Numbers and Language Differences Agencies: DOH

**Agency: Department of Health** 

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Behavioral Health													
Behavioral Health Treatment and Recovery Grar	ıts												
Increased Statutory Distribution of Restorative	24Gov	Inc	416.4	0.0	0.0	0.0	0.0	0.0	416.4	0.0	0	0	0
Justice Account Funding													
Align authority with the statutory distribution of the													
Justice Account is created as a separate account fund to the restorative justice account each fisca													
during the previous fiscal year to individuals who													
had been eligible. The amount for dividends tha					(4) 4.0)								
sentenced or incarcerated under AS 43.23.005(					1.00. This								
funding is distributed in the budget in accordance	e with AS 43	.23.048(b)											
1171 Rest Just (Other) 416.4													
* Allocation Difference *			416.4	0.0	0.0	0.0	0.0	0.0	416.4	0.0	0	0	0
Debassional Health Administration													
Behavioral Health Administration Second Year of Health Care Services by	24Gov	Inc	12.0	20.1	0.0	0.0	-8.1	0.0	0.0	0.0	Ο	0	0
Telehealth (Ch38 SLA2022 (HB265))	24G0V	THC	12.0	20.1	0.0	0.0	-0.1	0.0	0.0	0.0	U	U	U
House Bill 265 requires the department to pay for	or all services	provided	through telehealt	h in the same ma	nner as								
if the services had been provided in person, exc													
In order to implement this bill, the Division of Be based in Anchorage, to review, assess, and mo health telehealth services, including collecting s being implemented via telehealth; to assess the telehealth modalities; and to pull, review, and as reporting, and audits.	nitor the clinic ubstantial me clinical outco	cal appropedical evidences asso	riateness of the e ence, as needed, ciated with telehe	expanded behavion to disallow a ser ealth services, inc	oral vice from cluding								
Through the fiscal note for HB265, personal ser year, rather than the 10 months it was budgeted computer and other setup costs.  1002 Fed Rcpts (Fed) 6.0 1003 GF/Match (UGF) 6.0  MH Trust: Family Services Training Center - 1115 Early Childhood Services Implementation (FY24-FY27)						200.0	0.0	0.0	0.0	0.0	0	0	0

This project leverages state and federal funding to support continued development of the new Family Services Training Center (FSTC) in partnership with the University of Alaska Anchorage Center for Human Development. The project is in partnership with the Alaska Department of Health, Division of Behavioral Health (DOH/DBH) and offers training opportunities for behavioral health professionals that work with families across Alaska. The FSTC offers online training that professionals can access in a variety of formats including face-to-face and through videoconference. FSTC also offers live technical assistance support calls and webinars to help professionals apply what was learned in training. Behavioral health professionals who receive high quality training provide higher quality services and the families they work with have a better chance of coping with adversity, developing resilience, and improving their overall well-being.

This project aligns with the 1115 waiver efforts to divert high-risk families and youth from intensive treatment which

Numbers and Language Differences Agencies: DOH

	Column	Trans Type Ex	Total xpenditure	Personal Services	Travel	Services Co	ommodities	Capital Outlay	Grants	Misc	PFT	PPT	TM
navioral Health (continued)													_
Behavioral Health Administration (continued)													
MH Trust: Family Services Training Center -													
1115 Early Childhood Services Implementation													
(FY24-FY27) (continued)													
is costly and traumatic. Supporting an array of allows DBH to promote early intervention and													
access for families. Mental Health Trust Autho													
of the FSTC portfolio of practitioners to include	,		,										
particularly those at high risk of or currently in													
to support implementation of findings from one 1092 MHTAAR (Other) 200.0	going planning	with a steerin	ig committee to	provide oversigh	t.								
Remove Out-Year General Funds for MH Trust:	24Gov	Dec	-50.0	0.0	0.0	-50.0	0.0	0.0	0.0	0.0	0	0	
Peer Support Certification (FY21-FY25)													
Cease contribution of General Funds - Mental	Health (fund co	ode 1037) for	ongoing ment	al health initiative.									
This project was developed from a Mental Head development and standardization of peer support continue work initiated in previous years and foody and standardized training offerings for pedevelopment of this certification and training hand key stakeholders.  Peer support is a foundational recovery-orient Focus Area and a critical service highlighted in 1037 GF/MH (UGF) -50.0	port as a profes follow a multi-ye- eer support wor las been collaborated strategy with n the 1115 Med	sion and behear plan to full there statewich crative and properties the Benefilicaid Behaviorative and properties the Benefilicaid Behaviorative and properties the Benefilicaid Behaviorative and behaviorative a	avioral health sally develop and de in the behave roductive betword Employment Health Wa	service. FY2022 ft implement a certi- rioral health field. Teen the State, the ment and Engagen iver.	unds ification The Trust,	62.5	0.0	0.0	0.0	0.0	0	0	
Remove Out-Year General Funds for MH Trust: Zero Suicide Initiative (FY22-FY25)	24Gov	Dec	-62.5	0.0	0.0	-62.5	0.0	0.0	0.0	0.0	0	0	
Cease contribution of General Funds - Mental recommendation of the Mental Health Trust A		ode 1037) for	ongoing ment	al health initiative	per the								
This initiative partners with the Division of Beh practice model called Zero Suicide and will we tenets of this model. The core elements includ improving. The position will utilize this framewhigher level of treatment for individuals who ar 1037 GF/MH (UGF) -62.5	ork with commu de leading, train ork to bring ind	nity-based ag ing, identifyin	gencies and co	ealitions to roll out reating, transitioning	the ng, and								
			99.5	20.1	0.0	87.5	-8.1	0.0	0.0	0.0	0	0	_
Allocation Difference *					0.0	0, 10	0.1	0.0	0.0	0.0	Ü	Ü	
Allocation Difference *													
laska Mental Health Board and Advisory Boar Reverse MH Trust: Cont ABADA/AMHB Joint	rd on Alcoho 24Gov	ol and Drug		-377.2	-50.7	-49.5	-14.1	0.0	0.0	0.0	0	0	
laska Mental Health Board and Advisory Boar Reverse MH Trust: Cont ABADA/AMHB Joint Staffing (FY18-28)	24Gov	OTI	<b>Abuse</b> -491.5			-49.5	-14.1	0.0	0.0	0.0	0	0	
Alaska Mental Health Board and Advisory Boar Reverse MH Trust: Cont ABADA/AMHB Joint Staffing (FY18-28) To provide a supplement to the basic operatio	24Gov ons of the merge	OTI ed staff of Ad	<b>Abuse</b> -491.5 visory Board o	n Alcoholism and	Drug	-49.5	-14.1	0.0	0.0	0.0	0	0	
laska Mental Health Board and Advisory Boar Reverse MH Trust: Cont ABADA/AMHB Joint Staffing (FY18-28)	24Gov ons of the merge pard (AMHB) an	OTI ed staff of Ad	<b>Abuse</b> -491.5 visory Board o	n Alcoholism and	Drug	-49.5	-14.1	0.0	0.0	0.0	0	0	

Numbers and Language Differences Agencies: DOH

	Column	Trans	Total	Personal	Traval	Comuiana	Commodition	Capital	Casata	Wiss	DET	DDT	TMD
Deberrieral Heelth (continued)	<u>Column</u>	туре	_Expenditure	Services	<u>Travel</u>	Services	<u>Commodities</u>	Outlay	Grants	<u>Misc</u>	<u>PFT</u>	<u>PPT</u>	TMP
Behavioral Health (continued)	d on Alooba	l and D	www.Abwaa./aa	ntinal\									
Alaska Mental Health Board and Advisory Boar MH Trust: Cont ABADA/AMHB Joint Staffing	a on Alcond 24Gov	ו <b>ana ש</b> IncM	rug Abuse (co	400.0	50.7	29.5	11.3	0.0	0.0	0.0	0	0	0
(FY18-FY28)	2400V	THEFT	491.5	400.0	30.7	29.5	11.5	0.0	0.0	0.0	U	U	U
To provide a supplement to the basic operation	s of the merge	ed staff of	Advisory Board o	n Alcoholism and	Drug								
Abuse (ABADA) and Alaska Mental Health Boa													
advocacy performance measures negotiated w	ith the Trust.	•		•	o.								
<b>1092 MHTAAR (Other)</b> 491.5													
Replace Mental Health Trust Authority	24Gov	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Authorized Receipts for Zero-Based Budgeting		0	A 11	to the Control Health									
The nature of initiatives funded through Mental be brought to zero for appropriation through the		,		ots requires the ba	alance to								
1037 GF/MH (UGF) 0.4	e legislative pro	Juess eat	on nocal year.										
1092 MHTAAR (Other) -0.4													
* Allocation Difference *			0.0	22.8	0.0	-20.0	-2.8	0.0	0.0	0.0	0	0	0
* * Appropriation Difference * *			515.9	42.9	0.0	67.5	-10.9	0.0	416.4	0.0	0	0	0
Health Care Services													
Medical Assistance Administration													
Second Year of Health Care Services by	24Gov	Inc	12.0	20.1	0.0	0.0	-8.1	0.0	0.0	0.0	0	0	0
Telehealth (Ch38 SLA2022 (HB265))													
House Bill 265 requires the department to pay				h in the same ma	nner as								
if the services had been provided in person, ex	cept as provide	ed in AS	47.07.069(b).										
In order to implement this bill, the Division of H Specialist 3, range 20, located in Anchorage, to credentials being applied to the provider enrolli additional post-payment review of telehealth clthe delivery of telehealth services, including es Utilization Review unit and working with curren group comparison algorithms.	o facilitate an a ment files at ne aims to ensure tablishing new t data-analytics	nticipated w enrolln compliar review st s vendors	d increase in the v nent and validation nce with state and trategies within the to develop complete	rolume of telehea n. The position co federal rules sur e Surveillance an liance strategies	th onducts counding d and peer								
Personal services is increased to support the p budgeted for in FY2023. One-time costs are re 1002 Fed Rcpts (Fed) 6.0 1003 GF/Match (UGF) 6.0			iter and other setu	up costs.									
* Allocation Difference *			12.0	20.1	0.0	0.0	-8.1	0.0	0.0	0.0	0	0	0
* * Appropriation Difference * *			12.0	20.1	0.0	0.0	-8.1	0.0	0.0	0.0	0	0	0
Public Assistance Alaska Temporary Assistance Program Convert Maintenance of Effort for Alaska Temporary Assistance for Needy Families to Language The division needs flexibility over multiple year.	24Gov s to be more e	Dec	-210.4 and effective in mee	0.0 eting the Tempora	0.0	0.0	0.0	0.0	-210.4	0.0	0	0	0

Numbers and Language Differences Agencies: DOH

**Agency: Department of Health** 

		C-1	Trans	Total	Personal	T1	Camadaaa	C	Capital	Cuanta	W:	DET	DDT	TMD
		<u>Column</u>	Туре	Expenditure	Services	Travel	Services	Commodities	Outlay _	Grants	<u>Misc</u>	<u> PFT</u> _	<u> </u>	<u>TMP</u>
	lic Assistance (continued)													
A	llaska Temporary Assistance Program (cont	inued)												
	Convert Maintenance of Effort for Alaska													
	Temporary Assistance for Needy Families to													
	Language (continued)													
	Assistance for Needy Families (TANF) maint													
	State meets certain participation thresholds													
	are met, the maintenance of effort requirement	ents are reduced	d, and the d	livision can poter	itially lapse gene	eral funds.								
	1003 GF/Match (UGF) -210.4	240 011	M 7 + ÷ V.o	210 4	0.0	0.0	0.0	0.0	0.0	210 4	0.0	0	0	0
L	Maintenance of Effort for the Alaska Temporary	24G0V	MultiYr	210.4	0.0	0.0	0.0	0.0	0.0	210.4	0.0	U	U	U
	Assistance for Needy Families (FY24-FY25)  The division needs flexibility across fiscal ye	ara ta ha mara a	officient one	d offootivo in mod	ting the Temper	·on/								
	Assistance for Needy Families (TANF) main													
	State meets certain participation thresholds													
	are met, the maintenance of effort requirement				•									
	are met, the maintenance of enort requireme	sins are reduced	a, and the c	iivision can potei	itially lapse gene	rai iulius.								
	Sec XX. DEPARTMENT OF HEALTH. (b) The	he amount nece	esary not t	n exceed \$210.4	.00 to ensure th	e Division								
	of Public Assistance meets the maintenance													
	Needy Families program is appropriated from	•		•	•									
	assistance, Alaska temporary assistance pro													
	2024 and June 30. 2025.	ogram under 710	11 71.21.0	oo lor the hocar	years criaing our	10 00,								
	1003 GF/Match (UGF) 210.4													
*	Allocation Difference *			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	
	Anodulon Bindrende			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	Ü	O	Ü
(	Child Care Benefits													
_	Federal Authority for Child Care Block Grant	24Gov	MultiYr	25,000.0	0.0	0.0	0.0	0.0	0.0	25,000.0	0.0	Ω	Ω	0
L	Discretionary Funds (FY24-FY25)	Z440V	HUTCHI	23,000.0	0.0	0.0	0.0	0.0	0.0	23,000.0	0.0	U	U	U

Additional federal authority is needed for the American Rescue Plan Act (ARPA) Child Care Block Grant discretionary funds which expire September 30, 2024. Improvements are being made in the Child Care Assistance Program to make it more accessible and supportive for parents and providers which will inform strategies such as:

- Support parents that are eligible for childcare assistance by covering the cost of co-payments (this will be re-determined on a quarterly basis due to funding availability).
- Provide grants to families not typically covered by childcare assistance including those utilizing non-traditional care hours and those ineligible due to income. This will be targeted to parents working in the first responder and/or medical fields.
- Increase reimbursement rates to a higher percentile of market rate.
- Improve payment policies.
- Broaden eligibility to childcare assistance.
- Update Family Income and Contribution Schedule.
- Provide contracted slots at childcare facilities.
- Improve Child Care Grant Program and the Alaska IN! Program.
- Pilot a tiered reimbursement initiative for infant and toddler care.

Sec. XX. DEPARTMENT OF HEALTH. (d) The unexpended and unobligated balance of federal receipts received from the American Rescue Plan Act of 2021 (P.L. 117-2) for Department of Health programs, estimated to be

Numbers and Language Differences Agencies: DOH

**Agency: Department of Health** 

_	Column	Trans Type	Total Expenditure	Personal Services	<u>Travel</u>	Services	<u>Commodities</u>	Capital Outlay	Grants	Misc	PFT _	PPT _	<u>TMP</u>
Public Assistance (continued) Child Care Benefits (continued) Federal Authority for Child Care Block Grant Discretionary Funds (FY24-FY25) (continued) \$25,000,000, is appropriated to the Departr and June 30, 2025.  1265 COVID Fed (Fed) 25,000.0	nent of Health for	those prog	rams for fiscal y	ear ending June 3	0, 2024								
* Allocation Difference *			25,000.0	0.0	0.0	0.0	0.0	0.0	25,000.0	0.0	0	0	0
Tribal Assistance Programs  Convert Maintenance of Effort for Temporary Assistance for Needy Families to Language The division needs flexibility over multiple y Assistance for Needy Families (TANF) mair State meets certain participation thresholds are met, the maintenance of effort requirem 1003 GF/Match (UGF) -2,807.4  L Maintenance of Effort for Temporary Assistance for Needy Families (FY24-FY25) The division needs flexibility across fiscal ye Assistance for Needy Families (TANF) mair State meets certain participation thresholds are met, the maintenance of effort requirem  Sec. XX. DEPARTMENT OF HEALTH. (C)	ntenance of effort is not determined ents are reduced,  24Gov  ears to be more effort is not determined ents are reduced,  The amount neces	requirement until after and the dimensional from th	nts. Currently, interest of the fist vision can poten 2,807.4 effective in meents. Currently, interest of the fist vision can poten o exceed \$2,807.	formation on whet scal year. If the thitially lapse genera 0.0 thing the Temporal formation on whet scal year. If the thitially lapse general 7,400, to ensure the	her the resholds al funds.  0.0  Ty her the resholds al funds.  al funds.	0.0	0.0	0.0	-2,807.4 2,807.4	0.0	0	0	0
Division of Public Assistance meets the ma for Needy Families program is appropriated assistance, tribal assistance programs unde 30, 2024 and June 30, 2025. 1003 GF/Match (UGF) 2,807.4	intenance of effort from the general	requirements	ents of the Feder Department of I	al Temporary Ass Health, division of	istance public ng June								
* Allocation Difference *  * * Appropriation Difference * *			0.0 25,000.0	0.0 0.0	0.0	0.0	0.0	0.0	0.0 25,000.0	0.0	0	0	0
Public Health Nursing													
Adopt Recommendations in the Alaska Tuberculosis Elimination Plan	24Gov	Inc	585.0	485.0	50.0	0.0	50.0	0.0	0.0	0.0	0	0	0

Alaska continues to have the highest rate of tuberculosis (TB) in the U.S. During the first half of the 20th century, an epidemic of TB devastated Alaska's indigenous peoples, who continue to bear a disproportionate burden of disease today. The Alaska TB Elimination Plan outlines strategies to decrease TB incidence in Alaska Native people by 25% by 2031.

As part of the Healthy Families Initiative, this work will be implemented by expanding the targeted TB screening/treatment capacity statewide in order to detect and treat latent TB before it becomes active and infectious. The department will also support efforts to recruit qualified public health nurses to rural high-incidence

Numbers and Language Differences Agencies: DOH

1108 Stat Desig (Other)

955.6

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc_	PFT	PPT	TMP
Public Health (continued) Nursing (continued) Adopt Recommendations in the Alaska Tuberculosis Elimination Plan (continued) parts of the state, incentive programs to ince (eDOT) pilot program, and comprehensively factors such as housing shortages and econ 1004 Gen Fund (UGF) 585.0	evaluate epidemi	ology of e											
* Allocation Difference *			585.0	485.0	50.0	0.0	50.0	0.0	0.0	0.0	0	0	0
Women, Children and Family Health  MH Trust: Foster Care Health Record Linkage (FY24-FY27)  The Foster Care Health Linkage Project will Department of Health, Division of Public He health care needs and prior diagnosis to cae improving the health, safety and wellbeing o of a child, it is obligated to ensure that the h adequate and efficient health care, a comple collected and maintained is fragmented and  Although developing an Electronic Health R expand a data linkage pilot project into the r above. The pilot project linked a few childre Defects Registry, Newborn Hearing and Me contained in each system (names, sex, and information, it was deemed beneficial by Off foster placement is medically appropriate. T stakeholder engagement to identify the tech Health Record (EHR) system while addition	alth to address these workers and me of children who are ealth, safety, and eath, safety, and eath health record is often incomplete. ecord (EHR) is the the that were recent tabolic screening adate of birth). Although the staff would also nical needs of date.	e challengedical pro in state of wellbeing s necessar e clear ne n develop ly placed systems u oough this iervices (of p partner a holders	ge of providing time fessionals who are custody. When the of that child is seary. Currently the ed, an intermedial ment of the new sinto foster care wusing a limited set is pilot project only OCS) staff in charwith legal counse and to refine the	ely data on childre e working with the e state assumes of cure. To provide health information by step is to continue the first of partial identified provided partial ge of ensuring eal and continue design of the Electrical working in the Electrical state of the Electric	em, and ustody uue and fied rs	100.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR (Other) 100.0  * Allocation Difference *	ar randing is sough		100.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0	0	
			100.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	U	U	U
Emergency Programs Fifth Year of Medical Provider Incentives and Loan Repayment (Ch15 SLA2019 (SB93))	24Gov	Inc	955.6	78.1	0.0	877.5	0.0	0.0	0.0	0.0	0	0	0
The shortage of health care professionals in Professionals Workforce Enhancement Protessionals Workforce Enhancement Protessionals Workforce Enhancement Protessionals Workforce Enhancement Protessional Enhancement Industrial English Workforce Index, are set in statute. He qualified employment. Payments are made employment and are prorated based on nur	gram (known as "S s in exchange for r ing the cost to adm eximum payment a ealth care professio after the professio	SHARP-3' repayment ninister that mounts, a onals mu nal compl	") in which health it of student loans are program. An adadjusted by the fix st meet eligibility alters a calendar question.	care professionals or direct incentive lvisory council pro /e-year average o criteria and be enquarter of qualified	es. vides f the gaged in								

Numbers and Language Differences Agencies: DOH

	Column	Trans	Total Expenditure	Personal Services	Travel	Sarvicas	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	ТМР
Bublic Health (continued)	COTUIIII	туре	Experior cure	Sel vices	II avei	Jei vices	Collillogittes	<u> </u>	di dilus	HISC	<u> </u>	<u> </u>	IMP
Public Health (continued)													
Emergency Programs (continued) Remove Out-Year General Funds for MH Trust: DHSS Comprehensive Program Planning	24Gov	Dec	-75.0	-75.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Coordinator (FY21-FY28)													
Cease contribution of General Funds - Mental	Health (fund co	de 1037)	for ongoing ment	al health initiative	·.								
In FY2020, the department in conjunction with Strengthening the System, Alaska's Compreh statutorily required plan outlines the priorities planning, and funding decisions. This position department to facilitate, manage, and coordinate evaluation, and monitoring of the Comprehens 1037 GF/MH (UGF)	ensive Integrate and infrastructur collaborates wi ate resources ne	d Mental re needed th Trust s ecessary	Health Program f I for the next five taff to build neede to ensure ongoing	ive-year plan. Thi years to inform pred capacity within g implementation,	s ogram, the								
* Allocation Difference *			880.6	3.1	0.0	877.5	0.0	0.0	0.0	0.0	0	0	0
Chronic Disease Prevention and Health Promo	tion												
MH Trust: Access and Referral Network (FY24-FY25)	24Gov	IncT	315.0	0.0	0.0	315.0	0.0	0.0	0.0	0.0	0	0	0
The access and referral network is a cloud-ba two-way digital provider communication, data behavioral health capacity and referral platfort call centers, providers, stakeholders, and com Alaska's behavioral health resources. The ber platform that connects referring entities to ider mental health and substance use disorder trea illness and/or substance use disorder, in addit 1092 MHTAAR (Other) 315.0 Remove Out-Year General Funds for MH Trust:	analytics, and c m that provides munity member nefits include co ntified available atment and enha	linical dec real-time s. This plantinued so receiving ance the l	cision support. It is access and referr atform identifies, upport of a centra providers. This w ikelihood of recov	s a secure cloud-la ral capabilities bet unifies, and tracks lized technologica rill connect beneficatory for those with	pased tween s al ciaries to mental	-45.0	0.0	0.0	0.0	0.0	0	0	0
Beneficiary Mental Health Status Data Collection (FY22-FY32)													
Cease contribution of General Funds - Mental  The intent of the Beneficiary Mental Health St about the mental health status of Mental Health analysis of Alaska data will be recorded throuth Youth Behavioral Risk Behavior Surveillance of Surveillance System funding will be consisten between the YRBS and School Health Profile occurring in alternating years; BRFSS (\$25.0 MHTAAR; \$20.0 GF/MH).	atus Data Collecth Trust benefici gh the Behavior System (YRBS) t as an annual s programs differ	ction proje aries. The al Risk Fa , and Sch urvey, wh ently in bi	ect is to ensure the administration, of actors Surveillance ool Health Profile nile remaining fundannual cycles du	ere is Alaska-spe outreach, collectic e System (BRFSS s. Behavioral Risl ds may be allocat te to survey fieldir	cific data on, and S), the k Factors ed								
* Allocation Difference *			270.0	0.0	0.0	270.0	0.0	0.0	0.0	0.0	0	0	0

Numbers and Language Differences Agencies: DOH

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Sanuicas	Commodities	Capital Outlay	Cnanto	Mico	PFT	PPT	TMP
Dublic Health (continued)	COTUIIII	туре	Expenditure	Services	<u> </u>	Services	Collillod Lites	Out Tay	Grants	Misc	PF I	<u> </u>	IMP
Public Health (continued)													
Epidemiology	0.40			=00.0	=0.0								
Adopt Recommendations in the Alaska	24Gov	Inc	1,950.0	500.0	50.0	1,400.0	0.0	0.0	0.0	0.0	0	0	0
Tuberculosis Elimination Plan			0.5										
Alaska continues to have the highest r													
an epidemic of TB devastated Alaska's													
disease today. The Alaska TB Elimina	tion Plan outlines strate	gies to de	ecrease 1B incide	ence in Alaska Na	ative								
people by 25% by 2031.													
As part of the Healthy Families Initiativ screening/treatment capacity statewid infectious. The department will also suparts of the state, incentive programs (eDOT) pilot program, and compreher factors such as housing shortages and 1004 Gen Fund (UGF) 1,950.0 Support Efforts to Eliminate Congenital Syphi Alaska ranked in the top ten nationally the highest number of congenital syph when a pregnant woman who is infect	e in order to detect and apport efforts to recruit of to increase staff retentionsively evaluate epidem disconding the conomic challenges) lis 24GoV for sexually transmitter iilis (CS) cases ever rec	treat late pualified pon, expaniology of a second late and the sec	nt TB before it be sublic health nurse d electronic Direct endemic TB in rul 3,295.0 s (STDs) in 2019 the state. Conger	ecomes active and es to rural high-in tity Observed The ral Alaska (includ 0.0 , and in 2020, Ala hital syphilis (CS)	cidence erapy ing 0.0 aska saw occurs	1,990.0	1,305.0	0.0	0.0	0.0	0	0	0
medical cost alone.  As part of the Healthy Families Initiativincidence and increase prevention of solution incidence and increase prevention of solution increasing testing and treatment cape. Increasing financial support for publiconduction increasing financial support for publiconduction increasing financial support for publiconduction.  - Launching comprehensive communiconduction.  - Focusing prevention efforts on at-risk experiencing homelessness.  1004 Gen Fund (UGF) 3,295.0	syphilis by: acity and supplies state c health personnel withi cation campaign to prev	wide n commu rent STIs	nity-based clinics			3,390.0	1,305.0	0.0	0.0	0.0	0	0	0
Bureau of Vital Statistics  Delete Federal Match Funding No Longer Necessary Due to New Federal Grant Requirements	24Gov	Dec	-258.4	0.0	0.0	-258.4	0.0	0.0	0.0	0.0	0	0	0
The department is aligning authority b to the federal grant requirements char													
The department states that over the public Health Laboratories allocation of 1003 GF/Match (UGF) -258.4	work that is being perfor	med. The	ere is a related inc	crement transacti	on in the	250.4	0.0	0.0	0.0	0.0			
* Allocation Difference *			-258.4	0.0	0.0	-258.4	0.0	0.0	0.0	0.0	0	0	0

Numbers and Language Differences Agencies: DOH

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Sarvicas	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Public Health (continued)	COTUMN	1300	Expenditure	Jei Vices	ii avei	Jei Vices	Commodities	<u>outray</u>	ui uiics	11130	<del></del> -		
Public Health Laboratories													
Second Year of Dentists/Dental Hygienist/	24Gov	Inc	31.0	60.0	36.0	-41.0	-4.0	-20.0	0.0	0.0	0	0	0
Radiolog Equip (Ch56 SLA2022 (SB173))											-	-	
Senate Bill 173 transfers responsibility for the				ological devices	from the								
Board of Dental Examiners to the Department	of Health, effec	tive July	1, 2023.										
There are approximately 2,200 individual dentered the Board of Dental Examiners. Due to the volume Radiological Health Physicist 1, range 19, located in Anchorage in FY2023 to provide su	lume of devices ated in Anchora	, the Divis ge and a	sion of Public Heap part-time Office A	alth received a fu Assistant 2, range	ıll-time e 10,								
Through the second year of this bill, authority eight months. Travel authority is established t purchases of testing equipment, developing a laptop, phone, and a workstation for the new	o perform on-sit radiological he	e, routine alth datab	inspections. One	e-time authority f	or								
This program will utilize interagency receipts f Commerce, Community, and Economic Devel 1003 GF/Match (UGF) -193.2 1007 I/A Ropts (Other) 224.2 Add Federal Match Funding to Support			•	•	ent of	258.4	0.0	0.0	0.0	0.0	0	0	0
Laboratory Activities	24007	THE	230.4	0.0	0.0	230.4	0.0	0.0	0.0	0.0	U	U	U
The department is aligning authority to suppo authority to Public Health Laboratories. The d has become apparent that Public Health Labo	epartment state	s that ove	r the past severa	I years with CO\	/ID-19, it								
Due to the federal grant requirements changir general fund match is no longer needed. Ther allocation in the the Division of Public Health. 1003 GF/Match (UGF) 258.4													
Adopt Recommendations in the Alaska Tuberculosis Elimination Plan	24Gov	Inc	225.0	75.0	0.0	0.0	150.0	0.0	0.0	0.0	0	0	0
Alaska continues to have the highest rate of transpectation of TB devastated Alaska's indiged disease today. The Alaska TB Elimination Plapeople by 25% by 2031.  As part of the Healthy Families Initiative, this screening/treatment capacity statewide in ord infectious. The department will also support exparts of the state, incentive programs to increscence (eDOT) pilot program, and comprehensively exparts such as housing shortages and econo 1004 Gen Fund (UGF) 225.0	nous peoples, v n outlines strate work will be imp er to detect and fforts to recruit of ase staff retention	lemented treat late qualified pon, expaniology of 6	by expanding the transfer to be a raise to b	oroportionate bur ence in Alaska N e targeted TB ecomes active an es to rural high-in ctly Observed Th	den of lative								
Support Efforts to Eliminate Congenital Syphilis	24Gov	Inc	705.0	205.0	0.0	0.0	500.0	0.0	0.0	0.0	0	0	0

Personal

Trans

complex programs and systems. The Aging & Disability Resource Centers (ADRC) also provide options counseling to assist individuals with understanding the services to make informed decisions. With the rapidly increasing number of older Alaskans, demand for access to this information is growing and support for a statewide

Total

Numbers and Language Differences Agencies: DOH

**Agency: Department of Health** 

Capital

		irans	Iotai	Personal				Capitai					
<u>-</u>	<u>Column</u>	Type	Expenditure	Services	<u>Travel</u>	Services	Commodities	Outlay	<u>Grants</u>	Misc _	PFT _	PPT _	<u>TMP</u>
Public Health (continued)													
Public Health Laboratories (continued)													
Support Efforts to Eliminate Congenital Syphilis													
(continued)													
Alaska ranked in the top ten nationally for se													
the highest number of congenital syphilis (CS													
when a pregnant woman who is infected with													
sexually transmitted infections (STIs) cost the	e U.S. health car	e system	nearly \$16 billion	each year in litet	ime								
medical cost alone.													
As part of the Healthy Families Initiative, Dep		h, Section	of Epidemiology	will work to decr	ease the								
incidence and increase prevention of syphilis													
- Increasing testing and treatment capacity a													
- Increasing financial support for public health			nity-based clinics										
- Launching comprehensive communication (			aubatanaa uaa d	icardar and nace	.lo								
<ul> <li>Focusing prevention efforts on at-risk popul experiencing homelessness</li> </ul>	ations including	triose with	i substance use d	isorder and peop	ле								
1004 Gen Fund (UGF) 705.0													
* Allocation Difference *			1,219.4	340.0	36.0	217.4	646.0	-20.0	0.0	0.0	0	0	
			-								0		0
* * Appropriation Difference * *			8,041.6	1,328.1	136.0	4,596.5	2,001.0	-20.0	0.0	0.0	U	0	U
Senior and Disabilities Services													
Senior and Disabilities Community Based Gra													
Senior and Disabilities Community Based	24Gov	Inc	1,498.2	0.0	0.0	0.0	0.0	0.0	1,498.2	0.0	0	0	0
Grants and the Centers for Independent Living													
Increase funding by \$586.0 for the Centers for													
non-profit organizations that are designed an													
grantees providing expertise and assistance													
technology, benefits counseling, job skill train	ning, transportation	on, home	and work accomr	nodations, and o	ther								
modifications.													
1	0	1. 11.11		S									
Increase funding by \$912.2 for the remaining services to the senior and disabilities commu		ibilities Co	ommunity Based (	arants, which pro	ovide								
1004 Gen Fund (UGF) 1,498.2	iriity.												
Remove Out-Year General Funds for MH Trust:	24Gov	Dec	-250.0	0.0	0.0	0.0	0.0	0.0	-250.0	0.0	0	0	0
Maintain Aging and Disability Resource	24G0V	Dec	-250.0	0.0	0.0	0.0	0.0	0.0	-250.0	0.0	U	0	0
Centers (FY22-FY26)													
Cease contribution of General Funds - Menta	al Health (fund co	do 1037)	for ongoing mont	al health initiative	2								
Cease contribution of General Funds - Wente	ai i lealtii (lullu cc	de 1007)	for origoning ment	ai ilealtii iiiliativ	<b></b>								
Older Alaskans, persons with disabilities, fan	nily caregivers a	nd commi	inity members re	nuire a reliable s	nurce for								
information and referral on how to access a													
housing, transportation, equipment and other													
acompley programs and systems. The Aging (					navigate								

Numbers and Language Differences Agencies: DOH

	Column	Trans Type E	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT _	PPT _	TMP
Senior and Disabilities Services (continued) Senior and Disabilities Community Based Grants Remove Out-Year General Funds for MH Trust: Maintain Aging and Disability Resource Centers (FY22-FY26) (continued) infrastructure is critical to ensure timely access to entrance into the state's long-term care services Department of Health's priority for long-term care	services. A	, ging and Di											
* Allocation Difference *		_	1,248.2	0.0	0.0	0.0	0.0	0.0	1,248.2	0.0	0	0	0
Senior and Disabilities Services Administration MH Trust: Care Coordination Support (FY24- FY25)  Care Coordination Support provides funding towa Disabilities Services (SDS) supporting state oper support and development of care coordination se community-based services. The Care Coordinatic assistance to support care coordinators. This pos Harmony database, the 1115 waiver services, su needs. This position will work with SDS to identify in rural Alaska, assist with gathering the informat system changes that can improve the care coord 1092 MHTAAR (Other)  55.3  Remove Out-Year General Funds for MH Trust: IT Application/Telehealth Service System Improvements (FY16-FY25)  Cease contribution of General Funds - Mental He improvements.	ating infrastrating infrastration vices, so Tion Liaison will helipport planni y opportunition needed to ination servi	ructure. The rust benefici ill provide o p care coorung, and othe es to improvide evaluate a ce.	goal of this pro iaries have acce utreach, educat dinators navigat er direct service ve the establishr a rate increase f	ject is to assist wites to home and ion, and technical e quality assurance or administrative ment of care coord for this service, an	ce, the support dinators d other	-63.0	0.3	0.0	0.0	0.0	0	0	0
Senior and Disabilities Services (SDS) will dedica operating infrastructure. Individuals who receive annual reassessment conducted by a SDS nurse recipients who live outside of the regional hub co due to staff availability, weather, flight schedules, unexpected events. Delayed assessments are in rescheduling. Through telehealth, reassessments at their local clinic through collaboration with the possibility of other services or functions using tele improve access and timeliness of receiving service assessments, internal efficiencies, and ability to service to the services of the servi	personal car e assessor to mmunities c , unexpected efficient and s are conduct regional hea ehealth to m ces. Telehea	e assistance continue be an experien I travel, indican result is ted with the alth organizate with indicate increase	e or Medicaid weing eligible for ce difficulties gevidual medical rentification higher costs and individual servition. This positividuals, family,	aiver services req services. Service etting timely asses leeds, or other associated with tra ice recipient partic on will explore the or community mer	uire an esments vel and eipating embers to	-56.3	0.3	0.0	0.0	0.0	0	0	0
Allocation Difference			, . ,	73.3	۲. ۰	50.5	0.5	0.0	0.0	0.0	U	U	J

Numbers and Language Differences Agencies: DOH

**Agency: Department of Health** 

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Senior and Disabilities Services (continued)													
Commission on Aging													
Replace Mental Health Trust Authority Receipts	24Gov	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
for Zero-Based Budgeting													
Reverse Mental Trust Authority Authorized Rece	eipts for :												
- FY2023 GGU 3% COLA & \$12.50 HI Increase: - General Government Unit (GG, GP, GY, GZ) S 1007 I/A Rcpts (Other) 8.9		sk Managen	ment Rates: -0.4										
<b>1092 MHTAAR (Other)</b> -8.9													
Reverse MH Trust: Cont Alaska Commission	24Gov	OTI	-200.0	-138.5	-1.0	-60.5	0.0	0.0	0.0	0.0	0	0	0
on Aging Staffing and Beneficiary Program Support (FY18-FY28)													
This project funds the Alaska Commission on Agoperating infrastructure. The planner is responsi the ACOA and the Trust, including gathering dat preparing ongoing grant progress reports to the other state and federal funding opportunities for projects and to ensure effective use of available other beneficiary boards, including participating projects, and other duties. The project funding su outreach activities to connect with seniors who a and reporting requirements are negotiated with the 1092 MHTAAR (Other) -200.0  MH Trust: Cont Alaska Commission on Aging Staffing and Beneficiary Program Support (FY18-FY28)	ble for supporting for reporting ACOA and to Mental Heal dollars. In a fin the development the force Trust ber	orting the Eng, coording, he Trust. The Trust Auddition, the opment of swork of ACC neficiaries to	Executive Director ation of advocacy the planner works athority Authorized planner position state plans, working OA through traini	r in coordination by and planning, are with staff to max d Receipts (MHTA acts as liaison wing on collaborativng and to conduc	etween nd imize AAR) th the e	49.3	3.0	0.0	0.0	0.0	0	0	0
This project funds the Alaska Commission on Acoperating infrastructure. The planner is responsi the ACOA and the Trust, including gathering dat preparing ongoing grant progress reports to the other state and federal funding opportunities for projects and to ensure effective use of available other beneficiary boards, including participating projects, and other duties. The project funding su outreach activities to connect with seniors who a and reporting requirements are negotiated with the 1092 MHTAAR (Other)	ble for supporting for reporting ACOA and to Mental Heal dollars. In a fin the development the force Trust ber	orting the Eng, coording, coording, he Trust. The Trust Auddition, the opment of swork of ACO neficiaries to	Executive Director ation of advocacy the planner works athority Authorized planner position state plans, working OA through traini	r in coordination by and planning, are with staff to max d Receipts (MHTA acts as liaison wing on collaborativng and to conduc	etween nd imize AAR) th the e								
* Allocation Difference *		-	0.0	4.7	3.5	-11.2	3.0	0.0	0.0	0.0	0	0	0
Governor's Council on Disabilities and Special E Reverse MH Trust: GCDSE Joint Staffing (FY18-FY28)	24Gov	0TI	-184.5	-169.4	0.0	-11.1	-4.0	0.0	0.0	0.0	0	0	0
The Governor's Council on Disabilities and Spec mandated by Congress. It is an expectation of the planting in the Congress of findings of the congress.	ne Mental He	ealth Trust <i>i</i>	Authority that the	GCDSE participa	ite in								

planning, implementing, and funding a Comprehensive Integrated Mental Health Plan that serves people with

Numbers and Language Differences Agencies: DOH

Column	Trans	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP		
Senior and Disabilities Services (continued)	<u> 13 pe</u> _	Expenditure	<u> </u>	Traver _	Jei vices	Commodities	<u>outray</u>	ui uiics	11130	<del></del> -	<del></del> -			
Governor's Council on Disabilities and Special Education ( Reverse MH Trust: GCDSE Joint Staffing	continue	d)												
(FY18-FY28) (continued)														
developmental disabilities and their families. The positions su														
provide up-to-date, valid information to the Trust on beneficia activities, enhance public awareness, and engage in ongoing														
activities, ermance public awareness, and engage in ongoing	COllaborat	ion with the mu	ist and partner b	Jaius.										
The Research Analyst 3 continues to provide the GCDSE with information about the needs of individuals with developmental disabilities and supports state operating infrastructure. Activities of this position, including travel, ensure GCDSE efforts are conducted within the framework of the Mental Health Trust Authority's guiding principles while still meeting Congressional requirements.														
The Planner 3 provides expertise and support related to the	Compreher	sive Integrated	l Mental Health F	Plan for										
issues related to special education services and beneficiaries														
position ensures the Trust has consistent access to critical comprehensive planning information and resources related to specific interests of beneficiary interests informed by the GCDSE.														
1092 MHTAAR (Other) -184.5	by the GCL	/SE.												
MH Trust: GCDSE Joint Staffing (FY18-FY28) 24Gov	IncM	184.5	171.0	0.0	12.7	0.8	0.0	0.0	0.0	0	0	0		
The Governor's Council on Disabilities and Special Education														
mandated by Congress. It is an expectation of the Trust that														
and funding a Comprehensive Integrated Mental Health Plan and their families. The positions enable the Council to provid														
beneficiary issues, identify trends, participate in Trust activitie														
ongoing collaboration with the Trust and partner boards.	,		3.3											
The Research Analyst 3 position provides the Governor's Co				ith										
information about the needs of individuals with developments infrastructure. Activities of this position, including travel, ensu				framework										
of the Mental Health Trust Authority's guiding principles while														
Research Analyst is a staff member of the Governor's Counc	il and funds	s go directly to	the Council.											
The Planner 3 position provides expertise and support relate Plan for issues related to special education services and ben GCDSE joint staffing funds will partially support this position	eficiaries e	xperiencing dev	velopmental disa	bilities.										
comprehensive planning information and resources related to														
the Council.			,											
<b>1092 MHTAAR (Other)</b> 184.5	_									_		_		
Remove Out-Year General Funds for MH Trust: 24Gov	Dec	-50.0	-50.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0		
GCDSE Joint Staffing (FY18-FY28)  Cease contribution of General Funds - Mental Health (fund c	nde 1037) i	for ongoing me	ntal health initiat	ive										
	,	ioi ongonig ino	aa.											
The Governor's Council on Disabilities and Special Education														
mandated by Congress. It is an expectation of the Mental He														
planning, implementing, and funding a Comprehensive Integ developmental disabilities and their families. The positions su														
asveropmental disabilities and their families. The positions so	ipported Wi	ar and randing t	CHASIC IIIC GOD	J_ 10										

Numbers and Language Differences Agencies: DOH

		Column	Trans Type	Total Expenditure	Personal Services	Travel _	Services Co	ommodities	Capital Outlay	<u> Grants</u>	Misc	PFT _	PPT _	TMP
	or and Disabilities Services (continued) overnor's Council on Disabilities and Special II Remove Out-Year General Funds for MH Trust: GCDSE Joint Staffing (FY18-FY28) (continued) provide up-to-date, valid information to the Trus activities, enhance public awareness, and enga The Research Analyst 3 continues to provide th	t on beneficion ge in ongoin e GCDSE wi	ary issues, g collaborat	identify trends, pation with the Trus	t and partner boa	rds. with								
	developmental disabilities and supports state or ensure GCDSE efforts are conducted within the principles while still meeting Congressional requ	framework of				ravel,								
	The Planner 3 provides expertise and support re issues related to special education services and position ensures the Trust has consistent acces related to specific interests of beneficiary interest 1037 GF/MH (UGF) -50.0	beneficiarie s to critical c	s experiend omprehens	cing development sive planning info	al disabilities. Thi	S								
	Replace Mental Health Trust Authority	24Gov	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
-	Authorized Receipts for Zero-Based Budgeting The nature of initiatives funded through Mental   be brought to zero for appropriation through the 1037 GF/MH (UGF) 4.6 1092 MHTAAR (Other) -4.6  Allocation Difference * ppropriation Difference **				-48.4 2.2	0.0 5.9	1.6 -65.9	-3.2 0.1	0.0	0.0 1,248.2	0.0	0 0	0 0	 0 0
	artmental Support Services													
	Establish the Office of Health Savings  The Office of Health Savings in the Commission Alaska. This office will work with the Departmen improve the value of existing contracts and sect 1002 Fed Rcpts (Fed) 523.1 1003 GF/Match (UGF) 523.1	t of Law to o	btain specia	alized, in-depth k	nowledge in orde		895.7	0.0	0.0	0.0	0.0	0	0	0
	Recruitment and Retention of Health Professionals to Alaska The health care sector is expected to grow by o jobs. To meet this need, Alaska will make invest recruiting to address the workforce shortage.						150.0	0.0	0.0	0.0	0.0	0	0	0
L	1004 Gen Fund (UGF) 150.0  Extend Homeless Management Information  System Implementation (FY24-FY25)  The Homeless Management Information System as part of the People First Initiative in collaborat agencies to collect data that will better inform ho	n (HMIS) dat	e and local	health care provi			0.0	0.0	0.0	0.0	0.0	0	0	0

Numbers and Language Differences Agencies: DOH

**Agency: Department of Health** 

		Trans	Total	Personal				Capital					
	Co1umn	Type	Expenditure	Services	Travel	Services	Commodities	Outlay	Grants	Misc	PFT	PPT	TMP
Departmental Support Services (continued)													

### Departmental Support Services (continued) Commissioner's Office (continued)

Extend Homeless Management Information

Extend Homeless Management Information System Implementation (FY24-FY25) (continued)

The HMIS is part of the U.S. Department of Housing and Urban Development (HUD) that confidentially collects client-level data on the provision of housing and services to homeless individuals and families and persons at-risk of homelessness.

Sec. XX. Department of Health. (b) The unexpended and unobligated balance on June 30, 2023 of the appropriation made to the Department of Health, commissioner's office, in Sec. 1, ch11, SLA 22, for the purpose of homeless management information systems, estimated to be \$750,000, is reappropriated to the Department of Health, commissioner's office, for homeless management information systems, for the fiscal years ending June 30, 2024, and June 30, 2025, from the following sources:

- (1) \$375,000 from statutory designated program receipts;
- (2) \$375,000 from the general fund

* Allocation Difference *		_	1,196.2	150.5	0.0	1,045.7	0.0	0.0	0.0	0.0	0	0	0
Information Technology Services Invest in Line of Business Information Technology	24Gov	Inc	1,560.5	1,410.5	0.0	150.0	0.0	0.0	0.0	0.0	10	0	0

Departmental Support Services, Information Technology Services will invest in line of business information technology by adding 10 full-time positions and recouping costs through chargeback to divisions. Interagency receipt authority will support the added positions and chargeback model in Information Technology Services, while the divisions will have increments with appropriate funding to support the increase to their chargeback.

Over time, departmental activities shifted from manual to electronic and online processing and staff capacity has not grown with the expanded portfolio that requires that specific support. The additional positions will allow the department to complete projects while continuing to support the department's 181 applications and do the following:

- Complete cyber-attack recovery efforts
- Complete other high priority projects consisting of:
- Health Care Services, Medicaid Management Information System (MMIS) Fiscal Agent Onboarding
- Department of Health Complete SharePoint 2019 migration
- Senior and Disabilities Services Electronic Visit Verification
- Division of Public Health Laboratory Information Management System (LIMS) update to Horizon Version 13
- Move to Vendor Hosted Solutions
  - Division of Behavioral Health FEI Hosting Alaska's Automated Information Management System (AKAIMS)
  - Division of Public Health Electronic Vital Records System (EVRS) to vendor hosted
  - Division of Public Health ILINX Cloud Migration
- Required System End-of-Life Upgrades
  - Health BizTalk 2020 end-of-life upgrade
  - Health SQL 2012 end-of-life upgrade

Numbers and Language Differences Agencies: DOH

	Column _	Trans Type	Total Expenditure	Personal Services	<u>Travel</u>	Services	Commodities	Capital Outlay	Grants	Misc	PFT _	PPT _	TMP
Departmental Support Services (continued) Information Technology Services (continued) Invest in Line of Business Information Technology (continued)													
The following positions are added: - Full-time Systems Programmer 1/2/3 (16-#092) - Full-time Systems Programmer 1/2/3 (16-#093) - Full-time Data Processing Manager 1 (16-#094) - Full-time Database Specialist 3 (16-#095), rang - Full-time Analyst/Programmer 4 (16-#096), rang - Full-time Systems Programmer 1/2/3 (16-#097) - Full-time Systems Programmer 1/2/3 (16-#097) - Full-time Microcomputer/Network Specialist 1/2 - Full-time Microcomputer/Network Technician 1// - Full-time Program Coordinator 2 (16-#101), ran 1002 Fed Rcpts (Fed) 72.0 1007 I/A Rcpts (Other) 1,488.5	, range 20/2: ), range 22, I e 22, located ge 20, located , range 20/2: , range 20/2: (16-#099), r 2 (16-#100),	2/23, located ocated in Juneau din Juneau 2/23, locate 2/23, locate ange 18/20 range 14/2	ed in Juneau Juneau u u ed in Juneau ed in Juneau 0, located in June										
* Allocation Difference *			1,560.5 2,756.7	1,410.5 1,561.0	0.0 0.0	150.0 1.195.7	0.0	0.0 0.0	0.0	0.0	10 10	0	0
* * Appropriation Difference * *			2,/50./	1,501.0	0.0	1,195./	0.0	0.0	0.0	0.0	10	U	U
Medicaid Services Medicaid Services Second Year of Mental Health Facilities; Meds; Patients (Ch41 SLA2022 (HB172)) House Bill 172 expands capacity for psychiatric sfor involuntary commitment, similar to existing De Evaluation and Treatment (DET) centers.						0.0	0.0	0.0	150.0	0.0	0	0	0
This increase compensates providers when there Evaluation and Stabilization (DES) and Designat 1002 Fed Rcpts (Fed) 150.0  Extend Postpartum Medicaid Coverage  Medicaid and Children's Health Insurance Progra Alaskans but currently only provide coverage for postpartum coverage to address maternal morbid occur in the 12-month postpartum period). Improreduced maternal morbidity, improved maternal (the average total per patient costs in 2013 for M was \$10,134 compared to \$6,894 for women with 1004 Gen Fund (UGF) 2,600.0	ed Evaluatio  24Gov am (CHIP) pl up to 60 day dity and mort ved health o mental health edicaid-enro	Inc ay critical res postparte ality (more utcomes in and othe lled pregna	2,600.0 roles in caring for um. Many states than half of pregulations or areas are assount women with s	0.0 r pregnant and po have extended gnancy-related de disease prevention ciated with cost sa	0.0 stpartum eaths n, avings	0.0	0.0	0.0	2,600.0	0.0	0	0	0
Medicaid Utilization and Inflation Due to the Public Health Emergency Wind Down The U.S. Department of Health and Human Serv The department will no longer receive the additio						0.0	0.0	0.0	18,132.6	0.0	0	0	0

Numbers and Language Differences Agencies: DOH

Modicaid Comicae (continued)	<u>Column</u>	Trans Type <u>E</u>	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	<u>Grants</u>	Misc _	PFT _	PPT _	<u>TMP</u>
Medicaid Services (continued)													
Medicaid Services (continued)													
Medicaid Utilization and Inflation Due to the Public Health Emergency Wind Down													
(continued)													
result of the public health emergency ending increasing due to the winding down of the puand other Centers for Medicare and Medicare 1003 GF/Match (UGF) 18,132.6	ublic health emerger d Services (CMS) p	ncy, coup	led with increas ges.	sed utilization, in	flation,								
L FY24 Open-Ended Federal Receipt Authority	24Gov	Lang	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
(a) Federal receipts received during the fisca													
to the Department of Health, Medicaid service	ces, for Medicaid se	rvices tor											
* Allocation Difference *			20,882.6	0.0	0.0	0.0	0.0	0.0	20,882.6	0.0	0	0	0
* * Appropriation Difference * *			20,882.6	0.0	0.0	0.0	0.0	0.0	20,882.6	0.0	0	0	0
* * * Agency Difference * * *			58,399.3	2,954.3	141.9	5,793.8	1,982.1	-20.0	47,547.2	0.0	10	0	0
* * * * All Agencies Difference * * * *			58,399.3	2,954.3	141.9	5,793.8	1,982.1	-20.0	47,547.2	0.0	10	0	0

### Column Definitions

Adj Base (FY24 Adjusted Base) - FY23 Management Plan less one-time items, plus FY24 adjustments for position counts, funding transfers, line item transfers, temporary increments (IncT) from prior years, and additions for statewide items (e.g. salary and benefit increases). The Adjusted Base is the "first cut" of the FY24 budget; it is the base to which the Governor's and the legislature's increments, decrements, and fund changes are added.

**24Gov (24Gov)** - Includes FY24 Adjusted Base plus the Governor's operating budget requests for increments, decrements, fund source changes, and language transactions submitted on December 15, 2022.