wait lists. Oftentimes those youth in greatest need of help are turned away from programs because there is no space available. Implementing a system that prioritizes certain populations and increases and broadens treatment options will prevent some of the most vulnerable among us from getting stuck in a cycle of addiction.

Identifying certain groups and providing priority treatment for them is an important step forward in controlling the substance abuse epidemic in Alaska. Many young Alaskans in need of treatment are ignored and go untreated only because there are no adequate resources available for these individuals who want help and want to improve their lives.

Thank you for introducing this legislation. Please let us know how we can help to ensure its continued support. I can be reached at (907) 339-4205 or nicole.thibodeau@covhouse.alaska.com.

Sincerely,
Nicole Thibodeau



March 15, 2007

The Honorable Bettye Davis, Chair
Senate Health, Education and Social Services Committee
Alaska State Capital, Room 30
Juneau, AK 99801-1182

RE: SB 100 (Ellis)—Support

Dear Chair Davis:

On the behalf of the members of AARP Alaska, we encourage you and your colleagues on the Senate Health, Education and Social Services Committee to support SB 100, authored by Senator Johnny Ellis.

There are three main reasons why AARP is concerned with substance abuse. The first two reasons involve abuse or neglect cases that stem from substance abuse and how they impact seniors directly. The third reason deal with the impact substance abuse has on seniors indirectly.

First is the classic case in which the person committing the abuse or the neglect has a substance abuse problem. A national study examining "elder abuse" case files from agencies around the country found that severe drinking bouts by the abuser led to harmful incidents in senior abuse cases.

The second case (which is probably as common), is where the older adult has a substance abuse problem. For some older adults it is alcohol; for others it is psychoactive medications. For many it is both. For these individuals getting treatment is very difficult because there is little access to treatment and prevention. In Anchorage, there is only one treatment center at which older adults may seek treatment (Ernie Turner Center).

The third reason why we support this bill has to do with grandparenting. Grandparenting is sometimes called the most spiritual of all relationships because it links people entering the world with those on their way out. Grandparenting today, however, is not all Bible stories, sugar cookies and fun. Increasingly, grandparents are rearing their children's children when drug addiction and mental illness make parents unavailable.

AARP is the world's largest organization of grandparents. Our 89,000 AARP members in Alaska are concerned about the impact substance abuse is having on their grandchildren. There are 8,188 grandchildren living with grandparents Alaska. In addition, there are 5,419 grandparenting headed household, which means that 1.5 children are living with their grandparents.

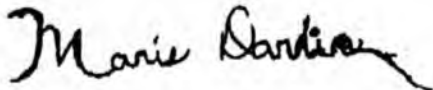
We believe that SB 100 is a substantive bill because it address the concerns of a lot of our members, as well the concerns of others. Furthermore, we believe that providing assistance to those who need help in overcoming their addiction is a good public policy for Alaska.

Therefore, AARP request an "AYE" vote on Senator Ellis's SB 100.

Should you have any questions about our position, please feel free to contact me (586-3637) or Pat Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Senator Joe Thomas
Senator John Cowdery
Senator Kim Elton
Senator Fred Dyson
Senator Johnny Ellis

3200 Providence Drive
P.O. Box 196604
Anchorage, Alaska
99519-6604

Tel 907.562.2211

March 7, 2007

Kate Herring
Office of Senator Johnny Ellis
Capitol Building, Rm. 9
Juneau, AK 99801
(907) 465-6704

Dear Senator Ellis:

Thank you for the opportunity to read the Senate Bill NO. 100 and give an opinion. I wholeheartedly support SB 100.

For the last five years I have been Medical Director of the Providence Psychiatric Emergency Room, and during this time also worked at the Salvation Army's Clitheroe Enhanced Detox Unit for 3 years. I see SB 100 as a small, yet significant step-in-the-right-direction in caring for the vast number of patients who are suffering from untreated substance abuse in Alaska. The majority of my emergency room psychiatric patients (and we see over 4000/year) have co-existing chemical dependency ("dual-diagnosis"), which certainly contributes to the devastation in their lives. Unfortunately, there are only 8 beds for me to refer patients to (which is a key part in getting onto the path of recovery) in Anchorage. These beds are usually full.

In short, the need in the community is high, the resources low, and the wreckage of the illness on patients (and their families, friends, community) are significant. So it is without reservation, I support SB 100, which addresses the call for added treatment options for Alaskan patients, and suggest some creative solutions, such as the Pilot Project mentioned in section 8. Please feel free to contact me with any questions.

Sincerely;



Marc D. Pellicciaro, M.D.
Medical Director, Psychiatric Emergency Room
Providence Alaska Medical Center
3200 Providence Drive
Anchorage, AK 99508
Phone: (907) 273-7851
Fax: (907) 261-2807
E-Mail: mpellicc@provak.org

STATEMENT OF SUPPORT
Establishing Education Savings Accounts for Foster Children in Alaska

Children in the foster care system face significant challenges when they age out of state care. Often, these children do not have a plan or the means to access job training or post-secondary education. With a program in place whereby concerned organizations and citizens can establish savings accounts in the names of foster children, these children will have opportunities beyond high school.

Alaska's foster children deserve a program that invests in their potential. Alaska should create a program designed to give children in foster care the opportunity to pursue education and job training past the age of 18.

Please add my name/organization to the list of supporters.

Name Dwenda Tegner
Organization Presby Terian Hospitality House
Title _____
Signature Dwenda M. Tegner Executive Director
Address 209 Fourth Mile Ave Fairbanks AK 99701
Phone 907-456-6405 Fax 907-456-6402
Email Dwenda.Tegner@aol.com Website WWW.PHAlaska.org

I/We would also be willing to:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Publish an article in our newsletter | <input checked="" type="checkbox"/> Mobilize our membership |
| <input checked="" type="checkbox"/> Participate in media events | <input checked="" type="checkbox"/> Help to build a coalition |
| <input checked="" type="checkbox"/> Contact legislators | |

Please return this form to:
Office of Senator Johnny Ellis
State Capitol, Rm. 9
Juneau, AK 99801

STATEMENT OF SUPPORT
Substance Abuse Treatment and Prevention

Addiction is taking a heavy toll on Alaska's people, culture and economy. Alaska ranks #1 in the nation in alcohol-related deaths and Alaskans with substance abuse problems, or co-occurring mental and substance abuse disorders, are more likely to be homeless, spend time in correctional facilities, and become involved in child protective service proceedings. The financial impact of addiction is staggering, costing the state an estimated \$738 million a year in health care costs, accidents, lost productivity, criminal justice and correctional facilities.

Something must change. We support updating Alaska statutes to promote expanding access to a wide spectrum of treatment, identifying those with co-occurring mental health and substance abuse disorders, and addressing substance abuse among youth and populations with higher incidences of addiction.

Please add my name/organization to the list of supporters.

Name Anne Dennis - Choi
Organization The Salvation Army Clitheroe Center
Title Executive Director
Signature Anne Dennis - Choi
Address 1709 Grappin Suite B Anchorage Alaska 99508
Phone (907) 770-8804 Fax (907) 770-8881
Email annechoi@salvationarmy.org Website http://www.salvationarmy.org/clitheroe
annechoi@salvationarmy.org

We would also be willing to:

- Publish an article in our newsletter
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- Mobilize our membership
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Please add my name/organization to the list of supporters.

Name Joseph P. Burns
Organization Nugen's Ranch
Title Night ATTENDANT.
Signature Joseph P. Burns
Address 4006 Steven Dr. #8 Wacilla, AK 99654
Phone 373-7542 Fax _____
Email joe burns@mtaonline.net Website _____

I/We would also be willing to:

Publish an article in our newsletter
 Participate in media events

Mobilize our membership
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