

Grant Approval Memo



Grantee: Southeast Alaska Independent Living, Inc.
Request Amount: \$116,200.00
Project Title: Evaluating Access to Environmental Modifications
Grant Term: 3/1/2026 to 6/30/2027
Fund Source: FY26 Housing & Home and Community Based Services: Beneficiary Housing Project & Related Services
Trust Staff: Kelda Barstad

Requested Motion:

The Program and Planning Committee recommends that the Board of Trustees approve a \$116,200 authority grant to Southeast Alaska Independent Living, Inc. for the Evaluating Access to Environmental Modifications grant. These funds will come from the Beneficiary Housing Project & Related Services line of the FY26 budget.

Staff Analysis:

- What does this project do?
Trust funding will support an environmental modifications pilot project implemented by Southeast Alaska Independent Living (SAIL) to improve the delivery of Medicaid environmental modification services.
- Who is receiving the funds?
SAIL is an independent living center based in Southeast Alaska. SAIL empowers seniors and people with disabilities by providing services and information to support people in making choices that will positively affect their independence and productivity in society. SAIL has assisted Trust beneficiaries and others with disabilities and chronic conditions to obtain grant and Medicaid waiver services, employment, transportation, recreation, and peer support. They have worked with home modification programs for decades and have detailed experience working with the Medicaid home modification program and have designed their own home assessment.
- Why is staff recommending this project?
Hundreds of Alaskans, including Trust beneficiaries are living longer and more safely at home as a direct result of making their homes more accessible through home modifications. The environmental modification service offered through the 1915c HCBS Medicaid waivers is in significant need of reform. The administrative burden of the program has led to an almost non-existent provider list of construction contractors willing to bill for waiver services, and because of the extra paperwork involved, care coordinators are more likely to go through grant programs for home modifications than process a request through the waiver services even when a client is eligible. For example, the Medicaid waiver that serves people with physical disabilities serves roughly 3,000 people, but fewer than 25 environmental modification requests were completed last fiscal year. Improvements to the Medicaid waiver environmental modifications service will help to create or maintain the accessibility of a person's home so that they remain independent and delay or avoid an assisted living or nursing home. This project pairs with work that is in progress with Senior and Disabilities Services (SDS). This project will test a new way of

Grant Approval Memo



administering the program to reduce bureaucracy and inform policy and regulation changes needed to have an effective Medicaid Home Modification program.

- Will this be a multi-year project?
This is a one-time funding request.

Grant Approval Memo



Trust Five Year Funding History

Fiscal Year	Project Title	Amount	Status	Final Expended
FY23	Outreach and Training Project (FY23)	\$17,250	Closed	\$6,601
FY23	Employment through Recreation for Transition-Age Youth (FY23)	\$50,000	Closed	\$50,000

Comp Plan Identification

Area of Focus	Objective	Comments
Area of Focus 7: Services in the Least Restrictive Environment	7.2 Increase access to effective and flexible, person-centered, long-term services and supports in urban and rural areas to avoid institutional placement where inappropriate	

Trust Focus Area Connection

Budget Area	Strategy	Comments
Housing & Home & Community Based Services	HHCBS - Beneficiaries access effective and flexible person-centered HCBS	

Project Description (from grant application)

Funding is requested to support the development of a project that will evaluate the ability of Trust beneficiaries to access environmental modifications (e-mods) using Medicaid waiver-funded Home and Community-Based Service (HCBS) agencies. The term e-mods refers to things like (but not limited to) ramps, lifts, and roll-in bathtubs/showers. Stages and processes that will be evaluated include getting certified as an agency-based e-mod provider, recruiting contractors, receiving bids on potential jobs for HCBS waiver recipients, putting together the documents necessary for amendments to recipients' support plans, interacting with contractors installing the e-mods, and submitting documentation necessary for and receiving payment. The overarching goal of this project is to make recommendations to the State of Alaska that will improve the process of accessing e-mods by using HCBS agencies, with the direct result that beneficiaries are able to remain safely in their homes longer. This project will directly address Focus Area 7 of Alaska's Comprehensive Integrated Mental Health Program Plan: Services in the Least Restrictive Environment. Objective 7.2 references the importance of environmental modifications in improving safety and health outcomes for vulnerable Alaskans living in their community. Despite successful advocacy to increase the amount of Medicaid funding available for e-mods, beneficiaries continue to struggle accessing this important service.

Problem description: E-mods provide critical environmental enhancements that address challenges with independence and community integration as well as allowing people to age in place. While e-mods are an approved Medicaid waiver service in Alaska, very few beneficiaries are successfully accessing this service. In the last decade, the number of environmental modifications funded by

Grant Approval Memo



Medicaid in all of Alaska has declined dramatically, from 135 in FY15 to just 18 in FY24. This is due to a number of factors, including

1. financial caps on the amount that Medicaid will pay for the service (per regulation) despite increasing costs
2. the amount of work required to put together a support plan amendment for an e-mod (historically done by care coordinators who do not feel qualified to oversee the implementation of an e-mod)
3. the significant hurdles faced by building contractors (enrolling as a Medicaid provider and becoming certified as an e-mod provider), and
4. shrinking number of HCBS agencies adding e-mod certification, resulting in a dearth of available service providers to do this important work.

Approach to solution: This project aims to evaluate the viability of using HCBS agencies as intermediaries to improve beneficiary access to e-mods. Project activities include: 1) Recruiting five providers in different regions of Alaska to participate. This will require providers to certify and enroll as Medicaid e-mod providers, create internal systems to facilitate managing environmental modification requests, and participate in the evaluation of this system. Note: Provider organizations will be compensated in two ways for the time, staffing and infrastructure that will be needed to participate in this project. Each organization will receive \$10,000 for signing a letter of commitment to participate through the duration of the project. In addition, each organization will receive a per e-mod payment based on the total cost of the e-mod. This incentivizes multiple projects and recognizes that more complex projects will have more reporting requirements to accurately evaluate. This payment will be \$1500 per \$10,000 of each project's total cost, which equates to \$6,000 if an e-mod costs the maximum amount allowed by Medicaid (\$40,000). The project will fund up to \$12,000 per participating organization. This payment is strictly for the additional responsibilities of participating in this pilot and will not duplicate responsibilities required by Medicaid. 2) Evaluating the stages and processes including a) becoming certified as an agency-based e-mod provider, b) recruiting building contractors, c) receiving bids on potential jobs for HCBS waiver recipients, d) compiling the documents necessary for amendments to recipients' support plans, e) interacting with building contractors while installing the e-mods, and f) submitting documentation necessary for and receiving payment from Medicaid. 3) Creating a technical assistance manual, based on input from providers as they are navigating the process, that will inform current and future OHCDS e-mod providers. And 4) developing a set of recommendations for the State of Alaska regarding enhancements to the e-mod service in order to improve access.

Anticipated timeline of the project:

Phase 1 – March-June 2026: Recruiting and onboarding participating providers: contacting, entering into an agreement with, and assisting each provider organization to complete the steps required to certify and enroll with Medicaid as an e-mod Organized Health Care Delivery System (OHCDS). Finalize evaluation design and develop evaluation/data collection processes.

Phase 2 – July 2026-April 2027: Execute environmental modifications: identify projects, develop scope of work, recruit building contractors, get approvals for Medicaid waiver amendments from State of Alaska, and complete the projects, collect data on projects for evaluation.

Phase 3 – May 2027-June 2027: Finalize project: conduct evaluation of process and outcomes with provider organizations, complete technical assistance manual, share both with Department of Health.

Target population and geographic area served: The target population are people with intellectual/developmental disabilities served by the Intellectual and Developmental Disabilities (IDD)

Grant Approval Memo



waiver or the Adults with Physical and Developmental Disabilities (APDD) waiver, and frail seniors who are on the Alaskans Living Independently (ALI) waiver who also experience dementia. Those individuals and the HCBS agencies that they will work with will ideally be spread across the state, to maximize the lessons learned from Alaska's vast geography.

Expected outcomes include:

1. Increasing the number of HCBS agencies providing waiver services that have experience as e-mod providers across the state;
2. Documentation of the roadblocks, problem areas, and successes experienced on the path to implementation of an e-mod;
3. Evaluating and making recommendations to SDS for program improvements; and, most importantly,
4. Increasing the number of beneficiaries who are able to implement necessary improvements to their homes and therefore avoid receiving services in an institution like a hospital, a nursing home, or an intermediate care facility for individuals with intellectual disabilities (ICF/IDD).

Upon proven success of the project, follow up activities by the Department of Health might include

1. Defining and formalizing the role of and payment rates for HCBS agencies in the Medicaid reimbursement system, and
2. Updating regulations, making changes to the Medicaid Management Information System (MMIS), and seeking federal approval for amendments to 1915(c) waivers.

Community Support: The support for this project is great, because currently so few beneficiaries on waivers are able to obtain e-mods, despite a widespread need. In discussions with DD service providers and care coordinators, as well as community partners such as the Statewide Independent Living Council and the Governor's Council, there is a lot of appreciation for AADD and SAIL's willingness to explore the barriers to this service more deeply.

Performance Measures

How much did you do?

- a. Number (#) of Trust beneficiaries requesting an environmental modification during the grant reporting period, broken down by primary Trust beneficiary category.
- b. Number (#) of environmental modifications completed during the grant report period. Provide a list of each environmental modification completed, including e-mod type, date of completion, and the community in which the receiving beneficiary resides.
- c. Number (#) of provider organizations recruited to enroll with Medicaid as an e-mod Organized Health Care Delivery System (OHCDS).

How well did you do it?

- a. Provide a narrative that describes the timeline, activities, successes, challenges, and any lessons learned during the project. Provide a brief description of the outreach and onboarding process used to engage HCBS agencies. Additionally, provide a brief

Grant Approval Memo



synopsis of the evaluation, findings, and recommendations for improving the e-mod process that were gleaned from the pilot project, as well as next steps.

- b. Number (#) and percentage (%) of participating provider organizations successfully enrolling with Medicaid as an e-mod OHCDS during the grant reporting period.
- c. Number (#) and percentage (%) of environmental modifications successfully completed during the grant reporting period.
- d. Number (#) and percentage (%) of participating provider organizations that successfully completed an environmental modification during the grant reporting period.
- e. Number (#) and percentage (%) of Trust beneficiaries who were satisfied with the e-mod process.
- f. Number (#) and percentage (%) of care coordinators of beneficiaries receiving an e-mod that were satisfied with the OHCDS/agency-based e-mod process.

Is anyone better off?

- a. Number (#) and percentage (%) of e-mod recipients who were able to remain in their home and/or increase their independence as a result of the e-mod.
- b. Provide a brief narrative that describes how the pilot project increased access to the availability of e-modifications in previously unserved or underserved areas of the state.
- c. Number (#) and percentage (%) of participating providers who intend to keep providing e-mods beyond the pilot project.

Sustainability (from grant application)

This project will continue after the Trust's funding has ended. This project is evaluating a Medicaid service that is currently approved and embedded in the HCBS waiver system, so a funding source is already available. This project will inform SDS as well as advocates regarding the possible need to increase the current administrative fee to more adequately compensate for the responsibilities of an HCBS agency performing these administrative duties as an OHCDS. The impact of the project will be sustained through the work of advocacy organizations using the information to work toward system changes as well as AADD supporting the participating providers to continue to provide this service as well as to mentor other possible OHCDS providers.

Who We Serve (from grant application)

The focus of this project is Trust beneficiaries with intellectual and developmental disabilities and/or Alzheimer's disease and related-dementia. As stated earlier, improving access to environmental modifications will allow Trust beneficiaries to live in the least restrictive environment, a key component of the Comp Plan. Here's the story of a beneficiary to provide an example: Judy adopted her son Eric as an infant. He has significant cerebral palsy and needs physical hands-on assistance with all activities of daily living. Judy and her husband, who passed away when Eric was six, built an accessible home to meet Eric's needs. Now that Eric is 18 years old, he has outgrown the bathroom/shower system in their home. In order for him to continue to live with his mother in his family home, they desperately need a bathroom modification but have been unable to access an e-mod

Grant Approval Memo



through Eric's Medicaid waiver. If the family can get the bathroom modified, Eric can continue to live with his family which is where he wants to live. There are many more similar stories across Alaska. The number of beneficiaries directly involved in this project is a small percentage of the beneficiaries who will benefit from making this service work better.

Estimated Numbers of Beneficiaries Served Experiencing (from grant application)

Developmental Disabilities:	1,000
Alzheimer's Disease & Related Dementias:	300
Secondary Beneficiaries (family members or caregivers providing support to primary beneficiaries):	2,000

Project Budget (from grant application)

Personnel Services Costs	\$21,000.00
Personnel Services Costs (Other Sources)	\$14,000.00
Personnel Services Narrative	<p>PROJECT MANAGEMENT/SYSTEM EXPERTISE: \$12,000 (Jetta Whittaker/Beechtree AK Consulting) This will include communications with potential participants as well as onboarding, outreach to contractors, administrative oversight including resolving issues and acting as a liaison between agencies, care coordinators and SDS, and assistance with developing recommendations for SDS.</p> <p>TECHNICAL ASSISTANCE MANUAL: \$15,000 (The Stellar Group) The Technical Assistance Manual will be developed for current and future OHCDS e-mods providers and will provide useful information about how to become an OHCDS and manage e-mods projects. The content of the Manual will be informed by evaluation findings on what led to successful project completion and testing of materials and resources used during the pilot project. Elements could include forms/templates, FAQ, and suggested trainings and resources, such as home mapping, universal design and ADA compliance for contractor.</p> <p>AGENCY LEAD /LIAISON WITH DD COMMUNITY: \$8,000 (Kim Champney/AADD) This will include working with all team members, recruiting and supporting agency participants, coordinating with project team members, and communicating with providers, care coordinators, recipients and other key stakeholders.</p>
Other Costs	\$95,200.00

Grant Approval Memo



Other Costs (Other Sources)	\$29,800.00
Other Costs Narrative	<p>PARTICIPATION FEE: \$50,000 (\$10,000 per participating organization) Compensate five provider organizations for full participation in evaluation of the agency-based e-mod evaluation.</p> <p>E-MOD SPECIFIC FUNDS: \$60,000 (\$1,500 per \$10,000 in the e-mod budget, capped at \$12,000 per participating organization) Incentivize diverse/complex projects to inform the evaluation.</p> <p>ADMINISTRATIVE and PROJECT SUPPORT: \$15,000 (SAIL/Other Sources) Provide administrative oversight and manage grants/contracts for the project, including ensuring the project is staying within guidelines set by the funders, completing grant reports in a timely manner, and providing technical support and subject matter expertise to the project team members.</p>

Other Funding Sources (from grant application)

Mat-Su Health Foundation	\$37,800.00
Southeast Alaska Independent Living, Inc. (SAIL)	\$6,000.00
Total Leveraged Funds	\$43,800.00