

ALASKA STATE LEGISLATURE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

April 4, 2024

3:45 p.m.

MEMBERS PRESENT

Senator David Wilson, Chair
Senator James Kaufman, Vice Chair
Senator Forrest Dunbar
Senator Cathy Giessel

MEMBERS ABSENT

Senator Löki Tobin

COMMITTEE CALENDAR

CONFIRMATION HEARING(S) :

State Medical Board
Eric Nimmo - Chickaloon

- CONFIRMATION ADVANCED

PRESENTATION: GOVERNOR'S TASK FORCE ON CHILD CARE

- HEARD

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 89(FIN)

"An Act relating to education tax credits for certain payments and contributions for child care and child care facilities; relating to the insurance tax education credit, the income tax education credit, the oil or gas producer education credit, the property tax education credit, the mining business education credit, the fisheries business education credit, and the fisheries resource landing tax education credit; renaming the day care assistance program the child care assistance program; relating to the child care assistance program and the child care grant program; providing for an effective date by amending the effective date of secs. 1, 2, and 21, ch. 61, SLA 2014; and providing for an effective date."

- REMOVED FROM AGENDA

HOUSE BILL NO. 57

"An Act relating to review organizations and permitting an emergency medical services provider to establish a review organization; and relating to patient records."

- MOVED SCS HB 57(HSS) OUT OF COMMITTEE

SENATE BILL NO. 240

"An Act relating to medical assistance coverage for rehabilitative, mandatory, and optional services furnished or paid for by a school district on behalf of certain children."

- MOVED CSSB 240(HSS) OUT OF COMMITTEE

PREVIOUS COMMITTEE ACTION

BILL: HB 57

SHORT TITLE: EMERGENCY MED. SVCS: REVIEW ORGANIZATIONS

SPONSOR(S): REPRESENTATIVE(S) WRIGHT

02/03/23	(H)	READ THE FIRST TIME - REFERRALS
02/03/23	(H)	L&C, HSS
02/17/23	(H)	L&C AT 3:15 PM BARNES 124
02/17/23	(H)	Heard & Held
02/17/23	(H)	MINUTE(L&C)
03/03/23	(H)	L&C AT 3:15 PM BARNES 124
03/03/23	(H)	Moved HB 57 Out of Committee
03/03/23	(H)	MINUTE(L&C)
03/06/23	(H)	L&C RPT 4DP 1NR
03/06/23	(H)	DP: SADDLER, PRAX, RUFFRIDGE, SUMNER
03/06/23	(H)	NR: CARRICK
03/21/23	(H)	HSS AT 3:00 PM DAVIS 106
03/21/23	(H)	Heard & Held
03/21/23	(H)	MINUTE(HSS)
03/28/23	(H)	HSS AT 3:00 PM DAVIS 106
03/28/23	(H)	Moved HB 57 Out of Committee
03/28/23	(H)	MINUTE(HSS)
03/29/23	(H)	HSS RPT 5DP
03/29/23	(H)	DP: RUFFRIDGE, SUMNER, FIELDS, MINA, PRAX
05/09/23	(H)	TRANSMITTED TO (S)
05/09/23	(H)	VERSION: HB 57
05/10/23	(S)	READ THE FIRST TIME - REFERRALS
05/10/23	(S)	L&C, HSS
02/12/24	(S)	L&C AT 1:30 PM BELTZ 105 (TSBldg)
02/12/24	(S)	Heard & Held
02/12/24	(S)	MINUTE(L&C)
02/21/24	(S)	L&C AT 1:30 PM BELTZ 105 (TSBldg)

02/21/24 (S) Moved HB 57 Out of Committee
02/21/24 (S) MINUTE(L&C)
02/23/24 (S) L&C RPT 4DP
02/23/24 (S) DP: BJORKMAN, DUNBAR, GRAY-JACKSON,
MERRICK
03/14/24 (S) HSS AT 3:30 PM BUTROVICH 205
03/14/24 (S) Heard & Held
03/14/24 (S) MINUTE(HSS)
04/02/24 (S) HSS AT 3:30 PM BUTROVICH 205
04/02/24 (S) Scheduled but Not Heard
04/04/24 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 240

SHORT TITLE: SCHOOL DISTRICT MEDICAL ASSISTANCE

SPONSOR(s): RULES BY REQUEST OF THE GOVERNOR

02/19/24 (S) READ THE FIRST TIME - REFERRALS
02/19/24 (S) HSS
02/27/24 (S) HSS AT 3:30 PM BUTROVICH 205
02/27/24 (S) Heard & Held
02/27/24 (S) MINUTE(HSS)
03/12/24 (S) HSS AT 3:30 PM BUTROVICH 205
03/12/24 (S) Heard & Held
03/12/24 (S) MINUTE(HSS)
04/04/24 (S) HSS AT 3:30 PM BUTROVICH 205

WITNESS REGISTER

ERIC NIMMO, Appointee
State Medical Board
Chickaloon, Alaska

POSITION STATEMENT: Testified as the governor's appointee to the State Medical Board.

HEIDI HEDBERG, Commissioner
Department of Health
Juneau, Alaska

POSITION STATEMENT: Co-presented a presentation on the Governor's Task Force on Child Care.

LEAH VAN KIRK, Deputy Commissioner
Department of Health
Juneau, Alaska

POSITION STATEMENT: Co-presented a presentation on the Governor's Task Force on Child Care.

REPRESENTATIVE STANLEY WRIGHT, District 22
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Sponsor of HB 57.

JARED KOSIN, President
Alaska Hospital and Healthcare Association
Anchorage, Alaska

POSITION STATEMENT: Commented on HB 57.

LEAH VAN KIRK, Deputy Commissioner
Department of Health
Juneau, Alaska

POSITION STATEMENT: Provided a brief overview of SB 240.

ACTION NARRATIVE

[3:45:29 PM](#)

CHAIR DAVID WILSON called the Senate Health and Social Services Standing Committee meeting to order at 3:45 p.m. Present at the call to order were Senators Dunbar, Giessel, and Chair Wilson. Senator Kaufman arrived thereafter.

CONFIRMATION HEARING(S) **STATE MEDICAL BOARD**

[3:46:30 PM](#)

CHAIR WILSON announced the consideration of the governor's appointee Eric Nimmo to the State Medical Board.

CHAIR WILSON asked Dr. Nimmo to tell the committee about himself and his interest in serving on the State Medical Board.

[3:46:51 PM](#)

ERIC NIMMO, M.D., Appointee, State Medical Board, Chickaloon, Alaska, shared his personal and work history, including his career as a doctor and subsequent role with the Department of Corrections, from which he retired in 2022. He stated that he still has valuable experience to offer to Alaska and its citizens. When approached by a colleague about serving on the medical board, he decided to pursue the opportunity. He expressed his belief that healthcare should be provided with excellence, grounded in evidence-based research and experience, and remain free from excessive regulation, undue influence from third-party payers, or popular opinion, which aligns with sentiments he has heard from current board members.

[3:49:46 PM](#)

SENATOR GIESSEL asked whether Dr. Nimmo had attended any State Medical Board meetings yet.

DR. NIMMO replied he attended the last one by zoom conference, which was in February.

[3:50:15 PM](#)

SENATOR GIESSEL asked Dr. Nimmo to identify the top issues currently being addressed by the State Medical Board.

DR. NIMMO stated that the primary issue at the time appeared to be the new physician assistant (PA) regulations, which were subsequently tabled pending related legislation. He added that he has extensive experience working with PAs and nurse practitioners in various settings, particularly during his tenure with the Department of Corrections.

SENATOR GIESSEL acknowledged the importance of working with nurse practitioners, disclosing that she is one herself. She then asked Dr. Nimmo for his thoughts on the State Medical Board's role in addressing opioid issues, particularly regarding rescue medications, and inquired about the level of attention he would give this issue if on the board.

[3:51:27 PM](#)

DR. NIMMO stated he is currently unaware of the State Medical Board's stance on opioid issues but has extensive experience observing the crisis. He recalled the pressure placed on providers to prescribe increasing amounts of opioids and, later, witnessing the effects of opioid withdrawal among individuals in the Department of Corrections. He noted the challenge of managing this issue, including the implementation of approved treatments, and described it as a complex problem.

[3:52:29 PM](#)

CHAIR WILSON asked where Dr. Nimmo envisions the State Medical Board focusing its efforts in the near future, including the next three to five years.

[3:52:43 PM](#)

DR. NIMMO stated that he is not yet familiar enough with the State Medical Board to engage in strategic planning, as he has just begun working on applicant approvals and disciplinary actions. He stated his belief that a key issue is preserving Alaskan healthcare providers' ability to operate in ways suited

to Alaska, without excessive influence from national trends. He supports allowing providers to make decisions based on their medical experience and evidence.

[3:54:03 PM](#)

CHAIR WILSON solicited a motion.

[3:54:07 PM](#)

SENATOR DUNBAR moved Eric Nimmo, appointee to the State Medical Board, be forwarded to a Joint Session for consideration.

He reminded members that signing the report(s) regarding appointments to boards and commissions in no way reflects individual members' approval or disapproval of the appointees; the nominations are merely forwarded to the full legislature for confirmation or rejection.

[3:54:24 PM](#)

CHAIR WILSON stated that in accordance with AS 39.05.080, the Senate Health and Social Services Standing Committee reviewed the following and recommends the appointment be forwarded to a Joint Session for consideration:

State Medical Board

Eric Nimmo - Chickaloon

[3:54:42 PM](#)

At ease

PRESENTATION: GOVERNOR'S TASK FORCE ON CHILD CARE

[3:55:57 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of a presentation on the Governor's Task Force on Child Care.

[3:56:19 PM](#)

HEIDI HEDBERG, Commissioner, Department of Health, Juneau, Alaska moved to slide 2 and explained that the governor issued Administrative Order 346, establishing a task force to assess child care services statewide. The presentation would provide a high level summary of the work to date that the task force has taken:

[Original punctuation provided.]

Presentation Outline

1. Task Force Purpose
2. Summary of efforts
3. Report Recommendations
4. Moving Forward

[3:56:51 PM](#)

COMMISSONER HEDBERG moved to slide 3 and said the task force aimed to gather diverse representation from child care providers and included legislators, such as Senator Tobin and Representative Coulombe, to develop recommendations for improving access to quality child care. She highlighted the critical role of a strong child care system in enhancing children's health, supporting parents in the workforce, driving economic growth, and preparing children for school. The task force focused on children aged zero to six and divided its work into six topic areas. She said the presentation would only cover background checks, workforce, and licensing, which were the three areas that the task force focused on from May 2023 to December 2023:

[Original punctuation provided.]

Governor's Task Force on Child Care

Administrative Order 346

Purpose

- Develop a plan to improve availability and affordability of quality child care
- Consult existing resources
- Develop policy recommendations

Focus Areas

- Background Checks
- Workforce
- Licensing
- Access
- Quality
- Subsidy

Structure

- Eleven voting members
- Representatives from across the state

[3:58:10 PM](#)

COMMISSIONER HEDBERG continued on slide 3 and said the presentation would only cover background checks, workforce, and licensing, which were the three areas that the task force focused on from May 2023 to December 2023. She stated she would provide a high level overview of what the department has done towards implementing 33 recommendations.

[3:58:44 PM](#)

COMMISSIONER HEDBERG moved to slide 4 reported that in the first six months, the task force conducted 14 meetings from May to December. During this time, two public comment periods allowed for input, with 26 individuals calling in and 76 submitting written comments, totaling around 500 comments on the 33 recommendations. She noted that the last two areas of public comment topics – collaboration with municipal governments and zoning challenges – are particularly relevant to local authorities, while other areas reflect recommendations for state-level action:

[Original punctuation provided.]

Public Comment Topics

- Support of the Recommendations
- Workforce Support
- Wage Increases
- Recognition/Professionalization
- Child Care Access and Affordability
- Licensing and Requirements
- Education and Training
- Background Checks
- Funding and Sustainability
- Collaboration and Municipal Involvement
- Zoning Challenges

[3:59:40 PM](#)

COMMISSIONER HEDBERG moved to slide 5 and provided an overview of the task force's five recommendations on background checks, aimed at increasing access and reducing barriers. She explained that after a cyberattack years ago, the Department of Health and Social Services implemented a "whitelisting" process that required child care providers to purchase secure URLs to submit background checks, which proved time-consuming and costly. In response, the department engaged a contractor to create a secure portal for direct submission of background checks, eliminating the whitelisting requirement. Additionally, in partnership with the Department of Public Safety, four Live Scan electronic

fingerprinting units are being deployed to rural communities in state office buildings, allowing providers to electronically submit fingerprints and reduce processing time. She noted that once established, the service may expand to other sectors. In collaboration with the Office for Children's Services, mobile fingerprinting devices are also being deployed to enable background checks for those in remote communities, providing broader access to child care sector employment.

[Original punctuation provided.]

Report Recommendations

- Task Force Initial Report submitted on December 31, 2023
- 33 recommendations across five areas of focus:

Background Checks
Licensing
Workforce
Employers
Tribal Authority

[4:03:10 PM](#)

CHAIR WILSON noted a similar issue exists for behavioral health providers, who also require a dedicated URL to be on the whitelist. He asked whether the secure portal was designed solely for child care recommendations or if it could be implemented across the Department of Health for other providers, such as behavioral health facilities.

COMMISSIONER HEDBERG replied it applies to all sectors.

[4:03:44 PM](#)

LEAH VAN KIRK, Deputy Commissioner, Department of Health, Juneau, Alaska, outlined the task force's recommendations on licensing, emphasizing its role in ensuring safe, high-quality environments for children in Alaska. She said feedback from providers and public comments highlighted the need for a stronger licensing system, focusing on technical support and removing barriers. She noted that since the task force's start, a new technology system for the Child Care Program Office has been procured and is set to launch in October 2024. This system includes portals for providers, families, and staff, enabling web-based licensing applications, status checks, and alerts to improve efficiency. She also addressed the challenges of the licensing process, which can be time-intensive and subject to

various municipal requirements, making coaching and navigation support vital. Additionally, she cited the successful efforts in the south Kenai Peninsula, where the Division of Public Health's Healthy and Equitable Communities Program increased child care spots by 45 in under a year. Finally, she emphasized the importance of creating and distributing materials to support those interested in starting child care businesses.

[4:05:30 PM](#)

SENATOR KAUFMAN joined the meeting.

[4:06:52 PM](#)

MS. VAN KIRK addressed the workforce challenges within Alaska's early childhood education sector, noting the task force's goal to create a well-supported, professionally compensated workforce with access to benefits, professional development, and advancement pathways. She highlighted the University of Alaska Anchorage's (UAA) success in increasing degree and endorsement programs in early childhood education, leading to a significant rise in enrollment and demonstrating Alaskans' interest in this field. The department conducted a workforce study revealing 93 percent of current early childhood educators plan to stay in the profession. She explained that multiple studies, including one by Johns Hopkins University in 2019, the First Children's Finance report, and Alaska's Early Childhood Strategic Plan, informed task force recommendations. These include raising wages, expanding benefits, improving work conditions, strengthening career pathways, and offering more support for in-home providers, who experience higher turnover than staff in licensed centers. She also expressed enthusiasm for upcoming technology improvements to enhance communication between providers and Child Care Program Office staff, launching in October.

[4:09:30 PM](#)

MS. VAN KIRK discussed the importance of employer-based child care, emphasizing how employers across Alaska are increasingly recognizing their role in supporting a strong statewide workforce beyond early childhood education. She explained that the task force is exploring public-private partnerships and assessing available spaces in school district, state, and public buildings for potential child care facilities. Recommendations include supporting businesses in creating on-site or nearby child care options, with reports from various businesses, including hospitals, indicating improved employee retention and a more stable workforce as a result. She also highlighted SB 237, the Alaska Affordability Act, which proposes tax credits

for employers investing in child care or providing child care stipends, a step that has encouraged broader private sector engagement across the state.

[4:11:22 PM](#)

SENATOR DUNBAR asked whether there were concerns about the potential of large companies outcompeting small businesses in offering child care benefits, given Alaska's low-tax environment with few high-tax organizations. He referenced hospitals and oil companies that face intense competition for employees, questioning if such benefits would disproportionately favor large companies. He inquired if there were options for small businesses to pool resources or alternative ways for smaller employers, like a fishing boat operation, to utilize these tax credits.

COMMISSIONER HEDBERG indicated that questions regarding the Governor's bill, SB 237, and its tax credits should be directed to the Department of Revenue, as the credits target specific business sectors. She acknowledged his points about small businesses and noted that the task force recommended appointing a liaison to work with businesses of all sizes on pooling resources to meet child care needs for employees. She added that \$14 million in remaining American Rescue Plan Act (ARPA) funds was given out through community grants. One of the pilot projects was a cooperative in Anchorage, where four organizations came together to work on the staffing model to support child care for employees. She emphasized that while tax credits are one approach, other strategies are being considered to support on-site or near-site child care for the employees of businesses.

[4:13:47 PM](#)

SENATOR DUNBAR referenced similar union-level efforts using CARES Act funds to directly subsidize child care providers and questioned why the state would choose a tax credit model, which reduces revenue, rather than directly establishing support programs. He suggested a model where the state collects revenue and sets up programs that any business could pay into, allowing smaller businesses to participate alongside large corporations and have a stake in supporting child care.

CHAIR WILSON said another way to frame the question is could the state do a Supporting Health Access Repayment Program (SHARP) for child care providers.

[4:14:35 PM](#)

COMMISSIONER HEDBERG stated SHARP was evaluated and the short answer is no. However, to answer Senator Dunbar she stated all options are on the table and the department is looking at everything it can do to support the child care sector.

[4:14:59 PM](#)

SENATOR DUNBAR inquired about how other states have approached funding child care, noting Alaska's unique lack of a broad-based tax and comparatively low corporate taxes. He mentioned the District of Columbia's universal pre-K program, which, though different from child care, shares similar goals and is directly funded rather than using tax credits. He asked why Alaska wouldn't adopt a direct funding model and questioned the outcomes in states that directly fund child care versus those using tax credit systems.

[4:15:43 PM](#)

MS. VAN KIRK explained that the task force is actively evaluating access and affordability models, with discussions underway. She highlighted the "tri-share" model, used in states like Michigan and Kentucky, where employers, parents, and the state each cover one-third of child care costs. She said the state was examining other models because barriers in the child care sector need to be approached incrementally and from different viewpoints. She emphasized this is especially true when considering subsidies. She noted that in looking at payer mix only 20 to 30 percent of children in child care currently receive subsidies, leaving 70 to 80 percent of families paying out-of-pocket. The task force is considering options that can serve both subsidy-eligible families and those who are not, ensuring support for a range of employers—from large corporations to small operations like fishing boats.

[4:17:32 PM](#)

MS. VAN KIRK highlighted the role of tribal authority in child care oversight, noting that the federal Administration for Children and Families (ACF) provides oversight to both states and tribes, enforcing the same health and safety standards. The governor's task force recommended allowing ACF to serve as the primary oversight agency for tribal child care facilities, exempting them from additional state oversight and reducing duplicative requirements. She explained that this approach mirrors the exemption for military child care facilities, which are regulated by the Department of Defense rather than by state licensing.

[4:18:37 PM](#)

MS. VAN KIRK moved to slide 6 to discuss subsidy, access and affordability, and quality. She said the department's final report would include:

[Original punctuation provided.]

- Models used in other states to share the cost of care
- Innovations to incentivize new early childhood education and child care centers
- Increasing access for children with special needs
- Supporting children's behavioral health

She also noted that the department is looking at subsidies and there are three levers that impact federal funding and how they are used:

[Original punctuation provided.]

Family Co-Pay
State Rate
Eligibility

MS. VAN KIRK explained that both the cost of care survey and market price survey should inform the state rate for child care. Currently, Alaska uses the market price survey, which examines provider charges and sets the state rate at the 75th percentile. The cost of care survey, however, assesses actual provider costs and geographical differences, and is expected to be completed in July. She added that the state is concluding its market price survey and looks forward to integrating these findings to guide future efforts.

[4:21:38 PM](#)

SENATOR DUNBAR asked whether increasing access to Head Start is one of the task force's recommendations.

MS. VAN KIRK clarified that the recommendation did not specifically target Head Start, which is overseen by the Department of Education. However, since Head Start programs often provide child care, the task force aims to align early childhood education systems to ensure quality across all settings. This alignment would support consistent, high-quality early education across programs where children may be enrolled.

[4:22:35 PM](#)

SENATOR DUNBAR acknowledged the department's focus on alignment and quality but noted that, for many people, the priority is finding child care that provides both care and education, such as Head Start, which is widely used in his district. Given discussions on access and affordability, he asked if expanding Head Start classrooms would benefit the overall early childhood system.

MS. VAN KIRK stated that the goal is to provide high-quality, affordable programming for parents, regardless of its name or oversight agency. She affirmed that collaboration across the sector is essential.

[4:24:01 PM](#)

At ease

HB 57-EMERGENCY MED. SVCS: REVIEW ORGANIZATIONS

[4:24:56 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of HOUSE BILL NO. 57 "An Act relating to review organizations and permitting an emergency medical services provider to establish a review organization; and relating to patient records."

[4:25:23 PM](#)

REPRESENTATIVE STANLEY WRIGHT, District 22, Alaska State Legislature, Juneau, Alaska, sponsor of HB 57 provided the following recap:

House Bill 57 introduces legal protections for confidential EMS peer reviews and quality assurance discussions, fostering an environment of continuous learning and safety. It shields EMS providers and medical directors from legal repercussions, ensuring that they focus on improving patient care without fear.

[4:26:16 PM](#)

CHAIR WILSON moved to adopt Amendment 1, work order 33-LS0334\A.3, to HB 57.

33-LS0335\A.3
Bergerud
4/3/24

AMENDMENT 1

OFFERED IN THE SENATE
TO HB 57

BY SENATOR WILSON

Page 1, line 2:

Delete "**and**"

Following "**records**":

Insert "**; and relating to disclosure and reporting of health care services, prices, and fee information**"

Page 3, following line 22:

Insert a new bill section to read:

"* **Sec. 4.** AS 18.23.400(n)(3) is amended to read:

(3) "health care facility municipal, or state hospital, psychiatric hospital, emergency department, independent diagnostic testing facility, residential psychiatric treatment center as defined in AS 47.32.900, kidney disease treatment center (including freestanding hemodialysis units), office of a private physician or dentist whether in individual or group practice, ambulatory surgical center as defined in AS 47.32.900, freestanding birth center as defined in AS 47.32.900, and rural health clinic as defined in AS 47.32.900; "health care facility" does not include " means a private,

(A) the Alaska Pioneers' Home and the Alaska Veterans' Home administered by the department under AS 47.55;

(B) an assisted living home as defined in AS 47.33.990;

(C) a nursing facility licensed by the department to provide long-term care;

(D) a facility operated by an Alaska tribal health organization;

[AND]

(E) a hospital operated by the United States Department of Veterans Affairs or the United States Department of Defense, or any other federally operated hospital or institution; or

(F) a hospital subject to 45 C.F.R. 180 as that section read on the effective date of this Act or any other federal price transparency requirements that are reasonably similar to or exceed the requirements in this section;"

[4:26:23 PM](#)

SENATOR KAUFMAN objected for purposes of discussion.

[4:26:30 PM](#)

At ease

[4:26:45 PM](#)

CHAIR WILSON reconvened the meeting and explained that Amendment 1 addresses price transparency and disclosure of healthcare cost information for providers. Alaska updated its laws in 2018, but since that time, federal laws have been updated twice—first with the Affordable Care Act (ACA) and then with the No Surprises Act (NSA), which are more rigorous than our state laws. Amendment 1 provides statutory clarity upon those laws and, if passed, would require hospitals to comply with federal requirements under 45 CFR 180, in addition to state standards found in AS 18.23.400, if 45 CFR 180 or similar federal hospital transparency regulations are repealed. This ensures hospitals remain subject to state reporting requirements, maintaining price transparency without duplicative reporting obligations. Federal requirements are currently more stringent than state requirements. Members have been provided with four relevant items from the Alaska Hospital and Healthcare Association, Alaska Regional Hospital, and Fairbanks Memorial Hospital. He stated representatives from these organizations were available to answer questions.

[4:29:08 PM](#)

SENATOR GIESSEL acknowledged the efficacy of the amendment but expressed difficulty understanding its connection to Emergency Medical Services (EMS) reviews, noting that it feels like an entirely new topic, perhaps suited for a separate bill. She requested clarification.

CHAIR WILSON clarified that it is not a separate bill but rather an amendment to similar sections of law and statutes addressed by the current bill.

SENATOR GIESSEL replied she understood and noted it.

CHAIR WILSON responded that the premise is to do a legislative fix to statute. He noted that a title change resolution was also prepared.

[4:30:01 PM](#)

SENATOR GIESSEL stated that she would be interested in hearing the sponsor's response to this significant amendment.

[4:30:11 PM](#)

REPRESENTATIVE WRIGHT stated that he had reviewed the amendment and is open to taking more if it creates positive changes in similar legislation.

[4:30:39 PM](#)

SENATOR DUNBAR noted for the record, and with appreciation to the Chair, that Amendment 1 as he reads it provides a "backstop." He stated the purpose of the amendment is to ensure hospitals adhere to the higher federal standard under 45 CFR 180, or any similar federal price transparency requirement, in case of future changes. He explained that if federal law were fully repealed, the amendment would default to the state standard, serving as a fallback. He emphasized that this is his interpretation of the amendment and expressed hope that future readers understand it similarly, commending the Chair's work in crafting the language.

[4:32:27 PM](#)

CHAIR WILSON asked Mr. Kosin to provide comment and background on the impetus for Amendment 1, as well as some of the challenges Alaskan hospitals encounter with dueling federal and state statutes.

[4:32:54 PM](#)

JARED KOSIN, President, Alaska Hospital and Healthcare Association, Anchorage, Alaska, pointed out that Alaska's

requirements require manual data entry into a PDF, while federal standards are automated and on a much broader scale. Aligning with federal standards would save both hospitals and the state considerable time and resources, as it would eliminate redundant data entry. He expressed appreciation for the amendment, emphasizing that if federal standards ever fall below Alaska's current requirements, hospitals will automatically revert to the state standards. He also highlighted the federal focus on shoppable services and episodes of care, which provide practical, consumer-friendly information that state requirements currently lack.

[4:36:51 PM](#)

CHAIR WILSON asked if objection was maintained.

[4:36:59 PM](#)

SENATOR KAUFMAN removed his objection.

[4:37:00 PM](#)

CHAIR WILSON found no further objection and Amendment 1 was adopted.

REPRESENTATIVE WRIGHT thanked the committee for hearing HB 57.

[4:37:26 PM](#)

CHAIR WILSON solicited the will of the committee.

[4:37:29 PM](#)

SENATOR KAUFMAN moved to report HB 57, work order 33-LS0335\A, as amended, from committee with individual recommendations and attached fiscal note(s).

[4:37:42 PM](#)

CHAIR WILSON asked if there was objection.

[4:37:48 PM](#)

SENATOR DUNBAR objected for purposes of discussion.

SENATOR DUNBAR stated there was mention of a title change.

CHAIR WILSON explained that Legislative Legal Services would provide a title change resolution that will be read across the floor and then go to the Senate Secretaries office until HB 57 is taken up.

[4:38:09 PM](#)

SENATOR DUNBAR removed his objection.

[4:38:12 PM](#)

CHAIR WILSON found no further objection and SCS HB 57(HSS) was reported from the Senate Health and Social Services Standing Committee.

[4:38:27 PM](#)

At ease

SB 240-SCHOOL DISTRICT MEDICAL ASSISTANCE

[4:40:01 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 240 "An Act relating to medical assistance coverage for rehabilitative, mandatory, and optional services furnished or paid for by a school district on behalf of certain children."

CHAIR WILSON stated an initial hearing on SB 240 was held February 27, 2024. At a second hearing on March 12, 2024, the committee adopted an amendment to SB 240 that lowered the age of consent for Medicaid services. He said the Department of Health answered questions and copies were distributed to members.

[4:41:27 PM](#)

LEAH VAN KIRK, Deputy Commission, Department of Health, Juneau, Alaska, provided a brief overview of SB 240 stating that it removes the requirement for a child to have a disability or an Individualized Education Plan (IEP), for school districts to submit claims for Medicaid reimbursement. SB 240 focuses on providing services to children in schools regardless of their status related to special education or any type of diagnosis.

[4:42:12 PM](#)

CHAIR WILSON spoke to previous concerns and the response from the department. He stated his concern was the need for parental consent for billing purposes. The department replied parental consent would be needed.

[4:42:48 PM](#)

MS. VAN KIRK thanked the committee for hearing SB 240.

[4:42:54 PM](#)

CHAIR WILSON solicited the will of the committee.

[4:42:59 PM](#)

SENATOR KAUFMAN moved to report SB 240, work order 33-GS-2369\A, as amended, from committee with individual recommendations and attached fiscal note(s).

[4:43:13 PM](#)

CHAIR WILSON objected for purposes of discussion.

CHAIR WILSON stated he forgot to mention a document from Georgetown University was posted to BASIS that discusses Medicaid utilization in school districts. He opined that it is useful information for SB 240 and other pieces of legislation.

[4:43:42 PM](#)

CHAIR WILSON removed his objection.

[4:43:45 PM](#)

CHAIR WILSON found no further objection and CSSB 240(HSS) was reported from the Senate Health and Social Services Standing Committee.

[4:44:17 PM](#)

There being no further business to come before the committee, Chair Wilson adjourned the Senate Health and Social Services Standing Committee meeting at 4:44 p.m.