Fiscal Note

State of Alaska Bill Version: HB 127 2019 Legislative Session Fiscal Note Number: () Publish Date: Identifier: HB127-DHSS-HCSA-4-29-2019 Department: Department of Health and Social Services Title: DENTAL HYGIENIST ADVANCED PRAC PERMIT Appropriation: Health Care Services

Allocation:

Medical Assistance Administration

Requester: (H) LC OMB Component Number: 242

SPOHNHOLZ

Sponsor:

| Expenditures/Revenues Note: Amounts do not include in | oflation unloce o | othorwica notad h | olow | | | (Thousand | s of Dollars) |
|--|-------------------|-------------------|---------|---------|-----------------|-------------|---------------|
| Note. Amounts do not include il | lilation unless t | Included in | elow. | | | (Triousariu | s of Dollars) |
| | FY2020 | Governor's | | | | | |
| | Appropriation | FY2020 | | Out-Ye | ar Cost Estimat | tes | |
| | Requested | Request | | | | | |
| OPERATING EXPENDITURES | | FY 2020 | FY 2021 | FY 2022 | FY 2023 | FY 2024 | FY 2025 |
| Personal Services | | | | | | | |
| Travel | | | | | | | |
| Services | | | | | | | |
| Commodities | | | | | | | |
| Capital Outlay | | | | | | | |
| Grants & Benefits | | | | | | | |
| Miscellaneous | | | | | | | |
| Total Operating | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| | | | | | | | |
| Fund Source (Operating Only) | | | | | | | |
| None | | | | | | | |
| Total | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

| Temporary | |
|-----------|--|
| | |

Full-time Part-time

| Change in Revenues | | | | | | | |
|--------------------|-----|-----|-----|-----|-----|-----|-----|
| None | | | | | | | |
| Total | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

Estimated SUPPLEMENTAL (FY2019) cost: (separate supplemental appropriation required) 0.0

Estimated CAPITAL (FY2020) cost: 0.0 (separate capital appropriation required)

Does the bill create or modify a new fund or account? No

(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 Yes If yes, by what date are the regulations to be adopted, amended or repealed? 07/01/20

Why this fiscal note differs from previous version/comments:

Not applicable, initial version based on the Governor's February 13, 2019 FY2020 amended budget request.

| Prepared By: | Renee Gayhart, Acting Director | Phone: | (907)465-1185 |
|--------------|---|--------|---------------------|
| Division: | Health Care Services | Date: | 04/29/2019 03:30 PM |
| Approved By: | Sana P. Efird, Administrative Services Director | Date: | 04/29/19 |

Agency: Office of Management and Budget

FISCAL NOTE ANALYSIS

STATE OF ALASKA 2019 LEGISLATIVE SESSION

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| This bill establishes an advance practice permit for dental hygienist, prohibits unfair discriminiation under group health insurance, and relates to medical assistance for dental hygiene services. | | | |
|--|--|--|--|
| Implementation of this bill is within normal scope of work, therefore, the department submits a zero fiscal note. | | | |
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