House Finance Committee Hearing FY15 Operating Budget March 4, 2014

- I represent Agenet, a statewide association which advocates on behalf of vulnerable older Alaskans and their family caregivers.
- Today, we join the Alaska Commission on Aging in asking you to invest in two longstanding senior grant programs: 1) the Family Caregiver Support Program and 2) the Nutrition, Transportation and Support grants which effectively prevent or delay costly institutional care.
- Family members, most often a daughter or a spouse, are the foundation of long-term care for older persons in Alaska and we want to help them last as long as they can in this unpaid but rewarding role.
- Caring for an older person with dementia or physical disabilities can be physically and emotionally demanding and caregivers often neglect their own help.
- The caregiver support program offers training on caregiving skills, services such as respite care, which gives the caregiver a much-needed break, and items which relieve the stress of the caregiver, such as a lift-chair or minor home modifications.
- We are requesting a \$325,000 increment in senior grant funds for the Family Caregiver Support Program, funds which go to non-profit agencies around the state; the waiting lists of family caregivers needing respite care and supplemental services is rapidly growing.
- Our other request is for the NTS grant program. The senior meal and transportation grants are well-known throughout Alaska, primarily through your local senior centers.
- The NTS programs around Alaska are serving an increasing number of seniors and striving to meet the demand for more services as the costs of fuel and food continue to rise.
- Research shows that states which invest more in home-delivered meal programs see greater reductions in nursing home placements.
- We are requesting a \$545,000 increment in NTS senior grants to be dispersed to local senior meal and ride programs around Alaska.

Senior grants have proven to help older Alaskans remain with dignity in their own homes and communities. They also support families to care for their own and save the state money by preventing elders from going into costly institutions.

Your support of maintaining these critical programs will promote family self-sufficiency as well as cost savings to the State of Alaska. Thank you for your consideration.

Presented by Marianne Mills Director of Southeast Senior Services Representing Agenet (907) 463-6154



Retired Public Employees of Alaska, APEA/AFT 3310 Arctic Blvd., Suite 200, Anchorage, Alaska 99503 Phone: (907) 274-1703 or (800) 478-9992, Fax: (907) 277-4588 Email: rpea@alaska.net Web site: www.rpea.apea-aft.org

March 4, 2014

I am here today to speak on behalf of Retired Public Employees of Alaska. We have 2,000 members and offices in Anchorage, Fairbanks and Juneau.

I am a PERS retiree. I worked 27 years for the State of Alaska and two years for the City and Borough of Juneau. My wife worked in the public sector for 26 years in the field of nursing. All those years we were promised that if we worked as a public servants we would have secure retirement checks and medical coverage that would allow us to live out our old age in security. In 2012 our life was turned upside down when my wife and I adopted our grandson, who is five years old.

I am 65 years old. I can't go back to work and even if I could, who would hire me? My wife and I depend on our retirement checks and health insurance.

Our health insurance is not free. We have deductibles for the three of us. Dental Vision and Audio costs us \$4,752 per year plus 20% co-pay. I pay Medicare \$2,098 per year. Medicare pays 80% of my medical costs and state insurance covers 20%. In a couple years my wife will also qualify for Medicare so we will add another \$2,098 per year to our healthcare costs.

Because my wife and I have PERS retirements our social security will be reduced, even though we paid in the same amount as others who worked in the private sector and are not penalized in this way.

I have watched over the years as the unfunded liability has grown and the can was kicked down the road. I have wondered what will happen to me and my family if the unfunded liability is not addressed by this legislature. I always understood that the State of Alaska would honor the promises made to my wife and me during our working years.

Please pass the \$3 billion and put it into the PERS/TRS trust funds. Please don't put the money into a separate fund where it can be taken back. That would not be addressing the problem, only playing games with the lives of retirees.

Thank you. your Miller

Gary Miller Vice President, Southeast Region

Protecting and Enriching Your Retirement Years



"We help adults with mental illness live their own best lives"

Quality Community Behavioral Health Services Since 1985

March 4, 2014

Reps. Austerman and Stoltze, Chair, and Committee Members House Finance Committee Alaska State Legislature

Thank you for this opportunity to address you about two very important issues to the health of Alaskans; the SHARP II Student Loan Repayment Program and Residential Substance Abuse Treatment.

SHARP II is a state-based student loan repayment and incentive program which you have proposed to cut by \$1.2 million in FY15, amounting to a 60% reduction in State GF. This would have a devastating effect on the ability of many non-profits statewide, as the SHARP II program has been a key tool in our ability to attract and maintain qualified staff to our organizations, and to maintain continuity of care for persons experiencing Serious Mental Illness, many of whom might otherwise require hospitalization or institutionalization if such services were not available.

As the director of Juneau Alliance for Mental Health, Inc.(JAMHI), the state-designated Community Behavioral Health Center in Juneau for the past 8 years, I have been challenged with developing and maintaining quality mental health services and improving access to care with flat funding for the past 6 years. To do that, we have constantly worked to streamline our procedures, consolidate staff functions, seek alternative funding, and prune every single twig of expense we can to continue to serve our community's behavioral health needs. We're down to the bone. We serve 475 mentally ill adults and provide housing to 52.

We are a lean, efficient, and effective organization, however, operating expenses continue to rise and we are challenged to keep pace with cost of living and salaries for our staff. The SHARP II Loan program has been a god-send to us in this regard. We have been able to attract and maintain 3 key staff due to the SHARP II program; a Psychiatric Advanced Nurse Practitioner, a Licensed Clinical Psychologist, and a Licensed Clinical Social Worker. We just had these people approved for the SHARP II program in recent months, and as a result, have commitments for 3 years of employment from them. To have the rug pulled out from under us would have a devastating effect on our Clinic. Other loan repayment programs are available in the primary care arena, and we would again be competing with them for similar staff.

I can't emphasize enough the importance of maintaining funding for the SHARP II program to ensure continuity of care for persons experiencing Serious Mental Illness. Please give full consideration to maintaining full funding for the SHARP II Loan Repayment program.

Secondly, the proposed budget cut of \$2,0430 to Residential Substance Abuse Treatment programs doesn't solve the problem of what to for or with people experiencing serious and late-stage alcohol or drug dependence. It shifts it to primary care, Courts, Corrections, Children's Services, and Public Safety, and Public Assistance. While it's true that Outpatient treatment programs show higher rates of success, the same is true for any disorder that is treated in the earlier stages. That is not always possible, and as such, we need access residential treatment programs to serve those who can't benefit from outpatient care due to the advanced nature of their illness. They need to be treated in a more structured, safe environment so they can develop the recovery skills necessary to "make it" in their communities with the aid of community supports. Please consider restoring full funding to Residential Substance Use Treatment programs. It would take years to rebuild what would be lost with such a massive cut.

Again, thank you for your time and consideration of these important issues.

Respectfully,

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Pamela L. Watts Executive Director Juneau Alliance for Mental Health, Inc.

3406 Glacier Hwy Juneau, Alaska 99801 Tel. (907) 463–3303 Fax (907) 463–6858 www.jamhi.org info@jamhi.org



Alaska Pharmacists Association

March 5, 2014

To Representative Members of House Finance Committee RE: HB 266 Operating Budget/Loans/Funds

The Alaska Pharmacists Association respectfully requests that \$1.2 million be reinstated into the SHARP II Loan Repayment and Direct Incentives Program to recruit and retain health care professionals in the State of Alaska. It would be unfortunate to "pull the plug" on the professionals that have in good faith committed to working in remote and hard to fill positions in the state, with the expectation of receiving 3 years of loan repayment and/ or direct incentive from state and employer matched contributions.

Currently, with no Schools of Dentistry, Medicine and Pharmacy in the state, it is important to continue to recruit graduates from professional health care professions, particularly into the rural and hard to fill areas of the State.

Pharmacists (7) benefiting from SHARP II are located in the following communities across the state:

Yukon Kuskokwim Health Corporation, Bethel - 3 Very Hard to Fill (VHTF) positions SE Alaska Regional Health Corporation, Juneau- 1 South Central Foundation, Anchorage- 1 Norton Sound Health Corporation, Nome- 1 Annette Island Service Unit, Metlakatla- 1 Very Hard to Fill position

Respectfully,

Nancy Davis Executive Director

E-mail: akphrmcy@alaska.net