

SENATE FINANCE COMMITTEE  
March 11, 2009  
9:04 a.m.

9:04:09 AM

CALL TO ORDER

Co-Chair Stedman called the Senate Finance Committee meeting to order at 9:04 a.m.

MEMBERS PRESENT

Senator Lyman Hoffman, Co-Chair  
Senator Bert Stedman, Co-Chair  
Senator Charlie Huggins, Vice-Chair  
Senator Johnny Ellis  
Senator Donny Olson  
Senator Joe Thomas

MEMBERS ABSENT

None

ALSO PRESENT

Senator Gene Therriault, Jay Livey, Staff, Senator Hoffman; Ron Kreher Chief of Field Services, Division of Public Assistance; Senator Bettye Davis, Sponsor; Lynne Koral, Intern, Senator Bettye Davis; Ellie Fitzjarrald, Director, Division of Public Assistance, Department of Health and Social Services; Max Hensley, Staff, Senator Ellis; Jon Sherwood, Director, Office of Program Review, Department of Health and Social Services (DHSS); Denise Daniello, Director, Alaska Commission on Aging; Tim Schuerch, Policy Analyst, Alaska Native Health Board. Jon Sherwood, Director, Office of Program Review, Department of Health and Social Services (DHSS);

PRESENT VIA TELECONFERENCE

Pat Luby, Advocacy Director, Alaska Association of Retired Persons (AARP), Anchorage; Marita Kaplan, Senior Citizens of Kodiak; Jack Nielson, Department of Health and Social Services; Steve Lesko, President of Key Coalition of Alaska; Connie Sipe, Executive Director for Center for Communities; Emily Ennis, Fairbanks Resource Agency; Don Cline, Therapist, Bristol Bay Behavioral Health Corporation, Dillingham; Rachel Green, Palmer Senior Center; Emma Huntsman, self.

SUMMARY

SB 13 "An Act relating to eligibility requirements for medical assistance for certain children and pregnant women; and providing for an effective date."

SB 13 was REPORTED out of Committee with "no recommendation" and with a new fiscal impact note by the Department of Health and Social Services and with two previously published fiscal impact notes: FN1 (DHS) and FN2 (DHS).

SB 32 "An Act relating to medical assistance payments for home and community-based services."

SB 32 was HEARD and HELD in Committee for further consideration.

SB 116 "An Act making a special appropriation for energy assistance for rural communities; and providing for an effective date."

CSSB 116 (FIN) was REPORTED out of Committee with a "do pass" recommendation.

#sb116

SENATE BILL NO. 116

"An Act making a special appropriation for energy assistance for rural communities; and providing for an effective date."

[9:04:29 AM](#)

Co-Chair Hoffman MOVED to ADOPT work draft LS0600\R, Kane 3/3/09. There being NO OBJECTION, it was so ordered.

Co-Chair Hoffman stated that the initial approach to bring energy relief to rural Alaskan communities was the establishment of a separate entity under the title "Energy Assistance for Rural Communities." A broad approach followed a review with the administration for energy assistance without the establishment of a second entity. The legislation allows energy assistance through the Low Income Home Energy Assistance Program (LIHEAP) and the Alaska Heating Assistance Program (AKHAP). The funds were increased from \$5 million to \$9 million in an effort to broaden the program and to assist all Alaskans qualifying under the LIHEAP program.

[9:07:21 AM](#)

JAY LIVEY, STAFF, SENATOR HOFFMAN, explained the changes in the bill. He referred to the PowerPoint presentation "Alaska Heating Assistance Programs" (Copy on File):

Mr. Livey discussed Slide 3, "Program Participants":

- Program is statewide
- Directly serves 162 communities
- Through contracts with Native organizations serves 114 more communities
- Outside of tribal areas, 47% of households using the program live in 6 communities - Anchorage, Wasilla, Fairbanks, Palmer, North Pole, Homer

[9:10:49 AM](#)

Mr. Livey discussed Slide 4, "Eligibility":

- Resident of the State
- Living in the home in which the heating costs occur
- For LIHEAP have income (family of four) less than \$39,750
- For AkHAP have income (family of four) less than \$59,750
- For heating costs incurred from November 1st through April 30

[9:12:11 AM](#)

Mr. Livey discussed Slide 5, "Program Mechanics":

- Individual must apply on behalf of a household
- Household is assigned points based on application information
- Number of applications is estimated
- Based on state and federal appropriations and estimate of the number of applications, a dollar amount is assigned to each point
- Initial grant is made on behalf of household to vendor in community
- Supplemental assistance is provided if available

[9:13:38 AM](#)

Mr. Livey discussed Slide 6, "Amounts of Assistance":

- Based on household points
- Fuel cost and climatic conditions
- Size and type of housing
- Household size and income
- If elderly, disabled or young children are in the household
- Federal and state appropriations

[9:15:27 AM](#)

Mr. Livey explained Slide 7, "Sample Calculation":

- Based on application, household has 15 points.
- Based on available funds and estimate of total number of applications - each point is worth \$220.
- Applicant would receive \$3300
- Based on heating oil prices of \$6.50 per gallon user could purchase 507 gallons or 84 gallons per month
- Assuming each household uses 150 gallons per month, only 56 per cent of household's fuel needs are recognized by the program

[9:17:24 AM](#)

Mr. Livey explained the document "Average Monthly Temperatures for Bethel Alaska" (Copy on File). The document intends to communicate that temperatures for March and April are still quite low, illustrating the ongoing need for heating assistance.

Mr. Livey addressed the document "Estimated Impact of \$9 Million Appropriation for Heating Assistance Programs" (Copy on File). The communities' average fuel oil cost determines eligibility. The estimates illustrate the impacts on households participating in the state-operated heating assistance programs. The program does not discriminate between fuel types, although natural gas is less expensive than oil.

[9:20:29 AM](#)

Co-Chair Stedman reminded the public that the Senate Finance Committee hearing followed a huge escalation in oil prices. Some areas, particularly in Western Alaska do not have the ability to benefit from the lower gas prices. The legislation is an effort to help people around the state afford to heat their homes this winter.

Co-Chair Hoffman stated that between November of 2005 and November of 2008 a reduction in costs was calculated in many regions of Alaska, excluding Western Alaska. He stated that Western Alaska has yet to receive reductions although the cost of living has increased.

Senator Huggins asked for a contrast between the \$5 million and the \$9 million appropriation. Co-Chair Hoffman answered that the original piece of legislation was targeted at Western Alaska. The new legislation addresses the entire state including Anchorage, Fairbanks, Homer, and the Matsu

valley. The expansion of the program requires an increase in funds.

[9:23:26 AM](#)

Senator Huggins asked how many people currently participate in the program. Mr. Livey answered that there are 14,000 Alaska households participating in LIHEAP and AKHAP combined. An additional 4500 members receive services from tribal organizations. The expectation is 19,000 Alaskan households participating in the two programs by the end of the year.

[9:24:32 AM](#)

RON KREHER CHIEF OF FIELD SERVICES, DIVISION OF PUBLIC ASSISTANCE, responded that the number of households served is only an estimate. Currently the Division of Public Assistance has received approximately 13,000 applications, which is 30 percent more than the year prior. Only 6,000 applications have been processed. He informed that 200-300 applications are received each week.

Mr. Livey discussed a planned supplemental check run. The appropriation would be attached to the run. The vendor will have a credit account established on the behalf of an individual. The appropriation would ensure that the vendor is paid later. The individual could then extend their credit line with the vendor, knowing that money will be available to pay for the oil.

[9:27:07 AM](#)

Senator Huggins asked if heating oil for senior housing was eligible for assistance within the program. Mr. Kreher answered that individuals living in residential housing are not eligible for heating assistance. Individual residences are covered by the program, but citizens living in shelters or residential housing do not qualify for heating assistance. Senator Huggins encouraged a mechanism to accommodate senior citizens who face the same demographic challenges as individuals qualifying for the program.

Co-Chair Hoffman stated that he would like to modify the LIHEAP program with separate legislation. Mr. Kreher stated that the elderly and disabled are a priority population for AKHAP, however, individuals in residential or subsidized housing have minimal heating costs.

Co-Chair Stedman asked if the administration supports SB 116. Mr. Kreher stated that the administration does not oppose SB 116. Co-Chair Stedman asked if Mr. Kreher is stating that the administration supports SB 116. Mr. Kreher stated that he was informed only briefly by the

administration and has not had the opportunity to consult about the position, but his understanding was that the administration does not oppose SB 116.

9:29:17 AM

Co-Chair Stedman asked how many Alaskan citizens were considered in the Emergency Relief Appropriation Bill. Mr. Lively estimated between 15,000 or 18,000 Alaskan households.

Co-Chair Hoffman concluded that he wanted to approach the issue earlier, but he felt that the new approach allows broader assistance to many low income households. The fairness of the bill is amplified by the increased cost.

Senator Huggins highlighted that when rent is raised due to increased fuel cost, some senior citizens are forced out of their housing arrangements. He did not want to see senior citizens excluded.

Co-Chair Hoffman MOVED to report CSSB 116 (FIN) out of Committee with individual recommendations. There being NO OBJECTION, it was so ordered.

CSSB 116 (FIN) was REPORTED out of Committee with a "do pass" recommendation.

#sb13

SENATE BILL NO. 13

"An Act relating to eligibility requirements for medical assistance for certain children and pregnant women; and providing for an effective date."

SENATOR BETTYE DAVIS, SPONSOR, introduced the bill and her staff member.

LYNNE KORAL, INTERN, SENATOR BETTYE DAVIS, discussed the legislation, which increases eligibility limits for Denali Kid Care (DKC) from 175 to 200 percent of the federal poverty level (FPL). She explained that SB 13 restores the original level of the qualifying income eligibility standard for the DKC program to 200 percent of the FPL. She explained that DKC is considered an enhanced reimbursement program with up to 70 percent matching funds from the federal government's State Children's Health Insurance Program (SCHIP), created in 1997.

Ms. Koral stated that uninsured children with a medical need are four times more likely to use emergency rooms at a much higher cost because they tend not to receive care from a regular care provider. Alaska is one of five states who fund its SCHIP program below 200 percent of the FPL. Private health care coverage for children has declined over 30

percent in the last 10 years and the deepening recession is pulling more children and families into the uninsured ranks. SB 13 makes insurance eligibility accessible to an estimated 1,277 additional children and 225 additional pregnant women in Alaska.

[9:36:34 AM](#)

Co-Chair Hoffman commented that the administration does support CSSB 116.

Senator Huggins asked if the administration supports SB 13. Senator Bettye Davis stated that she had not been informed about a lack of support from the administration. The department stated that they indeed support an increase in eligibility limits to 200 percent of the FPL in the last Senate Finance Committee meeting of 2/25/09.

[9:38:06 AM](#)

JON SHERWOOD, DIRECTOR, OFFICE OF PROGRAM REVIEW, DEPARTMENT OF HEALTH AND SOCIAL SERVICES (DHSS), explained that the Governor publically supported expanding income eligibility levels to 200 percent of the FPL. The Governor expressed interest in provisions such as premiums. He stated that the administration does not have a position in opposition to SB 13.

Senator Huggins asked for the contrast between a similar bill addressing the increase of eligibility limits for DKC. Mr. Sherwood answered that there were four different proposals on the table to expand the DKC program. Two of the bills expand beyond 200 percent of the FPL with some degree of cost sharing in the form of premiums and or co-pays. One bill expands from 175 to 250 percent of the FPL with cost sharing in the form of premiums beginning at 175 percent of the FPL and expanding for children only.

Senator Huggins assumed that the specialists in the department favor one bill that best supports children and remains cost effective.

[9:40:43 AM](#)

Mr. Sherwood stated that he had disclosed all of the information that was available to him. He did not feel that he could answer the question further.

Senator Huggins encouraged an effective means of helping Alaskans with healthcare costs and he asked the administration to come forward with a position.

Senator Bettye Davis stated that the cost of the various bills remains the same, however, SB 13 allows children to

obtain coverage as soon as possible. She emphasized that the proper action was to bring as many children onto DKC as soon as possible. She maintained that cost sharing was still a possibility with another bill. She stressed that the solitary goal of SB 13 was raising income eligibility limits to 200 percent of the FPL.

Senator Huggins stated that he preferred an omnibus bill that combines the best methods within the available means.

[9:43:33 AM](#)

Senator Bettye Davis stated that SB 13 could pass while work occurs with the other bills providing the accomplishment of many good ideas.

Co-Chair Stedman asked if additional employees were necessary to process the paperwork. Mr. Sherwood answered that the program's caseload will increase by 1500 additional individuals. He informed that given the current caseload averages, two additional employees are necessary. Co-Chair Stedman asked if the positions were eliminated when eligibility was reduced in 2003.

[9:45:43 AM](#)

ELLIE FITZJARRALD, DIRECTOR, DIVISION OF PUBLIC ASSISTANCE, DEPARTMENT OF HEALTH AND SOCIAL SERVICES, commented on the elimination of positions with eligibility reductions. The two positions requested for SB 13 are due to changes in Medicaid requirements surrounding citizenship verification and the emphasis on payment accuracy to ensure that applicants are eligible for the program. When income scales are increased, more time is needed to ensure eligibility. The request for additional employees serves the increased number of applicants.

[9:47:58 AM](#)

Co-Chair Stedman spoke to the three fiscal notes increasing the general fund spending \$861,000 in FY09 and \$940,000 in FY10.

Senator Bettye Davis stated that she wished for the bill to pass out during the current hearing.

Co-Chair Hoffman MOVED to report SB 13 out of Committee with individual recommendations and the accompanying fiscal notes. There being NO OBJECTION, it was so ordered.

SB 13 was REPORTED out of Committee with "no recommendation" and with a new fiscal impact note by the Department of Health and Social Services and with two previously published fiscal impact notes: FN1 (DHS) and FN2 (DHS).

#sb32

SENATE BILL NO. 32

"An Act relating to medical assistance payments for home and community-based services."

[9:50:14 AM](#)

Senator Ellis presented SB 32.

Senate Bill 32 creates a mechanism for regular Medicaid rate review for providers of home- and community-based services to Alaska's elderly and developmentally disabled citizens. Institutional service providers receive regular reviews in order to bring rates in line with costs.

However, home and community-based services (HCBS) have been conclusively proven to lower overall long-term Medicaid costs. One recent study in the academic journal *Health Affairs* found that states with long-established high proportions of HCBS spending saw a 3% overall decrease in long-term care spending between 1995 and 2005 as opposed to a 14.5% increase in low-HCBS states. The study concluded:

*"Justifications based on financial constraints can no longer be credibly offered as reasons for forcing such people [seniors and persons with developmental disabilities] into nursing homes and other institutions. HCBS programs may be one instance in which offering people greater choice also helps reduce costs."*<sup>1</sup>

Over the last few years, however, rates for home- and community-based services have been frozen. During that time, not only have costs increased, the medical environment - including regulations, technology, and client expectations - has shifted dramatically. These shifts threaten the continued viability of the hundreds of HCBS providers, primarily private businesses that employ thousands of Alaskans in every region of the state.

Home and community based services are the key to helping our seniors and those living with developmental disabilities live their lives as productive members of our communities while controlling the growth of health care costs. Without the regular review process in Senate Bill 32, many providers will be forced out of

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<sup>1</sup> *Health Affairs* 28, no. 1 (2009): 262-272.

business and HCBS services will be taken away from thousands of Alaskans across the state.

[9:58:25 AM](#)

Senator Ellis noted that most providers have not seen increases in ten years. He pointed to problems with contractor's assessments precluding testimony from smaller providers. He explained that SB 32 gives the Department of Health and Social Services (DHSS) the flexibility to devise a cost based system, while repairing the disparity between home and community based services and institutional care rates. Hospitals and nursing homes require regular rate reviews. Home and community based services deserve the same treatment from the state.

[10:00:19 AM](#)

Co-Chair Hoffman asked for a list of home and community based providers. He asked how the fiscal notes would affect their earnings.

Senator Ellis noted that new and possibly reduced fiscal notes would be provided to the committee. He emphasized that the legislation is not a rate increase, but a mechanism for rate review. He believed that work in the finance committee could further reduce the cost. He informed that DHSS could provide the requested provider information.

[10:01:55 AM](#)

Co-Chair Stedman observed that the fiscal notes are \$4.4 million for FY10 and \$8 million for FY11. A committee substitute (CS) bill is in the works, but information for committee members is today's goal. Senator Ellis stressed that the fiscal impact could be reduced.

Senator Olson asked how non-Medicaid eligible individuals would be impacted by the mandatory rate review. Senator Ellis explained that SB 32 addresses providers that are reimbursed through Medicaid. Senator Olson stated that he had not witnessed a component of the fiscal note for providers ineligible for Medicaid.

[10:03:32 AM](#)

MAX HENSLEY, STAFF, SENATOR ELLIS, responded to questions. He informed that there are approximately 350 home and community based providers, who receive approximately \$140 million in Medicaid funding per year.

Mr. Hensley informed that Section 1 of SB 32 creates a rate review process for home and community based services as well as assisted living homes, which are outside of the Medicaid

arena. Section 1 adds personal care services and assisted living homes for needy and vulnerable adults to the services receiving the rate review process. As drafted, the bill only covered home and community based services provided through a Medicaid waiver.

Mr. Hensley reviewed Sections 2 and 3, which are conforming language for the assisted living homes for needy and vulnerable adults. Section 4 creates an annual report to the legislature detailing trends in rates based on the review process in the bill, and sunset that reports in 2014. He stressed that the legislation is designed as a management tool.

[10:06:15 AM](#)

Mr. Hensley explained that Section 6 delays the implementation of the program for two years to allow DHSS to create the methodology to set the rates.

[10:07:25 AM](#)

JON SHERWOOD, DIRECTOR, OFFICE OF PROGRAM REVIEW, DEPARTMENT OF HEALTH AND SOCIAL SERVICES (DHSS), observed that the process has been collaborative. The department hired a consultant to review the program. The department is committed to moving forward with a rate setting system, but is still seeking compromise, including adequate direction without restriction in the rate setting process of larger hospitals and nursing homes. The department supports the process of accountability.

[10:09:21 AM](#)

Senator Olson questioned how the legislation would affect residents of the Mary Conrad center in Anchorage. Mr. Sherwood observed that they would not be affected by SB 32.

Senator Olson asked if semi-private home services providers were affected. Mr. Sherwood answered that the legislation requires the department to change rates reflecting costs incurred by providers. Senator Olson asked if the legislation would affect health care corporations in rural Alaska.

[10:10:51 AM](#)

Senator Ellis acknowledged that there are home and community based providers, especially in rural Alaska, who would benefit from the legislation. The intent of the legislation is to find the proper balance. Rural providers are struggling and the state is in danger of losing a cross section of service providers.

[10:12:19 AM](#)

Senator Huggins requested clarification regarding the two year delay in the implementation of SB 32. Mr. Sherwood agreed that the department requested the two year delay. Senator Huggins asked if the department has concerns for home and community service organizations that might not survive two years. He felt concern about the attrition of these services.

Mr. Sherwood answered that two years was an ambitious goal for implementing a cost based rate system. He explained the difficulty in creating the system.

Senator Huggins asked when the five year repealer would begin. Mr. Hensley explained that the repealer addresses the report from the department and takes effect June 30, 2014, meaning that the report would occur during the first three years of the program.

[10:14:27 AM](#)

DENISE DANIELLO, DIRECTOR, ALASKA COMMISSION ON AGING testified in favor of SB 32.

Good Morning. My name is Denise Daniello and I am the executive director of the Alaska Commission on Aging. I am here to testify in support of CSSB 32, a bill to allow for regular rate reviews of home- and community-based services for Medicaid-eligible persons similar to the process used by hospitals and nursing homes. We believe that this proposed legislation addresses the need for a fair and consistent process to maintain the systems of care for vulnerable Alaskans and promotes sound fiscal planning for providers and the State.

The Governor's Council on Disabilities and Special Education, the Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse along with the Alaska Mental Health Trust Authority, the Suicide Prevention Council, the Alaska Brain Injury Network and the Alaska Commission on Aging have jointly identified the establishment of a regular and periodic schedule of rate reviews for home and community based services as one of our four legislative priorities for 2009. The provisions that address our legislative priority are included in SB 32 sponsored by Senator Ellis.

Alaska's most vulnerable populations depend heavily on a network of community nonprofit provider agencies. Before last year's rebasing for FY09, many home and community-based service providers had been over a decade without a rate review receiving the same level

of reimbursement while their costs continued to climb along with demand for more services.

Home- and community-based services are an effective and efficient means of providing care for nearly 57,000 Alaskans who would otherwise need to be served by more costly institutions. Investment in the foundation of home- and community-based services is prudent to assure that services meet the needs of all vulnerable Alaskans to maintain their quality of life and to hold down the costs of higher level health care.

According to 2006 estimates provided by Senior and Disabilities Services, the average annual cost of a semi-private room in a nursing facility was \$172,685 compared to \$21,436 for the Medicaid waiver.

It should also be kept in mind that as more individuals are able to receive home- and community-based services, fewer of them will need to enter much more costly institutions such as nursing homes. Thus, it is quite possible that by adequately funding these critical pieces of the continuum of care may result in an ultimate cost savings for the State.

Older Alaskans depend on home- and community-based services which help them to continue living in their home communities for as long as possible close to family, friends, and cultural tradition. For seniors, these services may include home-delivered meals, transportation, chore services, care coordination, assisted living homes, and other services. Thirty-six percent of the 3,498 individuals served by Medicaid waivers are older Alaskans - the majority of whom are elders in their 80's on the Older Alaskans waiver.

This bill has broad support from a coalition of providers who have also signed on to our joint Trust and Advisory Boards' position paper. They include

- Alaska Association on Developmental Disabilities, serving 2,636 Alaskans
- AgeNet, serving 18,953 Alaskans
- Personal Care Attendant Providers' Association, serving 3,807 Alaskans
- Assisted Living Association of Alaska, serving 1,500 Alaskans
- Alaska Behavioral Health Association, serving 26,285 Alaskans

[10:19:24 AM](#)

TIM SCHUERCH, POLICY ANALYST, ALASKA NATIVE HEALTH BOARD represented the state's Native Health Organizations. He stressed that providing basic services in outlying areas has grown expensive. The medical inflation index and employer's health insurance increase every year. The rates for home and community based services have been frozen for nine years. A rate freeze for cost effective services does save money overall by preventing and intervening up front. The Alaska Native Health Board supports SB 32. Concerns include gathering the necessary data. He stated that the two year delay was crucial to work with the department to create a rate establishing methodology.

[10:22:16 AM](#)

PAT LUBY, ADVOCACY DIRECTOR, ALASKA ASSOCIATION OF RETIRED PERSONS (AARP), ANCHORAGE (testified via teleconference), in favor of the legislation. The goal of home and community based services is to avoid premature institutionalization for individuals. Rates must undergo review ensuring that providers are accurately reimbursed. Older citizens have fewer options without the help of home and community based services.

MARITA KAPLAN, SENIOR CITIZENS OF KODIAK (testified via teleconference). She urged the committee to allow the annual rate review. The Senior Citizens are challenged with keeping services alive and having trained staff available. Home based services are essential for families striving to keep elders at home.

JACK NIELSON, DEPARTMENT OF HEALTH AND SOCIAL SERVICES (testified via teleconference). He stated that he works in the office of rate review, which works directly with cost reporting and rate setting proposed under SB 32.

Co-Chair Hoffman asked if the department believes that the rate review must occur annually or is a less frequent review prudent.

[10:27:26 AM](#)

Mr. Nielson replied that his work was involved with statutes and regulations. Requirements outlined in federal statutes outline the requirements for rate setting in the Medicaid program. The department must provide access to services for clients with rates that are consistent with economy and efficiency, which has an element of cost. The current laws do not require a cost review each year.

STEVE LESKO, PRESIDENT OF KEY COALITION OF ALASKA (testified via teleconference) in favor of the legislation. He asked that the impact on families be considered. This governs rebasing, which accounts for mandatory pass through costs on

a periodic basis. Community and home based programs do not have access to such a process. This fiscal year marks the fifth year of the rate freeze. These factors have devastating consequences on the community. He mentioned a few of the ways impacts are perceived. Families receive fewer and fewer services. Care for so many is not an option it is a matter of life and death.

[10:33:37 AM](#)

CONNIE SIPE, EXECUTIVE DIRECTOR FOR CENTER FOR COMMUNITIES, SITKA (testified via teleconference) representing a non-profit based in Sitka. She spoke in favor of the legislation. She explained that the budget is made up of 50 percent Medicaid reimbursements. She stated that the center does not receive grants. She spoke of the areas served in Southeast Alaska. She stated that the center had 113 clients in Sitka, Kake, and Ketchikan. Medicaid pays for the services. She felt that her organization had been unfairly treated in the Medicaid arena for home and community based services leading to many position cuts. SB 32 is necessary to keep home and community based services stable.

[10:38:38 AM](#)

EMILY ENNIS, EXECUTIVE DIRECTOR, FAIRBANKS RESOURCE AGENCY (testified via teleconference), in support of SB 32. Medicaid supported home and community services enable the care of people who are not able to independently care for themselves. She believed that the Medicaid community services along with hospitals and nursing homes represent Alaska's long term healthcare system in the community.

[10:42:32 AM](#)

DON CLINE, THERAPIST, BRISTOL BAY BEHAVIORAL HEALTH CORPORATION, DILLINGHAM (testified via teleconference), spoke in support of SB32. He mentioned the recent termination of the crisis center, "Our House," which served as respite for the chronically mentally ill. The center was closed and the service is missed by both the families and the mentally ill individuals.

[10:46:05 AM](#)

RACHEL GREEN, REPRESENTATIVE FROM THE PALMER SENIOR CENTER (testified via teleconference), in support of SB 32. She supported the bill due to the regular rate review of state services. The senior citizen population is increasing, and senior citizen services have been underfunded for many years. This bill allows the necessary tools to provide educated funding decisions for home and community based services now and in the future.

10:48:19 AM

EMMA HUNTSMAN, SELF, BARROW (testified via teleconference), in support of SB 32. She spoke in support of the North Slope area. She spoke in support of Medicaid and annual rate reviews. She relayed appreciation for the benefits of Medicaid utilized by her disabled son.

10:51:14 AM

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ADJOURNMENT

The meeting was adjourned at 10:50 AM.