FISCAL NOTE

| STATE OF ALASKA | | | | | Fiscal Note Number: | | | | |
|--------------------------|--|--|----------------------------|--|----------------------------|--|---------------|---------|--|
| 2011 LEGISLATIVE SESSION | | | | | Bill Version: | | SB008 | | |
| | | | | | () Publish Date | : | | | |
| Identifier (file n | ame): SB008-DHSS-[| DPH-CDPHP | | | Dept. Affected: | Health : | and Social Se | arvices | |
| Title | | | luestionnaires and Surveys | | | Health and Social Services Public Health | | | |
| | | | • | | Appropriation: Allocation: | Chronic Disea | | n and | |
| Sponsor | | Sen. Bettye Dav | is | | - | Health Promo | | | |
| Requester | | Senate EDC Comm | ittee | | OMB Component Number 2818 | | | | |
| · - | | | /The | nousands of Dollars) | | | | | |
| | s do not include inflation | an unlose etherwise n | otod bolow | (THC | Jusanus on Don | ais) | | | |
| Note. Amounts | do not include initatio | | oted below. | | | | | | |
| | | Appropriation | | | l= f = | | | | |
| ODEDATING | EXPENDITURES | Required FY 2012 | FY 2012 | FY 2013 | Inform FY 2014 | FY 2015 | FY 2016 | FY 2017 | |
| Personal Servi | | F1 2012 | F1 2012 | F1 2013 | F1 2014 | F1 2015 | F1 2010 | F1 2017 | |
| Travel | Ces | | | | | | | | |
| Services | | | | | | | | | |
| Commodities | | | | | | | | | |
| Capital Outlay | | | | | | | | | |
| Grants | | | | | | | | | |
| Miscellaneous | | | | | | | | | |
| | AL OPERATING | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| CAPITAL EXP | ENDITUDES | | | | 1 | | | | |
| | LINDITORES | | | | <u> </u> | | | | |
| CHANGE IN REVENUES | | | | | | | | | |
| FUND SOURC | E | | | (Th | ousands of Dolla | ars) | | | |
| 1002 Federal F | Receipts | | | · | | | | | |
| 1003 GF Match | h | | | | | | | | |
| 1004 GF | | | | | | | | | |
| 1005 GF/Program Receipts | | | | | | | | | |
| 1037 GF/Mental Health | | | | | | | | | |
| Other (please i | | | | | | | | | |
| | TOTAL | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| Estimate of ar | ny current year (FY20 | 011) cost: | | | _ | | | | |
| POSITIONS | | | | | | | | | |
| Full-time | | | | | | | | | |
| Part-time | | | | | | | | | |
| Temporary | | | | | | | | | |
| | | | | | | | | | |
| Why this fisca | al note differs from p | revious version (if i | nitial version | . please no | te as such) | | | | |
| | and to the difference of the d | ioriodo roioion (ii ii | | i, piodoo iio | 10 40 04011, | | | | |
| Not applica | ble. Initial version. | | | | | | | | |
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| Prepared by: | Ward R Hurlburt M | Word P. Hurlburt, MD. MDH., Chief Medical Officer/Director | | | | | | | |
| Division | Ward B. Hurlburt, MD, MPH - Chief Medical Officer/Director Public Health | | | Phone <u>269-6680</u> Date/Time <u>2/2/11 12:00 AM</u> | | | | | |
| | | | | | | • | | / AIVI | |
| Approved by: | Alison Elgee, Assist | | | | | Date | 2/11/2011 | | |
| | Finance & Managen | nent Services | | | | - | | | |

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FISCAL NOTE

STATE OF ALASKA 2011 LEGISLATIVE SESSION

BILL NO. SB008

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| This legislation removes the requirement that a student's parent or legal guardian must provide written permission before a student can participate in the Youth Risk Behavior Survey. It requires the school district to provide notice of the survey and give the parent or legal guardian the opportunity to deny permission. | | | | | | |
|--|--|--|--|--|--|--|
| There is no fiscal impact on the Department of Health and Social Services. | | | | | | |
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