

FISCAL NOTE

STATE OF ALASKA
2003 LEGISLATIVE SESSION

Fiscal Note Number: _____
 Bill Version: _____
 () Publish Date: _____
 Dept. Affected: Health & Social Services
 BRU Medical Assistance Admin
 Component Health Purchasing Group

Revision Date/Time (Note if correction): _____
 Title MEDICAID FACILITY PAYMENT RATES

Sponsor RULES
 Requester GOVERNOR

Component No. 243

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
Personal Services						
Travel	(6.5)	(6.5)	(7.0)	(7.5)	(8.0)	(8.0)
Contractual	(3.1)	(3.1)	(3.2)	(3.5)	(3.6)	(3.6)
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	(9.6)	(9.6)	(10.2)	(11.0)	(11.6)	(11.6)

CAPITAL EXPENDITURES						
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CHANGE IN REVENUES (0)						
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	(4.8)	(4.8)	(5.1)	(5.5)	(5.8)	(5.8)
1003 GF Match	(4.8)	(4.8)	(5.1)	(5.5)	(5.8)	(5.8)
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
TOTAL	(9.6)	(9.6)	(10.2)	(11.0)	(11.6)	(11.6)

Estimate of any current year (FY2003) cost: _____

Mark this box (X) if funding for this bill is included in the Governor's FY 2004 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

This bill would eliminate the need for expenditures that support commission members' travel, per diem and other related support costs; and contractual funding for issuing public notices and court reporting services.

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 Division Medical Assistance
 Approved by: Joel S. Gilbertson, Commissioner
 Agency Department of Health and Social Services

Phone 465-1166
 Date/Time 03/03/2003
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