



THE STATE  
of **ALASKA**  
GOVERNOR MIKE DUNLEAVY

## Department of Health

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February 13, 2025

The Honorable Andy Josephson  
Chair, House HSS Finance Subcommittee  
Alaska State Capitol, Room 505  
Juneau, AK 99801

Dear Representative Josephson:

The Department of Health received the following questions during the Health Care Services budget presentation to the House Health and Social Services Finance Subcommittee on February 4, 2025:

**What was the increase in assisted living home beds?**

From FY2023 to FY2024, the number of assisted living home beds increased by 54.

**What is the nature of the complaints for assisted living homes and health facilities?**

Complaints concerning assisted living homes include violations of resident rights, insufficient staffing, unexpected death, failure to seek medical services, failure to provide services in an individual's assisted living plan, insufficient staff training, insufficient meals, insufficient notification to the department, caregivers working without a background check, and allegations of abuse, neglect, and exploitation of a vulnerable adult.

Attached is a document that provides information about health facility complaints.

**Where are most assisted living homes located?**

Licensed assisted living homes are in 30 communities across the state including Anchorage, Palmer, Wasilla, Utqiagvik, Eagle River, Chugiak, Homer, Kotzebue, Fairbanks, Soldotna, Kenai, Seward, Houston, Juneau, Anchor Point, North Pole, Sterling, Kodiak, Ketchikan, Haines, Ninilchik, Unalakleet, Valdez, Sitka, Talkeetna, Petersburg, Tanana, Bethel, and Galena.

**How many of these inspections are recertifications versus new licensure inspections?**

During SFY2024, the Division of Health Care Services conducted 385 residential licensing inspections, 330 of which were for the purpose of license renewal and 55 were for initial licensure of new residential homes.

**How many people were served by Residential Licensing in Health Care Services?**

The Division of Health Care Services Residential Licensing Unit licenses a home for a specified number of beds. Residential Licensing does not collect or track data concerning admissions and discharges, vacancies, or other residential home census-related data.

**How much do we pay out to recover those funds?**

In FY2024, the Alaska Medicaid program paid \$27 million in State funds to operate all recovery efforts, resulting in \$356 million in gross State fund cost savings, or a net State fund cost savings of \$329 million. This includes all forms of reclamation and recovery, including Tribal reclaiming, transportation, third-party liability, pharmacy, and Medicare Part A and B premium payments.

**Table 1. Department of Health Medicaid Reclamation and Recovery cost savings and operational program costs, FY2024 (in whole dollars).**

	Gross Cost Savings	Operational Costs	Net Savings
GF	\$ 356,200,988	\$ 27,009,162	\$329,191,826
Total	\$ 864,243,847	\$ 54,096,646	\$810,147,201

If you have additional questions, please contact me at (907) 465-1630.

Sincerely,



Pam Halloran  
Assistant Commissioner

Enclosure

cc: Valerie Rose, Fiscal Analyst, Legislative Finance  
Jordan Shilling, Director, Governor's Legislative Office  
Tim Hess, Office of Management and Budget  
Heidi Hedberg, Commissioner  
Robert Lawrence, Chief Medical Officer  
Emily Ricci, Deputy Commissioner  
Lynne Keilman-Cruz, Acting Director of Division of Health Care Services  
Raquel Solomon-Gross, Deputy Director of Finance and Management Services  
Dustin Scown, Budget Manager  
Courtney Enright, Legislative Liaison

# SFY2024 COMPLAINT & INTAKE ANALYSIS

## HEALTH FACILITIES LICENSING & CERTIFICATION

### TOTAL INTAKES VERSUS INVESTIGATED

SFY24 TOTAL INTAKES	SFY24 INVESTIGATABLE INTAKES	NON-INVESTIGATABLE INTAKES / DEFERRED
1,274	726	548

Intakes in the difference column were deferred to correct department, agency, or did not meet the criteria of an investigable complaint.

### SFY 24 INVESTIGATABLE INTAKES BREAKDOWN

**Complaint:** Any source of information that suggests a facility has potentially violated regulations regarding the patient's care or for a non-care issue. Sources include, but are not limited to, private citizens, residents, patients, family members, and media.

**Facility Reported Incident (FRI):** Facility self-report of an unexpected or unintentional incident that may result in injury or illness to patient. This also includes the reporting of reasonable suspicion of crimes against a individual receiving care from the facility within prescribed timeframes to the appropriate entities, consistent with Section 1150B of the Social Security Act; and all alleged violations involving abuse, neglect, exploitation or mistreatment, including injuries of unknown source and misappropriation of resident property.

FACILITY TYPE	NUMBER OF COMPLAINTS	NUMBER OF FACILITY REPORTED INCIDENTS
Hospitals	52	8
Hospital (EMTALA*-Related)	4	0
Psychiatric Hospitals	4	152
Nursing Homes	16	482
Hospice Agency	1	1
Home Health Agency	3	0
Long-Term Acute Care Facility	1	1
Dialysis Center	1	0
<b>TOTAL</b>	<b>82</b>	<b>644</b>
<b>COMBINED TOTAL</b>	<b>726</b>	

\***EMTALA** - The Emergency Medical Treatment and Labor Act (EMTALA) of 1986 is a federal law that requires hospitals to provide emergency care to anyone who needs it, regardless of their ability to pay or insurance status.

## SFY 24 COMPLAINT TYPE ANALYSIS

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This is a general analysis of the most frequent type of complaints overall. A complaint can encompass multiple areas listed below. Majority of reports pertain to hospitals, psychiatric facilities, and nursing homes.

GENERAL COMPLAINT TYPE	NUMBER EVENTS REPORTED
Lack of Service or Item	42
Unsafe Discharge	136
Neglect Allegations	357
Patient Rights (General)	174
Poor or Unsafe Environment	26
Abuse Allegations (General)	582
Financial Exploitation	41
Patient or Resident Fall	536
Injury Occurrence	404
Quality of Care (General)	91
Protected Health Information Issue	10
Communication Issue	8
Emergency Room Care	33
General Fraud	11