

**HB**

**367**

**(File 2)**

2/9/02

**Subject: Denali Kid Care**

**Date: Sat, 02 Feb 2002 18:52:38 -0900**

**From: Tom Conley <prophet@ptialaska.net>**

**To: Fred Dyson <Representative\_Fred\_Dyson@legis.state.ak.us>**

Dear Representative Dyson, , The introduction of HB 367 calling for the reduction of income eligibility for enrollment in Denali Kid Care from 200% to 150% of the poverty level is distressing. The program has proved a real boon to the working poor who often hold jobs with limited benefits and who therefore have limited ability to secure medical services for their children. Since these children now qualify during both prenatal and postnatal life, the potential harm to them in the long run is significant. Though the deletion of these 7000 children and 700 pregnant mothers from the eligibility list may stand to save the state some funds in the short term, its potential for saddling the state with long term costs for the care of chronically ill children and young adults is significant. The program has proved both effective and humane at a quite reasonable cost. It is estimated that the reduction in eligibility is likely to save the state about \$8 to \$8.5 million annually ( the bulk of the program being federally funded). The upside of the proposal in short-term savings can in no way offset the downside of long-term expense. There is no way to calculate the cost in human terms of course, nor would I try, but it is the bottom line. I would therefore urge you not to enact this proposal.

Sincerely,

Thomas L Conley, MD.FAAP // Pediatrician, Sitka

DEAR \_\_\_\_\_  
 WITH A BILLION DOLLAR BUDGET  
 DEFICIT FACING THE STATE, WE CANNOT DO  
 EVERYTHING WE WANT FOR EVERYONE. THERE  
 IS NO DEFINATE STUDY THAT SHOWS ~~HARD~~  
 OUR QUALIFICATION THRESHOLD IS THE RIGHT  
 LEVEL. WHAT DO YOU THINK THE QUALIFICATION  
 LEVEL SHOULD BE.

**PHONE CALL**

FOR	DATE	TIME	A.M. P.M.
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PHONE	<input type="checkbox"/> FAX <input type="checkbox"/> MOBILE		RETURNED YOUR CALL
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	Keep DKC		
			PLEASE CALL
			WILL CALL AGAIN
			CAME TO SEE YOU
			WANTS TO SEE YOU
SIGNED			Tops FORM 4003

**PHONE CALL**

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**PHONE CALL**

FOR \_\_\_\_\_ DATE 2/14 TIME \_\_\_\_\_ A. M. P. M.

M Monica

OF \_\_\_\_\_

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PLEASE CALL
WILL CALL AGAIN
CAME TO SEE YOU
WANTS TO SEE YOU

*Keep Sending Kind Core*

TOPS FORM 4003

**PHONE CALL**

FOR \_\_\_\_\_ DATE 2/14 TIME \_\_\_\_\_ A. M. P. M.

M Christie W. Hansen

OF \_\_\_\_\_

PHONE  FAX  MOBILE

MESSAGE Oppose Bill HB 337 AREA CODE \_\_\_\_\_ NUMBER \_\_\_\_\_ EXTENSION \_\_\_\_\_

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CAME TO SEE YOU
WANTS TO SEE YOU

*Danell A. Core*

TOPS FORM 4003

**PHONE CALL**

FOR \_\_\_\_\_ DATE 2/14 TIME \_\_\_\_\_ A. M. P. M.

M Michelle Hansen

OF \_\_\_\_\_

PHONE  FAX  MOBILE

MESSAGE Keep Sending Kind AREA CODE \_\_\_\_\_ NUMBER \_\_\_\_\_ EXTENSION \_\_\_\_\_

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CAME TO SEE YOU
WANTS TO SEE YOU

*Core*

TOPS FORM 4003

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <i>Ms. Demetria</i>	M.I. <i>N</i>	Last name <i>Hall</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <i>337-9221</i>
Mailing address <i>6410 Reagent Dr. Anch. AK</i>				Zip code <i>99504</i>
Residence (street) address (different from mailing address)				Zip code
Email address			Signature <i>Demetria N. Hall</i>	Date <i>Feb. 17-2002</i>

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenuit (che)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Donley (don)
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**Subject:** Fill out the boxes below OR enter a Subject.

HB/SB	Bill number		and check one:	<input checked="" type="checkbox"/> Support	
<i>HB</i>	<i>367</i>			<input type="checkbox"/> Oppose	<u>OR</u> enter a general Subject
				<input type="checkbox"/> Amend	(LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I strongly with low and need like myself. since I'm low for the sake	oppose to income and insurance Denali Kid Care income. of the unwealthy.	this because to those saw themselves was and still Please consider Thank YOU!	it is a big teenagers who and their is a great Denali Kid Care <div style="text-align: right;">5 10 15 20 25 30 35</div>
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Mr. / Ms. / Title	First name	M.I.	Last name	Jr. / Sr. / III
MS	Jemifer		Jolicoeur	
Group affiliation (if applicable)				Daytime telephone number
				7044-0432
Mailing address				Zip code
1410 Regent Dr Anchorage, AK				99504
Residence (street) address (different from mailing address)				Zip code
319th St Anchorage				
Email address		Signature		Date
kboobee00@hotmail.com		Jemifer J. Jolicoeur		2-19-02

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members																																																																																																								
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">H or S</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td>Community &amp; Regional Affairs (cra)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Finance (fin)</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Health, Ed., &amp; Social Services (hes)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Judiciary (jud)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Labor &amp; Commerce (l&amp;c)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Resources (res)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Rules (rls)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>State Affairs (sta)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Transportation (tra)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other:</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other:</td> </tr> </table>	H or S		<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/>	Finance (fin)	<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/>	Judiciary (jud)	<input type="checkbox"/>	Labor & Commerce (l&c)	<input type="checkbox"/>	Resources (res)	<input type="checkbox"/>	Rules (rls)	<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/>	Transportation (tra)	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:	<table style="width: 100%; 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HB or SB	Bill number				
HB	367	and check one:	<input checked="" type="checkbox"/> Support	<b>OR</b>	enter a general Subject
			<input type="checkbox"/> Oppose		(LIO staff may modify):
			<input type="checkbox"/> Amend		

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I think that the government should not take		
away Denise Kirkland from our community. They		
should think about the low income single families		
that need this for their children's sake.		
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		30
		35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name	MI	Last name	Jr. / Sr. / III
	Ms. Tanc	M	Strickland	
Group affiliation (if applicable)				Daytime telephone number
N/A				572-0416
Mailing address				Zip code
700 W. 18th Ave. Anchorage Ak.				99503
Residence (street) address if different from mailing address				Zip code
Email address			Signature	Date
fingerhorne202@yhaa.com			<i>[Signature]</i>	02/18/02

**To:** Put a ✓ in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	<input type="checkbox"/> Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	<input type="checkbox"/> Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB	Bill number	and check one:	<input type="checkbox"/> Support		
HB	367	<input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<u>OR</u>	enter a general Subject
					(LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I oppose	this bill	because	my two	children <sup>5</sup>
are on	it and	if this	service	was not <sup>10</sup>
available	I would	have a	very hard	time paying <sup>15</sup>
healthcare	for my	2 yr old	and my	5 yr old <sup>20</sup>
I don't	think that	by taking	away some	things so <sup>25</sup>
wonderful	would	be very	humane.	Alaska is <sup>30</sup>
special	and lets	keep it	this way.	<sup>35</sup>

A United Way Community Partnership



P.O. Box 141689 Anchorage, AK 99514-1689  
3350 Commercial Drive, Suite 203  
Phone: (907) 563-1923 Fax: (907) 563-1959  
probinso@childcareconnection.org

FEB 26 2002

February 22, 2002

Dear House HESS Member:

Enclosed is a resolution approved via email by the Success By 6 Governance Board, supporting funding for Denali KidCare at the Current Level. I emailed you a draft copy of this resolution last Wednesday afternoon in time for your committee hearing on February 21st.

Thank you for holding the bill in committee.

Sincerely,

A handwritten signature in cursive script that reads "Peggy".

Peggy Robinson, Director

enclosure

A United Way Community Partnership



P.O. Box 141689 Anchorage, AK 99514-1689  
3350 Commercial Drive, Second Floor  
Phone: (907) 563-1923 Fax: (907) 563-1959  
Email: [probinso@childcareconnection.org](mailto:probinso@childcareconnection.org)

## Resolution in Support of Funding for Denali KidCare at the Current Level 2002-4

Whereas, in 1996 more than one out of every three children 17 years old or younger in the United States were not covered by private health insurance; and

Whereas, in 1997 Congress adopted the State Child Health Insurance Program (S-CHIP), which allows states to access federal Medicaid funds to provide insurance for uninsured children in working and non-working families. Approximately 71% of the cost is from the federal government; and

Whereas, Denali KidCare, as Alaska's CHIP, began offering health care insurance coverage March 1, 1999 to uninsured Alaskan children and to pregnant Alaskan women; and

Whereas, many employers are not able to pay for dependent health care insurance due to continuously rising costs<sup>1,2</sup>, nor are the employees able to afford the coverage as employers shift more or all of the costs to the employees<sup>3</sup>; and

Whereas, a family of four qualifies if their family income is less than \$44,140 per year (\$3678 per month); and

Whereas, between its inception and June 2000, over 15,000 additional Alaskan children from low-income working families have health insurance through Denali KidCare<sup>4</sup>; and

Whereas, the availability of Denali KidCare has allowed parents formerly on welfare to obtain paying jobs without fear of losing coverage for their children; and

Whereas, insured children are more likely to receive well-baby/well-child care, adequate and timely immunizations, and have health care problems discovered and treated earlier; and

Whereas, for every dollar spent on prenatal care, more than three are saved in lower costs for treating the consequences of low birth weight and prematurity<sup>5</sup>; and

<sup>1</sup> Alaskan businesses report a 10% increase in premium rates from 2001 to 2002. Credit Suisse First Boston, *2002 Benefit Manager Survey*, 15 January 2002, 34.

<sup>2</sup> The percentage of Anchorage employers paying the full cost of benefits for their employees has decreased by over 50% in the last 8 years for businesses with more than 50 employees, to about 20%. Catherine Schumacher, *Anchorage Access to Health Care Coalition Health Insurance Benefits Survey*, September 2001.

<sup>3</sup> At least 30% of surveyed Anchorage businesses pay none of the dependent health insurance premium costs. The average additional dependent premiums cost \$340 per month. Ibid.

<sup>4</sup> Alaska Department of Health and Social Services, *Welfare Reform Status Report 2000*, available from [www.hss.state.alaska.us/publications/3annrreport.pdf](http://www.hss.state.alaska.us/publications/3annrreport.pdf); accessed 20 September 2001.

Whereas, early and consistent prenatal care decreases the risk of death or disability for both the mother and child;

Whereas, uninsured Alaskans are more likely to use expensive emergency room services and to have more serious health problems once they do get treatment; and

Whereas, non-profit health care providers have experienced a continual rise in uncompensated care. For example, Anchorage Neighborhood Health Center has experienced an increase of 43% from 1997-2000 (\$646,000)<sup>6</sup>; and

Whereas, the current cost per year to the State of Alaska for Denali KidCare is \$552 per child and \$4580 per pregnant woman and newborn child until 2 months old; and

Whereas, if the change in eligibility from 200% of Federal Poverty Level to 150% goes into effect, it is estimated that 3821 children and 722 pregnant women and newborns will lose health care coverage; and

Whereas, the State of Alaska will save approximately \$5 million dollars, but will give up almost \$12 million in matching Federal funds;

Whereas, these 4543 Alaskan will increase the pressure on health providers for uncompensated care; and

Whereas, absences from school and undiagnosed or untreated hearing, vision, dental, or health problems negatively affect the children's ability to learn and increase the schools' costs for remediation;

Therefore, be it resolved, that the Success By 6 Governance Board strongly urges the Alaska Legislature to continue to accept Alaskans with up to 200% of the Federal Poverty Rate for the Denali KidCare Program.

Approved via email distribution by the Success By 6 Governance Board on February 20, 2002.



Ernie Hall, Chair

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<sup>5</sup> Center for Health Economics Research, *Access To Health Care*, 1993.

<sup>6</sup> Anchorage Neighborhood Health Center, *Newsletter June/July 2001*, page 2.

2/14/02

Alaska Women's & Children's Clinic  
11823 Old Glenn Hwy Ste 110  
Eagle River, AK 99577

Testimony re: HB 367

My name is Cynthia Ebelacker. I am here representing the AK Nurse Practitioners and the AK Nurses Association. I also own a small private clinic in Eagle River.

You have my written statements that I turned in Tuesday, and which I hope you will have time to read. They mention some of my personal experiences with Denali Kid Care in the last 3 years.

Today I would like to address some of the issues that came up during Tuesday's testimonies

- I agree that we should be fiscally responsible but there seems to be some misconceptions about who qualifies for Denali
  - People aren't flooding in to get on Denali Care. Many who do qualify aren't even aware it exists
  - The parents who qualify for Denali do not professional or white collar workers who usually have access to other insurance
  - It's the blue collar workers and self-employed workers who qualify for Denali.
  - Despite opinion to the contrary, Eagle River is not predominantly an affluent society. At least 65% of my clinic population is able to see me only because they have Denali insurance they live in the rundown apartments and trailers off the main road through Eagle River. They walk with

their babies and toddlers to reach our clinics, even in the winter. We know our clientele and where they live and what they drive, and what jobs they have. We usually get them on Denali as soon as possible.

- These families you want to deny coverage to are the ones who work hard - building and plumbing and working at the fast food stores, and Walmart. They do pay taxes and many of them do vote.

- The difference for many is that 3 years ago, their children would almost never have received any preventative care, and they would have had to go to the ER when their kids were really sick. If Denali goes away for them, they will once again be forced to utilize the ER as their local "doc" - an annual bigger financial burden to the state.

- Our state has the dubious honor of leading the nation in the number of infant and mother deaths and yet you're thinking of cutting 722 <sup>pregnant</sup> women off from Denali and thus prenatal care. Without Denali, most of these women will not see a healthcare provider until they come in to deliver. A good number of these babies will be born prematurely.

- If you haven't looked at the cost to the state for each baby born - before 25 wks, I have. I called the Maternal Health coordinator for Providence. Each child costs us upwards of a qtr of a million dollars each for their hospital stay.

I have been trying since Tuesday to get my calls returned from several different departments at First Health pertaining to the topic of how many Denali families have outside insurance as well.

Under Denali, you can have another medical insurance but you allowed ~~max~~ income for a family of 4 drops from \$36791 monthly to a much lower amt in order for them to still be covered. The answers I did receive from the supervisors that I called, were that there wasn't some great number of abusers in the Denali system. I can supply you with these names + numbers in order to satisfy your interest in the matter.

The parents that this bill will penalize, are for the most part working and trying hard to get above water and out of public assistance. Their children now get preventative healthcare and get their chronic needs met, critical surgeries and referrals get done - and believe it or not, then their lives improve and they do no longer as big a drain on the state resources.

Last, I would like to state that Denali helps clinics like mine, as well as the other larger pediatric clinics and hospitals to survive. Any medical provider will tell you that Denali does not make anyone rich. The reasons we all embrace Denali have more to do with the joy for many of us at seeing the amazing impact of finally receiving healthcare, that Denali has brought to the lives of our families and children.

**Subject: HB 367 - Bill to cut Denali Kid Care**

**Date:** Wed, 20 Feb 2002 21:38:29 -0500

**From:** "Candace Winkler" <candacewinkler@hotmail.com>

**To:** Representative\_Peggy\_Wilson@legis.state.ak.us, Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Sharon\_Cissna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

February 20, 2002

Dear HESS committee members,

I am writing to express my concern over the HB367 proposal to make cuts in the Denali KidCare budget. The proposal would effectively cut mental health services to 375-400 of Alaska's children and medical services to 4,000-7,000 Alaskan families. As a mental health professional these cuts are disturbing, as I understand the long-term consequences that occur to individuals and communities when health and mental health needs go unmet.

Nationwide, the amount of mental health problems among even our youngest children is at an all time high. The agency I work for recently surveyed child care providers in Alaska and found that their primary training and consultation needs revolve around serving children who experience emotional and behavioral health problems. If these children and their families can't have access to basic mental health services at an early age, they are very likely to develop permanent mental health illnesses as adults that often cause a much greater burden upon society than dollars spent on preventive services, such as DKC.

I strongly urge you to vote against this bill and vote to protect Alaska's vulnerable children and families. Thank you for your time and consideration.

Sincerely,

Candace Winkler, MPA MSW

622 M. Street, #A

Anchorage, AK 99501

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# Alaska Native Health Board

4201 Tudor Centre Dr., Suite 105  
Anchorage, Alaska 99508

Phone: (907) 562-6006  
FAX: (907) 563-2001

## Written Testimony for the House HESS Committee

Presented by: **Trudy Anderson**

February 11, 2002

My name is Trudy Anderson. I am the Consumer Awareness Manager of the Alaska Native Health Board (ANHB). ANHB is a statewide non-profit corporation that was established more than 30 years ago for the purpose of "promoting the spiritual, physical, mental, social and cultural well-being and pride of Alaska Native people." The Board of Directors of ANHB include Alaska Native regional and village health providers from across the State. In most cases, these organizations are the only health care providers for their region, serving both Alaska Natives and non-Natives who would otherwise have virtually no access to health care services.

I am going to provide my testimony in three parts: 1) An overview of the Alaska Native Statewide Health Care Delivery System; 2) An overview of the funding provided for operating the programs, functions, services, and activities throughout the health care delivery system; 3) An overview of Denali Kid Care, and; 4) The effects of IHS Beneficiaries use of the Denali Kid Care Program.

ALEUTIAN/PRIBILOF ISLANDS ASSOCIATION  
ARCTIC SLOPE NATIVE ASSOCIATION  
BRISTOL BAY AREA HEALTH CORPORATION  
CHUGACHMIUT  
COPPER RIVER NATIVE ASSOCIATION  
EASTERN ALEUTIAN TRIBES  
KETCHIKAN INDIAN COMMUNITY  
VALDEZ NATIVE TRIBE

MANILAQ ASSOCIATION  
METLAKATLA INDIAN COMMUNITY  
MT. SANFORD TRIBAL CONSCRTIUM  
NATIVE VILLAGE OF EKLUTNA  
NATIVE VILLAGE OF TYONEK  
NINILCHIK TRADITIONAL COUNCIL  
KODIAK AREA NATIVE ASSOCIATION

NORTON SOUND HEALTH CORPORATION  
SELDOVIA VILLAGE TRIBE  
SOUTH CENTRAL FOUNDATION  
SOUTHEAST ALASKA REGIONAL HEALTH CONSORTIUM  
TANANA CHIEFS CONFERENCE  
YUKON-KUSKOKWIM HEALTH CORPORATION  
NORTH SLOPE BOROUGH

## Overview of The Alaska Native Statewide Health Care Delivery System

The heart of the Alaska Native Health System is the 468 Community Health Aides working in 178 village clinics throughout rural Alaska. The IHS beneficiaries in remote villages do not have daily access to physician care. They rely on the medical attention of the Health Aide.

There are six regional hospitals operated by the following Native regional organizations. They are: Maniilaq, Inc. located in Kotzebue, Yukon-Kuskokwim Health Corporation located in Bethel, Norton Sound Health Corporation located in Nome, Bristol Bay Area Health Corporation located in Dillingham, Arctic Slope Native Association located in Barrow, and Southeast Alaska Regional Health Consortium located in Sitka.

The Alaska Native Health Care Delivery System consists of both consortiums and individually operated service units. A typical consortium infrastructure includes village clinics, possibly several sub-regional clinics, and a regional hospital. The rural health organizations typically serve areas as sole community providers. They may also serve the entire population, regardless of race.

The Alaska Native Medical Center (ANMC) is located in Anchorage and provides essential tertiary care, acute care and specific statewide health services for all Indian Health Service beneficiaries. The Alaska Native Tribal Health Consortium and Southcentral Foundation jointly manage the facilities that provide the full continuum of care within the Alaska Native Health Campus.

The AK Native Health System reflects levels of care available within the village, the regional hospitals, and the Alaska Native Medical Center (ANMC), located in Anchorage. The Medivac is essential to receive the next step up of care from the village to the regional hospital. If the case is deemed serious enough, a Medivac can be directed from the village straight to ANMC. There are

Medivac cail-outs from Regional Hospitals to ANMC, and also from ANMC to more specialized hospitals in the lower-48.

### Overview Of Funding

With the construction of the new Alaska Native Medical Center and the Primary Care Center, there is a perception that Alaska Native Health Services are amply funded. The reality is that the system is significantly under-funded. Indian people have long experienced disproportionately low health status and a large gap in health care resources compared to other Americans. Recently, Congress requested a health status and resource deficiency report for each Indian tribe or service unit. The IHS charged a Level of Need Funded (LNF) Workgroup to develop the necessary methodology. This report, published April 2001, states that Alaska is only funded at 61% of the total need compared to the Federal Employee Health Benefits Package. It is important to know that the SCHIP funds are 100% reimbursed by the federal government and is included in this percentage.

### Overview of Denali KidCare

The Denali KidCare Program is cheap - \$552 per year, per child in State funds. To save the Alaska Legislature money by reducing the Denali KidCare Program would actively harm people receiving care – by eliminating services for pregnant women and children and cutting reimbursement to providers, which will reduce access. Denali KidCare provides insurance to pregnant women and children that have no other access to health care services. Reducing the program would be a huge detriment to the health of Alaskan citizens.

Alaskan children and pregnant women need this program as it makes it possible for them to obtain health insurance, which would, otherwise, be impossible. In addition, it is a program for the low-income “working poor”, and meets the basic need for Alaska parents to be able to provide health care for their children while working at a low paying job without benefits. Denali KidCare makes it

possible for families to get off welfare and they can still provide for their children's health care needs. Welfare reform in Alaska is working successfully to keep people off welfare and cash assistance and keeping people off welfare means more money for support services needed by working families such as health insurance for children.

As an advocate for Alaska Native Health issues, this proposed cut will affect the Alaska Natives enrolled in this program and will deprive them of healthcare, which they otherwise would receive if enrolled in the Denali KidCare Program. Specifically, over 30% currently enrolled in the Denali Kidcare Program are Alaska Native women and children.

In addition, prenatal care is the single most cost-effective health care expenditure, ensuring the best birth outcome for the baby. It is in effect, the best method for assuring a health start for Alaskan children.

### The Effects of Cutting Denali KidCare Program

**HB 367, if adopted by the Legislature, will reduce the income levels for Denali KidCare so that 3,821 children and 722 pregnant women lose health care coverage. This change will save the state \$5 million dollars when fully implemented, while giving up \$11.9 million in Federal Funds.**

#### WHY COVER HEALTH INSURANCE FOR CHILDREN?

- Health care insurance coverage for children is cheap - \$552 per year, per child in state funds.
- With Denali KidCare, nearly 71 cents of every dollar spent is federal funds; only 29 cents comes from state general funds.
- Services for children enrolled in Denali KidCare who also are eligible for Tribal Health Services are paid for with 100% federal funds.
- Health care insurance is vital to the wellbeing of Alaska's children.
- Children with health care coverage are more likely to receive well-baby/well-child care, adequate immunizations, and have health care problems discovered early.
- Denali KidCare helps working families who work in jobs with no benefits to provide health care for their children.

- The state used part of the \$30 million savings from the Medicaid federal match rate change to expand coverage for children and pregnant women.
- Program elimination will result in a huge loss of federal funds for health care.

#### WHY COVER HEALTH INSURANCE FOR PREGNANT WOMEN?

- Prenatal care is the single most cost-effective health care expenditure.
- Prenatal care ensures the best birth outcome for the baby.
- Prenatal care is the best method of assuring a healthy start for Alaskan children.

*The Alaska Native Health Board encourages the Alaska State Legislature not to reduce the Denali KidCare Program and therefore lower the wellness of Alaskans pregnant women and children for the benefit of fiscal conservation.*

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**Alaska Women's & Children's Clinic**

11823 Old Glenn Highway, Suite 110

Eagle River, AK 99577

Phone (907) 696-2273 Fax (907) 694-8446

My name is Cynthia Ebelacker. I am past president and current board member of the Alaska Nurse Practitioner Association. There are over 425 nurse practitioners in Alaska. Altogether we care for thousands of Denali Kid Care patients. *I am also here representing the Alaska Nurses' Association*

I also own a small private clinic in Eagle River. Sixty five percent of my pediatric patients and pregnant women are able to see me because they have Denali Kid Care. Since the Kid Care insurance came on board in March of 1999, I have seen small miracles happen every day.

We could just look at the practical side of this extremely affordable health insurance for children.

- It doesn't seem logical to lose \$11.9 million federal aid dollars to save a mere \$5 million dollars of state dollars while denying badly needed healthcare to our children.
- In a state with the dubious honor of leading the nation with its infant and maternal mortality rates, do we really want to deny prenatal care to over 700 women? The cost of healthcare for very small premature infants is hundreds of thousands of dollars for each baby. You would do well to look at the rate of premature births among lower income women who qualified for Denali Kid Care over the last 3 years. I think you will find a big decrease in numbers of premie births from the rate prior to DKC making prenatal care available to hundreds of women.
- Nearly a third of the Denali dollars have been spent on mental health care for children. It makes sense if you consider that children whose health and development are often neglected at a critical early stage, will eventually require more of our health care dollars to fix problems that could have been prevented with early detection and treatment.

But enough of strictly pragmatic evidence that Denali has and will continue to be cost effective healthcare due to its extremely preventative nature. You have those figures in front of you.

We should put some faces on the small miracles that Denali has brought us. During the special well-baby & well-child exams called Early Periodic Screening & Developmental Testing DKC children get very comprehensive visits with a medical provider. Often it's the first preventative care visit they've ever had. As a result, many serious health care problems have been discovered.

In my own practice the results have been amazing and when you multiply the similar experiences by the number of medical practitioners seeing Denali patients - we have had a great impact on health care by Denali Kid Care.

Take 7yr old Darci, a very advanced Down's Syndrome child - she is one of the highest functioning Down's kids that I've ever seen. Her language and cognitive and social skills are almost normal for her age level. But 3 years ago this wasn't the case. When she saw me for a

well-child check-up at the age of 4, she wasn't talking, she had no energy and seemed very slow and severely retarded. At this visit I noticed an unusual heart murmur and I sent her to a cardiologist right away. Mom could afford to see him because the child had Denali Kid Care. Within a week she had life changing cardiac surgery to repair a serious narrowing in her heart vessels and within a few months she also got the ear tube surgery she needed to stop her chronic ear infections - and today she is a productive young member of society instead of a drain on our state's resources.

Then there's 9 year old William, who was sent to me for a physical from school because he was doing so badly -- not focusing, exhibiting acting out behaviors, looking neglected and seeming terribly small for his age. I performed an in-depth exam that included hearing testing, blood testing for anemia and urine testing. I discovered that he had no ear drums; they had ruptured repeatedly as a small child when dad couldn't afford to bring him for medical care. He was also suffering from signs of malnutrition. His single parent dad was almost deaf himself because of the lack of healthcare he received for his bad ears as a child. Denali Kid Care helped William get his eardrums repaired and he got medicine to treat his anemia. Our clinic rather adopted his family and this year we helped the family get food and toys and household items that were donated from around town. His teachers have called me to praise his improvements in language and demeanor. He will be a much better adjusted member of our future society and he has Denali Kid Care to thank for that.

These are just two of the hundreds of stories I could tell. I have sent dozens of children on consults for ear surgery, tonsillectomies, hernia repairs, serious developmental delays in speech and motor skills, orthopedic surgeries, overwhelming tooth decay and abscesses and severe mental health disturbances.

I could provide you with evidence of the positive outcomes this care has made possible. I keep very detailed records. The bottom line is that rather than becoming a continual drain on our resources these children actually get better and they require less care down the way.

The small investment the state of Alaska makes to provide health care access has had unseen benefits and has improved the lives of whole families because their children's many needs are identified and met.

Young pregnant women who previously received little preventative care during the critical early prenatal stages, now are identified with their first positive pregnancy test, we get them right on the program and closely follow them to a safe delivery of a healthy infant-then we closely monitor that infant with well child exams. We need to look at the mortality rates for mothers and infants in Anchorage and local communities since Denali Kid Care started.

Before you decide to save a few dollars in the big scheme of things, have you done your homework to see what a difference Denali insurance has made in the lives of thousands of Alaskans? We can take pride in the program Alaska has developed-it's far superior to those in many other states.

Denali Kid Care is an investment in our future by assuring that today's children become tomorrow's healthy, productive citizens. It equalizes the healthcare field so that all of Alaska's children may lead healthier lives-not just the children of the privileged few. Raising children today without adequate health care insurance should not be a source of pride-nor should it be the standard that Alaskan children are held to. None of our children should have to suffer physical or emotional pain due to a lack of affordable health care insurance.



TONY KNOWLES, GOVERNOR  
State of Alaska

**GOVERNOR'S COUNCIL ON DISABILITIES AND SPECIAL EDUCATION**

P.O. Box 240249 • Anchorage, Alaska 99524-0249 • Phone: 907-269-8980 • Fax: 907-269-8995

HB 367

In addition to medical costs, families of individuals with disabilities often face higher than normal costs which should be taken into consideration when establishing their eligibility for programs such as Denali Kid Care.

- ◆ Many individuals have special dietary requirements that result in increased food costs. Some disabilities limit the body's ability to absorb certain vitamins and minerals, requiring individual with these disabilities to have a diet rich in these nutrients. Some people have adverse reactions to the more inexpensive sources of important nutrients. In extreme cases, gastrointestinal conditions and the side effects of medications may require individuals to limit their food intake to expensive liquid diets.
- ◆ Individuals with disabilities may require special clothing if their bodies do not fit into standard clothing; this clothing may only be available through specialized firms or might have to be custom made. In either case such clothing costs more than clothing available "off the rack."
- ◆ Families may incur higher than average utility expenses if a family member relies on electric powered devices such as a respirator. Individual who are sensitive to small temperature fluctuations may incur higher than normal costs for heating and cooling their homes.
- ◆ Child care for a child with a disability may be very expensive for the family. Child care providers may charge higher rates to care for a child with a disability.

All of these items can add up to increased costs to the family of a child with a disability. Such costs need to be taken into consideration when establishing the income threshold for a program such as Denali Kid Care. While 200 percent of the federal poverty level may seem like sufficient income on paper, in reality the additional costs which the family must pay may be placing families well under the poverty level.

*Creating Change That Improves The Lives Of People With Disabilities*

According to a State Health Care Briefing Book developed by the National Center For Policy Analysis, the cost for prenatal care can be as low as a couple of hundred dollars while the average cost of providing medical care to a premature baby is almost \$20,000 more than the cost of a normal birth. This same briefing points out that preventive care is not cost effective if provided to the *entire population* but is cost effective if targeted to those who cannot access such services without a program such as Denali Kid Care.

The 1997 Annual Report of the North Coast Health Ministry based in Lakewood Ohio states that even when families making 200 percent of the federal poverty level have insurance their coverage is for catastrophic events only. The report further states that it is the experience of the North Coast Health Ministry that many patients do not seek out preventive care as the cost is too prohibitive, and when people don't have coverage (either private insurance or Medicaid) they are forced to utilize emergency room services which are the most expensive form of health care.

We must all work together to find reasonable and effective ways to manage Medicaid costs, but not by cutting programs when such cuts will force children and families into high cost emergency services. Preventive and ongoing services such as Denali Kid Care must be provided for those families with the greatest need and least access to private insurance.

HB367

Sara J. Jackson  
St. Francis House  
3710 E. 20<sup>th</sup> Avenue Anchorage AK 99508  
222-7323 sjackson@css.ak.org

February 12, 2002

Representative Dyson and HESS Committee:

I am here today to speak both in a professional and a personal capacity. I am the manager of St. Francis House, a program of Catholic Social Services, that delivers emergency services to economically struggling families; and, I am also the grandmother of a bubbly, generous 13 year old girl, who will no longer have health insurance if this bill passes into law. I have worked in this community for over 30 years, most of that time for non-profit, human service oriented programs. I am guilty of choosing mission over financial reward. For better or for worse my daughter has chosen the same path and holds a key position in a well known non-profit agency that provides a vital public service in Anchorage. She is a single mother, who works very hard and brings home \$1,944 each month. Out of that she must pay an \$800 mortgage, \$200 in utility payments, \$200 car payment, \$80 car insurance, vehicle gas and maintenance, food, clothing, school supplies, and personal items, for herself and her daughter, and medical and prescription co-payments. There is no conceivable way that she can afford the \$450 dependent premium to cover her child on her agency's insurance plan. So, if HB 367 should pass, my granddaughter will once again be in the position that she has been in most of her life: balanced precariously on the tightrope of existence with no safety net beneath her and with little or no preventative health care.

I appeal to you on behalf of my own family and the families of many of my colleagues, as well as many of those families that we serve in our programs. Please do not try to bolster the state budget by putting our children, our most precious resource, at risk.



# Alaska State Legislature

Please enter into the record my testimony to the House, HESS  
 committee name  
 committee on HB 367 , dated February 12, 2002  
 bill/subject

I am very concerned about the passage of this bill as my family falls between the 150% - 200% poverty. Without this coverage for my daughters, we would be literally homeless. I think it is important to do my best to provide for my girls but without insurance it would not be possible. Taking care of a small medical problem before it escalated into an emergency room visit has been very helpful. I am unable to work more hours at this time and could not pay for independent insurance as my employer does not offer it. Working as an advocate for families that have an individual with a disability, has also opened my eyes. Many families would be more likely to go back to A-TAP and other state funded programs. This would ultimately cost the state more money and make families more dependent on the state.

Signed: Debra J. Henscher

Testifier  
Parent

Representing (Optional)  
200 W 34<sup>th</sup> #1172 Anch AK 99503

Address  
907-338-0049

Phone No.



# Alaska State Legislature

Please enter into the record my testimony to the Hess  
 committee name  
 committee on HB 367, dated Feb 12, 2002  
 bill/subject

I am opposed to HB 367 because pregnant women need help. As a PTA Member of Fairview Christian School. I can tell who has and who has not had proper prenatal care. Fetuses need proper nutrition and regular prenatal doctors inspections. If we help young mothers, children and babies in the womb we will save money in the long run. We need to prevent fetal alcohol syndrome and make nutrition. Mothers and children need to eat right to prevent spine, intestinal and nerve disorders. Medical coverage early to prevent problems for 122 pregnant or more women. Please we we have a federal match. I do not want to have hospital rates raised due to unpaid emergency visits due to budget cuts.

Signed: Regina Mantuifel  
 Testifier

Regina's  
 Representing (Optional)  
1100 E 10th Ave. Anch AK 99501  
 Address  
907-276-4904  
 Phone No.

**Geri Heiner**  
**7300 Glade Place**  
**Anchorage, AK 99518-2876**

**(907) 344-6581**

February 12, 2002

Fred Dyson  
10928 Eagle River Rd., Suite 148  
Eagle River, AK 99577

**RE: 11B 367 Hearing**

I am a single parent with four children (three at home), work full time and attend the University of Alaska half time in order to secure a future for my children and myself. Even with full time employment, I still struggle financially and need some temporary support until I have completed my education.

Denali KidCare has been a wonderful benefit for our family. I no longer have to decide if they can make it until Monday because I cannot afford to take them to a doctor gambling their health over money. It has made access to medical treatment more available by reducing the financial burden that is often expected at time of treatment. My children no longer have to ask, "Can we afford glasses or medicine."

Denali KidCare has decreased the stress level in our home by affording access to needed medical care for my children.

Sincerely,

*Geri Heiner*  
Geri Heiner  
UAA Student/Mother

# STATE OF ALASKA

DEPARTMENT OF HEALTH & SOCIAL SERVICES

MEDICAL CARE ADVISORY COMMITTEE

TONY KNOWLES, GOVERNOR

P.O. BOX 110660  
JUNEAU, ALASKA 99811-0660  
PHONE: (907) 485-3355  
FAX: (907) 465-2204

February 12, 2002

The Honorable Fred Dyson  
Alaska State Legislature  
Capitol Room 104  
Juneau, AK 99801

Dear Representative Dyson,

On behalf of the Medical Care Advisory Committee, I would like to express the committee's concern regarding House Bill 367. Required by federal law, the Alaska Medical Care Advisory Committee is responsible for advising the State's Medicaid agency on policy and program changes to the Medicaid program. The committee members include health care consumers and providers from across the state of Alaska.

The Medical Care Advisory Committee has had the opportunity to provide input to the Department of Health and Social Services on the Denali KidCare program throughout its development. We have heard from consumers and providers about their experiences with the Denali KidCare program. From our review, we learned that the program has been overwhelming successful in reaching needy families and has contributed immensely to the stability of these families. We also learned that parents were able to stay employed even if their children got ill because their children had health care coverage through the Denali KidCare program. These families feel empowered that they can both maintain employment and provide the right care for their children.

From the beginning, the Medical Care Advisory Committee supported the development of Denali KidCare program for a number of reasons. Numerous studies have documented that the percentage of children without health insurance has grown rapidly in recent years. Contributing significantly to the declining trend in health insurance is the decline in employer financial support for health care coverage for their employee's dependents. Families who meet the income eligibility guidelines for Denali KidCare often do not have the option of an employer financed health insurance plan for their dependents, and even if they do, they can not afford to pay their share of the health care premiums, deductibles, and copayments. The Medical Care Advisory Committee knows that children without health care coverage are six times more likely to go without needed medical care, five times more likely to use the hospital emergency room as a regular source of care, and four times more likely to have necessary care delayed. It is important to a child's

because their care will now be minimized and will lose its continuity. Some are adult women trying to get their collective feet on the ground who require obstetrical care.

Cutting this safety net could drive some of them back onto welfare, or into despair, or into divorce. At the very least it will further marginalize these families and certainly decrease their access to quality medical care.

For humanitarian reasons, for financial reasons, for common sense reasons, I urge you to vote NO on HB 367.

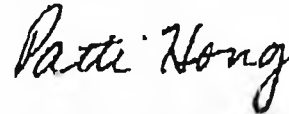
Thank you.

A handwritten signature in cursive script that reads "David B. Alexander" followed by a stylized flourish or initials.

development that they receive appropriate medical care. If a child develops a chronic health problem, studies have shown that it can affect that child's health and well being for decades to come and children, especially young children, should receive annual doctor visits to monitor their growth and development. Children without health care coverage are also more likely to be missing some of their immunizations.

For these reasons, the Medical Care Advisory Committee strongly supports the Denali KidCare program and urges the Legislature to maintain the current eligibility for the program.

Sincerely,



Patti Hong, RN  
Chair

*Medical Care Advisory Committee members:*

David Alexander, MD, Anchorage  
Sam "Lavada" Bush, Fairbanks  
Jim Culley, Valdez  
Maria Darlin, Juneau  
Kathy Dillard, Kodiak  
Gary Givens, R.Ph., Anchorage  
Angela Gonzalez, Anchorage

Patti Hong, RN, Anchorage  
Greg Johnson, DDS, Fairbanks  
Brenda Knapp, Juneau  
Marilyn Mories, Palmer  
Karen Pearson, Juneau

cc: House Health, Education, and Social Services Committee, Alaska State  
Legislature  
Governor Tony Knowles  
Commissioner Jay Livoy

**ALASKA CHAPTER****NATIONAL ASSOCIATION OF SOCIAL WORKERS  
ALASKA CHAPTER**

4161 Patterson Circle Anchorage, Alaska 99504-4680  
907-332-NASW(6279) 1-800-478-NASW(6279) 907/332-6270 (fax)  
e-mail: [naswak@alaska.net](mailto:naswak@alaska.net) [www.naswak.org](http://www.naswak.org)

*The National Association of Social Workers is the world's largest organization of social workers, with 155,000 members including over 500 members in Alaska. NASW is committed to the concept of social justice and will advocate for the well-being of individuals, families and communities in Alaska. NASW supports the vital role of government in providing for basic human needs and will promote policies that empower people to live more humane, productive, and independent lives. The Alaska Chapter of NASW is concerned about a range of issues that affect the quality of life for all Alaskans and the ability of social workers to provide quality services.*

**HB 367 "Medical Assistance Program Coverage"**

Chairman Dyson, members of the Committee, thank you for the opportunity to address you today on HB 367. My name is Sarah Lewis and I am a member of the Social Action Committee of the National Association of Social Workers Alaska Chapter. The NASW Alaska Chapter strongly opposes HB 367 and its impact on reducing access to health care for children and pregnant women currently eligible for the Denali KidCare Program.

NASW is a membership organization representing over 500 professional social workers in Alaska. Each day our members serve children and pregnant women who directly benefit from the health care services they can access through Denali KidCare. Health care insurance is vital to the wellbeing of Alaska's children, which is why Denali KidCare has brought such a positive impact to our children since its inception in 1999.

Pregnant women enrolled in Denali KidCare are eligible to receive prenatal care and give their future children a healthy start in life. Children with Denali KidCare coverage are more likely to receive well-baby and well-child care, immunizations and will have health problems identified and treated early. These are all critical cost savings for all tax payers. At \$522 per child for the state's contribution, Alaska is able to match federal grant funds and to provide eligible children and pregnant women critical care health care services – a WIN-WIN for Alaska.

HB 367 proposes a reduction in the eligibility to 150% of the federal poverty level, directly impacting working families in Alaska who are striving to provide the best for their kids -- yet who work in jobs with no health care benefits for their families. If HB 367 passes, 3,821 children and 722 pregnant women will lose their health care coverage. When uninsured children and pregnant women's health needs are not provided, we all pay -- for more expensive care in hospital emergency rooms and clinics, for treatment of chronic illnesses, as well as the long terms costs of infants born with low birth weights, poor health outcomes and intensive care needs.

HB 367 is heralded as a cost savings to Alaskans, yet the \$5 million saved today results in giving up \$11.9 million in federal funds and compromising the health of our children. Short sighted budget cuts like this are ineffective policy, especially when we need long term fiscal planning and responsible investment in our future -- Alaska's children. On behalf of five hundred NASW Alaska Chapter members, I urge you to table HB 367.

DAVID G. ALEXANDER, M.D.

3340 PROVIDENCE DRIVE - SUITE 466  
ANCHORAGE, ALASKA 99508-4684

PHONE (907) 562-2423

Testimony on HB 367

I'm a pediatrician in Anchorage and I am testifying for myself and, with their concurrence, for the Anchorage pediatric community. ~~(attached is a letter from Dr. Jeff Demain, the Chair of Pediatrics at Providence Hospital)~~ *(Has already been sent)*

I'm also testifying on behalf of the Alaska Medical Care Advisory Committce. The MCAC is your committee that meets for two days four times a year to discuss Medicaid issues. We talk with a vast panorama of providers and recipients of Medicaid services, (attached is a letter from the MCAC written by it's Chair, Patty Hong, RN)

No one in any group wants to waste money. But everyone in the provider section as well as in the recipient section feels the state is absolutely getting its monies worth

Right now the folks who are in entry level jobs, whether they are getting off welfare or coming out of school, have that health safety net for their children, both born and unborn. Most of them have places of employment that cannot afford to offer any significant family health insurance. If the eligibility threshold for Medicaid were to be cut from 200% to 150% their children would probably have to go uninsured.

The state government would have about \$5 million more in it's coffers, but the people of the state would have \$11 or \$12 million less of federal money. (Please don't hold me to the exact numbers, but the concept is right)

If there were really sick children in the family, or if the mother were to be pregnant, they would have to quit working to obtain basic Medicaid services, else the children, born and unborn, would surely suffer.

If, as would most often be the case, the children were basically healthy the parents could continue to work in the hopes of getting a job with insurance. Preventive care would be minimized and if the children became ill those parents would delay medical care, because there would be no money. If the child became more ill they would go to the emergency room where they know they can get free care. (The federal law says so!) But there is no free care, and emergency care is very expensive. The medical community will pick up the tab. And like any good business they will try their best to spread those losses amongst those whose bills will now be larger than they should have been. And there will already be that \$11 million of federal money that will be missing so there is less money to go around. Their Health insurance, if they have it, will cost more, and the coverage will be less inclusive.

Basically, the program now provides reasonable coverage to a group of people who need it. Some are the children who don't vote yet, but who will clearly be the biggest losers

**Subject: House Bill 367**

**Date:** Tue, 12 Feb 2002 11:15:39 -0900

**From:** "Renee Graham" <renee\_graham@fcsonline.org>

**To:** <Representative\_JohnCoghill@legis.state.ak.us>

**CC:** <Representative\_Fred\_Dyson@legis.state.ak.us>, <Representative\_Peggy\_Wilson@legis.state.ak.us>, <Representative\_Gary\_Stevens@legis.state.ak.us>, <Representative\_Vic\_Kohring@legis.state.ak.us>, <Representative\_Sharon\_Cissna@legis.state.ak.us>, <Representative\_Reggie\_Joule@legis.state.ak.us>

February 12, 2002

To: Members of the House HESS Committee,

I am emailing to voice my deep concern for cutting the Denali KidCare program. As a professional in the social services arena, I understand the importance and need for this program. There are many families that work very hard but are still not able to afford medical coverage for their children. There are also many families with children that have severe health needs or disabilities that depend on this program as well. Denali KidCare allows them to know that their children have access to the medical care they need. To cut this program would do a severe disservice to many vulnerable children in Alaska. I speak for others as well as myself, there is a strong need for this program. As a state we need to be a leader for, as well as proactive in the needs of our future generations.

I urge members of the committee to NOT let House Bill 367 be passed.

Thank you,  
Renee Graham  
Mother and  
Care Coordinator  
Frontier Community Services  
43335 K-Beach Rd., St. 36  
Soldotna, AK 99669  
907-262-6331  
907-262-6294 Fax

**Subject:** House Bill 367

**Date:** Tue, 12 Feb 2002 11:40:55 -0900

**From:** Carol-Ann Newcomer <newcomerc@doyon.com>

**To:** "Representative\_Fred\_Dyson@legis.state.ak.us" <Representative\_Fred\_Dyson@legis.state.ak.us>  
"Representative\_Peggy\_Wilson@legis.state.ak.us" <Representative\_Peggy\_Wilson@legis.state.ak.us>  
"Representative\_John\_Coghill@legis.state.ak.us" <Representative\_John\_Coghill@legis.state.ak.us>  
"Representative\_Gary\_Stevens@legis.state.ak.us" <Representative\_Gary\_Stevens@legis.state.ak.us>  
"Representative\_Vic\_Kohring@legis.state.ak.us" <Representative\_Vic\_Kohring@legis.state.ak.us>  
"Representative\_Sharon\_Cissna@legis.state.ak.us" <Representative\_Sharon\_Cissna@legis.state.ak.us>  
"Representative\_Reggie\_Joule@legis.state.ak.us" <Representative\_Reggie\_Joule@legis.state.ak.us>  
"Nancy Barnes" <Nancy\_Barnes@legis.state.ak.us>

Hi:

I am seriously disappointed that yet another bill has been proposed that would eliminate something designated for families and children in need. I adopted a special needs child that receives some State help with health care because of his many health problems. He would not have lived if he had not had proper health care. Does the State have take no responsibility for the children who are the future of this State or is the future held for only a select few - the children that come from families that can afford these types of necessities. Wouldn't this be narrowing the future for some bright children that wouldn't even have a chance otherwise? You are taking the right to be healthy away from children that have no other means. Who gives you that right? I can find no logical reason as to why you continue to try to take away programs from a group of people that are too young to even have a voice yet. I mean you didn't have a problem finding or appropriating money to fight the Venetie case, right? I think you should seriously reflect and think about priorities!

Sincerely,

Carole-Ann Newcomer

**Subject: I oppose HB 367--don't cut Denali KidCare**

**Date:** Mon, 11 Feb 2002 22:35:19 -0800 (PST)

**From:** Ruth Greenwood <ruthgreenwood@yahoo.com>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Sharon\_Cissna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

I am strongly opposed to cutting funding for Denali Kid Care. It provides health care for those who need it the most.

Please vote against House Bill 367.

Sincerely,

Ruth Greenwood

P.S. I always vote!

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Do You Yahoo!?

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<http://greetings.yahoo.com>

**Subject: I Oppose Rep. Coghill's HB 367!!**

**Date: Tue, 12 Feb 2002 11:11:14 -0900**

**From: "Harriet A. Drummond" <harrieta@alaska.net>**

**To: <Representative\_Fred\_Dyson@legis.state.ak.us>**

Unbelievable! The Anchorage School District has about 2,000 homeless children, as nearly as we can tell, and the number of kids on free and reduced lunch in elementary school is at 33% and climbing. And families don't get any richer as their kids grow into middle and high school - the numbers of kids in poverty or close to it is no different.

Do you think that families who can't afford to feed their kids lunch or breakfast can afford proper health care for them? Do you think that taking health care away from children and pregnant women contributes to the success of children in school?

My health insurance, for me and one child, costs me over \$8,400 per year right now. What makes you think that a family making poverty level wages or barely more can afford to spend over half their income on health coverage, never mind the deductibles and co-pay which runs about \$4,000 per year on top of the \$8,400 for my family!!

I will be very disappointed in you, Fred Dyson, if you allow Rep. Coghill's bill, HB 367, out of the House HESS Committee. It is an embarrassment to people in this state who care about kids, and I thought YOU of all people, were one of them!

That bill would negatively impact hundreds if not thousands of students in my district, as well as thousands of future students. That bill makes it much more difficult for me to live up to our school board goals of success in life for all of our students.

We're partners in all this, Fred. Remember that. Your failure to protect the health of children and pregnant women will cost ALL of us much more in the future!

Harriet A. Drummond

. . . . .  
Anchorage School Board

Office: 279-7722

Home: 279-7763

Fax: 279-7788

harrieta@alaska.net

**Subject: I Oppose the NO KID-CARE BILL...**

**Date:** Tue, 12 Feb 2002 09:44:55 -0900

**From:** "Lakshas, Jeweline" <Jeweline\_Lakshas@Natchiq.com>

**To:** ""Representative\_Fred\_Dyson@legis.state.ak.us"" <Representative\_Fred\_Dyson@legis.state.ak.us>  
""Representative\_Peggy\_Wilson@legis.state.ak.us"" <Representative\_Peggy\_Wilson@legis.state.ak.us>  
""Representative\_John\_Coghill@legis.state.ak.us"" <Representative\_John\_Coghill@legis.state.ak.us>  
""Representative\_Gary\_Stevens@legis.state.ak.us"" <Representative\_Gary\_Stevens@legis.state.ak.us>  
""Representative\_Vic\_Kohring@legis.state.ak.us"" <Representative\_Vic\_Kohring@legis.state.ak.us>  
""Representative\_Sharon\_Cissna@legis.state.ak.us"" <Representative\_Sharon\_Cissna@legis.state.ak.us>  
""Representative\_Reggie\_Joule@legis.state.ak.us"" <Representative\_Reggie\_Joule@legis.state.ak.us>

Representatives,


I do not support the "No Kid-Care Bill." If you allow this bill to pass the health of the children of Alaska are at risk! I am a working mother of three all under the age of 5, and I am fortunate enough to have a company that has insurance benefits. However, there are a lot of families out there that do not have that privilege. If you vote yes on this bill, there will be tremendous repercussions to the State of Alaska. I urge you to vote NO on HB 367! Thank you for your time.

**Jeweline Lakshas**

Phone: (907) 267-3176

Fax: (907) 267-3693

[jeweline\\_lakshas@natchiq.com](mailto:jeweline_lakshas@natchiq.com)

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**Subject: HB367 OPPOSE!**

**Date:** Tue, 12 Feb 2002 15:05:45 -0900

**From:** "Heidi Little" <littlehl@hotmail.com>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Sharon\_Cissna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

I STRONGLY OPPOSE HB367!

Why is it everytime something positive and helpful to the working and under privileged classes is always under fire and in danger of being taken away?

we (the people and government) are always saying that the next generation is the hope for the future. Well, what kind of hope do they (and we) have is they aren't given any help right now to make it to adulthood? How can they be our next generation when they can't even get basic health care and coverage?

Denali KidCare is just a helping hand to those families who are working their butts off to provide for their family. Thru no fault of their own, they don't have affordable health care any other way. Why take what little they have away?

How would you like to be trying to support a family just above or at what is considered the poverty level and have no health care? Denali KidCare is a godsend to many. It helps grow healthy children into healthy adults. Put yourself in their place. Would you like your minimum health care yanked out from under you?

OPPOSE THIS BILL!!

thank you  
Heidi Little

---

Send and receive Hotmail on your mobile device: <http://mobile.msn.com>

**Subject: HB 367**

**Date:** Tue, 12 Feb 2002 10:50:54 -0900

**From:** "Nancy Sanders" <drnannini@hotmail.com>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Sharon\_Cissna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

Dear Members of the House HESS Committee  
Representatives Dyson, Wilson, Coghill, Stevens, Kohring, Cissna, and Joule,

I have just been alerted to the fact that you are taking testimony today on HB 367 which would cut funding for Denali KidCare.

I strongly oppose this bill because cuts to this program would adversely affect uninsured children and pregnant women. The health of the population of Alaska starts with women having healthy pregnancies and allowing children to grow up with the benefit of health care coverage.

The emphasis on getting people off of public assistance programs and back to work has not resulted in a population who is covered for health insurance through their employers. These workers have skills that allow them only to take jobs that earn the minimum wage. These jobs do not offer health insurance. **Cutting Denali KidCare is a step into the past where parents cannot afford to work and get off of public assistance.** It makes more sense for them to continue on public assistance because they then qualify for health care coverage.

I urge you not to pass this bill out of the HESS committee.

Thank you, Nancy Sanders

---

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**Subject:** HB 367

**Date:** Mon, 11 Feb 2002 21:48:40 -1000

**From:** davidfinkelstein@juno.com

**To:** Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us, Senator\_Johnny\_Ellis@legis.state.ak.us

Please oppose HB 367. Thanks for considering my views, David  
Finkelstein

**Subject: HB 367**

**Date:** Sun, 10 Feb 2002 15:25:28 -0900

**From:** "Karen Miller" <kfmiller@gci.net>

**To:** <Representative\_Pete\_Kott@legis.state.ak.us>,  
<Representative\_Fred\_Dyson@legis.state.ak.us>

**CC:** <Representative\_Reggie\_Joule@legis.state.ak.us>,  
<Representative\_Sharon\_Cissna@legis.state.ak.us>,  
<Representative\_Gary\_Stevens@legis.state.ak.us>,  
<Representative\_Vic\_Kohring@legis.state.ak.us>,  
<Representative\_Peggy\_Wilson@legis.state.ak.us>,  
<Representative\_John\_Coghill@legis.state.ak.us>

Dear Representative Kott and Representative Dyson:

It is extremely important that we cover health insurance for children. Providing adequate health insurance is vital to the well-being of Alaska's Children besides caring for children now representatives a cost savings in the future.

During my years as a teachers I know how important insurance is for working families who work in jobs with no benefits to provide health care for their children. I strongly oppose HB367 and hope that you do also.

Karen Miller  
10021 Crest view Lane  
Eagle River, AK 99577  
907 694-2710

**Subject: HB 367****Date:** Mon, 11 Feb 2002 16:49:16 -0900**From:** "Kimberly Adkison" <kadkison@gci.net>

**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>,  
 <Representative\_Peggy\_Wilson@legis.state.ak.us>,  
 <Representative\_John\_Coghill@legis.state.ak.us>,  
 <Representative\_Vic\_Kohring@legis.state.ak.us>,  
 <Representative\_Gary\_Stevens@legis.state.ak.us>,  
 <Representative\_Sharon\_Cissna@legis.state.ak.us>,  
 <Representative\_Reggie\_Joule@legis.state.ak.us>

Dear HES Committee members:

I oppose HB 367, which is proposed as a cost savings measure but in fact would result in a loss of federal funds. HB 367 would result in the loss of \$11.9 million in federal funds for health care, and end health insurance coverage for 3,821 children and 722 pregnant women. This is not acceptable.

It is very important to provide health insurance for children for a number of reasons:

- \* Health care coverage is vital to the well-being of Alaska's children.
- \* Children with health care coverage are more likely to receive well-baby/well-child care, adequate immunizations, and have health care problems discovered early.
- \* Denali KidCare helps working families who work in jobs with no benefits to provide health care for their children.
- \* Health care coverage for children through Denali KidCare is affordable - \$552 per year, per child in state funds.
- \* With Denali KidCare, nearly 71 cents of every dollar spent is federal funds -- only 29 cents comes from state general funds.
- \* Services for children enrolled in Denali KidCare who also are eligible for Tribal Health Services are paid for with 100% federal funds.
- \* The state used part of the \$30 million savings from the Medicaid federal match rate change to expand coverage for children and pregnant women.
- \* Program elimination will result in a huge loss of federal funds for health care.

It also is very important to provide health insurance for pregnant women for several reasons:

- \* Prenatal care is the best method of assuring a healthy start for Alaskan children.
- \* Prenatal care is the single most cost-effective health care expenditure.
- \* Prenatal care ensures the best birth outcome for the baby.

We must assure that children are given the opportunity to grow and develop in a healthy manner, and providing health care insurance for children, prenatally through childhood, is a very critical part of this. Please help me in opposing this harmful bill.

Kimberly Adkison  
 1019 Edwi . Place  
 Juneau, AK 99801  
 (907) 780-6330  
 kadkison@gci.net

**Subject: h.b 367 Denali Kid Care**

**Date: Tue, 12 Feb 2002 14:50:05 -0900**

**From: "Ben Kriegmont, Gastineau Elementary, Douglas, AK" <kriegmob@jsd.k12.ak.us>**

**To: Representative\_Fred\_Dyson@legis.state.ak.us**

Dear Mr. Dyson,

I am writing to voice my concern with H.B. 367 which would cut Denali Kid Care. I feel this would be a terrible mistake. I teach school at Gastineau Elementary School in Douglas and many of our students receive all of their health care through this program. As a teacher I know that the only way my students can learn is if they are healthy. Sick kids don't develop on pace with their peers, they are unable to attend to learning because they are fighting their health issues.

All children deserve adequate health care. Their education, and their future as productive members of society demand it. I urge you to do all that you can to defeat this bill.  
Thank you.

"If the problem can be solved, there is no use worrying about it.

If it can't be solved, worrying will do no good"

- Tibetan proverb

Ben Kriegmont

rm. 36

Gastineau Elementary School

**Subject: FYI - Health Care Concerns**

**Date:** Mon, 11 Feb 2002 10:06:20 -0900

**From:** "Thacker, Julie" <Jthacker@alternativesmentalhlth.org>

**To:** "Representative\_Fred\_Dyson@legis.state.ak.us" <Representative\_Fred\_Dyson@legis.state.ak.us>  
"Representative\_Peggy\_Wilson@legis.state.ak.us" <Representative\_Peggy\_Wilson@legis.state.ak.us>  
"Representative\_John\_Coghill@legis.state.ak.us" <Representative\_John\_Coghill@legis.state.ak.us>  
"Representative\_Vic\_Kohring@legis.state.ak.us" <Representative\_Vic\_Kohring@legis.state.ak.us>  
"Representative\_Gary\_Stevens@legis.state.ak.us" <Representative\_Gary\_Stevens@legis.state.ak.us>  
"Representative\_Sharon\_Cissna@legis.state.ak.us" <Representative\_Sharon\_Cissna@legis.state.ak.us>  
"Representative\_Reggie\_Joule@legis.state.ak.us" <Representative\_Reggie\_Joule@legis.state.ak.us>

Please, do not deny the children of Alaska medical coverage! As a single working mother, I would directly be impacted by this measure. My employer currently offers dependent health insurance coverage at a cost of \$320.53 per month. In addition, there is a \$500.00 deductible that applies. I personally could not afford to maintain medical insurance coverage for my two children. I am a very dedicated and intelligent voter. I have a college degree and have obtained a respectable position as a Human Resources Coordinator. I am very accomplished for a young woman. Unfortunately as a single mother, my income is not as impressive as my accomplishments.

As a Human Resources (benefit administrator) professional, I closely monitor health care trends and up-coming legislation. According to National Public Radio, health care premiums have been increasing each year by 11% to 64% per small employer per year. The burden of rising health costs is being placed on small businesses. It was explained that, pound for pound it is cheaper if you buy in bulk. I understand the positives and negatives for both sides of the argument of socialized medicine. However, if the current health care trend is left unchanged, the decision will be made for us.

My employer may eliminate all benefits next year due to perpetually rising costs. A very specifically example is our dependent coverage for children only went from 289.53 (2001) to 320.53 (2002) per month or a 10.71% increase. The increase from 2000 to 2001 was 11.88%. Remember that the current increase for 2002 was 10.71% plus there was a reduction in coverage. Last year, the plan covered mental health and had a \$300 year deductible. This year, there is no mental health benefit and the deductible increased to \$500 per year!

I respect the necessity of health care coverage for children. The "it can never happen to me" happened to me. I had a beautiful baby girl, who had DiGeorge Syndrome. She had three open-heart surgeries and lived in the Dallas Children's Hospital for six and a half months before she passed away. My other children are in great health, but no one knows what our future is.

So, you decrease the Annual income from 200% FPL to 150% FPL or for my family size of three from \$36,580 to \$27,435. What should I do for Cassandra and Brandon? Wait for a catastrophic event? Then, quit my job to qualify for health coverage and loose my house. No thanks! I already had to do that in Texas.

But wait, the plot thickens as the ripple effect from this decision effects my employer. How? I was employed at Life Quest Community Mental Health in Wasilla, until I was laid off in November due to a budget reduction. I am currently with Alternatives Community Mental Health in Anchorage. If you are unaware of the current condition of all mental health organizations in Alaska, it is alarming. This trend is scary. Most of these companies operate on a fee for service basis. Most of the clients are covered under Denali Kidcare. If the number of covered children is significantly decreased, then these consumers will no longer be receiving services.

What will the ripple effect be; increased teenage suicides, an interruption in foster care, or lay-offs?

Julie C. Thacker  
(907) 357-7502  
(907) 222-2393

February 12, 2002

The Honorable Fred Dyson  
Alaska State Legislature  
Capital Room 104  
Juneau, Alaska 99801

Dear Representative Dyson,

Thank you for allowing us to submit public comment on House Bill 367. On behalf of the Catholic Social Services-Beyond Shelter program participants, we strongly urge you to maintain the current eligibility and funding level for the Denali Kid Care program.

The Denali Kid Care program has been highly successful in providing much needed medical care to families who do not have health insurance and/or cannot afford health insurance. This includes many of our families who are working and earning low to moderate wages. Denali Kid Care is an incentive for many of these families to continue working without the added burden of having no health care coverage. And as we all know, health care is essential for the well-being of all Alaska's children.

Additionally, the cost of health insurance plans are steadily increasing, making health care plans including deductibles, and co-payments less affordable. It is a known fact that children with health care coverage are more likely to receive well baby check ups as well as immunization and other early screening care, which helps in discovering medical problems early. All children should be able to have access to medical care when needed, and should not be determined by whether or not a parent can afford it.

It is also essential that all pregnant women have access to prenatal care, whether or not they can afford it. Prenatal care is one of the best methods in determining the best birth outcome for a baby and helps give Alaska's children a healthy start in life.

Again, we believe that the Denali Kid Care program is an essential program for Alaskan families. In order to continue to meet the needs of Alaska's children and pregnant women, funding must not be reduced. Thank you!

Stephanie Wheeler  
Program Director,



THE CHILDREN'S PLACE

... a place to be heard.  
... a place to be helped.

February 12, 2002

TO: Legislative Information Office  
RE: House Bill No. 367

Fax # 376-6180

To Whom It May Concern:

I am writing this in opposition of HB 367 which would decrease the number of children and pregnant women from "working poor" families in receiving health benefits under the current Denali Kid Care. Although you may be temporarily saving money for the State at one level, the immediate losses will be in Federal funding and the long term effects will be much costlier throughout the health and educational fields in our state.

Working in the field of child abuse and neglect, the ramifications will also have deleterious effects. Child maltreatment is a significant risk factor for a whole host of medical and mental health ills, as well as social problems such as teen pregnancy, school failure, substance abuse, juvenile crime, and becoming a future abuser. One of the most frightening pieces of data we have collected at The Children's Place in Wasilla is that about 1/3 of the reported perpetrators are children themselves, under the age of 17. Early mental health intervention offers the only hope to halt the vicious cycle of abuse. One of the major barriers to mental health treatment both for the children who themselves who have been victims of physical and sexual abuse and young perpetrators is the cost. Nearly 60% of the families we deal with are covered under Medicaid or Denali KidCare.

As you look at the over 80% of men and women incarcerated in Alaska who were identified in a study a few years ago as victims of physical and sexual abuse, the question remains how will we, as residents of Alaska, be paying for reducing payments to women and children in poverty? Denali Kid Care is one of the brightest hopes we have had in improving the health outcomes for our children and we should not jeopardize federal dollars and more importantly their future by saving money in the short term.

Margaret Volz  
Program Director

Home Address: 4420 Bull Moose Dr.  
Wasilla 99654

Evelyn E. Conley  
Wasilla Resident  
Tamik Eller  
Wasilla Resident

Roni Anderson  
Wasilla Resident

Alicia M. Fields  
Palmdale Resident

The Children's Place  
PO Box 571788  
Wasilla, Alaska 99687

(907) 357-5187  
Fax (907) 357-5189



## NATIONAL ASSOCIATION OF SOCIAL WORKERS ALASKA CHAPTER

4161 Patterson Circle Anchorage, Alaska 99504-4680  
907-332-NASW(6279) 1-800-478-NASW(6279) 907/332-6270 (fax)  
e-mail: [naswak@alaska.net](mailto:naswak@alaska.net) [www.naswak.org](http://www.naswak.org)

*The National Association of Social Workers is the world's largest organization of social workers, with 155,000 members including over 500 members in Alaska. NASW is committed to the concept of social justice and will advocate for the well being of individuals, families and communities in Alaska. NASW supports the vital role of government in providing for basic human needs and will promote policies that empower people to live more humane, productive, and independent lives. The Alaska Chapter of NASW is concerned about a range of issues that affect the quality of life for all Alaskans and the ability of social workers to provide quality services.*

To: Members of the HES Committee	→ Rep. Fred Dyson, Chair	Fax 465-4587
Rep. Peggy Wilson Fax 465-3175	Rep. John Coghill	Fax 465-3258
Rep. Vic Kohring Fax 465-3818	Rep. Gary Stevens	Fax 465-3517
Rep. Sharon Cissna Fax 465-4588	Rep. Reggie Joule	Fax 465-4586

Re: HB 367: Medical Assistance Program Coverage

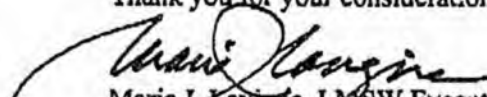
Today the House HES Committee is hearing important testimony on HB 367, including testimony by members of the National Association of Social Workers Alaska Chapter. NASW strongly opposes HB 367 and its impact on reducing access to health care for children and pregnant women currently eligible for Denali KidCare Program. NASW is a membership organization representing over 500 professional social workers in Alaska. Each day our members serve children and pregnant women who directly benefit from the health care services they can access through Denali Kid Care. Health care insurance is vital to the wellbeing of Alaska's children, which is why Denali KidCare has had such a positive impact to children since its inception in 1999.

Pregnant women enrolled in Denali KidCare are eligible to receive prenatal care and give their future children a healthy start in life. Children with Denali KidCare coverage are more likely to receive well-baby and well-child care, immunizations and have health problems identified and treated early -- critical cost savings for all tax payers. At \$522 per child for the state's contribution, Alaska is able to match federal grant funds and to provide eligible children and pregnant women critical care health care services -- a WIN-WIN for Alaska.

HB 367 proposes a reduction in the eligibility to 150% of the federal poverty level, directly impacting working families in Alaska who are striving to provide the best for their kids -- yet who work in jobs with no health care benefits for their families. If HB 367 passes, 3,821 children and 722 pregnant women will lose their health care coverage. When uninsured children and pregnant women's health needs are not provided, we all pay -- for more expensive care in hospital emergency rooms and clinics, for treatment of chronic illnesses, as well as the long terms costs of infants born with low birth weights, poor health outcomes and intensive care needs.

HB 367 is heralded as a cost savings to Alaskans, yet the \$5 million saved today results in giving up \$11.9 million in federal funds and comprising the health of our children. Short sighted budget cuts like HB 367 are ineffective policy, when we need long term fiscal planning and responsible investment in our future -- Alaska's children. On behalf of five hundred NASW Alaska Chapter members, we urge you to table HB 367.

Thank you for your consideration,

  
Marie J. Lavigne, LMSW Executive Director  
NASW Alaska Chapter

**CATHOLIC  
SOCIAL SERVICES**

BEYOND SHELTER  
3710 E. 20TH AVE., SUITE 1  
ANCHORAGE, ALASKA 99508-3410  
907-278-3048 - Fax 278-2472

February 12, 2002

The Honorable Fred Dyson  
Alaska State Legislature  
Capital Room 104  
Juneau, Alaska 99801

Dear Representative Dyson,

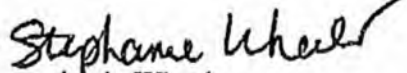
Thank you for allowing us to submit public comment on House Bill 367. On behalf of the Catholic Social Services-Beyond Shelter program participants, we strongly urge you to maintain the current eligibility and funding level for the Denali Kid Care program.

The Denali Kid Care program has been highly successful in providing much needed medical care to families who do not have health insurance and/or cannot afford health insurance. This includes many of our families who are working and earning low to moderate wages. Denali Kid Care is an incentive for many of these families to continue working without the added burden of having no health care coverage. And as we all know, health care is essential for the well-being of all Alaska's children.

Additionally, the cost of health insurance plans are steadily increasing, making health care plans including deductibles, and co-payments less affordable. It is a known fact that children with health care coverage are more likely to receive well baby check ups as well as immunization and other early screening care, which helps in discovering medical problems early. All children should be able to have access to medical care when needed, and should not be determined by whether or not a parent can afford it.

It is also essential that all pregnant women have access to prenatal care, whether or not they can afford it. Prenatal care is one of the best methods in determining the best birth outcome for a baby and helps give Alaska's children a healthy start in life.

Again, we believe that the Denali Kid Care program is an essential program for Alaskan families. In order to continue to meet the needs of Alaska's children and pregnant women, funding must not be reduced. Thank you!

  
Stephanie Wheeler  
Program Director,  
Catholic Social Services-Beyond Shelter Program

February 12, 2002

Michelle Wood  
2021 Jarvis Ave.  
Anchorage, AK 99515

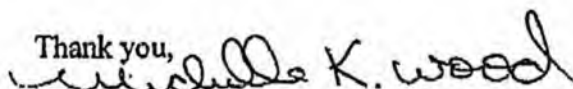
Subject: Denali Kid Care HB 367 Hearing

To Whom It May Concern:

As a mother of three children who are currently recipients of Denali Kid Care, I am extremely opposed to reducing the income levels for Denali Kid Care eligibility.

I was forced to apply for Denali Kid Care about 2 months ago when after 15 years of marriage my husband had some sort of mental break down and left me and our three children to fend for ourselves. I went from a two-person income to one income very quickly. As my husband quit his job at the same time he left, he left our children with no medical coverage. I make what would be considered good money, however, in the present economy, I quickly found out that it was going to be very difficult to support the four of us on my income. I definitely could not afford the cost of adding my kids to my insurance. I knew that I needed to take the appropriate steps to force support from my husband. But in the mean time, I had two daughters who needed glasses very badly, I had one daughter who needed to have dental surgery immediately, and I had three daughters who needed mental health care to help them make it through this tough transition without losing themselves. This has been a very difficult time for me. But being able to apply for and receive Denali Kid Care has been a tremendous blessing. It has allowed me keep my kids and myself intact while we attempt to work through this. If income levels were reduced, I am sure that I would probably have not been eligible. Then I would have had to make the choice between food and shelter or decent medical care for my kids. No one should be forced to make that decision.

Thank you,



Michelle K. Wood

**SCATHOLIC  
SOCIAL SERVICES**

February 12, 2002

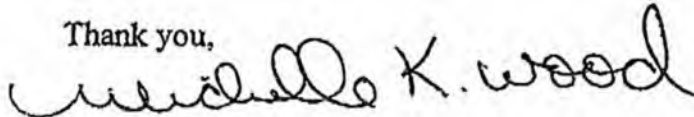
**CLARE HOUSE**  
420 WEST 54TH AVENUE  
ANCHORAGE, ALASKA 99518  
907-563-4545Michelle Wood  
CSS/Clare House  
420 W. 54<sup>th</sup>  
Anchorage, AK 99518

Subject: Denali Kid Care HB 367 Hearing

To Whom It May Concern:

I am extremely opposed to reducing the income levels for Denali Kid Care eligibility. I am the Case Management Supervisor at CSS/Clare House. Clare House is a 30-day emergency shelter for homeless women and children. In working with the women and children that come to Clare House, I refer these women to Denali Kid Care on a daily basis. With the Welfare Reform Act, we are seeing more and more working poor single mothers attempting to support their children and selves with a minimum amount of income. Many of them are in entry level positions and either the company does not offer health care insurance or the cost for the woman to add her children to her health insurance is too high. Denali Kid Care has been a wonderful resource. It allows these women to shelter and feed her children without worrying about being able to afford to provide adequate health care, eye care, dental care and mental health care for her kids. These things are vital to her children's' lives, however, if forced to choose, shelter and food must come first. Please do not force these families to make that choice. Imagine if you had to make that choice.

Thank you,

Michelle K. Wood  
Case Management Supervisor  
CSS/Clare House



t/ 907-274-0827  
f/ 907-272-0292

2207 East Tudor Rd. Suite 34  
Anchorage, AK 99507-1069  
www.aknurse.org  
aknurse@aknurse.org

February 12, 2002

Representative Fred Dyson  
Alaska State Legislature  
State Capitol (MS 3100)  
Juneau, AK 99801-1182

Dear Representative Dyson;

I am writing to express my opposition to House Bill 367, which proposes eliminating health care coverage for approximately 3,821 children and 722 pregnant women, who are currently covered by Denali Kidcare.

The bill purportedly "saves" \$5 million dollars – but its actual cost is astronomical. The "savings" will cost the State of Alaska an additional loss of approximately \$11.9 million in Federal matching funds as well as the future costs related to denying preventative care to this population. Pregnant mothers who do not receive prenatal care are at risk of having premature or unhealthy babies, which will require extensive medical care once born. Children who do not receive preventative care will return to Alaska's health care system with fully manifested health care problems that are likely to be more costly than the preventative care.

Please do not sell our children, nor our State, short in this time of budget awareness. This bill costs much more than it supposedly saves.

Respectfully,

A handwritten signature in cursive script that reads "Camille Soleil".

Camille Soleil, JD  
Executive Director

2207 E. Tudor Road, Ste 34  
Anchorage, AK 99507-1009  
PH: 907/274-0827 - Fax: 907/272-0292  
e-mail: [csoleil@aknurse.org](mailto:csoleil@aknurse.org)



# Fax

**To:** Representative Fred Dyson      **From:** Camille Soleil

---

**Fax:** 907/465-4587      **Pages:** 2 (with cover)

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**Phone:** 907/465-2199      **Date:** 2/12/2002

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**Re:** HB 367      **CC:**

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Urgent     For Review     Please Comment     Please Reply     Please Recycle

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02/12/2002 12:05

9872357834

CMHC DD FRIDE.

PAGE 01/02

Jan Lyndes  
57800 Stefan Trail  
Homer, AK 99603

To Sherr	From JAN LYNDOS
Co./Dept.	Co.
Phone #	Phone # 226-211
Fax # 235-4008	Fax # 235-7834

To Representatives John Coghill and others concerned,

Feb 12, 2002

I am writing in objection to HB 367 - Changing Denali KidCare.

#### WHY COVER HEALTH INSURANCE FOR CHILDREN?

- Health care insurance is vital to the wellbeing of ALL Alaska's children.
- Health care insurance coverage for children is cheap - \$552 per year, per child in state funds.
- With Denali KidCare, nearly 71 cents of every dollar spent is federal funds; only 29 cents comes from state general funds. This change will save the state \$5 million dollars when fully implemented, while giving up \$11.9 million in Federal Funds.
- Program elimination will result in a huge loss of federal funds for neon care.
- The state used part of the \$30 million savings from the Medicaid federal match rate change to expand coverage for children and pregnant women.
- HB 367, if adopted by the Legislature, will reduce the income levels for Denali KidCare so that 3,821 children and 722 pregnant women lose health care coverage. Children with health care coverage are *much* more likely to receive well-baby/well-child care, well baby information, adequate immunizations, and have health care problems discovered early. All of which save money in the long run.
- Services for children enrolled in Denali KidCare who also are eligible for Tribal Health Services are paid for with 100% federal funds.
- Denali KidCare helps working families who work in jobs with no benefits to provide health care for their children. This is most non-government jobs in the Homer area.

#### WHY COVER HEALTH INSURANCE FOR PREGNANT WOMEN?

- Prenatal care is the single most cost-effective health care expenditure. Without medical coverage many women would not gain the important information and education provided in prenatal visits. Possibly causing harm to their unborn baby.
- Prenatal care ensures the best birth outcome for the baby.

Prenatal care is the best method of assuring a healthy start for all Alaskan children.

Denali Kidcare covered me for my pregnancy and the birth of my healthy 9-month-old son. Due to this coverage I was able to receive ongoing care and education throughout the pregnancy. This being my husbands and my first child we found this information vital to the eventual health of my son. Due to complications during his birth my son was born caesarian, a decision we may have delayed due to concerns of the expense. This delay or continued attempt to deliver naturally could have caused my son life-threatening trauma or death.

I feel that Denali Kidcare allowed me to have a birth complication not effect the physical of mental health of my son.

I would like to take a moment to thank people involved for the creation and adoption of this program. I have worked all my life and have covered my own medical expenses frugally. Now that I am a mom I am working fulltime as a mom which of course does not pay much money and does not

Department of Health and Social Services

February 2002

provide health insurance. This position confronts me with more responsibility and less income. Leaving me even more dependent on assistance for the health of my son.

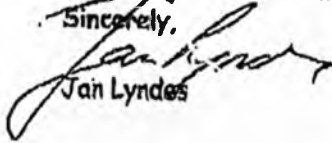
My son would be one of the children cut by this House Bill 367.

We are now pregnant with our 2<sup>nd</sup> and last child, I would be one of the pregnant women cut by House Bill 367.

My husband works hard to support us all and we live frugally and self sufficiently but with the cost of health care it is beyond our reach.

Please reject House Bill 367.

Sincerely,



Jan Lyndes

# FAX COVER SHEET

Homer Legislative Information Office  
345 W. Sterling Hwy, #102A  
Homer, AK 99603  
(907) 235-7878 FAX: (907) 235-4008

Date: 2/12/02  
No. of pages including this one: 3

To: Representative Dyson  
Fax No. 465-4587

Comments: This is faxed testimony for the  
HHEIS hearing this afternoon. Re: HB 367.  
Thank-you  
Sheri

**Subject: Denali Kid Care**

**Date:** Tue, 12 Feb 2002 15:13:26 -0900

**From:** "Teddy" <tvwill@aptalaska.net>

**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>,  
<Representative\_John\_Coghill@legis.state.ak.us>,  
<Representative\_Gary\_Stevens@legis.state.ak.us>,  
<Representative\_Vic\_Kohring@legis.state.ak.us>

Representatives:

I live in Wrangell and I have seen a number of children benefit from the Denali Kid Care program. A little boy born with 3/4 of his heart would not be alive today and preparing for an operation to replumb his heart if it were not for Denali. A 11 year old boy with genetic back problems would not be functioning as a boy today, with straight As in school, if it were not for Denali.

This program was set in place for families that do not have health insurance for their family even though both parents are working, even more than one job at a time.

Denali Kid Care is an important program for this State, especially since adequate health care is sometimes not available in the local community.

Please consider the children and pregnant mothers that will not have health care if you all decide to cut Denali Kid Care.

Consider the following:

**HB 367 - Changing Denali KidCare**

Denali KidCare is a program that went into effect March 1, 1999 to provide health care insurance primarily to uninsured children in working and non-working families and to pregnant women. Funded mainly with federal dollars, this program expanded Medicaid income levels to assure that more Alaskan children receive a healthy start in life.

Denali KidCare takes advantage of enhanced federal funding under the State Child Health Insurance Program (S-CHIP) adopted by Congress in 1997 to provide health care insurance for uninsured children. S-CHIP was created to address the increase in the number of children without health insurance as employer coverage of dependents becomes less common.

HB 367, if adopted by the Legislature, will reduce the income levels for Denali KidCare so that 3,821 children and 722 pregnant women lose health care coverage. This change will save the state \$5 million dollars when fully implemented, while giving up \$11.9 million in Federal Funds.

**WHY COVER HEALTH INSURANCE FOR CHILDREN?**

C Health care insurance coverage for children is cheap - \$552 per year, per child in state funds.

C With Denali KidCare, nearly 71 cents of every dollar spent is federal funds; only 29 cents comes from state general funds.

C Services for children enrolled in Denali KidCare who also are eligible for Tribal Health Services are paid for with 100% federal funds.

C Health care insurance is vital to the wellbeing of Alaska's children.

C Children with health care coverage are more likely to receive well-baby/well-child care, adequate immunizations, and have health care problems discovered early.

C Denali KidCare helps working families who work in jobs with no benefits to provide health care for their children.

C The state used part of the \$30 million savings from the Medicaid federal match rate change to expand coverage for children and pregnant women.

C Program elimination will result in a huge loss of federal funds for health care.

#### WHY COVER HEALTH INSURANCE FOR PREGNANT WOMEN?

C Prenatal care is the single most cost-effective health care expenditure.

C Prenatal care ensures the best birth outcome for the baby.

C Prenatal care is the best method of assuring a healthy start for Alaskan children.

Thank you for your attention to this matter

Teddy Williams

Wrangell

Teddy Williams  
[twill@aptalaska.net](mailto:twill@aptalaska.net)

**Subject: Denali Kid Care support**

**Date:** Tue, 12 Feb 2002 12:03:35 -0900

**From:** "Diamond, Joan W." <DiamondJW@ci.anchorage.ak.us>

**To:** ""Representative\_Fred\_Dyson@legis.state.ak.us"" <Representative\_Fred\_Dyson@legis.state.ak.us>  
""Representative\_Peggy\_Wilson@legis.state.ak.us"" <Representative\_Peggy\_Wilson@legis.state.ak.us>  
""Representative\_John\_Coghill@legis.state.ak.us"" <Representative\_John\_Coghill@legis.state.ak.us>  
""Representative\_Gary\_Stevens@legis.state.ak.us"" <Representative\_Gary\_Stevens@legis.state.ak.us>  
""Representative\_Vic\_Kohring@legis.state.ak.us"" <Representative\_Vic\_Kohring@legis.state.ak.us>  
""Representative\_Sharon\_Cissna@legis.state.ak.us"" <Representative\_Sharon\_Cissna@legis.state.ak.us>  
""Representative\_Reggie\_Joule@legis.state.ak.us"" <Representative\_Reggie\_Joule@legis.state.ak.us>

To the Hess Committee,

I am very familiar with the benefits of the Denali Kid Care and oppose HB 367, No Kid Care Bill. It is hard to believe that a political party that talks about cutting the state budget would even consider stopping the Denali Kid Care because the program reduces the cost of injury and illnesses to a population at high risk.

The HESS committee is short sighted in their thinking. If you cut Denali Kid Care then you will increase the cost of state subsidized emergency care and hospitalization because these people cannot afford preventive care but tap healthcare in a crisis. It is an error in thinking that if you cut Denali Kid Care then you will reduce the demand for services. It does not happen.

Be cost effective and support public health policy that includes Denali Kid Care.

Joan Diamond  
Anchorage, Alaska  
343-6583

**Subject: HB 367**

**Date:** Tue, 12 Feb 2002 18:43:10 -0900

**From:** Patricia-Michael Grandietti <mikepat@gci.net>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Sharon\_Cissna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

To the members of the House HESS Committee:

I wasn't able to attend the hearing that was held today, Tuesday January 12, 2002, to voice my opinion about HB 367.

I am opposed to this bill that would deny eligibility for Denali KidCare to Alaska's children and pregnant women. I am a registered nurse and one of my core values is the health and well-being of all, but especially the health and well-being of children and pregnant women. These two groups are most vulnerable, and I believe that ensuring health coverage for them through a program like Denali KidCare is critical to their future.

Children who get regular check ups will have health problems identified early, when treatment is more cost-effective and has the best chance of resulting in a healthy adult, who will contribute to a healthy economy.

Pregnant women who receive preratal care have the best chance of delivering healthy, full-term babies, and these are the kids who have the best start in life.

I hope that you will all agree that limiting Denali KidCare doesn't make sense. Because the Federal Government pays 71 cents of every dollar spent on health care, the cost to the state is minimal. I hope that we don't put our kids in the middle of the state's economic debate!

Sincerely,  
Patricia Hong  
Registered Nurse

**Subject:** HB 367

**Date:** Wed, 13 Feb 2002 06:55:20 -0900

**From:** Tom Conley <prophet@ptialaska.net>

**To:** Fred Dyson <Representative\_Fred\_Dyson@legis.state.ak.us>

Dear Representative Dyson, I listened to and briefly participated in the testimony on HB 367 on 12 Feb. I get the impression there is a fair amount of misunderstanding about the function and impact of Denali Kid Care. Oddly it is the group of participants whose incomes are between 100% and 200% of the poverty level who are most in need of consideration. Those at or below 100% of the poverty level have been covered for years and would have continued to be covered in almost any scheme; those above 200% of the poverty level or who hold jobs that offer group insurance (teachers, municipal workers, etc) don't need the assistance and under present policy (even in the case of the insured whose incomes fall under 200%) don't qualify. Those who are being left out in the cold are those who, at between 150-200% of the poverty level and without insurance, earn enough to be able to provide themselves with food, shelter, clothing, but who can't afford or in many cases even obtain insurance. This group is well represented in Alaska and includes such people as self employed fishermen, self employed craftsmen, small business owners and their employees, day care providers, etc. For the most part, were they able to get insurance at some affordable cost, I'm sure most of them would avail themselves of the coverage. Indeed, if some way was available for them to pay in the estimated \$552 yearly cost per individual to the program's coffers, one suspects most would take advantage of the opportunity (which might suggest a way to partially amortize the cost of the coverage were it not for federal regs prohibiting partial recovery of Medicaid fees).

There really are no other programs out there for these productive citizens. The WIC program mentioned in testimony is strictly a nutrition program offering free or partially subsidized foodstuffs. Health insurance for individuals or very small groups is outrageously expensive and often has severe coverage restrictions. The end result is that these individuals and families often do not seek routine prenatal and well child care and at a much higher rate than average present to the health care system late. Late is always expensive both in terms of preventable consequences and in terms of cost of services. Much of this preventable cost eventually falls on the state both directly through health care subsidization in a variety of ways and indirectly in terms of increased costs to the school system for special needs programs.

All in all contraction of present coverage, while it offers some limited short term savings for the state, will come at the cost of significant increases in long term expenditures. The present program is cost effective and humane. I would urge you to let it continue to function at its present level. As to the background argument that the program is somehow subsidizing those not in need of assistance, I would urge you to look more closely at who is being served and convince yourself, as I think you will on the basis of objective evidence, that this simply is not the case.

I think it is important to remember that the bulk of the funding for the program is federal and that those already covered by other federal programs (in Alaska this group is mainly made up of Alaska Native beneficiaries), while qualifying for the for Denali Kid Care, are funded 100% with federal dollars.

Sincerely, Thomas L Conley, MD, FAAP Pediatrician and Vice-President Sitka School Board

**Subject: HR 367**

**Date:** Tue, 12 Feb 2002 20:19:01 -0900

**From:** Cathy Giessel <cgiessel@mac.com>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us

Mr. Dyson

This is not the time to be cutting health care benefits for children and pregnant women! Please oppose HR 367.

Thank you.

--

Cathy

Cathy Giessel, MSN, RN, FNP-CS  
cgiessel@mac.com

Twenty years from now you will be more disappointed by the things you didn't do than by the ones you did. So throw off the bowlines. Sail away from the safe harbor. Catch the trade winds in your sails. Explore. Dream. Discover. (Mark Twain)

You cannot escape the responsibility tomorrow by evading it today.  
(Abraham Lincoln)

**Subject: Opposition to HB367!!!**

**Date:** Tue, 12 Feb 2002 13:09:27 -0800

**From:** Mary Vogel <mvogel@northstar.k12.ak.us>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Sharc...issna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

I've been an elementary, & am now a high school nurse for the FNSBSD for a total of 12 years. And, I work in the Womens' ctr (maternity/GYN surgery) at FMH during summers & Christmas break.

I know first hand the SIGNIFICANT number of women & children that DIRECTLY benefit from & RECEIVE BETTER, DESERVED HEALTH CARE because they qualified for & receive DKC benefits!!

Gov. Knowles made a solemn vow to boost the DHSS services available to ALL AK in his pkg 3 years ago; I feel you should NOT tamper w/the services currently available. As a "17 yr Alaskan", I'm all for instituting a local sales tax, as well as a modest state income tax, that Gov. Knowles recently proposed. It is NOT fair to our state to have MANY out-of-state "employees" lavishly cashing in on our industries, & not leaving one dime behind for the MANY state services they may utilize!!! This would greatly stabilize the "BOOM/BUST" economic rollercoaster ride our DHSS programs have continuously undergone, noticed ever since I arrived from Okla. in '84.

Our drug & alcohol problems are OFF THE CHART compared to lower 48; I see the resultant neglect, abuse, & "perpetuation of the cycle" nearly every day in my alternative high school of 130 high-risk 9-12th graders... Without DKC, MANY of our students who are living on their own & making minimum wage, would have NO HEALTH CARE COVERAGE!!! THIS IS THE MOST AT-RISK AGE RANGE for STDs (which need prompt treatment), depression & suicide attempts (which need prompt mental health services), & teen pregnancy (which need prompt & consistent prenatal care). Of all Alaskans, our children fall into the highest "poverty range" group. I think spending \$5 million in order to continue getting \$11.9 million in federal \$\$ IS WELL WORTH IT!!

GOOD HEALTH DIRECTLY IMPROVES ABILITY TO LEARN! HAVING NEEDED GLASSES & MEDICAL EXAMS DIRECTLY IMPROVES A CHILD'S ABILITY TO LEARN! Have you looked at your last dentist's bill lately? Here in Fbks, you can expect to pay \$250-\$400 for a routine filling & exam, which MAY include an XR... New OSHA laws are requiring dentists to change needles BETWEEN injections when they are numbing your mouth...add those added equipment & time costs to your final bill pretty soon!

What is the point of spending millions in efforts of raising education standards, when the children are unable to pay for a Dr/practitioner's visit, & continue to attend school ill, & often contagious!! What's the point of having cutting edge curriculum when kids squint & struggle to see the board or their textbooks? The best teachers in this state can't motivate a depressed student, whose not focusing on school because he's worried how he's gonna care for his little brother after school, since his single mom was just busted for running a crack house in town... Have you tried to concentrate on important work when you have a bad toothache, knowing you have to wait months to get a Salvation Army pro bono appt?

Please talk to the "homeless" community of Willow to see if DKC has benefitted them.

Please talk to the many single parents in our state working 2 jobs, but are still unable to pay for dental & medical care for their kids & or themselves. Please ask the native community if the extended DKC benefits have aided in their being able to pay for glasses & certain prescriptions...

There is LOTS of pork & pet projects flowing through the capitol; I STRONGLY urge you to leave DKC program alone! MANY ALASKANS COUNT ON THAT NEEDED & DESERVED DHSS PROGRAM!!

# "Healthy Communities - Healthy People"

## "Healthy Communities - Healthy People"



### TESTIMONY - HB 367

TO: House HESS *JA*  
 FROM: Stan Steadman, Coordinator, Healthy Communities/  
 Healthy People- Soldotna; and Interim Executive Director,  
 Central Peninsula Health Centers, Inc.- Soldotna  
 RE: HB 367 - Urging Defeat  
 DATE: February 12, 2002

Healthy Communities/Healthy People (HC/HP), a network organized to improve the health of Central Kenai Peninsula citizens, has worked over the past several years to develop programs to offer youth opportunities for medical and dental health care. Central Peninsula Health Centers, Inc. (CPHC) is such a program, recently established through the efforts of HC/HP and in partnership with the U.S. Bureau of Primary Health Care to provide direct medical and dental services to under- and uninsured youth.

Children who do not receive regular and adequate medical and dental services will undoubtedly cost society more in the long run than those who receive care. Although HB 367 appears to save money, it comes with a high longer-term price.

Of critical concern to HC/HP and CPHC is oral health. Dental decay is the most common childhood disease. This is a disease that is both preventable and treatable. Low income individuals suffer the worst oral health. According to the National Institute of Dental Craniofacial Research, "Uninsured children are 2.5 times less likely to receive dental care than insured children and are 3 times as likely to have dental needs."

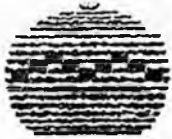
Even with Dental Kid Care coverage, families face many barriers to accessing health care. By taking this needed funding away from our children we are placing them at an even higher risk of slipping through the cracks.

We should be focusing our efforts on how to have healthier children in our State not taking away basic care from those who need it most. I urge you to vote against HB 367.

BRIDGES - 145 Kasloff Street - Soldotna - Alaska - 99669 - Phone (907) 260-3800 - Fax (907) 262-8457

- OR -

Healthy Communities Healthy People - PO Box 1612 - Soldotna - Alaska - Phone (907) 260-2663 - Fax (907) 262-2668



COOK INLET  
T R I B A L  
COUNCIL, INC.

February 13, 2002

House of Representatives  
Representative Fred Dyson  
State Capitol  
Juneau, Alaska 99801-1182

Dear <sup>Fred</sup> Representative Dyson:

I am concerned that the State Legislature is considering changing the income level criteria for Denali Kid through House Bill 367. I would ask you to maintain Denali Kid Care as it provides a viable service.

If you cut the income level criteria our children and pregnant women will lose health care coverage. It is unnecessary for a state so limited in population and *human resources* to risk the lives of any of our people.

As a provider of social service programs for Alaska Natives and American Indians, we at Cook Inlet Tribal Council (CITC) can assure you that the costs of helping someone with a medical crisis is much more expensive and labor intensive than helping someone who has access to basic health care. In addition, under current Denali Kid Care income criteria, services for children enrolled in Denali Kid care who are eligible for Tribal Health Services are paid for with 100% federal funds, which makes this a no cost venture for the State.

Cook Inlet Tribal Council, Inc. is dedicated to helping Alaska Native and American Indians become healthy productive *human resources* for the State of Alaska. Please protect Denali Kid Care as the investment is in insuring the children of today and tomorrow are healthy productive *resources* for the State of Alaska.

Sincerely,

COOK INLET TRIBAL COUNCIL, Inc.

Perry R. Ahsogeak  
Vice President, Programs

670 W. FIREWEED LANE, ANCHORAGE, ALASKA 99503-2578

FAX: (907) 265-5996

PHONE: (907) 265-5900

**PEDIATRIC CONSULTANTS OF ALASKA, INC.**

*Clinton B. Lillibridge, M.D., F.A.A.P.*



Representative Dyson,  
Chairman H.E.S.S. Committee  
State Capital Room 104  
Juneau, AK 99801-1182

12 February, 2002

Re: HB 367

Dear Mr. Dyson,

As an advocate for children, I am **strongly opposed** to this Bill. The American Academy of Pediatrics has shown in several studies that preventative medical services and providing care in an office or clinic setting greatly reduces overall costs by preventing the over use of emergency rooms and reduces hospitalizations.

The Bill doesn't make good economic sense either. By cutting \$5 million in State expenditure, Alaska loses \$11.9 million in Federal funds which support many other programs. That is DUMB!

Sincerely,

A handwritten signature in cursive script, appearing to read "Clinton B. Lillibridge MD". The ink is dark and the handwriting is fluid.

Clinton B Lillibridge, M.D.  
Pediatrician in Alaska since 1969



Honorable Fred Dyson, Chair  
House Health, Education and Social Service Committee  
Alaska Capitol Room 104 (MS3100)  
Juneau, AK 99801-1182

RE: HB 367 – Oppose

Dear Representative Dyson,

On behalf of the 112,000 members of AARP in Alaska, we oppose HB 367, authored by Representative John Coghill.

We understand the Legislature's need to resolve our fiscal problems but we do not believe it is good public policy nor good health policy to take families off the Denali KidCare program and increase the number of uninsured in our state.

Most of our uninsured are working families whose employer does not provide insurance. Denali KidCare provides a valuable safety net for many children in these families as well as for pregnant women. Health insurance increases the chances for good health throughout one's life.

AARP will support fiscal decisions that you and your colleagues make that are fair and make sense. We do not feel it makes sense to take Alaskans currently receiving health insurance benefits off that coverage.

AARP recommends a "NAY" vote on HB 367.

Should you have any questions about our position, please feel free to contact Marie Darlin (586-3637), Coordinator of the AARP Capitol City Task Force; Patrick Luby, AARP Legislative Representative (907-762-3314); or me (907-245-5259).

Thank you for your consideration.

Sincerely,

A handwritten signature in cursive script that reads "Marguerite Stetson".

Marguerite Stetson  
AARP Alaska Executive Council Member for Advocacy

cc: Vice-Chair Representative Peggy Wilson  
Representative John Coghill, Jr.  
Representative Vic Kohring  
Representative Gary Stevens  
Representative Sharon Cissna  
Representative Reggie Joule

FROM to Interior Delegation

Object to lowering the maximum allowable income for the Denali Kid Care Program.

I am a member of the lower income middle class who is not eligible for health care through native heritage or government employment. The current threshold is actually TOO LOW. For example, the expense of having a baby is approximately \$10,000-\$12,000! Private insurance for a family of 3 costs well over \$1000/month. Individuals in my category must go without medical insurance.

Please take a hard look at the Denali Kid Care Program and adjust it so that Children and pregnant mothers in our category can qualify.

Janet A. H. Carmichael  
878 Lynwood Way  
North Pole, AK 99705



# UNITED FISHERMEN OF ALASKA

211 Fourth Street, Suite 110  
Juneau, Alaska 99801-1172  
(907) 586-2820  
(907) 463-2545 Fax  
E-Mail: [ufa@ufa-fish.org](mailto:ufa@ufa-fish.org)  
[www.ufa-fish.org](http://www.ufa-fish.org)

Press Release 2002-01  
FOR IMMEDIATE RELEASE

CONTACT: Tom Gemmell  
Executive Director  
February 14, 2002

## **Governor's proposal offers a starting point for solving subsistence; ANILCA changes should be added**

United Fishermen of Alaska (UFA) announced support for Governor Knowles' efforts to resolve the subsistence controversy but pointed to the need to include changes to ANILCA (Alaska National Interest Lands Conservation Act), the federal subsistence law, as part of a solution for the subsistence debate.

For over ten years, UFA has supported efforts to provide for a rural subsistence priority and to end federal subsistence management. UFA's long-standing policy on subsistence calls for a three-part solution:

1. A constitutional amendment to allow a rural subsistence priority;
2. Changes to state law to put the rural priority into effect; and
3. Technical changes to ANILCA to correct deficiencies in the federal subsistence law.

"The Governor's proposal includes a constitutional amendment and state statutes that would provide dramatic increases in the protections for subsistence," said David Bedford, chair of UFA's Subsistence Committee.

"However, the proposal does not offer the modest protections that Alaskan commercial, sport, and personal use fishermen would gain from technical changes to ANILCA," he continued.

UFA supports technical changes to ANILCA because that federal law ignores key issues, for example, it gives no guidance on the amount of subsistence fish and game subsistence-harvesters can sell.

"Without changes to ANILCA to address the gaps in the law, federal courts will invent solutions," said Bedford.

#### **MEMBER ORGANIZATIONS**

Alaska Longline Fishermen's Association • Alaska Trollers Association • At-sea Processors Association • Bristol Bay Resery  
Chignik Regional Aquaculture Association • Concerned Area "M" Fishermen • Cook Inlet Aquaculture Association  
Copper River Salmon Producers Association • Cudova District Fishermen United • Douglas Island Pink and Chum  
Kenai Peninsula Fishermen's Association • Kotik Regional Aquaculture Association • Kotik Fishermen Association • North Pacific Fisheries Association  
Northern Southeast Regional Aquaculture Association • Old Harbor Fishermen's Association • Petersburg Vessel Owners Association  
Prince William Sound Aquaculture Corporation • Purse Seine Vessel Owners Association • Seafood Producers Cooperative  
Southeast Alaska Regional Diver Fishery Association • Southeast Alaska Seiners Association • Southern Southeast Regional Aquaculture Association  
United Cook Inlet Dift Association • United Salmon Association • United Southeast Alaska Gillnetters

"Solutions that make sense in a federal courtroom in San Francisco can have adverse impacts here at home," he continued.

"I am glad to see that the Governor has put a proposal on the table to resolve subsistence," said Bob Thorstenson, President of UFA.

"With the Governor proposing a constitutional amendment and suggestions for changes to state statutes, the glass is definitely half-full. If we add technical changes to ANILCA we might have a package that will make it this time," he continued.

"We will continue work with all interested groups to support subsistence and end federal involvement in management of fish and game," Thorstenson concluded.

#30#



# ALASKA STATE LEGISLATURE

Please enter into the record my testimony to the HOUSE (M.E.S.S.)  
 Committee on HB 252 Committee Name Dated 12-14-02  
Bill / Subject

I SUPPORTED THE ORIGINAL BILL. NOW, I QUESTION THE NEED TO REMOVE PARENTAL RIGHTS RECOGNITION FROM CONSTRUCTION, AND TO PLACE IT IN INTENT LANGUAGE. THE DEPARTMENT MUST ACTUALLY DO THIS; NOT SIMPLY INTEND TO DO THIS, WHILE ACTUALLY NOT "RECOGNIZING" PARENTAL RIGHTS. REPRESENTATIVE CISSNA'S AMENDMENTS CAN NOT BE ASSESSED UNTIL WRITTEN COPIES ARE AVAILABLE IN THE FAIRBANKS L.I.O. THANK YOU.

SIGNED:

*Scott Trafford Calder*  
 Testifier SCOTT TRAFFORD CALDER

Representing SELF + OTHERS

Address / Phone Number P.O. 75011 / FBKS / 99707 / (907) 474-0174



# YUKON-KUSKOKWIM HEALTH CORPORATION

"Fostering Native Self-Determination in Primary Care, Prevention and Health Promotion."

**Testimony of Valerie Davidson, Executive Vice President**  
 valerie\_davidson@ykhc.org

Thank you for the opportunity to be heard today. The Yukon-Kuskokwim Health Corporation opposes any change to reduce the eligibility for Denali KidCare from its current level. We understand that HB 367 proposes to reduce eligibility from 200% of the federal poverty level to 150%. An estimated 3,821 children and 722 pregnant women who now receive health coverage under Denali KidCare would lose health care coverage.

As you deliberate, we ask you to remember that the need for medical care does not distinguish whether a woman or child is eligible for Denali KidCare. The need for medical care arises, regardless of the coverage. People who don't have health insurance are less likely to seek routine medical care. Rather, they often wait until the situation is more chronic and an emergency arises. That family is then forced to seek emergency medical treatment at an ER at double the cost. Tragically, what this means is that the population that most needs our medical assistance, low income children and women, will be forced to pay for their own medical care with dollars that they don't have.

Even in these times of national tragedy, our nation as a whole is moving to expand services to women and children. In fact, other states are taking measures to expand their CHIP coverage. According to the U.S. Department of Health and Human Services:

- In 38 states and the District of Columbia, CHIP coverage is now available for children whose family income is 200 percent of the federal poverty level (FPL) or higher.
- Before the CHIP program, only six states had Medicaid income eligibility levels at or above 200 percent of FPL and that was for infants only.
- States report that more than 75 percent of children enrolled in SCHIP in 2001 were between the ages of 6 and 18. Medicaid generally covers younger children at higher income eligibility levels. U.S. Department of Health and Human Services Press Release, February 6, 2002.

Eligibility Levels of Other States include:

**California**

- 300% federal poverty level for ages 0 - 2
- 250% federal poverty level for ages 2 - 19

**Minnesota**

- 280% federal poverty level for ages 0 - 2
- 275% federal poverty level for ages 2 - 19

**New York & Washington**

- 250% federal poverty level

**New Mexico**

- 235% federal poverty level

**Nevada just amended their CHIP program:**

- 200% federal poverty level
- Nevada's CHIP plan expanded health coverage to an estimated 1,700 children whose parents lose their jobs.
- Parents' unemployment compensation is not considered in determining eligibility for CHIP

**New Jersey:**

- 200% federal poverty level
- Covers both parents of CHIP eligible children and Pregnant Women

**Arizona & Michigan**

- 200% federal poverty level

Studies also indicate that there are "racial and ethnic minority groups are much more likely than whites (as much as 2.5 times the rate) to be uninsured and are less likely to have job-based health insurance coverage. *Racial and Ethnic Disparities in Access to Health Insurance and Health Care*, UCLA Center for Health Policy Research and the Henry J. Kaiser Family Foundation, 2000.

- Contrary to widespread assumptions that most American Indians and Alaska Natives (AI/ANs) have access to IHS services, only one in 5 people reported having IHS coverage or access to those services. *Id.*
- Ethnic minorities are disadvantaged by low family incomes. In fact, 50% of all nonelderly AI/ANs have family incomes below 200% of the federal poverty level, twice the rate for whites (23%).
- "The same proportion of AI/ANs who report not having IHS coverage are poor or near poor (47%), a group that clearly would not have the financial resources to obtain health insurance or health care services without access to employment-based insurance (that does not require a substantial contribution), Medicaid, or other public coverage.
- The study concluded that, "available data suggest that IHS and tribal health care services are inadequate to compensate for low rates of other coverage and to provide minimally adequate access to health care." *Id.*
- Furthermore, AN/AI families are less likely to have private health insurance than other races and more likely to depend on federal health systems for health care. *Medicaid and the Uninsured: Health Insurance Coverage and Access to Care Among American Indians and Alaska Natives. The Henry J. Kaiser Family Foundation, June 2000.*

**IHS LEVEL OF NEED FUNDED**

The assertion that all AI/ANs get free health care coverage from the federal government is simply not true. The federal government provides very limited health services through the IHS as a part of the United States' trust responsibility to tribes.

- The budget to provide these services is limited and provides care only to those individuals who are members or descendants of federally recognized tribes and located in areas where services are accessible.
- A recent report by the federal government indicated that the IHS appropriation provides only 59% of the funding needed to provide health care to AI/ANs.
- An additional \$1.2 billion dollars would be necessary to raise the funding level to 100% of the need.
- Furthermore, an additional \$3 billion would be required to expand coverage to 1 million Indians not now served by the Indian Health Systems. *Level of Need Funded Study, December 1999.*

In August 2001, Secretary Thompson launched an initiative to encourage states to expand access to health care coverage for low-income individuals through the Medicaid and SCHIP program, which HHS' Centers for Medicare & Medicaid Services (CMS) administers. The initiative gives states more flexibility to coordinate these companion programs and offers a simpler application for states that commit to reducing the number of people without health insurance. U.S. Department of Health and Human Services Press Release, February 4, 2002.

Nationally, the estimated unspent FY 1998 CHIP funds was \$916 million as of June, 2000.

- To further strengthen SCHIP, President Bush's fiscal year 2003 budget would make available to states an estimated \$3.2 billion in unused SCHIP funds that otherwise would return to the federal treasury. The SCHIP law originally required that funds be taken from states that did not use their full SCHIP allotment during the previous three years. Extending the availability of expiring funds will enable all states to expand coverage to the uninsured.
- Secretary Thompson said, "This is money that went unspent by states and was due to be returned to the treasury. We've created a model waiver program for states seeking innovative ways to cover its citizens with SCHIP, and the availability of this money makes SCHIP a powerful tool for providing health care to children and their parents. In just one year, we approved waivers and state plan amendments to extend health coverage to 1.8 million people and enhance benefits for 4.5 million people. We also eliminated the waiver backlog." February 4, 2002
- Thus, Alaska stands to benefit from the underutilized CHIP funds allocated to other states from prior years.
- If Alaska underutilizes our allocation of CHIP funds by reducing our eligibility for CHIP, exactly the opposite would happen: the dollars allocated for Alaskan families would be directed to families in other states by the Dept. of Health and Human Services.

**We respectfully request, on behalf of the people who need our assistance the most, to retain the 200% federal poverty level eligibility criteria for the Denali KidCare program. Thank you for the opportunity to be heard today.**

2-14-02

Dear Mr Dyson

as a nurse I am strongly opposed to the Bill  
to cut Denali Kid Care

Betty Sate MD

2/14/02

Alaska Women's + Children's Clinic  
11823 Old Glenn Hwy Ste 110  
Eagle River, AK 99577

Testimony re: HB 367

My name is Cynthia Ebelacker. I am here representing the AK Nurse Practitioners and the AK Nurses Association. I also own a small private clinic in Eagle River.

You have my written statements that I turned in Tuesday, and which I hope you will have time to read - they mention some of my personal experiences with Denali Kid Care in the last 3 years.

Today I would like to address some of the issues that come up during Tuesday's testimonies.

- I agree that we should be fiscally responsible but there seems to be some misconceptions about who qualifies for Denali
  - People aren't flooding in to get on Denali Care. Many who do qualify aren't even aware it exists
  - The parents who qualify for Denali do not professional or white collar workers who usually have access to other insurance
  - It's the blue collar workers and self-employed workers who qualify for Denali.
  - Despite opinion to the contrary, Eagle River is not predominantly an affluent society. At least 65% of my clinic population is able to see me only because they have Denali insurance. They live in the rundown apartments and trailers off the main road through Eagle River. They walk with

- their babies and toddlers to reach our clinics, even in the winter. We know our clientele and where they live and what they drive, and what jobs they have. We usually get them on Denali as soon as possible.
- These families you want to deny coverage to are the ones who work here - building and plumbing and working at the fast food stores, and Wal-Mart. They do pay taxes and many of them do vote.
  - The difference for many is that 3 years ago, their children would almost never have received any preventative care, and they would have had to go to the ER when their kids were really sick. If Denali goes away for them, they will once again be forced to utilize the ER as their local "doc" - an annual bigger financial burden to the state.
  - Our state has the dubious honor of leading the nation in the number of infant and mother deaths and yet you're thinking of cutting 722 <sup>pregnant</sup> women off from Denali and thus prenatal care. Without Denali, most of these women will not see a healthcare provider until they come in to deliver. A good number of these babies will be born prematurely.
  - If you haven't looked at the cost to the state for each baby born before 35 weeks, I have. I called the Maternal Health coordinator for Providence. Each child costs us upwards of a quarter of a million dollars ~~each~~ for their hospital stay.

I have been trying since Tuesday to get my calls returned from several different departments at First Health pertaining to the topic of how many Denali families have outside insurance as well.

Under Denali, you can have another medical insurance but you allowed ~~more~~ <sup>max</sup> income for a family of 4 drops from \$36791 monthly to a much lower amt in order for them to still be covered. The answers I did receive from the supervisors that I called, were that there wasn't some great number of abusers in the Denali system. I can supply you with these names & numbers in order to satisfy your interest in the matter.

The parents that this bill will penalize, are for the most part, workers, and trying hard to get above water and out of public assistance. Their children now get preventative healthcare and get their chronic needs met, critical surgeries and referrals get done - and believe it or not, thank their best intentions and they are no longer as big a drain on the state resources.

Next, I would like to state that Denali keeps clinics like mine, as well as the other larger pediatric clinics and hospitals to survive. Any medical provider will tell you that Denali does not make anyone rich. Those reasons we all embrace Denali have more to do with the joy for many of us at seeing the amazing impact of finally receiving healthcare, that serves not only the needs of our families and children.



# Alaska's Federal Poverty Level (FPL) Eligibility Guidelines

Income standards effective April 1, 2001

NOTE: An unborn child of a pregnant woman is counted in the family size for pregnant women only.

Family Size	Annual Income Kids with other health insurance	Monthly Income Kids with other health insurance	Annual Income Kids with no insurance. Pregnant women with or without health insurance	Monthly Income Kids with no insurance. Pregnant women with or without health insurance
	150% FPL	150% FPL	200% FPL	200% FPL
1	\$16,095	\$1,342	\$21,460	\$1,789
2	\$21,765	\$1,814	\$29,020	\$2,419
3	\$27,435	\$2,287	\$36,580	\$3,049
4	\$33,105	\$2,759	\$44,140	\$3,679
5	\$38,775	\$3,232	\$51,700	\$4,309
6	\$44,445	\$3,704	\$59,260	\$4,939
7	\$50,115	\$4,177	\$66,820	\$5,569
8	\$55,785	\$4,649	\$74,380	\$6,199
Additional	\$ 5,670	\$ 473	\$ 7,560	\$ 630

## Key Points

- ✦ Income figures above are gross income (before taxes are taken out)
- ✦ Income eligibility is generally based on income for the 30 days prior to the processing of the application
- ✦ A standard deduction per month for work expense and a standard deduction per month for dependent care expense may apply
- ✦ Permanent Fund Dividends are not counted as income
- ✦ Anyone can apply for her/himself or on behalf of a child or teen
- ✦ Income eligibility is determined based on biological or adoptive parent income
- ✦ Children with other insurance may still be eligible

February 13, 2002

Dear Rep. Coghill

I have just been informed of a proposition that is trying to be passed that would eliminate Denali Kid Care. I just want to share a little story of how beneficial Denali Kid Care to our family and why this would be a devastation if this bill passed.

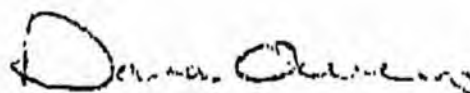
We moved to Alaska in '99, at that time we did not have health insurance. We had 4-year-old daughter and 1-½ year old twins. We could not afford the \$600+ a month for insurance we would have to pay through COBRA to continue insurance. We qualified for insurance for our children through Denali Kid Care.

Three months after we arrived in Alaska, it was discovered that our oldest daughter Darci, who has Down Syndrome, would need open-heart surgery to correct a birth defect in her heart. Since that type of surgery cannot be performed here in Alaska, we had to go to Portland for the Surgery. I cannot praise enough the quick – hassle free response that we received from Denali Kid Care. Darci had surgery, came through it just fine and is now a healthy 6 ½ year old going to 1<sup>st</sup> grade. Darci continues to have multiple health care concerns that are associated with Down Syndrome, but I feel like we are a success story.

We now have insurance with my employer and are getting back on our feet. But, you can imagine the expense we would have had to undergo for such procedures and I do not feel we would be where we are today without the assistance of Denali Kid Care.

This is just one of the stories that I have about the benefits of Denali Kid Care, with a family of 3 little girls I have many. But, please understand, that families like my own, that just need a little help to get back on their feet would probably suffer the most from this bill passing.

Sincerely, Dana Owens.



# STATE OF ALASKA

**DEPARTMENT OF HEALTH & SOCIAL SERVICES**

**MEDICAL CARE ADVISORY COMMITTEE**

**TONY KNOWLES, GOVERNOR**

P.O. BOX 110660  
JUNEAU, ALASKA 99811-0660  
PHONE: (907) 465-3355  
FAX: (907) 465-2204

February 12, 2002

The Honorable Fred Dyson  
Alaska State Legislature  
Capitol Room 104  
Juneau, AK 99801

Dear Representative Dyson,

On behalf of the Medical Care Advisory Committee, I would like to express the committee's concern regarding House Bill 367. Required by federal law, the Alaska Medical Care Advisory Committee is responsible for advising the State's Medicaid agency on policy and program changes to the Medicaid program. The committee members include health care consumers and providers from across the state of Alaska.

The Medical Care Advisory Committee has had the opportunity to provide input to the Department of Health and Social Services on the Denali KidCare program throughout its development. We have heard from consumers and providers about their experiences with the Denali KidCare program. From our review, we learned that the program has been overwhelmingly successful in reaching needy families and has contributed immensely to the stability of these families. We also learned that parents were able to stay employed even if their children got ill because their children had health care coverage through the Denali KidCare program. These families feel empowered that they can both maintain employment and provide the right care for their children.

From the beginning, the Medical Care Advisory Committee supported the development of Denali KidCare program for a number of reasons. Numerous studies have documented that the percentage of children without health insurance has grown rapidly in recent years. Contributing significantly to the declining trend in health insurance is the decline in employer financial support for health care coverage for their employees' dependents. Families who meet the income eligibility guidelines for Denali KidCare often do not have the option of an employer financed health insurance plan for their dependents, and even if they do, they can not afford to pay their share of the health care premiums, deductibles, and copayments. The Medical Care Advisory Committee knows that children without health care coverage are six times more likely to go without needed medical care, five times more likely to use the hospital emergency room as a regular source of care, and four times more likely to have necessary care delayed. It is important to a child's

development that they receive appropriate medical care. If a child develops a chronic health problem, studies have shown that it can affect that child's health and well being for decades to come and children, especially young children, should receive annual doctor visits to monitor their growth and development. Children without health care coverage are also more likely to be missing some of their immunizations.

For these reasons, the Medical Care Advisory Committee strongly supports the Denali KidCare program and urges the Legislature to maintain the current eligibility for the program.

Sincerely,



Patti Hong, RN  
Chair

*Medical Care Advisory Committee members:*

David Alexander, MD, Anchorage  
Sara "Luvada" Bush, Fairbanks  
Jim Culley, Valdez  
Mario Darlin, Juneau  
Kathy Dillard, Kodiak  
Gary Givens, R.Ph., Anchorage  
Angela Gonzalez, Anchorage

Patti Hong, RN, Anchorage  
Greg Johnson, DDS, Fairbanks  
Brenda Knapp, Juneau  
Marilyn Mories, Palmer  
Karen Pearson, Juneau

cc: House Health, Education, and Social Services Committee, Alaska State  
Legislature  
Governor Tony Knowles  
Commissioner Jay Livey

COVENANT HOUSE  ALASKA

Speaker: Anthony M. Lombardo  
Director of Advocacy

Date: 02-14-2002

Re: Testimony on HB 367, House HES committee

Covenant House Alaska has secured information from the administrators of Denali Kidcare regarding the specific effect of a rollback of the coverage level from 200% to 150% of poverty level as proposed ON OUR SPECIFIC CLIENT POPULATION, NAMELY TEENS 13-19 YEARS OLD.

The information received indicates that 3316 teenagers statewide will lose their coverage if the rollback is introduced. Covenant House Alaska champions better health and living conditions for all teens, but especially for homeless and at risk kids. Removing health coverage availability from *uninsured, working* single parent and moderately low income families will do nothing to help our kids in Alaska and will only worsen the situation of the kids at Covenant House. For this reason alone, Covenant House Alaska opposes the rollback.

In addition, there has been a lot of discussion regarding the math of this program. I understand the state statistics to be that we pay 5 million dollars of state funds to receive 12 million dollars of federal funds.

Apparently, those funds cover 26,935 enrollees of which about (40%)10,457 are Alaska Natives. We are reimbursed for their participation 100% and the Native Health Community apparently derives other benefits by participating in the program.

I may NOT understand the math, But I think THAT MEANS APPROXIMATELY 40% OF OUR 5 MILLION DOLLARS COMES BACK TO THE STATE, DUE TO THE NUMBER OF ALASKA NATIVE PARTICIPANTS.

SO THEN, IT SEEMS WE ARE REALLY ONLY SPENDING ABOUT 3 MILLION DOLLARS TO GET 12 MILLION DOLLARS OF FEDERAL INCOME.

THAT'S A 4X RETURN ON OUR DOLLAR IN CAPITAL, available for health care in this state. THAT'S QUITE AN ASSET. I wish I could find a mutual fund that would do that. AND WE ARE INSURING 26935 ALASKANS. Not exactly your wasteful government program.

We believe dis-investing in such a successful asset is a bad idea. And personally, if you would like to dispose of such an income generating asset, I'd like to bid at the auction.

Thank you.



**ALASKA CHAPTER**

## NATIONAL ASSOCIATION OF SOCIAL WORKERS ALASKA CHAPTER

4161 Patterson Circle Anchorage, Alaska 99504-4680  
907-332-NASW(6279) 1-800-478-NASW(6279) 907/332-6270 (fax)  
e-mail: [naswak@alaska.net](mailto:naswak@alaska.net) [www.naswak.org](http://www.naswak.org)

*The National Association of Social Workers is the world's largest organization of social workers, with 155,000 members including over 500 members in Alaska. NASW is committed to the concept of social justice and will advocate for the well being of individuals, families and communities in Alaska. NASW supports the vital role of government in providing for basic human needs and will promote policies that empower people to live more humane, productive, and independent lives. The Alaska Chapter of NASW is concerned about a range of issues that affect the quality of life for all Alaskans and the ability of social workers to provide quality services.*

### **HB 367 "Medical Assistance Program Coverage"**

Chairman Dyson, members of the Committee, thank you for the opportunity to address you today on HB 367. My name is Sarah Lewis and I am a member of the Social Action Committee of the National Association of Social Workers Alaska Chapter. The NASW Alaska Chapter strongly opposes HB 367 and its impact on reducing access to health care for children and pregnant women currently eligible for the Denali KidCare Program.

NASW is a membership organization representing over 500 professional social workers in Alaska. Each day our members serve children and pregnant women who directly benefit from the health care services they can access through Denali KidCare. Health care insurance is vital to the wellbeing of Alaska's children, which is why Denali KidCare has brought such a positive impact to our children since its inception in 1999.

Pregnant women enrolled in Denali KidCare are eligible to receive prenatal care and give their future children a healthy start in life. Children with Denali KidCare coverage are more likely to receive well-baby and well-child care, immunizations and will have health problems identified and treated early. These are all critical cost savings for all tax payers. At \$522 per child for the state's contribution, Alaska is able to match federal grant funds and to provide eligible children and pregnant women critical care health care services – a WIN-WIN for Alaska.

HB 367 proposes a reduction in the eligibility to 150% of the federal poverty level, directly impacting working families in Alaska who are striving to provide the best for their kids -- yet who work in jobs with no health care benefits for their families. If HB 367 passes, 3,821 children and 722 pregnant women will lose their health care coverage. When uninsured children and pregnant women's health needs are not provided, we all pay -- for more expensive care in hospital emergency rooms and clinics, for treatment of chronic illnesses, as well as the long terms costs of infants born with low birth weights, poor health outcomes and intensive care needs.

HB 367 is heralded as a cost savings to Alaskans, yet the \$5 million saved today results in giving up \$11.9 million in federal funds and compromising the health of our children. Short sighted budget cuts like this are ineffective policy, especially when we need long term fiscal planning and responsible investment in our future -- Alaska's children. On behalf of five hundred NASW Alaska Chapter members, I urge you to table HB 367.

DAVID G. ALEXANDER, M.D.  
3340 PROVIDENCE DRIVE - SUITE 466  
ANCHORAGE, ALASKA 99508-4684

PHONE (907) 562-2423

### Testimony on HB 367

I'm a pediatrician in Anchorage and I am testifying for myself and, with their concurrence, for the Anchorage pediatric community. ~~(attached is a letter from Dr. Jeff Demain, the Chair of Pediatrics at Providence Hospital)~~ *(Has already been sent)*

I'm also testifying on behalf of the Alaska Medical Care Advisory Committee. The MCAC is your committee that meets for two days four times a year to discuss Medicaid issues. We talk with a vast panorama of providers and recipients of Medicaid services. (attached is a letter from the MCAC written by it's Chair, Patty Hong, RN)

No one in any group wants to waste money. But everyone in the provider section as well as in the recipient section feels the state is absolutely getting its monies worth

Right now the folks who are in entry level jobs, whether they are getting off welfare or coming out of school, have that health safety net for their children, both born and unborn. Most of them have places of employment that cannot afford to offer any significant family health insurance. If the eligibility threshold for Medicaid were to be cut from 200% to 150% their children would probably have to go uninsured.

The state government would have about \$5 million more in it's coffers, but the people of the state would have \$11 or \$12 million less of federal money. (Please don't hold me to the exact numbers, but the concept is right)

If there were really sick children in the family, or if the mother were to be pregnant, they would have to quit working to obtain basic Medicaid services, else the children, born and unborn, would surely suffer.

If, as would most often be the case, the children were basically healthy the parents could continue to work in the hopes of getting a job with insurance. Preventive care would be minimized and if the children became ill those parents would delay medical care, because there would be no money. If the child became more ill they would go to the emergency room where they know they can get free care. (The federal law says so!) But there is no free care, and emergency care is very expensive. The medical community will pick up the tab. And like any good business they will try their best to spread those losses amongst those whose bills will now be larger than they should have been. And there will already be that \$11 million of federal money that will be missing so there is less money to go around. Their Health insurance, if they have it, will cost more, and the coverage will be less inclusive.

Basically, the program now provides reasonable coverage to a group of people who need it. Some are the children who don't vote yet, but who will clearly be the biggest losers

because their care will now be minimized and will lose its continuity. Some are adult women trying to get their collective feet on the ground who require obstetrical care.

Cutting this safety net could drive some of them back onto welfare, or into despair, or into divorce. At the very least it will further marginalize these families and certainly decrease their access to quality medical care.

For humanitarian reasons, for financial reasons, for common sense reasons, I urge you to vote NO on HB 367.

Thank you.

A handwritten signature in cursive script that reads "David B. Alexander" followed by a stylized monogram or initials.

# STATE OF ALASKA

## DEPARTMENT OF HEALTH & SOCIAL SERVICES

### MEDICAL CARE ADVISORY COMMITTEE

TONY KNOWLES, GOVERNOR

P.O. BOX 110660  
JUNEAU, ALASKA 99811-0660  
PHONE: (907) 465-3355  
FAX: (907) 465-2204

February 12, 2002

The Honorable Fred Dyson  
Alaska State Legislature  
Capitol Room 104  
Juneau, AK 99801

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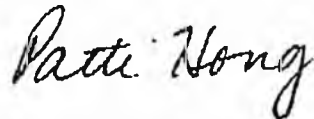
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development that they receive appropriate medical care. If a child develops a chronic health problem, studies have shown that it can affect that child's health and well being for decades to come and children, especially young children, should receive annual doctor visits to monitor their growth and development. Children without health care coverage are also more likely to be missing some of their immunizations.

For these reasons, the Medical Care Advisory Committee strongly supports the Denali KidCare program and urges the Legislature to maintain the current eligibility for the program.

Sincerely,



Patti Hong, RN  
Chair

*Medical Care Advisory Committee members:*

David Alexander, MD, Anchorage  
Sam "Lavada" Bush, Fairbanks  
Jim Culley, Valdez  
Marie Darlin, Juneau  
Kathy Dillard, Kodiak  
Gary Givens, R.Ph., Anchorage  
Angela Gonzalez, Anchorage

Patti Hong, RN, Anchorage  
Greg Johnson, DDS, Fairbanks  
Brenda Knapp, Juneau  
Marilyn Mories, Palmer  
Karen Pearson, Juneau

cc: House Health, Education, and Social Services Committee, Alaska State  
Legislature  
Governor Tony Knowles  
Commissioner Jay Livcy

**Geri Heiner**  
7300 Glade Place  
Anchorage, AK 99518-2876

(907) 344-6581

February 12, 2002

Fred Dyson  
10928 Eagle River Rd., Suite 148  
Eagle River, AK 99577

**RE: HB 367 Hearing**

I am a single parent with four children (three at home), work full time and attend the University of Alaska half time in order to secure a future for my children and myself. Even with full time employment, I still struggle financially and need some temporary support until I have completed my education.

Denali KidCare has been a wonderful benefit for our family. I no longer have to decide if they can make it until Monday because I cannot afford to take them to a doctor gambling their health over money. It has made access to medical treatment more available by reducing the financial burden that is often expected at time of treatment. My children no longer have to ask, "Can we afford glasses or medicine."

Denali KidCare has decreased the stress level in our home by affording access to needed medial care for my children.

Sincerely,

*Geri Heiner*

Geri Heiner  
UAA Student/Mother



# Alaska State Legislature

Please enter into the record my testimony to the Hess  
 committee name  
 committee on HB 367, dated Feb 12, 2002  
 bill/subject

I am opposed to HB 367 because pregnant women need help. As a PTA member of Fairview Christiany School. I can tell who has and who has not had proper prenatal care. Fetuses need proper nutrition and regular prenatal doctors inspections. If we help young mothers, children and babies in the womb we will save money in the long run. We need to prevent fetal alcohol syndrome and make nutrition. Mothers and children need to eat right to prevent spine, intestinal and nerve disorders. Medical coverage early to prevent problems for 122 pregnant or more women. Please we we have a federal match. I do not want to have hospital rates raised due to unpaid emergency visits due to budget cuts.

Signed: Regina Mantufel  
 Testifier

Regina's  
 Representing (Optional)  
1100 E 10th Ave. Anch AK 99501  
 Address

907-276-4904  
 Phone No.



# Alaska State Legislature

Please enter into the record my testimony to the House HESS  
committee name

committee on HB 367, dated February 12, 2002  
bill/subject

I am very concerned about the passage of this bill as my family falls between the 150% - 200% poverty. Without this coverage for my daughters, we would be literally homeless. I think it is important I do my best to provide for my girls but without insurance it would not be possible. Taking care of a small medical problem before it escalated into an emergency room visit has been very helpful. I am unable to work more hours at this time and could not pay for independent insurance as my employer does not offer it. Working as an advocate for families that have an individual with a disability, has also opened my eyes. Many families would be more likely to go back to A/TAP and other state assisted programs. This would ultimately cost the state more money and make families more dependent on the state.

Signed: Debra A. Huswick

Testifier

Parent

Representing (Optional)

200 W 34<sup>th</sup> #1172 Anch AK 99503

Address

907-338-0049

Phone No.

Sara J. Jackson  
St. Francis House  
3710 E. 20<sup>th</sup> Avenue Anchorage AK 99508  
222-7323 sjackson@css.ak.org

February 12, 2002

Representative Dyson and HESS Committee:

I am here today to speak both in a professional and a personal capacity. I am the manager of St. Francis House, a program of Catholic Social Services, that delivers emergency services to economically struggling families; and, I am also the grandmother of a bubbly, generous 13 year old girl, who will no longer have health insurance if this bill passes into law. I have worked in this community for over 30 years, most of that time for non-profit, human service oriented programs. I am guilty of choosing mission over financial reward. For better or for worse my daughter has chosen the same path and holds a key position in a well known non-profit agency that provides a vital public service in Anchorage. She is a single mother, who works very hard and brings home \$1,944 each month. Out of that she must pay an \$800 mortgage, \$200 in utility payments, \$200 car payment, \$80 car insurance, vehicle gas and maintenance, food, clothing, school supplies, and personal items, for herself and her daughter, and medical and prescription co-payments. There is no conceivable way that she can afford the \$450 dependent premium to cover her child on her agency's insurance plan. So, if HB 367 should pass, my granddaughter will once again be in the position that she has been in most of her life: balanced precariously on the tightrope of existence with no safety net beneath her and with little or no preventative health care.

I appeal to you on behalf of my own family and the families of many of my colleagues, as well as many of those families that we serve in our programs. Please do not try to bolster the state budget by putting our children, our most precious resource, at risk.



TONY KNOWLES, GOVERNOR  
State of Alaska

**GOVERNOR'S COUNCIL ON DISABILITIES AND SPECIAL EDUCATION**

P.O. Box 240249 • Anchorage, Alaska 99524-0249 • Phone: 907-269-8990 • Fax: 907-269-8995

HB 367

In addition to medical costs, families of individuals with disabilities often face higher than normal costs which should be taken into consideration when establishing their eligibility for programs such as Denali Kid Care.

- ◆ Many individuals have special dietary requirements that result in increased food costs. Some disabilities limit the body's ability to absorb certain vitamins and minerals, requiring individual with these disabilities to have a diet rich in these nutrients. Some people have adverse reactions to the more inexpensive sources of important nutrients. In extreme cases, gastrointestinal conditions and the side effects of medications may require individuals to limit their food intake to expensive liquid diets.
- ◆ Individuals with disabilities may require special clothing if their bodies do not fit into standard clothing; this clothing may only be available through specialized firms or might have to be custom made. In either case such clothing costs more than clothing available "off the rack."
- ◆ Families may incur higher than average utility expenses if a family member relies on electric powered devices such as a respirator. Individual who are sensitive to small temperature fluctuations may incur higher than normal costs for heating and cooling their homes.
- ◆ Child care for a child with a disability may be very expensive for the family. Child care providers may charge higher rates to care for a child with a disability.

All of these items can add up to increased costs to the family of a child with a disability. Such costs need to be taken into consideration when establishing the income threshold for a program such as Denali Kid Care. While 200 percent of the federal poverty level may seem like sufficient income on paper, in reality the additional costs which the family must pay may be placing families well under the poverty level.

According to a State Health Care Briefing Book developed by the National Center For Policy Analysis, the cost for prenatal care can be as low as a couple of hundred dollars while the average cost of providing medical care to a premature baby is almost \$20,000 more than the cost of a normal birth. This same briefing points out that preventive care is not cost effective if provided to the *entire population* but is cost effective if targeted to those who cannot access such services without a program such as Denali Kid Care.

The 1997 Annual Report of the North Coast Health Ministry based in Lakewood Ohio states that even when families making 200 percent of the federal poverty level have insurance their coverage is for catastrophic events only. The report further states that it is the experience of the North Coast Health Ministry that many patients do not seek out preventive care as the cost is too prohibitive, and when people don't have coverage (either private insurance or Medicaid) they are forced to utilize emergency room services which are the most expensive form of health care.

We must all work together to find reasonable and effective ways to manage Medicaid costs, but not by cutting programs when such cuts will force children and families into high cost emergency services. Preventive and ongoing services such as Denali Kid Care must be provided for those families with the greatest need and least access to private insurance.

## Alaska Women's & Children's Clinic

11823 Old Glenn Highway, Suite 110

Eagle River, AK 99577

Phone (907) 696-2273 Fax (907) 694-8446

My name is Cynthia Ebelacker. I am past president and current board member of the Alaska Nurse Practitioner Association. There are over 425 nurse practitioners in Alaska. Altogether we care for thousands of Denali Kid Care patients. *I am also here representing the Alaska nurses' Association*

I also own a small private clinic in Eagle River. Sixty five percent of my pediatric patients and pregnant women are able to see me because they have Denali Kid Care. Since the Kid Care insurance came on board in March of 1999, I have seen small miracles happen every day.

We could just look at the practical side of this extremely affordable health insurance for children.

- It doesn't seem logical to lose \$11.9 million federal aid dollars to save a mere \$5 million dollars of state dollars while denying badly needed healthcare to our children.
- In a state with the dubious honor of leading the nation with its infant and maternal mortality rates, do we really want to deny prenatal care to over 700 women? The cost of healthcare for very small premature infants is hundreds of thousands of dollars for each baby. You would do well to look at the rate of premature births among lower income women who qualified for Denali Kid Care over the last 3 years. I think you will find a big decrease in numbers of preemie births from the rate prior to DKC making prenatal care available to hundreds of women.
- Nearly a third of the Denali dollars have been spent on mental health care for children. It makes sense if you consider that children whose health and development are often neglected at a critical early stage, will eventually require more of our health care dollars to fix problems that could have been prevented with early detection and treatment.

But enough of strictly pragmatic evidence that Denali has and will continue to be cost effective healthcare due to its extremely preventative nature. You have those figures in front of you.

We should put some faces on the small miracles that Denali has brought us. During the special well-baby & well-child exams called Early Periodic Screening & Developmental Testing DKC children get very comprehensive visits with a medical provider. Often it's the first preventative care visit they've ever had. As a result, many serious health care problems have been discovered.

In my own practice the results have been amazing and when you multiply the similar experiences by the number of medical practitioners seeing Denali patients – we have had a great impact on health care by Denali Kid Care.

Take 7yr old Darci, a very advanced Down's Syndrome child – she is one of the highest functioning Down's kids that I've ever seen. Her language and cognitive and social skills are almost normal for her age level. But 3 years ago this wasn't the case. When she saw me for a

well-child check-up at the age of 4, she wasn't talking, she had no energy and seemed very slow and severely retarded. At this visit I noticed an unusual heart murmur and I sent her to a cardiologist right away. Mom could afford to see him because the child had Denali Kid Care. Within a week she had life changing cardiac surgery to repair a serious narrowing in her heart vessels and within a few months she also got the ear tube surgery she needed to stop her chronic ear infections – and today she is a productive young member of society instead of a drain on our state's resources.

Then there's 9 year old William, who was sent to me for a physical from school because he was doing so badly – not focusing, exhibiting acting out behaviors, looking neglected and seeming terribly small for his age. I performed an in-depth exam that included hearing testing, blood testing for anemia and urine testing. I discovered that he had no ear drums; they had ruptured repeatedly as a small child when dad couldn't afford to bring him for medical care. He was also suffering from signs of malnutrition. His single parent dad was almost deaf himself because of the lack of healthcare he received for his bad ears as a child. Denali Kid Care helped William get his eardrums repaired and he got medicine to treat his anemia. Our clinic rather adopted his family and this year we helped the family get food and toys and household items that were donated from around town. His teachers have called me to praise his improvements in language and demeanor. He will be a much better adjusted member of our future society and he has Denali Kid Care to thank for that.

These are just two of the hundreds of stories I could tell. I have sent dozens of children on consults for ear surgery, tonsillectomies, hernia repairs, serious developmental delays in speech and motor skills, orthopedic surgeries, overwhelming tooth decay and abscesses and severe mental health disturbances.

I could provide you with evidence of the positive outcomes this care has made possible. I keep very detailed records. The bottom line is that rather than becoming a continual drain on our resources these children actually get better and they require less care down the way.

The small investment the state of Alaska makes to provide health care access has had unseen benefits and has improved the lives of whole families because their children's many needs are identified and met.

Young pregnant women who previously received little preventative care during the critical early prenatal stages, now are identified with their first positive pregnancy test, we get them right on the program and closely follow them to a safe delivery of a healthy infant-then we closely monitor that infant with well child exams. We need to look at the mortality rates for mothers and infants in Anchorage and local communities since Denali Kid Care started.

Before you decide to save a few dollars in the big scheme of things, have you done your homework to see what a difference Denali insurance has made in the lives of thousands of Alaskans? We can take pride in the program Alaska has developed-it's far superior to those in many other states.

Denali Kid Care is an investment in our future by assuring that today's children become tomorrow's healthy, productive citizens. It equalizes the healthcare field so that all of Alaska's children may lead healthier lives-not just the children of the privileged few. Raising children today without adequate health care insurance should not be a source of pride-nor should it be the standard that Alaskan children are held to. None of our children should have to suffer physical or emotional pain due to a lack of affordable health care insurance.



To: Health Education & Social Services Committee  
From: ~~Karen Fredrickson~~ Karen Fredrickson - Contract Health/Patient Access Manager - SEARHC  
Fax: 907-465-4587

Good afternoon, Chairman Dyson and members of the Health Education & Social Services Committee.

My name is Karen Fredrickson, and I am a representative from the SouthEast Alaska Regional Health Consortium. My organization is a consortium of 18 tribes throughout Southeast Alaska. We compact with the federal government to provide Indian Health Services to the Native beneficiaries in Southeast Alaska. I am here to testify against making any changes to HB367.

We are all aware of the many benefits that Denali KidCare offers to our children and pregnant mothers in Alaska. The birth rate of American Indians and Alaska Natives is 63 percent greater, with infant mortality 22 percent higher than the overall U.S. rate. (Source: Indian Health "Trends in Indian Health" 1999-2000) Yet, despite these serious health care needs the percentage of uninsured Natives continues to remain much higher at 27.1 percent than that of most populations in the U.S. (Source: 1999 U.S. Census).

When Denali KidCare/S-CHIP first came on board we had 393 visits the first year which increased to 9,706 by the end of 2001.

The impact has been tremendous. DKC offers services that SEARHC does not provide. The main one being able to have pediatric dentists coming into our villages and provide quality dental care to our Alaskan children.

Testimony - LIO Office  
February 14, 2002 3:00 p.m.

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SEARHC beneficiaries enrolled under this program costs the State of Alaska NOTHING! The federal government matches this funding at the 100% rate for Native people covered by Denali KidCare and served at tribal facilities. As you are aware, one of the benefits for the State to develop its S-CHIP program was the federal match money.

It is a mistake to assume that Native people have all of their health needs covered as we are not fully funded by the Indian Health Service for our health care delivery system. SEARHC uses these Medicaid reimbursement funds to help supplement our Indian Health Service compact funds to expand and improve our current health care services.

SEARHC is shocked and surprised by our legislators for recommending any changes to such a vital program for our Alaska children as they are our future! It is important that we continue to provide a healthy future for them. It makes good fiscal sense to continue Denali KidCare and to ensure healthy Alaskan children and pregnant women.

Through Denali KidCare and its service to our Alaskan children, you get a "BIG BANG" for your buck. We are asking that you maintain Denali KidCare eligibility at its current level.

Thank you for your time to allow me to express our concerns.

cc: Frank Sutton, Vice President, Hospital Services

**Subject: Opposition of HB 367**

**Date:** Wed, 13 Feb 2002 17:48:55 -0800

**From:** "Karen Dieringer" <kdieringer@fairbanksnative.org>

**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>,  
<Representative\_Peggy\_Wilson@legis.state.ak.us>,  
<Representative\_John\_Coghill@legis.state.ak.us>,  
<Representative\_Gary\_Stevens@legis.state.ak.us>,  
<Representative\_Vic\_Kohring@legis.state.ak.us>

I object to House Bill 367. I feel the SOA program should continue providing health insurance coverage for those children and pregnant mothers in need.

Karen Dieringer

201 First Avenue, Suite 200

Fairbanks, AK 99701

**Subject: HB 367**

**Date: Thu, 14 Feb 2002 10:29:45 -0900**

**From: Kathie Elmore <kelmore@gci.net>**

**Organization: The Elmore Clan**

**To: Representative\_Fred\_Dyson@legis.state.ak.us**

Representative Fred Dyson

Dear Rep. Dyson

I am writing you to encourage you NOT to vote for HB367

I am an Employee of Parents Inc, and I also do surrogate work for our Northstar School District, here in Fairbanks. I work with many families who just make the cut off now and struggle to get the Medical care that they need for their children a lot of them have children with Disabilities. How can we think about raising the proverty level when the children are not getting the Medical care needs met now? Please, I beg of you not to vote for this bill

Thank you for taking the time to consider not voting for HB367

Kathie Elmore

Regional Coordinator for the Northern Region

---

Kathie C. Elmore <kelmore@gci.net>

**Subject: HB 367****Date:** Thu, 14 Feb 2002 10:16:53 -0900**From:** "Nancy Bale" <nancybale@gci.net>**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>**CC:** <Representative\_Peggy\_Wilson@legis.state.ak.us>, <Representative\_John\_Coghill@legis.state.ak.us>, <Representative\_Gary\_Stevens@legis.state.ak.us>, <Representative\_Vic\_Kohring@legis.state.ak.us>, <Representative\_Sharon\_Cissna@legis.state.ak.us>, <Representative\_Reggie\_Joule@legis.state.ak.us>

Dear Representative Dyson,

As a nurse and employee in a program that serves at-risk youth, I would like to take this opportunity to comment on HB 367, a bill currently under consideration in your committee. This bill would lower income eligibility for families to participate in the Denali Kidcare Program. I have worked with teenagers since 1996, before the days of Denali Kidcare. At that time, we had only Medicaid for insuring our adolescents. When Denali Kidcare arrived on the scene, the clerical difficulties associated with Medicaid disappeared, and the adolescents covered under DKC were able to receive needed care.

While it is always possible to point to inequities in any program, my experience with Denali Kidcare has been that it is a positive, cost effective, and proactive way to ensure health care for vulnerable child populations.

Keep in mind that Denali Kidcare is NOT welfare, it is health insurance. No one is getting free monthly income from this program. It is, instead, a program that provides OPPORTUNITY to young people. Many of the teenagers whom I have cared for had received little or no access to dentistry before Kidcare, for example.

When Alaskan kids are 19, they must enter the Medicaid system in order to continue their health benefits. In that system, income guidelines are very restrictive. I think that the Denali Kidcare Program as it is, time-limited to serve youth, proactive in its attitude, and really very simple and cost effective, is a jewel in the State of Alaska's budget.

Please cut costs elsewhere. The benefits of Denali Kidcare are too numerous to ignore. If you have any questions, please feel free to contact me at (907) 277-3825

Nancy Bale, RN

**Subject: HB 367**

**Date: Wed, 13 Feb 2002 14:24:18 -0800 (PST)**

**From: Ruth Lister <ruth\_lister@yahoo.com>**

**To: Representative\_Fred\_Dyson@legis.state.ak.us**

Representative Dyson,

I strongly appeal to you to stop HB 367. I knew it is not a bill that you would support, given your dedication to children in Alaska. For working families on low incomes, Denali kidcare is a lifesaver. The small saving to the state made by reducing the eligibility from 200 to 150% of poverty is far outweighed by the cost of families going on TANF and other state funded programs due to their inability to pay medical costs. Most families in this category are single parents in jobs that do not provide health insurance, and they will in time earn more and get out of the program. Healthy children do well in school and in life.

thank you, Ruth Lister

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**Subject: HB 367**

**Date: Wed, 13 Feb 2002 10:57:23 -0900**

**From: Janice Tower <jtower@alaska.com>**

**To: Representative\_Fred\_Dyson@legis.state.ak.us**

Dear Representative Dyson,

I listened to yesterday's testimony on HB 367 and was quite amazed by the level of misunderstanding that certain Committee members have about the Denali KidCare program and other health programs that are available to children.

Considering that the program is funded by a lion's share of federal dollars, the benefits of the small amount of State funds that leverage this extremely worthwhile program are self-evident. Why certain Committee members cannot see this is a mystery to me. Reducing the eligibility level from 200% to 150% FPL would be analogous to telling DOT that we're going to trim back highway projects and send back all that federal transportation money because we have a billion dollar budget shortfall.

With Denali KidCare, hundreds of fishermen's children can now have access to a most basic level of health care that will keep their kids healthy and avoid costly medical bills that result from poor access to primary care. Small business owners and their employees can sleep at night knowing that when their kids become ill, they can afford to go to the doctor. These people are not slackers living off the public dole. One comment was made that people were leaving their current health plans in droves simply to get "free health care" for their kids and save a buck for themselves. Reasonable parents would not expose their children to a 12-month interim period in which their children would go uncovered while waiting to qualify for the Denali KidCare program.

Lastly, I don't know who made the comment about there always being the WIC program! WIC feeds children. The program puts food in their stomachs so that they can grow healthy and their brains can fully develop. WIC is not a health care service.

I urge you to support Denali KidCare at its present 200% level. It's a program that makes intuitive sense, doesn't cost the state much, leverages a lot of federal money which our senators in Washington have lobbied hard for, and will not make one micron of a difference in balancing our state budget shortfall.

Thank you,

Janice Tower  
7645 Griffith Street  
Anchorage, AK 99507

**Subject:** HB367

**Date:** Wed, 13 Feb 2002 10:52:27 -0900

**From:** "Dan Ressler" <dressler@arc-anchorage.org>

**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>

I have heard the your committee has HB367. I think in our tight economic times that asking the Federal Government to keep \$11 Million doesn't seem prudent. Granted the \$5 Million portion is Chunk of Change, but to prevent \$17 Million of insurance to Children and Expectant Mothers for a savings of \$5 Million doesn't make fiscal sense.

Dan Ressler  
Business Office



State Of Alaska  
Legislative Affairs Agency  
Kenai LIO  
145 Main St Lp, Ste 217  
Kenai, AK 99611  
907-283-2030

Date: 2-13-02

Please accept the enclosed original(s) of written testimony for  
the HHS teleconference hearing that was  
scheduled on 2-12-02.

A copy of this testimony was transmitted to your committee via  
fax on 2-13-02 10:00am.

Thank You,

Mr. Byrne

# "Healthy Communities - Healthy People"

## "Healthy Communities - Healthy People"



### TESTIMONY – HB 367

TO: House HESS *AS*  
 FROM: Stan Steadman, Coordinator, Healthy Communities/  
 Healthy People- Soldotna; and Interim Executive Director,  
 Central Peninsula Health Centers, Inc.- Soldotna  
 RE: HB 367 – Urging Defeat  
 DATE: February 12, 2002

Healthy Communities/Healthy People (HC/HP), a network organized to improve the health of Central Kenai Peninsula citizens, has worked over the past several years to develop programs to offer youth opportunities for medical and dental health care. Central Peninsula Health Centers, Inc. (CPHC) is such a program, recently established through the efforts of HC/HP and in partnership with the U.S. Bureau of Primary Health Care to provide direct medical and dental services to under- and uninsured youth.

Children who do not received regular and adequate medical and dental services will undoubtedly cost society more in the long run than those who receive care. Although HB 367 appears to save money, it comes with a high longer-term price.

Of critical concern to HC/HP and CPHC is oral health. Dental decay is the most common childhood disease. This is a disease that is both preventable and treatable. Low income individuals suffer the worst oral health. According to the National Institute of Dental Craniofacial Research, "Uninsured children are 2.5 times less likely to receive dental care than insured children and are 3 times as likely to have dental needs."

Even with Denali Kid Care coverage, families face many barriers to accessing health care. By taking this needed funding away from our children we are placing them at an even higher risk of slipping through the cracks.

We should be focusing our efforts on how to have healthier children in our State not taking away basic care from those who need it most. I urge you to vote against HB 367.

BRIDGES - 145 Kasloff Street - Soldotna - Alaska - 99669 - Phone (907) 260-3800 - Fax (907) 262-8457

- OR -

Healthy Communities Healthy People - PO Box 1612 - Soldotna - Alaska - Phone (907) 260-2663 - Fax (907) 262-2663



# Alaska State Legislature

Please enter into the record my testimony to the House HESS  
committee name  
committee on HB 367, dated 2/12/02  
bill/subject

Signed: Margaret Volz  
Testifier  
4420 Bull Moose Drive  
Representing (Optional)  
Wasilla AK 99654  
Address  
(907) 357-5157  
Phone No.



THE CHILDREN'S PLACE

... a place to be heard.  
... a place to be helped.

February 12, 2002

TO: Legislative Information Office  
RE: House Bill No. 367

Fax # 376-6180

To Whom It May Concern:

I am writing this in opposition of HB 367 which would decrease the number of children and pregnant women from "working poor" families in receiving health benefits under the current Denali Kid Care. Although you may be temporarily saving money for the State at one level, the immediate losses will be in Federal funding and the long term effects will be much costlier throughout the health and educational fields in our state.

Working in the field of child abuse and neglect, the ramifications will also have deleterious effects. Child maltreatment is a significant risk factor for a whole host of medical and mental health ills, as well as social problems such as teen pregnancy, school failure, substance abuse, juvenile crime, and becoming a future abuser. One of the most frightening pieces of data we have collected at The Children's Place in Wasilla is that about 1/3 of the reported perpetrators are children themselves, under the age of 17. Early mental health intervention offers the only hope to halt the vicious cycle of abuse. One of the major barriers to mental health treatment both for the children who themselves who have been victims of physical and sexual abuse and young perpetrators is the cost. Nearly 60% of the families we deal with are covered under Medicaid or Denali KidCare.

As you look at the over 80% of men and women incarcerated in Alaska who were identified in a study a few years ago as victims of physical and sexual abuse, the question remains how will we, as residents of Alaska, be paying for reducing payments to women and children in poverty? Denali Kid Care is one of the brightest hopes we have had in improving the health outcomes for our children and we should not jeopardize federal dollars and more importantly their future by saving money in the short term.

Margaret Volz  
Program Director

Evelyn E. Conley  
Wasilla Resident

Tamika Eller  
Wasilla Resident

Bonni Anderson  
Wasilla Resident

Alicia M. Fields  
Palmer Resident

Home Address: 4420 Bull Moose Dr.  
Wasilla 99654

The Children's Place  
PO Box 871788  
Wasilla, Alaska 99687

(907) 357-5187  
Fax (907) 357-5189

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

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	Mr. Michael	JU	CARSON	
Group affiliation (if applicable)				Daytime telephone number
				272-1255
Mailing address				Zip code
609 F St				99501
Residence (street) address if different from mailing address				Zip code
Email address			Signature	Date
			<i>[Signature]</i>	2/17/02

**To:** Put a  in the appropriate box(es).

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**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB	Bill number		and check one:	<input checked="" type="checkbox"/> Support	
HB	367			<input type="checkbox"/> Oppose	<b>OR</b> enter a general Subject
				<input type="checkbox"/> Amend	(LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I	strongly	oppose	this	Bill	5
because	our	young	will	not	10
be	able	to	have	health	15
care	available				20
					25
					30
					35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <b>CHRIS</b>	M.I.	Last name <b>COOPER</b>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <b>707-1252</b>
Mailing address <b>609 + 22</b>				Zip code <b>99501</b>
Residence (street) address if different from mailing address				Zip code
Email address			Signature <b>Chris Cooper</b>	Date <b>2-17-02</b>

**To:** Put a  in the appropriate box(es).

	House members	Senate members																																																																																																																		
<p style="text-align: center;"><u>Committees</u></p> <p><b>H or S</b></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/></td><td>Community &amp; Regional Affairs (cra)</td></tr> <tr><td><input type="checkbox"/></td><td>Finance (fin)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Health, Ed., &amp; Social Services (hes)</td></tr> <tr><td><input type="checkbox"/></td><td>Judiciary (jud)</td></tr> <tr><td><input type="checkbox"/></td><td>Labor &amp; Commerce (l&amp;c)</td></tr> <tr><td><input type="checkbox"/></td><td>Resources (res)</td></tr> <tr><td><input type="checkbox"/></td><td>Rules (ris)</td></tr> <tr><td><input type="checkbox"/></td><td>State Affairs (sta)</td></tr> <tr><td><input type="checkbox"/></td><td>Transportation (tra)</td></tr> <tr><td><input type="checkbox"/></td><td>Other:</td></tr> <tr><td><input type="checkbox"/></td><td>Other:</td></tr> </table> <p style="text-align: center;"><u>Caucuses</u></p> <table style="width: 100%; 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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB <b>HB</b>	Bill number <b>367</b>	and check one:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<b>OR</b> enter a general Subject (LIO staff may modify):
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I	Strongly	oppose	this	5
Because	It	does	not	10
The	needs	of	poor	15
people	like	me		20
				25
				30
				35

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**From:** Please PRINT the information below. This form must be signed by the sender.

<small>Mr. / Ms. / Mrs.</small>	<small>First name</small> William	<small>M.I.</small> J.T.	<small>Last name</small> Timm	<small>Jr. / Sr. / III</small>
<small>Group affiliation (if applicable)</small>				<small>Daytime telephone number</small>
<small>Mailing address</small> 609 F Street				<small>Zip code</small> 99501
<small>Residence (street) address if different from mailing address</small>				<small>Zip code</small>
<small>Email address</small>		<small>Signature</small> <i>William Timm</i>		<small>Date</small> 2-17-02

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Kertula (ker)
<input type="checkbox"/>	Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input checked="" type="checkbox"/> Kohring (koh)
<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Kookesh (kos)
<input type="checkbox"/>	Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Kotl (kot)
<input type="checkbox"/>	Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghill (cog)	<input type="checkbox"/> Lancaster (lnc)
<input type="checkbox"/>	Resources (res)	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Masek (mas)
<input type="checkbox"/>	Rules (rts)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> McGuire (mcg)
<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Meyer (mey)
<input type="checkbox"/>	Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Morgan (mor)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Fate (fht)	<input type="checkbox"/> Moses (mos)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Foster (fos)	<input type="checkbox"/> Mulder (mul)
		<input type="checkbox"/> Green (gm)	<input type="checkbox"/> Murkowski (mur)
		<input type="checkbox"/> Guess (gua)	<input type="checkbox"/> Ogan (oga)
		<input type="checkbox"/> Hacro (hac)	<input type="checkbox"/> Porter (por)
		<input type="checkbox"/> Harris (har)	<input type="checkbox"/> Rokeberg (rok)
		<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Scalzi (scl)
		<input type="checkbox"/> Hudson (hud)	<input checked="" type="checkbox"/> Stevens (stv)
		<input type="checkbox"/> James (jam)	<input type="checkbox"/> Whitaker (whi)
		<input checked="" type="checkbox"/> Joule (jou)	<input type="checkbox"/> Williams (wil)
		<input type="checkbox"/> Kapsner (kap)	<input checked="" type="checkbox"/> Wilson (wis)

	Caucuses
<input checked="" type="checkbox"/>	Anchorage (age)
<input type="checkbox"/>	Bush (bus)
<input type="checkbox"/>	Fairbanks/Interior (int)
<input type="checkbox"/>	Matsu (mat)
<input type="checkbox"/>	Majority (mjr)
<input type="checkbox"/>	Minority (mnr)

**Subject:** Fill out the boxes below **OR** enter a Subject.

<small>(HB or SB)</small> HB	<small>Bill number</small> 367	<small>and check one:</small>	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<b>OR</b> enter a general Subject (LIO staff may modify):
			<input type="checkbox"/> Amend		

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I	strongly	oppose	this	bill	5
<del>because</del>	I	use	Denali	Kid	10
care	and	if	its	<del>discouraged</del>	15
ill	have	no	insurance		20
					25
					30
					35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr./Ms./Mrs.	First name <b>OPS</b>	M.I. <b>(W)</b>	Last name <b>WILLIAMS</b>	Jr./Sr./III <b>A</b>
Group affiliation (if applicable)				Daytime telephone number <b>272-1355</b>
Mailing address <b>609 F Street</b>				Zip code
Residence (street) address if different from mailing address <b>609 F Street</b>				Zip code <b>99501</b>
Email address <b>redgar1504@yahoo.com</b>		Signature <b>OTIS WILLIAMS</b>		Date

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members																																																																																																								
<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 10%; text-align: center;"><b>H o S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td>Community &amp; Regional Affairs (cra)</td></tr> <tr><td><input type="checkbox"/></td><td>Finance (fin)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Health, Ed., &amp; Social Services (hes)</td></tr> <tr><td><input type="checkbox"/></td><td>Judiciary (jud)</td></tr> <tr><td><input type="checkbox"/></td><td>Labor &amp; Commerce (l&amp;c)</td></tr> <tr><td><input type="checkbox"/></td><td>Resources (res)</td></tr> <tr><td><input type="checkbox"/></td><td>Rules (ris)</td></tr> <tr><td><input type="checkbox"/></td><td>State Affairs (sta)</td></tr> <tr><td><input type="checkbox"/></td><td>Transportation (tra)</td></tr> <tr><td><input type="checkbox"/></td><td>Other:</td></tr> <tr><td><input type="checkbox"/></td><td>Other:</td></tr> </table>	<b>H o S</b>		<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/>	Finance (fin)	<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/>	Judiciary (jud)	<input type="checkbox"/>	Labor & Commerce (l&c)	<input type="checkbox"/>	Resources (res)	<input type="checkbox"/>	Rules (ris)	<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/>	Transportation (tra)	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:	<table style="width: 100%; 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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB <b>HB</b>	Bill number <b>367</b>	and check one:	<input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Amend
			<b>OR</b> enter a general Subject (LIO staff may modify):		

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I	really	disagree	with them	5
cutting	of	denial	kid	10
because	there	are	some	15
(1/2)	aren't	so	fortunate	20
don't	have	enough	money	25
support	themselves			30
				35

## Public Opinion Message

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**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name	M.I.	Last name	Jr. / Sr. / III
Mr.	JEFF	R	Willsey	
Group affiliation (if applicable)			Daytime telephone number	
			272-1255	
Mailing address			Zip code	
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609 F St.			99501	
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			Jeff Willsey	2-17-01

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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB	Bill number		and check one:	<input checked="" type="checkbox"/> Support		<input type="checkbox"/> Oppose		<input type="checkbox"/> Amend	
HB	367				<b>OR</b>				enter a general Subject (LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I strongly oppose this bill because it	5
does not reflect <del>to</del> the needs of poor	10
young people like myself	15
	20
	25
	30
	35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please **PRINT** the information below. This form must be signed by the sender.

Mr. (Mr.) / Mrs.	First name <i>Kavca</i>	M.J.	Last name <i>Dalle</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <i>272-1255</i>
Mailing address <i>1009 I Street</i>				Zip code <i>99501</i>
Residence (street) address if different from mailing address				Zip code
Email address			Signature <i>Kavca/Dalle</i>	Date <i>2/17/02</i>

**To:** Put a  in the appropriate box(es).

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**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB <i>14B</i>	Bill number <i>367</i>	and check one:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<b>OR</b> enter a general Subject (LIO staff may modify):
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**Message:** Your **PRINTED** message cannot exceed 50 words or contain any vulgar language.

I	strongly	oppose	this	bill	5
because	it	does	not	reflect	10
the	needs	of	poor	younger	15
people	like	myself			20
					25
					30
					35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

<input checked="" type="checkbox"/> Mr. / Mrs.	First name <i>Josh</i>	M.I. <i>D</i>	Last name <i>Norris</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <i>272-1255</i>
Mailing address <i>609 F Street</i>				Zip code <i>94501</i>
Residence (street) address if different from mailing address				Zip code
Email address		Signature <i>Josh Norris</i>		Date <i>2/17/02</i>

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members																																																																																																																	
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<input type="checkbox"/>	Kott (kot)																																																																																																																		
<input type="checkbox"/>	Lancaster (lnc)																																																																																																																		
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<input type="checkbox"/>	Ogan (oga)																																																																																																																		
<input type="checkbox"/>	Porter (por)																																																																																																																		
<input type="checkbox"/>	Rokeberg (rok)																																																																																																																		
<input type="checkbox"/>	Scalzi (scl)																																																																																																																		
<input checked="" type="checkbox"/>	Stevens (stv)																																																																																																																		
<input type="checkbox"/>	Whitaker (whi)																																																																																																																		
<input type="checkbox"/>	Williams (wil)																																																																																																																		
<input checked="" type="checkbox"/>	Wilson (ws)																																																																																																																		

**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB <i>HB</i>	Bill number <i>367</i>	and check one:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<b>OR</b> enter a general Subject (LIO staff may modify):
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**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

<i>I'm</i>	<i>strongly</i>	<i>against</i>	<i>this</i>	5
<i>due</i>	<i>to</i>	<i>represent the</i>	<i>people fact</i>	10
<i>can't</i>	<i>afford</i>	<del><i>to</i></del>		15
				20
				25
				30
				35



## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <i>Athena</i>	M	Last name <i>Williams</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <i>272-1255</i>
Mailing address <i>1009 F St. Anchorage AK</i>				Zip code <i>99508</i>
Residence (street) address if different from mailing address				Zip code
Email address			Signature	Date

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Donley (don)
<input type="checkbox"/>	Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghill (cog)	<input type="checkbox"/> Ellis (ell)
<input type="checkbox"/>	Resources (res)	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Elton (elt)
<input type="checkbox"/>	Rules (ris)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> Green (gre)
<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Hafford (hal)
<input type="checkbox"/>	Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Hoffman (hof)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Fate (fnt)	<input type="checkbox"/> Kelly (kep)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Foster (fos)	<input type="checkbox"/> Leman (lem)
		<input type="checkbox"/> Green (gm)	<input type="checkbox"/> Lincoln (lin)
		<input type="checkbox"/> Guess (gue)	<input type="checkbox"/> Olson (ols)
		<input type="checkbox"/> Halcro (hac)	<input type="checkbox"/> Phillip (phi)
		<input type="checkbox"/> Harris (har)	<input type="checkbox"/> Stevens (ste)
		<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Taylor (tay)
		<input type="checkbox"/> Hudson (hud)	<input type="checkbox"/> Themault (thr)
		<input type="checkbox"/> James (jam)	<input type="checkbox"/> Torgerson (tor)
		<input checked="" type="checkbox"/> Joule (jou)	<input type="checkbox"/> Ward (war)
		<input type="checkbox"/> Kapsner (kap)	<input type="checkbox"/> Wilken (wk)
		<input type="checkbox"/> Kertula (ker)	
		<input checked="" type="checkbox"/> Kohring (koh)	
		<input type="checkbox"/> Kookesh (kos)	
		<input type="checkbox"/> Kott (kol)	
		<input type="checkbox"/> Lancaster (lnc)	
		<input type="checkbox"/> Masak (mas)	
		<input type="checkbox"/> McGuire (mcg)	
		<input type="checkbox"/> Meyer (mey)	
		<input type="checkbox"/> Morgan (mor)	
		<input type="checkbox"/> Moses (mos)	
		<input type="checkbox"/> Mukder (mul)	
		<input type="checkbox"/> Murkowski (mur)	
		<input type="checkbox"/> Ogan (oga)	
		<input type="checkbox"/> Porter (por)	
		<input type="checkbox"/> Rokeberg (rok)	
		<input type="checkbox"/> Scalzi (scl)	
		<input checked="" type="checkbox"/> Stevens (stv)	
		<input type="checkbox"/> Whitaker (whi)	
		<input type="checkbox"/> Williams (wil)	
		<input checked="" type="checkbox"/> Wilson (wis)	

**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB <i>HB</i>	Bill number <i>367</i>	and check one:	<input checked="" type="checkbox"/> Support		
			<input type="checkbox"/> Oppose	<b>OR</b>	enter a general Subject
			<input type="checkbox"/> Amend		(LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

<i>I</i>	<i>oppose</i>	<i>the</i>	<i>bill</i>	<i>due</i>	5
<i>to</i>	<i>the</i>	<i>fact</i>	<i>that</i>	<i>medical</i>	10
<i>bills</i>	<i>for</i>	<i>young</i>	<i>people</i>	<i>is</i>	15
<i>to</i>	<i>much</i>	<i>when</i>	<i>most</i>	<i>lack</i>	20
<i>financial</i>	<i>stability</i>	<i>to</i>	<i>live</i>	<i>on</i>	25
<i>there</i>	<i>own.</i>				30
					35



## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <u>Heinrich</u>	M.I.	Last name <u>Roide</u>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number
Mailing address <u>609 1<sup>st</sup> Anchorage, Alaska</u>				Zip code <u>99501</u>
Residence (street address if different from mailing address) <u>609 1<sup>st</sup> Anchorage, Alaska</u>				Zip code <u>99501</u>
Email address			Signature <i>Heinrich Roide</i>	Date <u>2/17/02</u>

**To:** Put a ✓ in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Donley (don)
<input type="checkbox"/>	Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghil (cog)	<input type="checkbox"/> Ellis (eli)
<input type="checkbox"/>	Resources (res)	<input type="checkbox"/> Crawford (cr)	<input type="checkbox"/> Ekron (ekt)
<input type="checkbox"/>	Rules (rts)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> Green (gre)
<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Halford (hal)
<input type="checkbox"/>	Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Hoffman (hof)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Fate (fnt)	<input type="checkbox"/> Kelly (kep)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Foster (fos)	<input type="checkbox"/> Leman (lem)
		<input type="checkbox"/> Green (gm)	<input type="checkbox"/> Lincoln (lin)
		<input type="checkbox"/> Guess (gue)	<input type="checkbox"/> Olson (ols)
		<input type="checkbox"/> Halcro (hac)	<input type="checkbox"/> Phillip (phi)
		<input type="checkbox"/> Harris (har)	<input type="checkbox"/> Stevens (ste)
		<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Taylor (tay)
		<input type="checkbox"/> Hudson (hud)	<input type="checkbox"/> Theriault (thr)
		<input type="checkbox"/> James (jam)	<input type="checkbox"/> Torgerson (tor)
		<input checked="" type="checkbox"/> Joule (jou)	<input type="checkbox"/> Ward (war)
		<input type="checkbox"/> Kapner (kap)	<input type="checkbox"/> Wilken (wk)
		<input type="checkbox"/> Kerttula (ker)	
		<input checked="" type="checkbox"/> Kohring (koh)	
		<input type="checkbox"/> Kookesh (kos)	
		<input type="checkbox"/> Kott (kot)	
		<input type="checkbox"/> Lancaster (lnc)	
		<input type="checkbox"/> Masek (mas)	
		<input type="checkbox"/> McGuire (mcg)	
		<input type="checkbox"/> Meyer (mey)	
		<input type="checkbox"/> Morgan (mor)	
		<input type="checkbox"/> Moses (mos)	
		<input type="checkbox"/> Mulder (mul)	
		<input type="checkbox"/> Murkowski (mur)	
		<input type="checkbox"/> Ogan (oga)	
		<input type="checkbox"/> Porter (por)	
		<input type="checkbox"/> Rokeberg (rok)	
		<input type="checkbox"/> Scalzi (scl)	
		<input checked="" type="checkbox"/> Stevens (stv)	
		<input type="checkbox"/> Whitaker (whl)	
		<input type="checkbox"/> Williams (wil)	
		<input checked="" type="checkbox"/> Wilson (wis)	

**Subject:** Fill out the boxes below OR enter a Subject.

<input checked="" type="checkbox"/> HB or SB	Bill number <u>367</u>	and check one:	<input checked="" type="checkbox"/> Support	
<input type="checkbox"/> HB		<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<b>OR</b> enter a general Subject (LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

I	think	that	Everyone	needs	5
Medical	Coverage	and	its	Not	10
Right	to	take	it	away	15
or	make	it	hard for anyone		20
to	sustain	because	Not	everyone	25
is	financially	stable.			30
					35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

<input checked="" type="radio"/> Mr. / Mrs.	First name <i>Josh</i>	M.I. <i>D</i>	Last name <i>Norris</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number
Mailing address <i>609 F Street</i>				Zip code <i>99501</i>
Residence (street) address if different from mailing address				Zip code
Email address			Signature <i>Josh Norris</i>	Date

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b> <input type="checkbox"/> Community & Regional Affairs (cra) <input type="checkbox"/> Finance (fin) <input checked="" type="checkbox"/> Health, Ed., & Social Services (hes) <input type="checkbox"/> Judiciary (jud) <input type="checkbox"/> Labor & Commerce (l&c) <input type="checkbox"/> Resources (res) <input type="checkbox"/> Rules (ris) <input type="checkbox"/> State Affairs (sta) <input type="checkbox"/> Transportation (tra) <input type="checkbox"/> Other: <input type="checkbox"/> Other:	<input type="checkbox"/> Berkowitz (ber) <input type="checkbox"/> Bunde (bun) <input type="checkbox"/> Chensault (che) <input checked="" type="checkbox"/> Cissna (cis) <input checked="" type="checkbox"/> Coghill (cog) <input type="checkbox"/> Crawford (crf) <input type="checkbox"/> Croft (cro) <input type="checkbox"/> Davies (dav) <input type="checkbox"/> Dyson (dys) <input type="checkbox"/> Fate (fht) <input type="checkbox"/> Foster (fos) <input type="checkbox"/> Green (gm) <input type="checkbox"/> Guess (gue) <input type="checkbox"/> Halcro (hac) <input type="checkbox"/> Harris (har) <input type="checkbox"/> Hayes (hay) <input type="checkbox"/> Hudson (hud) <input type="checkbox"/> James (jam) <input checked="" type="checkbox"/> Joule (jou) <input type="checkbox"/> Kapsner (kap)	<input type="checkbox"/> Kertula (kor) <input checked="" type="checkbox"/> Kohring (koh) <input type="checkbox"/> Kookesh (kos) <input type="checkbox"/> Kott (kot) <input type="checkbox"/> Lancaster (lnc) <input type="checkbox"/> Mask (mas) <input type="checkbox"/> McGuire (mcg) <input type="checkbox"/> Meyer (mey) <input type="checkbox"/> Morgan (mor) <input type="checkbox"/> Moses (mos) <input type="checkbox"/> Mulder (mul) <input type="checkbox"/> Murkowski (mur) <input type="checkbox"/> Ogan (oga) <input type="checkbox"/> Porter (por) <input type="checkbox"/> Rokeberg (rck) <input type="checkbox"/> Scatzi (scl) <input checked="" type="checkbox"/> Stevens (stv) <input type="checkbox"/> Whitaker (whi) <input type="checkbox"/> Williams (wil) <input checked="" type="checkbox"/> Wilson (wis)	<input type="checkbox"/> Austerman (aus) <input type="checkbox"/> Cowdery (coy) <input type="checkbox"/> Davis (dab) <input type="checkbox"/> Donley (dc:) <input type="checkbox"/> Ellis (eli) <input type="checkbox"/> Elton (elt) <input type="checkbox"/> Green (gre) <input type="checkbox"/> Halford (hal) <input type="checkbox"/> Hoffman (hof) <input type="checkbox"/> Kelly (kep) <input type="checkbox"/> Leman (lem) <input type="checkbox"/> Lincoln (lin) <input type="checkbox"/> Olson (ols) <input type="checkbox"/> Phillip (phi) <input type="checkbox"/> Stevens (ste) <input type="checkbox"/> Taylor (tay) <input type="checkbox"/> Threlkott (thr) <input type="checkbox"/> Torgerson (tor) <input type="checkbox"/> Ward (war) <input type="checkbox"/> Wilken (wk)
<b>Caucuses</b> <input checked="" type="checkbox"/> Anchorage (age) <input type="checkbox"/> Bush (bus) <input type="checkbox"/> Fairbanks/Interior (int) <input type="checkbox"/> Matsu (mat) <input type="checkbox"/> Majority (mjr) <input type="checkbox"/> Minority (mnr)			

**Subject:** Fill out the boxes below **OR** enter a Subject.

<input checked="" type="radio"/> HB <input type="radio"/> SB	Bill number <i>367</i>	and check one: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <b>OR</b> <input type="checkbox"/> Amend	enter a general Subject (LIO staff may modify):
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**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

				5
<i>I'm</i>	<i>strongly</i>	<i>against</i>	<i>this</i>	10
<i>because</i>	<i>some</i>	<i>people</i>	<i>can't</i>	15
<i>normal!</i>	<i>insurance.</i>			20
				25
				30
				35

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
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**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <b>RAY</b>	M.I. <b>E.</b>	Last name <b>ROLFE</b>	Jr. / Sr. / III
Group affiliation (if applicable)			(907) Daytime telephone number <b>272-1255</b>	
Mailing address <b>6009 F. ST. ANCHORAGE AK,</b>			Zip code <b>99501</b>	
Residence (street) address if different from mailing address			Zip code	
Email address		Signature <i>Kenneth E Rolfe</i>		Date <b>2.17.02</b>

**To:** Put a ✓ in the appropriate box(es).

Committees	House members	Senate members																																																																																																								
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">H or S</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td>Community &amp; Regional Affairs (cra)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Finance (fin)</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Health, Ed., &amp; Social Services (hes)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Judiciary (jud)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Labor &amp; Commerce (l&amp;c)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Resources (res)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Rules (rts)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>State Affairs (sta)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Transportation (tra)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other:</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other:</td> </tr> </table>	H or S		<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/>	Finance (fin)	<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/>	Judiciary (jud)	<input type="checkbox"/>	Labor & Commerce (l&c)	<input type="checkbox"/>	Resources (res)	<input type="checkbox"/>	Rules (rts)	<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/>	Transportation (tra)	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:	<table style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/></td><td>Berkowitz (ber)</td></tr> <tr><td><input type="checkbox"/></td><td>Bunde (bun)</td></tr> <tr><td><input type="checkbox"/></td><td>Chenuit (che)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Cissna (cis)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Coghill (cog)</td></tr> <tr><td><input type="checkbox"/></td><td>Crawford (crf)</td></tr> <tr><td><input type="checkbox"/></td><td>Croft (cro)</td></tr> <tr><td><input type="checkbox"/></td><td>Davies (dav)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Dyson (dys)</td></tr> <tr><td><input type="checkbox"/></td><td>Fate (fht)</td></tr> <tr><td><input type="checkbox"/></td><td>Foster (fos)</td></tr> <tr><td><input type="checkbox"/></td><td>Green (gm)</td></tr> <tr><td><input type="checkbox"/></td><td>Guess (gue)</td></tr> <tr><td><input type="checkbox"/></td><td>Halcro (hac)</td></tr> <tr><td><input type="checkbox"/></td><td>Harris (har)</td></tr> <tr><td><input type="checkbox"/></td><td>Hayes (hay)</td></tr> <tr><td><input type="checkbox"/></td><td>Hudson (hud)</td></tr> <tr><td><input type="checkbox"/></td><td>James (jam)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Joule (jou)</td></tr> <tr><td><input type="checkbox"/></td><td>Kapsner (kap)</td></tr> </table>	<input type="checkbox"/>	Berkowitz (ber)	<input type="checkbox"/>	Bunde (bun)	<input type="checkbox"/>	Chenuit (che)	<input checked="" type="checkbox"/>	Cissna (cis)	<input checked="" type="checkbox"/>	Coghill (cog)	<input type="checkbox"/>	Crawford (crf)	<input type="checkbox"/>	Croft (cro)	<input type="checkbox"/>	Davies (dav)	<input checked="" type="checkbox"/>	Dyson (dys)	<input type="checkbox"/>	Fate (fht)	<input type="checkbox"/>	Foster (fos)	<input type="checkbox"/>	Green (gm)	<input type="checkbox"/>	Guess (gue)	<input type="checkbox"/>	Halcro (hac)	<input type="checkbox"/>	Harris (har)	<input type="checkbox"/>	Hayes (hay)	<input type="checkbox"/>	Hudson (hud)	<input type="checkbox"/>	James (jam)	<input checked="" type="checkbox"/>	Joule (jou)	<input type="checkbox"/>	Kapsner (kap)	<table style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/></td><td>Kerttula (ker)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Kohring (koh)</td></tr> <tr><td><input type="checkbox"/></td><td>Kookesh (kos)</td></tr> <tr><td><input type="checkbox"/></td><td>Kott (kot)</td></tr> <tr><td><input type="checkbox"/></td><td>Lancaster (lnc)</td></tr> <tr><td><input type="checkbox"/></td><td>Masek (mas)</td></tr> <tr><td><input type="checkbox"/></td><td>McGuire (mcg)</td></tr> <tr><td><input type="checkbox"/></td><td>Meyer (may)</td></tr> <tr><td><input type="checkbox"/></td><td>Morgan (mor)</td></tr> <tr><td><input type="checkbox"/></td><td>Moses (mos)</td></tr> <tr><td><input type="checkbox"/></td><td>Mulder (mul)</td></tr> <tr><td><input type="checkbox"/></td><td>Murkowski (mur)</td></tr> <tr><td><input type="checkbox"/></td><td>Ogan (oga)</td></tr> <tr><td><input type="checkbox"/></td><td>Porter (por)</td></tr> <tr><td><input type="checkbox"/></td><td>Rokeberg (rok)</td></tr> <tr><td><input type="checkbox"/></td><td>Scalzi (scl)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Stevens (stv)</td></tr> <tr><td><input type="checkbox"/></td><td>Whitaker (whl)</td></tr> <tr><td><input type="checkbox"/></td><td>Williams (wil)</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Wilson (wls)</td></tr> </table>	<input type="checkbox"/>	Kerttula (ker)	<input checked="" type="checkbox"/>	Kohring (koh)	<input type="checkbox"/>	Kookesh (kos)	<input type="checkbox"/>	Kott (kot)	<input type="checkbox"/>	Lancaster (lnc)	<input type="checkbox"/>	Masek (mas)	<input type="checkbox"/>	McGuire (mcg)	<input type="checkbox"/>	Meyer (may)	<input type="checkbox"/>	Morgan (mor)	<input type="checkbox"/>	Moses (mos)	<input type="checkbox"/>	Mulder (mul)	<input type="checkbox"/>	Murkowski (mur)	<input type="checkbox"/>	Ogan (oga)	<input type="checkbox"/>	Porter (por)	<input type="checkbox"/>	Rokeberg (rok)	<input type="checkbox"/>	Scalzi (scl)	<input checked="" type="checkbox"/>	Stevens (stv)	<input type="checkbox"/>	Whitaker (whl)	<input type="checkbox"/>	Williams (wil)	<input checked="" type="checkbox"/>	Wilson (wls)
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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB <b>HB</b>	Bill number <b>367</b>	and check one: <input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<b>OR</b> enter a general Subject (LIO staff may modify):
		<input type="checkbox"/> Amend		

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

<b>I AM AGAINST THIS BILL BECAUSE IT LEAVES</b>	5
<b>PEOPLE WITHOUT INSURANCE.</b>	10
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## Public Opinion Message

**Contact your nearest Legislative Information Office to send your PGM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please **PRINT** the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <i>EDWARD</i>	M.I.	Last name <i>LAMBERT</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <i>272-1215</i>
Mailing address <i>609 F street</i>				Zip code
Residence (street) address (if different from mailing address)				Zip code
Email address			Signature <i>Edward Lambert</i>	Date <i>2/17/02</i>

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members																																																																																																						
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HB or SB <i>HB</i>	Bill number <i>167</i>	and check one:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<b>OR</b> enter a general Subject (LIO staff may modify):
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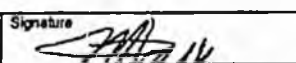
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<i>Opp</i>	<i>against</i>	<i>the</i>	<i>bill</i>	<i>because</i>	
<i>it</i>	<i>leaves</i>	<i>people</i>	<i>ineffective</i>	<i>insurance</i>	5
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## Public Opinion Message

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**From:** Please **PRINT** the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <b>MARCO</b>	M.I. <b>F</b>	Last name <b>Page</b>	Jr. / Sr. / II
Group affiliation (if applicable)				Daytime telephone number <b>272-1256</b>
Mailing address <b>509 F Street</b>				Zip code <b>99501</b>
Residence (street) address if different from mailing address <b>a</b>				Zip code
Email address			Signature 	Date

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members																																																																																																								
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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB <b>HB</b>	Bill number <b>367</b>	and check one:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend	<u>OR</u> enter a general Subject (LIO staff may modify):
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**Message:** Your **PRINTED** message cannot exceed 50 words or contain any vulgar language.

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<b>+</b>	<b>Strongly</b>	<b>Oppose</b>	<b>For</b>	<b>Ship</b>	
Bill	Decant	I would	have my	medicines	10
So I	can't	get my	medicines		15
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					30
					35

From Sue Brogan <sbrogan@ak.org>

Date Friday, February 15, 2002 2:46 pm

To kelsha@covhouse.alaska.com

Subject Glenda's email address

Here you go - good luck and let me know if there's anything else I can help you with. I enjoyed meeting you - have a great weekend. Sue B.

Glenda M Carino <~~glenda\_carino@gov.state.ak.us~~>

609 F St., Anchorage, AK 99501 Ph(907)272-1255 Fax(907)272-1466



# Fax

To: Committee members From: Youth of CHHA  
 Fax: (907) 272-1466 Pages: 16  
 Phone: (907) 272-1255 Date: 02/18/02  
 Re: \_\_\_\_\_ CC: \_\_\_\_\_

- Urgent     For Review     Please Comment     Please Reply     Please Recycle

\_\_\_\_\_



# Alaska State Legislature

Please enter into the record my testimony to the HOUSE HES  
committee name

Committee on HB 367, dated 2-14-02  
bill # / subject

SEE 1 PAGE ATTACHED

Signed: CHARLES DUARRE  
Testifier

SELF  
Representing (optional)

36525 BRADFORD RD STERLING, AK 99672  
Address

(907) 262-2115  
Phone number

ADDITIONAL COMMENTS ON HB367 FOR FORM TO BE FAXED TO THE MEMBERS OF  
the House Health, Education & Social Services Committee.

This Bill's efforts to reduce State expenditures are to be commended but why is it that the lowest on the totem pole are always the first to be the targets of reduction in services? The statistics developed by the Dept. of Health and Social Services and Representative Coghill's office are impressive but they do not bring to light the human suffering of those on the low end of the financial chain. This was brought out in the many personal accounts of the need for Denali Kid-Care benefits that were presented to the Committee on the teleconference of February 14, 2002. It is possible that there is some abuse of the program by individuals. By proper administration and supervision these can be reduce or eliminated.

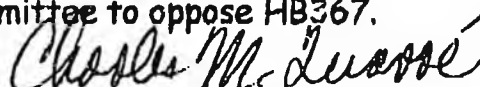
What is to happen to the number of children (3821) and pregnant women, carrying a living child, (722) who will lose coverage by enactment of HB367? Past experience has shown that they will wait until the last moment when their ailments are most serious to report to emergency services for treatment that will cost infinitely more that if taken care of in a timely fashion.

It is estimated that the State will save \$5 million by implementation of this bill but will lose \$11.9 million in federal aid. This does not seem to be a very advantageous arrangement.

Our youth are our treasure, and the future leaders of our State and Country. We are going at great lengths to insure they receive an adequate education. Insuring their health will make the education expenditures even more valuable.

It has been said that the measure of a civilized society and culture is the way in which they treat their most vulnerable members, certainly these children are vulnerable and in need of our compassion and aid.

I respectfully request the Committee to oppose HB367.

  
Charles M Quarre  
quar@alaska.com



## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <u>Dominique</u>	M.I.	Last name <u>GROUBER</u>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <u>272 12525</u>
Mailing address <u>609 Fst</u>				Zip code
Residence (street) address if different from mailing address <u>Anchorage, AK</u>				Zip code
Email address			Signature <u>Dominique GROUBER</u>	Date <u>2-18</u>

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Committees	House members	Senate members																																																																																																								
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**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB <u>HB</u>	Bill number <u>367</u>	and check one: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <u>OR</u> <input type="checkbox"/> Amend	enter a general Subject (LIO staff may modify):
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**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

<u>All</u>	<u>kid's</u>	<u>need</u>	<u>DEADLI</u>	
<u>care</u>			<u>Kid</u>	5
				10
				15
				20
				25
				30
				35

## Public Opinion Message

**Contact your nearest Legislative information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please **PRINT** the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <i>JUSTIN</i>	M.I. <i>J</i>	Last name <i>MAGNER</i>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <i>276-2820</i>
Mailing address <i>609 F ST ANCHORAGE A.K. 99508</i>				Zip code
Residence (street) address if different from mailing address				Zip code
Email address			Signature <i>Justin Magner</i>	Date <i>2/19/02</i>

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	<input type="checkbox"/> Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	<input type="checkbox"/> Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	<input type="checkbox"/> Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Donley (don)
<input type="checkbox"/>	<input type="checkbox"/> Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghill (cog)	<input type="checkbox"/> Ellis (eli)
<input type="checkbox"/>	<input type="checkbox"/> Resources (res)	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Elton (elt)
<input type="checkbox"/>	<input type="checkbox"/> Rules (ris)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> Green (gre)
<input type="checkbox"/>	<input type="checkbox"/> State Affairs (sta)	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Halford (hal)
<input type="checkbox"/>	<input type="checkbox"/> Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Hoffman (hof)
<input type="checkbox"/>	<input type="checkbox"/> Other:	<input type="checkbox"/> Fate (fnt)	<input type="checkbox"/> Kelly (kep)
<input type="checkbox"/>	<input type="checkbox"/> Other:	<input type="checkbox"/> Foster (fos)	<input type="checkbox"/> Leman (lem)
		<input type="checkbox"/> Green (gm)	<input type="checkbox"/> Lincoln (lin)
		<input type="checkbox"/> Guess (gue)	<input type="checkbox"/> Olson (ols)
		<input type="checkbox"/> Halcro (hac)	<input type="checkbox"/> Phillip (phi)
		<input type="checkbox"/> Harris (har)	<input type="checkbox"/> Stevens (ste)
		<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Taylor (tay)
		<input type="checkbox"/> Hudson (hud)	<input type="checkbox"/> Theriault (thr)
		<input type="checkbox"/> James (jam)	<input type="checkbox"/> Torgerson (tor)
		<input checked="" type="checkbox"/> Joule (jou)	<input type="checkbox"/> Ward (war)
		<input type="checkbox"/> Kapsner (kap)	<input type="checkbox"/> Wilken (wk)
		<input type="checkbox"/> Kerttula (ker)	
		<input checked="" type="checkbox"/> Kohring (koh)	
		<input type="checkbox"/> Kookesh (koo)	
		<input type="checkbox"/> Kott (kot)	
		<input type="checkbox"/> Lancaster (lnc)	
		<input type="checkbox"/> Masek (mas)	
		<input type="checkbox"/> McGulre (mcg)	
		<input type="checkbox"/> Meyer (mey)	
		<input type="checkbox"/> Morgan (mor)	
		<input type="checkbox"/> Moses (mos)	
		<input type="checkbox"/> Mulder (mul)	
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		<input type="checkbox"/> Ogan (oga)	
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		<input type="checkbox"/> Rokeberg (rok)	
		<input checked="" type="checkbox"/> Scalzi (scl)	
		<input type="checkbox"/> Stevens (stv)	
		<input type="checkbox"/> Whitaker (whi)	
		<input type="checkbox"/> Williams (wil)	
		<input checked="" type="checkbox"/> Wilson (wts)	

**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB	Bill number		Support			
<i>HB</i>	<i>367</i>	and check one:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>OR</b> enter a general Subject (LIO staff may modify):
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Message:** Your **PRINTED** message cannot exceed 50 words or contain any vulgar language.

<i>I</i>	<i>STRONGLY</i>	<i>OPPOSE</i>	<i>BECAUSE</i>	5
<i>PEOPLES</i>	<i>RIGHTS</i>	<i>TO</i>	<i>HAVE</i>	10
<i>aid</i>	<i>free</i>	<i>of</i>	<i>charge</i>	15
				20
				25
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## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name	M.I.	Last name	Jr. / Sr. / II
ms	Nichole	R	Encelewski	
Group affiliation (if applicable)				Daytime telephone number
				(907) 278-4343
Mailing address				Zip code
10141 E. 41st CT #4 Anchorage AK				99508
Residence (street) address if different from mailing address				Zip code
Same				
Email address			Signature	Date
Nikitabear7@yahoo.com				2-15-02

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
H or S			
<input type="checkbox"/>	<input type="checkbox"/> Community & Regional Affairs (cra)	<input checked="" type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	<input type="checkbox"/> Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	<input type="checkbox"/> Judiciary (jud)	<input checked="" type="checkbox"/> Cisna (cis)	<input type="checkbox"/> Donley (don)
<input type="checkbox"/>	<input type="checkbox"/> Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghil (cog)	<input type="checkbox"/> Ellis (ell)
<input type="checkbox"/>	<input type="checkbox"/> Resources (res)	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Elton (elt)
<input type="checkbox"/>	<input type="checkbox"/> Rules (rs)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> Green (gre)
<input type="checkbox"/>	<input type="checkbox"/> State Affairs (sta)	<input checked="" type="checkbox"/> Davies (dav)	<input type="checkbox"/> Halford (hal)
<input type="checkbox"/>	<input type="checkbox"/> Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Hoffman (hof)
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		<input type="checkbox"/> Hacro (hac)	<input type="checkbox"/> Phillip (phi)
<input checked="" type="checkbox"/>	<b>Caucuses</b>	<input type="checkbox"/> Harris (har)	<input type="checkbox"/> Stevens (ste)
<input type="checkbox"/>	<input checked="" type="checkbox"/> Anchorage (age)	<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Taylor (tay)
<input type="checkbox"/>	<input type="checkbox"/> Bush (bus)	<input type="checkbox"/> Hudson (hud)	<input type="checkbox"/> Thurlaut (thr)
<input type="checkbox"/>	<input type="checkbox"/> Fairbanks/Interior (int)	<input type="checkbox"/> James (jam)	<input type="checkbox"/> Torgerson (tor)
<input type="checkbox"/>	<input type="checkbox"/> Matau (mat)	<input type="checkbox"/> Joule (jou)	<input type="checkbox"/> Ward (war)
<input type="checkbox"/>	<input type="checkbox"/> Majority (mjr)	<input checked="" type="checkbox"/> Kapsner (kap)	<input type="checkbox"/> Witken (wik)
<input type="checkbox"/>	<input type="checkbox"/> Minority (mnr)		
		<input type="checkbox"/> Kertula (ker)	
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		<input type="checkbox"/> Ogan (oga)	
		<input type="checkbox"/> Porter (por)	
		<input type="checkbox"/> Rokeberg (rok)	
		<input checked="" type="checkbox"/> Scalzi (sci)	
		<input type="checkbox"/> Stevens (stv)	
		<input type="checkbox"/> Whitaker (whl)	
		<input type="checkbox"/> Williams (wil)	
		<input checked="" type="checkbox"/> Wilson (wis)	

**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB	Bill number		and check one:	<input checked="" type="checkbox"/> Support	
HB	367			<input type="checkbox"/> Oppose	OR enter a general Subject
				<input type="checkbox"/> Amend	(LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

IF	Not	For	Denali	Kidcair
I	would've	had	almost	or
over	\$100,000	in	medical	Bills
for	my	pregnancy	and	delivery
It	helped	me	out	immensely
				33

**Subject: HB 367**

**Date:** Fri, 15 Feb 2002 15:06:34 -0900

**From:** "Linda Milliken" <linda\_milliken@hotmail.com>

**To:** Representative\_Fred\_Dyson@legis.state.ak.us,  
Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us

Dear Representatives,

HB 367, "An Act relating to coverage of children and pregnant women under the medical assistance program" proves Representative Coghill's complete lack of consideration of women and children in need.

Approximately 4,000 children and 700 pregnant woman in Alaska will lose their Denali Kid Care health coverage if this legislation is passed.

It is not possible to make enough cuts in our state government to make up for the our current budget deficit. It is frightening to me that this legislation attempts to "save" the state money by eliminating health care benefits to Alaskan women and children who desparately need it.

We need a responsible fiscal plan that will bring in additional revenues for the state. It is time for the majority to muster up the courage to support such a plan.

HB 367 does not deserve to see the light of day. Please do not consider it further.

Sincerely,

Linda Milliken  
PO Box 82275  
Fairbanks, AK 99708

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Send and receive Hotmail on your mobile device: <http://mobile.msn.com>

## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <b>NATALIE</b>	M.I.	Last name <b>McCULLOUGH</b>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number
Mailing address <b>9320 ROY ST ANCHORAGE, AK</b>				Zip code <b>99515</b>
Residence (street) address if different from mailing address				Zip code
Email address <b>GUSSPOTCHIAU@YAHOO.COM</b>		Signature <i>Natalie McCullough</i>		Date <b>2/15/02</b>

**To:** Put a ✓ in the appropriate box(es).

	House members	Senate members
<b>H or S</b>		
<input type="checkbox"/>	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Kerttula (ker)
<input type="checkbox"/>	<input type="checkbox"/> Bunde (bun)	<input checked="" type="checkbox"/> Kehring (keh)
<input type="checkbox"/>	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Kookesh (kos)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Kott (kot)
<input type="checkbox"/>	<input checked="" type="checkbox"/> Coghill (cog)	<input type="checkbox"/> Lancaster (lnc)
<input type="checkbox"/>	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Masak (mas)
<input type="checkbox"/>	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> McGulre (mcg)
<input type="checkbox"/>	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Meyer (mey)
<input type="checkbox"/>	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Morgan (mor)
<input type="checkbox"/>	<input type="checkbox"/> Fale (fai)	<input type="checkbox"/> Moses (mos)
<input type="checkbox"/>	<input type="checkbox"/> Foster (fos)	<input type="checkbox"/> Mulder (mul)
<input type="checkbox"/>	<input type="checkbox"/> Green (gm)	<input type="checkbox"/> Murkowski (mur)
<input type="checkbox"/>	<input type="checkbox"/> Guess (gue)	<input type="checkbox"/> Ogan (oga)
<input type="checkbox"/>	<input type="checkbox"/> Hakro (hac)	<input type="checkbox"/> Porter (por)
<input type="checkbox"/>	<input type="checkbox"/> Harris (har)	<input type="checkbox"/> Rokeberg (rok)
<input type="checkbox"/>	<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Scalzi (scz)
<input type="checkbox"/>	<input type="checkbox"/> Hudson (hud)	<input checked="" type="checkbox"/> Stevens (stv)
<input type="checkbox"/>	<input type="checkbox"/> James (jam)	<input type="checkbox"/> Whitaker (whi)
<input type="checkbox"/>	<input type="checkbox"/> Joule (jou)	<input type="checkbox"/> Williams (wil)
<input type="checkbox"/>	<input checked="" type="checkbox"/> Kapsner (kap)	<input checked="" type="checkbox"/> Wilson (wls)
<input type="checkbox"/>		<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>		<input type="checkbox"/> Cowdery (coy)
<input type="checkbox"/>		<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>		<input type="checkbox"/> Donley (don)
<input type="checkbox"/>		<input type="checkbox"/> Ellis (eli)
<input type="checkbox"/>		<input type="checkbox"/> Elton (elt)
<input type="checkbox"/>		<input type="checkbox"/> Green (gre)
<input type="checkbox"/>		<input type="checkbox"/> Halford (hal)
<input type="checkbox"/>		<input type="checkbox"/> Hoffman (hof)
<input type="checkbox"/>		<input type="checkbox"/> Kelly (kep)
<input type="checkbox"/>		<input type="checkbox"/> Leman (lem)
<input type="checkbox"/>		<input type="checkbox"/> Lincoln (lin)
<input type="checkbox"/>		<input type="checkbox"/> Olson (ols)
<input type="checkbox"/>		<input type="checkbox"/> Phillip (phi)
<input type="checkbox"/>		<input type="checkbox"/> Stevens (ste)
<input type="checkbox"/>		<input type="checkbox"/> Taylor (tay)
<input type="checkbox"/>		<input type="checkbox"/> Theriault (thr)
<input type="checkbox"/>		<input type="checkbox"/> Torgerson (tor)
<input type="checkbox"/>		<input type="checkbox"/> Ward (war)
<input type="checkbox"/>		<input type="checkbox"/> Wiken (wki)

**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB	Bill number				
<b>HB</b>	<b>367</b>	and check one:	<input checked="" type="checkbox"/> Support	<input type="checkbox"/> Oppose	<input type="checkbox"/> Amend
			<b>OR</b> enter a general Subject (LIO staff may modify):		

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

WITHOUT	DETAILED	KID	CARE	I	5
WOULD	BE	HAVE	NO	WAY	10
TO	CARE	FOR	MYSELF	OR	15
MY	UNBORN	CHILD.	I	APPRECIATE	20
ALL	SERVICES	THEY	PROVIDE.		25
					30
					35

## Public Opinion Message

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**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <b>Ms. Nichole</b>	M.I.	Last name <b>R Encelewski</b>	Jr. / Sr. / III
Group affiliation (if applicable)				Daytime telephone number <b>(907) 278-4343</b>
Mailing address <b>16141 E. 41st CT #4 Anchorage AK</b>				Zip code <b>99508</b>
Residence (street) address if different from mailing address <b>Same</b>				Zip code
Email address <b>Nikitabear7@yahoo.com</b>			Signature	Date <b>2-15-02</b>

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members																																																																																																																																																																												
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**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB <b>HB</b>	Bill number <b>367</b>	and check one:	<input type="checkbox"/> Support		
			<input checked="" type="checkbox"/> Oppose	<b>OR</b>	enter a general Subject
			<input type="checkbox"/> Amend		(LIO staff may modify):

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

IF	Not	For	Denali	Kidcair	5
I	would've	had	almost	or	10
over	\$100,000	in	medical	Bills	15
for	my	pregnancy	and	delivery	20
It	helped	me	out	immensely	25
					30
					35

## Public Opinion Message

Contact your nearest Legislative Information Office to send your POM  
This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs. <input checked="" type="checkbox"/>	First name NATALIE	M.I. A	Last name MCCULLOUGH	Jr. / Sr. / III
Group affiliation (if applicable)			Daytime telephone number	
Mailing address 9320 BOY ST ANCHORAGE, AK			Zip code 99515	
Residence (street) address if different from mailing address			Zip code	
Email address BUSINESSPOTENTIAL@YAHOO.COM		Signature <i>Natalie A. McCullough</i>		Date 2/15/02

To: Put a ✓ in the appropriate box(es)

## Public Opinion Message

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**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs. <b>MR.</b>	First name <b>Victor</b>	M.I. <b>J</b>	Last name <b>Van Scoy</b>	Jr. / Sr. / III <b>II</b>
Group affiliation (if applicable)				Daytime telephone number <b>274-1515 4 211</b>
Mailing address <b>750 W 5th Ave</b>				Zip code <b>99501</b>
Residence (street) address if different from mailing address <b>N/A</b>				Zip code
Email address <b>hotcaster@hotmail.com</b>		Signature <i>Victor Van Scoy</i>		Date <b>2/19/02</b>

**To:** Put a  in the appropriate box(es).

Committees	House members	Senate members
<b>Hors</b> <input type="checkbox"/> Community & Regional Affairs (cra) <input type="checkbox"/> Finance (fin) <input checked="" type="checkbox"/> Health, Ed., & Social Services (hes) <input type="checkbox"/> Judiciary (jud) <input type="checkbox"/> Labor & Commerce (l&c) <input type="checkbox"/> Resources (res) <input type="checkbox"/> Rules (rts) <input type="checkbox"/> State Affairs (sta) <input type="checkbox"/> Transportation (tra) <input type="checkbox"/> Other: <input type="checkbox"/> Other:	<input type="checkbox"/> Berkowitz (ber) <input type="checkbox"/> Bunde (bun) <input type="checkbox"/> Chenault (che) <input checked="" type="checkbox"/> Cissna (cis) <input checked="" type="checkbox"/> Coghlin (cog) <input type="checkbox"/> Crawford (crf) <input type="checkbox"/> Croft (cro) <input type="checkbox"/> Davies (dav) <input checked="" type="checkbox"/> Dyson (dys) <input type="checkbox"/> Fate (fht) <input type="checkbox"/> Foster (fos) <input type="checkbox"/> Grant (gm) <input type="checkbox"/> Guess (gue) <input type="checkbox"/> Halcro (hac) <input type="checkbox"/> Harris (har) <input type="checkbox"/> Hayes (hay) <input type="checkbox"/> Hudson (hud) <input type="checkbox"/> James (jam) <input checked="" type="checkbox"/> Joule (jou) <input type="checkbox"/> Kapsner (kap)	<input type="checkbox"/> Kertula (ker) <input checked="" type="checkbox"/> Kohring (koh) <input type="checkbox"/> Kookesh (kos) <input type="checkbox"/> Kott (kot) <input type="checkbox"/> Lancaster (lnc) <input type="checkbox"/> Lassek (mas) <input type="checkbox"/> McGuire (mcg) <input type="checkbox"/> Meyer (mey) <input type="checkbox"/> Morgan (mor) <input type="checkbox"/> Moses (mos) <input type="checkbox"/> Mulder (mul) <input type="checkbox"/> Murkowski (mur) <input type="checkbox"/> Ogan (oga) <input type="checkbox"/> Porter (por) <input type="checkbox"/> Rokeberg (rok) <input type="checkbox"/> Scalzi (scl) <input checked="" type="checkbox"/> Stevens (stv) <input type="checkbox"/> Whitaker (whl) <input type="checkbox"/> Williams (wll) <input checked="" type="checkbox"/> Wilson (wts)
<b>Caucuses</b> <input checked="" type="checkbox"/> Anchorage (age) <input type="checkbox"/> Bush (bus) <input type="checkbox"/> Fairbanks/Interior (int) <input type="checkbox"/> Matsu (mat) <input type="checkbox"/> Majority (mjr) <input type="checkbox"/> Minority (mnr)		<input type="checkbox"/> Austerman (aus) <input type="checkbox"/> Cowdery (coy) <input type="checkbox"/> Davis (dab) <input type="checkbox"/> Donley (don) <input type="checkbox"/> Ellis (ell) <input type="checkbox"/> Elton (elt) <input type="checkbox"/> Green (gra) <input type="checkbox"/> Halford (hal) <input type="checkbox"/> Hoffman (hof) <input type="checkbox"/> Kelly (kep) <input type="checkbox"/> Leman (lem) <input type="checkbox"/> Lincoln (lin) <input type="checkbox"/> Olson (ols) <input type="checkbox"/> Phillip (phi) <input type="checkbox"/> Stevens (ste) <input type="checkbox"/> Taylor (tay) <input type="checkbox"/> Theriault (thr) <input type="checkbox"/> Torgerson (tor) <input type="checkbox"/> Ward (war) <input type="checkbox"/> Wilken (wfk)

**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB <b>HB</b>	Bill number <b>367</b>	and check one:	<input checked="" type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> Amend	<b>OR</b> enter a general Subject (LIO staff may modify):
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**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

Dont	set	rid	of	it	5
it	good	and	helps	a	10
Lot	of	people	out		15
					20
					25
					30
					35

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**From:** Please **PRINT** the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name <b>Kenneth</b>	M.I. <b>G</b>	Last name <b>Kirkman</b>	Jr. / Sr. / III <b>III</b>
Group affiliation (if applicable)				Daytime telephone number <b>238-2434</b>
Mailing address <b>1306 West 6th apt 2</b>				Zip code <b>99501</b>
Residence (street) address if different from mailing address				Zip code
Email address			Signature <i>Kenneth Kirkman</i>	Date <b>2/19/02</b>

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	<input type="checkbox"/> Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	<input type="checkbox"/> Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	<input type="checkbox"/> Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (che)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	<input type="checkbox"/> Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Donley (don)
<input type="checkbox"/>	<input type="checkbox"/> Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghill (cog)	<input type="checkbox"/> Ellis (ell)
<input type="checkbox"/>	<input type="checkbox"/> Resources (res)	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Elton (elt)
<input type="checkbox"/>	<input type="checkbox"/> Rules (rs)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> Green (gre)
<input type="checkbox"/>	<input type="checkbox"/> State Affairs (sta)	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Halford (hal)
<input type="checkbox"/>	<input type="checkbox"/> Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Hoffman (hof)
<input type="checkbox"/>	<input type="checkbox"/> Other:	<input type="checkbox"/> Fate (fht)	<input type="checkbox"/> Kelly (kep)
<input type="checkbox"/>	<input type="checkbox"/> Other:	<input type="checkbox"/> Foster (fos)	<input type="checkbox"/> Leman (lem)
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		<input type="checkbox"/> Guess (guø)	<input type="checkbox"/> Olson (ois)
		<input type="checkbox"/> Hakro (hac)	<input type="checkbox"/> Porter (por)
		<input type="checkbox"/> Harris (har)	<input checked="" type="checkbox"/> Philip (phi)
		<input type="checkbox"/> Hayes (hay)	<input type="checkbox"/> Rokeberg (rok)
		<input type="checkbox"/> Hudson (hud)	<input type="checkbox"/> Scatzi (scl)
		<input type="checkbox"/> James (jam)	<input checked="" type="checkbox"/> Stevens (stv)
		<input type="checkbox"/> Joule (jou)	<input type="checkbox"/> Whitaker (whi)
		<input checked="" type="checkbox"/> Kapsner (kap)	<input type="checkbox"/> Williams (wit)
			<input checked="" type="checkbox"/> Wilson (wfs)
			<input type="checkbox"/> Wiken (wik)

**Subject:** Fill out the boxes below **OR** enter a Subject.

HB or SB	Bill number		and check one:	<input checked="" type="checkbox"/> Support		
				<input type="checkbox"/> Oppose	<b>OR</b>	enter a general Subject
				<input type="checkbox"/> Amend		(LIO staff may modify):

**Message:** Your **PRINTED** message cannot exceed 50 words or contain any vulgar language.

<b>I</b>	<b>strongly</b>	<b>oppose</b>	<b>this</b>	<b>bill</b>	5
<del>to be</del>					10
					15
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## Public Opinion Message

**Contact your nearest Legislative Information Office to send your POM**  
 This form must be completely filled out. You may phone, fax, or deliver your POM to any LIO.

**From:** Please PRINT the information below. This form must be signed by the sender.

Mr. / Ms. / Mrs.	First name	M.I.	Last name	Jr. / Sr. / III
ms	Heather	L	Cordley	
Group affiliation (if applicable)				Daytime telephone number
				269061
Mailing address				Zip code
83 D Street Anch, AK				99501
Residence (street) address if different from mailing address				Zip code
Email address			Signature	Date
			Heather Cordley	

**To:** Put a  in the appropriate box(es).

	Committees	House members	Senate members
<b>H or S</b>			
<input type="checkbox"/>	Community & Regional Affairs (cra)	<input type="checkbox"/> Berkowitz (ber)	<input type="checkbox"/> Austerman (aus)
<input type="checkbox"/>	Finance (fin)	<input type="checkbox"/> Bunde (bun)	<input type="checkbox"/> Cowdery (coy)
<input checked="" type="checkbox"/>	Health, Ed., & Social Services (hes)	<input type="checkbox"/> Chenault (cha)	<input type="checkbox"/> Davis (dab)
<input type="checkbox"/>	Judiciary (jud)	<input checked="" type="checkbox"/> Cissna (cis)	<input type="checkbox"/> Donlay (don)
<input type="checkbox"/>	Labor & Commerce (l&c)	<input checked="" type="checkbox"/> Coghill (cog)	<input type="checkbox"/> Elks (elt)
<input type="checkbox"/>	Resources (res)	<input type="checkbox"/> Crawford (crf)	<input type="checkbox"/> Elton (elt)
<input type="checkbox"/>	Rules (rsa)	<input type="checkbox"/> Croft (cro)	<input type="checkbox"/> Green (gre)
<input type="checkbox"/>	State Affairs (sta)	<input type="checkbox"/> Davies (dav)	<input type="checkbox"/> Halford (hal)
<input type="checkbox"/>	Transportation (tra)	<input checked="" type="checkbox"/> Dyson (dys)	<input type="checkbox"/> Hoffman (hof)
<input type="checkbox"/>	Other:	<input type="checkbox"/> Fate (fnt)	<input type="checkbox"/> Kelly (kep)
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		<input type="checkbox"/> Stevens (stv)	
		<input type="checkbox"/> Whitaker (whi)	
		<input type="checkbox"/> Williams (wil)	
		<input checked="" type="checkbox"/> Wilson (wis)	

**Subject:** Fill out the boxes below OR enter a Subject.

HB or SB	Bill number		and check one:	<input type="checkbox"/> Support	<input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Amend	OR enter a general Subject (LIO staff may modify):
AB	367						

**Message:** Your PRINTED message cannot exceed 50 words or contain any vulgar language.

	I think	it is	a great	5
	program	and	many people	10
	who	use it	and	15
	thankfull	for	it	20
				25
				30
				35



# Alaska State Legislature

Please enter into the record my testimony to the House HES  
committee name

Committee on HB 367, dated 2-14-02  
bill # / subject

SEE 1 PAGE ATTACHED

Signed: CHARLES QUARRE  
Testifier

SELF  
Representing (optional)

36525 BRADFORD RD STERLING, AK 99672  
Address

(907) 262-2115  
Phone number

Additional comments on HB367 for POM to be FAXed to the members of the House Health, Education & Social Services Committee.

This Bill's efforts to reduce State expenditures are to be commended but why is it that the lowest on the totem pole are always the first to be the targets of reduction in services? The statistics developed by the Dept. of Health and Social Services and Representative Coghill's office are impressive but they do not bring to light the human suffering of those on the low end of the financial chain. This was brought out in the many personal accounts of the need for Denali Kid-Care benefits that were presented to the Committee on the teleconference of February 14, 2002. It is possible that there is some abuse of the program by individuals. By proper administration and supervision these can be reduce or eliminated.

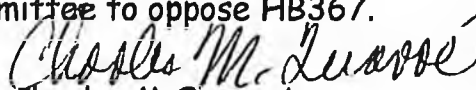
What is to happen to the number of children (3821) and pregnant women, carrying a living child, (722) who will lose coverage by enactment of HB367? Past experience has shown that they will wait until the last moment when their ailments are most serious to report to emergency services for treatment that will cost infinitely more that if taken care of in a timely fashion.

It is estimated that the State will save \$5 million by implementation of this bill but will lose \$11.9 million in federal aid. This does not seem to be a very advantageous arrangement.

Our youth are our treasure, and the future leaders of our State and Country. We are going at great lengths to insure they receive an adequate education. Insuring their health will make the education expenditures even more valuable.

It has been said that the measure of a civilized society and culture is the way in which they treat their most vulnerable members, certainly these children are vulnerable and in need of our compassion and aid.

I respectfully request the Committee to oppose HB367.

  
Charles M Quarre  
quar@alaska.com



# Alaska State Legislature

Please enter into the record my testimony to the House Health, Education and Social Services  
 committee on HB 367 / Medical Assistance committee name  
 dated 2/21/02  
 bill/subject program coverage

I am a pregnant woman in great support of Denali Kid Care. I am employed and have some insurance coverage. However I pay into the plan for order for my husband to be covered. <sup>He is a seasonal worker</sup> If I were to exceed the medical needs beyond which ~~my~~ this plan covered, I would not be able to afford care for my self or unborn child. When this child is born, having Denali Kid care will allow this child to have medical check ups and proper care. I could not afford this otherwise. Please keep Denali Kid Care. Since I do work, ~~raising~~ lowering the income level would put me in jeopardy of losing this great support. I feel like middle income, straddling the poverty line people are constantly penalized for trying to make a decent living.

Signed: Dana Roberts  
 Testifier Self.

Representing (Optional)  
P.O. Box 3532, Homer, AK.  
 Address  
907-235-1921  
 Phone No.

(H) HES HB 367

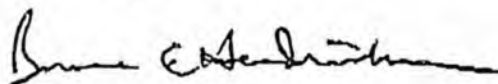
2/21/02

**PROTECT AND DEFEND ALASKA'S CHILDREN:**

Denali Kid Care (DKC) is a matter of life and death to many of Alaska's children. Timely application of medical therapy, psychological counseling, and psychiatric care can prevent spread of diseases, accidents, crimes, and suicide attempts, which would otherwise result in much higher costs that the State would have to pay to hospitals, prisons, and institutions. Cutting the number of Denali Kid Care recipients is saving a nickel at the cost of a dollar.

There are times when a good Republican must place childrens' health and States' responsibility and rights at a higher priority than thrifty budgeting. Our Alaskan Republican Party has a good reputation. Please protect our reputaion. Refuse to become the party that attempts to balance Alaska's budget on the backs of Alaska's neediest children.

Best regards,



Bruce Hendrickson  
PO Box 1439  
Homer, AK 99603  
235-2748

A United Way Community Partnership



P.O. Box 141689 Anchorage, AK 99514-1689  
3350 Commercial Drive, Second Floor

Phone: (907) 563-1923 Fax: (907) 563-1959  
Email: [probinso@childcareconnection.org](mailto:probinso@childcareconnection.org)

DRAFT

## Resolution in Support of Funding for Denali KidCare at the Current Level 2002-4

Whereas, in 1996 more than one out of every three children 17 years old or younger in the United States were not covered by private health insurance; and

Whereas, in 1997 Congress adopted the State Child Health Insurance Program (S-CHIP), which allows states to access federal Medicaid funds to provide insurance for uninsured children in working and non-working families. Approximately 71% of the cost is from the federal government; and

Whereas, Denali KidCare, as Alaska's CHIP, began offering health care insurance coverage March 1, 1999 to uninsured Alaskan children and to pregnant Alaskan women; and

Whereas, many employers are not able to pay for dependent health care insurance due to continuously rising costs<sup>1,2</sup>, nor are the employees able to afford the coverage as employers shift more or all of the costs to the employees<sup>3</sup>; and

Whereas, a family of four qualifies if their family income is less than \$44,140 per year (\$3678 per month); and

Whereas, between its inception and June 2000, over 15,000 additional Alaskan children from low-income working families have health insurance through Denali KidCare<sup>4</sup>; and

Whereas, the availability of Denali KidCare has allowed parents formerly on welfare to obtain paying jobs without fear of losing coverage for their children; and

Whereas, insured children are more likely to receive well-baby/well-child care, adequate and timely immunizations, and have health care problems discovered and treated earlier; and

<sup>1</sup> Alaskan businesses report a 10% increase in premium rates from 2001 to 2002. Credit Suisse First Boston, *2002 Benefit Manager Survey*, 15 January 2002, 34.

<sup>2</sup> The percentage of Anchorage employers paying the full cost of benefits for their employees has decreased by over 50% in the last 8 years for businesses with more than 50 employees, to about 20%. Catherine Schumacher, *Anchorage Access to Health Care Coalition Health Insurance Benefits Survey*, September 2001.

<sup>3</sup> At least 30% of surveyed Anchorage businesses pay none of the dependent health insurance premium costs. The average additional dependent premiums cost \$340 per month. Ibid.

<sup>4</sup> Alaska Department of Health and Social Services, *Welfare Reform Status Report 2000*, available from [www.hss.state.alaska.us/publications/3annreport.pdf](http://www.hss.state.alaska.us/publications/3annreport.pdf); accessed 20 September 2001.

Whereas, for every dollar spent on prenatal care, more than three are saved in lower costs for treating the consequences of low birth weight and prematurity<sup>5</sup>; and

Whereas, early and consistent prenatal care decreases the risk of death or disability for both the mother and child;

Whereas, uninsured Alaskans are more likely to use expensive emergency room services and to have more serious health problems once they do get treatment; and

Whereas, non-profit health care providers have experienced a continual rise in uncompensated care. For example, Anchorage Neighborhood Health Center has experienced an increase of 43% from 1997-2000 (\$646,000)<sup>6</sup>; and

Whereas, the current cost per year to the State of Alaska for Denali KidCare is \$552 per child and \$4580 per pregnant woman and newborn child until 2 months old; and

Whereas, if the change in eligibility from 200% of Federal Poverty Level to 150% goes into effect, it is estimated that 3821 children and 722 pregnant women and newborns will lose health care coverage; and

Whereas, the State of Alaska will save approximately \$5 million dollars, but will give up almost \$12 million in matching Federal funds;

Whereas, these 4543 Alaskan will increase the pressure on health providers for uncompensated care; and

Whereas, absences from school and undiagnosed or untreated hearing, vision, dental, or health problems negatively affect the children's ability to learn and increase the schools' costs for remediation;

Therefore, be it resolved, that the Success By 6 Governance Board strongly urges the Alaska Legislature to continue to accept Alaskans with up to 200% of the Federal Poverty Rate for the Denali KidCare Program.

Approved via email distribution by the Success By 6 Governance Board on February 20, 2002.

***Ernie Hall***

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Ernie Hall, Chair

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<sup>5</sup> Center for Health Economics Research, *Access To Health Care*, 1993.

<sup>6</sup> Anchorage Neighborhood Health Center, *Newsletter June/July 2001*, page 2.

**Subject: HSB367- Please vote down!**

**Date:** Wed, 20 Feb 2002 21:10:24 -0500 (EST)

**From:** "" <kkerlin1@excite.com>

**To:** Representative\_Peggy\_Wilson@legis.state.ak.us,  
Representative\_Fred\_Dyson@legis.state.ak.us, Representative\_John\_Coghill@legis.state.ak.us,  
Representative\_Vic\_Kohring@legis.state.ak.us,  
Representative\_Gary\_Stevens@legis.state.ak.us,  
Representative\_Sharon\_Cissna@legis.state.ak.us,  
Representative\_Reggie\_Joule@legis.state.ak.us

Dear HESS committee members,

I am writing to express my concern over the HB367 proposal to make cuts in the Denali KidCare budget. The number of children/families this would negatively effect is very significant and Alaska can not afford to have so many of it's children not having their basic health and safety needs met. So many of us are working diligently to assist children and families to develop in positive ways. This can not be done if children are unhealthy and can't get the services they need.

Nationwide, the amount of mental health problems among even our youngest children is at an all time high. The agency I work for recently surveyed child care providers in Alaska and found that their primary training and consultation needs revolve around serving children who experience emotional and behavioral health problems. If these children and their families can't have access to basic mental health services at an early age, they are very likely to develop permanent mental health illnesses as adults that often cause a much greater burden upon society than dollars spent on preventive services, such as DKC.

I strongly urge you to vote this bill down and not approve its proposal. Thank you for considering my request.

Sincerely,

Kimberly Kerlin, MA  
Mental Health Consultant  
1540 Russian Jack Dr. #13  
Anchorage, AK 99508  
(907) 563-1973

**Subject:** HB 367

**Date:** Wed, 20 Feb 2002 16:57:16 -0900

**From:** "Peggy Robinson" <probinso@childcareconnection.org>

**To:** <Representative\_Sharon\_Cissna@legis.state.ak.us>,  
 <Representative\_John\_Coghill@legis.state.ak.us>,  
 <Representative\_Fred\_Dyson@legis.state.ak.us>,  
 <Representative\_Reggie\_Joule@legis.state.ak.us>,  
 <Representative\_Vic\_Kohring@legis.state.ak.us>,  
 <Representative\_Gary\_Stevens@legis.state.ak.us>,  
 <Representative\_Peggy\_Wilson@legis.state.ak.us>


Dear Members of the House Health, Education, & Social Services Committee:

Attached is a resolution by the Success By 6 Governance Board in support of keeping the 200% of Federal Poverty Level threshold for income eligibility for Denali KidCare. Due to your committee considering HB 367 tomorrow, our chair, Ernie Hall, authorized me to send you this email version - a hard copy one will be arriving in the mail later.

Please keep this bill in committee - the prevention and early detection of health and wellness problems in children pays for itself many times over during their lifetime. Families with incomes up to 200% of the Federal Poverty Level do not have enough discretionary income to pay for dependent health insurance coverage.

Thank you for your work for children.

Peggy Robinson, Director  
 Success By 6 Initiative  
 P.O. Box 141689  
 Anchorage, AK 99514-1689  
 (907)563-1923 phone (907)563-1959 fax  
 probinso@childcareconnection.org

 <a href="#">Resolution to keep 200% Income Level.doc</a>	<p><b>Name:</b> Resolution to keep 200% Income Level.doc  <b>Type:</b> WINWORD File  (application/msword)  <b>Encoding:</b> base64  <b>Download Status:</b> Not downloaded with message</p>
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**Subject:** HB 367

**Date:** Wed, 20 Feb 2002 14:17:12 -0900

**From:** "Jonalyn Najera" <lillyloopy@gci.net>

**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>

To whom it may concern:

I testified on Feb. 14th against HB367. If this bill was approved it would devastate my family. My 8 year old daughter is diagnosed with a mental illness, early onset bipolar disorder. Without Denali Kid Care I would not be able to treat her. Her mental health costs alone last year were in excess of at least \$25,000, as a conservative estimate. This does not include the costs of her pediatrician, her eye problems, or the dentist. I also have another child that needs her regular child visits to the doctor.

We are a working family, and also in the Naval Reserve. We make approximately \$42,000 a year before our dividends. We do NOT live an extravagant lifestyle in the least bit...we can barely afford groceries on a regular basis. We struggle to buy clothes for school each year, and doing ANY sports activities or entertainment things for our children DO NOT happen, because we cannot afford them.

My husband receives insurance for HIMSELF only, through his employer. For myself and our children to get insurance it would be from \$800-\$1000 a month, PLUS co-pays and deductibles. There would be no possible way for us to afford any of this. Even in the event that we did have insurance, and could afford the co-pay's and deductibles.....insurance companies really limit mental health issues. Most insurance companies limit your mental health visits from 8-20 visits a year. My daughter exceeds this in one month.

Having medical/mental health insurance for my daughter is a MUST HAVE thing. The suicide rate of bipolar kids is 25%! My daughter, at the age of 7 started being suicidal. Without the proper medications and therapy, the possibility of her taking her own life is TOO high to risk.

**PLEASE MAKE THE RIGHT DECISION AND OPPOSE THIS BILL!! YOU COULD BE SAVING MY DAUGHTER'S LIFE AS WELL AS MANY OTHER SICK CHILDREN!!!**

Thank you for your time,

Jonalyn Najera

349-1304

[lillyloopy@gci.net](mailto:lillyloopy@gci.net)

**Subject: HB 367: Medical Assistance Program Coverage**

**Date:** Wed, 20 Feb 2002 11:38:29 -0900

**From:** "Lewis, Sarah" <slewis@kumin.alaska.com>

**To:** <representative\_Fred\_Dyson@legis.state.ak.us>

Dear Representative Dyson,

as a mother and a member of Alaska's professional community, as well as a person highly interested in positive social policy for Alaska's children:

**I urge you not to pass HB 367 out of the House HES committee. Please, keep Denali KidCare eligibility intact at 200% of the Federal poverty level.**

Routine prenatal, infant, and childhood medical care are crucial for the health of Alaska's children. I understand from contacts in Juneau that you are truly concerned about the welfare of children, and I believe them. I also understand your concern about Alaska's fiscal difficulties, as I share them. Attempting to save the 5 million dollars spent on health care for children is an inefficient and short-sighted way to alleviate budget shortfalls. We save 5 million, but lose 11.9 million in Federal dollars coming into the state's economy. Further, we end up spending more than 5 million dollars when working families, unable to afford sky-rocketing insurance premiums and deductibles, are forced to apply to the state for assistance (to pay for the medical care or for the other necessities neglected in order to pay for medical costs). Emergency medical care will continue to be necessary (even more so as routine care is eliminated due to cost constraints) even if eligibility for Denali KidCare is reduced. It will not go away, and will end up on the State's tab, with no Federal assistance in most cases.

**The passage of this bill would hurt two groups of Alaskan citizens whom I know you support: Children and working families.** It has been shown that prenatal care is the single most cost-effective health care expenditure. Children with health care coverage are more likely to receive well-baby/well-child care, adequate immunizations, and have health care problems discovered early. It does not make fiscal, public health, or social welfare sense to reduce the coverage of Denali KidCare. It is a program all Alaskans should be proud of and support at the level it is presently funded.

Thank you for your consideration,

***Sarah R-P. Lewis, AIA, CDT***

1551 Sunrise Drive

Anchorage, AK 99508

907-274-8844

**Subject: Fw: Voice from the front line**

**Date:** Wed, 20 Feb 2002 23:45:21 -0900

**From:** "Bill and Ruthe Schoder-Ehri" <lovenest@ptialaska.net>

**To:** <Representative\_Fred\_Dyson@legis.state.ak.us>

**CC:** <Representative\_John\_Coghill@legis.state.ak.us>,  
<Representative\_Vic\_Kohring@legis.state.ak.us>,  
<Representative\_Gary\_Stevens@legis.state.ak.us>,  
<Representative\_Sharon\_Cissna@legis.state.ak.us>,  
<Representative\_Reggie\_Joule@legis.state.ak.us>

Dear Representative,

Your work is so important, and so is mine.

I am a nurse working in the villages around the Chugach region. I've been a public health nurse in urban King County (Seattle area) and a maternal-child health nurse for over 25 years. I feel so proud of Alaska's Denali Kid Care program since returning to Alaska five years ago. I fully support all the "up front" dollars that are spent by Alaskans to provide quality prenatal care, safe deliveries and early newborn care. We are making a big difference in the health of families. Hard to prove; easy to forget.

It seems short sighted to even **propose** cutting this program.

PLEASE please consider the implications in a reduction of so many federal dollars and the impact on individuals and babies that need attention in order to prevent more problems in the future.

**I urge you to reject any cuts to Denali Kid Care recipients!**

From the front lines, for the little ones and the women who are low and middle income, I ask you to care. Keep the current funding levels--our state can afford the cost of prevention.

Thanks!

Ruthe Schoder-Ehri, R.N., PHN  
480 Grubstake Avenue  
Homer, Alaska 99603  
(907)235-1504



# Alaska's Federal Poverty Level (FPL) Eligibility Guidelines

Income standards effective April 1, 2001

**NOTE** An unborn child of a pregnant woman is counted in the family size for pregnant woman coverage.

Family Size	Annual Income Kids with other health insurance	Monthly Income Kids with other health insurance	Annual Income Kids with no insurance Pregnant women with or without health insurance	Monthly Income Kids with no insurance Pregnant women with or without health insurance
	150% FPL	150% FPL	200% FPL	200% FPL
1	\$16,095	\$1,342	\$21,460	\$1,789
2	\$21,765	\$1,814	\$29,020	\$2,419
3	\$27,435	\$2,287	\$36,580	\$3,049
4	\$33,105	\$2,759	\$44,140	\$3,679
5	\$38,775	\$3,232	\$51,700	\$4,309
6	\$44,445	\$3,704	\$59,260	\$4,939
7	\$50,115	\$4,177	\$66,820	\$5,569
8	\$55,785	\$4,649	\$74,380	\$6,199
Each additional	\$ 5,670	\$ 473	\$ 7,560	\$ 630

## Key Points

- ◆ Income figures above are gross income (before taxes are taken out).
- ◆ Income eligibility is generally based on income for the 30 days prior to the processing of the application.
- ◆ A standard deduction per month for work expense and a standard deduction per month for dependent care expense may apply.
- ◆ Permanent Fund Dividends are not counted as income.
- ◆ Anyone can apply for her/himself or on behalf of a child or teen.
- ◆ Income eligibility is determined based on biological or adoptive parent income.
- ◆ Children with other insurance may still be eligible.

February 13, 2002

Dear Rep. Coghill

I have just been informed of a proposition that is trying to be passed that would eliminate Denali Kid Care. I just want to share a little story of how beneficial Denali Kid Care to our family and why this would be a devastation if this bill passed.

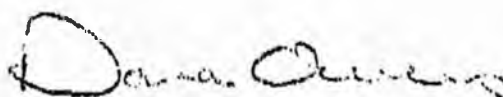
We moved to Alaska in '99, at that time we did not have health insurance. We had 4-year-old daughter and 1-½ year old twins. We could not afford the \$600+ a month for insurance we would have to pay through COBRA to continue insurance. We qualified for insurance for our children through Denali Kid Care.

Three months after we arrived in Alaska, it was discovered that our oldest daughter Darci, who has Down Syndrome, would need open-heart surgery to correct a birth defect in her heart. Since that type of surgery cannot be performed here in Alaska, we had to go to Portland for the Surgery. I cannot praise enough the quick – hassle free response that we received from Denali Kid Care. Darci had surgery, came through it just fine and is now a healthy 6 ½ year old going to 1<sup>st</sup> grade. Darci continues to have multiple health care concerns that are associated with Down Syndrome, but I feel like we are a success story.

We now have insurance with my employer and are getting back on our feet. But, you can imagine the expense we would have had to undergo for such procedures and I do not feel we would be where we are today without the assistance of Denali Kid Care.

This is just one of the stories that I have about the benefits of Denali Kid Care, with a family of 3 little girls I have many. But, please understand, that families like my own, that just need a little help to get back on their feet would probably suffer the most from this bill passing.

Sincerely, Dana Owens.



# STATE OF ALASKA

## DEPARTMENT OF HEALTH & SOCIAL SERVICES

### MEDICAL CARE ADVISORY COMMITTEE

TONY KNOWLES, GOVERNOR

P.O. BOX 110660  
JUNEAU, ALASKA 99811-0660  
PHONE: (907) 465-3355  
FAX: (907) 465-2204

February 12, 2002

The Honorable Fred Dyson  
Alaska State Legislature  
Capitol Room 104  
Juneau, AK 99801

Dear Representative Dyson,

On behalf of the Medical Care Advisory Committee, I would like to express the committee's concern regarding House Bill 367. Required by federal law, the Alaska Medical Care Advisory Committee is responsible for advising the State's Medicaid agency on policy and program changes to the Medicaid program. The committee members include health care consumers and providers from across the state of Alaska.

The Medical Care Advisory Committee has had the opportunity to provide input to the Department of Health and Social Services on the Denali KidCare program throughout its development. We have heard from consumers and providers about their experiences with the Denali KidCare program. From our review, we learned that the program has been overwhelmingly successful in reaching needy families and has contributed immensely to the stability of these families. We also learned that parents were able to stay employed even if their children got ill because their children had health care coverage through the Denali KidCare program. These families feel empowered that they can both maintain employment and provide the right care for their children.

From the beginning, the Medical Care Advisory Committee supported the development of Denali KidCare program for a number of reasons. Numerous studies have documented that the percentage of children without health insurance has grown rapidly in recent years. Contributing significantly to the declining trend in health insurance is the decline in employer financial support for health care coverage for their employee's dependents. Families who meet the income eligibility guidelines for Denali KidCare often do not have the option of an employer financed health insurance plan for their dependents, and even if they do, they can not afford to pay their share of the health care premiums, deductibles, and copayments. The Medical Care Advisory Committee knows that children without health care coverage are six times more likely to go without needed medical care, five times more likely to use the hospital emergency room as a regular source of care, and four times more likely to have necessary care delayed. It is important to a child's

development that they receive appropriate medical care. If a child develops a chronic health problem, studies have shown that it can affect that child's health and well being for decades to come and children, especially young children, should receive annual doctor visits to monitor their growth and development. Children without health care coverage are also more likely to be missing some of their immunizations.

For these reasons, the Medical Care Advisory Committee strongly supports the Denali KidCare program and urges the Legislature to maintain the current eligibility for the program.

Sincerely,



Patti Hong, RN  
Chair

*Medical Care Advisory Committee members:*

David Alexander, MD, Anchorage  
Sam "Lavada" Bush, Fairbanks  
Jim Culley, Valdez  
Marie Darlin, Juneau  
Kathy Dillard, Kodiak  
Gary Givens, R.Ph., Anchorage  
Angela Gonzalez, Anchorage

Patti Hong, RN, Anchorage  
Greg Johnson, DDS, Fairbanks  
Brenda Knapp, Juneau  
Marilyn Mories, Palmer  
Karen Pearson, Juneau

cc: House Health, Education, and Social Services Committee, Alaska State  
Legislature  
Governor Tony Knowles  
Commissioner Jay Livey

# COVENANT HOUSE ALASKA

Speaker: Anthony M. Lombardo  
Director of Advocacy

Date: 02-14-2002

Re: Testimony on HB 367, House HES committee

Covenant House Alaska has secured information from the administrators of Denali Kidcare regarding the specific effect of a rollback of the coverage level from 200% to 150% of poverty level as proposed ON OUR SPECIFIC CLIENT POPULATION, NAMELY TEENS 13-19 YEARS OLD.

The information received indicates that 3316 teenagers statewide will lose their coverage if the rollback is introduced. Covenant House Alaska champions better health and living conditions for all teens, but especially for homeless and at risk kids. Removing health coverage availability from *uninsured, working* single parent and moderately low income families will do nothing to help our kids in Alaska and will only worsen the situation of the kids at Covenant House. For this reason alone, Covenant House Alaska opposes the rollback.

In addition, there has been a lot of discussion regarding the math of this program. I understand the state statistics to be that we pay 5 million dollars of state funds to receive 12 million dollars of federal funds.

Apparently, those funds cover 26,935 enrollees of which about (40%)10,457 are Alaska Natives. We are reimbursed for their participation 100% and the Native Health Community apparently derives other benefits by participating in the program.

I may NOT understand the math, But I think THAT MEANS APPROXIMATELY 40% OF OUR 5 MILLION DOLLARS COMES BACK TO THE STATE, DUE TO THE NUMBER OF ALASKA NATIVE PARTICIPANTS.

SO THEN, IT SEEMS WE ARE REALLY ONLY SPENDING ABOUT 3 MILLION DOLLARS TO GET 12 MILLION DOLLARS OF FEDERAL INCOME.

THAT'S A 4X RETURN ON OUR DOLLAR IN CAPITAL, available for health care in this state. THAT'S QUITE AN ASSET. I wish I could find a mutual fund that would do that. AND WE ARE INSURING 26935 ALASKANS. Not exactly your wasteful government program.

We believe dis-investing in such a successful asset is a bad idea. And personally, if you would like to dispose of such an income generating asset, I'd like to bid at the auction.

Thank you.

March 1, 2002

House HESS Committee

Representative Fred Dyson, Chair  
Representative Reggie Joule  
Representative Fred Dyson  
Representative Peggy Wilson  
Representative John\_Coghill  
Representative Gary\_Stevens  
Representative Vic\_Kohring  
Representative Sharon\_Cissna

Dear Committee Members:

I write to voice my objection to the current HB 367, which changes the qualification provisions of the "Denali Kid Care Program".

Essentially, the qualification level required of different locations in Alaska are not addressed in the change proposed in HB 367. Currently, a family of four in need of assistance would qualify for the Denali Kid Care program. Both an Anchorage and Bush Alaska family would qualify under the existing rules. In the proposed rules for qualification, where the poverty level is moved to 1.5 times the federal poverty level, the Anchorage family still qualifies but the bush family would not qualify for the assistance.

Please see the attached spreadsheet that shows this anomaly.

There is no integrity in poverty level changes while a regional anomaly exists in the system.

Thank you for your time.

Eben Hopson Jr.  
Arctic Slope Native Association, Ltd.