

ALASKA STATE LEGISLATURE
HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES STANDING COMMITTEE
January 25, 2005
3:04 p.m.

MEMBERS PRESENT

Representative Peggy Wilson, Chair
Representative Paul Seaton
Representative Tom Anderson
Representative Berta Gardner
Representative Sharon Cissna

MEMBERS ABSENT

Representative Vic Kohring
Representative Lesil McGuire

COMMITTEE CALENDAR

OVERVIEWS: DIVISION OF PUBLIC HEALTH: THE THREE MAIN CAUSES OF DEATH IN ALASKA; DIVISION OF PUBLIC ASSISTANCE: GENERAL OVERVIEW WITH REPORT ON THE FOOD STAMP PROGRAM

- HEARD

PREVIOUS COMMITTEE ACTION

No previous action to record

WITNESS REGISTER

DICK MANDSAGER, M.D., Director
Division of Public Health
Department of Health and Social Services, DHSS
Juneau, Alaska

POSITION STATEMENT: Presented the overview of the Division of Public Health.

KATHERINE FARNHAM, Director
Division of Public Assistance
Department of Health and Social Services, DHSS
Juneau, Alaska

POSITION STATEMENT: Presented the overview of the Division of Public Assistance.

ACTION NARRATIVE

CHAIR PEGGY WILSON called the House Health, Education and Social Services Standing Committee meeting to order at [3:04:58 PM](#). Representatives Seaton, Cissna, and Gardner were present at the call to order. Representative Anderson arrived as the meeting was in progress. Representatives Kohring and McGuire were excused.

OVERVIEW: DIVISION OF PUBLIC HEALTH: THE THREE MAIN CAUSES OF DEATH IN ALASKA

[3:05:53 PM](#)

DR. MANDSAGER, M.D., Director, Division of Public Health, Department of Health and Social Services, described how the division prevents deaths in Alaska. He referred to the Division of Public Health's handout, entitled "PUBLIC HEALTH: Protecting and Promoting the Health of all Alaskans - The Three Leading Causes of Death in Alaska" and highlighted the leading causes: cancer, heart disease, and unintentional injuries. He explained that Alaska has a higher percentage of deaths due to unintentional injuries than other states. He explained that this type of death causes a greater loss for society - economically, and socially.

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REPRESENTATIVE SEATON inquired as to child mortality rates in Alaska.

DR. MANDSAGER said that he is unsure as to how children are represented within the statistics and will address the question in the future.

DR. MANDSAGER described the major causes of death, nationally, and listed: diet, tobacco, decreased activity, and alcohol.

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DR. MANDSAGER stated that the effects and burdens of these causes increase over time. He emphasized that society pays for this through government funded Medicare and Medicaid programs. He announced that chronic diseases, which are related to diet, tobacco use, and activity, cause the majority of deaths in America.

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DR. MANDSAGER said that diet is an enormous contributor to issues of obesity. He commented on the shift throughout America toward larger portion sizes. He stated that increased caloric densities and larger portion sizes are contributors to the problem of obesity.

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REPRESENTATIVE ANDERSON brought up the issue of soda in schools and questioned about the effects of soda on the body.

DR. MANDSAGER responded that the caloric intake of soda in schools has increased. He explained that one, 20 ounce soda per day, over the course of one year, would cause a person to gain seven or eight pounds. He discussed the complexity interacting with schools and addressing vending machine issues. He explained that high schools in Anchorage, Alaska are making large profits off of their vending machines.

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DR. MANDSAGER responded to Representative Seaton's question regarding youth caloric output estimates and offered his opinion that both schools and communities can help increase activity for children. He then referred to the handout and highlighted the issue of Alaska's growing elderly population and the associated health costs for the future.

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DR. MANDSAGER described increasing weight gain and obesity trends of Alaskan adults. He stated that over 35 percent of kids at age 18 are overweight or obese and discussed the future health implications for these children and the associated costs for society.

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REPRESENTATIVE SEATON inquired as to current body mass index definitions set by the Center for Disease Control, (CDC).

DR. MANDSAGER stated that he would research the changes set by the CDC and email his findings to each committee member.

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DR. MANDSAGER discussed lung, colon, breast, and cervical cancer. He described the prevention programs specific to each illness. He stated that Alaska screening data for colon cancer is available through the American Cancer Society, and he would obtain that information for the committee. He stated that risk factors related to colon cancer include poor diet, tobacco use and genetics.

DR. MANDSAGER turned to heart disease. He stated that Alaska's heart disease death rate is below America's. He attributed this to prevention, technology, and medicine. Dr. Mandsager discussed tobacco use as a contributor and cause for death. Fortunately, Alaska has had a reduction in teenage smoking and data shows that people are smoking less, he informed.

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DR. MANDSAGER explained that Alaska has high death rates related to unintentional injuries and defined what types of injuries are unintentional. He referred to the handout, and showed that, in Alaska, one person a day (between the ages of 15 and 55) dies from unintentional injuries. He stated that falls are a significant injury for elderly populations and are extremely costly for the individual and the State of Alaska.

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DR. MANDSAGER explained that the division has a proposal in to the CDC about improving fall prevention education with elders. He highlighted the division's prevention programs that have been successful in Alaska over the past year.

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REPRESENTATIVE GARDNER inquired as to the role of alcohol in relation to the major causes of death in Alaska.

DR. MANDSAGER emphasized that, according to the division, alcohol is a very significant contributor to unintentional injuries in Alaska.

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DR. MANDSAGER discussed chronic disease prevention. He explained that this prevention is funded by the federal government and that those funds are not reliable year to year.

He stated his belief that chronic disease work should focus on three areas: surveillance data collection, primary prevention, and secondary prevention. He advocated using prevention models to improve people's self-management techniques. He discussed new strategies and programs that are available to the State of Alaska for chronic disease management, prevention and education.

DR. MANDSAGER explained that what Alaskans need to do in order to achieve greater, overall health. He described the difficulty of instituting these changes as they contradict the modern American lifestyle.

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REPRESENTATIVE GARDNER inquired as to alcoholism and whether it is considered a chronic disease.

DR. MANDSAGER said that alcoholism is not considered a chronic disease and, as a result, has caused debate within the division.

CHAIR WILSON stated that she would like a total cost of corrections, related to alcohol, from state departments. She said that using this, the House Health, Education and Social Services Standing Committee could make a recommendation, as a committee, to the HESS finance chairman.

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DR. MANDSAGER said that the breast and cervical screening program has been utilized throughout the state. He explained that the number of women who took advantage of free screenings surpassed the division's estimates. He then explained that poison control centers have been regionalized for cost, efficiency and quality and are no longer federally funded. He commented on the importance and value of the hotline and the necessary funding to keep it active.

DR. MANDSAGER concluded with remarks on the success of seat belt usage in Alaska. He stated that Alaska is now in range with the rest of the United States.

DIVISION OF PUBLIC ASSISTANCE: GENERAL OVERVIEW WITH REPORT ON THE FOOD STAMP PROGRAM

[4:12:52 PM](#)

KATHERINE FARNHAM, Director, Division of Public Assistance, Department of Health and Social Services, described the mission of the division as promoting and providing basic benefits to Alaskans in need. She explained what the division's core services were and included temporary assistance in cash benefits, support in the form of food stamps, nutrition programs, childcare assistance, and providing eligibility for medical services. She stated that the division attempts to knit together offices around the State of Alaska and help clients access programs. She announced that the division has placed a high emphasis on accurate and timely benefits but has also added extra missions and measures that would promote self-sufficiency.

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CHAIR WILSON inquired as to welfare assistance programs in Alaskan villages and their specific time frame limits.

KATHERINE FARNHAM clarified that the federal law allows exemption from the 60-month time limit for native villages where more than 50 percent of the population report being unemployed.

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KATHERINE FARNHAM stated that caseload reduction strategies are successful because of the new emphasis on employment as an outcome and a changed expectation of clients' current skills. She explained that the support of these skills, provided by the division, helps bridge the gap toward self-sufficiency.

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REPRESENTATIVE CISSNA inquired as to the "Welfare-to-Work" program's success and the co-occurrence of specific job openings. She commented that she would like to be informed as to what types of legislation could benefit Alaskans in seeking employment.

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KATHERINE FARNHAM said that the tribal TANF systems can define subsistence activity as a work-related activity. She continued:

Part of the requirement for obtaining public assistance benefits is...adhering to some work participation rates that are established by the federal government...and so we, with all of our

clients, and our contractors, and the tribal organizations ... utilize that participation rate ... in whether it be training, job preparation, subsistence ... we've even got a tribe that wants to include attending your children's parent-teacher conferences as ... responsibility that you have to your society ... those, the definition of work participation, can be set by the tribal organizations and, I believe, they do, if not all of them, I know some of them include subsistence as a work activity ... I do not believe that at a statewide level we do, but that's, again, why the rural, regionally operated programs are good because they're more attuned to the specific economic activities out there.

And, if I may address the question raised by Representative Cissna ... we are trying to increase our linkage to economic development priorities in each region through the emerging regional advisory councils and ... I will share some data I recently saw, for example, that showed entrepreneurism in Alaska is actually alive and well and what we're seeing is that services are being provided closer to home ... and I was surprised by the data to see that about 80 percent of all of the self reported new entrepreneurs getting going are outside of Anchorage ... but then, it's not surprising when you realize in a small community we need our own services delivered by our own people ... many of our training opportunities have been geared towards promoting that kind of self-sufficiency through one's own means, maybe training of skills that are locally delivered ... Alaska is, I think, less flying outside or flying maybe to hubs for services and we're seeing more robust ... economic activities in villages.

CHAIR WILSON inquired as to merging the food stamp program with other [assistance] programs and using the money saved as a means to fund apprenticeships.

MS. FARNHAM explained a similar program within the division as, "subsidized employment as a transition in partnership with the local employers." She also stated that the division is working with the Department of Labor to create "job carving" which would suit people with very special, specific abilities.

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KATHERINE FARNHAM explained that the division is attempting to increase the percentage of temporary assistance families leaving with earnings and not returning to the program for six months. She provided the percentages of families reaching goals set by the division and explained that the division has had to develop more creative family plans with partner agencies. She stated that the division has met federal rates consistently and has achieved a high performance bonus of \$9.5 million. This money will be used to support new programs for the division, she said.

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MS. FARNHAM reported that the State of Alaska, in fiscal year 2003, was the worst in the nation for food stamp accuracy. She stated that the Department of Health and Social Services organized a campaign to increase accuracy rates. She said that rates are now, as of fiscal year 2004, on par nationally and described how this was accomplished. As a result of this success, she said, Alaska will receive a high performance bonus for being the most improved state. She highlighted how benefits accrued from increasing accuracy with food stamps improved the performance and quality of other programs.

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MS. FARNHAM said that the division has been able to reduce costs for direct cash benefits and transfer those resources into better, integrated services and prevention programs. The division has used its partnership with the Alaska Job Center Network as a key part of the solution, she said. She related that the division attempts to increase investments in communities in ways that prevent poverty and the need for public assistance.

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MS. FARNHAM stated that [the division] supports domestic violence shelters and other agencies on substance abuse prevention. She added that, "the possibility of improving the health and well-being in a family or in a community through these preventative techniques, with the community organization, is really a key part of our current strategies." She concluded and remarked on the importance of the childcare assistance program and its new placement within the division of public assistance.

ADJOURNMENT

There being no further business before the committee, the House Health, Education and Social Services Standing Committee meeting was adjourned at 4:45:51 PM.