

ALASKA STATE LEGISLATURE
HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES STANDING COMMITTEE

February 5, 2008

3:04 p.m.

MEMBERS PRESENT

Representative Peggy Wilson, Chair
Representative Anna Fairclough
Representative Paul Seaton
Representative Sharon Cissna
Representative Berta Gardner

MEMBERS ABSENT

Representative Bob Roses, Vice Chair
Representative Wes Keller

COMMITTEE CALENDAR

HOUSE BILL NO. 324

"An Act relating to the Alaska housing trust fund and to the Alaska Council on the Homeless; and providing for an effective date."

- MOVED CSHB 324(HES) OUT OF COMMITTEE

HOUSE BILL NO. 325

"An Act relating to the teachers' and nurses' housing loan program in the Alaska Housing Finance Corporation; and providing for an effective date."

- MOVED HB 325 OUT OF COMMITTEE

PRESENTATION: TRAUMATIC BRAIN INJURY AND MILITARY VETERANS

- HEARD

PREVIOUS COMMITTEE ACTION

BILL: HB 324

SHORT TITLE: LOW-INCOME HOUSING; HOMELESSNESS

SPONSOR(s): RULES BY REQUEST OF THE GOVERNOR

01/17/08	(H)	READ THE FIRST TIME - REFERRALS
01/17/08	(H)	HES, FIN
01/29/08	(H)	HES AT 3:00 PM CAPITOL 106

01/29/08 (H) Heard & Held
01/29/08 (H) MINUTE(HES)
02/05/08 (H) HES AT 3:00 PM CAPITOL 106

BILL: HB 325

SHORT TITLE: TEACHERS/HEALTH CARE PROFESS HOUSING LOAN
SPONSOR(S): RULES BY REQUEST OF THE GOVERNOR

01/17/08 (H) READ THE FIRST TIME - REFERRALS
01/17/08 (H) HES, FIN
02/05/08 (H) HES AT 3:00 PM CAPITOL 106

WITNESS REGISTER

BRYAN BUTCHER, Director
Governmental Affairs & Public Relations
Alaska Housing Finance Corporation (AHFC)
Department of Revenue
Anchorage, Alaska

POSITION STATEMENT: Introduced the Committee Substitute for HB 324 and HB 325, on behalf of the governor.

JEFF JESSEE, Chief Executive Officer
Alaska Mental Health Trust Authority (AMHTA)
Department of Revenue
Anchorage, Alaska

POSITION STATEMENT: Answered questions during the hearing on HB 324.

VIVIAN HAMILTON, Communications Manager
Alaska Mental Health Trust Authority
Department of Revenue
Anchorage, Alaska

POSITION STATEMENT: Answered questions during the hearing on HB 324.

MARK ROMICK, Director
Planning & Program
Alaska Housing Finance Corporation
Department of Revenue
Anchorage, Alaska

POSITION STATEMENT: Answered questions during the hearing on HB 324.

PAT LUBY, Advocacy Director
AARP in Alaska
Anchorage, Alaska

POSITION STATEMENT: Testified in support of HB 324.

RICHARD WARRINGTON, Ambassador
Brain Injury Network
Kenai, Alaska

POSITION STATEMENT: Testified in support of HB 324.

PAUL KAPANSKY, Director
Mortgage Operations
Alaska Housing Finance Corporation (AHFC)
Department of Revenue
Juneau, Alaska

POSITION STATEMENT: Answered a question during the hearing on HB 325.

NANCY DAVIS, Registered Nurse
Coordinator for Nurse Recruitment and Retention
Division of Public Health
Department of Health & Social Services
Juneau, Alaska

POSITION STATEMENT: Testified in support of HB 325.

JILL HODGES, Executive Director
Alaska Brain Injury Network
Anchorage, Alaska

POSITION STATEMENT: Gave the presentation on Traumatic Brain Injury and Military Veterans.

STEPHANIE TANNER
Eagle River, Alaska

POSITION STATEMENT: Participated in the presentation by the Alaska Brain Injury Network.

ACTION NARRATIVE

CHAIR PEGGY WILSON called the House Health, Education and Social Services Standing Committee meeting to order at [3:04:46 PM](#). Representatives Wilson, Seaton, Gardner, and Fairclough were present at the call to order. Representative Cissna arrived as the meeting was in progress.

HB 324-LOW-INCOME HOUSING; HOMELESSNESS

[3:05:09 PM](#)

CHAIR WILSON announced that the first order of business would be HOUSE BILL NO. 324, "An Act relating to the Alaska housing trust fund and to the Alaska Council on the Homeless; and providing for an effective date."

[3:06:39 PM](#)

BRYAN BUTCHER, Director, Governmental Affairs & Public Relations Alaska Housing Finance Corporation (AHFC), Department of Revenue, informed the committee that there were four changes made to HB 324.

[3:07:10 PM](#)

REPRESENTATIVE SEATON moved to adopt CSHB 324, Version 25-GH2006\C, Cook, 2/5/08, as the working document. There being no objection, Version C was before the committee.

[3:07:52 PM](#)

MR. BUTCHER stated that the first change was on page 3, line 1 through 13, where language was added to allow designees to be appointed for each member of the advisory council. The second change was on page 3, line 21 and line 22, where language was changed to allow staggered three year terms for advisory council members. Next, on page 5, line 2 through 23, the addition of the definition of homelessness was added. He explained that this definition comports with that used by the U. S. Department of [Housing] and Urban Development (HUD) and the U. S. Department of Education. The final change was also on page 5, line 26 through 31, where language was added to describe the term tenures of the six public members of the advisory council.

[3:09:10 PM](#)

REPRESENTATIVE SEATON asked how HUD makes the area designations of median adjusted income and how large the areas are. In addition, he asked whether there are anomalies that occur within the economic boundaries or geographic areas that are designated.

[3:10:28 PM](#)

MR. BUTCHER deferred to the representative from the Alaska Mental Health Trust Authority (AMHTA).

[3:10:37 PM](#)

JEFF JESSEE, Chief Executive Officer, Alaska Mental Health Trust Authority (AMHTA), Department of Revenue, asked Representative Seaton to repeat his question.

[3:11:03 PM](#)

REPRESENTATIVE SEATON reiterated his question.

[3:11:17 PM](#)

MR. JESSEE said that he did not know.

[3:11:53 PM](#)

VIVIAN HAMILTON, Communications Manager, Alaska Mental Health Trust Authority, informed the committee that to determine economic or geographic areas, HUD divides the state into regions and cities, depending on population.

[3:12:20 PM](#)

REPRESENTATIVE SEATON further asked whether there may be anomalous situations where there will be certain areas with variable incomes. He expressed concern that median income variables in a specific area will affect homeless people; for example, those who are found in a region of low median income that would set the 80 percent of median income so low that people in homelessness may not qualify.

[3:15:29 PM](#)

MARK ROMICK, Director, Planning & Program, Alaska Housing Finance Corporation, Department of Revenue, stated that the median incomes are provided on a boroughwide basis and are based on census data from the approximately 30 boroughs in the state. Therefore, there should not be anomalies anywhere in the state, even for census areas of low income, as this bill targets people living well below the preference levels.

[3:16:48 PM](#)

MR. JESSEE acknowledged the validity of Representative Seaton's concern. He stated that an advisor from the Alaska Council on the Homeless sits on the AHFC board and that if a significant number of homeless individuals were not being served, the housing trust would become aware of the situation. Mr. Jessee assured the committee that the bill was written to address

homelessness and the housing trust will request an adjustment of the income limits, if they become a barrier.

[3:18:22 PM](#)

CHAIR WILSON advised that a problem with the word "shall" is best addressed now.

[3:18:41 PM](#)

MR. JESSEE stated that he preferred to maintain the current language, in order to avoid the possibility that the funds may be expended for those whose incomes are above the 80 percent income level limit.

[3:19:42 PM](#)

REPRESENTATIVE SEATON clarified that his intent was not to insert "may" but to ensure that there are no sections of the state that the housing trust could not assist.

[3:20:23 PM](#)

MR. BUTCHER offered to research Representative Seaton's question.

[3:20:42 PM](#)

CHAIR WILSON opened public testimony.

[3:21:16 PM](#)

PAT LUBY, Advocacy Director, AARP in Alaska, expressed his organization's strong support of HB 324. He stated that many homeless people do not fit the stereotype and listed many causes for homelessness. In addition, AARP is concerned about the many children who are suffering from poor health and uncertain education due to homelessness. Mr. Luby opined that HB 324 will help homeless citizens.

[3:23:11 PM](#)

RICHARD WARRINGTON, Ambassador, Brain Injury Network, informed the committee that he is a survivor of a traumatic brain injury (TBI) that he suffered 30 years ago. He has lived in Alaska for 22 years and asked the committee to ensure that funding to

support TBI survivors is not cut. He related the experience of a TBI survivor in Anchorage who is homeless.

[3:25:31 PM](#)

CHAIR WILSON closed public testimony.

[3:25:59 PM](#)

REPRESENTATIVE FAIRCLOUGH asked whether the language on page 3, line 19, should read "housing development, financing, **or** consumers of affordable housing."

[3:26:33 PM](#)

REPRESENTATIVE GARDNER offered her interpretation of the language such that, of the four members, one or more has experience in the three areas of housing development, financing, and consumers of affordable housing.

[3:26:55 PM](#)

REPRESENTATIVE GARDNER moved to report HB 324, Version 25-GH2006\C, Cook, 2/5/08, as amended, out of committee with individual recommendations and the accompanying fiscal notes. Hearing no objection, CSHB 324(HES) was reported out of the House Health, Education and Social Services Standing Committee.

HB 325-TEACHERS/HEALTH CARE PROFESS HOUSING LOAN

CHAIR WILSON announced that the next order of business would be HOUSE BILL NO. 325, "An Act relating to the teachers' and nurses' housing loan program in the Alaska Housing Finance Corporation; and providing for an effective date."

[3:28:03 PM](#)

BRYAN BUTCHER, Director, Governmental Affairs & Public Relations, Alaska Housing Finance Corporation (AHFC), Department of Revenue, stated that HB 325 would provide zero down payment loans to qualified teachers and health care professionals. This program originated five years ago as an incentive program to retain teachers and nurses in communities in Alaska by eliminating the required down payment to buy a home. The program has been operating for four and one-half years and three hundred and seventy-three loans have been approved; there has only been one foreclosure. Mr. Butcher explained that this very

successful program is approaching its sunset date and needs to be extended. In fact, the governor's office asked that the program be expanded to include health care professionals and to eliminate the sunset clause.

[3:30:49 PM](#)

CHAIR WILSON asked for a breakdown between teachers and nurses.

[3:30:56 PM](#)

MR. BUTCHER said that the attachment contains a list of loans by community; the teacher's loans are indicated by an "e" and the nurse's loans are indicated by a "h." He added that the loans add no additional risk to AHFC or to the state.

[3:31:56 PM](#)

REPRESENTATIVE GARDNER asked who is included in "health care professionals" besides nurses and doctors.

MR. BUTCHER described a different program for teachers and health care professionals in rural areas and that works with school districts and communities to build housing. He stated that the definition will be the same for both programs.

[3:33:04 PM](#)

PAUL KAPANSKY, Director, Mortgage Operations, Alaska Housing Finance Corporation (AHFC), Department of Revenue, remarked:

As Bryan was referring to, a, our grant program, we have health professional housing, is defined as housing for any person who is licensed or board certified by the State of Alaska, in a health profession, holds a state certification in a health occupation, or is an administrator of a hospital or clinic, or employed as an aide, attendant, assistant, counselor, or technician in a health field. Occupancy of the household is limited to health professionals and family members.

[3:34:10 PM](#)

CHAIR WILSON asked whether hospital administrators should qualify for the loans. She suggested limiting the qualification to areas of shortages.

[3:34:48 PM](#)

MR. BUTCHER stated that income limitations were considered; however, AHFC loans are not attractive to borrowers who can qualify for standard loan programs. Therefore, the benefit of this program is mainly to young borrowers and first-time homeowners who can not afford a down payment.

[3:36:24 PM](#)

REPRESENTATIVE GARDNER expressed her concern about the expansion of the eligibility definition. She explained that aides and attendants may not have an investment in their health care career in the way that a nurse or dental hygienist would, and suggested the need for ongoing participation in the health care field.

[3:37:12 PM](#)

MR. BUTCHER acknowledged that determining this information would be too labor intensive for AHFC's mortgage department. He reminded the committee that this program only helps borrowers buy a home with regular interest rates on the loan.

[3:37:58 PM](#)

CHAIR WILSON shared her experience of working with health care aides, and supported their eligibility.

[3:38:34 PM](#)

REPRESENTATIVE FAIRCLOUGH asked whether the bill was before the committee.

[3:38:54 PM](#)

CHAIR WILSON stated that HB 325 was before the committee.

[3:39:09 PM](#)

NANCY DAVIS, Registered Nurse, Coordinator for Nurse Recruitment and Retention, Division of Public Health, Department of Health & Social Services, stated her support for HB 325, paraphrasing from a prepared statement, which read as follows [original punctuation provided]:

I want to share with you how the AHFC Teacher and Nurses' Housing Loan Program has been helpful in our recruitment and retention efforts.

Public Health Nursing has used the AHFC Teacher and Nurses' Housing Loan Program as a recruitment incentive since its inception (2003). AHFC information is routinely provided to all nurses inquiring about employment opportunities-with brief descriptions of the Teachers and Nurses Housing Loan Program as well as two attractive Rural resident loan options. In our current revisions to our state Web site, we will offer a "Helpful Link" to the AHFC Housing loan information

In my long career of recruiting and hiring nurses in Alaska it has always been important to feature incentives for nurses to come to our State to meet the patient care needs and the employer needs that exceed our own in-state nursing graduates. Incentive for nurses to live and work in rural areas is a real bonus.

Now in the recruiting environment of today, with the smaller number of applicants available, the global and local nursing shortages, and the highly competitive job market for all kinds of health workers, any and all incentives become important for attracting a workforce to meet our health care needs. Additionally, with the large student loan debt of today's workforce, attractive and safe mortgage options are even more important for establishing in an Alaska community.

I may never know whether the nurse uses those loan programs, but I do know that the reaction to our state offering specific housing incentives to nurses makes a positive impression on the applicant. It says that Alaska values those professionals and is eager to assist them in becoming Alaskans. A Nurse who chooses to purchase a home in one of our communities makes a real commitment to that community as well. JOKE: A mortgage becomes a great retention strategy.

If other health professionals can be well served by this housing loan option, and AHFC is able to include additional groups of recipients, it may well help with

the recruitment of other health professionals to Alaska.

[3:43:23 PM](#)

REPRESENTATIVE GARDNER asked Ms. Davis for the top reasons that nurses leave the profession.

[3:43:43 PM](#)

MS. DAVIS said that nurses are aging out of the work force. In addition, nursing is still predominantly a female occupation, but women today have many career choices from higher paying professions with good working conditions.

[3:45:17 PM](#)

CHAIR WILSON closed public testimony.

[3:45:26 PM](#)

REPRESENTATIVE FAIRCLOUGH moved to report HB 325 out of committee with individual recommendations and the accompanying fiscal notes. There being no objection, HB 325 was reported out of the House Health, Education and Social Services Standing Committee.

TRAUMATIC BRAIN INJURY AND MILITARY VETERANS

CHAIR WILSON announced that the final order of business would be a presentation on Traumatic Brain Injury and Military Veterans.

[3:46:11 PM](#)

JILL HODGES, Executive Director, Alaska Brain Injury Network, directed the committee's attention to the materials provided by the Alaska Brain Injury Network (ABIN). She stated that the military has brought to light the issue of traumatic brain injury (TBI). The Traumatic Brain Injury Act of 1996 provides grant funds to the DHSS that enables screening of TBIs through mental health centers in the state. This screening has discovered the true cost and impact of these injuries throughout the state, and has shown that victims need the support of the state, community providers, the military, and individuals. Ms. Hodges shared that her organization, along with the DHSS and the Alaska Mental Health Trust Authority (AMHTA), is coordinating meetings with Elmendorf Air Force Base, the VA, the National

Guard, the Wounded Warriors Program, and the Vocational Rehabilitation program in order to discuss the impacts of TBI survivors on the state.

[3:52:06 PM](#)

MS. HODGES continued to explain that the military estimated that about 400 soldiers returned to Alaska with TBI in the month of December. Elmendorf Air Force Base prepared to meet those returning veterans by establishing a clinic on base to identify and treat mild TBIs.

[3:53:05 PM](#)

CHAIR WILSON asked whether there has been enough time for screening.

[3:53:14 PM](#)

MS. HODGES noted that returning soldiers go on leave when they first return, thus the impact will be seen 90 days post return. The National Guard has implemented a "grand rounds" program that interviews members 90 days after the member's return and refers them to available sources of support, if necessary. Ms. Hodges informed the committee that the mission of the ABIN is to educate, plan, coordinate, and advocate for a comprehensive service delivery system of care for TBI survivors. She pointed out that TBIs occur in Alaska at 30 percent above the national average. Ms. Hodges concluded by asking for the committee's support of TBI awareness, through SCR 17, and of future funding, through AMHTA.

[3:56:42 PM](#)

STEPHANIE TANNER provided a brief history of her husband's mental decline after returning from Iraq and the pressure that the family has endured. The burden of her husband's therapy, medication, and disability is overwhelming. She emphasized that her husband and others desperately need personal case management assistance.

[3:59:26 PM](#)

CHAIR WILSON asked whether Ms. Tanner's husband could walk.

MS. TANNER said that he needs assistance to walk, as his depth perception does not function.

[4:00:00 PM](#)

REPRESENTATIVE CISSNA asked whether there are support groups.

MS. TANNER stated that the ARMY Warrior Transition Unit is attempting to create a family readiness group, but she has not found a support group in the private sector.

MS. HODGES added that there are some civilian head injury support groups around the state.

[4:01:36 PM](#)

REPRESENTATIVE GARDNER pointed out the importance of having a diagnosis and family support. She stated her surprise that a service related injury would not garner more support from the military.

MS. TANNER explained that the treatment is very expensive and the military's first concern is for the soldiers still on active duty, not for the families of veterans.

[4:03:39 PM](#)

CHAIR WILSON asked about the Tanner's housing situation.

MS. TANNER said that they are moving to the base.

[4:03:57 PM](#)

CHAIR WILSON suggested that she begin a support group on base.

MS. TANNER said that her situation is highly demanding on her time.

[4:04:35 PM](#)

CHAIR WILSON asked whether she has respite care.

MS. TANNER shared that this is the first three-day break she has had in over a year.

[4:04:59 PM](#)

REPRESENTATIVE CISSNA expressed the importance of connecting with others.

[4:06:24 PM](#)

MS. HODGES related that the recovery period from a TBI is approximately two years. After that, the victim must learn to live with his or her disability. Acute rehabilitation funding is important to attain the level of recovery possible. She offered an anecdotal story of a person who now resides in a community for TBI survivors. Functioning in society, for many of these disabled individuals, is not possible. However, a certain level of ability can be attained when provided with a structured environment.

[4:09:24 PM](#)

REPRESENTATIVE GARDNER observed that the presentation is focused on military TBI survivors. However, she pointed out that many of those incarcerated are suffering from some level of undiagnosed TBI.

MS. HODGES acknowledged that some states utilize the federal dollars from the Traumatic Brain Injury Act of 1996 to screen for and treat TBI in corrections facilities.

[4:12:09 PM](#)

CHAIR WILSON shared that Alaska has more returning veterans than any other state. She stated her hope that the federal government will also be aware of this and provide more for veteran's families in the future.

[4:14:20 PM](#)

ADJOURNMENT

There being no further business before the committee, the House Health, Education and Social Services Standing Committee meeting was adjourned at [4:14:30 PM](#).