Fiscal Note State of Alaska Bill Version: HB 151 2025 Legislative Session Fiscal Note Number: () Publish Date: Identifier: HB151-DOH-PAFS-3-28-25 Department: Department of Health Title: MEDICAL ASSISTANCE: CHILDREN UNDER AGE Appropriation: Public Assistance Public Assistance Field Services Allocation: Sponsor: **GALVIN** OMB Component Number: 236 Requester: (H) HSS **Expenditures/Revenues** Note: Amounts do not include inflation unless otherwise noted below. (Thousands of Dollars) Included in FY2026 Governor's FY2026 Appropriation **Out-Year Cost Estimates** Requested Request **OPERATING EXPENDITURES** FY 2028 FY 2029 FY 2026 FY 2026 **FY 2027 FY 2030** FY 2031 Personal Services Travel 144.0 Services Commodities Capital Outlay **Grants & Benefits** Miscellaneous 144.0 **Total Operating** 0.0 0.0 0.0 0.0 0.0 0.0 **Fund Source (Operating Only)** 1002 Fed Rcpts (Fed) 72.0 1003 GF/Match (UGF) 72.0 0.0 144.0 0.0 0.0 0.0 0.0 0.0 **Total Positions** Full-time Part-time Temporary Change in Revenues None 0.0 0.0 0.0 0.0 0.0 0.0 0.0 Total Estimated SUPPLEMENTAL (FY2025) cost: 0.0 (separate supplemental appropriation required) Estimated CAPITAL (FY2026) cost: 0.0 (separate capital appropriation required) Does the bill create or modify a new fund or account? (Supplemental/Capital/New Fund - discuss reasons and fund source(s) in analysis section) **ASSOCIATED REGULATIONS** Does the bill direct, or will the bill result in, regulation changes adopted by your agency? Yes If yes, by what date are the regulations to be adopted, amended or repealed? 07/01/26 Why this fiscal note differs from previous version/comments: Not applicable, initial version.

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Division:	Public Assistance	Date:	03/27/2025
Approved By:	Pam Halloran, Assistant Commissioner	Date:	03/28/25
Agency:	Department of Health	_	

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FISCAL NOTE ANALYSIS

STATE OF ALASKA 2025 LEGISLATIVE SESSION

BILL NO. HB151

Analysis

HB151 would establish continuous Medicaid eligibility for children under six years of age, permitting uninterrupted enrollment through the child's sixth birthday regardless of changes in income or household composition, except in limited circumstances.

Fiscal Impact:

Although this change is expected to increase total Medicaid expenditures—by extending coverage for children who might otherwise lose eligibility during the year—the division does not anticipate a material increase in overall enrollment, as the majority of children eligible under this provision are currently enrolled and actively receiving services. While the redetermination workload for this population may be reduced, the division does not project a corresponding reduction in the overall administrative burden, as most Medicaid households include additional members who will continue to require annual eligibility renewals.

Implementation Considerations:

Implementation of this policy will require federal approval through an 1115 Demonstration Waiver. The waiver process will involve substantial staff resources dedicated to policy development, fiscal analysis, stakeholder engagement, regulatory revision, and coordination with the Centers for Medicare and Medicaid Services (CMS). The estimated timeline for full implementation—including waiver development, federal review and approval, adoption of necessary regulatory changes, and system readiness—is approximately 12 months.

Estimated One-Time System Development Cost:

Targeted modifications to the Medicaid eligibility system will be necessary to operationalize this policy change. Required updates include revisions to eligibility logic, tracking mechanisms, and reporting functionality. The division estimates the system development effort will require approximately 720 hours at a blended hourly rate of \$200, resulting in a total one-time cost of \$144,000 with a 50 percent federal reimbursement.

System Development Activity	Estimated Hours	Estimated Cost (@ \$200/hr)
Discovery and Requirements Gathering	80	\$16,000
Development and Programming	480	\$96,000
Testing and Validation	160	\$32,000
Total	720 hours	\$144,000

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