

Amendment G.1 (Rep. Saddler)

- G.1 would sunset the board on June 30, 2032. It would give the legislature the chance to review the board's work and decide whether that work needs to continue. It would also remove the language in the bill that specifies the amount of department funding that must go toward compensation and benefits for agencies with hardship exemptions. An agency with a hardship exemption may still be unable to meet the requirements, so the requirements could ultimately close businesses and reduce the availability of home care.

Amendment G.2 (Rep. Saddler)

- G.2 would increase the total number of board members by 3 (from 10 to 13, with 11 voting members). The membership would be:
 - Commissioner of Health or his designee (voting member)
 - Commissioner of Labor and Workforce Development or his designee (voting member)
 - One each representative of:
 - covered providers of any size (voting member)
 - non-covered providers of any size (voting member)
 - covered providers (*i.e.*, Medicaid-funded providers) that provide at least 700,000 units of personal care services per year (voting member)
 - direct care workers (voting member)
 - employees of not-covered providers (voting member)
 - enrollees receiving covered services (voting member)
 - office responsible for rate review (voting member)
 - unpaid providers, *i.e.* family or friends providing home care unpaid (voting member)
 - public (voting member)
 - Alaska Commission on Aging (non-voting member)
 - Governor's Council on Disabilities and Special Education (non-voting member)
- The change in membership would better reflect the entire market of home care providers, rather than just the providers who bill to Medicaid. It would also make the total voting membership an odd number, to prevent ties.
- G.2 would also split the authority to appoint members between the two commissioners.

Amendment G.3 (Rep. Saddler)

- G.3 would limit the board's meetings to no more than four per year, would require a majority of the total voting membership to adopt a recommendation, and would not allow members to receive per diem or reimbursement of travel expenses.

- Because the board can meet remotely, there shouldn't be a need for travel or per diem.
- Given the recommendations the board could be making, and the diversity of membership, a majority of the full membership should be necessary to approve recommendations.
- This would not prevent the board receiving consultations and gathering information between meetings, but four meetings should be sufficient for votes and actions.

Amendment G.4 (Rep. Saddler)

- G.4 would remove redundancy in the board's powers and duties and avoid the potential for the board to erect barriers to entry into the home care field by increasing training requirements. It would also remove vague, undefined terminology, along with language that strongly implies that caring for a family member is somehow undesirable.

Amendment G.5 (Rep. Saddler)

- G.5 would remove unclear language in the requirements of the biennial report, along with the language that implies caring for family members is undesirable.
- G.5 would also remove three requirements for DOH:
 - notifying the board if they set rates that "differ significantly" from board recommendations – "differ significantly" is unclear, and the board will be able to find or request those rates without direct notification.
 - annually publishing a report on average wages by agency – this will be very expensive, as noted in the fiscal note.
 - publishing a preliminary report before the board begins its investigative work – it is the work of the board to investigate, so having the department pre-prepare a report seems onerous and duplicative.

Amendment G.6 (Rep. Saddler)

- G.6 would remove the requirements for how agencies spend department funding if they receive a hardship exemption (same as G.1 without the sunset date).

Amendment G.7 (Rep. Saddler)

- G.7 would delay the start date of the board to give the commissioners time to find and appoint members.
- G.7 would also remove the requirement for the department to conduct an initial investigation and publish the results.

Amendment G.13 (Rep. Saddler)

- G.13 would delay the date that agencies would be required to comply with updated rates to one year after federal approval (instead of the day after federal approval).
 - Changing a business plan unexpectedly in a day could close businesses, rather than increase the availability.

Amendment G.14 (Rep. Coulombe)

1. This amendment deletes the qualifying language and parameters surrounding the labor representatives to sit on the board. The board seats are retained in the same number.
2. This amendment also adds an additional member who is an enrollee or a representative of enrollees receiving covered services.

Amendment G.9 (Rep. Fields)

Sec. 44.29.915. Meetings.	A meeting may be held in person or by teleconference or other electronic means. At each meeting, the board shall provide time for public testimony.	Reduce costs associated with meetings and travel
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Amendment G.10 (Rep. Fields)

Sec. 44.29.930. Powers and duties of the board (b) (c)	<p>(b) A state agency that receives a reasonable request for data, information or testimony from the board shall comply with the request as soon as is reasonably practicable, and, when the board requests direct testimony for a board meeting, the head of the agency or the designee of the head of the agency shall appear at the meeting and provide testimony.</p> <p>(c) The department shall ensure the board has access to current and</p>	Reduce costs associated with data collection and reporting
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	<p>proposed payment rates, payment adequacy reporting information for covered services that is provided by the state to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services, as required by federal law, and access to metrics created by the state that contain information regarding wait times for covered services and the percentage of authorized hours for covered services.</p>	
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Amendment G.11 (Rep. Fields)

Sec. 44.29.940. Publication of Reports.	<p>On July 1 of each year, or within 30 days after receiving the biennial report from the board, the department shall publish on the department's publicly available Internet website an annual report containing the weighted average of and median hourly wages, by agency, for workers providing covered services.</p>	Reduce costs associated with data collection and reporting
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