

AK LEGISLATURE FINANCE COMMITTEES FILES 2007-2008 3353

235

From: Mo Sanders [mailto:MSanders@KPBSD.k12.ak.us]
Sent: Tuesday, January 15, 2008 2:58 PM
To: Sen. Gary Stevens
Subject: Charter School Funding

Dear Senator Stevens,

I am writing you regarding a change in funding for charter schools in Alaska that have less than 150 students enrolled.

As the administrator of a successful charter school in Soldotna I can recall how difficult it was to sustain our program while we developed our student enrollment. Now that we have 161 students enrolled and receive full funding we are able to provide a full program to our students and employ experienced, highly qualified staff.

I believe the proposal that has been put forth by Fireweed Academy in Homer to increase funding for small charter schools that have a 10 year track record of success is a reasonable one. There are only four schools in our state that are impacted so the cost to the state is minimal. At the same time, the impact for these four schools is monumental.

In addition, these charter schools have proven that they are accountable both fiscally and academically. Fireweed Academy, one of the charter schools that would be impacted by a change in funding legislation, was one of the recipients of the state incentive pay for outstanding school performance on the State Standards Assessment last spring.

I would like to ask you to consider moving forward with a change in funding level for small charter schools with a successful track record. Thanks for considering this important issue.

Mo Sanders
Principal
Soldotna Montessori Charter School

From: Jocelyn Shiro-Westphal [mailto:jazzline@gci.net]
Sent: Friday, February 01, 2008 7:03 AM
To: Sen. Gary Stevens
Cc: Kiki Abrahamson
Subject: Fundng for small public charter schools

Dear Senator Stevens,

We are writing as concerned parents of students attending Fireweed Academy, a small charter school in Homer. Our daughter attended Fireweed for four years and is now in 7th grade at Homer Middle School and doing extremely well. She is in the higher level language arts and math classes, two subjects in which she was completely inspired at Fireweed Academy. Our son is in his third year at Fireweed, and loves it.

This school has fostered the love for learning in both of our children; words cannot express our overwhelming support and appreciation for this school and its teachers. The level of education they received and continue to receive is in every sense of the word "excellent." We have seen and been a part of this school since it inhabited two small portable buildings and had twenty students. It has expanded into four classrooms in a building shared with another public elementary school, and the student enrollment is now up to seventy plus students. The number of families in this community who support this school and wish to have their children attend Fireweed continues to grow. The school, unfortunately, is faced with space restrictions from the building site, hindering further growth and is at risk of being closed due to lack of funding because it is a small charter school with fewer than 150 students. It is imperative that Fireweed continue to offer families and children in this community with an alternative to the regular public school system. Parents in this community want and appreciate having this alternative. WE have appreciated having this althernative. We only ask that you support funding public charter school students in both rural and urban communities as you would any other public school child. We understand and appreciate all of the work you have done addressing our concerns in the past. Please allow us and other communities with smaller sized charter schools, to keep our children in these wonderful alternative schools.

Thank you.

Sincerely yours,

Jocelyn and Douglas Westphal

Homer, AK

SB

158

HFIN

FILE

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: 2
Bill Version: SB 158
(S) Publish Date: 2/19/08

Identifier (file name): SB158-DOT-NRF-02-19-08 Dept. Affected: DOT&PF
Title: Shirley Demientieff Memorial Bridge RDU: Facilities and Maintenance Operations
Component: Northern Region Facilities
Sponsor: Senator Kookesh
Requester: Senate Finance Component Number: 2069

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies	7.5							
Equipment								
Land & Structures								
Grants & Claims								
Miscellaneous								
TOTAL OPERATING	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
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CHANGE IN REVENUES ()								
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF	7.5							
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other Interagency Receipts								
TOTAL	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2008) cost: 0.0

POSITIONS

Full-time								
Part-time								
Temporary								

ANALYSIS: (Attach a separate page if necessary)

It is estimated it will cost \$7.5 for the production and installation of two signs and two posts; one in each direction, designating the bridge as the Shirley Demientieff Memorial Bridge. These signs will not be mounted on the bridge but will be on new posts slightly in advance of the bridge.

Prepared by: Mary Siroky, DOT&PF Phone: 465-4772
Division: Commissioner's Office Date/Time: 2/19/08 8:00 AM
Approved by: Nancy Sjaqle, Admin Director Date: 2/19/2008
DOT&PF



SENATOR ALBERT M. KOOKESH

ALASKA STATE LEGISLATURE SENATE DISTRICT C

c-mail: Senator.Albert.Kookesh@legis.state.ak.us webmail: www.akdemocrats.org

State Capitol, Room 11

Juneau AK, 99801-118

907-465-3473

888-288-3473

FAX 907-465-2827

Sponsor Statement

SB 158 "Naming Shirley Demientieff Memorial Bridge"

Senate Bill 158 would name the small bridge in Nenana directly north of the Alaska Native Veterans' Bridge in honor of Shirley Demientieff. Ms. Shirley was a bridge to so many and it is only fitting that this bridge bears her name.

Shirley a Nenana Native Daughter, passed away January 3, 2007 after a year long battle with lung cancer. Shirley was a well known community activist and native Leader. She is best known for her unbridled support for those in need.

It was noted in the January 8, 2007 edition of the *Fairbanks News-Miner*, that Shirley truly was the "bridge over troubled waters for so many. Shirley's gift was to reach out to anyone in need and help guide them to that bridge. In some cases, Shirley took it upon herself to build that bridge, which for some was the only way home." A dear friend stated "Shirley was all about bridges; between cultures, communities and those in need."

The Shirley Demientieff Memorial Bridge will serve as a reminder of her tireless work in bringing people together from all walks of life, for the good of all citizens in this great state of Alaska.

I ask you to support SB 158, and recognize and honor this truly compassionate woman's life.

THE ALASKA LEGISLATURE

DRAFT



SPONSORS APPROVAL:

In Memoriam

*** SHIRLEY A. DEMIENTIEFF ***

The members of the Twenty-fifth Alaska State Legislature join with family and friends of Shirley Demientieff in honoring her life and mourning her passing.

Shirley, the eldest of seven children, was born in 1951 to the late George and Elizabeth Demientieff of Nenana. She was an Athabascan who was very close to her grandmother Mary who taught her to take great pride in her heritage, culture, and traditions. Shirley will be greatly missed by her daughters Elizabeth "Lisa" and Leslie, her nephew/son Daniel, her grandchildren, and her vast extended family.

Shirley was a natural caregiver who turned no one away. She opened her house to the children of the Nenana, and when the house ran out of room, she set up a tent in her yard. For this, she is known to many as auntie, mom, grandma, foster mom, and friend. She will be remembered as a long serving family matriarch, caring for family and foster children. Shirley was known for acting out of love, love for people without condition. Her love for all inspired her to be a determined voice for the integrity of her people. She is remembered by many as the "bridge over troubled waters", as she guided many to that bridge of help, which for many was the only way home.

A life-long activist, Shirley is best known for her work on preventing suicide, alcoholism, and sexual abuse. She was devoted in taking a lead role to organize search teams when villagers were lost in Interior Alaska and will also be remembered as a diligent supporter for enfranchised people and would lead marches and raise money. Even after being diagnosed with a brain aneurism in 2000, Shirley continued to champion her causes. In 2005, she traveled the villages of the Koyukuk, Yukon, and Tanana rivers on a suicide prevention mission.

Shirley was also a leader in the native community. She served on the boards of Doyon Limited and its subsidiaries. She also served on the Shareholder Relations and Budget and Audit committees for Doyon. She was also the President and founder of Alaska Natives Standing Up for Justice and the Tanana Valley Search and Recovery. She also served on the Fairbanks Native Association Board of Directors and the Tanana Chiefs Conference Health Board.

Shirley A. Demientieff passed away on January 3, 2007, in Fairbanks but will continue to live on in the memories of each fortunate person that has crossed paths with her. The members of the Twenty-fifth Alaska State Legislature extend their condolences and join with Shirley's family and many friends to remember and honor her life.

JOHN HARRIS
SPEAKER OF THE HOUSE

LYDA GREEN
PRESIDENT OF THE SENATE

Air photo



Proposed Shirley Demientieff Bridge

North Slough

Tanana River

Unfilled Placement

Kenana Port Authority

Tribal Hall

Native H

Old George Tribal Hall

District Courthouse

Fire Department

Public School Complex

Senior Center

1300 ft

Image © 2007 TerraMetrics

Google

Nationalbridges.com



Place Name: Nenana, Alaska
NBI Structure Number: 0201

I-A44

Facility Carried: PARKS HIGHWAY
Feature Intersected: NORTH SLOUGH TANANA RIV
Location: MILE POINT 270.9

Home

E-Mail

FAQ

Year Built: 1967

What's New

Owned and maintained by: State Highway Agency

NBI Bridge Database

Functional Classification: Rural Principal Arterial - Interstate

Service On Bridge: Highway
Service Under Bridge: Waterway
Lanes On Structure: 2

Links

About

Structure Length: 188.1 m
Bridge Roadway Width: 9.1 m
Operating Rating: 63 Metric Tons
Navigation Vertical Clearance: 12.1 m
Number of Spans in Main Unit: 7 Spans
Material Design: Steel
Design Construction: Stringer/Multi-beam or Girder

Free Sudoku Puzzles!

Deck Condition: Fair Condition
Superstructure Condition: Fair Condition
Substructure Condition: Fair Condition
Scour: Foundations determined to be stable for assessed scour conditions
Bridge Railing: Meets currently acceptable standards.

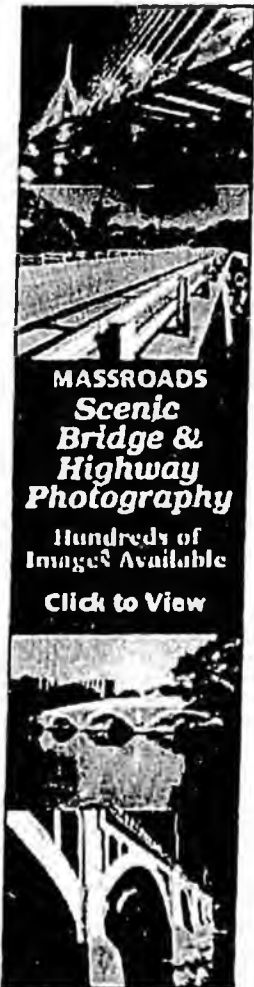
Structural Evaluation: Somewhat better than minimum adequacy to tolerate being left in place as is
Water Adequacy Evaluation: Superior to present desirable criteria

Average Daily Traffic: 1624
Year of Average Daily Traffic: 2002
Sufficiency Rating: 61 %

Return to National Bridge Inventory Database query form.

Disclaimer Statement - Alexander Svirsky, Nationalbridges.com, Massroads.com and Granitehighways.com provide no warranty whatsoever, express or implied, as to the accuracy, reliability or completeness of furnished data.

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FAIRBANKS
Daily News - Miner

*email Sen.
Stedman 1/18/08*

Senate panel eyes bill honoring Demientieff

By Stefan Milkowski
Published May 1, 2007

JUNEAU — A lot of attention has been focused lately on natural gas pipeline legislation and the state's budgets, but other bills are moving, too, including one honoring Shirley Demientieff, who died in January of lung cancer.

Demientieff was an Alaska Native leader and community activist who took on a wide range of issues, including suicide prevention.

"She is best known for her unbridled support for those in need," said Dorothy Shockley, an aide to Sen. Albert Kookesh, D-Angoon.

Kookesh introduced a bill last month that would name the small bridge in Nenana directly north of the Alaska Native Veterans' Honor Bridge the Shirley Demientieff Memorial Bridge.

The Senate Transportation Committee, which Kookesh chairs, held a hearing on the bill last week. Shockley introduced the bill for Kookesh.

"Ms. Shirley was a bridge to so many," she said, "and it is only fitting that this bridge bears her name."

The Rev. Scott Fisher of St. Matthew's Episcopal Church in Fairbanks testified in favor of the bill. He said he thought months ago that it would be good to have a statue of Demientieff or some other thing to remind the community that one person can make a difference. Naming the bridge after her, he said, seemed like a good idea and a way to acknowledge the impact she had in Nenana and across the Interior.

"Alaska is a place for stories, and hers is a story worth remembering," he said.

Tim Wallace of Doyon Ltd. and William Lord and Harry Fields of the Alaska Native Veterans Association also spoke in favor of the bill.

"I and a lot of other folks have always admired Shirley for all her work around here," Fields said. "I'm sure right now if there's any issues up in heaven that needs to be acted on, I'm sure Shirley's holding aside up there."

The bill, SB 158, was moved out of committee after the hearing. It is now before the Senate Finance Committee.

Hot potato moves forward

Sen. Gary Wilken, R-Fairbanks, saw some movement last week on SB 134, a bill he's sponsoring that would make it the state's policy to use earnings from the Alaska Permanent Fund along with other savings in years when the state faces deficits.



ALASKA FEDERATION
OF NATIVES

letters of support
SB 158

April 20, 2007

Senate Transportation Committee
Attention: Senator Albert Kookesh, Chair
Alaska State Legislature
State Capitol, Room 11
Juneau, AK 99801

Dear Senator Kookesh:

RE: SB 158 – Designating the Bridge on the George Parks Highway directly North of the Alaska Native Veterans' Honor Bridge as the Shirley Demientieff Memorial Bridge

On behalf of the Board of Directors of the Alaska Federation of Natives, I am writing to express our support for SB 158. We find it especially fitting to name a bridge in Shirley's honor. As was noted in an editorial appearing in the *Fairbanks News-Miner* on January 8, 2007, "Shirley Demientieff became, through her actions and her strong, proud voice, a bridge between two cultures living in one land. In that she served us all well and will be missed." Shirley was president and founder of Alaska Natives Standing Up for Justice and of the Tanana Valley Search and Recovery, whose volunteers' would search for the missing long after the government agencies had exhausted their resources.

Shirley was widely known for her many contributions to the Fairbanks and Interior communities. She was one of our strongest advocates for suicide prevention. In July 2005, she traveled by riverboat on a suicide prevention mission, visiting and talking to people in villages from Allakaket to Nenana. Her 2-week boat trip along the Koyukuk, Yukon and Tanana rivers ended in Nenana where she grew up and was followed there by a Suicide Prevention Conference. Her life was devoted to service to her community, her family and to the statewide Alaska Native community.

The Shirley Demientieff Memorial Bridge is a wonderful way to honor her life's work. Accordingly, we urge passage of this bill.

Sincerely,

Julie Kitka
President

Alaska Native Veteran's Association
Nenana Post 3
P.O. Box 26
Nenana, Alaska 99760

February 9, 2007

Leo Von Scheben, P.E, LS., MBA
Commissioner
3132-Channel Drive
P.O. Box 112500
Juneau, Ak. 99811-2500

RE: Shirley Demientieff Bridge Dedication Proposal


Dear Commissioner Von Scheben

Shirley Demientieff, a Nenana Native Daughter, passed away January 3, 2007 after a yearlong battle with lung cancer. Shirley was well-known community activist and Native leader. Shirley Demientieff is best known for her unbridled support for those in need. People are able to recount story after story after story of times and situations where she helped people.

The January 8, 2007 issue of the Fairbanks News Miner noted that Pat Morgan wrote in the service program, "During Shirley's life, she was the bridge over troubled waters for so many. At times that bridge was grand and easy to cross. But for many that bridge over troubled waters of life was hidden. Shirley's gift was to reach out to anyone in need and help guide him or her to that bridge. In some cases, Shirley took it upon herself to build that bridge, which for some was the only way home."

The Alaska Native Veteran's Association of Nenana, Alaska, Post 3 would like to formally request that the process for dedicating the concrete bridge directly north of the Alaska Native Veteran's Honor Bridge over the Tanana River be initiated. We propose that the bridge be officially named the Shirley Demientieff Memorial Bridge in honor of her selfless endeavors in support of Alaska Native people and all who were less fortunate in their lives. And her work in helping to dedicate The Alaska Native Veteran's Honor Bridge to the Alaska Native Veteran's.

Sincerely,


Post 3 Commander Colonel William Lord



Nenana Native Council

P.O. Box 356
Nenana, AK 99760

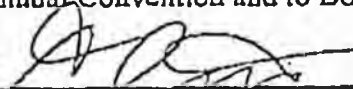
907.832.5461
Fax 907.832.1077

Nenana Native Council Resolution 2007-09

WHEREAS, The Alaska Native Veterans Post 3 commander Colonel William Lord has nominated the bridge over the slough next to the Alaska native veterans Bridge in Nenana after Shirley Demientieff pursuant to the attached letter.

NOW THEREFORE, be it resolved the Nenana Native council hereby endorsed the effort and,

NOW THEREFORE BE IT RESOLVED, that this endeavor be forwarded to TCC at its Annual Convention and to Doyon Limited for support.



Mitch Demientieff 1st. Chief

2/15/07



Attest By



"Great Place to camp Between Two Rivers"

1030 Second Avenue
Fairbanks 99701
Friday, March 23rd, 2007

To whom it may concern,

Information has come this morning of an effort to nominate the naming of the "slough Bridge" just outside of Nenana as the "Shirley Demientieff Memorial Bridge". It's our understanding that the Alaska Native Veteran's Association, Post #3 of Nenana has proposed and endorsed this nomination; and we are happy/pleased/and honored to second and support this nomination.

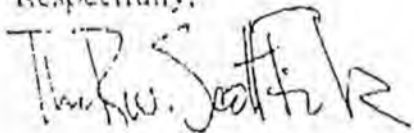
I am a longtime Friend and Supporter of Shirley and, as the rector of St. Matthew's here in Fairbanks, was the celebrant at the Memorial services for Shirley, both here in Fairbanks and in Nenana.

I am the rector of St. Matthew's Episcopal Church, here in Fairbanks, but I am writing as a personal supporter of the nomination, and longtime friend of Shirley, and not as the rector (*being unable to speak for the Church without the endorsement of the Vestry - the "Board of Directors" for the Church; and such action is impossible to receive in so short a time*). I am also not unfamiliar with Nenana, having spent close to 40 years living in the Interior, and visiting Nenana frequently.

Shirley was all about bridges - between cultures and communities and those in need, etc. Naming the bridge after her would be a significant action by the State in recognizing its citizens who have worked to bring us all together, and hold us there; connecting us. This is a very very good and worthy idea. Naming the bridge after Shirley announces to travelers that Nenana is the kind of community that can produce such folk, and that cares.

Thank you for your consideration.

Respectfully,



The Rev. Scott Fisher
rector, St. Matthew's Episcopal Church
Fairbanks, Alaska
[907-456-5235; FAX: 907-456-2934; email: sfisher@mosquionet.com]

Copy



Doyon, Limited

1 Doyon Place, Suite 300
Fairbanks, Alaska 99701-2941
(907) 459-2000
info@doyon.com

RECEIVED

APR 10 2007

Sen. Kookesh's Office

April 3, 2007

Honorable Albert Kookesh
State of Alaska Senator
State Capitol, Room 11
Juneau, Alaska 99801-1182

RE: Letter of Support - Memorial for Shirley Demientieff

Dear Senator Kookesh:

Shirley Demientieff was a champion of the Alaska Native People. She was a well known state-wide activist for her tireless support of those in need.

Shirley passed away in January of 2007 after a courageous year-long battle against cancer. It was noted in the January 3, 2007 edition of the *Fairbanks News-Miner*, that Shirley truly was the "bridge over troubled waters for so many. Shirley's gift was to reach out to those in need and to help guide them to that bridge of help, which for many was the only way home."

It is this helping, leadership role that Doyon, Limited, wishes to memorialize and to inspire the continuation of that future leadership role of caring for others.

Doyon, Limited, formally requests that the bridge which is north of the Alaska Native Veteran's Honor Bridge in Nenana, Alaska, be memorialized as the Shirley Demientieff Memorial Bridge, in honor of this truly compassionate woman. Thank you for your consideration.

Sincerely,

Orie Williams
President and CEO

cc: Doyon, Limited Board of Directors
Commissioner Leo Von Scheben, PE, LS, MBA

Tanana Chiefs Conference

Chief Peter John Tribal Building
122 First Avenue, Suite 600
Fairbanks, Alaska 99701-4897
(907) 452-8251 Fax: (907) 459-3850

SUBREGIONS March 21, 2007

UPPER KUSKOKWIM

McGrath
Medfra
Nikolai
Takatna
Telida

Senator Albert Kookesh
Alaska State Capitol, Room 7
Juneau, Alaska 99801-1182

LOWER YUKON

Anvik
Graying
Holy Cross
Shogeluk

Dear Senator Kookesh,

The Tanana Chiefs Conference is in support of naming the small Bridge in Nenana after the late Ms. Shirley Demientieff of Fairbanks/Nenana.

UPPER TANANA

Dot Lake
Eagle
Healy Lake
Normway
Tanacross
Tetlin
Tok

Ms. Demientieff was very involved and cared deeply for the Alaska Native Community. She volunteered on committees or was board member of but not limited to the following:

- Alaska Natives Stand Up for Justice,
- Board member of Doyon, Ltd,
- Fairbanks Native Association,
- Tanana Chiefs Conference Health Board,
- Instrumental in naming the Tanana River Bridge the Alaska Native Veteran's Memorial Bridge
- Traveled to the Yukon River Villages to speak to the Communities about Suicide Awareness and Prevention
- Foster Parent to many Native Children.

YUKON FLATS

Arctic Village
Beaver
Birch Creek
Canyon Village
Charleyvik
Circle
Fort Yukon
Venete

We respectfully request your assistance in the naming of the small Bridge in Nenana after the late Shirley Demientieff.

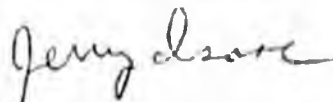
If you have any questions, please call or write me at the above address.

YUKON KOYUKUK

Galena
Huslia
Katag
Koyukuk
Nulato
Ruby

Sincerely,

TANANA CHIEFS CONFERENCE



Jerry Isaac - President and CEO

YUKON TANANA

Alatna
Alikakot
Evanville
Fairbanks
Hughes
Lata
Minchumina
Manley Hot
Springs
Minto
Nenana
Rampart
Stevens Village
Tanana

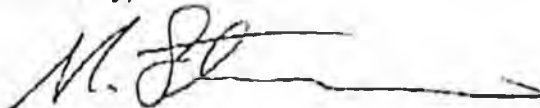
Senate Transportation Committee
(907) 465-2827

To Whom It May Concern:

I am writing in hopes that you strongly consider naming the bridge on the George Parks Highway after Shirley Demientieff. Shirley Demientieff has been an inspiration to anybody that has ever been in her presence. She will be greatly missed for her diligence in working hard for the everyday people in her community and around the State of Alaska. Having personally known her since I was able to remember, I have seen the many extraordinary things that she was able to accomplish. I believe that honoring the bridge with her name will be a great step and carrying on her legacy and ideals as a person working strongly towards the betterment of society.

I am in strong support of naming the bridge after Shirley Demientieff. Thank you and if you have any questions please do not hesitate to ask.

Sincerely,



Matt Stevens
Administrative Assistant, Shareholder Relations
Doyon, Limited
1 Doyon Pl, Ste 300
Fairbanks, AK 99701-2941
(907) 459-2016, *phone*
(907) 459-2065, *fax*
www.doyon.com

Dawn Head

1100 28th Ave, Fairbanks, Alaska 99701 – 907-479-3670

April 20, 2007

Senate Transportation Committee
Attention: Senator, Albert Kookesh

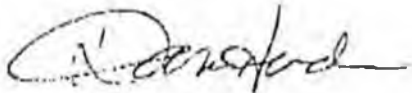
Regarding: SB 158

Dear Senator:

I would like to add my letter of support to those that have already submitted their letters. I believe that to name the portion of the Nenana Bridge after Shirley Demientieff not only honors her as a person but as a native leader in the community and Alaska. Shirley had dedicated her life to her people and in the scheme of Alaskan life it is but a little thing to dedicate a portion of a bridge in return.

Thank you, for your consideration of my letter of support. I look forward to seeing a dedication ceremony that names that portion of the bridge "Shirley Demientieff".

Sincerely,



Dawn Head
Past Neighbor and friend of Shirley

Senate Transportation Committee
Fax: (907) 465-2827
Attention: Senator Kookesh

Dear Senator Kookesh:

We are in support of SB 158, an Act designating the bridge on the George Parks Highway directly north of the Alaska Native Veterans' Honor Bridge as the Shirley Demientieff Memorial Bridge.

Ms. Shirley Demientieff was a well respected Doyon shareholder, as well as an activist for many issues throughout interior Alaska. A monument remembering her contribution serving Alaska is very well-deserving.

Thank you for your consideration,

Teddy and Eva Edwards

Teddy and Eva Edwards
821 Jay Circle
Anchorage, AK 99504
(907) 333-2992

SB

158

SFIN

FILE

SENATE FINANCE COMMITTEE REPORT

DATE: 4/25/07

FURTHER:

DATE TURNED
IN TO OFFICE: 2/19/08

Finance Committee considered

SENATE BILL NO. 158

SB 158 SHIRLEY DEMIENTIEFF MEMORIAL BRIDGE

"An Act designating the bridge on the George Parks Highway directly north of the Alaska Native Veterans' Honor Bridge as the Shirley Demientieff Memorial Bridge."

and recommends:

- be replaced with SCS or CS _____ (_____)
- adopt previous SCS or CS _____ (_____)
- attached amendment(s)
- adopt _____ Letter of Intent
- further referral to _____ Committee

SENATE BILL:

- Same Title
- New Title

HOUSE BILL:

- Same Title
- Technical Title Change
- New Title w/ SCR # _____

NEW FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#
DOT	2/19	✓			

PREVIOUS FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#

APPROPRIATION - no fiscal note

SIGNATURES AND RECOMMENDATIONS:	PRINTED LAST NAME	DO PASS	DO NOT PASS	NO REC	AMEND
	Elton	✓			
	Thomas	✓			
	Dyson	✓			
	Huggins	✓			
	OLSON	✓			
CO-CHAIR:		✓			
CO-CHAIR:		✓			

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: _____
Bill Version: _____
() Publish Date: _____

Identifier (file name): SB158-DOT-NRF-02-19-08 Dept. Affected: DOT&PF
Title: Shirley Demientieff Memorial Bridge RDU: Facilities and Maintenance Operations
Sponsor: Senator Kookesh Component: Northern Region Facilities
Requester: Senate Finance Component Number: 2069

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
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OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies	7.5							
Equipment								
Land & Structures								
Grants & Claims								
Miscellaneous								
TOTAL OPERATING	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES								
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CHANGE IN REVENUES ()								
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FUND SOURCE (Thousands of Dollars)

	FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
1002 Federal Receipts							
1003 GF Match							
1004 GF	7.5						
1005 GF/Program Receipts							
1037 GF/Mental Health							
Other Interagency Receipts							
TOTAL	7.5	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2008) cost: 0.0

POSITIONS

Full-time							
Part-time							
Temporary							

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

It is estimated it will cost \$7.5 for the production and installation of two signs and two posts; one in each direction, designating the bridge as the Shirley Demientieff Memorial Bridge. These signs will not be mounted on the bridge but will be on new posts slightly in advance of the bridge.

Prepared by: Mary Siroky, DOT&PF Phone: 465-4772
Division: Commissioner's Office Date/Time: 2/19/08 8:00 AM
Approved by: Nancy Slego, Admin Director Date: 2/19/2008
DOT&PF



SENATOR ALBERT M. KOOKESH

ALASKA STATE LEGISLATURE SENATE DISTRICT C

e-mail: Senator.Albert.Kookesh@legis.state.ak.us webmail: www.akdemocrats.org

State Capitol, Room 11

Juneau AK, 99801-1182

907-465-3473

888-288-3473

FAX 907-465-2827

Sponsor Statement

SB 158 "Naming Shirley Demientieff Memorial Bridge"

Senate Bill 158 would name the small bridge in Nenana directly north of the Alaska Native Veterans' Bridge in honor of Shirley Demientieff. Ms. Shirley was a bridge to so many and it is only fitting that this bridge bears her name.

Shirley a Nenana Native Daughter, passed away January 3, 2007 after a year long battle with lung cancer. Shirley was a well known community activist and native Leader. She is best known for her unbridled support for those in need.

It was noted in the January 8, 2007 edition of the *Fairbanks News-Miner*, that Shirley truly was the "bridge over troubled waters for so many. Shirley's gift was to reach out to anyone in need and help guide them to that bridge. In some cases, Shirley took it upon herself to build that bridge, which for some was the only way home." A dear friend stated "Shirley was all about bridges; between cultures, communities and those in need."

The Shirley Demientieff Memorial Bridge will serve as a reminder of her tireless work in bringing people together from all walks of life, for the good of all citizens in this great state of Alaska.

I ask you to support SB 158, and recognize and honor this truly compassionate woman's life.

Copy



Doyon, Limited

1 Doyon Place, Suite 300
Fairbanks, Alaska 99701-2941
(907) 459-2000
info@doyon.com

RECEIVED

APR 10 2007

Sen. Kookesh's Office

April 3, 2007

Honorable Albert Kookesh
State of Alaska Senator
State Capitol, Room 11
Juneau, Alaska 99801-1182

RE: Letter of Support - Memorial for Shirley Demientieff

Dear Senator Kookesh:

Shirley Demientieff was a champion of the Alaska Native People. She was a well known state-wide activist for her tireless support of those in need.

Shirley passed away in January of 2007 after a courageous year-long battle against cancer. It was noted in the January 8, 2007 edition of the *Fairbanks News-Miner*, that Shirley truly was the "bridge over troubled waters for so many. Shirley's gift was to reach out to those in need and to help guide them to that bridge of help, which for many was the only way home."

It is this helping, leadership role that Doyon, Limited, wishes to memorialize and to inspire the continuation of that future leadership role of caring for others.

Doyon, Limited, formally requests that the bridge which is north of the Alaska Native Veteran's Honor Bridge in Nenana, Alaska, be memorialized as the Shirley Demientieff Memorial Bridge, in honor of this truly compassionate woman. Thank you for your consideration.

Sincerely,

Orie Williams
President and CEO

cc: Doyon, Limited Board of Directors
Commissioner Leo Von Scheben, PE, LS, MBA

1030 Second Avenue
Fairbanks 99701
Friday, March 23rd, 2007

To whom it may concern,

Information has come this morning of an effort to nominate the naming of the "slough Bridge" just outside of Nenana as the "Shirley Demientieff Memorial Bridge". It's our understanding that the Alaska Native Veteran's Association, Post #3 of Nenana has proposed and endorsed this nomination; and we are happy/pleased/and honored to second and support this nomination.

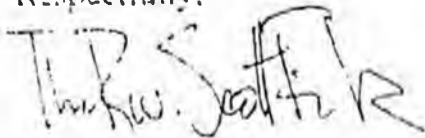
I am a longtime friend and supporter of Shirley and, as the rector of St. Matthew's here in Fairbanks, was the celebrant at the Memorial services for Shirley, both here in Fairbanks and in Nenana.

I am the rector of St. Matthew's Episcopal Church, here in Fairbanks, but I am writing as a personal supporter of the nomination, and longtime friend of Shirley, and not as the rector (*being unable to speak for the Church without the endorsement of the Vestry - the "Board of Directors" for the Church; and such action is impossible to receive in so short a time*). I am also not unfamiliar with Nenana, having spent close to 40 years living in the Interior, and visiting Nenana frequently.

Shirley was all about bridges - between cultures and communities and those in need, etc. Naming the bridge after her would be a significant action by the State in recognizing its citizens who have worked to bring us all together, and hold us there; connecting us. This is a very very good and worthy idea. Naming the bridge after Shirley announces to travelers that Nenana is the kind of community that can produce such folk, and that cares.

Thank you for your consideration.

Respectfully,



The Rev. Scott Fisher
rector, St. Matthew's Episcopal Church
Fairbanks, Alaska
(907-456-5235; FAX: 907-456-2934; email: sfisher@mosquionet.com)

Tanana Chiefs Conference

Chief Peter John Tribal Building

122 First Avenue, Suite 600

Fairbanks, Alaska 99701-4897

(907) 452-8251 Fax: (907) 459-3850

SUBREGIONS March 21, 2007

UPPER

KUSKOKWIM

McGrath
Medfra
Nikolai
Takotna
Teikda

Senator Albert Kookesh
Alaska State Capitol, Room 7
Juneau, Alaska 99801-1182

LOWER YUKON

Anvik
Grayling
Holy Cross
Shageluk

Dear Senator Kookesh,

The Tanana Chiefs Conference is in support of naming the small Bridge in Nenana after the late Ms. Shirley Demientieff of Fairbanks/Nenana.

UPPER TANANA

Dot Lake
Eagle
Healy Lake
Northway
Tanacross
Tetlin
Tok

Ms. Demientieff was very involved and cared deeply for the Alaska Native Community. She volunteered on committees or was board member of but not limited to the following:

- Alaska Natives Stand Up for Justice,
- Board member of Doyon, Ltd,
- Fairbanks Native Association,
- Tanana Chiefs Conference Health Board,
- Instrumental in naming the Tanana River Bridge the Alaska Native Veteran's Memorial Bridge
- Traveled to the Yukon River Villages to speak to the Communities about Suicide Awareness and Prevention
- Foster Parent to many Native Children.

YUKON FLATS

Arctic Village
Beaver
Birch Creek
Canyon Village
Chalkyitsik
Circle
Fort Yukon
Venetie

YUKON

KOYUKUK

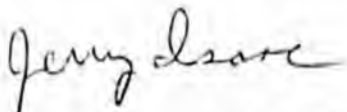
Galena
Huslia
Kaitag
Koyukuk
Nulato
Ruby

We respectfully request your assistance in the naming of the small Bridge in Nenana after the late Shirley Demientieff.

If you have any questions, please call or write me at the above address.

Sincerely,

TANANA CHIEFS CONFERENCE



Jerry Isaac - President and CEO

YUKON TANANA

Atma
Atlakaket
Evanville
Fairbanks
Hughes
Lake
Minchumina
Manley Hot
Springs
Minto
Nenana
Rampart
Stevens Village
Tanana

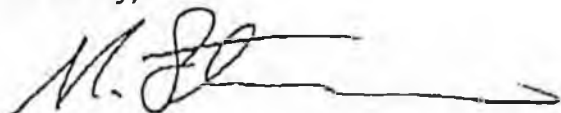
Senate Transportation Committee
(907) 465-2827

To Whom It May Concern:

I am writing in hopes that you strongly consider naming the bridge on the George Parks Highway after Shirley Demientieff. Shirley Demientieff has been an inspiration to anybody that has ever been in her presence. She will be greatly missed for her diligence in working hard for the everyday people in her community and around the State of Alaska. Having personally known her since I was able to remember, I have seen the many extraordinary things that she was able to accomplish. I believe that honoring the bridge with her name will be a great step and carrying on her legacy and ideals as a person working strongly towards the betterment of society.

I am in strong support of naming the bridge after Shirley Demientieff. Thank you and if you have any questions please do not hesitate to ask.

Sincerely,



Matt Stevens
Administrative Assistant, Shareholder Relations
Doyon, Limited
1 Doyon Pl, Ste 300
Fairbanks, AK 99701-2941
(907) 459-2016, phone
(907) 459-2065, fax
www.doyon.com

Dawn Head

1100 28th Ave, Fairbanks, Alaska 99701 - 907-479-3670

April 20, 2007

Senate Transportation Committee
Attention: Senator, Albert Kookesh

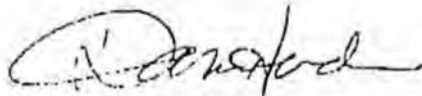
Regarding: SB 158

Dear Senator:

I would like to add my letter of support to those that have already submitted their letters. I believe that to name the portion of the Nenana Bridge after Shirley Demientieff not only honors her as a person but as a native leader in the community and Alaska. Shirley had dedicated her life to her people and in the scheme of Alaskan life it is but a little thing to dedicate a portion of a bridge in return.

Thank you, for your consideration of my letter of support. I look forward to seeing a dedication ceremony that names that portion of the bridge "Shirley Demientieff".

Sincerely,



Dawn Head
Past Neighbor and friend of Shirley

Senate Transportation Committee
Fax: (907) 465-2827
Attention: Senator Kookesh

Dear Senator Kookesh:

We are in support of SB 158, an Act designating the bridge on the George Parks Highway directly north of the Alaska Native Veterans' Honor Bridge as the Shirley Demientieff Memorial Bridge.

Ms. Shirley Demientieff was a well respected Doyon shareholder, as well as an activist for many issues throughout interior Alaska. A monument remembering her contribution serving Alaska is very well-deserving.

Thank you for your consideration,

Teddy and Eva Edwards

Teddy and Eva Edwards
821 Jay Circle
Anchorage, AK 99504
(907) 333-2992

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: 1
Bill Version: SB 158
(S) Publish Date: 4/25/07

Revision Date/Time (Note if correction): _____ Dept. Affected: DOT&PF
Title Shirley Demientieff Memorial Bridge RDU Facility and Maintenance Operations
Component Northern Region Facilities
Sponsor Sen. Kookesh
Requester S. TRA Component No. 2069

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies	7.5					
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	7.5	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
-----------------------------	--	--	--	--	--	--

CHANGE IN REVENUES ()						
-------------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

FUND SOURCE	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
1002 Federal Receipts						
1003 GF Match	7.5					
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
TOTAL	7.5	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

It is estimated that it will cost \$7.5 for the production and installation of two signs and two posts; one in each direction, designating the bridge as the Shirley Demientieff Memorial Bridge. These signs will not be mounted on the bridge but will be on new posts slightly in advance of the bridge.

Prepared by: Mary Siroky
Division: Commissioner's Office
Approved by: John MacKinnon
Agency: Department of Transportation and Public Facilities

Phone 465-4772
Date/Time 4/21/07 2:30 AM
Date 4/21/2007

SENATE COMMITTEE REPORT
First Committee of Referral

DATE: 4/18/07

FURTHER: Rules

Date of 5-Day Notice: 4/19/07
 (in accordance with Uniform Rule 23)

DATE TURNED
 IN TO OFFICE: 4-24-07

Transportation Committee considered SENATE BILL NO. 158

SB 158 SHIRLEY DEMIENTIEFF MEMORIAL BRIDGE

"An Act designating the bridge on the George Parks Highway directly north of the Alaska Native Veterans' Honor Bridge as the Shirley Demientieff Memorial Bridge."

and recommends:

- be replaced with SCS or CS _____ (_____)
- adopt previous SCS or CS _____ (_____)
- attached amendment(s)
- adopt _____ Letter of Intent
- further referral to _____ Committee

SENATE BILL:	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	New Title
<hr/>	
HOUSE BILL:	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	Technical Title Change
<input type="checkbox"/>	New Title w/ SCR # _____

NEW FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#
DOT	4/21	✓			1

PREVIOUS FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#

APPROPRIATION - no fiscal note



SIGNATURES AND RECOMMENDATIONS:	PRINTED LAST NAME	DO PASS	DO NOT PASS	NO REC	AMEND
<i>Witek Chowski</i>	<i>Witek Chowski</i>	✓			
<i>Olson</i>	<i>Olson</i>	✓			
<i>Chowdry</i>	<i>Chowdry</i>	✓			
CHAIR: <i>Witek Chowski</i>	<i>Witek Chowski</i>	✓			



ALASKA FEDERATION
OF NATIVES

April 20, 2007

Senate Transportation Committee
Attention: Senator Albert Kookesh, Chair
Alaska State Legislature
State Capitol, Room 11
Juneau, AK 99801

Dear Senator Kookesh:

RE: SB 158 - Designating the Bridge on the George Parks Highway directly North of the Alaska Native Veterans' Honor Bridge as the Shirley Demientieff Memorial Bridge

On behalf of the Board of Directors of the Alaska Federation of Natives, I am writing to express our support for SB 158. We find it especially fitting to name a bridge in Shirley's honor. As was noted in an editorial appearing in the *Fairbanks News-Miner* on January 8, 2007, "Shirley Demientieff became, through her actions and her strong, proud voice, a bridge between two cultures living in one land. In that she served us all well and will be missed." Shirley was president and founder of Alaska Natives Standing Up for Justice and of the Tanana Valley Search and Recovery, whose volunteers' would search for the missing long after the government agencies had exhausted their resources.

Shirley was widely known for her many contributions to the Fairbanks and Interior communities. She was one of our strongest advocates for suicide prevention. In July 2005, she traveled by riverboat on a suicide prevention mission, visiting and talking to people in villages from Allakaket to Nenana. Her 2-week boat trip along the Koyukuk, Yukon and Tanana rivers ended in Nenana where she grew up and was followed there by a Suicide Prevention Conference. Her life was devoted to service to her community, her family and to the statewide Alaska Native community.

The Shirley Demientieff Memorial Bridge is a wonderful way to honor her life's work. Accordingly, we urge passage of this bill.

Sincerely,

Julie Kitka
President

Alaska Native Veteran's Association
Nonana Post 3
P.O. Box 26
Nenana, Alaska 99760

February 9, 2007

Leo Von Scheben, P.E, LS., MBA
Commissioner
3132-Channel Drive
P.O. Box 112500
Juneau, Ak. 99811-2500

RE: Shirley Demientieff Bridge Dedication Proposal


Dear Commissioner Von Scheben

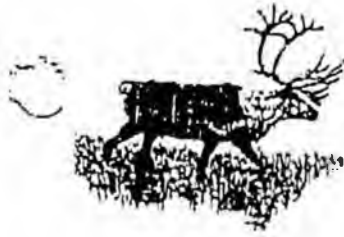
Shirley Demientieff, a Nenana Native Daughter, passed away January 3, 2007 after a yearlong battle with lung cancer. Shirley was well-known community activist and Native leader. Shirley Demientieff is best known for her unbridled support for those in need. People are able to recount story after story after story of times and situations where she helped people.

The January 8, 2007 issue of the Fairbanks News Miner noted that Pat Morgan wrote in the service program, "During Shirley's life, she was the bridge over troubled waters for so many. At times that bridge was grand and easy to cross. But for many that bridge over troubled waters of life was hidden. Shirley's gift was to reach out to anyone in need and help guide him or her to that bridge. In some cases, Shirley took it upon herself to build that bridge, which for some was the only way home."

The Alaska Native Veteran's Association of Nenana, Alaska, Post 3 would like to formally request that the process for dedicating the concrete bridge directly north of the Alaska Native Veteran's Honor Bridge over the Tanana River be initiated. We propose that the bridge be officially named the Shirley Demientieff Memorial Bridge in honor of her selfless endeavors in support of Alaska Native people and all who were less fortunate in their lives. And her work in helping to dedicate The Alaska Native Veteran's Honor Bridge to the Alaska Native Veteran's.

Sincerely,


Post 3 Commander Colonel William Lord



Nenana Native Council

P.O. Box 356
Nenana, AK 99760

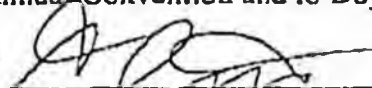
907.832.5461
Fax 907.832.1077

Nenana Native Council Resolution 2007-09

WHEREAS, The Alaska Native Veterans Post 3 commander Colonel William Lord has nominated the bridge over the slough next to the Alaska native veterans Bridge in Nenana after Shirley Demientieff pursuant to the attached letter.

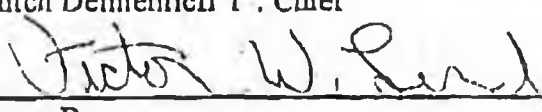
NOW THEREFORE, be it resolved the Nenana Native council hereby endorsed the effort and,

NOW THEREFORE BE IT RESOLVED, that this endeavor be forwarded to TCC at its Annual Convention and to Doyon Limited for support.



Mitch Demientieff 1st. Chief

2/15/07



Attest By




"Great Place to camp Between Two Rivers"

SB

160

SFIN

FILE



Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski

A Bipartisan Solution To Cover The Health Needs Of All Alaskans

SB 160 - Senate Finance Bill Packet

Comments about the legislation:

Anchorage Daily News Editorial:

"BOTTOM LINE: Here's a promising, market-based, consumer-driven approach to universal health insurance in Alaska."

- Published September 23rd, 2007

Al Parrish, VP/Chief Executive, Providence Health Systems Alaska:

"I believe it is crucial for Alaskans to engage in a public policy debate on this important issue and this legislation provides an excellent forum around which this discussion can be held."

- Written in a letter to Senator French and included in this packet

Laile Fairbairn, Managing Owner, Snow City Café (located in Anchorage, AK):

"I feel that Senate Bill 160 is a very promising solution to a significant problem faced by a large number of Alaskan businesses."

- Testimony during the September 10th bill hearing in Anchorage, AK

SB 160

Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski

Legislation Summary

Senate Bill 160 is an innovative, market based solution to the national health care crisis in Alaska. It is not socialized medicine. By maximizing consumer choice and creating a health insurance clearinghouse, this legislation guarantees affordable quality health coverage for all legal Alaskan residents.

Many working Alaskans cannot acquire insurance because the cost of coverage places a plan out of reach. While all Alaskans have legal 'access' to insurance products, those who cannot afford the full cost must hedge their bets on good health. Alaska's unique economy adds additional challenges: seasonal employees, for instance, find themselves outside the traditional 'group' market, lacking an easy route to maintain continuous, portable coverage. And with the amount of uncompensated care rising, the pressure on individuals and businesses who do buy coverage will only increase, because unpaid hospital bills are essentially transferred to those who pay for services. SB 160 will reduce uncompensated care and ensure that all Alaskans have meaningful access to health coverage, regardless of job type.

The solution requires that all Alaskans participate. While individuals will have the responsibility to acquire coverage under the bill, the state will guarantee that a quality insurance product will be affordable. Sliding scale vouchers will assist Alaskans that cannot afford the full price of coverage on their own. The bill allows for unique plans that cater specifically to young Alaskans. This legislation does not assume that a one size fits all solution will work for Alaska.

The health care 'clearinghouse' will give participating Alaskans choices when it comes to health coverage, in a competitive marketplace framework. It allows for unsatisfied consumers to change insurers or plans without a loss of benefits, and provides a private market solution to rising costs. By placing the consumer in control and providing information about comparable products, the clearinghouse should reduce cost increases while increasing customer satisfaction.

In short, this legislation will ensure that all Alaskans have access to health care in times of great need, through an equitably financed system.

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For more information, contact Sen. French's office:
Phone: (907) 269-0153 E-Mail: Senator_Hollis_French@legis.state.ak.us

www.healthyalaskans.com

SB 160

Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski

Frequently Asked Questions

Why is this bill necessary?

As medical costs increase uninsured Alaskans have greater difficulty taking charge of their own health, because the cost of insurance becomes prohibitive. Through a unique voucher system, this bill will allow individuals to purchase coverage that is affordable, putting everyone in charge of their own medical future.

Why is this bill necessary now?

Recent reports show that medical expenses for Alaska's families have increased 4.3 times faster than the median family income. Businesses across the country have expressed concern about rising insurance costs and the difficulty of providing quality health coverage to employees. The time has come to ensure that all Alaskans have access to affordable coverage, since without action things will only get worse.

How many Alaskans currently lack health insurance?

The latest numbers developed by the Lewin Group estimate that 15.5% of Alaskans lack health insurance, for a total uninsured population of 97,689.

I already have insurance, so why should this bill be of interest to me?

The impact of the uninsured is felt by all Alaskans, not only socially, but economically. When someone cannot pay their medical bills, the costs for their care is essentially covered by hospitals, businesses and the individuals who can pay. A recent legislative research report found that the State of Alaska, as an employer, paid an extra 18.9 million dollars for state employee benefits because of the increased prices caused by uncompensated care.

This bill ensures equitable financing of the health care system while reducing expensive emergency room procedures by encouraging preventative care.

Does this bill change my current employer based health insurance plan?

No - if you are satisfied with your current coverage and it provides essential health services no changes will occur.

Is this bill socialized medicine?

No, and far from it. Socialized medicine is characterized by government run health care: this bill protects consumer choice and encourages competition through a unique voucher system. Under the bill, the government only acts as a facilitator in the health coverage arena, making certain that everyone can afford quality health coverage.

For more information, contact Sen. French's office:

Phone: (907) 269-0153 E-Mail: Senator_Hollis_French@legis.state.ak.us

www.healthyalaskans.com

SB 160

Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski

Personal Choice Under The Bill

For more than 70 years a majority of Americans have received health coverage through their employer. Some see the system of employer based coverage as an unfortunate historical accident, largely resulting from federal tax loopholes following World War II. Others note that employers worldwide play a large role in providing coverage to their employees. SB 160 works within this country's traditional employer-based framework while guaranteeing portable, consumer centric coverage. This legislation places Alaskans in full control of health care decisions that dramatically affect their lives.

Nothing in SB 160 would require a person to change their health coverage if they are satisfied with the benefits they receive today. However, many Alaskans want more options. Through the health care Clearinghouse, this legislation will facilitate a new relationship between individuals and insurance providers: the bill does not assume that a one size fits all solution will work for all Alaskans.

SB 160 places individuals in control of their coverage decisions. Under the employer based system, the employer is a middleman between an individual and health coverage. Currently 80% of employer offerings give only one plan option to employees, and the individual must either accept or refuse that coverage. When employers decide which insurance company to contract with, the way a plan serves employees is clearly considered but coverage decisions

aren't left to the individual. The clearinghouse under this legislation provides consumers with information, leaving decisions of plan type and provider up to the person who is affected most by the decision.

The health care clearinghouse established under this legislation will create a marketplace where health insurance information is shared. The annual open season encourages competition by allowing individuals to change plan types and providers seamlessly, which has the potential to reduce rates. In short, this legislation will put Alaskans in a new position of control when designing their plan and choosing an insurer, through a competitive, market based framework.

80% of employers who offer subsidized health plans only offer employees one type of plan design.

- Heritage Foundation

References/For More Information:

Edmund Hansman - "The Mass Health Reform: Assessing Its Significance and Progress" - Heritage Foundation 2007

For more information, contact Sen. French's office:

Phone: (907) 269-0153 E-Mail: Senator.Hollis.French@legis.state.ak.us

www.healthyalaskans.com

SB 160

Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski

Reducing Medical Bankruptcy

Half of all personal bankruptcies in America are caused by medical problems. While health insurance alone won't provide perfect protection from large health costs, SB 160 could dramatically reduce the bankruptcy rates of Alaskans who will be faced with high medical expenses.

Coverage through the Clearinghouse separates insurance from employment, making a health insurance plan continuous despite job status. Sliding scale vouchers will exist for those who truly cannot afford the full price of a plan on their own, helping those who haven't had access to health coverage. For seasonal employers who generally don't offer a group plan to employees, the option of contributing some funds towards an employee's plan would become easier, and multiple employers could contribute. By ensuring affordable coverage, individuals will have financial protection in times of great need.

Three out of four people who cite medical problems as a partial reason for declaring bankruptcy had health coverage when their ailment began, but most had a lapse in that coverage before declaring bankruptcy. In an employer based coverage system, a job loss is coupled with a loss of employer subsidized benefits. While options do exist to extend coverage, these options charge an individual the full price of the employer offering, and often leave little or no choice in plan design. As mentioned earlier, over 80% of employer sponsored health plans across the country only offer one type of plan that employees

can either accept or reject. Often, employees with pre-existing conditions must either drop coverage altogether or pay for a 'Cadillac' plan if they want continuation of benefits, since private carriers in the individual market aren't required to provide them with a plan. For people participating in the clearinghouse, this legislation would open up options when it comes to plan design and portability.

To protect Alaskans, SB 160 makes certain that insurance products are of good quality, with the capability to protect the plan holder from a medical catastrophe. Insurance plans come in all shapes and sizes today, and that is a great thing for consumer choice. However, a one size fits all approach won't work in Alaska. As an example, while many Alaskans may prefer a low premium, high deductible health plan, a policy that has a \$10,000 deductible won't be of much use to an individual who makes minimum wage, amounting to approximately \$15,000 a year. By setting deductible, co-pay and out of pocket maximums for plans that qualify for sliding scale vouchers, SB 160 ensures that everyone has access to quality coverage that fits their financial needs.

References/For More Information:

David U. Hummelstein et al - "Marketwatch: Illness And Injury As Contributors To Bankruptcy" Health Affairs 2005

For more information, contact Sen. French's office:
Phone: (907) 269-0153 E-Mail: Senator_Hollis_French@legis.state.ak.us

www.healthyalaskans.com

SB 160

Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski

Voucher System Ensures Affordability, Access

The voucher system in this legislation promotes consumer choice for all Alaskans. Two types of vouchers will be issued under the bill. The first type puts the price of insurance within the reach of all Alaskans by providing assistance, on a sliding scale, to those who cannot afford the full cost of a plan. The funding for these vouchers would come from the levy charged to non-providing employers, as well as from state and federal contributions. Without sliding scale vouchers the individual responsibility component of the legislation wouldn't be meaningful, because insurance is priced out of reach for many working Alaskans.

The second type of voucher is issued to specified individuals, who have had contributions made on their behalf by an employer or another individual, for use on health insurance products. These vouchers create a convenient way for employers to pool health contributions for an individual, whether they have one or many jobs. In particular, specified beneficiary vouchers are particularly appealing for individuals with multiple jobs, because it helps multiple employers share the cost of coverage. The system also gives businesses some certainty of their

health expenditures in a given year, since expenses can be defined by contribution level and not by benefit package. The choice of plan type is left to the individual, for the obvious reason that he or she is most affected by the selection.

Contributions to specified beneficiary vouchers will not be mandated; instead, that element of the bill promotes equitable financing of health coverage by making it easier than ever for employers to contribute to the health and well being of their employees.

Affordability provides true access

Under current Alaska law any small business can buy private coverage, and every individual can buy an insurance plan, either through the private market or ACHHA (the state high risk pool). However, claiming that this equals access to health insurance is simply false. Access to health care must be more than just the legal right to buy a policy; it should ensure that all Alaskans have coverage in times of need. SB 160 mandates true access to health care through a unique voucher system that makes coverage affordable for all Alaskans.

Alaskans spent \$5.3 billion on health care in 2005, a 230% increase from 1991.

- ISER

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Senators French, Ellis and Wielechowski

Prevention, Innovation and The Affordability Guarantee

Prevention and Innovation

This legislation acknowledges that lowering costs while improving quality requires innovative solutions to old problems. Under SB 160, the Alaska health care board will weigh in on potential cost and quality improvements, including but not limited to recommendations on:

- Electronic health records and health information exchanges
- Denali Kid Care/Medicaid effectiveness
- Prescription drug bargaining
- Insurance market reforms
- Mandated benefits
- Evidence based treatment procedures
- Recruitment and retention of medical professionals
- University of Alaska offerings in medical fields

The health care board's suggestions regarding cost and quality improvements will be given to the commissioner of the Department of Health and Social Services and the legislature in an annual report. This report will get the consideration of both the legislative and executive branches, where substantive health policy changes can be considered, discussed and implemented.

*More than half of Alaska's
uninsured population is
employed.*

- Families USA

The Affordability Guarantee

SB 160 requires that quality basic health insurance is made affordable for all Alaskans. If an individual feels that he or she cannot afford coverage under the legislation's framework, that person has a right to an appeal before the health care board. If the board reviews the case and agrees that an insurance plan places an undue financial burden on the household, the requirement to have coverage will be lifted. While SB 160 should place the price of coverage within reach for all Alaskan families, the affordability clause in the bill provides a guarantee that no one will be forced to purchase coverage they cannot afford.

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Individual Responsibility - Financial Relief

Critics of the new type of universal health care efforts being implemented around the country have questioned the necessity of requiring that all residents have some form of health coverage. Yet, judging from these efforts, a consensus has been reached: Until something is enacted on a federal level, mandating coverage is the only responsible option for promoting universal health coverage in a state today. Beyond the social benefit of making certain that all residents have better access to health care, there are also economic reasons why reform efforts must include everyone.

Financial Relief For Current Policyholders

In a sense, universal health care is already provided in America because emergency rooms cannot turn down a person in need of medical attention. While this system may provide emergency care for all Alaskans, it doesn't equal universal access to health care in times of need, nor does it protect the financial concerns of the insured or uninsured alike. In addition to producing less than ideal health outcomes for those who lack coverage, it also places an undue financial burden on people who do buy coverage. And this financial burden is large.

The amount of uncompensated care in Alaska is staggering. Families USA estimate that \$125 million of uncompensated care is provided each year in Alaska, and that only 21% of that bill is reimbursed by federal, state and local governments. That leaves

medical providers with \$100 million of unpaid bills every year. This doesn't mean that hospitals 'lose' money every year: To make up for outstanding bills, hospitals charge more to people who can actually pay for services. Since government health care reimbursement rates are often at or below the actual price of providing care in Alaska, nearly the entire burden of uncompensated care is recouped through inflated insurance premiums.

How much does the cost of an average plan go up? Families USA estimates that 13.6% of an insurance premium in Alaska covers uncompensated care costs, meaning that, for a family of 4 with a comprehensive policy, nearly \$1,500 a year go towards covering uncompensated care. SB 160 ensures that everyone can afford quality basic coverage, potentially reducing the amount of uncompensated care given out by hospitals. This element of the bill will give much needed relief to everyone who currently invests in health coverage.

An estimated 125 million dollars of medical bills aren't paid each year in Alaska.

- Families USA

References/For More Information:

Families USA - "Paying a Premium: The Added Cost of Care for the Uninsured" - June 2005

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Individual Responsibility - Improving The 'Pool'

Improving the 'Pool' to Increase Affordability

An insurance 'pool' is a bundle of risks. It works this way: for the sake of determining premiums, a 'pool' is a group of individuals who are considered together when determining expected medical costs. Once anticipated costs are determined, each member of that pool can be billed for a fair portion of what expenses the 'pool' is likely to incur on their behalf.

Adverse selection occurs when individuals utilize their private knowledge of their own health when deciding whether to buy health insurance. Since an individual has better knowledge of their lifestyle, habits and health than an insurance company, adverse selection has the potential to greatly affect who buys insurance. Simply put, people who expect to be sick want health insurance more than healthy people.

Certain pools are affected by adverse selection more than others. As an example, in the individual market, the decision to buy or forego insurance isn't left to chance - someone must make the conscious decision to buy a plan. Employer provided coverage, on the other hand, doesn't always require that the employee opt in. Often coverage is highly subsidized or provided free of cost.

The best insurance pool includes both healthy and

sick individuals. If pools are structured to distinguish between people by health, the cost of insurance for those with severe illnesses will be extraordinarily high, and out of reach for most Alaskans. Similarly, if a pool only includes healthy individuals, the costs of a plan may be lower for those who are included, but the amount of uncompensated care would be high, since plans for those with severe health problems would be cost prohibitive. Today the amount of uncompensated care is large, and as discussed earlier, that cost is transferred to Alaskans that do have coverage.

Adverse selection has undoubtedly raised the costs of plans in Alaska's health insurance marketplace through self selection within the individual market. And while the Alaska Comprehensive Health Insurance Association (ACHIA) was created by the state to provide health coverage to individuals with pre-existing health conditions, the offered plans are often cost prohibitive for normal Alaskans. This legislation will reduce adverse selection by ensuring that all Alaskans participate.

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Individual Responsibility - Avoiding Price Spirals

Damaging price spirals are often caused by adverse selection in voluntary participation health reform efforts. When an individual weighs the decision to buy coverage they consider many factors, including the cost of a plan, what they can afford, and the probability of requiring care. This often causes people of good health to forego insurance, since they figure the odds are in their favor. And when healthier individuals don't acquire coverage, the pool of people who do purchase insurance is more likely to require health attention. As a result, premiums increase.

The price of coverage in voluntary state reform efforts that include some individual contributions have often spiraled upward after introduction, with plan costs increasing when the healthiest individuals decide to hedge their bets on good health. Once the healthiest people in the pool leave, the expected cost per member increases. If these price increases are charged to individuals within the pool, additional people may reconsider their participation in a voluntary plan. Maine's Dirigo program ran into this problem, when fewer people than expected signed up, and once the program began, the spiraling effect occurred as the participation price increased. If everyone is required to get "in the pool" this price spiral will be eliminated.

"The problem is that the individuals in the insurance pools don't cooperate. Guaranteed issue and community rating regulations cause premiums to be higher than would otherwise be the case. As a result, the healthiest individuals drop their coverage, leaving the members with the highest health care costs in the pool. As the cost of care rises, premiums also go up, causing more members to drop out and creating a rising spiral of cost and premium increases."

- Portland Press/Maine Sunday Telegram,
October 28, 2007

References/For More Information:

David U. Himmelstein et al - "Marketwatch: Illness And Injury As Contributors To Bankruptcy" Health Affairs 2005

Martin Jones - "Rules make health insurance in Maine costly" - Portland Press/Maine Sunday Telegram, published October 28th 2007

Not Socialized Medicine

This legislation does not create a socialized system of medicine in Alaska. Socialized medicine is characterized by government run health care. Under this legislation, the only role of the government is to guarantee that all residents have true access to health coverage.

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Proven Concepts - Learning From Programs That Work

While many critics of consumer centered health reform claim that the ideas haven't been tested, these critics fail to recognize several extremely successful consumer driven programs in place today.

The first is the Federal Employees Health Benefit program. This program provides federal employees, retirees and their survivors with the "widest selection of health plans in the country" through a mechanism much like the clearinghouse under SB 160.

The program provides information about numerous plan providers and types, giving consumers a meaningful role in choosing their health coverage. Plans offered through the FEHB program feature no waiting periods for enrollees, and all participants are guaranteed that a plan will accept them. The health care clearinghouse in SB 160 will provide a similar system which can be accessed by all Alaskans.

The bi-partisan reform effort being implemented in Massachusetts is still young, but the results thus far are encouraging. One year after the legislation was enacted over 200,000 previously uninsured residents gained health coverage in Massachusetts. This effort ensures that similar successes can be seen in Alaska, largely through the Massachusetts inspired sliding scale voucher system under SB 160.

Since the passage of Governor Romney's health reform effort, consumer choice has drastically increased while uncompensated care has decreased in the state of Massachusetts. Over 44 different types

of plans are available in the Massachusetts Connector, which, when compared to the standard employer offering of only one plan type, represents a large improvement of choice for residents of the state. Furthermore, uncompensated care has decreased by almost 13% in the state during the first year, even though the plan was just being implemented during that time. When everyone has coverage further declines should be seen.

By no means is this to say that a silver bullet exists, but, so far, the results of both programs are encouraging. This legislation builds an Alaskan version of health reform practices like these that are working in different parts of the country.

Learn about these successful programs online

Federal Employee Health Benefits Program:

<http://www.opm.gov/insure/health/>

Massachusetts Commonwealth Connector:

<http://www.mahealthconnector.org/>

References For More Information:

Federal Employee Health Benefits Program

<http://www.opm.gov/insure/health/about/felhb.asp>

Lisa Eckloff/Edger - "The Insurance Countdown" - Worcester Telegram and Gazette, published November 18th, 2007

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Continuity of Coverage

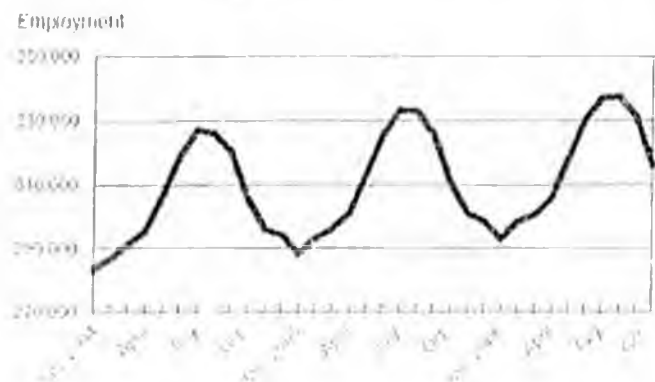
Seasonal Employment Requires a Creative Solution

Alaska's natural landscape provides unique employment opportunities in the state. Both the tourism and fishing industries peak during summer months, with relatively little activity during the middle of winter. Judging from historic employment data, there are roughly 45,000 fewer jobs during the peak of winter compared to the busiest months in the summer. While the economic benefits that come with seasonal employment are great for Alaskans – tourism alone brought \$1.8 billion into the state last year - many workers in seasonal industries work for multiple employers over the course of a year. Unfortunately, this doesn't line up with the traditional employer based health insurance model.

The United Fishermen of Alaska have expressed particular concern over this issue, noting that a lack of health insurance options creates a significant barrier of entry for future generations of commercial fishermen. In particular, they note difficulty with the traditional group market structure, because fishing organizations don't fit the traditional mold of a group employer. The marketplace solution provided through the health care Clearinghouse should help fishermen, and all other seasonal employees, get many of the group benefits of coverage while maintaining the portability that seasonal workers require. Edmund Haislmaier, a senior research fellow at the Heritage Foundation, noted that few people are unin-

sured for years at a time: In fact, he has found that up to 40% of the national uninsured problem could be solved if coverage was tied to an individual, and not an employer, because the shorter lapses of coverage could be prevented. Alaska's seasonal industries give the state even more reason to tie coverage to the individual, to make certain that benefits are available when they are needed.

Chart from "Making sense of Alaska's unruly numbers":



Source: Alaska Department of Labor & Statistics, "Alaska Economic Trends: December 2006".
Graphic: Employment in Alaska, 1990-2000

References For More Information:

Dan Robinson - "Making sense of Alaska's unruly numbers" - Alaska Economic Trends, December 2006

United Fishermen of Alaska - "Alaska Fishermen's Health Care - Challenges and Opportunities" - Aug. 2001

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Unique Solutions for Business, Young Alaskans

Structured With Small Business In Mind

Most Alaskans who lack health coverage also work for a living, leaving behind the notion that only the unemployed require assistance when it comes to making health coverage affordable. Even the most successful small Alaskan businesses can have difficulty providing coverage, because of the high costs of health plans. This legislation aims to strengthen businesses around the state by putting coverage in reach for all employees.

Clearly a healthy workforce is more productive, because absenteeism and productivity is tied to the health of an individual. But in addition to health benefits that would arise if everyone had access to basic medical care, Alaska's businesses have much to gain through this legislation economically. Retaining qualified employees is difficult for businesses that cannot afford coverage. This forces high retraining expenses on employers, since they must fill vacancies more frequently than businesses that provide coverage. In addition, recruitment is more difficult for companies that don't offer coverage.

Not all businesses can afford the full price of health coverage. In addition, not all employees need insurance through their employer - many have coverage through spouses or public programs. Roughly 20% of Alaskans have limited health coverage through the Indian Health Service. Because of this, an employer will not be taxed under this legislation for not

providing coverage to someone that already has health access, as defined in the legislation.

The employer levy is simple. It is calculated by adding up the gross payroll of all employees who participate in the framework of this bill. For businesses that pay less than \$500,000 gross annually to employees who lack health coverage, no levy will be collected. For businesses that pay between \$500,000 to \$1,000,000 a year, the levy will be 1% of payroll. For over \$1,000,000 annually, the payroll tax will be 2%. Companies that currently invest even a small amount of money into employee health coverage will be exempt from this levy, whether that investment consist of a modest contribution towards the price of a premium, or through the establishment of a Section 125 account, which facilitates pre-federal tax purchases of health coverage.

Young Alaskans Have Unique Needs

Young Alaskans have special needs when it comes to their health coverage. Statistically, they require less health services than their older counterparts. They also show less of a willingness to pay for expensive, comprehensive coverage, and even a moderate deductible can be difficult to pay, particularly for college aged students. This legislation acknowledges that young Alaskans have unique needs, and it provides for a special category of plans that are designed specifically to fulfill their health requirements.

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Massachusetts and SB 160 Compared

Issue Area	Alaska - SB 160	Massachusetts - Enacted
Sliding Scale Subsidies <i>Definitions:</i> FPL = Federal Poverty Line	Yes: Households with incomes below 300% of the FPL will receive vouchers to make the price of coverage affordable. Residents only eligible for ACA coverage will receive vouchers up to 450% FPL. Health care vouchers will put the consumer in control when choosing a plan and a provider.	Yes: Households with income below 300% receive subsidized health coverage through the connector. For individuals who utilize vouchers one plan type is available to households below 200% FPL and two plan types are available to those earn between 200-300% FPL.
Establishing A New Insurance Marketplace	The health care Clearinghouse will disseminate information, encourage competition, and help residents learn about different health coverage options.	The Connector provides information, encourages competition, and helps residents learn about different coverage options. It is a web-based marketplace.
Requirements for Consumers	All Alaskans would be required to have a minimum level of coverage, as defined by statute. If a product isn't affordable a hearing process allows for some exceptions.	All residents must have a minimum level of coverage, as defined by the Connector board. However, some residents have been exempted from the mandate because an affordable product isn't available to them.
Effect on Existing Public Programs	No changes to existing publicly funded programs.	Free care funds will still be available to hospitals, but the program will shift dollars from this account to the reform effort as more people get coverage and don't require free care. Medicaid reimbursement rates were also increased under the legislation.
Financing	Employer payroll tax, varying from 0-2% of payroll depending on payroll size and the number of uncovered employees. Federal dollars will be pursued through 1115 waivers. State funds will also be used	Employer payroll tax of up to \$295 per employee for employers with more than 10 full time workers. A free rider surcharge can also be assessed if employers don't help employees get coverage and they utilize free care. Federal dollars from 1115 waivers have been funneled to the project.
Insurance Market Reforms	Yes: Guarantee Issue for individual health plans, on the premise that the individual responsibility clause will prevent adverse selection.	Yes: By merging the non-group and small group markets, insurance is portable and not tied to employment. Massachusetts already had guarantee issue laws

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Other State Reform Efforts

Issue Area	Alaska - Senate Bill 160	California - Governor Schwarzenegger's Plan	Colorado—Legislature's Blue Ribbon Commission
Sliding Scale Subsidies <i>Definitions:</i> FPL = Federal Poverty Line	Yes: Households with incomes below 300% of the FPL will receive vouchers to make the price of coverage affordable. Residents only eligible for ACHIA coverage will receive vouchers up to 450% FPL. Health care vouchers will put the consumer in control when choosing a plan and a provider.	Yes: Households with incomes below 400% of the FPL will receive a tax subsidy to help cover insurance costs, residents below 250% FPL won't pay more than 5% of income for coverage, and individuals below 150% FPL won't pay anything- including co-pays and deductibles - for health care	Yes: Full subsidy of most basic plan for households with incomes below 250% FPL and partial subsidy for households below 300%. Colorado is also proposing a asset test and an additional subsidy to households below 400% of the FPL if a premium will be more than 9% of household income.
Establishing A New Insurance Marketplace	The health care Clearinghouse will disseminate information, encourage competition, and help residents learn about different health coverage options.	A purchasing pool will be established for residents who receive sliding scale assistance to cover health insurance costs.	The Coverage Clearinghouse will disseminate information, encourage competition, and help residents learn about different health coverage options.
Requirements for Consumers	All Alaskans would be required to have a minimum level of coverage, as defined by statute. If a product isn't affordable a hearing can allow an exception.	All Californians must have a minimum level of coverage, as defined by the Secretary of Health and Human Services, through the regulatory process.	All legal residents of Colorado must have basic plan coverage, with some exceptions if a product isn't affordable. Basic coverage includes plans with benefit caps.
Effect on Existing Public Programs	No changes to existing publicly funded programs.	Expansion of S-CHIP to 300% regardless of immigration status, and Medicaid expansions to certain groups up to 250% FPL.	Expansion of S-CHIP to 250% and Medicaid. Allows for a Medicaid buy in program for households at 200% FPL and up.
Financing	Employer payroll tax, varying from 0-2% of payroll depending on payroll size and the number of uncovered employees. Federal dollars will be pursued through 1115 waivers. State funds will also be used	Employer payroll tax, varying from 1-6.5% of payroll depending on payroll size. Hospitals will pay 4% of revenue towards the reform effort. Federal dollars will be pursued through 1115 waivers.	Increases in alcohol and tobacco taxes. In addition, taxes on snacks and soda will be established. Increase the state income tax. Federal dollars will be pursued through 1115 waivers.
Insurance Market Reforms	Yes: Guarantee Issue for individual health plans, on the premise that the individual responsibility clause will prevent adverse selection.	Yes: Guarantee issue and guarantee renewal to all Californians in the individual market. Rating bands will ensure that only age and geography determine premiums. Health plans will have to spend 85% of premiums on patient care.	Yes: Guarantee Issue for individual health plans, on the premise that the individual responsibility clause will prevent adverse selection. High risk pool will exist for those who currently are uninsured Premiums will equal the normal price paid in the individual market

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Detailed Bill Summary

SECTION 1 of the bill – Findings

Updated 3/17/2008 - Corresponds with version WW

SECTION 2 of the bill - Provides the framework for the bill

Sec. 21.54.200: Establishes the health care program

This section lays out what the legislation will accomplish.

- it ensures that all state residents can afford quality health coverage that suits their particular needs
- it requires that health coverage is meaningful, as discussed later in AS 21.54.250
- it reduces unsustainable health care cost increases, through encouraging primary care and prevention
- it centers on consumer choice by providing a framework for competition, where insurance plans must compete to acquire and retain customers

Sec. 21.54.210: Establishes the Alaska Health Care Board

This section establishes the Alaska Health Care Board under the Division of Insurance. The board will have 13 voting members, and will include:

- one insurance producer licensed to do business in the state
- one representative from a health insurance company licensed in Alaska
- one representative that works for a large business
- one representative that works for a small business
- two representatives from Alaska hospitals
- one representative of a labor organization
- two licensed Alaska physicians
- two consumer advocates
- one registered nurse
- the commissioner of Health and Social Services, or their designee

Each member, except the commissioner, serves a 3 year term and are subject to appointment and reappointment by the Governor. Members will be entitled to standard per diem and transportation costs under AS 39.20.180. The board will select a chair and a vice chair, and a majority of the board will be considered a quorum for transacting business.

Sec. 21.54.220: Defines the powers and duties of the Alaska Health Care Board

The board oversees two of the main elements in this bill: the health care Clearinghouse and the health care fund, the function of which are described in later sections of the bill.

In particular, the board will:

- ensure that a variety of plans are available in the clearinghouse, where individuals make plan selections based on their personal needs
- help educate the public about different plan options, and ensure that residents are enrolled in a health benefit plan
- establish enrollment criteria and procedures for individuals, and provide for an annual open season when customers can change their plan selections.

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In particular, the board will *(continued)*:

- The board will hear complaints or objections to decisions made by the program or clearinghouse. Individuals who feel aggrieved by a decision of the board are entitled to a hearing
- Establish criteria and implement the voucher system, which will be discussed in a later section
- Ensure that plans protect individuals from severe financial hardship in times of medical need

Sec. 21.54.230: Alaska Health Care Clearinghouse

The health care clearinghouse will be the 'place' where Alaskans are connected up with private health plans that suit their needs. The clearinghouse will disseminate information about health insurance and the plans that are 'certified' to fulfill the essential health care services criteria, as defined later in the bill.

The Clearinghouse will be the place where individuals with health care vouchers make plan selections and are connected up with quality insurance products.

Sec. 21.54.240: Establishes the Voucher system, and includes the individual responsibility clause

This section ensures that all Alaskans can afford quality health coverage. It begins in (a) with the individual responsibility clause, which requires that all Alaskans have health coverage that provides essential health care services. This requirement will only affect those who don't currently have coverage: (1) - (8) outline specific examples of individuals who will be exempt from the individual responsibility clause. Excepted from the requirement are individuals who receive benefits under employer plans or publicly funded programs, including HIS recipients. In addition, individuals who have objections to the requirement to have health coverage on religious grounds can apply to be exempt from the individual responsibility clause.

Subsections (b) through (e) describe the sliding scale voucher system which makes health coverage affordable for all legal residents. Sliding scale vouchers are issued to individuals in households based on the federal government's federal poverty level criteria (FPL), which sets a poverty line annually based on household size. This year the FPL has been set at \$13,000 of gross income a year for an individual, or \$26,500 per year for a family of four.

Subsection (c) provides a guarantee that anyone who falls below the federal poverty line won't have to pay for health coverage.

Subsection (d) provides vouchers, on a sliding scale, to individuals in households that earn between 100% and 300% of the FPL. Using the numbers from above, this means that an individual who earns between \$13,000 and \$39,000 a year or a family of four that has a household income between \$26,500 and \$79,500 will be eligible for a sliding scale voucher that makes health insurance affordable. The amount of these vouchers will be set by the board, and will vary, with more assistance going to those who earn less.

Subsection (e) requires that all individuals over 300% of the FPL acquire health coverage. While these individuals will not receive needs based vouchers, they will be eligible to receive specified beneficiary vouchers, which are discussed in a later section of the bill.

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Subsection (b) provides larger vouchers to individuals who only qualify for ACHIA coverage, making the cost of coverage equal to that available in the normal market. These vouchers will be issued to people who earn up to 450% of the FPL.

Subsection (f) ensures that only legal residents of Alaska receive needs based vouchers.

Sec. 21.54.250: Defines essential health care services

This section defines the benefits that all health insurance plans sold through the clearinghouse must include. Insurance plans will include coverage for:

- preventative and primary care
- emergency services
- inpatient services and hospital treatment
- ambulatory patient services
- prescription drug coverage
- mental health services

Sec. 21.54.260: Relates to employer provided health coverage

(a) and (b) are included to make it clear that nothing in this legislation changes employer based health coverage for companies that elect to provide it.

(c) and (d) relate to the employer levy, which ensures that all employers contribute to the health of employees around the state. This tax is only levied against employers who don't offer health coverage, and the amount depends on the number of employees who lack health coverage and are required to attain it under this legislation. For businesses that pay below \$500,000 gross annually to employees that are required to participate, no levy will be charged. For businesses with \$500,000 to \$1 million a year in gross payroll to employees required to participate in the plan, the levy will be 1% of gross payroll. For \$1 million or greater, the levy will be 2%. If an employer either a) offers to pay 33% of premium costs or b) successfully enrolls 25% of employees in an employer sponsored plan they will be exempt from this tax. In addition, if an employer establishes a so-called 'Section 125' cafeteria plan that allows employees to purchase health coverage with pre-federal tax dollars, the employer will be exempt from this levy.

Sec. 21.54.270: Relates to the structure of insurance plans available in the clearinghouse

This section requires that plans provide coverage for essential health care services, as described in 21.54.250. (b) in this section mandates that an insurance company not turn down an individual looking for coverage.

Subsection (c) makes clear that health insurance plans can have varied levels of deductibles, co-pays, co-insurance and out of pocket maximums. They can include high deductible health care plans, and benefit levels can be different for in network and out of network providers. In addition, this subsection encourages lower cost plans that are especially designed for young adults, ages 18-30, which have different terms than are found in normal plans.

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Subsection (d) increases the length of time that a child must be covered under a clearinghouse plan to 25 years of age, or until 2 years after the dependent no longer resides with the family.

Sec. 21.54.280: Establishes the Alaska Health Fund and Specified Beneficiary vouchers

The health fund is established as a separate trust fund of the state, and will include:

- state money and appropriations
- federal money, pursued through a variety of routes including 1115a waivers
- employer levy established in 21.54.260
- health care premiums received and appropriated to the fund
- money from any source that is given with purposes consistent with the purpose of the program

(b) establishes specified beneficiary vouchers, which gives an employer, employers or individuals the ability to contribute to the health premium of a given individual, through a voucher.

Sec. 21.54.290: Disputes and appeals

This section gives an individual the opportunity for a hearing if they are denied health coverage by a certified plan, or if a plan fails to deliver essential health care services. In addition, if a person feels adversely affected or aggrieved by a decision of the board or clearinghouse, they have the right to a hearing.

Sec. 21.54.300: Reporting

This section provides for an annual report by the health care board that includes statistics relating to how the health reform program is performing. In addition, the board will also give an evaluation and recommendations on a variety of important health reform topics, including the use of electronic health records, S-CHIP, the effect of mandated benefits, prescription drug bargaining, ways to maximize federal health care dollars, recruitment and retention of medical professionals, evidenced based treatment procedures, Medicaid effectiveness/expansions and more.

Sec. 21.54.310: Regulations

This section requires that the board establish regulations under the Administrative Procedure Act.

The remainder of the bill deals with definitions, transitional provisions and effective dates.

For more information, contact Sen. French's office:

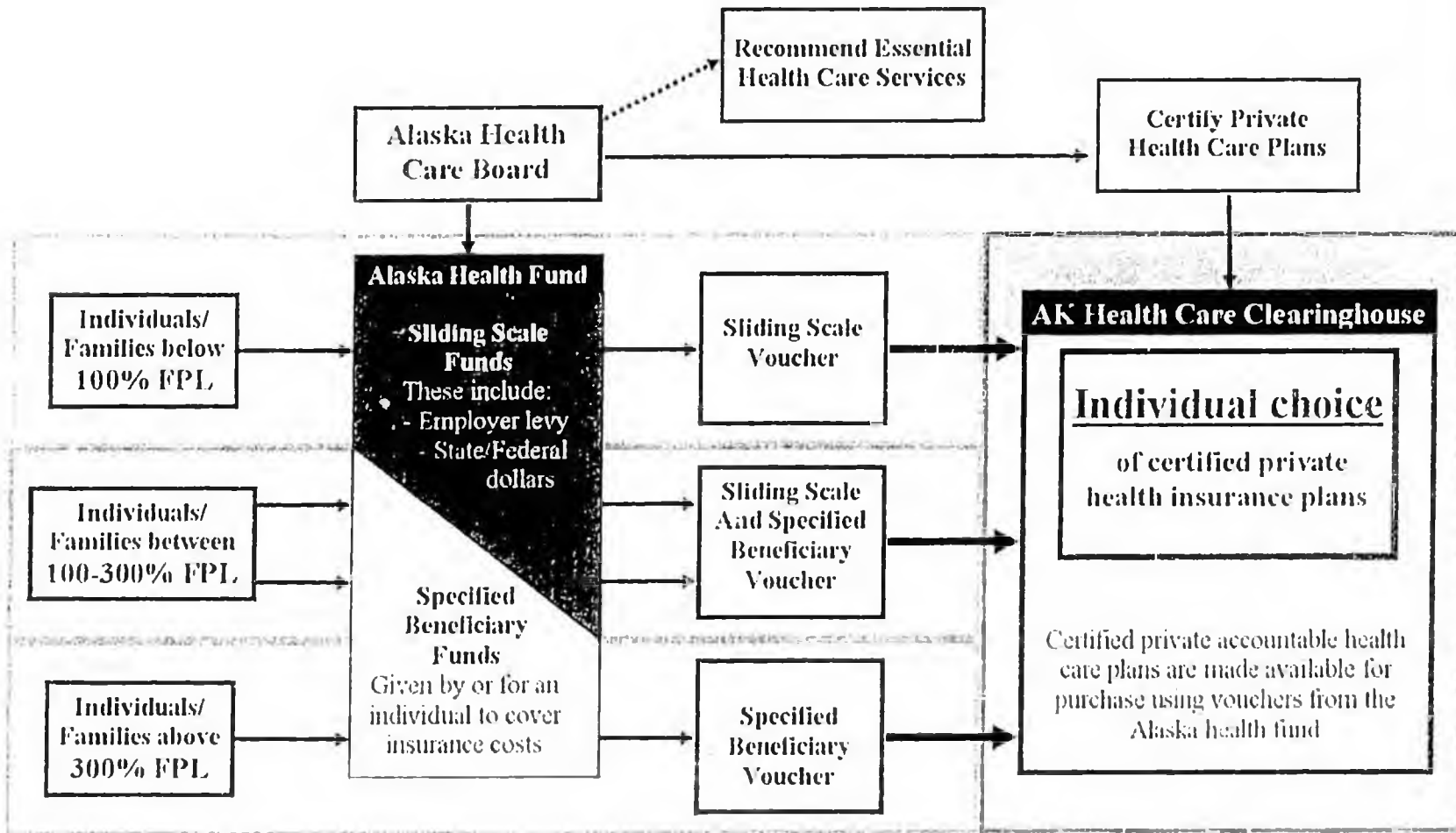
Phone: (907) 269-0153 E-Mail: Senator_Hollis_French@legis.state.ak.us

www.healthyalaskans.com

Alaska Health Care: The Framework For Change

SB 160

Health Insurance For All Alaskans
 Senators French, Ellis and Wielechowski



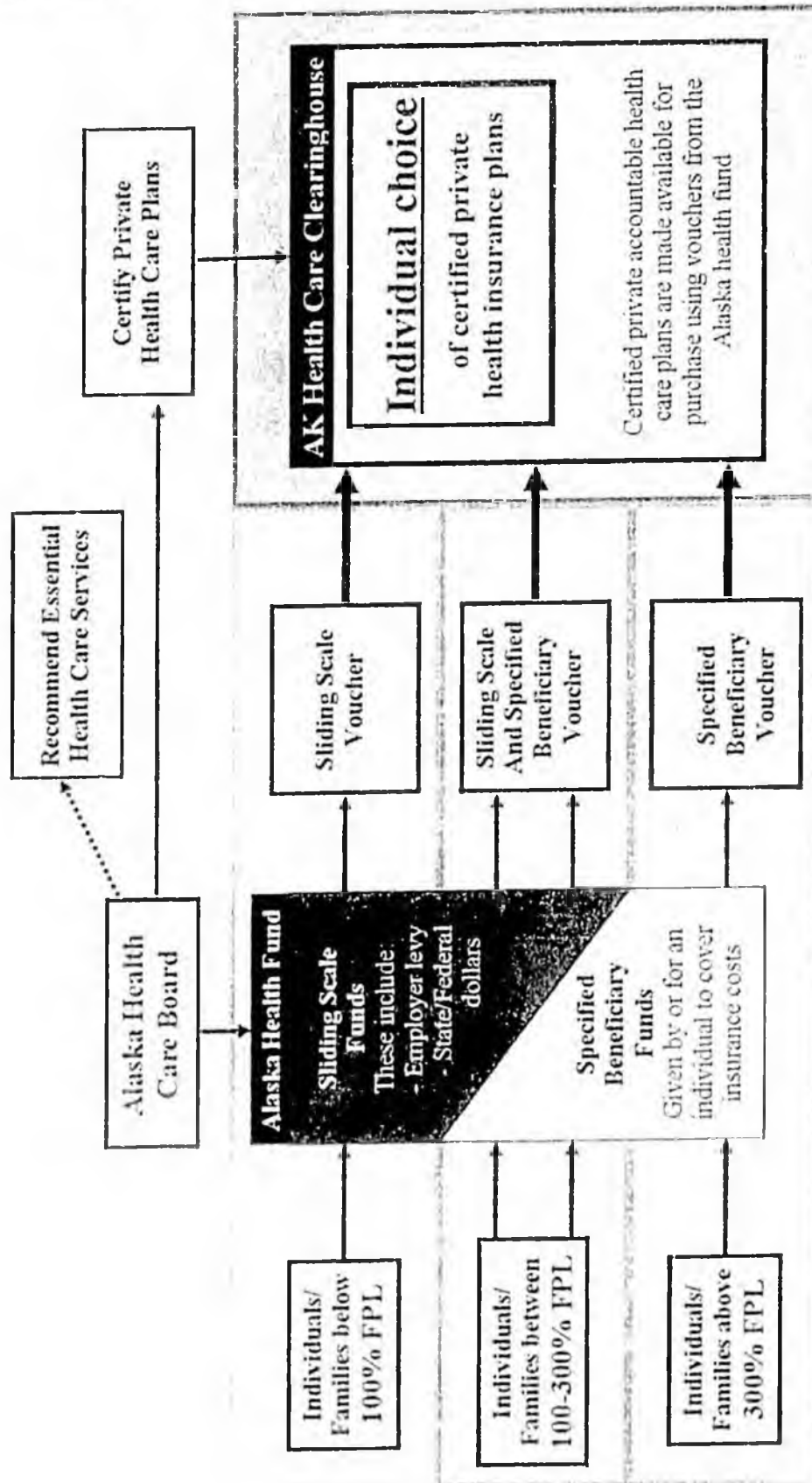
For more information, contact Sen. French's office:
 Phone: (907) 269-0153 E-Mail: Senator_Hollis_French@legis.state.ak.us www.healthyalaskans.com

Alaska Health Care: The Framework For Change

SB 160

Health Insurance For All Alaskans

Senators French, Ellis and Wielechowski



For more information, contact Sen. French's office:
 Phone: (907) 269-0153 E-Mail: Senator_Hollis_French@legis.state.ak.us www.healthyalaskans.com

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: 1
 Bill Version: CSSB 160(HES)
 (S) Publish Date: 2/19/08
 Dept. Affected: Health & Social Services
 RDU: Departmental Support Services
 Component: Commissioner's Office

ID(File name) SB160-DHSS-CO-1-28-08

Title MANDATORY UNIVERSAL HEALTH CARE

Sponsor FRENCH

Requester SENATE (HES)

Component No. 317

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES								
Personal Services	2,880.5		3,393.0	3,393.0	3,393.0	3,393.0	3,393.0	3,393.0
Travel	433.5		445.0	445.0	445.0	445.0	445.0	445.0
Contractual	2,275.0		1,300.0	1,300.0	1,300.0	1,300.0	1,300.0	1,300.0
Supplies	470.0		520.0	520.0	520.0	520.0	520.0	520.0
Equipment	416.5		62.0	62.0	62.0	62.0	62.0	62.0
Land & Structures								
Grants & Claims	164,111.1		328,222.2	328,222.2	328,222.2	328,222.2	328,222.2	328,222.2
Miscellaneous								
TOTAL OPERATING	170,586.6	0.0	333,942.2	333,942.2	333,942.2	333,942.2	333,942.2	333,942.2
CAPITAL EXPENDITURES								
CHANGE IN REVENUES (0)								

FUND SOURCE		(Thousands of Dollars)					
1002 Federal Receipts	7,825.5		15,625.0	15,625.0	15,625.0	15,625.0	15,625.0
1003 GF Match	7,825.5		15,625.0	15,625.0	15,625.0	15,625.0	15,625.0
1004 GF	5,824.5		4,470.0	4,470.0	4,470.0	4,470.0	4,470.0
1037 GF/Mental Health							
NEW AK Health Care Fund-GF	147,620.0		295,240.0	295,240.0	295,240.0	295,240.0	295,240.0
NEW AK Health Care Fund-RSS	1,491.1		2,982.2	2,982.2	2,982.2	2,982.2	2,982.2
TOTAL	170,586.6	0.0	333,942.2	333,942.2	333,942.2	333,942.2	333,942.2

Estimate of any current year (FY2008) cost: _____

POSITIONS

Full-time	43		43	43	43	43
Part-time						
Temporary						

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

The purpose of this bill is for all Alaskans to have access to essential health care services. It requires all residents to have health insurance and creates the Alaska health care program. Within the Department of Health and Social Services, the bill establishes the Alaska Health Care Board to oversee the program and the Alaska Health Care Clearinghouse as a division to administer the program, under the direction of the Board. The Board and Clearinghouse are effective immediately and are estimated for a full year for FY2009. The rest of the regulations are not effective before January 1, 2009 and assume 1/2 year for FY2009.

Continued on page 2.

Prepared by: William Streu
 Division: Health Care Services
 Approved by: Karleen Jackson, Commissioner
 Agency: Department of Health and Social Services

Phone 269-7827
 Date/Time 01/25/2008
 Date 01/29/2008

**STATE OF ALASKA
2008 LEGISLATIVE SESSION****ANALYSIS CONTINUATION**

The bill lacks the specifics necessary to estimate accurately the fiscal impact. In this fiscal note, we present one scenario assuming a comprehensive health insurance plan similar to the State of Alaska employee plan.

This fiscal note takes a macro look at potential costs for state financial assistance to low-income persons through benefits provided under Medicaid or premium subsidies.

Costs for insurance premiums and the cost to Medicaid are very preliminary until the "essential health care services" are defined. This fiscal note reflects the high-premium scenario using the State of Alaska employee plan as a model and is not broken out by budget component.

Alaska Health Care Program

Participation is required for every resident who is not enrolled in a public medical assistance program (i.e. Medicaid) or a private insurance program that provides essential health care services. Persons below 100% of the poverty level would have no cost (presumably the state would pay). Persons between 100%-300% of poverty would pay premiums on a needs-based sliding scale. Coverage cannot be denied and persons with preexisting conditions can purchase additional coverage Eff. Jan. 2009.

Assumptions:

*The Fund only pays for the non-Medicaid eligible population. State matching funds for Medicaid do not come from the Fund.

*The estimated cost for insurance premiums is \$11,000 per person per year (based on the State of Alaska employee insurance plan).

*The cost of premiums to purchase insurance are on a needs-based sliding scale beginning with an individual between 101-125% of poverty paying 10% and increasing until an individual between 275-300% pays 80%. The state share of premiums will be paid from the Fund.

*Co-pays and deductibles are not addressed in the bill so we assume none are required by any plan.

*The estimated cost for medical benefits is \$3,000 per person per year (based on analysis of Medicaid claim payments). The federal government will reimburse the state approximately 50% of the cost for Medicaid claims.

*There are an estimated 109,500 uninsured persons in Alaska (children = 17,200, adults = 91,500, elderly = 800).

*Approximately 20% of the uninsured population are Alaska Natives who have access to the tribal health system. Under this bill, they must participate and are included in our estimates.

Continued on page 3.

STATE OF ALASKA
2008 LEGISLATIVE SESSION

ANALYSIS CONTINUATION
Cost Estimates for Alaska Health Care Program:

Below 100% of poverty: \$81,000.0 (7,500.0 fed/7,500.0 GF/66,000.0 Fund):

*27,000 persons are below 100% of the poverty level. No cost to the individual.

– 5,000 are children who would likely be eligible for Medicaid x \$3,000 per capita annual Medicaid benefits = \$15,000.0 (7,500.0 fed/7,500.0 GF).

– 22,000 would not qualify for Medicaid. We assume these individuals would have their coverage paid by the Fund in the form of medical benefits rather than more costly insurance premiums. $22,000 \times 3,000 = \$66,000.0$ Fund.

100-300% of poverty: \$247,222.2 total (7,500.0 fed/7,500.0 GF/232,222.2 Fund)

*43,000 have incomes between 100% and 300% of poverty. They would pay premiums on a needs-based sliding scale.

– 5,000 are children who would likely be eligible for Medicaid x \$3,000 per capita annual Medicaid benefits = \$15,000.0 (7,500.0 fed/7,500.0 GF). No cost to the individual.

– 38,000 would not qualify for Medicaid. The state and the individual share the cost of premiums. The annual per capita cost to the individual would range from \$1,100 (10%) to \$8,800 (80%) for an average of \$5,000. $38,000 \times \$11,000$ annual per capita premium = \$232,222.2 State pays from Fund; Individuals pay \$185,777.8.

Above 300% of poverty: \$0 total. No cost to the State.

*39,000 are above 300% of the poverty level and would bear the full cost of the mandatory insurance. $39,000 \times \$11,000$ premium = \$429,000.0 cost to the individual.

Totals

Total the State pays: \$328,222.2 (15,000.0 fed/15,000 GF/298,222.2 Fund).

Total individuals pay: \$614,777.8

Grand total: \$943,000.0

Summary of Costs for Medicaid Program \$30,000.0 per year (\$15,000.0 federal/\$15,000.0 GF match). Eff. Jan. 2009. Of the 109,500 persons, an estimated 10,000 persons, mostly children below 175% of poverty, could be enrolled in Medicaid/SCHIP without changes to the current eligibility guidelines. The 10,000 additional persons who could enroll in Medicaid are estimated to cost an average of \$3,000 annually for medical benefits per person. Options could be explored to expand Medicaid eligibility to maximize federal funding but it would be a lengthy process and as such are not included in this analysis.

NOTE: Additional costs of approx. \$1,250.0/yr (\$650.0 federal/\$650 GF match) to administer the additional Medicaid caseload are included in this fiscal note including 18 new positions (12 eligibility technicians, 1 supervisor and 3 administrative support).

Continued on page 4.

STATE OF ALASKA
2008 LEGISLATIVE SESSION

ANALYSIS CONTINUATION**Alaska Health Fund**

This bill establishes the Alaska Health Care Fund as a separate trust fund consisting of state and federal appropriations, employer & individual contributions, premiums, and interest. Individual and employer contributions can be designated to a particular person who receives an Alaska Health Care Voucher in that amount to purchase an insurance plan. Employer contributions also come from employers with 10 or more employees that provide coverage to fewer than 25% of employees or pay less than 33% of the employee premiums. Employers with 10-20 employees contribute 1% of the employer's gross payroll. Employers with more than 20 employees contribute 2%.

*We assume the Fund will be comprised of 1% employer contributions in the form of receipt supported services (RSS) and 99% general fund. Massachusetts recently implemented a universal health program partially funded by employer contributions. Massachusetts estimated that less than 2% of their revenue would be come from these contributions. Of the \$24 million expected they are now expecting just \$5 million.

Other Costs

*Alaska Health Care Board = \$940.0 GF/yr including four State positions (350.0), travel (200.0), supplies (120.0), contractual (250.0), commodities/equipment (20.0), and one-time costs (67.0). Eff. immediately.

*Alaska Health Care Clearinghouse = \$3,530.0 GF/yr including 21 positions (2,018.0), travel (220.0), contractual (1,000.0), supplies (250.0), commodities/equipment (42.0), and one-time costs (287.5). Eff. immediately.

*The contractual costs are for a premium collection system. The department does not currently have a system to handle premium collections. The Medicaid program collects premiums only from a few hundred persons. The estimated cost to develop this system is \$2,000.0. The cost to maintain is \$1,000.0/yr.

*There is no known database of employers who provide insurance and to what level they provide it to determine if an employer must contribute to the Fund. This fiscal note does not include the cost of creating or maintaining such a database, which most likely would be under the Department of Labor and Workforce Development.

Alternate Low-Premium Scenario

An alternate premium scenario was prepared assuming a low premium of \$3,600 annual per capita (if similar to Arizona's plan). The cost for medical benefits remains \$3,000 per person per year. The annual per capita cost to the individual would range from \$400 (10%) to \$2,900 (80%) for an average of \$1,600.

Total the State pays: \$172,000.0 (15,000.0 fed/15,000 GF/142,000.0 Fund)

Total individuals pay: \$201,200.0

Grand total: \$343,200.0

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: 2
 Bill Version: CSSB 160(L&C)
 (S) Publish Date: 3/14/08
 Dept. Affected: Health & Social Services
 RDU: Public Assistance
 Component: Public Assistance Field Svcs

ID(File name) SB160CS(HES)-DHSS-PAFS-02-23-08
 Title MANDATORY UNIVERSAL HEALTH CARE
 Sponsor FRENCH
 Requester SENATE (L&C)

Component No. 236

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation		Information						
	Required		FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES									
Personal Services	1,162.4		1,549.8	1,549.8	1,549.8	1,549.8	1,549.8	1,549.8	1,549.8
Travel	34.5		34.5	34.5	34.5	34.5	34.5	34.5	34.5
Contractual	138.0		161.0	161.0	161.0	161.0	161.0	161.0	161.0
Supplies	174.8		18.4	18.4	18.4	18.4	18.4	18.4	18.4
Equipment									
Land & Structures									
Grants & Claims									
Miscellaneous									
TOTAL OPERATING	1,509.7	0.0	1,763.7	1,763.7	1,763.7	1,763.7	1,763.7	1,763.7	1,763.7

CAPITAL EXPENDITURES									
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CHANGE IN REVENUES (0)									
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	754.9		881.9	881.9	881.9	881.9	881.9	881.9
1003 GF Match	754.8		881.8	881.8	881.8	881.8	881.8	881.8
1004 GF								
1037 GF/Mental Health								
Other(Specify Type-do not abbreviate)								
Other(Specify Type-do not abbreviate)								
TOTAL	1,509.7	0.0	1,763.7	1,763.7	1,763.7	1,763.7	1,763.7	1,763.7

Estimate of any current year (FY2008) cost: _____

POSITIONS

Full-time	23		23	23	23	23	23
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if necessary)

The purpose of this bill is for all Alaskans to have access to essential health care services. It requires all residents to have health insurance and creates the Alaska health care program, which is administered by the Division of Insurance.

The bill is expected to increase enrollment in Medicaid, which will increase costs. The Division of Public Assistance accepts applications and determines whether a person meets program criteria and financially qualifies for the Medicaid program. This fiscal note reflects the additional administrative costs needed to support the increased workload as a result of more people applying for Medicaid.

(continued on page 2)

Prepared by: Elle Fitzjarrald, Director
 Division: Public Assistance
 Approved by: Karleen Jackson, Commissioner
 Agency: Department of Health and Social Services

Phone: 465-2680
 Date/Time: 02/22/2008
 Date: 02/23/2008

STATE OF ALASKA
2008 LEGISLATIVE SESSION

ANALYSIS CONTINUATION

Administrative Cost Assumptions:

CS SB 160 (HES) has a January 1, 2009 effective date.

The department anticipates receiving a significant increase of people applying for Medicaid, since enrollment in Medicaid is one of the criteria that makes a person ineligible for health care coverage under the new program.

In FY 09, the department anticipates receiving 14,000 Medicaid applications from persons who do not currently receive Medicaid.

Additional staff will be needed to manage the increased application volume and workload. Funding for additional staff will include a three month start up period to accommodate hiring and training for Medicaid, one of the division's more complex programs.

Fourteen Eligibility Technician II's are needed to make the initial and ongoing determinations of eligibility; two Eligibility Technician III Lead Workers and one Eligibility Technician IV are needed for supervisory and management support; and four administrative support staff are needed to manage the increased workload as a result of more people applying for assistance. These positions provide customer service, communicate with applicants, and verify applicant information..

The increased volume of applications is anticipated to result in increased denials of eligibility and fair hearing requests. Hearing requests usually result when applicants do not receive an affirmative decision on their application. This increased demand will result in the need for one additional Public Assistance Analyst to serve as a hearing representative and support the fair hearing function.

Additionally, interaction with another department will also increase complexity of referrals and processing of applications. A Project Coordinator is necessary to establish and maintain service coordination and collaboration with the Alaska Health Care Program, and to facilitate consumer education, etc.

This is essentially a new service population with which the division has little experience and it is difficult to assess the full impacts of this legislation. Costs associated with this new program will need to be reevaluated as the program ages.
(Continued on page 3)

STATE OF ALASKA
2008 LEGISLATIVE SESSION

ANALYSIS CONTINUATION

FY 09 Administrative Costs (for 9 months): \$1,509.7

Personal Services: \$1,162.4 (salary and benefits for 23 new positions)

Travel: \$34.5

Contractual: \$138.0 (annual cost for information technology, telecommunication, office space, phones)

Supplies: \$174.8

- Training materials and office supplies: \$13.8

- Desktop computers, printers, and workstations for new positions (one-time cost for FY 09): \$161.0

FY 10 – FY 14 Administrative Costs: \$1,763.7 per year

Personal Services: \$1,549.8 (salary and benefits for 23 new positions)

Travel: \$34.5

Contractual: \$161.0 (annual cost for information technology, telecommunication, office space, phones)

Supplies: \$18.4 (program materials and office supplies)

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: 3
 Bill Version: CSSB 160(L&C)
 (S) Publish. Dat: 3/14/08
 Dept. Affected: Health & Social Services
 RDU: Health Care Services
 Component: Medicaid Services

ID(File name) SB160CS(HES)-DHSS-MS-02-23-08
 Title: MANDATORY UNIVERSAL HEALTH CARE

Sponsor: FRENCH
 Requester: SENA (L&C) Component No: 2077

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation		Information					
	Required		FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims			12,000.0	24,000.0	24,000.0	24,000.0	24,000.0	24,000.0
Miscellaneous								
TOTAL OPERATING			12,000.0	0.0	24,000.0	24,000.0	24,000.0	24,000.0

CAPITAL EXPENDITURES

CHANGE IN REVENUES (0)

FUND SOURCE

(Thousands of Dollars)

	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
1002 Federal Receipts	7,800.0	15,600.0	15,600.0	15,600.0	15,600.0	15,600.0
1003 GF Match	4,200.0	8,400.0	8,400.0	8,400.0	8,400.0	8,400.0
1004 GF						
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
Other(Specify Type-do not abbreviate)						
TOTAL	12,000.0	0.0	24,000.0	24,000.0	24,000.0	24,000.0

Estimate of any current year (FY2008) cost: _____

POSITIONS

	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

The purpose of this bill is for all Alaskans to have access to essential health care services. It requires all residents to have health insurance and creates the Alaska health care program, which is administered by the Division of Insurance.

This bill is expected to increase enrollment in Medicaid, which will increase costs. This fiscal note reflects the portion of additional costs to the Medicaid program for health care services, other than behavioral health.

Continued on page 2

Prepared by: William J. Steur, Deputy Commissioner
 Division: Health Care Services
 Approved by: Karleen Jackson, Commissioner
 Agency: Department of Health and Social Services

Phone: 334-2520
 Date/Time: 02/21/2008
 Date: 02/23/2008

STATE OF ALASKA
2008 LEGISLATIVE SESSION

ANALYSIS CONTINUATION
ASSUMPTIONS

Enrollment

*Participation is required for every resident who is not enrolled in a public medical assistance program (e.g. Medicaid, Medicare) or a private insurance program that provides essential health care services.

*There are an estimated 109,500 uninsured persons in Alaska (children = 17,200, adults = 91,500 and elderly = 800) who would be required to take up coverage. About 20% of the uninsured are Native who have coverage under Indian Health Services.

*Of the 109,500 uninsured persons, an estimated 10,000 persons, mostly children below 175% of poverty, could be enrolled in Medicaid/SCHIP without changes to the current eligibility guidelines. This includes the IHS eligible Native population who we assume would enroll in Medicaid as a result of outreach/advertising for the AK Health Care program.

*Options could be explored to expand Medicaid eligibility to maximize federal funding, but it would be a lengthy process and as such are not included in this analysis.

Expenditures

*Once deemed eligible, a Medicaid enrollee is entitled to all Medicaid services, and is not limited to only those "essential health care services" listed in the bill.

*The average cost for all Medicaid benefits for children is \$3,000 per person per year (based on analysis of Medicaid claim payments for non-disabled children). Most children who need long term care are expected to have already applied for Medicaid.

*The total cost for benefits (all Medicaid components) is \$30 million per year (10,000 persons x \$3,000).

*About 80% of the total Medicaid costs will be for services managed by Health Care Services-Medicaid Services component. Services include inpatient/outpatient hospitals, physicians & clinics, prescription drugs, dental, transportation, lab/x-ray, durable medical equipment, physical/occupational/speech therapy, vision, and home health/hospice.

Continued on page 3.

FISCAL NOTE # 3

STATE OF ALASKA
2008 LEGISLATIVE SESSION

BILL NO: CSSB 160(L&C)

ANALYSIS CONTINUATION

Fund Source

*The federal government reimburses the state approximately 50% of the cost for most Medicaid claims. Some claims get an enhanced match rate (e.g. Indian Health Services is 100% federal).

*The fund source is based on the weighted average federal revenue from SFY 2008, which for Health Care Services-Medicaid Services was 65% federal funds.

*State matching funds for Medicaid are GFM and do not come from the AK Health Care Fund.

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: 4
 Bill Version: CSSB 160(L&C)
 (S) Publish Dat: 3/14/08
 Dept. Affected: Health & Social Services
 RDU: Behavioral Health
 Component: Behavioral Hlth Medicaid Svcs

ID(File name) SB160CS(HES)-DHSS-BHMS-02-23-08
 Title MANDATORY UNIVERSAL HEALTH CARE
 Sponsor FRENCH
 Requester SENATE (L&C)

Component No. 2660

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation		Information				
	Required		FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
OPERATING EXPENDITURES	FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Personal Services							
Travel							
Contractual							
Supplies							
Equipment							
Land & Structures							
Grants & Claims	3,000.0		6,000.0	6,000.0	6,000.0	6,000.0	6,000.0
Miscellaneous							
TOTAL OPERATING	3,000.0	0.0	6,000.0	6,000.0	6,000.0	6,000.0	6,000.0
CAPITAL EXPENDITURES							
CHANGE IN REVENUES (0)							

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	1,740.0		3,480.0	3,480.0	3,480.0	3,480.0	3,480.0
1003 GF Match	1,260.0		2,520.0	2,520.0	2,520.0	2,520.0	2,520.0
1004 GF							
1037 GF/Mental Health							
Other(Specify Type-do not abbreviate)							
Other(Specify Type-do not abbreviate)							
TOTAL	3,000.0	0.0	6,000.0	6,000.0	6,000.0	6,000.0	6,000.0

Estimate of any current year (FY2008) cost: _____

POSITIONS

Full-time							
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if necessary)

The purpose of this bill is for all Alaskans to have access to essential health care services. It requires all residents to have health insurance and creates the Alaska health care program, which is administered by the Division of Insurance.

This bill is expected to increase enrollment in Medicaid, which will increase costs. This fiscal note reflects the portion of additional costs to the Medicaid program for behavioral health services.

Continued on page 2.

Prepared by: William J. Streur, Deputy Commissioner
 Division: Health Care Services
 Approved by: Karleen Jackson, Commissioner
 Agency: Department of Health and Social Services

Phone: 334-2520
 Date/Time: 02/21/2008
 Date: 02/23/2008

STATE OF ALASKA
2008 LEGISLATIVE SESSIONANALYSIS CONTINUATION
ASSUMPTIONS

Enrollment

*Participation is required for every resident who is not enrolled in a public medical assistance program (e.g. Medicaid, Medicare) or a private insurance program that provides essential health care services.

*There are an estimated 109,500 uninsured persons in Alaska (children = 17,200, adults = 91,500 and elderly = 800) who would be required to take up coverage. About 20% of the uninsured are Native who have coverage under Indian Health Services.

*Of the 109,500 uninsured persons, an estimated 10,000 persons, mostly children below 175% of poverty, could be enrolled in Medicaid/CHIP without changes to the current eligibility guidelines. This includes the IHS eligible Native population who we assume would enroll in Medicaid as a result of outreach/advertising for the AK Health Care program.

*Options could be explored to expand Medicaid eligibility to maximize federal funding but it would be a lengthy process and as such are not included in this analysis.

Expenditures

*Once deemed eligible, a Medicaid enrollee is entitled to all Medicaid services, and is not limited to only those "essential health care services" listed in the bill.

*The average cost for Medicaid benefits for children is \$3,000 per person per year (based on analysis of Medicaid claim payments for non-disabled). Most children who need long term are expected to have already applied for Medicaid.

*The total cost for benefits (all Medicaid components) is \$30 million per year (10,000 persons x \$3,000).

*About 20% of the total Medicaid costs are for services managed by the Behavioral Health Medicaid Services component. Services include acute psychiatric hospital, residential psychiatric treatment centers and outpatient mental health services.

Continued on page 3.

ANALYSIS CONTINUATION

Fund Source

*The federal government reimburses the state approximately 50% of the cost for most Medicaid claims. Some claims get an enhanced match rate (e.g. Indian Health Services is 100% federal).

*The fund source is based on the weighted average federal revenue from SFY 2008, which for Behavioral Health Medicaid Services was 58% federal funds.

*State matching funds for Medicaid are GF/M and do not come from the AK Health Care Fund.

FISCAL NOTE

STATE OF ALASKA
2008 LEGISLATIVE SESSION

Fiscal Note Number: 5
Bill Version: CSSB 160(L&C)
(S) Publish Date: 3/14/08

Identifier (file name): SB160CS(HES)-CED-INS-02-22-08 Dept. Affected: DCCED
Title: Mandatory Universal Health Care RDU: Insurance (116)
Component: Insurance
Sponsor: French, Ellis, Wielechowski
Requester: Senate Labor & Commerce Component Number: 354

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information						
		FY 2009	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims								
Miscellaneous								
TOTAL OPERATING	
CAPITAL EXPENDITURES								
CHANGE IN REVENUES ()								

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts								
1003 GF Match								
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other Interagency Receipts								
TOTAL	

Estimate of any current year (FY2008) cost: _____

POSITIONS

Full-time								
Part-time								
Temporary								

ANALYSIS: (Attach a separate page if necessary)

This legislation would establish a health care program to ensure all Alaskans to have access to essential health care services. It would require all residents to have health insurance and would establish the Alaska health care program under AS 21 Insurance. By statute the division regulates insurance providers and has not created or operated these types of programs. Accordingly, the division is unable to estimate the fiscal effect of this legislation at this time.

Prepared by: Linda S. Hall, Director
Division: Insurance
Approved by: Emil R. Notti, Commissioner
Agency: Commerce, Community, and Economic Development

Phone: 907.269.7900
Date/Time: 2/22/08 7:08 PM
Date: 2/22/2008

Alaska State Legislature



Senator Hollis French

Sponsor Statement

SB 160 - Affordable Health Insurance for All Alaskans

The time has come for us to begin addressing the health care crisis in Alaska. Increasing costs have made it difficult for businesses and individuals to acquire the health services they need. This crisis is only getting worse; family health insurance premiums have risen 4.6 times faster than the median earnings of Alaskans over the past 6 years. As costs continue to increase, it is likely that additional hard working Alaskans will go uninsured. Employers who choose to provide employee health plans will watch their costs go up, making it difficult to run a competitive business in the state. No longer can we wait for the federal government to take action on this important issue.

Many other states have joined the universal health care debate, but this bill is uniquely Alaskan. This bill puts people in control of their own health, giving them the tools they need to make smart investments. Vouchers, funded by a variety of stakeholders, make the prospect of acquiring health coverage realistic to all Alaskans. By guaranteeing that everyone has coverage, insurance premiums will go down. This bill ensures that everyone can purchase an affordable health plan that they select to fulfill their medical needs.

This bill establishes a framework mandating and ensuring affordable health coverage for all Alaskans. A board of 13 stakeholders will oversee the plan, making certain that residents are able to choose and purchase coverage that provides adequate care. The bill also provides:

A framework for personal choice: This bill facilitates a relationship between health insurance providers and individuals, and doesn't assume that a one size fits all solution will meet the health care needs of all Alaskans.

A unique voucher system: By pooling money from all stakeholders, a sliding scale voucher system will ensure that every Alaskan can take personal responsibility for acquiring health insurance coverage. The system will also make it easy for multiple entities to contribute towards a health plan for an individual.

A health care clearinghouse: The clearinghouse will disseminate information about quality health care products, assisting Alaskans who are utilizing vouchers under the Alaska health care plan.

The Alaska health care fund: This fund will receive contributions from individuals, businesses and government to ensure that all interested parties contribute to the health of Alaskans.

Satisfied with your current coverage? This bill will not affect employer based health plans that provide quality health care coverage. In addition, the bill may reduce cost increases for those who currently pay for coverage. A hospital cannot turn down anyone in need of emergency care, and when someone cannot pay their medical costs, those who can pay are forced to subsidize the cost of the uninsured. A recent study estimated that Alaska health insurance premiums are 13.6% higher than they would be if everyone had health coverage (Families USA report). Through ensuring equitable financing of the health care system, SB 160 will reduce the burden on individuals and businesses currently buying coverage.

This bill isn't really about reforming the health care system; it is about ensuring the health of residents across the state. I urge you to consider supporting this bill as we work to improve the quality of life for all Alaskans.



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OPINION

OUR VIEW

Health coverage

Support grows for state action that will help the uninsured

Will Alaska join the ranks of states working on ways to expand health care coverage? An advisory council appointed by Gov. Sarah Palin looks like it will give a helpful push in that direction after all. The council's support is welcome, but its recommendations are small steps compared with the ambitious health insurance plan being promoted by state Sen. Hollis French.

In a preliminary plan released earlier this month, the governor's Health Care Strategies Planning Council wasn't ready to make any recommendations about health insurance. At the council's latest meeting, though, members agreed the state should support efforts to bring health insurance to more Alaskans.

The council endorsed a specific but small step toward that goal: expand the state's health insurance program for children, known as Denali KidCare.

Other ideas offered by the council were more vague. It suggests the state offer incentives for individuals to get catastrophic health care coverage. The council sup-

Will Gov. Palin and her health care council help pass SB 160?

ports tax-deductible health savings accounts, which could help the uninsured buy health insurance or pay for medical care.

The Legislature would have to agree to expand Denali KidCare. It's a good idea, especially since the feds pay the majority of the cost. But it won't be easy. Earlier this year, it took a long hard fight before lawmakers agreed to cover children in families whose income is up to 175 percent of the federal poverty level. The governor's

council says the income cap should be raised to 200 percent.

Some Alaska legislators, led by Sen. French of Anchorage, are pushing a much bolder initiative. Their bill, SB 160, would require uninsured Alaskans to get some minimum level of coverage.

To make it affordable, the bill offers health insurance vouchers, with the amount of aid based on income. Employers can also contribute to vouchers, instead of directly providing their workers with health insurance. Some funding for the insurance aid would come from money the government already spends to pay for charity medical care. Sen. French recently announced some refinements in the legislation to improve the odds of passage.

If a comprehensive health insurance initiative like SB 160 is going to pass, it's going to need all the help it can get. Like maybe support from Gov. Palin and her health care council?

BOTTOM LINE: The more effort to cover uninsured Alaskans, the better.

GOV. PALIN'S HEALTH CARE STRATEGIES PLANNING COUNCIL: is taking public comment through close of business Monday. Visit www.hcs.state.ak.us/hspc/. For information on SB 160, to insure the uninsured, visit www.healthyalaskans.com/.

adn.com

Anchorage Daily News

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Universal health care can work for us

By SEN. HOLLIS FRENCH

(Published: March 16, 2007)

A wave is beginning to build in state capitols across the country. In the face of inaction by the federal government, Maine, Massachusetts, Oregon, Vermont and now California are leading the effort to promote universal health care coverage among their citizens. In May 2006, Gov. Mitt Romney signed a bill that ensures health care coverage for all Massachusetts residents. California Gov. Arnold Schwarzenegger recently proposed a similar plan for the people of his state.

In the past, powerful interests have opposed universal health coverage. However, recent policy innovations have convinced many business and political leaders that fears about health care rationing and restricted access to doctors and hospitals are no longer valid.

These new plans do not call for the replacement of the current health care system with a new and untested model. This is not socialized medicine. Indeed, it is not the so-called single-payer system sought by the most progressive reformers. Instead, policymakers are taking the more pragmatic approach of retooling health care delivery methods that are currently in use.

The first principle of this new wave of health care legislation is individual responsibility. These laws impose a duty on each citizen to acquire some minimal form of health insurance coverage. This key idea recognizes that while the government has a role in shaping the health insurance landscape, ultimately it is the individual who must see to his or her own basic needs. This provision also ensures that the cost of health care is shared as broadly as possible.

Another major change in the law calls for employers who do not offer health insurance to their employees to contribute to a fund that would help pay for coverage of the working uninsured. This is a particularly needed reform here in Alaska. While many small business owners would like to offer health insurance to their employees, the cost is often out of reach. Some subsidy will be necessary to help those who work for very small businesses.

A comparison between Alaska and Lower 48 small businesses reveals the necessity of this reform. A March 2006 ISER study showed that only a third of Alaska businesses with fewer than 50 employees offer coverage, compared with 43 percent nationwide. The ISER study noted that 91,500 of the state's 224,500 private industry employees work for small businesses, meaning that over 60,000 working Alaskans do not get health care insurance through their jobs. This study helps defeat the notion that only the lazy or the poor are not covered by health insurance.

This reform does not have to be expensive. For example, the California plan requires businesses that do not offer health insurance and that have 10 or more workers to pay 4 percent of their total wages to a state fund that would be used to subsidize the purchase of health policies.

Another innovation redistributes Medicaid coverage in a couple of ways. The first is simply to expand Medicaid eligibility guidelines for children and adults and add enhancements such as dental and vision benefits. The other change is to take the Medicaid dollars currently being spent to reimburse hospitals and other providers for the free care they provide to the uninsured, and use

the money instead to subsidize health insurance for those who cannot afford it. Stop for a moment and consider what a good idea this is: Take the money spent on hospital bills each year for the uninsured, and buy health insurance instead.

These policy changes all lead to the goal of covering every citizen with a basic form of health insurance. I believe it is time for Alaska to take up the same challenge. I plan to introduce legislation that uses these enhanced policy tools to pave the way to universal health care coverage for all Alaskans.

Changing the health insurance system is not easy. Yet I am certain that someday we will look back on this era and ask ourselves, "What took so long?" There is no reason not to begin what will certainly be a spirited debate.

Hollis French is a Democrat who represents northwest Anchorage in the Alaska Senate.

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April 23, 2007

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Tel 907.562.2211

The Honorable Hollis French
Alaska State Senate
State Capitol, Room 417
Juneau, AK 99801-1182

Dear Senator French:

I write today in support of the concepts contained in your legislation establishing the framework to ensure affordable health coverage for all Alaska. I applaud your leadership, and that of the Senate, for bringing this critical issue to the forefront.

Providence Health System remains deeply concerned about the increasing problem of access to affordable, quality health care for the uninsured and the under-insured, as do I personally. As this problem continues to grow, it results in cost increases for medical care. Escalating health care costs are creating great difficulties for Alaska's employers, as I know you are aware.

I believe it is crucial for Alaskans to engage in a public policy debate on this important issue and this legislation provides an excellent forum around which this discussion can be held. Providence stands ready to assist in any effort that stands to improve the quality of health care delivery in our state, improves access to that quality care, and strives to make health care delivery more affordable.

Again, thank you for your willingness to begin a serious debate on this vitally important issue.

Sincerely,

Al Parish
VP/Chief Executive

April 20, 2007

Senator Hollis French
State Capitol, Room 417
Juneau, AK 99801-1182

Honorable Senator French,

I have reviewed your proposed health care bill, and want to wholeheartedly lend my support to your efforts to provide insurance to both the uninsured and the under-insured. It is time for all Alaskans, including legislators, health care providers, and citizens to recognize that there is indeed a health care crisis both nationally and in Alaska. With this bill, you are taking the aggressive step to solve the Alaskan problem with an Alaskan solution.

Your bill begins a discussion that is sorely needed. My experience both in the insurance and provider industry makes me appreciate your out-of-the-box thinking to create a system that relies on a privately funded health care insurance pool, not government-provided health care.

Finally, I want to thank you for addressing the coverage gap for Alaskans frequently and callously referred to as the "working poor." These hard-working Alaskans oftentimes have either no insurance or minimal insurance. The positive choice of maintaining employment comes with the penalty of unattainable health care coverage.

Please continue your good work and let me know how I can help.

Sincerely,

James W. Shill
CEO



February 26, 2008

The Honorable Johnny Ellis Chair
Senate Labor and Commerce Committee
Alaska State Capitol, Room 9
Juneau, AK 99801-1182

RE: SB 160 (French)--Support

Dear Chair Ellis:

On behalf of the members of AARP in Alaska, we encourage you and your colleagues on the Senate Labor and Commerce Committee to support SB 160, authored by Senator Hollis French and co-sponsored by Senator Wielechowski and you.

We applaud Senator French's efforts to develop a health care plan that works toward access to adequate coverage for all residents of all ages.

AARP pledges that we will work with Senator French and your colleagues in the Legislature to support efforts to provide high quality, accessible and affordable health care that offers reasonable choices for all Alaskans.

One of the basic legislative principles AARP supports is that expansion of health coverage is desirable. Those who lack either private or public coverage are less likely to receive access to timely medical care and more likely to experience adverse health outcomes.

We understand that SB 160 is a work in progress and is probably the initial effort in what will take several sessions to work out. That's fine with us. The more participatory the debate, the more all Alaskans will understand how important it is to cover all of us.

There are major issues that should be addressed in SB 160 and each of these issues should be thoroughly debated in the Legislature, in the media, and over the dinner table.

Who is covered and how comprehensive is the coverage?

Is SB 160 efficient and economically practical?

Will the bill result in fairness and equity?

How much choice and autonomy does the bill permit?

Health care, as you all know, is extremely complex. For example, if SB 160 passes, will there be a need for additional physician visits and nursing care? Do we have the health professionals to provide them? What new or expanded medical technology resources will be consumed as a result of coverage expansion? Conversely, what will we save in fewer visits to an emergency room through program expansion?

What will be the effect on quality of care, eg., medical outcomes and patient satisfaction?

What will be the effect on physician patterns of practice, eg., will we have greater adherence to practice guidelines?

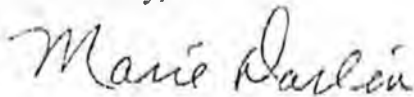
The questions can go on for pages...and they should. SB 160 is a bill that deserves serious debate in every Committee of referral. AARP believes that we will eventually come out with a bill that all of us can live with and one that will improve the health status of all Alaskans of all ages. Let's keep that discussion going in Senate Labor and Commerce.

We urge an "AYE" vote on SB 160.

Should you have any questions about our position, please feel free to contact me (586 3637) or Patrick Luby, AARP Advocacy Director (907 762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
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Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Senator Gary Stevens
Senator Bettye Davis
Senator Lyman Hoffman

Senator Con Bunde
Senator Hollis French