

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

February 12, 2008

3:09 p.m.

MEMBERS PRESENT

Representative Peggy Wilson, Chair
Representative Bob Roses, Vice Chair
Representative Anna Fairclough
Representative Wes Keller
Representative Paul Seaton
Representative Sharon Cissna
Representative Berta Gardner

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

HOUSE BILL NO. 319

"An Act relating to the practice of dentistry and to dental assistants."

-MOVED CSHB 319(HES) OUT OF COMMITTEE

HOUSE BILL NO. 276

"An Act extending the termination date of the Alaska Commission on Aging; and providing for an effective date."

-MOVED HB 276 OUT OF COMMITTEE

HOUSE BILL NO. 279

"An Act relating to the duties and powers of the Alaska Commission on Aging and the Department of Health and Social Services."

-MOVED CSHB 279(HES) OUT OF COMMITTEE

PRESENTATION ON ALZHEIMER'S DISEASE

- HEARD, BUT NOT SCHEDULED

PREVIOUS COMMITTEE ACTION

BILL: HB 319

SHORT TITLE: DENTISTS & DENTAL ASSISTANTS

SPONSOR(s): REPRESENTATIVE(s) RAMRAS

01/15/08 (H) READ THE FIRST TIME - REFERRALS
01/15/08 (H) HES, L&C
02/07/08 (H) HES AT 3:00 PM CAPITOL 106
02/07/08 (H) Heard & Held
02/07/08 (H) MINUTE(HES)
02/12/08 (H) HES AT 3:00 PM CAPITOL 106

BILL: HB 276

SHORT TITLE: EXTEND ALASKA COMMISSION ON AGING

SPONSOR(s): REPRESENTATIVE(s) DOLL

01/04/08 (H) PREFILE RELEASED 1/4/08
01/15/08 (H) READ THE FIRST TIME - REFERRALS
01/15/08 (H) HES, FIN
02/12/08 (H) HES AT 3:00 PM CAPITOL 106

BILL: HB 279

SHORT TITLE: COMMISSION ON AGING

SPONSOR(s): REPRESENTATIVE(s) DOLL, KERTTULA

01/04/08 (H) PREFILE RELEASED 1/4/08
01/15/08 (H) READ THE FIRST TIME - REFERRALS
01/15/08 (H) HES, FIN
02/12/08 (H) HES AT 3:00 PM CAPITOL 106

WITNESS REGISTER

PATTY KRUEGER, Staff
to Representative Jay Ramras
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented HB 319, Version K, on behalf of Representative Ramras, sponsor.

PAUL SILVEIRA, DMD
Valdez, Alaska

POSITION STATEMENT: Testified in support of HB 319.

PETE HIGGINS, DDS; Acting President
Alaska Dental Society
Fairbanks, Alaska

POSITION STATEMENT: Testified in support of HB 319.

DAVID LOGAN, DDS; Chair

Alaska Dental Society Legislative Committee
Juneau, Alaska

POSITION STATEMENT: Testified in support of HB 319.

REPRESENTATIVE ANDREA DOLL
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented HB 276 as the sponsor.

KEN ALPER, Staff
to Representative Andrea Doll
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Answered questions during the hearing on HB 276.

REPRESENTATIVE ANDREA DOLL
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented HB 279 as the sponsor.

BILL HOGAN, Deputy Commissioner
Family, Community, and Integrated Services
Office of the Commissioner
Department of Health & Social Services (DHSS)
Juneau, Alaska

POSITION STATEMENT: Answered questions during the hearing on HB 279.

DENISE DANIELLO, Executive Director
Alaska Commission on Aging (ACoA)
Commissioner's Office
Department of Health and Social Services (DHSS)

POSITION STATEMENT: Testified in support of HB 279.

BANARSI LAL, Chair
Alaska Commission on Aging (ACoA)
Commissioner's Office
Department of Health and Social Services (DHSS)
Fairbanks, Alaska

POSITION STATEMENT: Testified in support of HB 279.

PAT DAVIDSON, Legislative Auditor
Legislative Audit Division
Legislative Agencies & Offices
Juneau, Alaska

POSITION STATEMENT: Testified during the hearing on HB 279.

CONNIE SIPE, Executive Director
Center for Community
Sitka, Alaska

POSITION STATEMENT: Presented a report from the Alzheimer's Resource of Alaska.

DEBBIE NEWSHAM, Board Member
Alzheimer's Resource of Alaska
Anchorage, Alaska

POSITION STATEMENT: Gave a history of her experience as the caregiver of an Alzheimer's patient.

ACTION NARRATIVE

CHAIR PEGGY WILSON called the House Health, Education and Social Services Standing Committee meeting to order at [3:03:21 PM](#). Representatives Fairclough, Keller, Seaton, Gardner, Roses, and Wilson were present at the call to order. Representative Cissna arrived as the meeting was in progress.

HB 319-DENTISTS & DENTAL ASSISTANTS

[3:11:00 PM](#)

CHAIR WILSON announced that the first order of business would be HOUSE BILL NO. 319, "An Act relating to the practice of dentistry and to dental assistants."

REPRESENTATIVE GARDNER moved to adopt CSHB 319, Version 25-LS1281\K, Bullard, 2/11/08, as a working document. Hearing no objection, Version K was before the committee.

[3:12:02 PM](#)

PATTY KRUEGER, Staff to Representative Jay Ramras, Alaska State Legislature, presented the changes to HB 319 that are reflected in Version K. She explained that the Alaska Dental Society recommended that this part of the statute remain unchanged; therefore, Sections 1, 2, and 3, were deleted. The next change was suggested by the committee; that the definition of the duties of a dental assistant, versus those of a dental hygienist, should be more narrowly defined. This was done by changes to the language in AS 08.36.346. She further explained that on page 3, line 30, of Version [E], the word "subgingival" was deleted to correct a drafting error.

[3:13:41 PM](#)

REPRESENTATIVE FAIRCLOUGH asked for the location of the reference to "subgingival" in Version K.

MS. KRUEGER responded that the deletion of "subgingival", in Version K, is on page 2, line 28.

[3:14:53 PM](#)

REPRESENTATIVE GARDNER asked why Sections 1, 2, and 3 were deleted.

MS. KRUEGER explained that dental hygienists function under general supervision by dentists and Version [E] specified "direct" and "indirect" supervision; if the sections were not deleted, the kind of direction under which hygienists function would be limited.

[3:15:23 PM](#)

CHAIR WILSON asked for public testimony.

[3:15:37 PM](#)

PAUL SILVEIRA, DMD, informed the committee that he is representing the Alaska Dental Society and himself. His practice is located in Valdez, which is a very rural area even though it is located on the road system. He stated his support for HB 319 and explained that this bill will affect his practice and his patients in a positive way. Dr. Silveira's office has been without a dental hygienist for three months; this means he must do the work of a hygienist. He pointed out that a dental office is a health care facility, but is also a small business that must be profitable for his employees and himself. Not having a hygienist means that he must spend time doing this service and the fee for a "prophy" just covers his overhead. In fact, the Medicaid reimbursement for this service does not cover his cost. This bill will allow a dental assistant to do coronal polishing and free the dentist's time for other procedures. Dr. Silveira stressed that the passage of this bill will allow him to better serve the needs of his patients and maintain his practice. Furthermore, it is hard to attract hygienists to Valdez and to other rural areas. He stated that he does not have a problem with having his assistants certified in some manner; however, a national certification course would put undue restrictions on those working in rural areas due to the travel

required. He suggested that certification by a correspondence, or a distance education, program would be best. Dr. Silveira emphasized that he can not operate his practice at a loss for very long.

[3:22:25 PM](#)

REPRESENTATIVE FAIRCLOUGH expressed her appreciation of Dr. Silveira's testimony that, through this bill, additional care can be provided to those individuals on Medicaid. She asked whether he would support the addition of a sunset clause to the bill in order to measure the amount of the increase in care to Medicaid patients.

DR. SILVEIRA said that he would not be opposed; however, the problems with Medicaid are a big subject to discuss.

[3:23:52 PM](#)

CHAIR WILSON stated that both Medicare and Medicaid would "fit in." At this time, the committee is looking for ways to have more access to care for constituents.

[3:24:11 PM](#)

DR. SILVEIRA told the committee that he accepts Medicaid for kids only. This is because Medicaid rules are too arduous and the penalties are big; these are problems in addition to the ridiculously small reimbursement amount. The bill will help with this problem, but he opined that he would not add Medicaid patients simply because of the bill.

[3:25:25 PM](#)

REPRESENTATIVE FAIRCLOUGH stated that committee members have heard previous testimony that HB 319 will allow dentists to provide additional care to Medicaid patients. She reluctantly questioned the sincerity of those who support this bill and wondered whether their support was in order to make more money or in order to increase service for Medicaid and Medicare patients.

DR. SILVEIRA confirmed that he could see more patients in his community.

[3:27:34 PM](#)

CHAIR WILSON asked whether a dentist can have other patients waiting in case a Medicaid patient does not show up for the next appointment.

DR. SILVEIRA explained that he does not treat his Medicaid patients differently than others.

[3:28:47 PM](#)

CHAIR WILSON said that her suggestion was for more efficiency.

[3:28:57 PM](#)

DR. SILVEIRA stressed that this bill will allow him to offer more hygiene services when his practice is without a hygienist. When he has a hygienist, the hygienist, not the dental assistant, would probably do the coronal polishing.

[3:29:59 PM](#)

PETE HIGGINS, DDS, Acting President, Alaska Dental Society, informed the committee that he is in favor of the bill; in fact, he has been working for the last few years to increase access to care in the rural areas of the state. He said that there is a shortage of dental hygienists in rural areas throughout the state and coronal polishing and the placing of dental materials by dental assistants will certainly help the dentists working in rural areas. Dr. Higgins told the committee that the Alaska Native corporations and the federal government have been doing this program for years. The Alaska Dental Society is also working with Medicaid to try to get more dentists involved in the Medicaid program and bring access to this group of patients. House Bill 319 will make serving Medicaid patients more economically feasible. He opined that many other states have already adopted this program; Alaska is always behind the times. He concluded that the approval of expanded duties for assistants is needed and is a program that should go through. In fact, his assistant is certified, but can not be used in this category due to the lack of legislation.

[3:33:20 PM](#)

CHAIR WILSON noted that the results of a study done by the Department of Health and Social Services (DHSS) on the reimbursement of Medicaid costs will be released soon.

[3:34:03 PM](#)

DR. HIGGINS said that Alaska is unique due to the lack of an extensive road system. This program will help to involve local dental assistants that are already living and working in rural areas.

[3:35:07 PM](#)

CHAIR WILSON closed testimony.

[3:35:16 PM](#)

REPRESENTATIVE ROSES asked whether "direct supervision", as defined on page 3 of Version K, means that the dentist is in the office where the patient is, or just in the building somewhere. He requested that "dental office" be defined as opposed to the "dental facility" described under "indirect supervision." He expressed his difficulty in understanding the difference between "dental office" and "dental facility".

[3:36:52 PM](#)

DAVID LOGAN, DDS, and Chair, Alaska Dental Society Legislative Committee, explained that, in the bill "dental office" and "dental facility" are the same. The definitions were borrowed from the dental hygienists statutes and that is the only reason for this distinction.

[3:37:36 PM](#)

REPRESENTATIVE ROSES remarked:

So, for the record, ... the intent of the sponsor of this bill, and for our purposes, that the two are interchangeable, and that one can not later come and say 'Well, I was in the building even though it was five stories, I was on the fifth floor.' As opposed to somebody that at least is in auditory contact with somebody that may need assistance. Because, I see this as a huge difference and it's maybe something that we need to address.

[3:38:18 PM](#)

DR. LOGAN said:

Yes, dental office and dental facility are meant, the, the containment of the dental office and any common areas it shares with adjacent, generally, other dental offices; but, I guess, conceivably, they have a break room or something like that, that is shared with a non-dental office. But, yes.

REPRESENTATIVE ROSES said he would be offering an amendment.

[3:38:29 PM](#)

CHAIR WILSON moved that the committee adopt Amendment 1 that read [original punctuation provided]:

Conceptual amendment to require all Dental Assistants that wish to become certified to perform coronal polishing or to perform restorative functions must be Certified Dental Assistants (CDA).

Certified Dental Assistant - CDA means a dental assistant that has registered with the board, passed the Dental Assisting National Board Exam (DANB), and maintains the credential (CDA) by meeting DANB recertification requirements.

[3:39:34 PM](#)

REPRESENTATIVE FAIRCLOUGH objected.

[3:39:40 PM](#)

CHAIR WILSON explained that the DANB offers three ways to become a CDA. In addition to having a cardiopulmonary resuscitation (CPR) certification the candidate must: graduate from a dental assisting program; or, graduate from a high school and have two years experience in a dental office; or, have current or former certification. She noted that much of the continuing education can be done online by those who have work experience.

[3:41:14 PM](#)

REPRESENTATIVE GARDNER expressed her understanding that Alaska has working dental assistants that are not certified. The bill proposes to allow assistants to get a certification to do two functions: coronal polishing and restorative placement. She opined that this amendment will require additional certification to become a CDA.

[3:42:06 PM](#)

CHAIR WILSON explained the three different pathways to CDA certification.

[3:42:49 PM](#)

REPRESENTATIVE GARDNER clarified that there is a second level of achievement, the CDA certification would be first and then the coronal polishing certification.

[3:43:03 PM](#)

CHAIR WILSON read the following:

This conceptual amendment would make it a requirement for a dental assistant to be certified by the Dental Assisting National Board before they become certified for coronal polishing and the restorative function as defined in the bill. It will just make sure that every dental assistant that is going to provide these additional services will have met the same qualifications.

CHAIR WILSON stated that her intent was that the certification would require an "extra step."

[3:43:59 PM](#)

REPRESENTATIVE GARDNER asked whether the conceptual amendment would require an overreaching CDA certification for a dental assistant's other functions, and then, in addition, the bill requires that they get the two specific certifications.

CHAIR WILSON said, " ... that's true."

[3:44:20 PM](#)

REPRESENTATIVE GARDNER observed that if the committee does not know exactly what is certified now, it is doubling the requirements.

[3:44:40 PM](#)

CHAIR WILSON explained that dental assistants do not have to be certified now, and if they want to stay uncertified, that will

not be a problem. However, they will have to be certified to do the extra functions.

[3:44:56 PM](#)

REPRESENTATIVE GARDNER advised that is what the bill does without the CDA requirements.

[3:45:06 PM](#)

REPRESENTATIVE ROSES questioned the need for Amendment 1. He pointed out that the original bill in Section 3, AS 08.36.315, talks about the revocation of a license, reading:

The board may revoke or suspend the license of a dentist or may reprimand, censure or discipline a dentist, or both, if the board finds that, after hearing, the dentist engaged in the performance of patient care or permitted the performance of patient care by persons under the dentist's supervision that does not conform to the minimum professional standards of dentistry regardless, of whether actual injury to the patient occurred.

REPRESENTATIVE ROSES asked for the need of the certification when the dentist is not allowed to have someone perform a duty for which they are not qualified to perform. He opined that the purpose of the amendment is taken care of in existing statute.

[3:46:22 PM](#)

REPRESENTATIVE FAIRCLOUGH asked for a brief at-ease.

[3:48:22 PM](#)

The committee took an at-ease from 3:46 p.m. to 3:48 p.m.

CHAIR WILSON withdrew Amendment 1.

[3:48:38 PM](#)

REPRESENTATIVE FAIRCLOUGH warned that there is a reason to have caution when the Medical Board receives a financial benefit. She recalled the previous testimony regarding the difficulty of having a successful dental practice in a rural area. She opined that the three requirements for CDA accreditation are good standards.

[3:49:43 PM](#)

CHAIR WILSON cautioned that there is a need to very careful when there will be a monetary gain. She advised that she would contact the chair of the next committee of referral.

[3:50:18 PM](#)

CHAIR WILSON offered Amendment 2, as follows [original punctuation provided]:

After board insert "that do not require the professional skill of a licensed dentist or licensed dental hygienist, including those provided in AS 08.32.110(c) and this chapter."

CHAIR WILSON said that this amendment is offered to tighten up the language in the bill. Hearing no objection, Amendment 2 was adopted.

[3:51:20 PM](#)

REPRESENTATIVE ROSES moved that the committee adopt Conceptual Amendment 3, as follows:

Page 3, line 11;
Delete "dental facility"
Insert "dental office"

[3:51:49 PM](#)

REPRESENTATIVE GARDNER objected, and then removed her objection. Hearing no further objection, Conceptual Amendment 3 was adopted.

[3:52:23 PM](#)

REPRESENTATIVE FAIRCLOUGH observed that the next committee of referral is the author of the bill. Therefore, she said that she will not offer her amendment on a sunset and measurable goals, but will talk with the sponsor to confirm whether the intent of the bill is to provide additional services to Medicare and Medicaid recipients. If so, a sunset is needed; however, if this bill is to address business practice measures, a sunset is not needed.

3:54:02 PM

CHAIR WILSON indicated that she will also talk with the sponsor.

3:54:28 PM

REPRESENTATIVE KELLER observed that the bill will expand the scope of the responsibilities of the lowest paid professionals and allow dentists to compete economically.

3:55:06 PM

REPRESENTATIVE FAIRCLOUGH surmised that the holders of the lowest paid positions can qualify for a certificate and elevate their value.

3:55:31 PM3:56:05 PM

CHAIR WILSON opined that dentists in urban areas will also use this capability, as well.

3:56:05 PM

REPRESENTATIVE ROSES expressed his hope that the bill accomplishes its objective. The intent was to allow dentists to see more patients and, thereby, extend care to Medicaid recipients. However; the testimony was that the bill will not change the issues with Medicaid. He advised that if the sunset amendment is not offered in committee, he will offer it on the floor. Representative Roses opined that the responsibility of the legislature is to increase care and access to dental care for everyone, not necessarily to increase the profitability of the dental practices.

3:58:04 PM

REPRESENTATIVE FAIRCLOUGH clarified that the committee's support of good business practices will result in an increase of accessibility to care in rural communities.

3:58:23 PM

REPRESENTATIVE FAIRCLOUGH moved to report HB 319, Version 25-LS1281\K, Bullard, 2/11/08, as amended, out of committee with individual recommendations and the accompanying fiscal notes. Hearing no objection, CS HB 319(HES) was reported out of the House Health, Education and Social Services Standing Committee.

HB 276-EXTEND ALASKA COMMISSION ON AGING

[Contains discussion of HB 279]

[3:59:31 PM](#)

CHAIR WILSON announced that the next order of business would be HOUSE BILL NO. 276, "An Act extending the termination date of the Alaska Commission on Aging; and providing for an effective date."

[4:00:41 PM](#)

REPRESENTATIVE ANDREA DOLL, Alaska State Legislature, speaking as the sponsor of HB 276, informed the committee that HB 276 will extend the sunset provision for the Alaska Commission on Aging (ACoA). She advised that, five years ago, the ACoA was moved from the Department of Administration (DOA) to the Department of Health and Social Services (DHSS) and some of the commission's responsibilities were changed. Representative Doll added that HB 279 was recommended by the auditors and was written to enact the conforming language to reflect this move.

[4:01:55 PM](#)

CHAIR WILSON noted that HB 276 extends the sunset to 2016.

[4:02:36 PM](#)

REPRESENTATIVE FAIRCLOUGH asked when the last time the statewide plan was adopted.

[4:02:47 PM](#)

KEN ALPER, Staff to Representative Andrea Doll, Alaska State Legislature, stated that the plan was adopted in 2007 and is a four-year plan dated 2008 to 2011.

[4:03:10 PM](#)

REPRESENTATIVE FAIRCLOUGH noted that there is support in the legislature for shorter timeframes so that the effectiveness of programs can be measured; nevertheless, she said that she supports the reauthorization of the ACoA. She then recalled that a former member of the commission raised the question of access to facilities for the aging population. She asked

whether the commission's planning process addresses access to facilities and long-term care.

[4:03:58 PM](#)

REPRESENTATIVE DOLL referred the question to the executive director.

[4:04:10 PM](#)

CHAIR WILSON asked for a motion.

[4:04:19 PM](#)

REPRESENTATIVE GARDNER moved to report HB 276 out of committee with individual recommendations and the accompanying fiscal notes.

The committee took an at-ease from 4:04 p.m. to 4:05 p.m.

There being no objection, HB 276 was reported out of the House Health, Education and Social Services Standing Committee.

HB 279-COMMISSION ON AGING

CHAIR WILSON announced that the next order of business would be HOUSE BILL NO. 279, "An Act relating to the duties and powers of the Alaska Commission on Aging and the Department of Health and Social Services."

[4:05:34 PM](#)

REPRESENTATIVE ANDREA DOLL, Alaska State Legislature, speaking as one of the joint prime sponsors, remarked:

From 1982, when it was created through 2003, the Alaska Commission on Aging was located within the Department of Administration, and because the Department of Administration did not have an independent grant making authority, the Commission on Aging was given granting power so they could distribute federal money targeted at seniors. In 2003 Governor Murkowski signed Executive Order 108, we have a copy of that with us. This moved the Commission on Aging to the Department of Health and Social Services. However, they already did have grant making power so the executive order also moved those functions, grant

making, to the Division of Senior and Disabilities Services at HSS, h, s, s. The statutes were never changed and this current law is written ... Alaska Commission on Aging in the Department of Administration writing their own grants. In 2006, when ACoA went through the sunset audit, from legislative audit, the auditors discovered this discrepancy. The auditors recommended making the statutory changes conforming to the changes made by the Governor Murkowski. HB 279 was written for this purpose. It was written with the cooperation and participation of the Alaska Commission on Aging staff and the senior officials at DHSS. The bill, if passed, would codify the current situation. The Commission on Aging is responsible for planning and advocacy for Alaska's seniors. The Division of Senior and Disabilities Services is responsible for administering and distributing federal funds.

[4:08:02 PM](#)

REPRESENTATIVE ROSES moved to adopt CSHB 279, Version 25-LS1106\E, Mischel, 2/11/08, as a working document. There being no objection, Version E was before the committee.

REPRESENTATIVE ROSES then observed that the bill takes away a considerable amount of authority from the ACoA, and asked what the commission is left to do.

[4:09:27 PM](#)

REPRESENTATIVE DOLL responded that the ACoA is responsible for education and advocacy; in fact, it has many functions for seniors as outlined in the state plan.

[4:09:51 PM](#)

CHAIR WILSON added that this is a housecleaning bill to put in state statute what is already happening.

[4:09:55 PM](#)

MR. ALPER informed the committee that the only change in the committee substitute is in Section 3, on page 4, that clarifies that the ACoA is the primary agency responsible for writing the state plan.

4:10:17 PM

REPRESENTATIVE ROSES asked whether the commission members are in support of the bill.

4:10:54 PM

CHAIR WILSON asked for testimony from DHSS and the ACoA.

4:11:19 PM

BILL HOGAN, Deputy Commissioner, Family, Community, and Integrated Services, Office of the Commissioner, DHSS, stated that one of his responsibilities is to act as the primary liaison with many of the boards and commissions that work with DHSS. He reiterated that the language in HB 279 is intended to put in statute what has been in practice since the first of July, 2003. Mr. Hogan highlighted that the bill gives DHSS the responsibility for establishing state policy for, and administering the requirements of, the Older Americans Act of 1965, and the authority for administering grants to service providers that serve older Alaskans, adult day care, and family and respite care. He explained that he works very closely with ACoA, and meets with the executive director and commission members on a regular basis. In addition, the language for the bill was developed in conjunction with the ACoA. The most recent change is to acknowledge that the ACoA still has the primary responsibility for formulating the state plan; however, DHSS is the state entity on aging and has a number of responsibilities in that regard. Mr. Hogan concluded by saying that DHSS is very supportive of HB 279.

4:13:55 PM

DENISE DANIELLO, Executive Director, Alaska Commission on Aging, expressed the commission's support for HB 279. This bill is a reflection of current practice; in fact, the bill was crafted primarily by the former commission chair. She assured the committee that the ACoA plays an undiminished role for older Alaskans. Because it does not serve as a grant making body, the ACoA is now able to focus on statewide planning and to act as a strong advocate for caregivers and seniors. Ms. Daniello told the committee that the ACoA hosts quarterly meetings with caregivers and providers to talk about senior issues. Its members also advocate before legislators, the governor, and DHSS, regarding issues concerning older Alaskans such as: legislation to strengthen the senior benefits program; the

creation of the office of Advocacy; strengthening laws to prevent crimes of identify theft against seniors; and supporting stable funding for many senior services. The ACoA also advocates to the congressional delegation on federal issues such as workforce development and Medicare reimbursement rates. Its other responsibilities are to provide recommendations to DHSS and to the Alaska Mental Health Trust Authority, and to provide local community education. Ms. Daniello assured the committee that the ACoA supports HB 279.

4:17:30 PM

BANARSI LAL, Chair, ACoA, DHSS, expressed his belief that the concerns about the changes brought by Executive Order 108 were unfounded. He opined that grant making took a lot of time away from the ACoA's primary functions: to be the eyes and ears of seniors in Alaska; to educate seniors about the availability of existing services; and to advocate for their needs. Instead, the ACoA is now able to solicit seniors for information about their needs and to produce the state plan. The state plan is submitted to the commissioner of the DHSS, the governor's office, and to the Region 10 office of the Older Americans Program. Mr. Lal noted that the small board and staff of the ACoA have the drive and interest to produce the state plan. In 2006, the White House Conference on Aging sponsored forums throughout the state and the commission gathered more information from seniors. He then spoke of the value of the legislative audit report and said that he is very supportive of HB 279. Mr. Lal encouraged the committee to take a long-term position on the growing needs of the senior population and to study the recommendations in the ACoA's state plan and annual report.

4:22:40 PM

CHAIR WILSON asked for concurrence from the Legislative Audit Division.

4:23:09 PM

PAT DAVIDSON, Legislative Auditor, Legislative Audit Division, Legislative Agencies & Offices, informed the committee that she was representing the Division of Legislative Audit as it relates to HB 279. She stated that the audit recommends that the statutes be changed for those areas that represent administration of the grants. The sections in the bill that reflect changes to the grants support the audit recommendations.

CHAIR WILSON closed testimony.

[4:24:10 PM](#)

REPRESENTATIVE KELLER moved to report HB 279, Version 25-LS1106\E, Mischel, 2/11/08, out of committee with individual recommendations and the accompanying zero fiscal notes. There being no objection, CSHB 279(HES) was reported out of the House Health, Education and Social Services Standing Committee.

Presentation on Alzheimer's disease

[4:25:10 PM](#)

CHAIR WILSON announced that the final order of business would be a presentation on Alzheimer's disease. She said that it is important to know that in the future the biggest population will be the senior population.

[4:25:54 PM](#)

CONNIE SIPE, Executive Director, Center for Community, informed the committee that she was representing the Alzheimer's Resource of Alaska. She explained that ADRD stands for Alzheimer's Disease and Related Dementias (ADRD). Alzheimer's Resource of Alaska is a beneficiary of the Alaska Mental Health Trust Authority because ADRD was originally treated as mental illness. Ms. Sipe told the committee that dementia is an irreversible cognitive disease of the brain and there are many kinds, although they are usually all called Alzheimer's. Alzheimer's is usually diagnosed by the following symptoms: the loss of short term memory, the loss of spoken and written language, the loss of the ability to plan, and the loss of the ability to process visual information. She continued to explain that many other diseases have components of dementia, and diagnosis and competent medical care is important at the early stage of the disease. Alzheimer's is a fatal disease and the average life lived after diagnosis is eight years. Ms. Sipe pointed out that one in two of every person over the age of eighty-five is affected; there are approximately five thousand Alaskans with some dementia, and seventy-five percent are in their family's care. Alzheimer's and Related Dementias patients are particularly difficult to care for due to the complexity of the disease and the possibility of violent behavior. Alaska's Pioneer Homes are experts in the care of patients with dementias. Families and patients use state services, when

available, such as: day care; assisted living homes; and Meals on Wheels. Family care is often the only choice as many nursing homes can not handle Alzheimer's patients. She stated that dementia is a broad spectrum disease, and there is no prevention, cure, or treatment. However, some medications can help to slow the worsening of symptoms, or to relieve anxiety and depression. Ms. Sipe stressed the high level of importance of Medicaid waiver coverage for people with Alzheimer's; she stated her hope that members will follow the progress of waivers and will fund the proposed first increase in senior grants in ten years. She opined that \$1.5 million put in the general fund will fund the grants to families.

[4:36:11 PM](#)

DEBBIE NEWSHAM, Member, Alzheimer's Resource of Alaska Board, explained that she is a caregiver; her father has Alzheimer's. She described her experiences with her father who suffers from violent and destructive outbursts. She said that she had to leave work to care for him, at the loss of her benefits and insurance, and listed the many difficulties her family has endured, without respite or a suitable alternative for housing, in order to provide his care. She now gets ten hours per week of respite relief. However, she must be with him constantly and the cost of his care takes ten percent of the family income; this has led to significant money difficulties for her family.

[4:46:50 PM](#)

MS. NEWSHAM continued to relate the difficulty of life for her family while she is providing her father's care. She pointed out that the median income for caregivers is \$44,000 per year and average expenses to care for a person, disabled in this or a similar way, is \$5,500 per year. Ms. Newsham said that \$700 per year from the state is a small price to pay to enable her to continue to care for her father. Her choice is to do this for her family but she needs state support to continue.

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MS. SIPE explained that the state can help families fulfill this role with Medicaid waivers and a higher level of respite care.

[4:50:53 PM](#)

MS. NEWSHAM told of her experiences that are similar to those of other caregivers.

[4:52:09 PM](#)

CHAIR WILSON related her personal experience with dementia patients.

[4:53:38 PM](#)

MS. NEWSHAM noted that the health of caregivers, due to sleep deprivation and other issues, is also a problem. She concluded by encouraging the committee to restore the proposed budget increase to the Alaska Mental Health Trust Authority.

[4:54:58 PM](#)

ADJOURNMENT

There being no further business before the committee, the House Health, Education and Social Services Standing Committee meeting was adjourned at [4:55:21 PM](#).