

LEGISLATIVE FINANCE-HOUSE / SENATE FINANCE COMM. FILES 8879

HB 364 cont. - HB 366 511

102

FISCAL NOTE FOR CSHB 364 (HESS)

"An Act requiring marriage licensing officers to distribute . . . ."

Analysis:

Based on the cost of a similar project, the Office of Prevention estimates that \$6,000 would be needed to prepare and print an Alaska-specific brochure for distribution. Additionally, the Department estimates that approximately 25,000 brochures per year will be needed for distribution to public hospitals, clinics, and health facilities in the State, in accordance with sec. 1 of the bill. We estimate that each brochure will cost \$.25 to duplicate for a total duplication cost of \$6,250.

FISCAL NOTE

REQUEST:

Revision Date: \_\_\_\_\_  
Title: Information on fetal health ef-  
fects of battering during pregnancy  
Sponsor: Rep. Ulmer, Rep. Ellis  
Requestor: House Finance

Agency Affected: Public Safety  
BRU: Council on Domestic Violence  
and Sexual Assault  
Component: \_\_\_\_\_

EXPENDITURES/REVENUES: (Thousands of Dollars) (Inflation not included)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0	0	0	0	0	0

CAPITAL	0	0	0	0	0	0
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REVENUE	0	0	0	0	0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER/PROG RCPT						
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary)

Passage of this bill is expected to have no fiscal impact on the Department of Public Safety.

Prepared by: Barbara Miklos, Executive Director  
Division: Council on Domestic Violence and  
Sexual Assault  
Approved by Commissioner: Arthur English  
Agency: Department of Public Safety

Phone: 465-4356  
Date: 2/8/90  
Date: 2-10-90  
Page 1 of 1

Adopted

*BM*  
2/16/90

P 17

Original sponsor(s): REP. ULMER, Ellis

1 IN THE HOUSE BY THE HESS COMMITTEE

2 CS FOR HOUSE BILL NO. 364 (HESS)

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 SIXTEENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to distribution of information about  
7 fetal health effects of alcohol consumption, chemical  
8 abuse, and battering during pregnancy."

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10 \* Section 1. AS 18.05 is amended by adding a new section to read:

11 Sec. 18.05.037. FETAL HEALTH EFFECTS. The department shall  
12 prepare distributable information on fetal alcohol effects and the  
13 fetal health effects of chemical abuse and battering during pregnancy.  
14 The department shall make this information available to public hospi-  
15 tals, clinics, and other health facilities in the state for distribu-  
16 tion to their patients.

17 \* Sec. 2. AS 25.05.111 is amended by adding a new subsection to read:

18 (b) With a license issued under (a) of this section, the licens-  
19 ing officer shall also give to the parties written information about  
20 fetal alcohol effects and the fetal health effects of chemical abuse  
21 and battering during pregnancy. The Department of Health and Social  
22 Services shall prepare this information and submit it in distributable  
23 form to each licensing officer in the state.

BILL NO: CSHB 364 (HESS)

DATE: February 9, 1990

TITLE: Distribution of information about fetal health effects of ... battering during pregnancy

CONTACT: Barbara Miklos  
465-4356

DEPARTMENT OF  
PUBLIC SAFETY

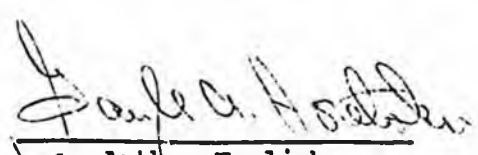
RECEIVED  
FEBRUARY 10 1990

The Council on Domestic Violence and Sexual Assault supports CSHB 364 (HESS) which requires the Department of Health and Social Services to prepare information on, among other things, the fetal health effects of battering. Since pregnant women are at high risk for battering, it is important to inform prospective parents about increased risk during pregnancy, the danger to mother and fetus, and services available to prevent battering and/or provide safety to pregnant women.

Battering is always dangerous to women and children. In Alaska, in 1987, 38% of murders of Alaskan women were committed by husbands or boyfriends. A study conducted by the University of Alaska in 1986 showed that at least 13,500 women living in Alaska required medical treatment by a doctor or hospital for injuries sustained by abuse. Children raised in violent homes suffer trauma from being raised in the violent home and are more likely to be physically and/or sexually abused.

In a study conducted in Texas, of those pregnant women being abused, 40 - 60% stated that the battering had either begun or escalated since the discovery of pregnancy. 65% of those abused had not talked with anyone about the abuse. Both of these findings are consistent with findings in other studies. A March of Dimes study showed that battered women are four times more likely to deliver low birth weight babies and twice as likely to miscarry. Low birth weight babies are more likely to be born with birth defects and more likely to die the first month of life.

The Council would like to request that the language in the legislation Section 1, Line 2, be changed to "The Department, in consultation with the Council on Domestic Violence and Sexual Assault, prepare distributable ... " and in Section 2, Line 22, "The Department of Health and Social Services, in consultation with the Council on Domestic Violence and Sexual Assault, will prepare ...". It is important that information about current services in Alaska, as well as information about the dynamics and consequences of battering, be included in the pamphlet.

  
for Arthur English  
Commissioner

# Alaska State Legislature

## HOUSE OF REPRESENTATIVES



### REPRESENTATIVE FRAN ULMER

#### MEMORANDUM

February 20, 1990

TO: Rep. Ron Larson, Co-Chair  
Rep. Lyman Hoffman, Co-Chair  
House Finance Committee

FROM: Rep. Fran Ulmer

TO: CSHB 364, relating to the distribution of information about fetal health effects of alcohol consumption, chemical abuse and battering during pregnancy

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CSHB 364 requires the state to distribute information regarding Fetal Alcohol Syndrome (FAS), and the effects of drug abuse and battering during pregnancy. This information is to be distributed to public hospitals and health clinics, as well as with each marriage license issued by the state.

Children born with FAS suffer from a combination of irreversible physical and mental birth defects caused when alcohol crosses the placenta and damages the fetus. These defects include:

- (1) Pre and/or post natal growth retardation (weight, length, and/or head circumference below the tenth percentile);
- (2) Central nervous system problems (intellectual impairment, developmental delay, and neurological abnormality);
- (3) Characteristic facial features (including crossed eyes, small eyes, short nose, or abnormalities of the mouth such as cleft palate).

Alaska has the highest estimated incidence of FAS births in the nation. Certain portions of the state record the highest FAS rate among any population in the world (e.g., nationally: 1.7 per 1,000 births; Copper River, Alaska: 250 per 1,000 births). FAS ranks as the number one cause of congenital mental retardation in Alaska. It is the only cause of mental retardation which is totally preventable.

District 4B — Juneau

P.O. Box V • Juneau, Alaska 99811-3100 • (907) 465-4947

Approximately 29 babies are born each year with FAS in Alaska; 26 of these survive the first year. Ten years ago, almost all of these infants died at birth. Today, the developments of medical technology keep them alive. However, the costs associated with FAS and FAE children are staggering and few, if any, families can afford to pay them. FAS babies typically need intensive hospital care at birth, at an average cost of \$2,400 per day. Hospital costs per FAS birth average \$99,740; physician fees average \$11,065 per birth, for a total of \$110,805 per child. It is common for FAS babies to be rehospitalized during the first year, at an average cost of \$40,410 per hospital stay.

In addition, 10 times as many babies are born with a lesser set of symptoms known as Fetal Alcohol Effects (FAE). These children, while less severely damaged, may actually have a greater financial impact on state and community services. For example, the IQ of the average FAS baby is below 70; FAE babies' IQ ranges between 70 and 100. It is these children who typically require added counseling, legal and corrections services.

The attached chart itemizes the costs associated with each FAS and FAE patient. The lifetime cost per FAS birth is approximately \$1.4 million. This figure reflects only the most basic medical and therapeutic services necessary. It does not include the additional financial and social costs of welfare payments, child abuse, sexual abuse, learning disabilities and incarceration.

In addition to FAS and FAE, Alaska is increasingly experiencing the effects of substance abuse during pregnancy. Crack and drug addicted babies demonstrate striking abnormalities in their emotions. They have serious difficulty relating to their world, making friends, or feeling love for their mothers.

Battering a pregnant woman also poses significant risks to the fetus. One of every 12 pregnant women in Alaska is beaten by a male partner. These women are 4 times more likely to deliver low birthweight babies and twice as likely to miscarry. While abuse against expectant mothers occurs in all racial and socioeconomic groups, anecdotal evidence indicates that, during pregnancy, physical abuse may become more severe and will be directed toward the fetus.

Education, through efforts like the brochure proposed in CSHB 364, is the surest route to prevention of these tragic and costly conditions. Oregon, Wisconsin, New Hampshire, Rhode Island and Illinois currently distribute information regarding FAS through offices issuing marriage licenses. Last year, in response to a request from Senator John Binkley, the Alaska court system began distributing a pamphlet on FAS which was supplied by the March of Dimes. The purpose of this bill is to ensure that this practice becomes a permanent, on-going effort of the state in order to improve the health of babies in Alaska. Distribution of this information to the 315 health clinics in the state, 15 hospitals, and to the approximately 6000 marriage license applicants will cost the state less than \$10,000.

POSITION PAPER

House Bill No. 364

"An Act requiring marriage licensing officers to distribute information related to the health effects of alcohol consumption."

BACKGROUND

HB 364 requires the distribution of information regarding the dangers of the use of alcohol during pregnancy.

Fetal Alcohol Syndrome (FAS) is the term given to those infants who have been severely affected by the alcohol consumed by the mother during pregnancy. It is estimated that FAS may be the most common birth defect in the nation, although it has only been recently recognized. People must be given the information that drinking while pregnant is dangerous to the unborn child. HB 364 is an efficient and cost effective way to distribute information on this topic.

FAS information is currently being distributed by the court system using a brochure produced by the March of Dimes. Central supply at the court estimates that a maximum of 10,000 brochures are required for distribution each year. This allows one brochure to be given at the time of application for a marriage license and is sufficient for rural communities to include in a public information pamphlet rack.

POSITION:

The Department of Health and Social Services supports this legislation as a way to assure that information regarding the dangers of substance abuse during pregnancy are distributed throughout the State. Educating Alaskans is a critical first step in protecting babies from the harmful effects of FAS.

Recommended by:

Jay Long  
Sally Mead, Coordinator  
Office of Prevention

Date:

1-23-90

Approved by:

Myra M. Munson  
Myra M. Munson, Commissioner  
Department of Health and  
Social Services

Date:

1-23-90

POSITION PAPER/Department of Health & Social Services

TABLE I

## LIFETIME COST ESTIMATES OF SPECIFIC BIRTH DEFECTS IN FAS BIRTHS -- ALASKA

Birth Defect	Annual Cost per Patient	Number of Times or Years	Lifetime Cost per Patient	Prevalence	Number Per Yr (% x 26)	Lifetime Cost: All Born 1988
<b>ANNUAL FAS BIRTHS (29 BIRTHS; 26 SURVIVORS)</b>						
1 Neonatal Unit/Providence	99,740	1	99,740		11	1,097,140
2 Neonatal Physician	11,065	1	11,065		11	121,715
3 First Year Rehospitalization	13,470	1	13,470		3	40,410
4 Initial Audio Screening	100	1	100	52%	15	1,500
5 Audio Check-up	100	4	400	100%	26	10,400
6 Otitis Media Surgery	1,224	1	1,224	56%	15	18,360
7 Hearing Aid	1,260	14	17,640	33%	9	158,760
8 Hearing Aid Mold	50	65	3,250	33%	9	29,250
9 Heart Surgery	75,000	1	75,000	5%	1	75,000
10 Cleft Palate Surgery	65,000	1	65,000	12%	3	195,000
11 Infant Learning Program (HSS)	2,513	3	7,539	100%	26	196,014
12 H/C Child: phys defect (HSS)	8,700	18	156,600		7	1,096,200
12 H/C Child: devel delay (HSS)	8,700	3	26,100	58%	15	391,500
13 Minimal Special Eductn (DOE)	4,000	15	60,000	42%	11	660,000
14 Child Mental Retardation (DOE)	20,000	15	300,000	58%	15	4,500,000
15 DD Child (HSS)	25,000	18	450,000	58%	15	6,750,000
16 Alaska Youth Initiative (HSS)	90,000	12	1,080,000		1/2	540,000
17 DD Adult Initial Training(HSS)	45,000	3	135,000	58%	15	2,025,000
18 DD Adult Supervised Work (HSS)	22,500	44	990,000	58%	15	14,850,000
19 Institution	109,000	65	7,085,000	3%	1	7,085,000
Lifetime Costs for FAS Births: 1988						39,841,249
Lifetime Costs per FAS Birth			1,373,836			
<b>ANNUAL FAE BIRTHS AT TWICE FAS RATE (58)</b>						
20 Infant Learning Program (HSS)	2,513	3	7,539	58%	34	256,326
22 DD Child (HSS)	25,000	18	450,000	58%	34	15,300,000
23 Child Mental Retardation (DOE)	20,000	15	300,000	58%	34	10,200,000
24 DD Adult Initial Training(HSS)	45,000	3	135,000	58%	34	4,590,000
25 DD Adult Supervised Work (HSS)	22,500	44	990,000	58%	34	33,660,000
Lifetime Costs for FAE Births: 1988						64,006,326
Total FAS/FAE Births						103,847,575

NOTES TO FAS COST TABLE

Numbers refer to line numbers on the table.

1. Neonatal Unit. Charges per FAS patient in the Providence Hospital Neonatal Intensive Care Unit were \$68,910 in 1987 and \$130,570 in 1988, for an average of \$99,740. Average length of stay of FAS infants in the Neonatal Intensive Care Unit more than doubled between 1987 and 1988. It was 27 days in 1987 and 65 days in 1988 (v. 19.7 and 23.7 days for all low birthweight babies in the unit). Statistics provided by Lisa Wolf of Providence Hospital.
2. Neonatal Physician. Physician costs per FAS child were \$6,130 in 1987 and \$16,000 in 1988, for an average of \$11,065. Estimates by Sharon Lee of Alaska Neonatal-Perinatal Associates.
3. First-year rehospitalization. Cost estimate is based on 1988 Providence Hospital pediatric charges of \$900/day. The number of infants and average length of stay (12.5 days for moderately low birthweight infants and 16.2 days for very low birthweight babies) are from the National Institute of Medicine and are for all low birthweight infants. Applied to FAS births, these may be underestimates. Streissguth reports it is "usual" for FAS babies to be rehospitalized in the first few months of life.
4. Initial Audio Screening. The state audiologist, Communicative Disorders Program, Anchorage, reports all FAS children need a workup. This report estimates that 11 infants receive a workup in intensive care; the 15 remaining surviving infants are counted in this entry.

5. Audio Check-up. FAS children need three to four follow up checks. The \$100 charge is from the Alaska Treatment Center in Anchorage; the check-up estimate is from the state audiologist.
6. Otitis Media Surgery. Estimate is from the Geneva Woods Ear Nose and Throat Associates. Source of 56% prevalence is Harwood and Napolitano. These costs do not include less severe ear problems common to 93 percent of FAS patients (Alaska Treatment Center). Twenty-nine percent of FAS patients have permanent hearing loss.
7. Hearing Aid. A hearing aid for a baby costs \$1,260; it is replaced once every five years for life at this cost. Cost estimate from Alaska Treatment Center.
8. Hearing Aid Mold. A \$50 ear mold must be replaced annually. Estimate from Alaska Treatment Center.
9. Heart Surgery. Up to 70 percent of FAS patients have heart problems (Streissguth reports the portion at 30-40 percent; Hild reports 70 percent). Harwood and Napolitano report 10 percent require heart surgery, but reduce the estimate to 5 percent to reflect cases actually having surgery. Cost estimates from Vicki Hild, Alaska Native Health Board FAS coordinator.
10. Cleft Palate. Costs include an average of four surgeries, dental and orthodontics work. They do not include long term speech therapy at \$96/session twice or three times a week. Estimates from Vicki Hild. The 12% estimate is average of Abel and Sokol (11.5%) and Harwood and Napolitano (12.5%).

11. Infant Learning Program. Mary Diven of the state division of Maternal and Child Health reports these figures are "deceptively low", under estimating the true cost of rural service. Infant Learning Program costs as much as \$6,000/year in some rural areas.
12. Handicapped Children's Program. Cost estimates include averages for children with heart problems, cleft palate and developmental delay. Children with physical problems can be on the program for 21 years; children with developmental delays may be on the program for as few as three years. Cost estimates by Kathy Robinson, Maternal and Child Health, Alaska Department of Education. This report estimates that one child per year has heart problems (a low estimate in view of the 30 to 70 percent with heart problems); three have cleft palates; and three more have other physical problems such as spina bifida, progressive scoliosis, or severe visual and hearing loss.
13. Minimal Special Education. Costs cover only \$4,000/year for additional special education for learning disabled children, above normal operating and capital education costs (Tom Buckner, Department of Education). Christine Hagmeier of the Department of Health and Social Services cautions that patients with IQ's above 70 and below 100 "may well be more expensive than those with lower IQ's" because they can become involved in counselling, corrections and the law. These costs are not reflected in this report. The 42 percent prevalence estimate is from Streissguth.
14. Child Mental Retardation. Cost of special education for severely retarded children is \$20,000 - \$23,000/year, in addition to normal operating and capital education costs. Estimates from Tom Buckner, Department of Education.

15. Developmentally Disabled Child (HSS). Cost estimate by Christine Hagmeier of the Department of Health and Social Services. Costs can include foster care, in-home care, shared care, respite care, in-home training, advocacy and family support. Hagmeier reports that severely disabled children can cost between \$35,000 and \$85,000 with average cost of \$55,000.
16. Alaska Youth Initiative. Cost estimate from John Van Den Berg, Department of Health and Social Services. This is a program for 52 severely troubled youths. The average age is 15.8 years; the average number of failed housing placements is 16. Currently five FAS youths are in the program. This report estimates children remain on the program an average of 12 years (based on Van Den Berg's report that "absolute minimum lifetime costs per child are \$1 million".) It further assumes that one FAS child would enter this program every two years. Streissguth reports that aggressive behavior may be a problem for about 40% of the boys. Those from a less structured and protected environment may be "quick to anger when crossed and quick to strike out impulsively".
17. Developmentally Disabled Adult Initial Training. Costs include \$25,000 residential care (example: foster care and independent living) plus initial vocational rehabilitation costs of \$20,000, for a total of \$45,000. Initial vocational rehabilitation costs average between two and five years. Estimate by Christine Hagmeier.
18. Developmentally Disabled Adult Supervised Work. After initial rehabilitation costs (see #17 above), costs can "fade" to between \$10,000 and \$25,000 for lifetime residential care plus \$5,000 lifetime vocational rehabilitation care (Hagmeier). The average of this \$15,000 to \$30,000 range is \$22,500.

19. Institution. Estimate by Ellen Ganley, Governor's Council for the Handicapped and Gifted.
  
20. FAE Births. Annual FAE births are calculated in this report at twice that of FAS births. This is a conservative estimate. Hild believes the actual number of FAE births annually is ten times the FAS births (or 290 FAE births and 168 developmentally disabled FAE persons.) In this report, cost estimates for FAE births are limited to mental retardation. They do not include costs associated with mild learning disabilities, physical anomalies, child abuse, sexual abuse or the justice system.
  
21. See #11.
22. See #15.
23. See # 14.
24. See # 17.
25. See # 18.

# Violence against pregnant women also hurts unborn

LOS ANGELES (AP) — About one of every 12 pregnant women in a study of prenatal clinics was beaten by her male partner, making it more likely the babies died or suffered birth defects, the March of Dimes foundation said Friday.

"Battered women are four times more likely to deliver low-birthweight babies, and twice as likely to miscarry," compared to other mothers, said Betsy Berk-

hemer-Credaire of the group's Southern California chapter.

"Low-birthweight babies are more likely to be born with birth defects and more than 40 times more likely to die during the first month of life," she added.

Nurses, a prosecutor, the operator of a battered women's shelter and a woman who tearfully told how she was brutalized while pregnant joined Berk-

hemer-Credaire at a news conference.

They urged doctors and nurses to watch for signs of battering in their pregnant patients and to help document injuries so the assailants can be prosecuted. Battered women also should seek help and emergency shelter and leave their persecutors, they said.

Abuse against expectant mothers happens in all racial and

socioeconomic groups and ranges from "slaps, punches, fractured jaws and punctured eardrums all the way to being pushed down the stairs," said Anne Stewart Helton, a community health nurse consultant at Texas Women's University.

Helton conducted a foundation-financed study of 290 pregnant women randomly selected from public and private prenatal clinics in Houston.

errotth's group

# When drug babies reach school age

Los Angeles Times

LOS ANGELES — The 4-year-old girl in teacher Vicky Ferrera's preschool class had made remarkable progress, the high point of her year being when she learned to tie her shoes. Mastering that task, which her pals asked her to help them with, made the little girl proud.

Then, in one week, her class took a field trip, went to an assembly and entertained a visitor. To most 4-year-olds, the disruptions would have been easy to handle, even fun.

But the deviation from routine so crushed the 4-year-old's self-confidence that she suddenly forgot how to tie her shoes. She reestablished the skill only after Ferrera taught her how to do it again.

Though the incident may seem trivial, it is not in Ferrera's classroom, where such small matters are part of a bigger concern for the Los Angeles Unified School District, public educators and health experts nationwide. They all are beginning to deal with the emergence of a generation of children, like Ferrera's student, who are known simply as "drug babies."

These youngsters have been the focus of intense media scrutiny, which has etched into the public consciousness images of infants walling in hospital cribs as they suffer the effects of their mothers' abuse of alcohol, cocaine, phencyclidine (PCP) and other substances.

## Their aptitudes vary widely, their behavior is unpredictable

But what has been less publicized is that as the drug babies have grown — many now are reaching school age — their presence is prompting questions and concerns about their future in society.

In Los Angeles, the school district has taken the unusual — and, in some quarters, controversial — step of housing some drug babies, now ages 4 and 5, in three special classrooms in two inner city schools.

There, teachers like Ferrera are trying to identify instructional techniques to help get the drug babies back into regular classrooms as soon as possible.

Ferrera said it is too early in the school year to predict whether youngsters in the district program, who will be old enough, will be ready for first grade next fall.

Los Angeles is not alone in facing a daunting challenge of educating drug children. New York, Miami, Detroit and Philadelphia also can expect large numbers of drug babies to enroll in their schools, said Caryl Jones, a research psychologist at the National Institute on Drug Abuse.

Based on their studies, experts now believe this about the developing drug babies:

- They seem to display a wider range of academic ability than first

was anticipated. Dr. Ira Chasnoff, a prominent drug baby researcher at Northwestern University in Chicago, said he believes that their mothers' drug use will have widely varying effects on children's intellectual and educational development; many will qualify for gifted classes, many will be in normal programs and some will be permanently impaired.

- They are not supplying answers to a crucial, long-term question about their physical and mental health, as well as their educational achievement: Which is more damaging to the child — the physiologic damage from drug exposure or the harm of being raised in the social environment of drug abuse?

There is good evidence that environment plays the more significant role, say some experts, including Chasnoff and Dr. Rochelle Tyler, a University of California, Los Angeles pediatrician, Los Angeles school district physician and researcher.

Chasnoff said the arrival of drug babies in school systems has developed into enough of a trend nationally that school districts should start examining ways to deal with such children if they are not already doing so.

- "Drug babies are everywhere," Tyler said. "They're going to be in

private schools and in middle class areas. Cocaine, for instance, is a drug that everybody aspired to and has been widely used."

Both Tyler and Chasnoff are involved in long-term studies of dozens of drug babies. UCLA is following 40 youngsters born to poor women using PCP; they are being compared from birth to age 2 with 25 youngsters born at the same hospital to drug-free women.

The more ambitious Northwestern study is tracking 200 youngsters, now age 3, who were identified before birth as potential drug babies. Chasnoff said researchers in Chicago hope to follow the children as they enter schools.

"We're following some kids who were exposed to drugs but were adopted and are now being raised in middle-class, stable, drug-free homes," he said, noting it will be "interesting" to see if the children have similar behavioral disorders as those raised in their original homes.

Chasnoff and other experts emphasize that drug babies are far from a cohesive group. Their strengths and shortcomings can be expected to vary widely depending on what drugs, the amounts and when their mothers took the substances during pregnancy; alcohol, methadone, heroin, marijuana, PCP and cocaine have widely varying effects on the fetus.

**FISCAL NOTE**

**REQUEST:**

Revision Date: \_\_\_\_\_ Agency Affected: Health & Social Services  
 Title: An Act relating to requiring BRU: Administrative Services  
Marriage Licensing Officers to distribute  
 Sponsor: Representative Ulmer Components: Office of Prevention  
 Requestor: \_\_\_\_\_

**EXPENDITURES/REVENUES: (Thousands of Dollars)**

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	6.0					
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
<b>TOTAL OPERATING</b>	<b>6.0</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>

<b>CAPITAL</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>
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<b>REVENUE</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>
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**FUNDING: (Thousands of Dollars)**

GENERAL FUND	6.0	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS						
OTHER						
<b>TOTAL</b>	<b>6.0</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>

**POSITIONS:**

FULL-TIME						
PART-TIME						
TEMPORARY						

**ANALYSIS:** (Attach a separate page if necessary) FY90 Fiscal Impact is "0".  
 Based on the cost of a similar project, the Office of Prevention estimates that \$6,000 would be needed to prepare and print an Alaska specific brochure for distribution. Ongoing distribution costs will be absorbed within the Department of Health and Social Service current budget.

Prepared by: Sally Mead, Coordinator Phone: 561-4211  
 Division: Office of Prevention Date: \_\_\_\_\_

Approved by Commissioner: Myra M. Munson Date: 1-23-90  
 Agency: Department of Health & Social Services

**Distribution (by preparer):**

- Legislative Finance
- Legislative Sponsor
- Requestor
- Office of Management and Budget
- Impacted Agency(ies)

**HB**

**3641**

# SENATE FINANCE COMMITTEE REPORT

DATE: 4/20/90

FURTHER:

DATE TURNED INTO OFFICE: 5/1/90

The Finance Committee considered

CSHB 364 (HESS) am

"An Act relating to distribution of information about fetal health effects of alcohol consumption, chemical abuse, and battering during pregnancy."

and recommended:

replace with \_\_\_\_\_ CS \_\_\_\_\_  
 or adopt \_\_\_\_\_ CS \_\_\_\_\_

same title  
 new title  
 technical title change (HB only)

attached amendment(s)

\_\_\_\_\_ letter of intent adopted

do pass

do not pass

no recommendation

individual recommendations

further referral to \_\_\_\_\_

ATTACHES NEW FISCAL NOTE(S):

fiscal note(s) \_\_\_\_\_ Dept/Date: \_\_\_\_\_

zero fiscal note(s) \_\_\_\_\_

APPROVES PREVIOUS:

fiscal note(s) 12.2D/H/SS 2/22/90 Dept/Date: \_\_\_\_\_

zero fiscal note(s) DPS 2/9/90

appropriation-no fiscal note

SIGNING DO PASS:

[Signature]  
[Signature]  
[Signature]  
[Signature]

OTHER RECOMMENDATIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. [Signature] Do Pass 2. [Signature]  
Co-Chairs Signatures and Recommendations

## FISCAL NOTE

**REQUEST:**

Revision Date: 2/2/90  
Title: Relating to Requiring Marriage Licensing Officers to Distribute  
Sponsor: Representative Ulmer  
Requestor: \_\_\_\_\_

Agency Affected: Health & Social Services  
BRU: Administrative Services  
Components: Office of Prevention

**EXPENDITURES/REVENUES:** (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	6.0					
SUPPLIES	6.2	6.2	6.2	6.2	6.2	6.2
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
<b>TOTAL OPERATING</b>	<b>12.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>
<b>CAPITAL</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>
<b>REVENUE</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>

**FUNDING:** (Thousands of Dollars)

GENERAL FUND	12.2	6.2	6.2	6.2	6.2	6.2
FEDERAL FUNDS						
OTHER						
<b>TOTAL</b>	<b>12.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>	<b>6.2</b>

**POSITIONS:**

FULL-TIME						
PART-TIME						
TEMPORARY						

**ANALYSIS :** (Attach a separate page if necessary)

FY 90 Fiscal Impact is "0".

See attached for additional analysis.

Prepared by: Sally Mead, Coordinator Phone: 561-4211  
Division: Office of Prevention Date: \_\_\_\_\_  
Approved by Commissioner: Hyra W. Munson Date: 2/22/90  
Agency: Department of Health & Social Services

**Distribution (by preparer):**

Legislative Finance  
Legislative Sponsor  
Requestor  
Office of Management and Budget  
Impacted Agency(ies)

Adopted

FISCAL NOTE FOR CSHB 364 (HESS)

"An Act requiring marriage licensing officers to  
distribute . . . ."

Analysis:

Based on the cost of a similar project, the Office of Prevention estimates that \$6,000 would be needed to prepare and print an Alaska-specific brochure for distribution. Additionally, the Department estimates that approximately 25,000 brochures per year will be needed for distribution to public hospitals, clinics, and health facilities in the State, in accordance with sec. 1 of the bill. We estimate that each brochure will cost \$.25 to duplicate for a total duplication cost of \$6,250.

FISCAL NOTE

REQUEST:

Revision Date: \_\_\_\_\_  
Title: Information on fetal health ef-  
fects of battering during pregnancy  
Sponsor: Rep. Ulmer, Rep. Ellis  
Requestor: House Finance

Agency Affected: Public Safety  
BRU: Council on Domestic Violence  
and Sexual Assault  
Component: \_\_\_\_\_

EXPENDITURES/REVENUES: (Thousands of Dollars) (Inflation not included)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0	0	0	0	0	0

CAPITAL	0	0	0	0	0	0
---------	---	---	---	---	---	---

REVENUE	0	0	0	0	0	0
---------	---	---	---	---	---	---

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER/PROG RCPT						
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary)

Passage of this bill is expected to have no fiscal impact on the Department of Public Safety.

Prepared by: Barbara Miklos, Executive Director  
Division: Council on Domestic Violence and  
Sexual Assault  
Approved by Commissioner: Arthur English  
Agency: Department of Public Safety

Phone: 465-4356  
Date: 2/8/90  
Date: 2-10-90  
Page 1 of 1

Adopted

2/16/90

Original sponsor(s): REP. ULMER, Ellis

1 IN THE HOUSE BY THE HESS COMMITTEE

2 CS FOR HOUSE BILL NO. 364 (HESS) am  
3 IN THE LEGISLATURE OF THE STATE OF ALASKA  
4 SIXTEENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to distribution of information about  
7 fetal health effects of alcohol consumption, chemical  
8 abuse, and battering during pregnancy."

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10 \* Section 1. AS 18.05 is amended by adding a new section to read:

11 Sec. 18.05.037. FETAL HEALTH EFFECTS. The department shall  
12 prepare or obtain distributable information on fetal alcohol effects  
13 and the fetal health effects of chemical abuse and battering during  
14 pregnancy. The department shall make this information available to  
15 public hospitals, clinics, and other health facilities in the state  
16 for distribution to their patients.

17 \* Sec. 2. AS 25.05.111 is amended by adding a new subsection to read:

18 (b) With a license issued under (a) of this section, the licen-  
19 ing officer shall also give to the parties written information about  
20 fetal alcohol effects and the fetal health effects of chemical abuse  
21 and battering during pregnancy. The Department of Health and Social  
22 Services shall prepare or obtain this information and submit it in  
23 distributable form to each licensing officer in the state.

HB 364

# Alaska State Legislature

HOUSE OF REPRESENTATIVES



## REPRESENTATIVE FRAN ULMER

MEMORANDUM  
April 30, 1990

TO: Senator John Binkley, Co-Chair  
Senator Rick Uehling, Co-Chair  
Senate Finance Committee

FROM: Rep. *[Signature]* Fran Ulmer

TO: CSHB 364, relating to the distribution of information about fetal health effects of alcohol consumption, chemical abuse and battering during pregnancy

-----  
CSHB 364 requires the state to distribute information regarding Fetal Alcohol Syndrome (FAS), and the effects of drug abuse and battering during pregnancy. This information is to be distributed to public hospitals and health clinics, as well as with each marriage license issued by the state.

Children born with FAS suffer from a combination of irreversible physical and mental birth defects caused when alcohol crosses the placenta and damages the fetus. These defects include:

- (1) Pre and/or post natal growth retardation (weight, length, and/or head circumference below the tenth percentile);
- (2) Central nervous system problems (intellectual impairment, developmental delay, and neurological abnormality);
- (3) Characteristic facial features (including crossed eyes, small eyes, short nose, or abnormalities of the mouth such as cleft palate).

Alaska has the highest estimated incidence of FAS births in the nation. Certain portions of the state record the highest FAS rate among any population in the world (e.g., nationally: 1.7 per 1,000 births; Copper River, Alaska: 250 per 1,000 births). FAS ranks as the number one cause of congenital mental retardation in Alaska. It is the only cause of mental retardation which is totally preventable.

Approximately 29 babies are born each year with FAS in Alaska; 26 of these survive the first year. Ten years ago, almost all of these infants died at birth. Today, the developments of medical technology keep them alive. However, the costs associated with FAS and FAE children are staggering and few, if any, families can afford to pay them. FAS babies typically need intensive hospital care at birth, at an average cost of \$2,400 per day. Hospital costs per FAS birth average \$99,740; physician fees average \$11,065 per birth, for a total of \$110,805 per child. It is common for FAS babies to be rehospitalized during the first year, at an average cost of \$40,410 per hospital stay.

In addition, 10 times as many babies are born with a lesser set of symptoms known as Fetal Alcohol Effects (FAE). These children, while less severely damaged, may actually have a greater financial impact on state and community services. For example, the IQ of the average FAS baby is below 70; FAE babies' IQ ranges between 70 and 100. It is these children who typically require added counseling, legal and corrections services.

The attached chart itemizes the costs associated with each FAS and FAE patient. The lifetime cost per FAS birth is approximately \$1.4 million. This figure reflects only the most basic medical and therapeutic services necessary. It does not include the additional financial and social costs of welfare payments, child abuse, sexual abuse, learning disabilities and incarceration.

In addition to FAS and FAE, Alaska is increasingly experiencing the effects of substance abuse during pregnancy. Crack and drug addicted babies demonstrate striking abnormalities in their emotions. They have serious difficulty relating to their world, making friends, or feeling love for their mothers.

Battering a pregnant woman also poses significant risks to the fetus. One of every 12 pregnant women in Alaska is beaten by a male partner. These women are 4 times more likely to deliver low birthweight babies and twice as likely to miscarry. While abuse against expectant mothers occurs in all racial and socioeconomic groups, anecdotal evidence indicates that, during pregnancy, physical abuse may become more severe and will be directed toward the fetus.

Education, through efforts like the brochure proposed in CSHB 364, is the surest route to prevention of these tragic and costly conditions. Oregon, Wisconsin, New Hampshire, Rhode Island and Illinois currently distribute information regarding FAS through offices issuing marriage licenses. Last year, in response to a request from Senator John Binkley, the Alaska court system began distributing a pamphlet on FAS which was supplied by the March of Dimes. The purpose of this bill is to ensure that this practice becomes a permanent, on-going effort of the state in order to improve the health of babies in Alaska. Distribution of this information to the 315 health clinics in the state, 15 hospitals, and to the approximately 6000 marriage license applicants will cost the state less than \$10,000 annually.

attachments

TABLE I

## LIFETIME COST ESTIMATES OF SPECIFIC BIRTH DEFECTS IN FAS BIRTHS -- ALASKA

Birth Defect	Annual Cost per Patient	Number of Times or Years	Lifetime Cost per Patient	Prevalence	Number Per Yr (% x 26)	Lifetime Cost: All Born 1988
<b>ANNUAL FAS BIRTHS (29 BIRTHS; 26 SURVIVORS)</b>						
1 Neonatal Unit/Providence	99,740	1	99,740		11	1,097,140
2 Neonatal Physician	11,065	1	11,065		11	121,715
3 First Year Rehospitalization	13,470	1	13,470		3	40,410
4 Initial Audio Screening	100	1	100	52%	15	1,500
5 Audio Check-up	100	4	400	100%	26	10,400
6 Otitis Media Surgery	1,224	1	1,224	56%	15	18,360
7 Hearing Aid	1,260	14	17,640	33%	9	158,760
8 Hearing Aid Mold	50	65	3,250	33%	9	29,250
9 Heart Surgery	75,000	1	75,000	5%	1	75,000
10 Cleft Palate Surgery	65,000	1	65,000	12%	3	195,000
11 Infant Learning Program (HSS)	2,513	3	7,539	100%	26	196,014
12 H/C Child: phys defect (HSS)	8,700	18	156,600		7	1,096,200
H/C Child: devel delay (HSS)	8,700	3	26,100	58%	15	391,500
13 Minimal Special Educatn (DOE)	4,000	15	60,000	42%	11	660,000
14 Child Mental Retardation (DOE)	20,000	15	300,000	58%	15	4,500,000
15 DD Child (HSS)	25,000	18	450,000	58%	15	6,750,000
16 Alaska Youth Initiative (HSS)	90,000	12	1,080,000		1/2	540,000
17 DD Adult Initial Training(HSS)	45,000	3	135,000	58%	15	2,025,000
18 DD Adult Supervised Work (HSS)	22,500	44	990,000	58%	15	14,850,000
19 Institution	109,000	65	7,085,000	3%	1	7,085,000
Lifetime Costs for FAS Births: 1988						39,841,249
Lifetime Costs per FAS Birth			1,373,836			
<b>ANNUAL FAE BIRTHS AT TWICE FAS RATE (58)</b>						
20 Infant Learning Program (HSS)	2,513	3	7,539	58%	34	256,326
22 DD Child (HSS)	25,000	18	450,000	58%	34	15,300,000
23 Child Mental Retardation (DOE)	20,000	15	300,000	58%	34	10,200,000
24 DD Adult Initial Training(HSS)	45,000	3	135,000	58%	34	4,590,000
25 DD Adult Supervised Work (HSS)	22,500	44	990,000	58%	34	33,660,000
Lifetime Costs for FAE Births: 1988						64,006,326
Total FAS/FAE Births						103,847,575

NOTES TO FAS COST TABLE

Numbers refer to line numbers on the table.

1. Neonatal Unit. Charges per FAS patient in the Providence Hospital Neonatal Intensive Care Unit were \$68,910 in 1987 and \$130,570 in 1988, for an average of \$99,740. Average length of stay of FAS infants in the Neonatal Intensive Care Unit more than doubled between 1987 and 1988. It was 27 days in 1987 and 65 days in 1988 (v. 19.7 and 23.7 days for all low birthweight babies in the unit). Statistics provided by Lisa Wolf of Providence Hospital.
2. Neonatal Physician. Physician costs per FAS child were \$6,130 in 1987 and \$16,000 in 1988, for an average of \$11,065. Estimates by Sharon Lee of Alaska Neonatal-Perinatal Associates.
3. First-year rehospitalization. Cost estimate is based on 1988 Providence Hospital pediatric charges of \$900/day. The number of infants and average length of stay (12.5 days for moderately low birthweight infants and 16.2 days for very low birthweight babies) are from the National Institute of Medicine and are for all low birthweight infants. Applied to FAS births, these may be underestimates. Streissguth reports it is "usual" for FAS babies to be rehospitalized in the first few months of life.
4. Initial Audio Screening. The state audiologist, Communicative Disorders Program, Anchorage, reports all FAS children need a workup. This report estimates that 11 infants receive a workup in intensive care; the 15 remaining surviving infants are counted in this entry.

5. Audio Check-up. FAS children need three to four follow up checks. The \$100 charge is from the Alaska Treatment Center in Anchorage; the check-up estimate is from the state audiologist.
6. Otitis Media Surgery. Estimate is from the Geneva Woods Ear Nose and Throat Associates. Source of 56% prevalence is Harwood and Napolitano. These costs do not include less severe ear problems common to 93 percent of FAS patients (Alaska Treatment Center). Twenty-nine percent of FAS patients have permanent hearing loss.
7. Hearing Aid. A hearing aid for a baby costs \$1,260; it is replaced once every five years for life at this cost. Cost estimate from Alaska Treatment Center.
8. Hearing Aid Mold. A \$50 ear mold must be replaced annually. Estimate from Alaska Treatment Center.
9. Heart Surgery. Up to 70 percent of FAS patients have heart problems (Streissguth reports the portion at 30-40 percent; Hild reports 70 percent). Harwood and Napolitano report 10 percent require heart surgery, but reduce the estimate to 5 percent to reflect cases actually having surgery. Cost estimates from Vicki Hild, Alaska Native Health Board FAS coordinator.
10. Cleft Palate. Costs include an average of four surgeries, dental and orthodontics work. They do not include long term speech therapy at \$96/session twice or three times a week. Estimates from Vicki Hild. The 12% estimate is average of Abel and Sokol (11.5%) and Harwood and Napolitano (12.5%).

11. Infant Learning Program. Mary Diven of the state division of Maternal and Child Health reports these figures are "deceptively low", under estimating the true cost of rural service. Infant Learning Program costs as much as \$6,000/year in some rural areas.
12. Handicapped Children's Program. Cost estimates include averages for children with heart problems, cleft palate and developmental delay. Children with physical problems can be on the program for 21 years; children with developmental delays may be on the program for as few as three years. Cost estimates by Kathy Robinson, Maternal and Child Health, Alaska Department of Education. This report estimates that one child per year has heart problems (a low estimate in view of the 30 to 70 percent with heart problems); three have cleft palates; and three more have other physical problems such as spina bifida, progressive scoliosis, or severe visual and hearing loss.
13. Minimal Special Education. Costs cover only \$4,000/year for additional special education for learning disabled children, above normal operating and capital education costs (Tom Buckner, Department of Education). Christine Hagmeier of the Department of Health and Social Services cautions that patients with IQ's above 70 and below 100 "may well be more expensive than those with lower IQ's" because they can become involved in counselling, corrections and the law. These costs are not reflected in this report. The 42 percent prevalence estimate is from Streissguth.
14. Child Mental Retardation. Cost of special education for severely retarded children is \$20,000 - \$23,000/year, in addition to normal operating and capital education costs. Estimates from Tom Buckner, Department of Education.

15. Developmentally Disabled Child (HSS). Cost estimate by Christine Hagmeier of the Department of Health and Social Services. Costs can include foster care, in-home care, shared care, respite care, in-home training, advocacy and family support. Hagmeier reports that severely disabled children can cost between \$35,000 and \$85,000 with average cost of \$55,000.
16. Alaska Youth Initiative. Cost estimate from John Van Den Berg, Department of Health and Social Services. This is a program for 52 severely troubled youths. The average age is 15.8 years; the average number of failed housing placements is 16. Currently five FAS youths are in the program. This report estimates children remain on the program an average of 12 years (based on Van Den Berg's report that "absolute minimum lifetime costs per child are \$1 million".) It further assumes that one FAS child would enter this program every two years. Streissguth reports that aggressive behavior may be a problem for about 40% of the boys. Those from a less structured and protected environment may be "quick to anger when crossed and quick to strike out impulsively".
17. Developmentally Disabled Adult Initial Training. Costs include \$25,000 residential care (example: foster care and independent living) plus initial vocational rehabilitation costs of \$20,000, for a total of \$45,000. Initial vocational rehabilitation costs average between two and five years. Estimate by Christine Hagmeier.
18. Developmentally Disabled Adult Supervised Work. After initial rehabilitation costs (see #17 above), costs can "fade" to between \$10,000 and \$25,000 for lifetime residential care plus \$5,000 lifetime vocational rehabilitation care (Hagmeier). The average of this \$15,000 to \$30,000 range is \$22,500.

February 17, 1989  
Page 23

19. Institution. Estimate by Ellen Ganley, Governor's Council for the Handicapped and Gifted.
20. FAE Births. Annual FAE births are calculated in this report at twice that of FAS births. This is a conservative estimate. Hild believes the actual number of FAE births annually is ten times the FAS births (or 290 FAE births and 168 developmentally disabled FAE persons.) In this report, cost estimates for FAE births are limited to mental retardation. They do not include costs associated with mild learning disabilities, physical anomalies, child abuse, sexual abuse or the justice system.
21. See #11.
22. See #15.
23. See # 14.
24. See # 17.
25. See # 18.

DEPARTMENT OF PUBLIC SAFETY

BILL NO: CSHB 364 (HESS)

DATE: February 9, 1990

TITLE: Distribution of information about fetal health effects of ... battering during pregnancy

CONTACT: Barbara Miklos  
465-4356

The Council on Domestic Violence and Sexual Assault supports CSHB 364 (HESS) which requires the Department of Health and Social Services to prepare information on, among other things, the fetal health effects of battering. Since pregnant women are at high risk for battering, it is important to inform prospective parents about increased risk during pregnancy, the danger to mother and fetus, and services available to prevent battering and/or provide safety to pregnant women.

Battering is always dangerous to women and children. In Alaska, in 1987, 38% of murders of Alaskan women were committed by husbands or boyfriends. A study conducted by the University of Alaska in 1986 showed that at least 13,500 women living in Alaska required medical treatment by a doctor or hospital for injuries sustained by abuse. Children raised in violent homes suffer trauma from being raised in the violent home and are more likely to be physically and/or sexually abused.

In a study conducted in Texas, of those pregnant women being abused, 40 - 60% stated that the battering had either begun or escalated since the discovery of pregnancy. 65% of those abused had not talked with anyone about the abuse. Both of these findings are consistent with findings in other studies. A March of Dimes study showed that battered women are four times more likely to deliver low birth weight babies and twice as likely to miscarry. Low birth weight babies are more likely to be born with birth defects and more likely to die the first month of life.

The Council would like to request that the language in the legislation Section 1, Line 2, be changed to "The Department, in consultation with the Council on Domestic Violence and Sexual Assault, prepare distributable ..." and in Section 2, Line 22, "The Department of Health and Social Services, in consultation with the Council on Domestic Violence and Sexual Assault, will prepare ...". It is important that information about current services in Alaska, as well as information about the dynamics and consequences of battering, be included in the pamphlet.

*Arthur English*  
Arthur English  
Commissioner

**POSITION PAPER**

House Bill No. 364

"An Act requiring marriage licensing officers to distribute information related to the health effects of alcohol consumption."

BACKGROUND

HB 364 requires the distribution of information regarding the dangers of the use of alcohol during pregnancy.

Fetal Alcohol Syndrome (FAS) is the term given to those infants who have been severely affected by the alcohol consumed by the mother during pregnancy. It is estimated that FAS may be the most common birth defect in the nation, although it has only been recently recognized. People must be given the information that drinking while pregnant is dangerous to the unborn child. HB 364 is an efficient and cost effective way to distribute information on this topic.

FAS information is currently being distributed by the court system using a brochure produced by the March of Dimes. Central supply at the court estimates that a maximum of 10,000 brochures are required for distribution each year. This allows one brochure to be given at the time of application for a marriage license and is sufficient for rural communities to include in a public information pamphlet rack.

POSITION:

The Department of Health and Social Services supports this legislation as a way to assure that information regarding the dangers of substance abuse during pregnancy are distributed throughout the State. Educating Alaskans is a critical first step in protecting babies from the harmful effects of FAS.

Recommended by:

Sally Mead  
Sally Mead, Coordinator  
Office of Prevention

Date:

1-23-90

Approved by:

Myra M. Munson  
Myra M. Munson, Commissioner  
Department of Health and  
Social Services

Date:

1-23-90

# Alaska State Legislature

HOUSE OF REPRESENTATIVES



REPRESENTATIVE FRAN ULMER

MEMORANDUM

April 24, 1990

TO: Members, Senate Finance Committee

FROM: Rep. Fran Ulmer

RE: CSHB 364, relating to the distribution of information about fetal health effects of alcohol consumption, chemical abuse and battering during pregnancy

-----

CSHB 364 requires the state to distribute information regarding Fetal Alcohol Syndrome (FAS), and the effects of drug abuse and battering during pregnancy. This information is to be distributed to public hospitals and health clinics, as well as with each marriage license issued by the state.

Each of these conditions has serious and long lasting, but preventable, effects on the health of the child. FAS alone costs approximately \$1.4 million per FAS birth, costs which are primarily borne by the state.

Preventing these costly conditions is effectively addressed through education efforts. The Department of Health and Social Services estimates that it will cost less than \$10,000 annually to print and distribute this information. Last year Senator Binkley asked the Court System to undertake this effort and distribute information regarding FAS with each marriage license issued by the state. CSHB 364 will ensure that this effort is institutionalized and becomes a permanent part of the state's prevention program.

## **CSHB 478 (C&RA)-Solid Waste Management legislation**

CSHB 478 (C&RA) is an important first step towards implementation of a solid waste management plan for Alaska that will also include waste reduction and recycling options. This legislation provides communities with assistance from DEC, both financial and technical, in order to make wise decisions regarding solid waste management needs at the community level.

CSHB 478 (C&RA) would:

- 1) Provide planning and technical assistance grants to local communities (or regional groups) of up to \$50,000 for solid waste management planning, so that communities have the ability to explore reduction, recycling and other management options.
- 2) Expand the Department of Environmental Conservation's current efforts in hazardous waste reduction and recycling to include solid waste, and thus allowing the department to provide, among other services:
  - \* technical assistance to communities in the areas of waste reduction, recycling and the separate management of troublesome wastes, etc;
  - \* a more comprehensive analysis of the full range of solid waste management options available to Alaskan communities, including small scale recycling and disposal technologies; and
  - \* a waste reduction and recycling hotline.
- 3) Establish a preferred hierarchy of solid waste management options so that the state would be "on the record" favoring waste reduction, recycling and appropriate treatment of specific wastes rather than "business as usual" -continuing to generate, at an increasing rate, waste destined for disposal.
- 4) Ensure that communities and industrial solid waste facility operators begin to focus on waste reduction and recycling by asking that the preferred hierarchy of management options be considered as part of the solid waste disposal facility permit process.

Several amendments were adopted by the C&RA Committee. One amendment changed the order of priorities which DEC uses to consider awarding planning grants by listing consideration of the severity of environmental or public health concerns first. Another amendment added a new subsection which states that DEC may waive the match required for grants if an applicant can prove that matching funds are not available.

A letter of intent was also included which states that this legislation will not supersede a community's efforts to obtain safe water and hygienic sewage disposal, nor will it alter the status of these health and safety concerns for DEC.

This legislation is supported by the Alaska Municipal League, over 60 schools from across the state, recycling groups from Anchorage, Petersburg and Juneau, environmental organizations, and thousands of Alaskan citizens who have signed recycling petitions.

## **HB 372-relating to creation of a vessel replacement fund for the Alaska Marine Highway**

CSHB 372 (Fin) would create a vessel replacement fund within the general fund which would allow money to accumulate until such time as the replacement of vessels in the Alaska Marine Highway System (AMHS) is needed.

Because of the large capital outlay that will be needed to replace vessels in the future, I feel that a funding mechanism should be put in place now to help ensure that the financial commitment the state has made to the AMHS will continue.

The state experiences many problems as a result of our aging fleet, including significant time when vessels are being repaired and thus unable to meet schedules. The Department of Transportation and Public Facilities (DOT/PF) estimates that the average age of our fleet is 22 years, with the oldest ship having been built in 1963, and the newest in 1977. The cost of replacing smaller vessels may run from \$17 to \$25 million and estimates of replacing a larger vessel could run as high as \$59 million. The cost of replacing the entire fleet could be an astronomical \$270 million!

The bill passed by the House allows the legislature to also appropriate money for this fund from program receipts received from the Alaska Marine Highway System, and from settlement of the Dinkum Sands and Amerada Hess litigation.

HB

365

**HOUSE COMMITTEE REPORT**

~~FILE~~  
FILE

(11)

Date Referred: February 22, 1990

FURTHER REFERRALS:

Date of Committee Action: 3/22/90

The FINANCE Committee considered:

HB 365

HOUSE BILL NO. 365

PFD CHECKOFF FOR ALC/DRUG ABUSE GRANTS

"An Act relating to the alcohol and drug abuse grant fund and contributions to the fund; and providing for an effective date."

RECOMMENDATIONS:

- be replaced with CS HB 365 (HFS)  the same title
- a new title
- have attached amendment(s)
- do pass
- do not pass
- no recommendation
- individual recommendations
- additional referral to the \_\_\_\_\_ Committee

ADOPTS: \_\_\_\_\_ letter of intent

ATTACHES NEW FISCAL NOTE(S):  
(Dept)

APPROVES PREVIOUS: (Date/Dept)

- fiscal impact REV
- zero fiscal note HFS
- zero with analysis \_\_\_\_\_

- fiscal note(s) \_\_\_\_\_
- zero fiscal note(s) \_\_\_\_\_
- zero fn/analysis \_\_\_\_\_

SIGNING DO PASS:

SIGNING:  
(Check approp. column)

Do Not Pass  
No Rec  
Amend

Ronald J. Larson LARSON

Steve Rieger RIEGER

Bob Brown BROWN

John Keenan KEENAN

Al Ulmer ULMER

Dan Barnes BARNES

Bob Phillips PHILLIPS

Kay Wallis WALLIS

	Do Not Pass	No Rec	Amend
<u>Dick Shultz</u> Shultz	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Steve Rieger</u> Rieger	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Ronald J. Larson  
Chairman's Signature

FISCAL NOTE

REQUEST

Revision Date: February 20, 1990  
Title: Alcohol and drug abuse grant fund and contributions to the fund  
Sponsor: ULMER, Boyer, Ellis, et al  
Requestor: House State Affairs

Agency Affected: Revenue  
BRU: Permanent Fund Dividend Division  
Components: Permanent Fund Dividend Division

EXPENDITURES/REVENUES: (Thousands of Dollars)

	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
OPERATING						
PERSONAL SERVICES	24.1	11.9	11.9	11.9	11.9	11.9
TRAVEL	-0-	-0-	-0-	-0-	-0-	-0-
CONTRACTUAL	5.0	5.0	5.0	5.0	5.0	5.0
SUPPLIES	0.2	0.2	0.2	0.2	0.2	0.2
EQUIPMENT	-0-	-0-	-0-	-0-	-0-	-0-
LANDS & STRUCTURES	-0-	-0-	-0-	-0-	-0-	-0-
GRANTS, CLAIMS	-0-	-0-	-0-	-0-	-0-	-0-
MISCELLANEOUS	-0-	-0-	-0-	-0-	-0-	-0-
TOTAL OPERATING	29.3	17.1	17.1	17.1	17.1	17.1
CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
REVENUE	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING: (Thousands of Dollars)

GENERAL FUND	29.3	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS	-0-	-0-	-0-	-0-	-0-	-0-
OTHER	-0-	17.1	17.1	17.1	17.1	17.1
TOTAL	29.3	17.1	17.1	17.1	17.1	17.1

POSITIONS:

FULL-TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART-TIME	3	2	2	2	2	2
TEMPORARY	-0-	-0-	-0-	-0-	-0-	-0-

ANALYSIS: See attached.

Prepared By: Ervin Jones  
Division: Permanent Fund Dividend Division

Phone: 465-2323  
Date: February 20, 1990

Approved by Commissioner: [Signature]  
Agency: Revenue

Date: 2/20/90

Distribution (by preparer):  
Legislative Finance  
Legislative Sponsor  
Requestor  
Office of Management and Budget  
Impacted Agency(ies)

Adopted

1  
Department of Revenue  
Permanent Fund Dividend Division  
Fiscal Note Analysis  
CS HB 365 (HESS)  
February 20, 1990

Assumptions:

1. The bill will take effect for the 1991 permanent fund dividend year and application. It is too late to amend the 1990 dividend application.
2. There are other bills which if signed into law, would result in some form of "check-off" on the 1991 dividend application. The Department of Revenue has no insight as to which, and how many, of these bills will become law. This fiscal note is prepared on the assumption that the subject bill is the only bill of this nature which will become law. The passage of multiple bills with varying formulas will inevitably have a compounding effect. Whereas there may be savings in some areas, there will be increased costs in others.
3. Income from the account will not be available until FY92, and a general fund appropriation will be required in FY91. The costs of administering this law will be borne by the trust fund in FY92 and subsequent years.
4. The incremental cost of computer resources will result in a chargeback by the Department of Administration.
5. Whereas the cost of programming changes will be a one-time cost, the cost of document review, data capture, and data processing chargeback will be continuing.
6. Contributions will only be honored to the extent of available funds. Garnishments and assignments will take precedence in the order established by statute. Contributions and elections will then be honored in the order listed on the form schedule, which will be in the order they become law.
7. The check-off will apply to both adult and child applications.

Program Summary:

The provision of a new contribution decision on the dividend application will cause additional administrative cost in several areas:

- a) The computer system will need to be changed to account for the change in the program, to establish new accounting controls and to provide for the transfer of funds to the alcohol and drug abuse grant fund (see Attachment A).
- b) Each of approximately 525,000 PFD applications will need to be visually reviewed and coded as to decision on the contribution decision. Each application will be data captured with additional attention and keystrokes expended on each positive decision.

Department of Revenue  
 Permanent Fund Dividend Division  
 Fiscal Note Analysis  
 CS HB 365 (HESS)  
 February 20, 1990

1. Positions

	<u>FY 90</u>	<u>FY 91</u>
1 PPT Analyst/Programmer V, R21 @ \$6,110.86/Mo including salary and benefits for 2 months	= \$12.2	

PCN 04-1125 would be funded for an additional two months, in accordance with Attachment A. Ongoing maintenance of new programs would be accomplished by existing staff.

1 PPT Document Processor I, R7 @ \$2,340.37/Mo, including salary and benefits for 3 months	=	\$7.0	\$7.0
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This position would assist in the manual review and coding of 525,000 applications for the new contribution decision. This position represents the equivalent of the additional time and effort.

1 PPT Data Processing Clerk I, R8, @ \$2,446.08/Mo, including salary and benefits for 2 months	=	\$4.9	\$4.9
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This position would assist in the data capture of the additional contribution decision. The position represents the equivalent value of the additional time and effort.

TOTAL Personal Services	\$24.1	\$11.9
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2. Other Expenditures:

a) <u>Travel:</u>	\$0.0	\$0.0
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b) Contractual:		
Data Processing Chargeback	\$5.0	\$5.0

c) Supplies:	\$0.2	\$0.2
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d) Equipment: Use existing equipment	<u>\$0.0</u>	<u>\$0.0</u>
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TOTAL COST	<u>\$29.3</u>	<u>\$17.1</u>
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Department of Revenue  
Permanent Fund Dividend Division  
Fiscal Note Analysis  
CS HB 365 (HESS)  
February 20, 1990

3. Funding: General Fund in FY91, thereafter from the special dividend contribution account.

4. Section Cost Analysis: N/A.

Computations: N/A.

Economic Impact: N/A.

Impact on Local Government: N/A.

Suggested Amendments: None.

Attachments: Attachment A: "Summary of DP Needs"

Department of Revenue  
Permanent Fund Dividend Division  
Fiscal Note Analysis  
CS HB 365 (HESS)  
Summary of Data Processing Requirements  
February 20, 1990

Wang data entry processing	75.0 hours
Includes: Data entry	
Batch lists	
Corrections	
Wang to IBM transfer	
IBM Update jobs	30.0 hours
Includes: Edits	
Batch listings	
Log sheets	
DMS Online programs for lookup and changes	37.5 hours
Nightly Update of Changes	22.5 hours
Warrant Jobs	90.0 hours
Includes: Printing warrants with different amounts. Include check stub messages. Modify warrant registers as needed for balancing. Create new program(s) for transferring accumulated decisions to the alcohol and drug abuse grant fund, and to account for the reserve necessary due to returned and cancelled PFD warrants.	
Miscellaneous	
45.0 hours	
Includes: Setting up test files on IBM Systems testing Administrative functions, i.e. paper work required by Admin. DP to add files and programs to tables.	
TOTAL HOURS	300.0 hours

FISCAL NOTE

REQUEST:

Revision Date: \_\_\_\_\_  
Title: "An Act relating to the alcohol and drug abuse grant fund."  
Sponsor: Ulmer  
Requestor: \_\_\_\_\_

Agency Affected: Health & Social Services  
BRU: Alcohol & Drug Abuse Services  
Components: Grants

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
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REVENUE	-0-	-0-	-0-	-0-	-0-	-0-
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART-TIME	-0-	-0-	-0-	-0-	-0-	-0-
TEMPORARY	-0-	-0-	-0-	-0-	-0-	-0-

ANALYSIS : (Attach a separate page if necessary)

The FY 90 fiscal impact is zero.

Prepared by: Matthew C. Felix *Matthew C. Felix* Phone: 586-6201  
Division: Alcoholism & Drug Abuse Date: 1/23/90

Approved by Commissioner: *Mike M. Munson* Date: 1/24/90  
Agency: Health & Social Services

Distribution (by preparer):

- Legislative Finance
- Legislative Sponsor
- Requestor
- Office of Management and Budget
- Impacted Agency(ies)

Adopted

Original sponsor(s): REP. ULMER, Boyer, Ellis, Brown, Menard, Finkelstein,  
Gruenberg, Koponen

1 IN THE HOUSE

BY THE HESS COMMITTEE

2

CS FOR HOUSE BILL NO. 365 (HESS)

3

IN THE LEGISLATURE OF THE STATE OF ALASKA

4

SIXTEENTH LEGISLATURE - SECOND SESSION

5

A BILL

6

For an Act entitled: "An Act relating to the alcohol and drug abuse grant  
fund and contributions to the fund; and providing for  
an effective date."

7

8

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10 \* Section 1. AS 43.23 is amended by adding a new section to read:

11 Sec. 43.23.016. CONTRIBUTIONS FROM DIVIDENDS. The department  
12 shall prepare the permanent fund dividend application to allow an  
13 applicant or person applying on behalf of a minor or incompetent  
14 individual to elect to have \$10 subtracted from the dividend check and  
15 contributed to the alcohol and drug abuse grant fund (AS 47.37.055).  
16 Contributions shall be deposited in a special dividend contribution  
17 account and allocated by the department to the alcohol and drug abuse  
18 grant fund, except that the department shall use money in the account  
19 to pay administrative costs incurred by the department under this  
20 section.

21 \* Sec. 2. AS 47.37 is amended by adding a new section to read:

22 Sec. 47.37.055. ALCOHOL AND DRUG ABUSE GRANT FUND. (a) There  
23 is established in the department the alcohol and drug abuse grant  
24 fund, which shall be administered by the office. The fund consists of  
25 money appropriated to it and donations, gifts, and grants received by  
26 it. The fund may be used by the office only to make grants for alco-  
27 hol and drug abuse prevention or treatment programs approved by the  
28 office and for costs of administering the grant fund. Priority in the  
29 award of grants shall be given to programs aimed at youth.

1           (b) The department shall by regulation establish grant eligibil-  
2           ity requirements and grant application procedures.  
3           \* Sec. 3. This Act takes effect January 1, 1991.

# Alaska State Legislature

## HOUSE OF REPRESENTATIVES



### REPRESENTATIVE FRAN ULMER

#### MEMORANDUM

March 20, 1990

TO: Rep. Ron Larson, Co-Chair  
Rep. Lyman Hoffman, Co-Chair

FROM: Rep. Fran Ulmer

RE: CSHB 365, relating to voluntary contributions to the alcohol and drug abuse grant fund

-----

CSHB 365 authorizes a Permanent Fund Dividend checkoff for substance abuse programs in Alaska. Specifically, it allows a dividend applicant the option of authorizing \$10 to be subtracted from the dividend check and deposited to a special alcoholism and drug abuse fund which will be administered by the State Office of Alcoholism and Drug Abuse.

The checkoff is entirely voluntary. Those who do not wish to participate will see no effect on their dividend check.

Over the course of the four years the Olympic checkoff appeared on the PFD application, the Olympic Committee realized an average of \$750,000 per year. The total amount contributed to the Olympics through the PFD checkoff, from 10/1/86 to 1/17/90 is \$2.817 million. I believe the high level of concern expressed by Alaskans regarding the incidence of drug and alcohol abuse we experience in our communities will result in a considerably higher contribution rate than the Olympic checkoff received. An additional million dollars would go a long way towards increasing local efforts to treat and prevent substance abuse.

The bill has been drafted to give first priority to programs for youth. The greatest financial and social returns clearly result from those strategies which alleviate drug and alcohol problems before they become severe.

Administrative costs associated with the checkoff will be borne by the new program.

District 4B — Juneau

P.O. Box V • Juneau, Alaska 99811-3100 • (907) 465-4947

POSITION PAPER

HOUSE BILL NO. 365

"An Act relating to the alcohol and drug abuse grant fund and contributions to the fund; and providing for an effective date."

Analysis

Section 1. of the Bill would have the Department of Revenue change the permanent fund dividend application form to allow an applicant to have \$10.00 subtracted from their dividend and contributed to the alcohol and drug abuse grant fund. Contributions, less an administrative fee, would be deposited in a special dividend contribution account.

Section 2. would establish a grant fund within the Department of Health and Social Service that would be administered by the Office of Alcoholism and Drug Abuse. In awarding grants the Office should place priority on programs aimed at youth. By regulation the Department is to develop eligibility requirements and application procedures.

Section 3. establishes the effective date of this legislation as January 1, 1991.

Discussion

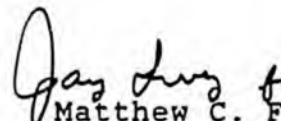
The need for additional financial resources for alcohol and drug abuse prevention and treatment services is well documented. In FY 90 grant application requests from community based organizations exceeded the amount of available funding by more than \$6,000,000. Several geographical areas of the state are unable to offer residents as comprehensive array of services as they feel are necessary due to lack of funding. Salaries in the alcohol and drug abuse grant-in-aid program are quite low according to a House Research Agency study that was conducted last year. With various budget cuts in recent years due to declining oil prices, many grant-in-aid programs are operating with less state funding now than they had available in FY 83. Of course this has resulted in fewer services being provided.


Sufficient resources for alcohol and drug abuse services are a problem in other states as well, and they too have sought new and innovative methods of raising the funding level. Florida, for example, recently instituted a .50 cent a day special charge on all automobile rentals to raise money for their

alcohol and drug programs. California is currently considering a .05 cents a drink tax on alcoholic beverages for the same purpose.

Position

The Department of Health and Social Services recognizes that abuse of alcohol and drugs is one of the most serious problems facing Alaska and that addressing problems associated with this abuse will require additional State resources. HB 365 offers a way to generate these funds. However, the Department defers to other agencies regarding the cost of implementing a permanent fund checkoff for this purpose.

  
Matthew C. Felix  
Coordinator

  
Myra Munson  
Commissioner

Mr. Donald Dapcevich  
P.O. Box 021571  
Juneau, Ak 99802

January 31, 1990

The Honorable Fran Ulmer  
House of Representatives  
State of Alaska  
P.O. Box V  
Juneau, Ak 99811

Dear Representative Ulmer:

First I would like to commend you and your staff for your willingness to tackle alcohol and other drug abuse among Alaskans. House Bill 365 offers real hope for large numbers of Alaskan youth who are suffering from the devastating effects of chemical dependence.

I congratulate your insight in dedicating the funds from this revenue source to the treatment of adolescents suffering from chemical dependence. Currently hundreds of thousands of dollars from both federal and state resources are dedicated to prevention and education programs for youth. In the current legislature I understand that the democratic majority is introducing legislation that will dedicate more prevention/education monies, and without a doubt more is needed.

The problems with securing funds for adolescent treatment is a very complex one. At the core of resistance to dedicating funds for adolescent treatment is an unwillingness to accept chemical dependence as an adolescent problem. Many adults have real problems accepting the possibility of a 16 year old being an alcoholic or an addict. Most people feel that alcoholics are people over fifty who stand on our street corners drinking cheap wine. Those of us in the profession who have embraced the disease concept, understand that the age of the user of drugs and alcohol is only one of many factors of the disease and lately we are seeing more and more full-blown addicts among 14-18 year olds.

We have also learned that prevention/education programs, while helpful, should not have all of our attention any more than should prevention without adequate treatment programs for diabetes or heart disease patients.

Please do not succumb to the pressure to change this bill from treatment oriented to prevention/education oriented measure.

Sincerely,

  
Don Dapcevich

HB

366

# HOUSE COMMITTEE REPORT

(11)

Date Referred: February 5, 1990

FURTHER REFERRALS:

Date of Committee Action: 3/2/90

The FINANCE Committee considered:

SSHB 366

SS FOR HOUSE BILL NO. 366

TREATMENT OR REHABILITATION OF OFFENDERS

"An Act relating to the treatment and rehabilitation of a defendant convicted of an offense."

**RECOMMENDATIONS:**

- be replaced with SSSHB 366 (JUD)  the same title  a new title
- have attached amendment(s)
- do pass
- do not pass
- no recommendation
- individual recommendations
- additional referral to the \_\_\_\_\_ Committee

ADOPTS: \_\_\_\_\_ letter of intent

ATTACHES NEW FISCAL NOTE(S): \_\_\_\_\_ APPROVES PREVIOUS: \_\_\_\_\_ (Date/Dept)

(Dept)

- fiscal impact \_\_\_\_\_
- zero fiscal note HSS - Public Safety - Corrections  fiscal note(s) \_\_\_\_\_
- zero with analysis Court System  zero fn/analysis \_\_\_\_\_

**SIGNING DO PASS:**

**SIGNING:**  
(Check approp. column)

Do Not Pass    No Rec    Amend

<u>[Signature]</u> Hoffman	<u>[Signature]</u> Koponen		X	
<u>[Signature]</u> Larson				
<u>[Signature]</u> Brown				
<u>[Signature]</u> Ulmetz				
<u>[Signature]</u> Barnes				
<u>[Signature]</u> Shultz				
<u>[Signature]</u> Phillips				
<u>[Signature]</u> Rieger				

[Signature] Hoffman  
CO - Chairman's Signature  
[Signature] Larson

FISCAL NOTE

REQUEST:

Revision Date: \_\_\_\_\_ Agency Affected: Health & Social Services  
 Title: "An Act relating to the treatment and rehabilitation of a defendant convicted of an offense." BRU: Alcohol & Drug Abuse Services  
 Sponsor: Ulmer Components: ASAP  
 Requestor: \_\_\_\_\_

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
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REVENUE	-0-	-0-	-0-	-0-	-0-	-0-
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART-TIME	-0-	-0-	-0-	-0-	-0-	-0-
TEMPORARY	-0-	-0-	-0-	-0-	-0-	-0-

ANALYSIS : (Attach a separate page if necessary)

FY 90 Fiscal Impact is "0".

Prepared by: Matthew C. Felix, Coordinator *Matthew Felix* Phone: 586-6201  
 Division: Office of Alcoholism & Drug Abuse Date: 1/23/90

Approved by Commissioner: *Mpa M Munson* Date: 1/23/90  
 Agency: Health & Social Services

- Distribution (by preparer):
- Legislative Finance
  - Legislative Sponsor
  - Requestor
  - Office of Management and Budget
  - Impacted Agency(ies)

Adopted

FISCAL NOTE

REQUEST:

Revision Date: \_\_\_\_\_  
Title: Treatment & Rehabilitation of  
offenders  
Sponsor: Rep. Ulmer, et al  
Requestor: House Judiciary

Agency Affected: Public Safety  
BRU: Council on Domestic Violence  
and Sexual Assault  
Component: \_\_\_\_\_

EXPENDITURES/REVENUES: (Thousands of Dollars) (Inflation not included)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0	0	0	0	0	0

CAPITAL	0	0	0	0	0	0
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REVENUE	0	0	0	0	0	0
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER/PROG RCPT						
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary)

This bill will have no fiscal impact on the Department of Public Safety.

Prepared by: Barbara Miklos, Executive Director  
Division: Council on Domestic Violence and Sexual  
Assault  
Approved by Commissioner: Arthur English  
Agency: Department of Public Safety

Phone: 465-4356  
Date: 1/22/90  
Date: \_\_\_\_\_  
Page 1 of 1

Adopted

*1/22/90*

*Bjm*

*SE*

FISCAL NOTE

REQUEST:

Revision Date: \_\_\_\_\_  
Title: "An Act relating to treatment and  
rehabilitation of a defendant."  
Sponsor: Representative Ulmer  
Requestor: \_\_\_\_\_

Agency Affected: Department of Corrections  
BRU: \_\_\_\_\_  
Components: \_\_\_\_\_

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
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REVENUE	-0-	-0-	-0-	-0-	-0-	-0-
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME	-0-	-0-	-0-	-0-	-0-	-0-
PART-TIME						
TEMPORARY						

ANALYSIS : (Attach a separate page if necessary)

*Susan E. Knighton*

Prepared by: Susan E. Knighton, Director  
Division: Administrative Services

Phone: 465-3376  
Date: 01/24/90

Approved by Commissioner: *S. H. ... - Barnitt*  
Agency: Department of Corrections

Date: 01/24/90

Distribution (by preparer):

- Legislative Finance
- Legislative Sponsor
- Requestor
- Office of Management and Budget
- Impacted Agency(ies)

Adopted

1990 LEGISLATIVE SESSION

## FISCAL NOTE

**REQUEST:**

Revision Date:	Agency Affected:	Alaska Court System
Title: <u>An Act relating to the treatment and rehabilitation of a defendant</u>	BRU:	<u>Trial Courts</u>
Sponsor: <u>Ulmer</u>	Components:	
Requestor:		

**EXPENDITURES/REVENUES:** (Thousands of Dollars)

OPERATING	FY 90	FY 91	FY 92	FY 93	FY 94	FY 95
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
<b>TOTAL OPERATING</b>	0.0	0.0	0.0	0.0	0.0	0.0
<b>CAPITAL</b>						
<b>REVENUE</b>						

**FUNDING:** (Thousands of Dollars)

General Funds	0.0	0.0	0.0	0.0	0.0	0.0
Federal Funds						
Other						
<b>TOTAL</b>	0.0	0.0	0.0	0.0	0.0	0.0

**POSITIONS:**

Full-time						
Part-time						
Temporary						

**ANALYSIS:** (Attach a separate page if necessary)

No fiscal impact. See attached analysis.

Prepared by: Jan Strandberg, General Counsel  
Division: Alaska Court System

Phone: 284-8228  
Date: 01/22/90

Approved by: Arthur H. Snowden, II, Administrative Director  
Agency: Alaska Court System

Date: 01/22/90

Distribution (by preparer):  
Legislative Finance  
Legislative Sponsor

Adopted

Alaska Court System

HB 366

This proposed legislation may impact the Alaska Court System if a significant number of review hearings are held under sections 4 and 7. Because that number cannot be determined with any accuracy at this time, no present fiscal impact is indicated. If the court finds that it is holding an appreciable number of review hearings, a supplemental appropriation will be requested.

Offered: 2/5/90  
Referred: Finance

6-1692J

Original sponsor(s): REP. ULMER, Ellis, Goll

1 IN THE HOUSE

BY THE JUDICIARY COMMITTEE

2 CS FOR SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 366 (Judiciary)

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 SIXTEENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to the treatment and rehabilitation  
7 of a defendant convicted of an offense; and providing  
8 for an effective date."

9 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

10 \* Section 1. AS 12.55.015(a) is amended to read:

11 (a) Except as limited by AS 12.55.125 - 12.55.175, the court, in  
12 imposing sentence on a defendant convicted of an offense, may singly  
13 or in combination

14 (1) impose a fine when authorized by law and as provided in  
15 AS 12.55.035;

16 (2) order the defendant to be placed on probation under  
17 conditions specified by the court that may include provision for  
18 active supervision;

19 (3) impose a definite term of periodic imprisonment;

20 (4) impose a definite term of continuous imprisonment;

21 (5) order the defendant to make restitution under AS 12.-  
22 55.045;

23 (6) order the defendant to carry out a continuous or peri-  
24 odic program of community work under AS 12.55.055;

25 (7) suspend execution of all or a portion of the sentence  
26 imposed under AS 12.55.080;

27 (8) suspend imposition of sentence under AS 12.55.085;

28 (9) order the forfeiture to the commissioner of public  
29 safety of a deadly weapon that was in the actual possession of or used

HB0366C

1 by the defendant during the commission of an offense described in  
2 AS 11.41, AS 11.46, AS 11.56, or AS 11.61;

3 (10) order the defendant, while incarcerated, to participate  
4 in or comply with the treatment plan of a rehabilitation program that  
5 is related to the defendant's offense or to the defendant's reha-  
6 ilitation, if the program is made available to the defendant by the  
7 Department of Corrections.

8 \* Sec. 2. AS 12.55.085(b) is amended to read:

9 (b) At any time during the probationary term of the person  
10 released on probation, a probation officer may, without warrant or  
11 other process, rearrest the person so placed in the officer's care and  
12 bring the person before the court, or the court may, in its discre-  
13 tion, issue a warrant for the rearrest of the person. The court [AND]  
14 may revoke and terminate the probation [,] if the interests of justice  
15 require, and if the court, in its judgment, has reason to believe that  
16 the person placed upon probation is

17 (1) violating the conditions of probation;

18 (2) [, OR] engaging in criminal practices; or

19 (3) violating an order of the court to participate in or  
20 comply with the treatment plan of a rehabilitation program under  
21 AS 12.55.015(a)(10) [, OR HAS BECOME ABANDONED TO IMPROPER ASSOCIATES,  
22 OR A VICIOUS LIFE].

23 \* Sec. 3. AS 12.55.100(a) is amended to read:

24 (a) While on probation and among the conditions of probation,  
25 the defendant may be required

26 (1) to pay a fine in one or several sums;

27 (2) to make restitution or reparation to aggrieved parties  
28 for actual damages or loss caused by the crime for which conviction  
29 was had;

1 (3) to provide for the support of any persons for whose  
2 support the defendant is legally responsible; [AND]

3 (4) to perform community work in accordance with AS 12.-  
4 55.055;

5 (5) to participate in or comply with the treatment plan of  
6 an inpatient or outpatient rehabilitation program specified by either  
7 the court or the defendant's probation officer that is related to the  
8 defendant's offense or to the defendant's rehabilitation; and

9 (6) to satisfy the screening, evaluation, referral, and  
10 program requirements of an agency authorized by the court to make  
11 referrals for rehabilitative treatment or to provide rehabilitative  
12 treatment.

13 \* Sec. 4. AS 12.55.100 is amended by adding a new subsection to read:

14 (c) A program of inpatient treatment may be required by the  
15 authorized agency under (a)(6) of this section only if authorized in  
16 the judgment, and may not exceed the maximum term of inpatient treat-  
17 ment specified in the judgment. A person who has been referred for  
18 inpatient treatment may make a written request to the sentencing court  
19 asking the court to review the referral. The request for review shall  
20 be made within seven days of the agency's referral, and shall specif-  
21 ically set out the grounds upon which the request for review is based.  
22 The court may order a hearing on the request for review.

23 \* Sec. 5. AS 12.55.110 is amended by adding a new subsection to read:

24 (b) Good cause justifying the revocation of a suspended sentence  
25 is established if the defendant has violated an order of the court to  
26 participate in or comply with the treatment plan of a rehabilitation  
27 program under AS 12.55.015(a)(10).

28 \* Sec. 6. AS 28.35.030(c) is amended to read:

29 (c) Upon conviction under this section the court shall impose a

1 minimum sentence of imprisonment of not less than 72 consecutive hours  
2 and a fine of not less than \$250 if the person has not been previously  
3 convicted in this or another jurisdiction of driving while intoxicated  
4 under this or another law or ordinance with substantially similar  
5 elements or refusal to submit to a chemical test under AS 28.35.032 or  
6 another law or ordinance with substantially similar elements. Upon  
7 conviction under this section the court shall impose a minimum sen-  
8 tence of imprisonment of not less than 20 consecutive days and a fine  
9 of not less than \$500 if, within the preceding 10 years, the person  
10 has been previously convicted once in this or another jurisdiction of  
11 driving while intoxicated under this or another law or ordinance with  
12 substantially similar elements or refusal to submit to a chemical test  
13 under AS 28.35.032 or another law or ordinance with substantially  
14 similar elements. Upon conviction under this section the court shall  
15 impose a minimum sentence of imprisonment of not less than 30 consecu-  
16 tive days and a fine of not less than \$1,000 if, within the preceding  
17 10 years, the person has been previously convicted in this or another  
18 jurisdiction of more than one of the following offenses or has more  
19 than once been previously convicted of one of the following offenses:  
20 (1) driving while intoxicated under this or another law or ordinance  
21 with substantially similar elements; (2) refusal to submit to a chemi-  
22 cal test under AS 28.35.032 or another law or ordinance with substan-  
23 tially similar elements. The execution of sentence may not be sus-  
24 pended nor may probation be granted except on condition that the  
25 minimum imprisonment provided in this section is served. Probation may  
26 be conditioned as provided in AS 12.55.102. Imposition of sentence  
27 may not be suspended. In addition, if the offense involved driving a  
28 motor vehicle for which a driver's license is required, the person's  
29 driver's license shall be revoked in accordance with AS 28.15.181 and

1 the vehicle used in commission of the offense may be forfeited under  
2 AS 28.35.036. [IN ADDITION, THE COURT SHALL ORDER, AND A PERSON  
3 CONVICTED UNDER THIS SECTION SHALL UNDERTAKE, FOR A TERM SPECIFIED BY  
4 THE COURT, THAT PROGRAM OF ALCOHOL EDUCATION OR REHABILITATION THAT  
5 THE COURT, AFTER CONSIDERATION OF ANY INFORMATION COMPILED UNDER (d)  
6 OF THIS SECTION, FINDS APPROPRIATE.]

7 \* Sec. 7. AS 28.35.030 is amended by adding new subsections to read:

8 (i) The court shall order a person convicted under this section  
9 to satisfy the screening, evaluation, referral, and program require-  
10 ments of an agency authorized by the court to make referrals for  
11 rehabilitative treatment or to provide rehabilitative treatment.

12 (j) A program of inpatient treatment may be required by the  
13 authorized agency under (i) of this section only if authorized in the  
14 judgment, and may not exceed the maximum term of inpatient treatment  
15 specified in the judgment. A person who has been referred for  
16 inpatient treatment under this subsection may make a written request  
17 to the sentencing court asking the court to review the referral. The  
18 request for review shall be made within seven days of the agency's  
19 referral, and shall specifically set out the grounds upon which the  
20 request for review is based. The court may order a hearing on the  
21 request for review.

22 (k) If a person fails to satisfy the requirements of an au-  
23 thorized agency under (j) of this section, the court

24 (1) may impose any portion of a suspended sentence;

25 (2) may punish the failure as contempt of the authority of  
26 the court under AS 09.50.010 or as a violation of a condition of  
27 probation; and

28 (3) shall order the revocation or suspension of the per-  
29 son's driver's license until the requirements are satisfied.

1 \* Sec. 8. AS 28.35.032(g) is amended to read:

2 (g) Upon conviction of a person under this section, the court  
3 shall impose a minimum sentence of imprisonment of not less than 72  
4 consecutive hours and a fine of not less than \$250 if the person has  
5 not been previously convicted in this or another jurisdiction of  
6 driving while intoxicated under AS 28.25.030 or another law or ordi-  
7 nance with substantially similar elements or refusal to submit to a  
8 chemical test under this section or another law or ordinance with  
9 substantially similar elements. Upon conviction under this section the  
10 court shall impose a minimum sentence of imprisonment of not less than  
11 20 consecutive days and a fine of not less than \$500 if, within the  
12 preceding 10 years, the person has been previously convicted once in  
13 this or another jurisdiction of driving while intoxicated under  
14 AS 28.35.030 or another law or ordinance with substantially similar  
15 elements or refusal to submit to a chemical test under this section or  
16 another law or ordinance with substantially similar elements. Upon  
17 conviction under this section the court shall impose a minimum sen-  
18 tence of imprisonment of not less than 30 consecutive days and a fine  
19 of not less than \$1,000, if, within the previous 10 years, the person  
20 has been previously convicted in this or another jurisdiction of more  
21 than one of the following offenses or has more than once been previ-  
22 ously convicted of one of the following offenses: (1) driving while  
23 intoxicated under AS 28.35.030 or another law or ordinance with sub-  
24 stantially similar elements; (2) refusal to submit to a chemical test  
25 under this section or another law or ordinance with substantially  
26 similar elements. The execution of sentence may not be suspended nor  
27 may probation be granted except on condition that the minimum impris-  
28 onment provided in this section is served. Probation may be condi-  
29 tioned as provided in AS 12.55.102. Imposition of sentence may not be

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# **CORRECTION**

**THIS DOCUMENT  
HAS BEEN REPHOTOGRAPHED  
TO ASSURE LEGIBILITY**

1 \* Sec. 8. AS 28.35.032(g) is amended to read:

2 (g) Upon conviction of a person under this section, the court  
3 shall impose a minimum sentence of imprisonment of not less than 72  
4 consecutive hours and a fine of not less than \$250 if the person has  
5 not been previously convicted in this or another jurisdiction of  
6 driving while intoxicated under AS 28.25.030 or another law or ordi-  
7 nance with substantially similar elements or refusal to submit to a  
8 chemical test under this section or another law or ordinance with  
9 substantially similar elements. Upon conviction under this section the  
10 court shall impose a minimum sentence of imprisonment of not less than  
11 20 consecutive days and a fine of not less than \$500 if, within the  
12 preceding 10 years, the person has been previously convicted once in  
13 this or another jurisdiction of driving while intoxicated under  
14 AS 28.35.030 or another law or ordinance with substantially similar  
15 elements or refusal to submit to a chemical test under this section or  
16 another law or ordinance with substantially similar elements. Upon  
17 conviction under this section the court shall impose a minimum sen-  
18 tence of imprisonment of not less than 30 consecutive days and a fine  
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22 ously convicted of one of the following offenses: (1) driving while  
23 intoxicated under AS 28.35.030 or another law or ordinance with sub-  
24 stantially similar elements; (2) refusal to submit to a chemical test  
25 under this section or another law or ordinance with substantially  
26 similar elements. The execution of sentence may not be suspended nor  
27 may probation be granted except on condition that the minimum impris-  
28 onment provided in this section is served. Probation may be condi-  
29 tioned as provided in AS 12.55.102. Imposition of sentence may not be

1 suspended. If the offense involved driving a motor vehicle for which  
2 a driver's license is required, the person's driver's license shall be  
3 revoked under AS 28.15.181. [IN ADDITION, THE COURT SHALL ORDER, AND A  
4 PERSON CONVICTED UNDER THIS SECTION SHALL UNDERTAKE, FOR A TERM SPEC-  
5 IFIED BY THE COURT, THAT PROGRAM OF ALCOHOL EDUCATION OR REHABILITA-  
6 TION THAT THE COURT, AFTER CONSIDERATION OF ANY INFORMATION COMPILED  
7 UNDER (h) OF THIS SECTION, FINDS APPROPRIATE.] The sentence imposed  
8 by the court under this subsection shall run consecutively with any  
9 other sentence of imprisonment imposed on the committed person.

10 \* Sec. 9. AS 28.35.032 is amended by adding new subsections to read:

11 (l) The court shall order a person convicted under this section  
12 to satisfy the screening, evaluation, referral, and program require-  
13 ments of an agency authorized by the court to make referrals for  
14 rehabilitative treatment or to provide rehabilitative treatment.

15 (m) A program of inpatient treatment may be required by the  
16 authorized agency under (l) of this section only if authorized in the  
17 judgment, and may not exceed the maximum term of inpatient treatment  
18 specified in the judgment. A person who has been referred for inpa-  
19 tient treatment under this subsection may make a written request to  
20 the sentencing court asking the court to review the referral. The  
21 request for review shall be made within seven days of the agency's  
22 referral, and shall specifically set out the grounds upon which the  
23 request for review is based. The court may order a hearing on the  
24 request for review.

25 (n) If a person fails to satisfy the requirements of an au-  
26 thorized agency under (m) of this section, the court

27 (1) may impose any portion of a suspended sentence;

28 (2) may punish the failure as contempt of the authority of  
29 the court under AS 09.50.010 or as a violation of a condition of

1 probation; and

2 (3) shall order the revocation or suspension of the per-  
3 son's driver's license until the requirements are satisfied.

4 \* Sec. 10. AS 33.16.220(a) is amended to read:

5 (a) The board may revoke parole if the parolee

6 (1) engages in [FOR] conduct in violation of AS 33.16.-  
7 150(a) or (b); or

8 (2) has violated an order of the court to participate in or  
9 comply with the treatment plan of a rehabilitation program under  
10 AS 12.55.015(a)(10).

11 \* Sec. 11. AS 33.30.011 is amended to read:

12 Sec. 33.30.011. DUTIES OF COMMISSIONER. The commissioner shall

13 (1) establish, maintain, operate, and control correctional  
14 facilities suitable for the custody, care, and discipline of persons  
15 charged or convicted of offenses against the state or held under  
16 authority of state law;

17 (2) classify prisoners;

18 (3) for persons committed to the custody of the commis-  
19 sioner, establish programs, including furlough programs that are  
20 reasonably calculated to

21 (A) protect the public;

22 (B) maintain health;

23 (C) create or improve occupational skills;

24 (D) enhance educational qualifications;

25 (E) support court-ordered restitution; and

26 (F) otherwise provide for the rehabilitation and  
27 reformation of prisoners, facilitating their reintegration into  
28 society;

29 (4) provide necessary medical services for prisoners in

1 correctional facilities or who are committed by a court to the custody  
2 of the commissioner, including examinations for communicable and  
3 infectious diseases; and

4 (5) provide necessary psychological or psychiatric treat-  
5 ment if a physician or other health care provider, exercising ordinary  
6 skill and care at the time of observation, concludes that

7 (A) a prisoner exhibits symptoms of a serious disease  
8 or injury that is curable or may be substantially alleviated; and

9 (B) the potential for harm to the prisoner by reason  
10 of delay or denial of care is substantial;

11 (6) establish minimum standards for sex offender treatment  
12 programs offered to persons who are committed to the custody of the  
13 commissioner.

14 \* Sec. 12. AS 12.55.015(d) is repealed.

15 \* Sec. 13. This Act takes effect immediately under AS 01.10.070(c).

Introduced: 1/15/90  
 Referred: Judiciary, and Finance

BY REP. ULMER, Ellis

1 IN THE HOUSE

2 SPONSOR SUBSTITUTE FOR HOUSE BILL NO. 366

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 SIXTEENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to the treatment and rehabilitation  
 7 of a defendant convicted of an offense."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 \* Section 1. AS 12.55.015(a) is amended to read:

10 (a) Except as limited by AS 12.55.125 - 12.55.175, the court, in  
 11 imposing sentence on a defendant convicted of an offense, may singly  
 12 or in combination

13 (1) impose a fine when authorized by law and as provided in  
 14 AS 12.55.035;

15 (2) order the defendant to be placed on probation under  
 16 conditions specified by the court that may include provision for  
 17 active supervision;

18 (3) impose a definite term of periodic imprisonment;

19 (4) impose a definite term of continuous imprisonment;

20 (5) order the defendant to make restitution under AS 12.-  
 21 55.045;

22 (6) order the defendant to carry out a continuous or peri-  
 23 odic program of community work under AS 12.55.055;

24 (7) suspend execution of all or a portion of the sentence  
 25 imposed under AS 12.55.080;

26 (8) suspend imposition of sentence under AS 12.55.085;

27 (9) order the forfeiture to the commissioner of public  
 28 safety of a deadly weapon that was in the actual possession of or used  
 29 by the defendant during the commission of an offense described in

1 AS 11.41, AS 11.46, AS 11.56, or AS 11.61;

2 (10) order the defendant, while incarcerated, to participate  
3 in or successfully complete a rehabilitation program that is related  
4 to the defendant's offense or to the defendant's rehabilitation, if  
5 the program is made available to the defendant by the Department of  
6 Corrections.

7 \* Sec. 2. AS 12.55.085(b) is amended to read:

8 (b) At any time during the probationary term of the person  
9 released on probation, a probation officer may, without warrant or  
10 other process, rearrest the person so placed in the officer's care and  
11 bring the person before the court, or the court may, in its discre-  
12 tion, issue a warrant for the rearrest of the person. The court [AND]  
13 may revoke and terminate the probation [,] if the interests of justice  
14 require, and if the court, in its judgment, has reason to believe that  
15 the person placed upon probation is

16 (1) violating the conditions of probation;

17 (2) [, OR] engaging in criminal practices; or

18 (3) violating an order of the court to participate in or  
19 successfully complete a rehabilitation program under AS 12.55.-  
20 015(a)(10) [, OR HAS BECOME ABANDONED TO IMPROPER ASSOCIATES, OR A  
21 VICIOUS LIFE].

22 \* Sec. 3. AS 12.55.100(a) is amended to read:

23 (a) While on probation and among the conditions of probation,  
24 the defendant may be required

25 (1) to pay a fine in one or several sums;

26 (2) to make restitution or reparation to aggrieved parties  
27 for actual damages or loss caused by the crime for which conviction  
28 was had;

29 (3) to provide for the support of any persons for whose

1 support the defendant is legally responsible; [AND]

2 (4) to perform community work in accordance with AS 12.-  
3 55.055<sub>1</sub>

4 (5) to participate in or successfully complete an inpatient  
5 rehabilitation program specified by either the court or the defen-  
6 dant's probation officer that is related to the defendant's offense or  
7 to the defendant's rehabilitation; and

8 (6) to satisfy the screening, evaluation, referral, pro-  
9 gram, and fee requirements of an agency authorized by the court to  
10 make referrals for rehabilitative treatment.

11 \* Sec. 4. AS 12.55.100 is amended by adding a new subsection to read:

12 (c) A program of inpatient treatment may be required by the  
13 referral agency under (a)(6) of this section only if authorized in the  
14 judgment, and may not exceed the maximum term of inpatient treatment  
15 specified in the judgment. A person who has been referred for inpa-  
16 tient treatment may make a written request to the sentencing court  
17 asking the court to review the referral. The request for review shall  
18 be made within seven days of the agency's referral, and shall specif-  
19 ically set out the grounds upon which the request for review is based.  
20 The court may order a hearing on the request for review. If the  
21 person establishes by clear and convincing evidence that the referral  
22 for inpatient treatment was arbitrary or capricious, the court may  
23 rescind or modify the referral.

24 \* Sec. 5. AS 12.55.110 is amended by adding a new subsection to read:

25 (b) Good cause justifying the revocation of a suspended sentence  
26 is established if the defendant has violated an order of the court to  
27 participate in or successfully complete a rehabilitation program under  
28 AS 12.55.015(a)(10).

29 \* Sec. 6. AS 28.35.030(c) is amended to read:

1 (c) Upon conviction under this section the court shall impose a  
2 minimum sentence of imprisonment of not less than 72 consecutive hours  
3 and a fine of not less than \$250 if the person has not been previously  
4 convicted in this or another jurisdiction of driving while intoxicated  
5 under this or another law or ordinance with substantially similar  
6 elements or refusal to submit to a chemical test under AS 28.35.032 or  
7 another law or ordinance with substantially similar elements. Upon  
8 conviction under this section the court shall impose a minimum sen-  
9 tence of imprisonment of not less than 20 consecutive days and a fine  
10 of not less than \$500 if, within the preceding 10 years, the person  
11 has been previously convicted once in this or another jurisdiction of  
12 driving while intoxicated under this or another law or ordinance with  
13 substantially similar elements or refusal to submit to a chemical test  
14 under AS 28.35.032 or another law or ordinance with substantially  
15 similar elements. Upon conviction under this section the court shall  
16 impose a minimum sentence of imprisonment of not less than 30 consecu-  
17 tive days and a fine of not less than \$1,000 if, within the preceding  
18 10 years, the person has been previously convicted in this or another  
19 jurisdiction of more than one of the following offenses or has more  
20 than once been previously convicted of one of the following offenses:  
21 (1) driving while intoxicated under this or another law or ordinance  
22 with substantially similar elements; (2) refusal to submit to a chemi-  
23 cal test under AS 28.35.032 or another law or ordinance with substan-  
24 tially similar elements. The execution of sentence may not be sus-  
25 pended nor may probation be granted except on condition that the  
26 minimum imprisonment provided in this section is served. Probation may  
27 be conditioned as provided in AS 12.55.102. Imposition of sentence  
28 may not be suspended. In addition, if the offense involved driving a  
29 motor vehicle for which a driver's license is required, the person's

1 driver's license shall be revoked in accordance with AS 28.15.181 and  
2 the vehicle used in commission of the offense may be forfeited under  
3 AS 28.35.036. [IN ADDITION, THE COURT SHALL ORDER, AND A PERSON  
4 CONVICTED UNDER THIS SECTION SHALL UNDERTAKE, FOR A TERM SPECIFIED BY  
5 THE COURT, THAT PROGRAM OF ALCOHOL EDUCATION OR REHABILITATION THAT  
6 THE COURT, AFTER CONSIDERATION OF ANY INFORMATION COMPILED UNDER (d)  
7 OF THIS SECTION, FINDS APPROPRIATE.]

8 \* Sec. 7. AS 28.35.030 is amended by adding new subsections to read:

9 (i) The court shall order a person convicted under this section  
10 to satisfy the screening, evaluation, referral, program, and fee  
11 requirements of an agency authorized by the court to make referrals  
12 for rehabilitative treatment.

13 (j) A program of inpatient treatment may be required by the  
14 referral agency under (i) of this section only if authorized in the  
15 judgment, and may not exceed the maximum term of inpatient treatment  
16 specified in the judgment. A person who has been referred for inpa-  
17 tient treatment under this subsection may make a written request to  
18 the sentencing court asking the court to review the referral. The  
19 request for review shall be made within seven days of the agency's  
20 referral, and shall specifically set out the grounds upon which the  
21 request for review is based. The court may order a hearing on the  
22 request for review. If the person establishes by clear and convincing  
23 evidence that the referral for inpatient treatment was arbitrary or  
24 capricious, the court may rescind or modify the referral.

25 (k) If a person fails to satisfy the requirements of an au-  
26 thorized agency under (j) of this section, the court

27 (1) may impose any portion of a suspended sentence;

28 (2) may punish the failure as contempt of the authority of  
29 the court under AS 09.50.010 or as a violation of a condition of

1     probation; and

2             (3) shall order the revocation or suspension of the per-  
3     son's driver's license until the requirements are satisfied.

4     \* Sec. 8. AS 28.35.032(g) is amended to read:

5             (g) Upon conviction of a person under this section, the court  
6     shall impose a minimum sentence of imprisonment of not less than 72  
7     consecutive hours and a fine of not less than \$250 if the person has  
8     not been previously convicted in this or another jurisdiction of  
9     driving while intoxicated under AS 28.25.030 or another law or ordi-  
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11    chemical test under this section or another law or ordinance with  
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13    court shall impose a minimum sentence of imprisonment of not less than  
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15    preceding 10 years, the person has been previously convicted once in  
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20    conviction under this section the court shall impose a minimum sen-  
21    tence of imprisonment of not less than 30 consecutive days and a fine  
22    of not less than \$1,000, if, within the previous 10 years, the person  
23    has been previously convicted in this or another jurisdiction of more  
24    than one of the following offenses or has more than once been previ-  
25    ously convicted of one of the following offenses: (1) driving while  
26    intoxicated under AS 28.35.030 or another law or ordinance with sub-  
27    stantially similar elements; (2) refusal to submit to a chemical test  
28    under this section or another law or ordinance with substantially  
29    similar elements. The execution of sentence may not be suspended nor

1 may probation be granted except on condition that the minimum impris-  
2 onment provided in this section is served. Probation may be condi-  
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5 a driver's license is required, the person's driver's license shall be  
6 revoked under AS 28.15.181. [IN ADDITION, THE COURT SHALL ORDER, AND A  
7 PERSON CONVICTED UNDER THIS SECTION SHALL UNDERTAKE, FOR A TERM SPEC-  
8 IFIED BY THE COURT, THAT PROGRAM OF ALCOHOL EDUCATION OR REHABILITA-  
9 TION THAT THE COURT, AFTER CONSIDERATION OF ANY INFORMATION COMPILED  
10 UNDER (h) OF THIS SECTION, FINDS APPROPRIATE.] The sentence imposed  
11 by the court under this subsection shall run consecutively with any  
12 other sentence of imprisonment imposed on the committed person.

13 \* Sec. 9. AS 28.35.032 is amended by adding new subsections to read:

14 (1) The court shall order a person convicted under this section  
15 to satisfy the screening, evaluation, referral, program, and fee  
16 requirements of an agency authorized by the court to make referrals  
17 for rehabilitative treatment.

18 (m) A program of inpatient treatment may be required by the  
19 referral agency under (1) of this section only if authorized in the  
20 judgment, and may not exceed the maximum term of inpatient treatment  
21 specified in the judgment. A person who has been referred for inpa-  
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28 evidence that the referral for inpatient treatment was arbitrary or  
29 capricious, the court may rescind or modify the referral.

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5 the court under AS 09.50.010 or as a violation of a condition of  
6 probation; and

7 (3) shall order the revocation or suspension of the per-  
8 son's driver's license until the requirements are satisfied.

9 \* Sec. 10. AS 33.16.220(a) is amended to read:

10 (a) The board may revoke parole if the parolee

11 (1) engages in [FOR] conduct in violation of AS 33.16.-  
12 150(a) or (b); or

13 (2) has violated an order of the court to participate in or  
14 successfully complete a rehabilitation program under AS 12.55.-  
15 015(a)(10).

16 \* Sec. 11. AS 12.55.015(d) is repealed.  
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REP. ULMER  
2/21/90

SECTIONAL ANALYSIS OF CSSH B 366, RELATING TO OFFENDER TREATMENT

SECTION 1: Authorizes the court to order the offender, while incarcerated, to participate in and comply with the treatment plan of a rehabilitation program that is related to the defendant's offense. This order would apply only to those programs made available by the Department of Corrections.

SECTION 2: Authorizes the court to revoke and terminate probation if the person on probation fails to participate in or comply with the treatment plan of a rehabilitation program.

SECTION 3: Authorizes the court to require an offender on probation to participate/comply with inpatient treatment or to satisfy the screening, evaluation, referral, program, and fee requirements of a referral agency (e.g. Alcohol Safety Action Programs) for rehabilitative treatment.

SECTION 4: Requires that referrals for in-patient treatment first be authorized by the court; treatment may not exceed the maximum term of inpatient treatment specified in the judgment. A person referred for inpatient treatment may challenge the referral by requesting review within 7 days of the agency's referral. Court may order a hearing on the referral.

SECTION 5: A suspended imposition of sentence may be revoked if the defendant does not comply with the treatment plan of a rehabilitation program ordered by the court.

SECTION 6: Amends DWI statutes to delete requirement regarding alcohol education or rehabilitation. This is a technical amendment necessitated by bill section 7.

SECTION 7: Amends the drunk driving statutes: Authorizes the court to require the offender to satisfy the screening, evaluation, referral, program and fee requirements of a referral agency for rehabilitative treatment. Requires that referrals for in-patient treatment first be authorized by the court; treatment may not exceed the maximum term of inpatient treatment specified in the judgment. A person referred for inpatient treatment may challenge

the referral by requesting review within 7 days of the agency's referral. Court may order a hearing on the referral. If a person fails to satisfy the requirements of the referral agency, the court:

- may impose any portion of a suspended sentence;
- may punish the failure as contempt of court or as a violation of a condition of probation;
- shall order revocation or suspension of driver's license until the requirements are satisfied.

SECTION 8: Amends DWI statutes to delete requirement regarding alcohol education or treatment. This is a technical amendment necessitated by bill section 9.

SECTION 9: Amends the drunk driving statutes: Authorizes the court to require the offender to satisfy the screening, evaluation, referral, program and fee requirements of a referral agency for rehabilitative treatment. Requires that referrals for in-patient treatment first be authorized by the court; treatment may not exceed the maximum term of inpatient treatment specified in the judgment. A person referred for inpatient treatment may challenge the referral by requesting review within 7 days of the agency's referral. Court may order a hearing on the referral. If a person fails to satisfy the requirements of the referral agency, the court:

- may impose any portion of a suspended sentence;
- may punish the failure as contempt of court or as a violation of a condition of probation;
- shall order revocation or suspension of driver's license until the requirements are satisfied.

SECTION 10: The Parole Board is given the discretion to revoke parole if the parolee does not participate in or comply with the treatment plan of a rehabilitation program ordered by the court. This authority applies ONLY to situations where an offender has received a presumptive sentence and is released on mandatory parole as a result of the accumulation of good time.

SECTION 11: Requires the Commissioner of Corrections to establish minimum standards for sex offender treatment programs offered by the state to offenders in custody.

# STATE OF ALASKA

STEVE COWPER, GOVERNOR

## DEPT. OF HEALTH AND SOCIAL SERVICES

OFFICE OF ALCOHOLISM AND DRUG ABUSE

P.O. BOX H-05F  
JUNEAU, ALASKA 99811-0607  
PHONE: (907) 586-6201

January 23, 1990

Fran Ulmer  
Rm. 421, Capitol  
P. O. Box "V"  
Juneau, AK. 99811

Dear Fran:

The State Office of Alcoholism & Drug Abuse strongly supports House Bill 366. As you know, the Hester Decision in July, 1989 created problems in referring court cases to alcohol/drug abuse treatment centers. We feel that this bill will solve the difficulties presented by Hester.

Authorizing the court to designate an agency to conduct the screening, evaluation and referral will allow the ASAP office to continue to function as a bridge and link between the court and the health care delivery system.

We are particularly pleased with having consequences for treatment noncompliance in the form of driver's license revocation. This legislation would not increase the period of license revocation unless the defendant failed to complete requirements. This will greatly enhance the motivation to enter treatment and complete in a timely manner. Research has shown that to be most effective treatment must begin as soon after a crisis event as possible. This bill will create a strong impetus to do that.

This change in statute would seem to take care of the problems brought about by the Hester decision. It goes on to give the court control over the requirement of residential treatment, and gives the defendant a path back to the court when residential treatment is recommended.

This access to the sentencing judge is already done on any ASAP case where the defendant disagrees with the referral requirement, whether the referral is residential or outpatient. This reinforces the court's final authority in every case decision.

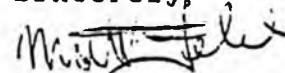
In addition, under present statute there is no way to enforce treatment or rehabilitation if a defendant is incarcerated. Treatment can be available in the facility of incarceration and the defendant can refuse with no consequences.

Matthew Felix letter continued...

pg. 2

We feel that this legislation is excellent and would like to provide our enthusiastic support to this bill.

Sincerely,

A handwritten signature in cursive script that reads "Matthew Felix". The signature is written in dark ink and is positioned above the printed name.

Matthew Felix

cc: Jay Livey

# Alaska State Legislature

## HOUSE OF REPRESENTATIVES



FEB 21 1990

### REPRESENTATIVE FRAN ULMER

#### MEMORANDUM

February 21, 1990

TO: Rep. Lyman Hoffman, Co-Chair  
Rep. Ron Larson, Co-Chair  
House Finance Committee

FROM: Rep. Fran Ulmer

RE: CSSSHB 366, relating to offender treatment

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In 1987, the Court of Appeals ruled in Benboe v State, 738 P.2d 356 (Alaska App. 1987), that a sentencing court cannot order an inmate to participate in a sex offender (or any other) treatment program while in prison because the statutes do not give the courts the authority to enter such an order. In addition, as a result of the combined effect of two other court decisions, Hester v. State, 777 p.2d 217 (Alaska App. 1989), and Boyne v. State, 586 p.2d 1250 (Alaska 1978), a court probably cannot order in-patient treatment as part of probation. Offenders who might otherwise be ordered to in-patient treatment in lieu of jail, will now simply receive jail time.

CSSSHB 366 addresses these limitations relating to sentencing courts. In brief, it does the following:

- (1) Authorizes a sentencing court to require a convicted defendant to participate in "an appropriate rehabilitation or treatment program" while incarcerated;
- (2) Requires a defendant to comply with the treatment plan of a rehabilitation or treatment program as a condition of probation; and
- (3) Makes the defendant's failure to comply with the treatment plan of a rehabilitation program (a) grounds for revocation of probation, or (b) reason to revoke a suspended sentence.

House Finance Committee  
February 21, 1990  
Page 2

- (4) Authorizes the Parole Board to revoke parole if the defendant fails to comply with the treatment plan of a rehabilitation program ordered by the court.
- (5) Requires the Commissioner of Corrections to establish minimum standards for sex offender treatment programs offered to offenders.

Most offenders, regardless of offense, suffer from a variety of problems which require treatment in order for rehabilitation to occur. These problems include sexual disorders, alcohol and drug addictions, anger disorders, and others. If we are to reduce the offender recidivism rate, we must ensure that appropriate treatment does occur, either while a person is in custody or while he or she is on probation. This bill provides a mechanism for requiring offenders to receive necessary treatment, and a mechanism for enforcing court treatment orders.

FU/dl

City of Fairbanks  
**Police Department**  
656 7th Avenue Fairbanks, Alaska 99701  
(907) 459-6500

November 24, 1989

Representative Fran Ulmer  
Alaska State Legislature  
1700 Angus Way  
Juneau, Ak 99801

Re: Offender treatment

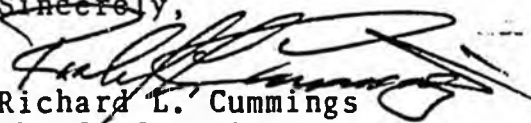
Dear Representative Ulmer:

Please accept my support for the bill you plan to introduce pertaining to an offender's mandatory participation and successful completion of treatment programs.

I hope you will find funding within Corrections budget to support treatment programs, that increase the defendant's possibilities of rehabilitation.

Please keep me informed on the progress of this bill and any assistance you need. Thank you very much for seeking Law Enforcement's opinion.

Sincerely,

  
Richard L. Cummings  
Chief of Police

February 21, 1990

Ron Larson  
State Representative  
P.O. Box V  
Juneau, Alaska 99811

Dear Representative Larson:

I received a copy of the Committee Substitute for House Bill 366 as amended and passed out of Judiciary Committee. While I applaud your ~~good~~ sense to remove the Standard of Proof, i.e., Clear and Convincing Evidence, from Sections 4, 7 & 9 of the original Bill, in doing so, you also removed any reference as to what relief the Court may provide if a defendant petitions the court for review of its order. I also believe some important points were overlooked.

In addition to the large fiscal impact of the Bill, the Bill still fails to identify the burden or proof required, prior to committing someone to a program of rehabilitation. The legislature should avoid providing the court with broad authority in this area and then leave it up to the expensive ritual of judicial decisions to establish the burden of proof. I strongly suggest an addition to the Bill, e.g.,

Section 1. (10) order the defendant, while incarcerated, to participate in or successfully complete a rehabilitation program that is related to the defendant's offense or to the defendant's rehabilitation, if the program is made available to the defendant by the Department of Corrections, and if it is demonstrated by clear and convincing evidence that such a program is required.

This would provide the required constitutional protection, eliminate expensive appeals and court decisions on the issue and could quite possibly eliminate constitutional challenges to your proposed legislation. This of course does not cure the other problems that, in my opinion, must be cured prior to implementation of such a broad plan, e.g.;

*Committee Substitute  
House Bill 366;  
Comments, February 21, 1990*

- 1. Equal access to programs created by the department, and*
- 2. Some form of creating accredited programs or state certified programs so such programs are recognized by the mental health community.*

*I would also like to make a suggestion, that may solve the problem with the legislature's wishes to remove the eligibility for dividend checks from those guilty of a criminal offense and would solve the constitutional problems of such a measure.*

*Since you're already amending AS 12.55.015, sentencing procedures, you should consider adding another subsection to read;*

*(b) In addition to any sentence of imprisonment imposed by the Superior Court, the Court shall order that the defendant not receive a permanent fund dividend check during the period of confinement imposed. The dividend check shall be assigned by order of the court based on the following order of priority;*

- (1) Pay any order of restitution ordered by the Court;*
- (2) Pay Child Support, if the defendant has dependent children;*
- (3) To be deposited in the fund established for the purpose of compensating victims of violent crime; or*
- (4) To be assigned to the Department of Corrections.*

*(c) A copy of the order of assignment issued under (b) of this section shall be transmitted to the Department of Revenue and to the Department of Corrections. The Department of Corrections shall provide a list each year to the Department of Revenue and shall designate where assigned dividend checks should be sent.*

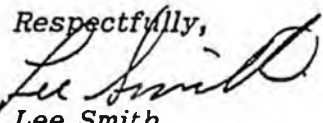
*Such a subsection would effectively eliminate eligibility for the dividend check while a person is incarcerated, it would eliminate the equal protection and due process problems of the prior legislation, which is currently pending before the State Supreme Court, and it would provide an order of priority as to where that dividend check shall be assigned. Repealing AS 43.23.005(d) and amending*

*Committee Substitute  
House Bill 366;  
Comments, February 21, 1990*

*that statute to read that when a copy of the order issued under AS 12.55.015(b) is received by the Department of Revenue, then the check will be paid to the appropriate recipient would also eliminate any problems as to inmates who refuse to apply for their dividend checks, as they no longer need apply.*

*A constitutional challenge to the dividend issue would be completely eliminated by these amendments to AS 12.55.015 and repeal of AS 43.23.005(d).*

*I thank you for your consideration of this letter and my previous letters on this Bill. As always, I regard you and your colleagues;*

*Respectfully,*  
  
*Lee Smith  
P.O. Box 919  
Palmer, Alaska 99645*

*cc: Representative Lyman Hoffman  
Representative Mike Navarre  
Representative Sam Cotten  
Representative Virginia Collins  
Representative Curt Menard*