#### Numbers Differences Agencies: DOH

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### Agency: Department of Health

			Trans	Total	Persona1				Capital					
		Column	Type	Expenditure	Services	Travel	Services	Commodities	Outlay	Grants	Misc	PFT	PPT	TMP
	Behavioral Health													
	Behavioral Health Treatment and Recovery													
1	Increased Statutory Distribution of Restorative	24GovAmd	Inc	416.4	0.0	0.0	0.0	0.0	0.0	416.4	0.0	0	0	0
I	Justice Account Funding													
	Align authority with the statutory distribution													
	Justice Account is created as a separate a													
	fund to the restorative justice account each during the previous fiscal year to individual													
	had been eligible. The amount for dividend					(u) ii tiley								
	sentenced or incarcerated under AS 43.23.					1.00. This								
	funding is distributed in the budget in accor													
	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
	Behavioral Health Administration													
2	Second Year of Health Care Services by	24GovAmd	Inc	12.0	20.1	0.0	0.0	-8.1	0.0	0.0	0.0	0	0	0
4	Telehealth (Ch38 SLA2022 (HB265))	<b>,</b>					This is an	out voor f	iscal note.	Other fiece	l noto in	mac	te ar	a noted
	House Bill 265 requires the department to if the services had been provided in person				th in the same ma							ipac	15 ai	enoted
	in the services had been provided in person	, except as provide	30 IN AS 4	r.07.009(b).			on page 4	: (#12), 7 (#	<i>‡</i> 19), 11 ( <i>#</i> 2	9), and 19	(#50).			
	In order to implement this bill, the Division of based in Anchorage, to review, assess, and health telehealth services, including collect being implemented via telehealth; to asses telehealth modalities; and to pull, review, a reporting, and audits.	d monitor the clinic ing substantial me s the clinical outco	al appropr dical evide mes asso	iateness of the ence, as needed, ciated with telehe	expanded behavio , to disallow a ser ealth services, inc	oral vice from cluding								
3	Through the fiscal note for HB265, persona year, rather than the 10 months it was budg 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						200.0	0.0	0.0	0.0	0.0	0	0	0
	(FY24-FY27)													
	This project leverages state and federal fur Training Center (FSTC) in partnership with The project is in partnership with the Alask offers training opportunities for behavioral I offers online training that professionals can videoconference. FSTC also offers live tec apply what was learned in training. Behavio higher quality services and the families the resilience, and improving their overall well-	the University of A a Department of Ho health professional access in a variet hnical assistance s oral health professi y work with have a being.	laska Anc ealth, Divis s that worl y of forma oupport cal onals who better cha	horage Center for sion of Behaviora k with families ac ts including face ls and webinars o receive high qu ance of coping w	or Human Develo al Health (DOH/D cross Alaska. The -to-face and throu to help professio ality training prov ith adversity, dev	pment. BH) and FSTC ugh nals ide eloping								
	This project aligns with the 1115 waiver eff	ona to ulvent nigh-i	ISK (annine		in intensive dealm									

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#### Numbers Differences Agencies: DOH

## Agency: Department of Health

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		Column	Trans	Total	Personal Semulase	Tabual	Somulaaa	Commodition	Capital	Create	Mine	DET	DDT	7340
Dah		Coruint	Type c	xpenditure	Services	Travel	Services	Commodities	Outlay	Grants	MISC	PFT	PPT	TMP
	avioral Health (continued)													
	Rehavioral Health Administration (continued) MH Trust: Family Services Training Center -													
4	1115 Early Childhood Services Inaining Center -													
	(FY24-FY27) (continued)													
	is costly and traumatic. Supporting an array o	f preventative a	nd thereneu	tic models for f	amilies and childre	an								
	allows DBH to promote early intervention and													
	access for families. Mental Health Trust Author													
	of the FSTC portfolio of practitioners to includ													
	particularly those at high risk of or currently in													
	to support implementation of findings from on													
	1092 MHTAAR (Other) 200.0	0 01 0		0										
5	Remove Out-Year General Funds for MH Trust:	24GovAmd	Dec	-50.0	0.0	0.0	-50.0	0.0	0.0	0.0	0.0	0	0	0
	Peer Support Certification (FY21-FY25)													
	Cease contribution of General Funds - Menta	I Health (fund co	ode 1037) fo	or ongoing men	tal health initiative									
	This project was developed from a Mental He													
	development and standardization of peer sup													
	continue work initiated in previous years and to body and standardized training offerings for p													
	development of this certification and training h													
	and key stakeholders.	las been collabo	Jiauve anu	productive betw	veen the State, the	e musi,								
	and key stakeholders.													
	Peer support is a foundational recovery-orient	ted strategy with	in the Bene	ficiary Employ	ment and Engager	nent								
	Focus Area and a critical service highlighted i	in the 1115 Med	icaid Behav	ioral Health Wa	aiver.									
_	1037 GF/MH (UGF) -50.0													
6	Remove Out-Year General Funds for MH Trust:	24GovAmd	Dec	-62.5	0.0	0.0	-62.5	0.0	0.0	0.0	0.0	0	0	0
	Zero Suicide Initiative (FY22-FY25)													
	Cease contribution of General Funds - Menta		ode 1037) fo	or ongoing men	tal health initiative	per the								
	recommendation of the Mental Health Trust A	authority.												
	This initiative partners with the Division of Bel	haviaral Haalth t	o oronto o r	ow full time no	cition to monoro (	ha haat								
	practice model called Zero Suicide and will we													
	tenets of this model. The core elements include													
	improving. The position will utilize this framew													
	higher level of treatment for individuals who a		indual ago.			0,10 0								
	1037 GF/MH (UGF) -62.5													
7	Grants from National Association of State	24GovAmd	IncT	750.0	0.0	0.0	750.0	0.0	0.0	0.0	0.0	0	0	0
/	Mental Health Program Directors (FY24-FY25)													
	The Division of Behavioral Health recently rec													
	Health Program Directors for projects relating													
	under-resourced minority communities. The g													
	may be additional opportunities to collect stat	utory designated	d program r	eceipts in future	e grant cycles or fr	om								
	other sources.													
	The Division of Behavioral Health will work wi	ith a vendor to d	evelop and	provide a com	areheneive cuite o	f								

The Division of Behavioral Health will work with a vendor to develop and provide a comprehensive suite of

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#### Numbers Differences Agencies: DOH

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	avioral Health (continued) Behavioral Health Administration (continued Grants from National Association of State Mental Health Program Directors (FY24-FY25) (continued) trainings on crisis services. Training goals automated for future use. Trainings will be clinicians, substance use disorder counsel	include the provision offered to certified p	eer support special	are <u>Services</u>	<u>Travel</u>	<u>Services</u> <u>C</u>	ommodities	Capital Outlay	Grants	<u>Misc</u> _	PFT	<u>PPT</u>	<u>TMP</u>
*	Training topics may include familiarization de-escalation, crisis assessment including Title 47, recent legislation (including how th seeking services for individuals, crisis safe model, ethics and boundaries, trauma infor support for workers and self-care. 1108 Stat Desig (Other) 750.0 Allocation Difference *	provision of a menta hese factors impact o ty planning, wellness	I status exam, docu crisis work statewide a and recovery action	mentation, skill de a), negotiating the s n plans, the peer s tural training, and c	velopment, system when support clinical	837.5	-8.1	0.0	0.0	0.0	0	0	0
8 8	Behavioral Health Prevention and Early Inter         MH Trust: Crisis Now Continuum of Care         Grants (FY23-FY26)         The Crisis Now system is a best practice find for people experiencing a behavioral health community partners to stand-up this system grants will be awarded to entities that are preople having a behavioral health crisis. Care the typical responders to these individuand develop a Crisis Now system of care walaskans having a behavioral health crisis 1037 GF/MH (UGF)	24GovAmd ramework for develop h crisis. The Trust we m of care in Fairbank partnering with the co urrently, law enforce uals in crisis. These s with trained behavior	orks with various de ts, Mat-Su, Anchora ommunity to provide ment agencies and system care grants al health profession	ing crisis stabilizati partments within th ge, and Juneau. T less restrictive op for emergency mer will unify communit als meeting the ne	ion services ne state and hese care tions for dical services ty partners eds of	0.0	0.0	0.0	667.0	0.0	0	0	0
	Allocation Difference *		66		0 0.0	0.0	0.0	0.0	667.0	0.0	0	0	0
9	Alaska Mental Health Board and Advisory B Reverse MH Trust: Cont ABADA/AMHB Joint Staffing (FY18-28) To provide a supplement to the basic oper Abuse (ABADA) and Alaska Mental Health advocacy performance measures negotiat 1092 MHTAAR (Other) -491.5	24GovAmd rations of the merged n Board (AMHB) and ed with the Trust.	0TI -49 staff of Advisory Borequires the boards	L.5 -377.2 pard on Alcoholism to meet the data,	i and Drug T planning, and Z	-49.5 'his reversal ero-based b	udgeting.				0 Trus	o st pr	0 actices
10	MH Trust: Cont ABADA/AMHB Joint Staffing (FY18-FY28) To provide a supplement to the basic oper Abuse (ABADA) and Alaska Mental Health advocacy performance measures negotiat 1092 MHTAAR (Other) 491.5	Board (AMHB) and	staff of Advisory B		and Drug	<sup>29.5</sup> This additic zero-based l			the Menta	0.0 ll Health	ı Tru	st pr	actices

#### Numbers Differences Agencies: DOH

### Agency: Department of Health

		Trans	Total	Personal				Capital					
-	Column	Туре	Expenditure	Services	Travel	Services	Commodities	Outlay	Grants	Misc	PFT	PPT	TMP
Behavioral Health (continued)				41									
Alaska Mental Health Board and Advisory Boa Replace Mental Health Trust Authority	24GovAmd		ig Abuse (con 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	Endovidid	indong	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	U	0	U
The nature of initiatives funded through Menta be brought to zero for appropriation through the 1037 GF/MH (UGF) 0.4 1092 MHTAAR (Other) -0.4				ts requires the ba	alance to								
* Allocation Difference *		-	0.0	22.8	0.0	-20.0	-2.8	0.0	0.0	0.0	0	0	0
* * Appropriation Difference * *			1,932.9	42.9	0.0	817.5	-10.9	0.0	1,083.4	0.0	0	0	0
Health Care Services Medical Assistance Administration Second Year of Health Care Services by	24GovAmd	Inc	12.0	20.1	0.0	0.0	-8.1	0.0	0.0	0.0	0	0	0
l elehealth (Ch38 SLA2022 (HB265))						This is an	n out-year f	iscal note	Other fisco	l note ir	nna	rte ar	e noted
House Bill 265 requires the department to pay if the services had been provided in person, e				n in the same ma			· · · · · · · · · · · · · · · · · · ·				npa	<i>ls</i> ai	e noteu
in the services had been provided in person, e	xcept as provid		.01.009(b).			on page 1	1 (#2), 7 (#1	.9), 11 (#2	9), and 19 (	(#50).			
credentials being applied to the provider enrol additional post-payment review of telehealth of the delivery of telehealth services, including e Utilization Review unit and working with curren group comparison algorithms. Personal services is increased to support the	laims to ensure stablishing new nt data-analytic	e compliance review stra s vendors t	e with state and ategies within the o develop compl	federal rules surr Surveillance and iance strategies a	rounding d and peer								
budgeted for in FY2023. One-time costs are n 1002 Fed Ropts (Fed) 6.0 1003 GF/Match (UGF) 6.0	emoved for a n	ew compute	er and other setu	p costs.									
13 Increase Recoveries and Rebates with	24GovAmd	Inc	774.2	758.9	0.0	0.0	15.3	0.0	0.0	0.0	6	0	0
Additional Positions Medical Assistance Administration, which is th almost 80 thousand more Medicaid recipients adjudicated and recovered with the same staf Health Care Services is a direct link to \$50 mi continue processing claims and to work on co The addition of these positions will enable He rebates and through additional recoveries. Th could cost the state millions of federal dollars. Medicaid expansion in September 2015, com factors have increased enrollment in Medicaic	with about 300 fing pattern that llion in expendi st containment. alth Care Servic e work these po ponents of the F	,000 to 500 t existed te tures each ces to recor positions per Patient Prof	0,000 more claim n years ago, befo week. Additional ver more funding form will help min tection and Affore	s per year that ha pre Medicaid expir resources are ne from Medicaid di nimize audit findir dable Care Act, a	ave to be ansion. Beded to rug ngs that nd other								

#### Numbers Differences Agencies: DOH

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### Agency: Department of Health

		Column	Trans	Total Expenditure	Personal Services	Travel	Sarvicas	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Haalth Cara Samilaan (aantinuad	n —	COTUAIT	Type -	Expenditure	Jervices	II aver	361 11063	Commodicies	Outray	di anca	1130	<u> </u>		1111
Health Care Services (continued														
Medical Assistance Administra Increase Recoveries and Rebates														
Additional Positions (continued)	WILLI													
enable Health Care Service	es to ensure continu	ed health cove	erage to Ala	askans in need.	increase recover	ies and								
Medicare and Third Party L														
optimizing other revenue se	ources, as well as a	ssist with comp	pliance of t	he Preferred Dru	ig List that allows	a the								
program to be more respor														
while providing access to n	ew therapeutics that	t may have im	proved pati	ient outcomes, r	esulting in offerin	g indirect								
medical cost savings.														
Accounting and Recovery -	full time, range 18	Medicaid Brog	iram Snaci	alist 2 located in	Anchorage - To	acciet								
with tracking additional rec														
sections, specifically the sy														
members, and this effort w	ill assist with reclain	ning additional	federal fun	ds.										
Accounting and Recovery														
with return on investment (														
changes are completed, er position will add awareness					audit infungs. 1	ns								
	3 401033 3000013, 3	seemeany open	adonaroian	na unic.										
Director's Office - full time,	range 18, Program	Coordinator 1,	located in	Anchorage - To	work across sec	tions on								
specific projects/problem a														
both internally and external	lly. This position will	cross train wit	h legislativ	e liaison and reg	julations speciali	st								
positions.														
Pharmacy - full time, range	18. Medicaid Prog	am Snecialist :	2 located i	n Anchorage - T	o assist the Med	icaid								
Program Specialist 3 with a														
oversight support of progra														
claims submissions, proces	ssing and payment i	nonitoring, edu	acation, an	d other provider	related services.									
Dhannaan full ting ana a					1. t									
Pharmacy - full time, range subject matter experts on p														
related to prospective and														
mandated Drug Rebate Pro														
tribal reclaiming efforts and														
costs.														
	04 Dhannaaict Is		<b>T</b>	and at the same after a										
Pharmacy - full time, range by supporting pharmacy re			rage - To a	ssist in meeting	team and progra	m goals								
	-													
\$15.3 for supplies for the p														
1002 Fed Rcpts (Fed) 1003 GF/Match (UGF)	387.1 387.1													
* Allocation Difference *	307.1		÷-	786.2	779.0	0.0	0.0	7.2	0.0	0.0	0.0	6	0	0
* * Appropriation Difference * *				786.2	779.0	0.0	0.0		0.0	0.0	0.0	6	0	n
Appropriation Difference				100.2	779.0	0.0	0.0	1.2	0.0	0.0	0.0	U	U	V
0000 00 00 45 40 00						•							-	-

Legislative Finance Division

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#### Numbers Differences Agencies: DOH

### Agency: Department of Health

	Column_	Trans Type	Total Expenditure	Personal Services	Travel	Services C	Commodities	Capital Outlay	Grants	Misc _	PFT	PPT	TMP
Public Assistance													
Alaska Temporary Assistance Program Convert Maintenance of Effort for Alaska Temporary Assistance for Needy Families to Language	24GovAmd	Dec	-210.4	0.0	0.0 This	0.0 item and	0.0 item 16 aı	0.0 e to move	-210.4 numbers t	0.0 o langua	0 ge, tl	0 here	0 is a net
The division needs flexibility over multiple ye Assistance for Needy Families (TANF) maint State meets certain participation thresholds i are met, the maintenance of effort requireme 1003 GF/Match (UGF) -210.4	enance of effort s not determined	requireme I until after	ents. Currently, infe r the end of the fis	ormation on wheth scal year. If the thr	y Zero her the resholds				n is adopted	•			
* Allocation Difference *			-210.4	0.0	0.0	0.0	0.0	0.0	-210.4	0.0	0	0	0
Child Care Benefits Preschool Developmental Grant Match (FY24- FY26)	24GovAmd	IncT	2,415.0	0.0	0.0	2,415.0	0.0	0.0	0.0	0.0	0	0	0
Child Care Benefits has received a federal pu years. This comes with a match requirement agreements with the Alaska Mental Health Tr Development. 1007 I/A Rcpts (Other) 2,415.0 * Allocation Difference *	and will partially	be suppo	rted through reim	bursable services	0.0	2,415.0	0.0	0.0	0.0	0.0	0	0	0
			2,12010	0.0	010	2,10.0	0.0	0.0	0.0	0.0	Ŭ	0	Ū
Tribal Assistance Programs           16         Convert Maintenance of Effort for Temporary Assistance for Needy Families to Language	24GovAmd	Dec	-2,807.4	0.0	0.0	0.0	0.0	0.0	-2,807.4	0.0	0	0	0
The division needs flexibility over multiple ye Assistance for Needy Families (TANF) maint State meets certain participation thresholds i are met, the maintenance of effort requireme 1003 GF/Match (UGF) -2,807.4	enance of effort s not determined	requireme I until aftei	ents. Currently, inf r the end of the fis livision can potent	formation on wheth scal year. If the thr tially lapse genera	her the Zer( resholds al funds.	o impact i	f the lang	lage portio	numbers on is adopt	U	ıge, t	nere	18 a net
* Allocation Difference *			-2,807.4	0.0	0.0	0.0	0.0	0.0	-2,807.4	0.0	0	0	0
* * Appropriation Difference * *			-602.8	0.0	0.0	2,415.0	0.0	0.0	-3,017.8	0.0	0	0	0
Public Health Nursing													
17 Adopt Recommendations in the Alaska	24GovAmd	Inc	585.0	485.0	50.0	0.0	50.0	0.0	0.0	0.0	0	0	0
Tuberculosis Elimination Plan Alaska continues to have the highest rate of an epidemic of TB devastated Alaska's indig disease today. The Alaska TB Elimination Pla people by 25% by 2031.	enous peoples, i	vho contin	ue to bear a dispr	roportionate burde	en of 11 (	s increme #31)	nt request	is tied to	the request	on page	9 (#	26) a	ind page
As part of the Healthy Families Initiative, this screening/treatment capacity statewide in ord													

infectious. The department will also support efforts to recruit qualified public health nurses to rural high-incidence

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#### Numbers Differences Agencies: DOH

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### Agency: Department of Health

Public Health (continued)	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services Con	nmodities	Capital Outlay	Grants	Misc	PFT	<u>PPT</u>	TMP
Nursing (continued) Adopt Recommendations in the Alaska Tuberculosis Elimination Plan (continued) parts of the state, incentive programs to ind (eDOT) pilot program, and comprehensivel factors such as housing shortages and ecc 1004 Gen Fund (UGF) 585.0	y evaluate epidemi	ology of er											
* 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)	24GovAmd	IncT	100.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0	0	0
Department of Health, Division of Public He health care needs and prior diagnosis to ca improving the health, safety and wellbeing of a child, it is obligated to ensure that the adequate and efficient health care, a comp collected and maintained is fragmented an Although developing an Electronic Health f expand a data linkage pilot project into the above. The pilot project linked a few childre Defects Registry, Newborn Hearing and M contained in each system (names, sex, am information, it was deemed beneficial by O foster placement is medically appropriate. stakeholder engagement to identify the tec	ase workers and mo of children who are health, safety, and lete health record i d often incomplete. Record (EHR) is the next phase throug en that were recent etabolic screening d date of birth). Alt ffice of Children's S The staff would als hnical needs of dal	edical profe a in state cu wellbeing of s necessar e clear nee h developm ly placed in systems us nough this   Services (O o partner w ta holders a	essionals who are ustody. When the of that child is sec ry. Currently the h d, an intermediar nent of the new sl nto foster care wil sing a limited set pilot project only j (CS) staff in charg with legal counsel and to refine the c	e working with their state assumes cu- cure. To provide lealth information y step is to continu- taff position identifi th Medicaid, Birth of partial identifier provided partial ge of ensuring eac and continue design of the Elect	n, and Istody ue and ied s								
Health Record (EHR) system while addition 1092 MHTAAR (Other) 100.0	nal funding is soug	ht for the p	roject infrastructu	ire.									
* Allocation Difference *			100.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0	0	0
Emergency Programs 19 Fifth Year of Medical Provider Incentives and Loan Repayment (Ch15 SLA2019 (SB93)) The shortage of health care professionals i Professionals Workforce Enhancement Pro to work for three years in underserved area Employers will fully fund the program inclu- oversight and evaluation of the program.	ogram (known as " as in exchange for ding the cost to ad	SHARP-3") repayment minister the	) in which health o of student loans program. An adv	care professionals or direct incentive visory council prov	s. pag vides	877.5 is is an out- ge 1 (#2), 4	•			0.0 ote imp	o acts a	0 are n	0 oted o

Consumer Price Index, are set in statute. Health care professionals must meet eligibility criteria and be engaged in qualified employment. Payments are made after the professional completes a calendar quarter of qualified employment and are prorated based on number of qualified employment hours the professional worked.

1108 Stat Desig (Other) 955.6

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#### Numbers Differences Agencies: DOH

### Agency: Department of Health

		Column	Trans Type	Total Expenditure	Personal Services	Travel	Services Com	modities	Capital Outlay	Grants	Misc	PFT	PPT	тмр
Put	blic Health (continued)													
E	Emergency Programs (continued)													
	Remove Out-Year General Funds for MH Trust:	24GovAmd	Dec	-75.0	-75.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
20	DHSS Comprehensive Program Planning					This its	m and item	#22 ara	rolated Ite	m #20 row	orece ML	JTm	tot	
	Coordinator (FY21-FY28)													
	Cease contribution of General Funds - Ment	tal Health (fund ce	ode 1037)	for ongoing men	tal health initiative.	recomn	nendation b	ased on	zero-based	l budgeting	and iter	m #2	2 ad	ds it
			- 141	A	a second from a large second and									
	In FY2020, the department in conjunction win Strengthening the System, Alaska's Compre					Dack in	to the FY20	24 buage	et					
	statutorily required plan outlines the prioritie													
	planning, and funding decisions. This position													
	department to facilitate, manage, and coord													
	evaluation, and monitoring of the Comprehe													
	1037 GF/MH (UGF) -75.0			and togram pro										
	MH Trust: Crisis Now Continuum of Care	24GovAmd	IncT	333.0	0.0	0.0	0.0	0.0	0.0	333.0	0.0	0	0	0
	Grants (FY24-FY25)													
21	The Crisis Now system is a best practice fra	mework for deve	loping and	implementing cr	isis stabilization se	ervices								
	for people experiencing a behavioral health	crisis. The Trust	works with	various departm	ents within the stat	te and								
	community partners to stand-up this system													
	grants will be awarded to entities that are pa													
	people having a behavioral health crisis. Cu													
	are the typical responders to these individua													
	and develop a Crisis Now system of care wi Alaskans having a behavioral health crisis ir													
	1037 GF/MH (UGF) 333.0	Istead of law enit	orcement a	and/or emergency	medical services.	•								
22	MH Trust: Comprehensive Program Planning	24GovAmd	IncT	75.0	75.0	0.0	0.0	0.0	0.0	0.0	0.0	Δ	٥	0
22	Coordinator (FY21-FY28)	2-400 VAIIA	Inci	75.0	75.0		nis item and						പ്പ	tot
	In FY2020, in conjunction with the Trust, the	Department of H	lealth and	Social Services	undated and imple	mented								
	the Strengthening the System, Alaska's Con						commenda	tion base	ed on zero-	based bud	geting ar	ıd ite	m #	22 adds
	required by statute, outlines the priorities an	d infrastructure n	eeded for	the next five year	rs to inform progra	-					00			
	planning, and funding decisions. This position	on in the Departm	ent of Hea	alth (DOH), worki	ng collaboratively v	with 1t	back into th	ie FY202	4 budget					
	Trust staff, will build needed capacity within	DOH and the De	partment o	of Family and Col	mmunity Services (	(DFCS)								
	to facilitate, manage, and coordinate resour													
	monitoring of the Comprehensive Integrated	l Mental Health P	rogram pla	an. This position	will support the pla	inning								
	and facilitation of partner and stakeholder in	put for the future	comprehe	nsive Integrated	Mental Health Pro	gram								
	plan.													
	1037 GF/MH (UGF) 75.0				70.1							-		
	Allocation Difference *			1,288.6	78.1	0.0	877.5	0.0	0.0	333.0	0.0	0	0	0
	Chronic Disease Prevention and Health Pron											~		•
23	MH Trust: Access and Referral Network (FY24-	24GovAmd	IncT	315.0	0.0	0.0	315.0	0.0	0.0	0.0	0.0	0	0	0
	FY25)	and aladfare of				11:4								
	The access and referral network is a cloud-l													
	two-way digital provider communication, dat behavioral health capacity and referral platfor													
	call centers, providers, stakeholders, and co													
	can centers, providers, stakenolders, and co	minutary membe	is inis pi	auorni luenuiles,	unines, and tracks									

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#### Numbers Differences Agencies: DOH

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### Agency: Department of Health

		Column	Trans Type E	Total xpenditure	Personal Services	Travel	Services Con	modities	Capital Outlay	Grants	Misc	<u>PFT</u> F		ПМР
Put	blic Health (continued)													
	Chronic Disease Prevention and Health Prom	otion (continu	ed)											
	MH Trust: Access and Referral Network		,											
	(FY24-FY25) (continued)													
	Alaska's behavioral health resources. The be platform that connects referring entities to ide													
	mental health and substance use disorder tre	entment and entre	nce the like	elihood of recove	n for those with	mental								
	illness and/or substance use disorder, in add					in official								
	1092 MHTAAR (Other) 315.0	3		,										
~ 1	Remove Out-Year General Funds for MH Trust:	24GovAmd	Dec	-45.0	0.0	0.0	-45.0	0.0	0.0	0.0	0.0	0	0	0
24	Beneficiary Mental Health Status Data													
	Collection (FY22-FY32) Cease contribution of General Funds - Menta	al Health (fund co	do 1037) fo	r ongoing menta	l health initiative	]	This item and	d item #25	5 are relate	d. Item #2	4 revers	ses M	ΗTı	ust
	Cease contribution of General Funds - Menta			a ongoing menta	i neatti intiative.		acammanda	tion base	d on zoro	based bud	acting	nd it		25 adda
	The intent of the Beneficiary Mental Health S	status Data Collec	tion project	t is to ensure the	re is Alaska-spec	ilic data	ecommenda			based bud	getting a	na ne	em #	25 adds
	about the mental health status of Mental Hea					n, and 👔	t back into tl	he FY2024	4 budget					
	analysis of Alaska data will be recorded through								U					
	Youth Behavioral Risk Behavior Surveillance Surveillance System funding will be consiste													
	between the YRBS and School Health Profile													
	occurring in alternating years; BRFSS (\$25.0													
	MHTAAR; \$20.0 GF/MH).													
	1037 GF/MH (UGF) -45.0													
25	MH Trust: Beneficiary Mental Health Status	24GovAmd	IncT	45.0	0.0	0.0	45.0	0.0	0.0	0.0	0.0	0	0	0
	Data Collection (FY22-FY32)			to to operation the	na la Alaska succ	in data T	'his item and	l item #24	are relate	d. Item #2	4 revers	es MI	ΗTr	ust
	The intent of the Beneficiary Mental Health S about the mental health status of Trust bene					nic uata								
	of Chronic Disease Prevention and Health P						ecommenda	tion basec	1 on zero-l	based budg	geting ai	nd ite	em #.	25 adds
	collection, and analysis of Alaska data through						back into th	ne FY2024	budget					
	Youth Behavioral Risk Behavior Surveillance					will be			00					
	consistent as an annual survey, while remain													
	Profile programs differently in bi-annual cycle													
	allocation allows for funding of Trust benefici the standard approval process. If there are n													
	there are unspent Mental Health Trust Author				•									
	funds may be used to support the fielding of													
	MHTAAR; \$25.0 GF/MH) and YRBS/School	Health Profile (\$2	0.0 MHTAA	AR; \$20.0 GF/MH	4).									
	1037 GF/MH (UGF) 45.0		5		• •	0.0	015 0	0.0	0.0	0.0	0.0		0	
	Allocation Difference *			315.0	0.0	0.0	315.0	0.0	0.0	0.0	0.0	0	0	0
5	Epidemiology													
	Adopt Recommendations in the Alaska	24GovAmd	Inc	1,950.0	500.0	50.0	1,400.0	0.0	0.0	0.0	0.0	0	0	0
26	Tuberculosis Elimination Plan		_ / • •				-					6 (#1	7)	d name
	Alaska continues to have the highest rate of					and y,	is increment	request is	s neu to th	e request (	on page	0 (#1	<i>(</i> ) al	iu page
	an epidemic of TB devastated Alaska's indig						(#31)							
	disease today. The Alaska TB Elimination Pl	an outlines strate	gies to deci	rease TB inciden	ce in Alaska Nati	ve								

### Numbers Differences Agencies: DOH

Public Health (continued) Epidemiology (continued) Adopt Recommendations in the Alaska Tuberculosis Elimination Plan (continued) people by 25% by 2031.	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	<u>Misc</u> _	<u>PFT</u>	<u>PPT</u>	TMP
As part of the Healthy Families Initiative, screening/treatment capacity statewide ii infectious. The department will also supp parts of the state, incentive programs to (eDOT) pilot program, and comprehensiv factors such as housing shortages and e 1004 Gen Fund (UGF) 1,950.0 27 Support Efforts to Eliminate Congenital Syphilis Alaska ranked in the top ten nationally fo the highest number of congenital syphilis when a pregnant woman who is infected sexually transmitted infections (STIs) cos medical cost alone.	in order to detect and port efforts to recruit of increase staff retention vely evaluate epidemi acconomic challenges) 24GovAmd or sexually transmitted s (CS) cases ever rec l with syphilis transmit	I treat laten qualified pu on, expand hiology of ei ). Inc d diseases corded in th its the infect	t TB before it bec ublic health nurses d electronic Directl indemic TB in rura 3,295.0 s (STDs) in 2019, a he state. Congenit ction to her fetus.	ormes active and s to rural high-ind ly Observed The al Alaska (includi 0.0 and in 2020, Ala tal syphilis (CS)	cidence erapy ing ocours ates that	1,990.0 nis incren	1,305.0 nent request	0.0 is tied to	0.0 the reques	0.0 t on pag	çe 11	0 (#32)	)
As part of the Healthy Families Initiative, incidence and increase prevention of syp - Increasing testing and treatment capac - Increasing financial support for public h - Launching comprehensive communicat - Focusing prevention efforts on at-risk p experiencing homelessness 1004 Gen Fund (UGF) 3,295.0	philis by: sity and supplies state nealth personnel withi tion campaign to prev	ewide in commun vent STIs	nity-based clinics										
* Allocation Difference *			5,245.0	500.0	50.0	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	24GovAmd	Dec	-258.4	0.0	0.0	-258.4	0.0	0.0	0.0	0.0	0	0	0
28 Necessary Due to New Federal Grant Requirements					Th	is item is	tied to page	e 11 (item	30).				
The department is aligning authority by r to the federal grant requirements changing							1.0						
The department states that over the past Laboratories are underfunded for the wo Public Health Laboratories allocation of t 1003 GF/Match (UGF) -258.4	ork that is being perfor	rmed. Ther											
* Allocation Difference *		-	-258.4	0.0	0.0	-258.4	0.0	0.0	0.0	0.0	0	0	0
Public Health Laboratories													

#### Numbers Differences Agencies: DOH

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		Column	Trans Type B	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc PFT	РРТ Т	МР
Publ	ic Health (continued)		<u> </u>										
	ublic Health Laboratories (continued)		_									<u>^</u>	0
29	Second Year of Dentists/Dental Hygienist/ Radiolog Equip (Ch56 SLA2022 (SB173))	24GovAmd	Inc	31.0	60.0	36.0	-41.0	-4.0	-20.0	0.0	0.0 0	0	0
	Senate Bill 173 transfers responsibility for	the registration and	certification	n of dental radi	ological devices	from the Th	is is an o	out-year fis	scal note. O	ther fiscal i	note impact	s are n	oted on
	Board of Dental Examiners to the Departm							· · · · · · · · · · · · · · · · · · ·	7 (#19), and		1		
	There are approximately 2,200 individual	dental devices/pract	ices curren	the licensed for	radiological equi		$gc_1(\pi 2)$	$, \pm (\pi 12), 7$	$(\pi 19), and$	(# 30).			
	the Board of Dental Examiners. Due to the	volume of devices	, the Divisio	n of Public Hea	alth received a fu	ull-time							
	Radiological Health Physicist 1, range 19, located in Anchorage in FY2023 to provide												
	Through the second year of this bill, autho	rity is increased to s	support the	positions for th	e entire vear, rai	ther than							
	eight months. Travel authority is established	ed to perform on-site	e, routine ir	spections. One	-time authority f	or							
	purchases of testing equipment, developin laptop, phone, and a workstation for the ne			e to handle the	additional load,	, a field							
	laptop, phone, and a workstation for the hi	ew position is remov	veu.										
	This program will utilize interagency receip					ent of							
	Commerce, Community, and Economic De 1003 GF/Match (UGF) -193.2	evelopment as part	of the fees	charged to lice	nsed dentists.								
	1007 I/A Rcpts (Other) 224.2												
30	Add Federal Match Funding to Support	24GovAmd	Inc	258.4	0.0	0.0	258.4	0.0	0.0	0.0	0.0 0	0	0
	Laboratory Activities The department is aligning authority to sup	oport continued labo	pratory activ	vities by adding	general fund ma	atch This	s item is	tied to pag	ge 10 (item	28).			
	authority to Public Health Laboratories. Th	e department state:	s that over t	he past severa	years with CO	√ID-19, it							
	has become apparent that Public Health L	aboratories are und	lertunded to	or the work that	is being perform	ned.							
	Due to the federal grant requirements cha												
	general fund match is no longer needed. I allocation in the the Division of Public Hea		ecrement tra	ansaction in the	Bureau of Vital	Statistics							
	1003 GF/Match (UGF) 258.4	intri.											
31	Adopt Recommendations in the Alaska	24GovAmd	Inc	225.0	75.0	0.0	0.0	150.0	0.0	0.0	0.0 0	0	0
	Tuberculosis Elimination Plan Alaska continues to have the highest rate	of tuberculosis (TB)	in the U.S.	During the firs	t half of the 20th	century. This	s increm	ient reques	t is tied to	the request	on page 6 (	#17) ar	1d page
	an epidemic of TB devastated Alaska's inc	ligenous peoples, w	vho continu	e to bear a disp	proportionate bur	rden of 9 (#	26)						
	disease today. The Alaska TB Elimination people by 25% by 2031.	Plan outlines strate	gies to dec	rease TB incide	ence in Alaska N	lative							
	people by 23 % by 2031.												
	As part of the Healthy Families Initiative, the												
	screening/treatment capacity statewide in infectious. The department will also suppo												
	parts of the state, incentive programs to in	crease staff retention	on, expand	electronic Direc	tly Observed Th	nerapy							
	(eDOT) pilot program, and comprehensive factors such as housing shortages and ec			demic TB in ru	ral Alaska (inclu	ding							
	1004 Gen Fund (UGF) 225.0	unumic challenges)	•										
32	Support Efforts to Eliminate Congenital Syphilis	24GovAmd	Inc	705.0	205.0	0.0	0.0		0.0	0.0	0.0 0	0	0
							This	increment	request is	tied to the r	equest on p	age 10	
202	3-02-20 15:12:33			Leni	statine Jim	ance Divisio	a (#27)	)			-	Page: 1	1
				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			(*=*)	•				0	

#### Numbers Differences Agencles: DOH

## Agency: Department of Health

	Dic Health (continued) Public Health Laboratories (continued) Support Efforts to Eliminate Congenital Syphilis	Column	Trans Type Ex	Total xpenditure _	Personal Services	Travel _	Services _C	ommodities	Capital Outlay	Grants	<u>Misc</u>	PFT _	PPT	TMP
	(continued) Alaska ranked in the top ten nationally for the highest number of congenital syphilis ( when a pregnant woman who is infected w sexually transmitted infections (STIs) cost medical cost alone.	(CS) cases ever reco vith syphilis transmit	orded in the s the infection	state. Congen on to her fetus	iital syphilis (CS) . The CDC estim	occurs ates that								
	As part of the Healthy Families Initiative, D incidence and increase prevention of syph - Increasing testing and treatment capacity - Increasing financial support for public he - Launching comprehensive communicatio - Focusing prevention efforts on at-risk pop experiencing homelessness 1004 Gen Fund (UGF) 705.0	nilis by: y and supplies stated alth personnel withir on campaign to preve	vide 1 community ent STIs	/-based clinics										
33	Increase Fee Collection to Support Public Health Laboratories During the past several years with COVID- underfunded for the work that is being perf regulation but have never been pursued. T the cost of these services. The Division of collected.	formed. This situation This change in regula	n can be all ation would	leviated throug affect who car	h fees that are in bill patients' ins	urance for	569.1	0.0	0.0	0.0	0.0	0	0	0
	Proposed changes: - Radiological health fees (medical x-ray) + Increase fees from \$80 / x-ray tube an + Fees haven't increased since 1998 + Change regulations so fees "cover cos + Estimated increased revenue collection	id \$500 / accelerator sts of program" inste	ad of exact	fees	\$1,000 / accelera	tor								
	- Radiological health fees (dental x-ray) + No existing fees. Increase to \$600 / do + \$224.2 estimated revenue	evice with a 6-year o	cycle											
	<ul> <li>Hepatitis A and B screening</li> <li>No existing fees. Increase to \$12 / tes</li> <li>\$39.0 estimated revenue (based on 15)</li> </ul>		fees)											
	<ul> <li>Hepatitis C virus (HCV) genotyping</li> <li>No existing fees. Increase to \$247.45</li> <li>\$11.5 estimated revenue (based on 15</li> </ul>		fees)											
	- Hepatitis C virus (HCV) viral load													

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#### Numbers Differences Agencies: DOH

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### Agency: Department of Health

		Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
	lic Health (continued) ublic Health Laboratories (continued) Increase Fee Collection to Support Public Health Laboratories (continued) + No existing fees. Increase to \$50 / test + \$50.0 estimated revenue - Herpes Simplex Virus (HSV) serology													
	<ul> <li>+ No existing fees. Increase to \$32.50 / te</li> <li>+ \$12.0 estimated revenue (based on 15 p</li> <li>- MMRV titer checks</li> <li>+ No existing fees. Increase to \$13 / test</li> </ul>		fees)											
	<ul> <li>No existing fees. Increase to \$137 fest</li> <li>+ \$9.0 estimated revenue (based on 15 pe</li> <li>Mycoplasma genitalium (new analyte)</li> <li>+ No existing fees. Increase to \$35 / test</li> </ul>	rcent recovered f	ees)											
	+ \$2.1 estimated revenue (based on 15 pe 1005 GF/Prgm (DGF) 569.1 Allocation Difference *	rcent recovered f	ees)	1,788.5 9,063.7	340.0 1,403.1	36.0 136.0	786.5 5,210.6	646.0 2,001.0	-20.0 -20.0	0.0 333.0	0.0	0 0	0 0	0 0
	ior and Disabilities Services enior and Disabilities Community Based Gra Senior and Disabilities Community Based Grants and the Centers for Independent Living	a <b>nts</b> 24GovAmd	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 Independent Living, which are community-based, cross-disability, non-profit organizations that are designed and operated by people with disabilities. There are currently four grantees providing expertise and assistance to individuals to live independently through the use of assistive technology, benefits counseling, job skill training, transportation, home and work accommodations, and other modifications.													
	Increase funding by \$912.2 for the remaining services to the senior and disabilities commu 1004 Gen Fund (UGF) 1,498.2	unity.		·		ovide 0.0	0.0	0.0	0.0	-250.0	0.0	0	0	0
35	Remove Out-Year General Funds for MH Trust: Maintain Aging and Disability Resource Centers (FY22-FY26) Cease contribution of General Funds - Ment	24GovAmd al Health (fund co	Dec de 1037)	-250.0 ) for ongoing men	0.0 tal health initiativ		0.0	0.0	0.0	-250.0	0.0	U	0	U
	Older Alaskans, persons with disabilities, far information and referral on how to access a housing, transportation, equipment and othe complex programs and systems. The Aging counseling to assist individuals with understa	wide range of ser r health and socia & Disability Reso	vices (rel al needs) urce Cen	lated to health, ho which is critical to iters (ADRC) also	me care, financia help individuals provide options	il support, navigate								

#### Numbers Differences Agencies: DOH

regener beparanent er nearen	Agency:	Department	of Health
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Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	DDT	тмр
Senior and Disabilities Services (continued) Senior and Disabilities Community Based Grants (continued) Remove Out-Year General Funds for MH Trust: Maintain Aging and Disability Resource Centers (FY22-FY26) (continued) Increasing number of older Alaskans, demand for access to this information is growing and support for a statewide Infrastructure is critical to ensure timely access to services. Aging and Disability Resource Centers are the entrance into the state's long-term care services delivery system and are identified as a strategy under the Department of Health's priority for long-term care. 1037 GF/MH (UGF) -250.0												
* Allocation Difference *	11	1,248.2	0.0	0.0	0.0	0.0	0.0	1,248.2	0.0	0	0	0
<ul> <li>Senior and Disabilities Services Administration</li> <li>MH Trust: Care Coordination Support (FY24- FY25)</li> <li>Care Coordination Support provides funding toward the Car Disabilities Services (SDS) supporting state operating infras support and development of care coordination services, so community-based services. The Care Coordination Liaison assistance to support care coordinators. This position will h Harmony database, the 1115 waiver services, support land needs. This position will work with SDS to identify opportun in rural Alaska, assist with gathering the information needed system changes that can improve the care coordination ser 1092 MHTAAR (Other) 55.3</li> <li>Remove Out-Year General Funds for MH Trust: 24GovAnd IT Application/Telehealth Service System Improvements (FY16-FY25) Cease contribution of General Funds - Mental Health (fund improvements.</li> </ul>	structure. Th Trust benef will provide elp care coo ning, and ot ties to impri- t to evaluate vice. Dec	ne goal of this pro- iciaries have acce outreach, educat ordinators navigal her direct service ove the establish e a rate increase -63.0	ject is to assist wi ass to home and ion, and technical e quality assuran or administrative ment of care coor for this service, ar 0.0	ce, the support dinators nd other 0.0	6.7	0.3	0.0	0.0	0.0	0	0	0
Senior and Disabilities Services (SDS) will dedicate a full-time staff member to the telehealth project to support operating infrastructure. Individuals who receive personal care assistance or Medicaid waiver services require an annual reassessment conducted by a SDS nurse assessor to continue being eligible for services. Service recipients who live outside of the regional hub communities can experience difficulties getting timely assessments due to staff availability, weather, flight schedules, unexpected travel, individual medical needs, or other unexpected events. Delayed assessments are inefficient and can result in higher costs associated with travel and rescheduling. Through telehealth, reassessments are conducted with the individuals service recipient participating at their local clinic through collaboration with the regional health organization. This position will explore the possibility of other services or functions using telehealth to meet with individuals, family, or community members to improve access and timeliness of receiving services. Telehealth increases access to services through timely assessments, internal efficiencies, and ability to shift high travel costs. 1037 GF/MH (UGF) * Allocation Difference * -7.7 45.9 2.4 -56.3 0.3 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0												

#### Numbers Differences Agencies: DOH

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	Colu	Trans m Type	Total Expenditure	Personal Services	Travel	Services Com	nmodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP	
Sen	ior and Disabilities Services (continued)													
C	Commission on Aging													
38	Replace Mental Health Trust Authority Receipts 24GovAr	nd 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 Receipts for :			This item	and item	#44 on pag	ge 17 are r	elated. Th	ese are adj	ustment	s bas	sed of	n the	
	Reverse mental matrix anong Autonized Receipts for .					ased budget								
	- FY2023 GGU 3% COLA & \$12.50 HI Increase: -\$3.7			10111 11 400	0 2010 00	ised sudget	ing prace	1000						
	- General Government Unit (GG, GP, GY, GZ) SBS, and	Risk Managem	ent Rates: -0.4											
	1007 I/A Rcpts (Other) 8.9 1092 MHTAAR (Other) -8.9													
	Reverse MH Trust: Cont Alaska Commission 24GovAr	nd OTI	-200.0	-138.5	-1.0	-60.5	0.0	0.0	0.0	0.0	0	0	0	
39	on Aging Staffing and Beneficiary Program		20010	100.0							Ŭ	Ŭ	0	
	Support (FY18-FY28)					is item and	item #40	are related	1. Item #39	reverses	s MF	I Tru	ıst	
	This project funds the Alaska Commission on Aging (AC				rec	ommendati	ion based	on zero-h	ased budg	eting and	l iter	m #4	adds it	
	operating infrastructure. The planner is responsible for so the ACOA and the Trust, including gathering data for rep								used budg	cuing un			o uuuo n	
	preparing ongoing grant progress reports to the ACOA a					k into the F	Y 2024 Di	udget						
	other state and federal funding opportunities for Mental H	lealth Trust Aut	hority Authorize	d Receipts (MHTA	AR)									
	projects and to ensure effective use of available dollars. In addition, the planner position acts as liaison with the other beneficiary boards, including participating in the development of state plans, working on collaborative													
	other beneficiary boards, including participating in the development of state plans, working on collaborative projects, and other duties. The project funding supports the work of ACOA through training and to conduct outreach activities to connect with seniors who are Trust beneficiaries to better understand their needs. Outcomes and reporting requirements are negotiated with the Trust annually.													
	1092 MHTAAR (Other) -200.0													
40	MH Trust: Cont Alaska Commission on Aging 24GovAr	nd IncM	200.0	143.2	4.5	49.3	3.0	0.0	0.0	0.0	0	0	0	
10	Staffing and Beneficiary Program Support (FY18-FY28)				Th	is item and	item #39	are relate	d. Item #39	9 reverse	s M	HTr	ust	
	This project funds the Alaska Commission on Aging (AC	DA) planner po	sition and project	ts to support state										
	operating infrastructure. The planner is responsible for su				01110011	commendat			based budg	geting an	a ite	em #4	u adds	
	the ACOA and the Trust, including gathering data for rep					back into th	e FY2024	budget						
	preparing ongoing grant progress reports to the ACOA a other state and federal funding opportunities for Mental H				mize			0						
	projects and to ensure effective use of available dollars.													
	other beneficiary boards, including participating in the de													
	projects, and other duties. The project funding supports t	he work of ACC	OA through train	ing and to conduct										
	outreach activities to connect with seniors who are Trust		better understa	nd their needs. Ou	itcomes									
	and reporting requirements are negotiated with the Trust 1092 MHTAAR (Other) 200.0	annually.												
*	Allocation Difference *	-	0.0	4.7	3.5	-11.2	3.0	0.0	0.0	0.0	0	0	0	
													-	
G	overnor's Council on Disabilities and Special Education	on in the second se												
41	Reverse MH Trust: GCDSE Joint Staffing 24GovAr	nd OTI	-184.5	-169.4	0.0	-11.1	-4.0	0.0	0.0	0.0	0	0	0	
	(FY18-FY28)	tion (CODOD)	in Endor-Ib for		Thi	s item and i	item #42	are related	l. Item #41	reverses	MF	I Tru	st	
	The Governor's Council on Disabilities and Special Educ mandated by Congress. It is an expectation of the Menta				CTORES									
	planning, implementing, and funding a Comprehensive Ir				vith	ommendati			ased budge	eung and	i iter	n #44	adds it	
	,	g			bac	k into the F	Y2024 bi	ıdget						
								0						

#### Numbers Differences Agencies: DOH

					/igeneyi bi	oparation of	Troutin
Soni	Trans Total Personal <u>Column Type</u> Expenditure Services Trav	vel Services	Commodities	Capital Outlay	Grants	MiscPFT	PPTTMP
	by ernor's Council on Disabilities and Special Education (continued) Reverse MH Trust: GCDSE Joint Staffing (FY18-FY28) (continued) developmental disabilities and their families. The positions supported with this funding enable the GCDSE to provide up-to-date, valid information to the Trust on beneficiary issues, identify trends, participate in Trust activities, enhance public awareness, and engage in ongoing collaboration with the Trust and partner boards. 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.						
42	The Planner 3 provides expertise and support related to the Comprehensive Integrated Mental Health Plan for issues related to special education services and beneficiaries experiencing developmental disabilities. This 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 1092 MHTAAR (Other) -184.5 24GovAmd IncM 184.5 171.0 C The Governor's Council on Disabilities and Special Education (GCDSE) is federally funded to fulfill specific roles mandated by Congress. It is an expectation of the Trust that the Council will participate in planning, implementing, and funding a Comprehensive Integrated Mental Health Plan that serves people with developmental disabilities and their families. The positions enable the Council to provide up-to-date, valid information to the Trust on beneficiary issues, identify trends, participate in Trust activities, enhance public awareness, and engage in ongoing collaboration with the Trust and partner boards.	recommen	and item #41	on zero-b			00 H Trust m #42 adds it
	The Research Analyst 3 position provides the Governor's Council on Disabilities & Special Education with information about the needs of individuals with developmental disabilities and supports state operating infrastructure. Activities of this position, including travel, ensure Council efforts are conducted within the framework of the Mental Health Trust Authority's guiding principles while still meeting Congressional requirements. The Research Analyst is a staff member of the Governor's Council and funds go directly to the Council.	k					
43		<b>y</b> 0.0 0.0	0.0	0.0	0.0	0.0 0	0 0
10	GCDSE Joint Staffing (FY18-FY28) Cease contribution of General Funds - Mental Health (fund code 1037) for ongoing mental health initiative. The Governor's Council on Disabilities and Special Education (GCDSE) is Federally funded to fulfill specific roles mandated by Congress. It is an expectation of the Mental Health Trust Authority that the GCDSE participate in planning, implementing, and funding a Comprehensive Integrated Mental Health Plan that serves people with developmental disabilities and their families. The positions supported with this funding enable the GCDSE to		and item 45 the MH Trus				

#### Numbers Differences Agencies: DOH

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	Tra		Personal	T	Constant	Commission of the Second	Capital	Charte	Méne	DET				
Son	ior and Disabilities Services (continued)	pe Expenditure	Services	Travel	Services (	.ommodities	Outlay	Grants	Misc	PFT	<u>PPT TMP</u>			
	Remove Out-Year General Funds for MH Trust:	nued)												
	GCDSE Joint Staffing (FY18-FY28) (continued)													
	provide up-to-date, valid information to the Trust on beneficiary issu													
	activities, enhance public awareness, and engage in ongoing collat	oration with the Tru	st and partner boa	ards.										
	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 Comprehensive Integrated Mental Health Plan for													
	The Planner 3 provides expertise and support related to the Compr	ehensive Integrated	Mental Health Pla	an for										
	issues related to special education services and beneficiaries experiencing developmental disabilities. This position ensures the Trust has consistent access to critical comprehensive planning information and resources													
	position ensures the Trust has consistent access to critical compre- related to specific interests of beneficiary interests informed by the		ormation and reso	ources										
	1037 GF/MH (UGF) -50.0	3003E.												
44	Replace Mental Health Trust Authority 24GovAmd FndC	ng <b>0.0</b>	0.0	0.0	0.0	d item 38 c	0.0	0.0	0.0	0	0 0			
	Authorized Receipts for Zero-Based Budgeting			Th	us item an	d item 38 c	on page 15	o are related	d. These	are a	djustme	ents		
	The nature of initiatives funded through Mental Health Trust Author be brought to zero for appropriation through the legislative process		pts requires the b	balarice to ba	sed on the	MH Trust	's zero-ba	sed budget	ing prac	tices.				
	1037 GF/MH (UGF) 4.6	cuon nocur year.						0	01					
4.5	1092 MHTAAR (Other) -4.6													
45	MH Trust: GCDSE Joint Staffing (FY18-FY28) 24GovAmd In		0.0	0.0	50.0	0.0	0.0	0.0	0.0	0	0 0			
	The Governor's Council on Disabilities and Special Education is feo by Congress. It is an expectation of the Trust that the Council will p				Гhis item a	and item 43	3 on page	16 are relat	ted. Thes	se are	e adjustr	nents		
	funding a comprehensive integrated mental health program that ser				pased on th	he MH Tru	st's zero-l	pased budg	eting nr	actice	25			
	their families. The positions enable the Council to provide up-to-dat			neficiary			50 5 Zero 1	Jused Dudg	eting pro		.0			
	issues, identify trends, participate in Trust activities, enhance public collaboration with the Trust and partner boards.	awareness, and en	gage in ongoing											
	conaboration with the trust and pather boards.													
	The Research Analyst III position provides the Governor's Council of	on Disabilities & Spe	cial Education with	th										
	information about the needs of individuals with developmental disat													
	infrastructure. Activities of this position, including travel, ensure Cou of the Mental Health Trust Authority's guiding principles while still m													
	Research Analyst is a staff member of the Governor's Council and I			ine .										
	The Planner III position provides expertise and support related to the Plan for issues related to special education services and beneficiari													
	GCDSE joint staffing funds will partially support this position to ensu													
	comprehensive planning information and resources related to speci													
	the Council.		-	-										
	1037 GF/MH (UGF) 50.0													
	Allocation Difference *  Appropriation Difference * *	0.0 1.240.5	-48.4 2.2	0.0 5.9	51.6 -15.9	-3.2 0.1	0.0 0.0	0.0 1.248.2	0.0 0.0	0	0 0			
<b>-</b>	uppropriation Difference	1,240.5	۷.۷	5.9	-12.8	0.1	0.0	1,240,2	0.0	U	υv			

#### Numbers Differences Agencies: DOH

	_	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc _	PFT	PPT	TMP
	artmental Support Services													
С	ommissioner's Office													
46	Establish the Office of Health Savings	24GovAnd	Inc	1,046.2	150.5	. 0.0	895.7	0.0	0.0	0.0	0.0	0	0	0
	The Office of Health Savings in the Commis			•	v									
	Alaska. This office will work with the Departr improve the value of existing contracts and s					erto								
	1002 Fed Rcpts (Fed) 523.1	secure additional i	ecovene	s tor the department	on.									
	1003 GF/Match (UGF) 523.1													
47	Recruitment and Retention of Health	24GovAmd	Inc	150.0	0.0	0.0	150.0	0.0	0.0	0.0	0.0	0	0	0
-17	Professionals to Alaska													
	The health care sector is expected to grow t													
	jobs. To meet this need, Alaska will make in	0	<i>the heal</i>	thcare discipline	while simultaned	ously								
	recruiting to address the workforce shortage 1004 Gen Fund (UGF) 150.0	).												
10	1004 Gen Fund (UGF) 150.0 Intern (16-#089) to Support the Chief Medical	24GovAmd	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	۵	0	1
48	Officer	2-407/014	i ushuj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	U	T
	The position will be the primary support to the	ne Chief Medical C	Officer. T	he position will pr	ovide assistance	and								
	coordination to executive leadership in state	wide health policy	develop		nd goals.									
*.	Allocation Difference *			1,196.2	150.5	0.0	1,045.7	0.0	0.0	0.0	0.0	0	0	1
In	formation Technology Services		_											
49	Invest in Line of Business Information	24GovAmd	Inc	1,560.5	1,410.5	0.0	150.0	0.0	0.0	0.0	0.0	10	0	0
	Technology Departmental Support Services, Information Technology Services will invest in line of business information													
	technology by adding 10 full-time positions a													
	receipt authority will support the added positi													
	the divisions will have increments with appro-													
					ů.									
	Over time, departmental activities shifted fro													
	not grown with the expanded portfolio that re													
	department to complete projects while contin	nuing to support th	ne depart	ment's 181 applic	ations and do th	e								
	following:													
	- Complete cyber-attack recovery efforts													
	- Complete other high priority projects consist	sting of:												
	- Health Care Services, Medicaid Managem	nent Information S	ystem (M	MIS) - Fiscal Age	ent Onboarding									
	<ul> <li>Department of Health - Complete SharePo</li> </ul>	•												
	<ul> <li>Senior and Disabilities Services - Electron</li> </ul>													
	<ul> <li>Division of Public Health - Laboratory Information</li> </ul>	rmation Managem	ent Syste	em (LIMS) update	to Horizon Vers	ion 13								
	<ul> <li>Move to Vendor Hosted Solutions</li> <li>Division of Behavioral Health - FEI Host</li> </ul>	ting Alackola Auto	motod In	formation Manag	oment Sustam /									
						ANAINS)								
	- 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 upgra	de												
	- Health - SQL 2012 end-of-life upgrade													
	- Health - BizTalk 2020 end-of-life upgra													

#### Numbers Differences Agencies: DOH

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	artmental Support Services (continued) formation Technology Services (continued Invest in Line of Business Information Technology (continued)	Column	Trans Type	Total Expenditure _	Personal Services	Travel	Services Cor	modities	Capital Outlay	Grants	Misc _	<u> </u>	<u></u>	TMP
	Technology (continued) The following positions are added:													
	<ul> <li>Full-time Systems Programmer 1/2/3 (16.4)</li> <li>Full-time Systems Programmer 1/2/3 (16.4)</li> <li>Full-time Data Processing Manager 1 (16.4)</li> <li>Full-time Database Specialist 3 (16.4)</li> <li>Full-time Analyst/Programmer 4 (16.4)</li> <li>Full-time Systems Programmer 1/2/3 (16.4)</li> <li>Full-time Systems Programmer 1/2/3 (16.4)</li> <li>Full-time Microcomputer/Network Specialis</li> <li>Full-time Microcomputer/Network Technici</li> </ul>	4093), range 20/22 #094), range 22, loc range 22, located , range 20, located #097), range 20/22 #098), range 20/22 st 1/2 (16-#099), ra an 1/2 (16-#100), r	/23, locate in Juneau in Juneau /23, locate /23, locate nge 18/20 ange 14/1	d in Juneau uneau d in Juneau d in Juneau , located in Jun 6, located in Jun										
	- Full-time Program Coordinator 2 (16-#101) 1002 Fed Rcpts (Fed) 72.0	), range 20, located	d in Junea	u										
	1007 I/A Repts (Other) 1,488.5 Allocation Difference * .ppropriation 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 0.0	0.0 0.0	10 10	0 0	0 1
	icaid Services													
50	ledicaid Services Second Year of Mental Health Facilities; Meds; Patients (Ch41 SLA2022 (HB172))	24GovAmd	Inc	150.0	0.0	0.0 Thi	0.0 s is an out-	0.0	0.0	150.0	0.0	0 Octor	0 Dre n	0 oted o
	House Bill 172 expands capacity for psychia for involuntary commitment, similar to existin Evaluation and Treatment (DET) centers.					lities	e 1 (#2), 4 (				ote impe		ii e ii	sted 0
	This increase compensates providers when Evaluation and Stabilization (DES) and Des 1002 Fed Ropts (Fed) 150.0					Inated								
51	Extend Postpartum Medicaid Coverage Medicaid and Children's Health Insurance P Alaskans but currently only provide coverag postpartum coverage to address maternal n occur in the 12-month postpartum period). Il reduced maternal morbidity, improved mate (the average total per patient costs in 2013	e for up to 60 days norbidity and morta mproved health ou rnal mental health,	postpartu lity (more tcomes ind and other	m. Many states than half of pre- cluding chronic areas are asso	have extended gnancy-related dea disease prevention ciated with cost sa	iths , vings	0.0	0.0	0.0	2,600.0	0.0	0	0	0
52	was \$10,134 compared to \$6,894 for wome 1004 Gen Fund (UGF) 2,600.0 Medicaid Utilization and Inflation Due to the Public Health Emergency Wind Down				0.0	0.0	0.0	0.0	0.0	18,132.6	0.0	0	0	0
	The U.S. Department of Health and Human The department will no longer receive the a													

#### Numbers Differences Agencies: DOH

	icaid Services (continued) edicaid Services (continued) Medicaid Utilization and Inflation Due to the Public Health Emergency Wind Down (continued) result of the public health emergency endir increasing due to the winding down of the p and other Centers for Medicare and Medic	public health emerge	back to f	pled with increas			Services _	Commodities	Capital Outlay _	Grants	Misc _	PFT	<u>PPT</u>	<u>TMP</u>
53	1003 GF/Match (UGF) 18,132.6 Medicaid Services Cost Increases from COVID- 19 eFMAP Stepdown and Rate Rebasing The department estimates the Medicaid pro program in FY2024. The largest share of th medical assistance percentage (FMAP) ref Consolidated Appropriations Act of 2022 in - 2.5 percent starting July 1, 2023 - 1.5 percent starting October 1, 2023 - No enhanced FMAP starting January 1, 2	he increase (\$16,320 lated to the end of th a December. The 6.2	).0) is du e COVID	e to stepdown of I-19 pandemic ar	the enhanced f nd the passage	ederal of the	0.0	0.0	0.0	24,388.0	0.0	0	0	0
	Other factors leading to increased costs are rate rebasing for: - Home and Community Based Services through the Division of Senior and Disabilities Services (state) - \$1,650.0 - 1115 waiver services through the Division of Behavioral Health (state) - \$2,430.0 - Community Behavioral Health services through the Division of Behavioral Health (state) - \$4,000.0 The FY2024 Governor budget released on December 15 for an increment of \$18,132,600 included both Federal and State rate rebasing as well as questioned costs through audit findings. It did not take into account the unwinding of the eFMAP due to the Consolidated Appropriations Act passing in late December, after the Governor's budget was released. Items included in the December 15 budget are: - Centers for Medicare & Medicaid Services (CMS) Part D Pharmacy Clawback (federal) - \$7,108.0 - IHS encounter rate increase (federal) - \$3,200.0 - Resource Based Relative Value Scale (RBRVS) for physicians services rate increase (federal) - \$2,300.0													
* * A * * *	<ul> <li>Home and Community Based Services th         <ul> <li>Questioned costs through audit findings -</li> <li>1003 GF/Match (UGF)</li> <li>24,388.0</li> </ul> </li> <li>Allocation Difference *         <ul> <li>ppropriation Difference *</li> <li>Agency Difference * **</li> <li>* All Agencies Difference * ***</li> </ul> </li> </ul>		i Senior :	45,270.6 45,270.6 60,447.8 60,447.8	0.0 0.0 3,788.2 3,788.2	0.0 0.0 141.9 141.9	0.0 0.0 9,622.9 9,622.9	0.0 0.0 1,997.4 1,997.4	0.0 0.0 -20.0 -20.0	45,270.6 45,270.6 44,917.4 44,917.4	0.0 0.0 0.0 0.0	0 0 16 16	0 0 0 0	0 0 1 1