

853

SHESS

SB 33

-

SB 35

257

Page 1

line 19 improve How??

How many prisoners to we have from out of state?

Page 2

line 12 does this include juveniles?

line 27 what does 'extraordinary' mean?

Page 3

line 6 define -

27 how does this work? inspection: visiting

Page 5

line 12 'buried'??

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SB #33 HESS

1/26/79 v. P. 20 F/N v. Position paper delid.

1/26/79 - hel

Introduced 1-16-79

Logged 1-16-79

Referral - Finance

Comm. meeting 1-26-79 - 2-23-79 held

Comm. action

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

JAY S. HAMMOND, GOVERNOR

DIVISION OF MENTAL HEALTH
ALASKA PSYCHIATRIC INSTITUTE

2900 PROVIDENCE AVENUE
ANCHORAGE 99504

February 22, 1979

Senator Glenn Hackney
Pouch V
(Mail Stop Number 3100)
Juneau, Alaska 99811

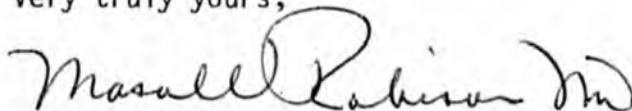
Dear Senator Hackney:

Thank you for giving us an opportunity to comment on Senate Bill 33.

I have reviewed the wording of the bill and find it entirely acceptable in the conduct of operations at our hospital.

Thank you for your kind consideration and courtesy.

Very truly yours,



Mason W. Robison, M.D.
Superintendent
Alaska Psychiatric Institute

MWR/jb

cc: Verner Stillner, M.D.
Director
DMH&DD



ALASKA MEDICAL RECORD ASSOCIATION

Feb. 19, 1979

Senator Glenn Hackney, Chairman
Health, Education & Social Services Committee
Pouch V
Juneau, Alaska 99811

Dear Senator Hackney:

Re: S.B. 33 (Hospital Inspection Act)

Members of the Alaska Medical Record Association have recently reviewed a copy of the Senate Bill 33. Our membership has voiced several concerns regarding the bill and its implications.

- 1) We feel that it would directly affect the medical record departments in terms of cost containment, i.e., time, supplies and storage. Each individual consent wouldn't cost much but the accumulation of costs would not meet the criteria of keeping health care costs down. This cost, whether born by the facility or by the federal government is eventually passed on to the patient either directly or through taxes.
- 2) The proposed bill is a duplication of already existing federal regulations which authorize the surveyors to examine the Medicare and Medicaid records and which also state specifically what is necessary for an adequate medical record. Since most, if not all, hospitals in Alaska have more than a 10% Medicare/Medicaid admission rate, we feel that it is not serving any useful purpose to examine the records of those patients who are not Medicare and/or Medicaid patients.
- 3) Many patients may not be signing an 'informed consent' depending on how the consent is worded, on how it is presented and that the fact that in effect the patient would be signing 'under duress' (More paperwork to fill out before being admitted.)

I trust that our views on the subject of this bill will be informative and helpful to you.

Sincerely,

Mrs. Marlene LaPlante, ART
President, Alaska Medical Record Association
Box 80
Cordova, Alaska 99574

Mary -
Fill w/ SB 33
please
⑤

PROVIDENCE HOSPITAL

3200 PROVIDENCE DRIVE - POUCH 6604
ANCHORAGE, ALASKA 99502
PHONE: (907) 276-4511



SISTERS OF PROVIDENCE

SERVING IN THE WEST SINCE 1856

February 19, 1979

The Honorable Glenn Hackney, Chairman
Committee on Health, Education & Social Services
Alaska State Senate
Pouch V
Juneau, Alaska 99811

Dear Senator Hackney:

Thank you for the opportunity to express our thoughts on Senate Bill 33 (An Act relating to the inspection of hospitals and their functions; and providing for an effective date).

Senate Bill 33 includes two sections on which we will comment:

1. Section 18.20.080 (a). Inspections; Submission of Plans for Alterations.
2. Section 3. AS 18.20.085 (b) relating to the inspection of additional medical records and requiring the hospitals to get the appropriate consent for such inspection.

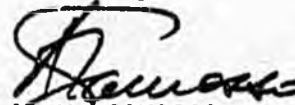
Our primary concern regarding the bill is the intent. As we already are subject to inspections by the State, Medicare and VA, as well as follow-up inspections to determine compliance, it seems as if this bill is promulgating duplicate efforts in information.

In the state of Texas, the legislature passed a law relating to inspections of hospitals which has merit. Those hospitals receiving accreditation under inspections by the Joint Commission on Accreditation of Hospitals are deemed automatically approved for state licensure. Also, a state agency seeking an inspection of a hospital in Texas must first use all data coordinated by other agencies before conducting an inspection. There is much duplicative data available, and the Texas Hospital Association estimates that they will save in excess of \$12 million dollars by cutting down inspection time.

Additionally, as the Division of Health and Social Services already has access to Medicaid medical records, we don't see the merit of requesting inspection of additional records. The time and expense of obtaining consent from patients to release their medical records to state inspectors as well as the time and expense of pulling the charts and refiling them is an unnecessary burden to place on hospitals.

Thank you for the opportunity of responding to SB 33, and if there are other bills relating to health care in which our response would be helpful, please feel free to call on us at any time.

Sincerely,



AL M. CAMOSSO
Administrator

CC: Senator Mike Colletta
Senator Frank Ferguson
Senator Arliss Sturgulewski

Valdez Community Hospital

Box 550
VALDEZ, ALASKA 9986

OPERATED BY
LUTHERAN HOSPITALS AND HOMES SOCIETY
FARGO, NORTH DAKOTA 58102

February 19, 1979

Glenn Hackney
State Senator
Pouch V
Juneau, Alaska 99811

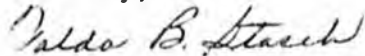
Dear Senator Hackney:

I support Senate Bill No. 33. However, with the expertise of employees now in the medical records departments I feel that the percentage of records inspected could/should be minimal. One of the primary responsibilities of medical record department personnel is to check for completeness so a brief review should be adequate.

Consent for reviewing the record from the patient should be no problem if he/she understands the purpose of the review. If this is a routine procedure on admission it would eliminate attempting to locate this person at the time of review. I do have one question. Normally, consents are good only for a specified time - usually 60-90 days - depending upon the policy of the hospital. If we are required to get a current consent from the patient - this could involve a lot of time and expense and possibly very little response.

Thank you for calling attention to SB 33 and requesting comments.

Sincerely,



Valda B. Stasch
Administrator

Fairbanks Memorial Hospital

1650 Cowles St.

FAIRBANKS, ALASKA 99701

OPERATED BY
LUTHERAN HOSPITALS AND HOMES SOCIETY
FARGO, NORTH DAKOTA 58102

February 20, 1979

Senator Glen Hackney
Chairman
Health, Education and Social Services
Committee
Pouch V
Juneau, Alaska 98111

Dear Senator Hackney:

Thank you for your letter of February 9, 1979, regarding Senate Bill 33. We appreciate an opportunity to air our views on this very important bill.

1. Section 18.20.080 - Inspection Submission of Plan. Fairbanks Memorial Hospital is very much against this section being changed. We believe that the changes included in this section will accomplish nothing other than to create hard feelings between the hospital and the State of Alaska surveyors. The hospital recognizes the responsibility of the Department of Health and Social Services to make sure that patient safety is maintained in a health care facility, but in the past when unannounced "surprise" inspections were conducted, it was the experience of this hospital that nothing positive came out of these.

Since most hospitals in this state are much smaller than Fairbanks Memorial Hospital, they do not have the back-up administrative people to put in charge when the administrator is out of town or away from the facility. I personally know of several situations where health surveyors have presented themselves at a facility and demanded the staff bow to their every need. This not only disrupted services but, I believe, provided a very unsafe atmosphere for the patients. In both of these facilities of which I personally speak, several professional people were ready to walk off the job after receiving "orders" from the inspectors.

I believe that if additional inspections are necessary that:
(1) They should be announced. This will give the hospital

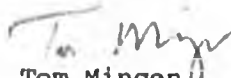
Senator Glen Harkinney
February 20, 1979
Page Two

time to investigate the matter and to put its resources together so as to save the Department additional time when visiting the facility. (2) The visit should be preceded by a letter stating exactly the nature of the visit and what complaint they have received. This will give the facility a better chance to again look into the nature of the complaint and possibly in some instances could save surveyors travel time and expenses. I believe that no hospital in this state is interested in jeopardizing patient safety, but if you have seen the Department survey a hospital and the disruption and antagonism that exists between the inspectors and the staff, you would easily recognize that in many cases this jeopardizes the patient more than the original complaint might.

2. The second change would be changing the age of a patient from 19 years to 18 years. The hospital has no objection to this change since the hospital is required to keep all patient records for a minimum of nine years past discharge date.
3. The third change involved an inspection process for medical records by the state surveyors. The hospital is very much against this since Fairbanks Memorial Hospital and all hospitals in the United States are undergoing grave criticism for the cost to the patient. This portion of Senate Bill 33 will again increase that cost to each patient since it will be the responsibility of the hospital to see that releases are signed on patients other than Medicaid patients. Fairbanks Memorial Hospital currently runs an occupancy of approximately 10% Medicaid patients. We believe that this sampling of the medical records quality maintained at the hospital should give the licensing team adequate documentation as to whether our records are deficient. My other question to the Department would be if 10% of the records are not adequate to maintain the sampling, how many would be required? If the Department feels that the Medicaid patients are not adequate for a sampling basis, the State of Alaska should be responsible for getting those release forms signed rather than the hospital. This could be performed by hospitals giving those patients that had been admitted over the past year names and addresses to the state and, in turn, the state could write to each of those patients and attempt to get a release form signed.

I am also enclosing comments on the bill sent to you by the Alaska State Hospital Association. Again, we appreciate you letting us comment on this and look forward to your continued support of the hospital.

Sincerely,


Tom Mingen
Administrator

Jarvis Bates

Office Copy

Introduced: 1/16/79
Referred: Health, Education & Social Services and Finance

1 IN THE SENATE

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

2 SENATE BILL NO. 33

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 ELEVENTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to the inspection of hospitals and
7 their functions; and providing for an effective
8 date."

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

10 * Section 1. AS 18.20.080(a) is amended to read:

11 Sec. 18.20.080. INSPECTIONS; SUBMISSION OF PLANS [INSPECTION AND
12 CONSULTATION] FOR ALTERATIONS. (a) The department shall make annual
13 inspections and investigations of all hospital facilities and functions
14 it is required by secs. 10 - 130 of this chapter to regulate. Addi-
15 tional inspections may be made when necessary to determine compliance
16 with department standards. The department shall adopt regulations
17 setting out inspection procedures in detail, including a description of
18 the circumstances in which an inspection in addition to the annual
19 one may be considered necessary, and the procedural safeguards which
20 must accompany it.

21 * Sec. 2. AS 18.20.085(a) is amended to read:

22 (a) Unless specified otherwise by the department a hospital
23 shall retain and preserve records which relate directly to the care
24 and treatment of a patient for a period of seven years following the
25 discharge of the patient. However, the records of a patient under 18
26 [19] years of age shall be kept until at least two years after the
27 patient has reached the age of 18 [19] years or until seven years
28 following the discharge of the patient, whichever is longer. Records
29 consisting of X-ray film are required to be retained for five years.

*Would be defined
in regulations*

1 * Sec. 3. AS 18.20.085(b) is amended to read:

2 (b) The department shall by regulation define the types of
3 records and the information required to be included in the records
4 retained and preserved under (a) of this section and set out a detailed
5 procedure for an inspection process to assure that the records are
6 complete. Medical records from which patient can be identified may
7 be examined by the department only if the patient has granted written
8 consent as to them. The regulations may require hospitals to offer
9 patients who have not already signed information release forms the
10 opportunity to consent to the inspection of their records by only
11 department surveyors in connection with licensing the facility. The
12 regulations may also set statewide limits on the percentage of the
13 total number of records which surveyors may examine in any hospital. The
14 department may by regulation specify records and information to be
15 retained for longer periods than those set out in (a) of this section.

16 * Sec. 4. This Act takes effect immediately in accordance with AS 01.-
17 10.070(c).

Dick Peters

Introduced: 1/16/79
Referred: Health, Education &
Social Services and Finance

*they have to come
w) some
language*

1 IN THE SENATE

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

2 SENATE BILL NO. 33

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 ELEVENTH LEGISLATURE - FIRST SESSION

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POSITION PAPER

SENATE BILL NO. 33

"An Act relating to the inspection of hospitals and their functions; and providing for an effective date."

The Department of Health and Social Services supports Senate Bill No. 33. Recent Alaska Court decisions have found warrantless administrative searches to be unconstitutional in some regulated industries and that hospital licensing surveyors may not spot-check patient records without written consent from the patient. These spot-checks were conducted only for the purpose of determining compliance with record keeping regulations.

In light of these recent court decisions it is necessary to amend AS 18.20.080 to provide for a comprehensive structure of statutes and hence Departmental regulations which set out specific inspection procedures. These new regulations will define inspection procedures so that licensees are put on notice as to what is expected of them and what limitations are imposed on the inspectors.

If the proposed amendments are enacted, the Department is prepared to implement them as soon as possible by regulation, so that the inspection of all regulated functions can continue, limited only by the consent requirement for checking patients' records.

Recommended by:

Richard King

1/25/79
Date

Coordinator
Office of State Health Planning and
Development

Approved by:

Helen D. Beirne

1/25/79
Date

Helen D. Beirne
Commissioner
Dept. of Health and Social Services

THE LEGISLATURE OF THE STATE OF ALASKA
ELEVENTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Senate Bill No. 33
 Title An Act relating to the inspection of hospitals and their functions
 Requested by the Rules Committee and by the Governor Date January 16, 1979

II. FISCAL DETAIL

Agency Affected Health and Social Services
 Program Category Affected Health
 BRU, Program, or Subprogram(s) Affected Health Certification and Licensing
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 79	FY 80	FY 81	FY 82	FY 83	FY 84
100 PERSONAL SERVICES	0					
200 TRAVEL	1.1					
300 CONTRACTUAL	1.7					
400 COMMODITIES	0					
500 EQUIPMENT	0					
600 LAND & STRUCTURES	0					
700 GRANTS, CLAIMS, ETC.	0					
TOTAL	2.8	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

GENERAL FUNL	2.8					
FEDERAL FUNDS	0					
OTHER (Specify Fund Source)	0					

POSITIONS

FULL TIME	0					
PART TIME	0					
TEMPORARY	0					

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

All assumed costs for the travel and contractual lines are based on current information relative to airfare rates, advertising order rates, room rental and anticipated telephone charges.

The proposed regulation amendments will require public hearings before final adoption by the department. Costs associated with these hearings include the advertising of the regulations in state newspapers and legal transcription services at the public hearings. The travel amount requested is for representatives of the Departments of Law and Health and Social Services to travel to Anchorage for the public hearings and to meet with Alaska Hospital Association members concerning the prepared regulations.

These costs are a one time expenditure.

IV. DATE January 24, 1979 PREPARED BY Richard Renninger
 AGENCY Health and Social Services
 PHONE 465-3037
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)

ALASKA STATE LEGISLATURE

ELEVENTH Legislature FIRST Session

SENATE BILL NO. 33

By THE RULES COMMITTEE BY REQUEST OF THE GOVERNOR

"An Act relating to the inspection of hospitals and their functions; and providing for an effective date."

hospital inspection

Introduced in the Senate 1/16/1979

HISTORY IN THE SENATE

19	79	Read first time and referred to Committee on										
1	16	Reported back with recommendation that										
		Read second time and										
		Read third time and										
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Yeas	Yeas											
Nays	Nays											
Absent	Absent											
Excused	Excused											
		Reported correctly engrossed										
		Signed by President										
		Sent to House										
SECRETARY OF THE SENATE												

HISTORY IN THE HOUSE

19		Read first time and referred to Committee on										
		Reported back with recommendation that										
		Read second time and										
		Read third time and										
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PASS	Effective Date											
Yeas	Yeas											
Nays	Nays											
Absent	Absent											
Excused	Excused											
		Reported correctly engrossed										
		Signed by Speaker										
		Returned to Senate										
CHIEF CLERK OF THE HOUSE												

HISTORY IN THE SENATE

19		Received from House
		To enrolling
		Reported correctly enrolled
		Sent to Governor
	 by Governor
		Filed with Lt. Governor
		Chapter No.

A 33

January 15, 1979

President of the Senate
Alaska State Legislature
Juneau, Alaska 99811

Dear Mr. President:

Under the authority of art. III, sec. 18, of the Alaska Constitution, I am transmitting a bill providing explicit authority for the inspection of hospitals and their functions when licenses are granted or renewed.

Alaska and United States Supreme Court decisions (Woods & Rohde v. State, 565 P.2d 138 [Alaska 1977]; Marshall v. Barlow's Inc., 46 U.S.L.W. 4483 [May 23, 1978]) have recently found warrantless administrative searches to be unconstitutional except in certain traditionally regulated industries. In such regulated industries there must be a comprehensive structure of statutes and regulations which set out the inspection procedure in detail so that licensees are put on notice as to what is expected of them and what limitations are imposed on the inspectors. The same system must be present to justify the issuance of a warrant in an unregulated industry.

In addition, in an appeal from an administrative hearing decision, an Alaska superior court judge has ruled that hospital licensing surveyors may not spot-check patients' records to determine compliance with record-keeping regulations unless the patient has granted previous written consent. (Cordova Community Hospital v. State, unpublished oral opinion, 3d Dist. Superior Court, No. 77-19025 [Alaska, Sept. 5, 1978]) That court held that the present term "hospital facilities" in AS 18.20.080 can be interpreted to refer only to the physical plant. Therefore, sec. 1 of the attached bill would extend inspection authority to all functions being regulated.

Sec. 2 of the bill merely changes the records retention age to bring it into conformity to AS 25.20.010 which sets the age of majority at 18, while sec. 3 prohibits the examination of records by Department of Health and Social Services surveyors without the patient's consent.

If the proposed amendments are enacted, the Department of Health and Social Services is prepared to implement them as soon as possible by comprehensive regulations, so that the licensing inspections can continue, limited only by the consent requirement for checking patients' records.

Sincerely,

JSH

Jay S. Hammond
Governor

POSITION PAPER

SENATE BILL NO. 33

"An Act relating to the inspection of hospitals and their functions; and providing for an effective date."

The Department of Health and Social Services supports Senate Bill No. 33. Recent Alaska Court decisions have found warrantless administrative searches to be unconstitutional in some regulated industries and that hospital licensing surveyors may not spot-check patient records without written consent from the patient. These spot-checks were conducted only for the purpose of determining compliance with record keeping regulations.

In light of these recent court decisions it is necessary to amend AS 18.20.080 to provide for a comprehensive structure of statutes and hence Departmental regulations which set out specific inspection procedures. These new regulations will define inspection procedures so that licensees are put on notice as to what is expected of them and what limitations are imposed on the inspectors.

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Recommended by:

Richard King

1/25/79
Date

Coordinator
Office of State Health Planning and
Development

Approved by:

Helen D. Beirne

1/25/79
Date

Helen D. Beirne
Commissioner
Dept. of Health and Social Services

THE LEGISLATURE OF THE STATE OF ALASKA
ELEVENTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Senate Bill No. 33
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 Requested by the Rules Committee and by the Governor Date January 16, 1979

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 BRU, Program, or Subprogram(s) Affected Health Certification and Licensing
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

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300 CONTRACTUAL	1.7					
400 COMMODITIES	0					
500 EQUIPMENT	0					
600 LAND & STRUCTURES	0					
700 GRANTS, CLAIMS, ETC.	0					
TOTAL	2.8	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

GENERAL FUND	2.8					
FEDERAL FUNDS	0					
OTHER (Specify Fund Source)	0					

POSITIONS

FULL TIME	0					
PART TIME	0					
TEMPORARY	0					

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

All assumed costs for the travel and contractual lines are based on current information relative to airfare rates, advertising order rates, room rental and anticipated telephone charges.

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IV. DATE January 24, 1979 PREPARED BY Richard Renninger
 AGENCY Health and Social Services
 PHONE 465-3037

Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)



ALASKA STATE HOSPITAL ASSOCIATION INC.

5531 ARCTIC BLVD, SUITE 1
PHONE 277-1633

ANCHORAGE, ALASKA 99502
January 30, 1979

Senator Glenn Hackney, Chairman
Health, Education & Social Services Committee
Pouch V
Juneau, Alaska 99811

Re: S.B. 33 (Hospital Inspection Act)

Dear Senator Hackney:

The Alaska State Hospital Association recently received a copy of Senate Bill (SB 33) (An Act relating to the inspection of hospitals and their functions; and providing for an effective date.). After reviewing the bill, several concerns surfaced as to the intent and/or necessity of the bill.

1. Hospitals throughout Alaska and the nation are making a concerted effort to comply with the American Hospital Association's (Voluntary Effort) VE for Cost Containment guidelines. Existing regulations already subject hospitals and long term care facilities to many expensive and time consuming inspections annually. In studies in Michigan and South Carolina it has been confirmed that government regulations (state and federal) add \$21 to \$25 to every patient's bill. Most of the regulations being proposed under this proposed bill (18.20.080, 18.20.085) either duplicate or unnecessarily add to already existing regulations covered in Medicare and Medicaid regulations.

2. If you should go further and implement these regulations we would like to point out that Section 1 18.20.080 does not include a requirement for a pre-notification of intent to survey nor a statement of the purpose for the survey. ASHA recommends that a reasonable advanced notice be required on the part of the surveyor and that the purpose of the visit be clearly stated to allow the institution time to prepare for the visit. Through this communication staff disruptions can be reduced and the surveyors time will be more efficiently utilized.

3. Section 3 18.20.085(a) is similar to existing practices of our membership and in fact is written in the federal guidelines under Medicare (Section 405.1026 page 8044 - sub-section f and g) and clearly indicates what is considered a completed medical record. This appears to be a clear duplication and not necessary.

4. Section 3 18.20.085(b) amended section (a) lines 8 - 11, proposes that written consent be obtained by hospitals for medical record inspection authorizations from patients who have not already signed consent forms for release of information. Should such regulations be initiated, the burden of labor and expense in obtaining those releases should not rest with the hospitals, but should rest with the state. As written, the regulations would necessitate additional staffing and expense in restructuring a new medical records filing system which seems totally inappropriate.

VALLEY HOSPITAL

BOX H - PALMER, ALASKA 99645 - (907) 745-4813

February 13, 1979

Senator Glenn Hackney, Chairman
Senate Committee on
Health, Education & Social Services
Pouch V
State Capitol
Juneau, Alaska 99811

RE: Senate Bill #33
Hospital Inspections

Dear Senator Hackney:

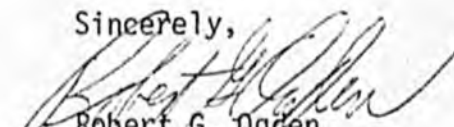
Thank you for the opportunity to express my opinion of Senate Bill #33. I strongly oppose the passage of Senate Bill #33 for the following reasons:

- 1) The bill is a duplication of existing federal regulations. Current federal regulations provide for the inspection of all Medicare and Medicaid patient medical records as well as health and safety inspections of all facilities which provide care to Medicare/Medicaid beneficiaries. Why is it necessary for the state to have duplicate regulations?
- 2) Medicare has been in existence since 1965 and Medicaid in Alaska since about 1971 or 1972. In that time surveyors have surely been able to determine that Medicare and Medicaid patients are treated equally or better than other hospital patients. The method of payment has nothing to do with the quality of care provided in health facilities. Methods of payment may vary the quantity of services provided and in this aspect, the Medicare/Medicaid patients are far ahead of the patient who pays his/her own hospital bill. In 1978 Medicare/Medicaid patients were 21.9% of Valley Hospital's patient census. The Dept. of Health, Education and Social Services, Section of Health Certification and Licensing currently has the authority to review any and all of these patients' medical records. This is an adequate sample of patient records and to require inspection of additional medical records is unnecessary, time consuming, costly to us all, threatens the privacy of medical matters, and does not improve in any way the quality of services provided to Medicare/Medicaid patients.
- 3) The Dept. of Health, Education and Social Services will impose the burden of acquiring consents for inspection of medical records on the hospital rather than acquire consent themselves. This added administrative burden will result in higher hospital costs for all patients with little if any effect on quality or quantity of care.

Thank you again for requesting my comments. In the future I will be happy to continue to respond to any hospital legislation which comes before you.

Attached is a copy of a very informative and clearly written letter I recently received from the Executive Director of the Alaska State Hospital Association. His comments as you can see, I support wholeheartedly. Thank you again.

Sincerely,



Robert G. Ogden
Administrator

RGO/krs

cc: Alaska State Hospital Association
Senator Frank Ferguson
Mike Coletta
Bettye Fahrenkamp
Arliss Sturgulewski

Kodiak Island Hospital

P.O. Box 1187
KODIAK, ALASKA 99615

OPERATED BY
LUTHERAN HOSPITALS AND HOMES SOCIETY
FARGO, NORTH DAKOTA 58102

Mr. Glenn Hackney,
State Senator,
Pouch V,
Juneau, Alaska 99811

Dear Senator Hackney,

RE: S.B. 33 HOSPITAL INSPECTION ACT

I would recommend that some change be made in Section 1 18,20.080 to indicate that advance notice be given to health care institutions before the arrival of Survey Teams from Medicare/Medicaid. In the past when we have not had advance notice it has been a great inconvenience to rearrange schedules and get requested records to the inspectors within a reasonable time after they arrive.

I protest the idea of the hospital being responsible for obtaining patient consent for review of their records by Medicaid/Medicare reviewers. I feel this should be a responsibility of the reviewer.

Sincerely,
Robert L. Groff
Robert L. Groff,
Administrator.



ALASKA STATE HOSPITAL ASSOCIATION INC.

5531 ARCTIC BLVD, SUITE 1
PHONE 277-1633

ANCHORAGE, ALASKA 99502
January 30, 1979

*Mary - please in each
a copy of members bill
present with SB-33.*

Senator Glenn Hackney, Chairman
Health, Education & Social Services Committee
Pouch V
Juneau, Alaska 99811

Re: S.B. 33 (Hospital Inspection Act)

Dear Senator Hackney:

The Alaska State Hospital Association recently received a copy of Senate Bill (SB 33) (An Act relating to the inspection of hospitals and their functions; and providing for an effective date.). After reviewing the bill, several concerns surfaced as to the intent and/or necessity of the bill.

1. Hospitals throughout Alaska and the nation are making a concerted effort to comply with the American Hospital Association's (Voluntary Effort) VE for Cost Containment guidelines. Existing regulations already subject hospitals and long term care facilities to many expensive and time consuming inspections annually. In studies in Michigan and South Carolina it has been confirmed that government regulations (state and federal) add \$21 to \$25 to every patient's bill. Most of the regulations being proposed under this proposed bill (18.20.080, 18.20.085) either duplicate or unnecessarily add to already existing regulations covered in Medicare and Medicaid regulations.

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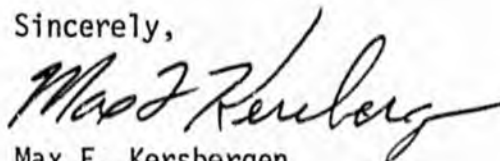
M. Kersbergen
to Senator Hackney
page 2; 1-30-79

Since most hospitals in Alaska have medicare/medicaid admissions in excess of 10% of their total admissions, it would seem that those charts should be an adequate sample of patients' records and that inspection of additional charts is totally unnecessary, time consuming and not in the best interest of cost containment or patient privacy. To my knowledge, there is no evidence to support any allegations that medicare/medicaid records differ in completeness or content from other admissions.

The Alaska State Hospital Association is hoping to have a bill introduced this year similar to the Texas law which requires surveys to exempt hospitals certified by the Joint Commission on Accreditation of Hospitals as deemed hospitals requiring surveyors to utilize the information obtained from the JCAH findings. In addition, the bill would require spacing of surveys to reduce the cost and disruption that is created by frequent surveys and some of the repetition in data gathering.

I trust this information will be helpful to your Committee as you consider this amendment, particularly its necessity and its intent.

Sincerely,



Max F. Kersbergen
Executive Director

MFK:cmb

cc: Alaska State Hospital Association Membership



ALASKA STATE HOSPITAL ASSOCIATION INC.

5531 ARCTIC BLVD, SUITE 1
PHONE 277-1633

ANCHORAGE, ALASKA 99502
December 1978

ALASKA HOSPITAL DIRECTORY

°Alaska Psychiatric Inscitute
2900 Providence Drive
Anchorage, Alaska 99504
Administrator: Roxolana Pomeroy
Phone: 277-6551

Alaska Hospital & Medical Center
2801 DeBarr Road (Pouch 8-AH)
Anchorage, Alaska 99508
Administrator: E. E. Webb
Assoc. Admin.: Charles Rigden
Phone: 276-1131

Bartlett Memorial Hospital
Mile 3 - Glacier Highway
P. O. Box 3-3000
Juneau, Alaska 99801
Administrator: James R. Burns
Phone: 586-2611

Central Peninsula General Hospital
Box 1268
Soldotna, Alaska 99669
Administrator: Simon B. Hancock
Phone: 262-4404

*Cordova Community Hospital
Box 160
Cordova, Alaska 99574
Administrator: Edward Hanssen
Phone: 424-7552

Fairbanks Memorial Hospital
1650 Cowles
Fairbanks, Alaska 99701
Administrator: Tom Mingen
Phone: 452-8181

Faith Hospital
Central Alaskan Missions, Inc.
Box 5
Glennallen, Alaska 99588
Administrator: James S. Pinneo, M.D.
Phone: 822-3203

*South Kenai Peninsula Hospital
P.O. Box 275
Homer, Alaska 99603
Administrator: Michael Herring
Phone: 235-8101

*Ketchikan General Hospital
3100 Tongass Avenue
Ketchikan, Alaska 99901
Administrator: Sister Barbara Haase
Phone: 225-5171

*Kodiak Island Hospital
Box 1187
Kodiak, Alaska 99615
Administrator: Robert L. Groff
Phone: 486-3281

*Norton Sound Regional Hospital
Box 966
Nome, Alaska 99762
Administrator: Bill Nettles
Phone: 443-5411

*Petersburg General Hospital
Box 589
Petersburg, Alaska 99830
Administrator: Florence M. LeRoy, R.N.
Phone: 772-4291

Providence Hospital
3200 Providence Drive
Anchorage, Alaska 99504
Administrator: Al Camosso
Phone: 276-4511

Seward General Hospital
Box 365
Seward, Alaska 99664
Administrator: C. Keith Campbell
Phone 224-5205

Sitka Community Hospital
Box 500
Sitka, Alaska 99835
Administrator: Alex McAllister
Phone: 747-3241

Valdez Community Hospital
P.O. Box 350
Valdez, Alaska 99686
Administrator: Val Stasch
Phone: 835-2249 or 835-2240

*Long-Term Care Beds

°Non-Member

*Valley Hospital
Box H
Palmer, Alaska 99645
Administrator: Robert Ogden
Phone: 745-4813

*Wrangell General Hospital
Box 80
Wrangell, Alaska 99929
Administrator: Emma G. Ivy, R.N.
Phone: 874-3356

NURSING HOMES (Type II)

*Careage House Health Care Center
2200 E. 42nd Avenue
P.O. Box 3-488
Anchorage, Alaska 99501
Administrator: Roy Dunn
Phone: 272-9483

*Careage North Health Care Center
1949 Gillam Way
P.O. Box 847
Fairbanks, Alaska 99701
Administrator: Donna Stephens, R.N.
Phone: 452-1923

*Nakuyia Health Care Center
4895 Cordova Street
Anchorage, Alaska 99503
Administrator: John Houser
Phone: 279-8414

*Harborview Developmental Center
P.O. Box 487
Valdez, Alaska 99686
Administrator: Leora R. Rutledge
Phone: 835-4344

*Hope Cottage
2805 Bering Street #2A
Anchorage, Alaska 99503
Director: Roger O. Weed
Phone: 278-9641

*St. Ann's Nursing Home
416 Sixth Street
Juneau, Alaska 99801
Administrator: Jack Buck
Phone: 586-3883

*Wesleyan Nursing Home
Box 456
Seward, Alaska 99664
Administrator: Mildred L. Pelch, R.N.
Phone: 224-5241

*Long-Term Care Beds

U. S. PUBLIC HEALTH SERVICE (Type I)

Alaska Native Medical Center
P.O. Box 7-741
Anchorage, Alaska 99510
Service Unit Director: John Muth, M.D.
Hospital Admin. Officer: Kenneth W. Isaak
Phone: 279-6661 or 265-3250

Alaska Native Hospital
Bethel, Alaska 99559
Service Unit Director: L.H. Shimanek
Phone: 543-2251

*Alaska Native Hospital
Barrow, Alaska 99723
Service Unit Director: Jim Hughes
Phone: 852-4611

*Alaska Native Hospital; Kanakanak
Dillingham, Alaska 99576
Service Unit Director: Lloyd N. Hermansen
Phone: 842-3291

*Alaska Native Hospital
Kotzebue, Alaska 99741
Service Unit Director: Joe Ryan
Phone: 442-3251

Alaska Native Hospital
Box 577
Mt. Edgecumbe, Alaska 99835
Service Unit Director: Arthur C. Willman
Administrator Officer: Hugh Mcffatt
Phone 966-8333

*Alaska Native Hospital
Tanana, Alaska 99777
Hospital Admin. Officer: Eric Deeter
Phone: 366-7601
Service Unit Director: Tom Hardwick

528 5th Ave. Suite 210
Fairbanks, Alaska 99701
Phone: 452-1905

Also send mailings to:

James M. Armbrust, Chief, A-CHC
Alaska Area Native Health Service
P. O. Box 7-741
Anchorage, Alaska 99510
Phone: 279-6661

Marvin Trepus, President
Health Care Services, Inc.
P. O. Box 1210
Green Valley, Arizona 85614
Phone: (602) 625-4400

* Non-Member

INSTITUTIONAL MEMBERS
(Other than Type I & II)

Alaska Treatment Center
3710 East 20th Street
Anchorage, Alaska 99504 III
Director: Robert Mullen

Blue Cross of Washington/Alaska, Inc.
15700 Dayton Avenue
P. O. Box 327
Seattle, Washington 98111 IV
Phone: (206) 361-3000

Municipality Health Department
825 "L" Street
Anchorage, Alaska 99501
Director: Robert "Bert" Hall
Phone: 264-4621

FOR

Anchorage Home Health Agency
825 "L" Street
Anchorage, Alaska 99501 V
Supervisor: Maria Connors
Phone: 264-4111

MILITARY (Type I)

°Bassett Army Hospital
Fort Wainwright, Alaska 99703
Commanding Officer: Col. F. Feltus
Exec. Officer (Admin.): Col. T. Pittman
Phone: 352-3172

USAF Hospital - Elmendorf
Elmendorf, Alaska 99506
Hospital Administrator: Col. C. Freistedt
Phone: 752-3500 or 752-4033

°USAF Clinic, Eielson
Eielson AFB, Alaska 99702
Hospital Commander: Lt. Col. R. Hathaway
Phone: 372-1157 or 372-2215

°Station Dispensary Adak
Naval Station, Box 11 *Inter-Alaska
FPO Seattle, Washington 98791
Hospital Admin: Lt. Comm. Mann
Phone: 579-8425

°Station Dispensary - Coast Guard Base; Kodiak
Box 2
Kodiak, Alaska 99615
Flight Surgeon:
Phone: 487-5235

ALASKA PIONEER HOMES

°Pioneer Home
923 West 11th Street
Anchorage, Alaska 99501
Administrator: B. L. McMurtrey
Phone: 276-3413

°Pioneer Home
Box 198
Sitka, Alaska 99835
Administrator: Roberley R. Potter
Phone: 747-8250

°Pioneer Home
Airport Way
Fairbanks, Alaska 99701
Administrator: Stella Muckenthaler, R.N.
Phone: 456-4372

°Pioneer Home
P. O. Box 760
Palmer, Alaska 99645
Administrator: Arleen Goodman
Phone: 745-4241

°Non-Member

Ketchikan General Hospital

3100 TONGASS AVE.
KETCHIKAN, ALASKA 99901
907 - 225-5171

February 13, 1979

The Honorable Bettye Fahrenkamp
Alaska State Senator
Pouch "V"
Juneau, Alaska 99811

Dear Senator Fehrenkamp:

In answer to your request of February 2, 1979, regarding Senate Bill 33, I am enclosing a copy of a letter which the Executive Director of our Hospital Association wrote to Senator Glenn Hackney on January 30, 1979. This will state some of the concerns of the Hospital Association in general. It also highlights our concern for cost containment in as much as it is possible for hospitals to contain costs.

In regard to Ketchikan General Hospital and our specific response to the legislation, I would like to offer the following comments:

1. We undergo continuing surveys from all of the various agencies which is getting close to the point of being actual harrassment. Medicare and Medicaid plus the state licensing in this state are very thorough in their inspections. The last licensing survey was conducted by two people and lasted three days in our facility. I might add that during that time both myself and my staff were totally tied up with these activities. We feel these inspections could be carried on in a much better way which would insure the proper delivery of care to Alaskans.
2. I believe other states have passed legislation in which the inspectors, regardless of which agency they represent, must review documentation from the latest survey to be held in the facility to see if there is any need for a check-up and an abbreviated survey would be more cost effective.
3. I do take exception to Section 3. AS 18.20.085(b). The size of medical records in our facility has doubled and at this point is getting close to having been tripled in the last five years because of the requirements of federal and state agencies. I might add that the labor costs of handling that extra paper and producing that extra paper as well as documenting and monitoring are becoming prohibitive both in cost and in frustration levels. Each health facility fully realizes the importance of a medical record to a patient's continuing care. We must be able to retrieve, as soon as possible, the patient's past history to know whether the pain in the side is actually a possible appendicitis or whether the appendix was removed in earlier surgery. The importance of those records goes on and on from allergic reaction to various drugs and to basic health defects in the person's past. Trying to get one more piece of paper signed by a patient to release his record to be seen by a surveyor is incomprehensible to me. I have been deeply concerned about those records, especially in the way that certain surveyors from various agencies conduct themselves when in the department surveying them.

KCH

Senator Bettye Fahrenkamp
Senate Bill 33

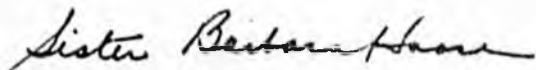
We are also a JCAH accredited hospital at this time and will be surveyed again this summer, which will be an extensive survey of three days in length of three surveyors - an administrator, a physician, and a nurse. We comply with their standards voluntarily and try our best to meet what we feel is cost effective and for the betterment of care of the Alaskans in our community.

I am deeply concerned, in general, with the way the federal government and state levels are continually creating new departments to monitor new things. We are spending so much time complying with the regulations of these monitoring agencies that I fear the patient is the one who is suffering because of the time involved with professional staff working on documentation which often times is confusing and contradictory. We are doing our utmost as a member of the Alaska State Hospital Association and as a responsible health care institution to contain our costs and still provide high quality care for our patients. We are also continuing, as most Alaska hospitals are, to develop needed diagnostic services in our communities which are much more cost effective here in Alaska than they would be by traveling outside.

I would like to add one final note in that I think that inspections by state agencies should be announced inspections and giving at least ten days notice to the facility. In small general hospitals in Alaska, there are not that many levels of management to conduct the surveyors properly through the facility and answer their questions. Staff are also out of town with shared services at other facilities as well as on vacation and days off. It is very costly when they have to be called back in on time and one-half to answer questions of the surveyor.

If I can be of any further help, please feel free to contact me.

Sincerely,



Sister Barbara Haase
Administrator

SBH:ek

Enclosure

cc: Max Kersbergen, Executive Director
Alaska Hospital Association

Fairbanks Memorial Hospital

1650 Cowles St.

FAIRBANKS, ALASKA 99701

OPERATED BY
LUTHERAN HOSPITALS AND HOMES SOCIETY
FARGO, NORTH DAKOTA 58102

January 26, 1979

Fairbanks Memorial Hospital's Position on Senate Bill No. 33 - An Act Relating to the Inspection of Hospitals and their Function

Section 18.20.080

Fairbanks Memorial Hospital is very much against the Department of Health and Social Services making unannounced visitations to hospitals. As we read this section of the proposed regulations, Department of Health and Social Services would have the ability to make inspections at any time they deemed necessary. The hospital's position is that we have no problem with any inspection and/or visitation if the following area included in the inspection:

1. Advance notice that an inspector will be there so that the administrator might be on the premises. In small hospitals throughout the state this has been a problem with the State Department of Health and Social Services going in to a facility while the administrator is out of town ordering their staff to do certain things. This seems totally unreasonable and does not accomplish any purpose.
2. That a complaint or reason for an investigation be given to the hospital administrator in writing before the survey is conducted. This will give the hospital the ability to look into the problem and have the information available during the survey that would be required by the inspector. It will also give the hospital the ability to respond to the surveyor about certain problems so that in certain instances surveys would not be necessary. The State Department of Health and Social Services for some time has attempted to conduct unannounced surveys throughout the state. This has not only created hard feelings and animosity between the hospitals and the surveyors involved, but has not served any purpose that the hospitals have been aware of. The feeling of the hospital is that if something is endangering the patients' health in a facility, the state should have the opportunity to inspect a facility and to make recommendations for corrections. We still believe that this can be done on an announced basis. It should be noted that if this is to occur, I believe the current staff of the Department of Health and Social Services inspecting

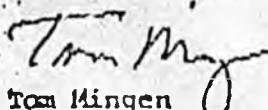
teams have to be increased in order to provide these additional inspections. This hospital was relicensed in December of 1978 for a six-month period through June 1979. It should be noted that there was no inspection before the license was granted. If regular inspections cannot be conducted, how would one expect that additional inspections could be carried out?

Section 2 AS 18.20.004

The hospital is very much against this change in this section under Senate Bill 33 due to the reasons listed below:

1. This would put the burden on the hospital in order to get this release form signed by each patient so that the Department of Health and Social Services could review these records.
2. We believe that the Medicaid/Medicare patients that are seen in Fairbanks Memorial Hospital are representative of the total number of patients. Therefore, it seems somewhat inconsistent that additional patients or records be utilized for surveys.
3. This would put additional costs on each hospital in getting the form signed and keeping the forms on file. We feel that this cost is very prohibitive in these days of increasing costs.
4. This hospital runs approximately 10% Medicare patients. If this is not representative of the total number of patients admitted, how many records would be required to be representative?
5. If the Department of Health and Social Services feels that they should look at additional records, it should be up to the Department of Health and Social Services to get the authorization signed rather than having the hospital responsible for such.
6. Each patient that is seen at Fairbanks Memorial Hospital is offered the opportunity of signing an information release form. This is used for each patient's insurance company. An additional form would have to be promulgated for the Department of Health and Social Services on each patient that is not covered by Medicare or Medicaid. Last year Fairbanks Memorial Hospital had approximately 7,000 admissions and 23,000 out-patient visits. This would put an extensive load of work on the hospital for the convenience of the Department of Health and Social Services.
7. The change in AS 18.20.005 reads that "hospitals would offer patients release forms for their consent to the inspection of their records". This would mean that additional steps

would have to be taken by the hospital to keep the records separated between the ones that had consented and the ones that had not consented.



Tom Mingen
Administrator
Faribanks Memorial Hospital

THE ALASKA HOSPITAL AND MEDICAL CENTER, Inc.



February 12, 1979

Senator Bettye Fahrenkamp
Alaska State Senate
Pouch V
Juneau, Alaska 99811

Dear Senator Fahrenkamp:

This is in response to your letter of February 2, 1979 in which you ask for my comments on Senate Bill 33.

I do not feel that the changes and provisions of Senate Bill 33 would serve any useful purpose and would only tend to escalate costs of hospital operation and services. I am attaching a copy of a letter from Mr. Max Kersbergen, Executive Director of the Alaska State Hospital Association, to Senator Glenn Hackney in regard to Senate Bill 33.

I concur fully with Mr. Kersbergen's statements and position.

Sincerely,

A handwritten signature in cursive script that reads "Ernest E. Webb".

Ernest E. Webb
Administrator

EEW:dr1

Enclosure

cc: Max Kersbergen

VALLEY HOSPITAL ASSOCIATION, INC.

BOX H, PALMER, ALASKA 99645

- Senator Bettye Farhenkamp
Pouch V
Juneau, Alaska 99811

February 13, 1979

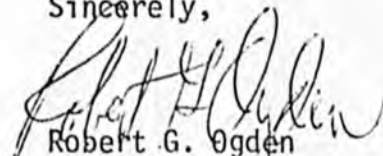
Dear Senator Fahrenkamp:

Thank you for your letter requesting my opinion of Senate Bill #33. As you can see from my letter recently transmitted to Senator Hackney, Valley Hospital opposes Senate Bill #33.

I appreciate very much your interest in our opinion and will be happy to continue to respond as other hospital legislation comes before you.

Thank you again.

Sincerely,



Robert G. Ogden
Administrator

RG0/krs

VALLEY HOSPITAL

BOX H · PALMER, ALASKA 99645 · (907) 745-4813

February 13, 1979

Senator Glenn Hackney, Chairman
Senate Committee on
Health, Education & Social Services
Pouch V
State Capitol
Juneau, Alaska 99811

RE: Senate Bill #33
Hospital Inspections

Dear Senator Hackney:

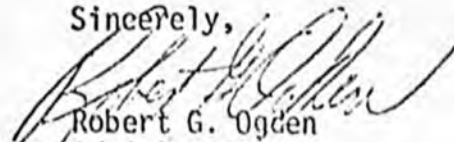
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- 1) The bill is a duplication of existing federal regulations. Current federal regulations provide for the inspection of all Medicare and Medicaid patient medical records as well as health and safety inspections of all facilities which provide care to Medicare/Medicaid beneficiaries. Why is it necessary for the state to have duplicate regulations?
- 2) Medicare has been in existence since 1965 and Medicaid in Alaska since about 1971 or 1972. In that time surveyors have surely been able to determine that Medicare and Medicaid patients are treated equally or better than other hospital patients. The method of payment has nothing to do with the quality of care provided in health facilities. Methods of payment may vary the quantity of services provided and in this aspect, the Medicare/Medicaid patients are far ahead of the patient who pays his/her own hospital bill. In 1978 Medicare/Medicaid patients were 21.9% of Valley Hospital's patient census. The Dept. of Health, Education and Social Services, Section of Health Certification and Licensing currently has the authority to review any and all of these patients' medical records. This is an adequate sample of patient records and to require inspection of additional medical records is unnecessary, time consuming, costly to us all, threatens the privacy of medical matters, and does not improve in any way the quality of services provided to Medicare/Medicaid patients.
- 3) The Dept. of Health, Education and Social Services will impose the burden of acquiring consents for inspection of medical records on the hospital rather than acquire consent themselves. This added administrative burden will result in higher hospital costs for all patients with little if any effect on quality or quantity of care.

Thank you again for requesting my comments. In the future I will be happy to continue to respond to any hospital legislation which comes before you.

Attached is a copy of a very informative and clearly written letter I recently received from the Executive Director of the Alaska State Hospital Association. His comments as you can see, I support wholeheartedly. Thank you again.

Sincerely,



Robert G. Ogden
Administrator

RG0/krs

cc: Alaska State Hospital Association
Senator Frank Ferguson
Mike Coletta
Bettye Fahrenkamp



Senator Glenn Hackney, Chairman
Health, Education & Social Services Committee
Pouch V
Juneau, Alaska 99811

Re: S.B. 33 (Hospital Inspection Act)

Dear Senator Hackney:

The Alaska State Hospital Association recently received a copy of Senate Bill (SB 33) (An Act relating to the inspection of hospitals and their functions; and providing for an effective date.). After reviewing the bill, several concerns surfaced as to the intent and/or necessity of the bill.

1. Hospitals throughout Alaska and the nation are making a concerted effort to comply with the American Hospital Association's (Voluntary Effort) VE for Cost Containment guidelines. Existing regulations already subject hospitals and long term care facilities to many expensive and time consuming inspections annually. In studies in Michigan and South Carolina it has been confirmed that government regulations (state and federal) add \$21 to \$25 to every patient's bill. Most of the regulations being proposed under this proposed bill (18.20.080, 18.20.085) either duplicate or unnecessarily add to already existing regulations covered in Medicare and Medicaid regulations.

2. If you should go further and implement these regulations we would like to point out that Section 1 18.20.080 does not include a requirement for a pre-notification of intent to survey nor a statement of the purpose for the survey. ASHA recommends that a reasonable advanced notice be required on the part of the surveyor and that the purpose of the visit be clearly stated to allow the institution time to prepare for the visit. Through this communication staff disruptions can be reduced and the surveyors time will be more efficiently utilized.

3. Section 3 18.20.085(a) is similar to existing practices of our membership and in fact is written in the federal guidelines under Medicare (Section 405.1026 page 8044 - sub-section f and g) and clearly indicates what is considered a completed medical record. This appears to be a clear duplication and not necessary.

4. Section 3 18.20.085(b) amended section (a) lines 8 - 11, proposes that written consent be obtained by hospitals for medical record inspection authorizations from patients who have not already signed consent forms for release of information. Should such regulations be initiated, the burden of labor and expense in obtaining those releases should not rest with the hospitals, but should rest with the state. As written, the regulations would necessitate additional staffing and expense in restructuring a new medical records filing system which seems totally inappropriate.

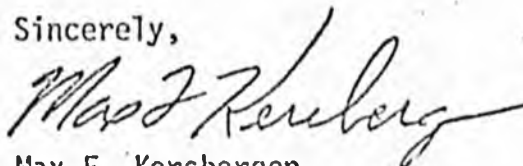
M. Kersbergen
to Senator Hackney
page 2; 1-30-79

Since most hospitals in Alaska have medicare/medicaid admissions in excess of 10% of their total admissions, it would seem that those charts should be an adequate sample of patients' records and that inspection of additional charts is totally unnecessary, time consuming and not in the best interest of cost containment or patient privacy. To my knowledge, there is no evidence to support any allegations that medicare/medicaid records differ in completeness or content from other admissions.

The Alaska State Hospital Association is hoping to have a bill introduced this year similar to the Texas law which requires surveys to exempt hospitals certified by the Joint Commission on Accreditation of Hospitals as deemed hospitals requiring surveyors to utilize the information obtained from the JCAH findings. In addition, the bill would require spacing of surveys to reduce the cost and disruption that is created by frequent surveys and some of the repetition in data gathering.

I trust this information will be helpful to your Committee as you consider this amendment, particularly its necessity and its intent.

Sincerely,



Max F. Kersbergen
Executive Director

MFK:cmb

cc: Alaska State Hospital Association Membership



Senior & This is copy of [unclear] every hospital in Alaska.
Alaska State Legislature

Senate

Committee on

Health, Education & Social Services

Pouch V
State Capitol
Juneau, Alaska 99811

Official Business

Glenn Hackney, Chairman
Frank Ferguson, Vice Chairman
Mike Colletta
Bettye Fahrenkamp
Arliss Sturgulewski

February 9, 1979

Robert Ogden
Administrator
Valley Hospital
P.O. Box H
Palmer, Alaska 99645

Re: Senate Bill 33

Dear Mr. Ogden,

We have in our committee SB 33, An Act relating to the inspection of hospitals and their functions; and providing for an effective date.

Enclosed is a copy of the bill, along with the Department of Health and Social Services' Position Paper and fiscal note.

Please review this bill as to any effects the legislation may have on your institution, pro or con, as I will certainly appreciate receiving your comments.

Sincerely,

Glenn Hackney
Glenn Hackney
State Senator

Enclosures: SB 33
H&SS Position Paper
& Fiscal Note

*This bill will be before Committee Friday Feb 23rd @ 3:30 p.m.
in Room 206 Capitol Bldg.*

ADDRESS

ATTN. ADMINISTRATOR'S NAME

Re: SB #33

We have on our Committee SB 33 relating to the inspection of hospitals and their functions.

Enclosed is copy of the bill along with Dept of Health & Social Services' Position Paper and fiscal note.

Please review and if you have any comments pro or con as to effects, if any, the legislation may have on your institution, I will certainly appreciate receiving your comments.

With kindest regards,

OK let's send out right away. Federally funded Hospitals, of course, aren't affected so don't send them a copy.

B

1-20-79

Glenn

I drafted letter.
Also obtained list
of all hospitals in Ak.
with addresses & names
of administrators.

M.

2:30 P.M.

1-26-79

Glenn:

Chris Beardsley, D.W.
Prominence Hosp (Anch.)
Re: A.B. 33 - And spoke with
Callotta earlier today as to
some input we needed if
you please!! Called Callotta
Office but he said he would be
there she thought but late.
Mr Beardsley would like you
to call him. 276-4511-446, 1145

M.

Mary

Assembly Apts -

105-

ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES
HEALTH FACILITIES CERTIFICATION AND LICENSING
POUCH H-06G, JUNEAU, ALASKA 99811

(Listing of Certified Health Facilities)

Provider #	Beds #	Hospital	Administrator	Address	City	Zip	Phone
* 02-0017	154	The Alaska Hospital and Medical Center, Inc. ✓	Ernest Webb	2801 DeBar, Road, Pouch 8-AH	Anchorage	99508	276-1131
* 02-4000	200	Alaska Psychiatric Institute ✓	Roxolana Pomeroy	2900 Providence Avenue	Anchorage	99504	277-6551
02-0008	67	Bartlett Memorial Hospital ✓	James Burns	P.O. Box 3-3000	Juneau	99802	586-2611
02-0024	30	Central Peninsula General Hospital ✓	Simon Hancock	P.O. Box 1268	Soldotna	99669	262-4404
02-0010	12	Cordova Community Hospital ✓	Tom Van Brocklin, Acting	P.O. Box 160	Cordova	99574	424-7552
* 02-0012	155	Fairbanks Memorial Hospital ✓	Tom Mingen	1650 Cowles Street	Fairbanks	99701	452-8181
02-0016	5	Faith Hospital ✓	James Pinneo, M.D.	P.O. Box 5	Glennallen	99588	822-3203
* 02-0004	44	Ketchikan General Hospital ✓	Sister Barbara Haase	3100 Tongass Avenue	Ketchikan	99901	225-5171
02-0013	44	Kodiak Island Hospital ✓	Robert L. Groff	P.O. Box 1187	Kodiak	99615	486-3281
02-0005	13	Norton Sound Regional Hospital ✓	William Nettles	P.O. Box 966	Nome	99762	443-5411
02-0009	13	Petersburg General Hospital ✓	Florence M. LeRoy, R.N.	P.O. Box 589	Petersburg	99833	772-4291
* 02-0001	250	Providence Hospital ✓	Al M. Camosso	3200 Providence Drive-Pouch 6604	Anchorage	99502	276-4511
02-0011	29	Seward General Hospital ✓	C. Keith Campbell	P.O. Box 365	Seward	99664	224-5205
02-0002	24	Sitka Community Hospital ✓	Alex S. McAllister	P.O. Box 500	Sitka	99835	747-3241
02-0014	13	South Peninsula Hospital ✓	Michael Herring	P.O. Box 275	Homer	99603	235-8101
02-0025	15	Valdez Community Hospital ✓	Valda B. Stasch	P.O. Box 550	Valdez	99686	835-2249
02-0006	17	Valley Hospital	Robert Ogden	P.O. Box H	Palmer	99645	745-4813
02-0007	9	Wrangell General Hospital and Long Term Care Facility	Emma Ivy, R.N.	P.O. Box 80	Wrangell	99929	874-3356
		<u>PHS-ANH</u>	<u>Service Unit Director</u>				
* 02-0026	170	PHS-ANH Alaska Native Medical Center	Ward Hurlburt, M.D.	Box 7-741	Anchorage	99510	279-6661
* 02-0019	10	PHS-ANH Barrow	T. C. Smith, Acting SUD		Barrow	99723	852-4611
* 02-0018	42	PHS-ANH Bethel	Vern Shimanek		Bethel	99559	543-2251
* 02-0021	29	PHS-ANH Kakanak	Lloyd Hermansen		Dillingham	99576	842-5201
* 02-0020	40	PHS-ANH Kotzebue	Joseph R. Ryan		Kotzebue	99752	442-3321
* 02-0027	82	PHS-ANH Mt. Edgecumbe	Arthur C. Willman		Mt. Edgecumbe	99835	966-2202
* 02-0023	20	PHS-ANH Tanana	Merlin Day, Acting Hosp. Administrative Officer		Tanana	99777	366-7601

*JCAH Accredited

Revised 10/78

POSITION PAPER

SENATE BILL NO. 33

"An Act relating to the inspection of hospitals and their functions; and providing for an effective date."

The Department of Health and Social Services supports Senate Bill No. 33. Recent Alaska Court decisions have found warrantless administrative searches to be unconstitutional in some regulated industries and that hospital licensing surveyors may not spot-check patient records without written consent from the patient. These spot-checks were conducted only for the purpose of determining compliance with record keeping regulations.

In light of these recent court decisions it is necessary to amend AS 18.20.080 to provide for a comprehensive structure of statutes and hence Departmental regulations which set out specific inspection procedures. These new regulations will define inspection procedures so that licensees are put on notice as to what is expected of them and what limitations are imposed on the inspectors.

If the proposed amendments are enacted, the Department is prepared to implement them as soon as possible by regulation, so that the inspection of all regulated functions can continue, limited only by the consent requirement for checking patients' records.

Recommended by:

Richard King

1/25/79
Date

Coordinator
Office of State Health Planning and
Development

Approved by:

Helen D. Beirne

1/25/79
Date

Helen D. Beirne
Commissioner
Dept. of Health and Social Services

THE LEGISLATURE OF THE STATE OF ALASKA
ELEVENTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Senate Bill No. 33
 Title An Act relating to the inspection of hospitals and their functions
 Requested by the Rules Committee and by the Governor Date January 16, 1979

II. FISCAL DETAIL

Agency Affected Health and Social Services
 Program Category Affected Health
 BRU, Program, or Subprogram(s) Affected Health Certification and Licensing
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 79	FY 80	FY 81	FY 82	FY 83	FY 84
100 PERSONAL SERVICES	0					
200 TRAVEL	1.1					
300 CONTRACTUAL	1.7					
400 COMMODITIES	0					
500 EQUIPMENT	0					
600 LAND & STRUCTURES	0					
700 GRANTS, CLAIMS, ETC.	0					
TOTAL	2.8	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

GENERAL FUND	2.8					
FEDERAL FUNDS	0					
OTHER (Specify Fund Source)	0					

POSITIONS

FULL TIME	0					
PART TIME	0					
TEMPORARY	0					

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

All assumed costs for the travel and contractual lines are based on current information relative to airfare rates, advertising order rates, room rental and anticipated telephone charges.

The proposed regulation amendments will require public hearings before final adoption by the department. Costs associated with these hearings include the advertising of the regulations in state newspapers and legal transcription services at the public hearings. The travel amount requested is for representatives of the Departments of Law and Health and Social Services to travel to Anchorage for the public hearings and to meet with Alaska Hospital Association members concerning the prepared regulations.

These costs are a one time expenditure.

IV. DATE January 24, 1979 PREPARED BY Richard Renninger
 AGENCY Health and Social Services
 PHONE 465-3037
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)

S B

3 4

5. HESS A-98
AB 34 "An Act Relating to Placement of
Children in State Custody"

28

Introduced 1-16-79

Logged 1-16-79

Referrals - NONE

Committee Meeting 1-17-79

" action - held in abeyance

Db 34

V

January 15, 1979

President of the Senate
Alaska State Legislature
Juneau, Alaska 99811

Dear Mr. President:

Under the authority of art. III, sec. 18 of the Alaska Constitution, I am transmitting a bill relating to the placement of children in state custody.

The bill would exempt delinquent children from a provision which requires that, in the absence of a showing supported by clear and convincing evidence that harm to the child will result, all children in the custody of the Department of Health and Social Services be turned over to blood relatives upon demand. The department believes that this provision overlooks the potential dangers to society presented by delinquent children as well as their frequent need for a program of rehabilitation. In addition, I believe that it was not the legislative intent, in enacting sec. 37, ch. 126 SLA 1977 (which added (e) to AS 47.10.230), to prevent placement of delinquent children in an institution. The bill would thus limit the mandate contained in AS 47.10.230(e) to children who have been placed in state custody after an adjudication that they are children in need of aid.

Sincerely,

S/SSH

Jay S. Hammond
Governor

ALASKA STATE LEGISLATURE

ELEVENTH Legislature FIRST... Session

SENATE ... BILL NO. ...34...

By ... THE RULES COMMITTEE BY REQUEST OF THE GOVERNOR

"An Act relating to the placement of children in state custody."

placement of children

Introduced in the Senate ... 1/16/... 19... 79

HISTORY IN THE SENATE

19 79

1 16

Read first time and referred to Committee on Health, Education & Social Services
Reported back with recommendation that

Read second time and

Read third time and

PASS		Effective Date
Yeas		Yeas
Nays		Nays
Absent		Absent
Excused		Excused

Reconsideration

PASS		Effective Date
Yeas		Yeas
Nays		Nays
Absent		Absent
Excused		Excused

Reported correctly engrossed
Signed by President
Sent to House

SECRETARY OF THE SENATE

HISTORY IN THE HOUSE

19

Read first time and referred to Committee on

Reported back with recommendation that

Read second time and

Read third time and

PASS		Effective Date
Yeas		Yeas
Nays		Nays
Absent		Absent
Excused		Excused

Reconsideration

PASS		Effective Date
Yeas		Yeas
Nays		Nays
Absent		Absent
Excused		Excused

Reported correctly engrossed
Signed by Speaker
Returned to Senate

CHIEF CLERK OF THE HOUSE

HISTORY IN THE SENATE

19

Received from House

To enrolling

Reported correctly enrolled

Sent to Governor

..... by Governor

Filed with Lt. Governor

Chapter No.

Article 2. Juvenile Institutions.

Section

150. General powers of department over juvenile institutions

Sec. 47.10.150. General powers of department over juvenile institutions. The Department of Health and Social Services may

(1) purchase, lease or construct buildings or other facilities for the care, detention, rehabilitation and education of children in need of aid or delinquent minors;
(am § 25 ch 63 SLA 1977)

Effect of amendments. As the rest of the section was not affected by the amendment, it is not set out.
The 1977 amendment substituted "children in need of aid" for "dependent" in paragraph (1).

Article 3. Care of Children.

Section

230. Powers and duties of department over care of child

Supplement

Sec. 47.10.230. Powers and duties of department over care of child.

(a) Subject to (e) and (f) of this section, the Department of Health and Social Services shall arrange for the care of every child committed to its custody by placing him in a foster home or in the care of an agency or institution providing care for children inside or outside the state. The department may place a child in a suitable family home, with or without compensation, and may place a child released to it, in writing verified by the parent, or guardian or other person having legal custody, for adoptive purposes, in a home for adoption in accordance with existing law.

(d) In addition to funds paid for the maintenance of foster children under (b) of this section, the department shall pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment, services and equipment, special clothing, and the indirect costs of medical care, including child care, transportation expenses, and respite care. In this subsection "respite care" means child care not to exceed 12 hours in any 30-day period; it also means child care for a period not to exceed seven days in a year for the purpose of providing emergency protection for the child when the foster parent is away from the home because of an emergency and no other care is available for the child or when the foster parent is on vacation and the child, because of age or infirmity, cannot be placed in any other type of temporary care facility.

(e) A child may not be placed in a foster home or in the care of an agency or institution providing care for children if a blood relative exists who requests custody of the child. However, the department may retain custody of the child and provide for its placement in the same manner as for other children if it makes a determination, supported by clear and convincing evidence, that the custody of the child by the blood relative will result in physical or emotional damage. In making that determination, poverty, including inadequate or crowded housing, on the part of the blood relative, is not considered prima facie evidence that physical or emotional damage to the child will occur. This determination may be appealed to the superior court to hear the matter de novo.

(f) If a blood relative of the child specified under (e) of this section exists and agrees that the child should be placed elsewhere, before placement elsewhere the department shall fully communicate the nature of the placement proceedings to the relative. Communication under this section shall be made in the relative's native language, if necessary. Nothing in this section or in (e) of this section applies to child placement for adoptive purposes.

(am § 1 ch 76 SLA 1976; am §§ 36, 37 ch 126 SLA 1977)

Effect of amendments.

The 1976 amendment added subsection (d).

The 1977 amendment added "Subject to (e) and (f) of this section" to the beginning of subsection (a) and added subsections (e) and (f).

As the rest of the section was not affected by the amendments, it is not set out.

Editor's note. — Section 1, ch. 126, SLA 1977, effective July 1, 1977, provides: "PURPOSE. Common law and statutory procedures governing the remedies for enforcement of support for financially dependent minor children by responsible parents have not proven sufficiently effective or efficient to cope with the increasing incidence of financial dependency. The increasing workload of courts, district attorneys, and the attorney general has made such remedies uncertain, slow and inadequate, thereby resulting in a growing burden on the financial resources of the state, which is required to provide public assistance grants for basic maintenance requirements when parents

fail to meet their primary obligations. The state, therefore, exercising its police and sovereign power, declares that the common law and Alaska statutes pertaining to the establishment and enforcement of child support obligations shall be augmented by additional remedies in order to meet the needs of minor children. It is declared to be the public policy of this state that this Act be construed and administered to the end that children shall be maintained from the resources of responsible parents, thereby relieving, at least in part, the burden presently borne by the general citizenry through welfare and welfare-related programs.

Section 35, ch. 126, SLA 1977, provides: "INTENT. It is the intent of secs. 36 and 37 of this Act to provide for placement of children in surroundings which are socially and culturally desirable and with persons who are able to meet their special needs. Placement of children with blood relatives will work to prevent loss of identity and self-esteem, and provide for increased family and cultural stability, security and solidarity."

regulations which the department considers proper, if it appears to the satisfaction of the department that there is a reasonable probability that the juvenile will remain at liberty without violating the law. (§ 10 art II ch 145 SLA 1957)

Sec. 47.10.210. Youth counsellors. The department may employ youth counsellors. Youth counsellors shall exercise the duties of probation officers and shall prepare preliminary investigations for the information of the court. They shall also carry out other duties in the care and treatment of minors which are consistent with the intent of this chapter. Youth counsellors have the powers of a peace officer with respect to the service of process, the making of arrests of minors who violate state or municipal law, and the execution of orders of the court relating to juveniles. The youth counsellors shall assist and advise the courts in the furtherance of the welfare and control of minors under the court's jurisdiction. (§ 11 art II ch 145 SLA 1957)

Sec. 47.10.220. Grants-in-aid. The Department of Health and Social Services may accept grants-in-aid from the federal government or private foundations and may accept other gifts consistent with the purposes of this chapter. (§ 13 art II ch 145 SLA 1957; am § 6 ch 104 SLA 1971)

Effect of amendment. — The 1971 "Health and Social Services" for amendment substituted "Department of Health and Welfare." "Department of Health and Welfare."

Article 3. Care of Children.

Section	Section
230. Powers and duties of department over care of child	250. Standards of care
240. Adequacy of home or institution	260. Payment of costs

Sec. 47.10.230. Powers and duties of department over care of child.
(a) The Department of Health and Social Services shall arrange for the care of every child committed to its custody by placing him in a foster home or in the care of an agency or institution providing care for children inside or outside the state. The department may place a child in a suitable family home, with or without compensation, and may place a child released to it, in writing verified by the parent, or guardian or other person having legal custody, for adoptive purposes, in a home for adoption in accordance with existing law.

(b) The department may pay the costs of maintenance which are necessary to assure adequate care of the child, and may accept funds from the federal government which are granted to assist in carrying out the purposes of this chapter, or which are paid under contract entered into with a federal department or agency. No child under the care of the department may be placed in a family home or institution that does not maintain adequate standards of care.

(c) The department may receive, care for, and make appropriate placement of minors accepted for care for a period of up to six months on the basis of an individual voluntary written agreement between the minor's parent, legal guardian, or other person having legal custody and the department. The agreement may include provisions for payment, in whole or in part, to the department for the minor's care and treatment. The agreement entered into shall not operate to prohibit a minor's parent, legal guardian, or other person who had legal custody from regaining care of the minor at any time. (§ 1 art III ch 145 SLA 1957; am § 5 ch 100 SLA 1971; am § 6 ch 104 SLA 1971)

Effect of amendments. — The first 1971 amendment added subsection (c).

The second 1971 amendment substituted "Department of Health and Social

Services" for "Department of Health and Welfare" in the first sentence of subsection (a).

Sec. 47.10.240. Adequacy of home or institution. (a) A representative of the department shall visit, as often as is considered necessary, every foster home or institution in which a child is placed, and if not satisfied as to the care given, may remove the child from the foster home or institution and place him elsewhere.

(b) The person or institution receiving a child shall submit the reports the department requires as to the education, health and welfare of the child and the conditions under which he is living. (§ 2 art III ch 145 SLA 1957)

Sec. 47.10.250. Standards of care. The Department of Health and Social Services shall establish standards of care and regulations desirable for the welfare of every child under its care. (§ 3 art III ch 145 SLA 1957; am § 6 ch 104 SLA 1971)

Cross references.—As to the general powers of the department over juvenile institutions, see AS 47.10.150. As to the operation of juvenile detention homes and facilities, see AS 47.10.180.

Effect of amendment. — The 1971 amendment substituted "Department of Health and Social Services" for "Department of Health and Welfare."

Standards and formal conditions for use of adjustment rooms in juvenile detention homes. — See *T.M. v. Director of McLaughlin Youth Center*, Superior Court, No. 72-449 (1973).

Department ordered to promulgate standards for operation of juvenile detention homes. — See *T.M. v. Director of McLaughlin Youth Center*, Superior Court, No. 72-449 (1973).

Sec. 47.10.260. Payment of costs. The department shall pay the proper and necessary costs of the court and witnesses and other expenses necessarily incurred in the enforcement of §§ 230 — 260 of this chapter. (§ 4 art III ch 145 SLA 1957)

ROBERT W. PALMER / Department of Health and Social Services

POSITION PAPER

SENATE BILL NO. 34

"An Act relating to the placement of children in state custody."

The Department of Health and Social Services and the Division of Corrections is in support of this legislative amendment.

Under present statute, 47.10.230(e), a delinquent child could be removed from the custody of the Department of Health and Social Services (i.e., foster care, treatment facility or detention facility), upon the request for custody by a blood relative. This is viewed as a potentially dangerous situation in cases where the delinquent youth has committed violent crimes (assault, rape, robbery by use of firearms, etc.) and who continues to have the propensity to commit such acts. Returning a child with this type of behavior to the community may jeopardize the state's responsibility to protect society.

In addition, removing a youth from the milieu of a structured setting or treatment program could be detrimental to the rehabilitation process. To date, no delinquent has been removed from the Department's custody under this statute (enacted two years ago in conjunction with the new Children's Code legislation) because there has been no case in which a blood relative has requested custody. This does not preclude this happening in the future.

Presently, the Division of Corrections has 661 children under probation supervision. Approximately 630 of these children are residing in their own homes. Even though these children have been adjudicated delinquent, the majority of the children are under supervision in the community. Only in cases where a youngster has special treatment needs which cannot be met in the community or where the youngster presents a potential danger to himself/herself or to the community is a child placed in an institutional setting.

It should be noted that legislation allows review hearings at any time concerning youth commitments; thus, the youth's rights are adequately protected. Any citizen or relative may file for a review hearing.

Recommended by: Walter B. Jones, Jr. Date: 1-17-79
Walter B. Jones, Jr.

Charles E. Sothman Director
Charles E. Sothman
Division of Corrections

Approved by: Helen D. Beirne Date: 1-17-79
Helen D. Beirne, Commissioner
Department of Health and Social Services

THE LEGISLATURE OF THE STATE OF ALASKA
ELEVENTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Proposed Amendment to 47.10.230 (e)
 Title Amend to exclude youngsters who have been adjudicated delinquent minor by Court.
 Requested by Department of Health and Social Services Date 1/9/79

II. FISCAL DETAIL

Agency Affected Department of Health & Social Services
 Program Category Affected Administration of Justice
 Budget Request Unit(s) Affected Juvenile Confinement

EXPENDITURES (Thousands of Dollars)

	FY 79	FY 80	FY 81	FY 82	FY 83	FY 84
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL	0	0	0	0	0	0

FUNDING (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER (Specify)						

POSITIONS

FULL TIME						
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

IV. DATE January 9, 1979 PREPARED BY Leland T. Dalby
 AGENCY Division of Corrections
 PHONE 465-3376
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)

CORRECTION

THIS DOCUMENT
HAS BEEN REPHOTOGRAPHED
TO ASSURE LEGIBILITY

THIS DOCUMENT
HAS BEEN REPHOTOGRAPHED
TO ASSURE LEGIBILITY

CORRECTION

Article 2. Juvenile Institutions.

Section

150. General powers of department over
juvenile institutions

Sec. 47.10.150. General powers of department over juvenile institutions. The Department of Health and Social Services may

(1) purchase, lease or construct buildings or other facilities for the care, detention, rehabilitation and education of children in need of aid or delinquent minors;

(am § 25 ch 63 SLA 1977)

Effect of amendments. As the rest of the section was not affected by the amendment, it is not set out.
The 1977 amendment substituted "children in need of aid" for "dependent" in paragraph (1).

Article 3. Care of Children.

Section

230. Powers and duties of department over
care of child

Supplement

Sec. 47.10.230. Powers and duties of department over care of child.

(a) Subject to (e) and (f) of this section, the Department of Health and Social Services shall arrange for the care of every child committed to its custody by placing him in a foster home or in the care of an agency or institution providing care for children inside or outside the state. The department may place a child in a suitable family home, with or without compensation, and may place a child released to it, in writing verified by the parent, or guardian or other person having legal custody, for adoptive purposes, in a home for adoption in accordance with existing law.

(d) In addition to funds paid for the maintenance of foster children under (b) of this section, the department shall pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment, services and equipment, special clothing, and the indirect costs of medical care, including child care, transportation expenses, and respite care. In this subsection "respite care" means child care not to exceed 12 hours in any 30 day period; it also means child care for a period not to exceed seven days in a year for the purpose of providing emergency protection for the child when the foster parent is away from the home because of an emergency and no other care is available for the child or when the foster parent is on vacation and the child, because of age or infirmity, cannot be placed in any other type of temporary care facility.

(e) A child may not be placed in a foster home or in the care of an agency or institution providing care for children if a blood relative exists who requests custody of the child. However, the department may retain custody of the child and provide for its placement in the same manner as for other children if it makes a determination, supported by clear and convincing evidence, that the custody of the child by the blood relative will result in physical or emotional damage. In making that determination, poverty, including inadequate or crowded housing, on the part of the blood relative, is not considered prima facie evidence that physical or emotional damage to the child will occur. This determination may be appealed to the superior court to hear the matter de novo.

(f) If a blood relative of the child specified under (e) of this section exists and agrees that the child should be placed elsewhere, before placement elsewhere the department shall fully communicate the nature of the placement proceedings to the relative. Communication under this section shall be made in the relative's native language, if necessary. Nothing in this section or in (e) of this section applies to child placement for adoptive purposes.

(am § 1 ch 76 SLA 1976; am §§ 36, 37 ch 126 SLA 1977)

Effect of amendments.

The 1976 amendment added subsection (d).

The 1977 amendment added "Subject to (e) and (f) of this section" to the beginning of subsection (a) and added subsections (e) and (f).

As the rest of the section was not affected by the amendments, it is not set out.

Editor's note. — Section 1, ch. 126, SLA 1977, effective July 1, 1977, provides: "PURPOSE. Common law and statutory procedures governing the remedies for enforcement of support for financially dependent minor children by responsible parents have not proven sufficiently effective or efficient to cope with the increasing incidence of financial dependency. The increasing workload of courts, district attorneys, and the attorney general has made such remedies uncertain, slow and inadequate, thereby resulting in a growing burden on the financial resources of the state, which is required to provide public assistance grants for basic maintenance requirements when parents

fail to meet their primary obligations. The state, therefore, exercising its police and sovereign power, declares that the common law and Alaska statutes pertaining to the establishment and enforcement of child support obligations shall be augmented by additional remedies in order to meet the needs of minor children. It is declared to be the public policy of this state that this Act be construed and administered to the end that children shall be maintained from the resources of responsible parents, thereby relieving, at least in part, the burden presently borne by the general citizenry through welfare and welfare-related programs.

Section 35, ch. 126, SLA 1977, provides: "INTENT. It is the intent of secs. 36 and 37 of this Act to provide for placement of children in surroundings which are socially and culturally desirable and with persons who are able to meet their special needs. Placement of children with blood relatives will work to prevent loss of identity and self-esteem, and provide for increased family and cultural stability, security and solidarity."

regulations which the department considers proper, if it appears to the satisfaction of the department that there is a reasonable probability that the juvenile will remain at liberty without violating the law. (§ 10 art II ch 145 SLA 1957)

Sec. 47.10.210. Youth counsellors. The department may employ youth counsellors. Youth counsellors shall exercise the duties of probation officers and shall prepare preliminary investigations for the information of the court. They shall also carry out other duties in the care and treatment of minors which are consistent with the intent of this chapter. Youth counsellors have the powers of a peace officer with respect to the service of process, the making of arrests of minors who violate state or municipal law, and the execution of orders of the court relating to juveniles. The youth counsellors shall assist and advise the courts in the furtherance of the welfare and control of minors under the court's jurisdiction. (§ 11 art II ch 145 SLA 1957)

Sec. 47.10.220. Grants-in-aid. The Department of Health and Social Services may accept grants-in-aid from the federal government or private foundations and may accept other gifts consistent with the purposes of this chapter. (§ 13 art II ch 145 SLA 1957; am § 6 ch 104 SLA 1971)

Effect of amendment. — The 1971 "Health and Social Services" for amendment substituted "Department of Health and Welfare."

Article 3. Care of Children.

Section	Section
230. Powers and duties of department over care of child	250. Standards of care
240. Adequacy of home or institution	260. Payment of costs

Sec. 47.10.230. Powers and duties of department over care of child.
(a) The Department of Health and Social Services shall arrange for the care of every child committed to its custody by placing him in a foster home or in the care of an agency or institution providing care for children inside or outside the state. The department may place a child in a suitable family home, with or without compensation, and may place a child released to it, in writing verified by the parent, or guardian or other person having legal custody, for adoptive purposes, in a home for adoption in accordance with existing law.

(b) The department may pay the costs of maintenance which are necessary to assure adequate care of the child, and may accept funds from the federal government which are granted to assist in carrying out the purposes of this chapter, or which are paid under contract entered into with a federal department or agency. No child under the care of the department may be placed in a family home or institution that does not maintain adequate standards of care.

(c) The department may receive, care for, and make appropriate placement of minors accepted for care for a period of up to six months on the basis of an individual voluntary written agreement between the minor's parent, legal guardian, or other person having legal custody and the department. The agreement may include provisions for payment, in whole or in part, to the department for the minor's care and treatment. The agreement entered into shall not operate to prohibit a minor's parent, legal guardian, or other person who had legal custody from regaining care of the minor at any time. (§ 1 art III ch 145 SLA 1957; am § 5 ch 100 SLA 1971; am § 6 ch 104 SLA 1971)

Effect of amendments. — The first 1971 amendment added subsection (c).
The second 1971 amendment substituted "Department of Health and Social

Services" for "Department of Health and Welfare" in the first sentence of subsection (a).

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(b) The person or institution receiving a child shall submit the reports the department requires as to the education, health and welfare of the child and the conditions under which he is living. (§ 2 art III ch 145 SLA 1957)

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Cross references.—As to the general powers of the department over juvenile institutions, see AS 47.10.150. As to the operation of juvenile detention homes and facilities, see AS 47.10.180.

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Department ordered to promulgate standards for operation of juvenile detention homes. — See *T.M. v. Director of McLaughlin Youth Center*, Superior Court, No. 72-449 (1973).

Sec. 47.10.260. Payment of costs. The department shall pay the proper and necessary costs of the court and witnesses and other expenses necessarily incurred in the enforcement of §§ 230 — 260 of this chapter. (§ 4 art III ch 145 SLA 1957)

CORRECTION

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CORRECTION

Article 2. Juvenile Institutions.

Section

150. General powers of department over juvenile institutions

Sec. 47.10.150. General powers of department over juvenile institutions. The Department of Health and Social Services may

(1) purchase, lease or construct buildings or other facilities for the care, detention, rehabilitation and education of children in need of aid or delinquent minors;

(am § 25 ch 63 SLA 1977)

Effect of amendments.

The 1977 amendment substituted "children in need of aid" for "dependent" in paragraph (1).

As the rest of the section was not affected by the amendment, it is not set out.

Article 3. Care of Children.

Section

230. Powers and duties of department over care of child

Supplemental

Sec. 47.10.230. Powers and duties of department over care of child.

(a) Subject to (e) and (f) of this section, the Department of Health and Social Services shall arrange for the care of every child committed to its custody by placing him in a foster home or in the care of an agency or institution providing care for children inside or outside the state. The department may place a child in a suitable family home, with or without compensation, and may place a child released to it, in writing verified by the parent, or guardian or other person having legal custody, for adoptive purposes, in a home for adoption in accordance with existing law.

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Sec. 47.10.260. Payment of costs. The department shall pay the proper and necessary costs of the court and witnesses and other expenses necessarily incurred in the enforcement of §§ 230 — 260 of this chapter. (§ 4 art III ch 145 SLA 1957)

POSITION PAPER / Department of Health and Social Services

POSITION PAPER

SENATE BILL NO. 34

"An Act relating to the placement of children in state custody."

The Department of Health and Social Services and the Division of Corrections is in support of this legislative amendment.

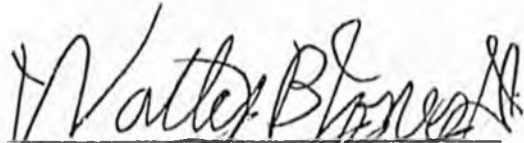
Under present statute, 47.10.230(e), a delinquent child could be removed from the custody of the Department of Health and Social Services (i.e., foster care, treatment facility or detention facility), upon the request for custody by a blood relative. This is viewed as a potentially dangerous situation in cases where the delinquent youth has committed violent crimes (assault, rape, robbery by use of firearms, etc.) and who continues to have the propensity to commit such acts. Returning a child with this type of behavior to the community may jeopardize the state's responsibility to protect society.

In addition, removing a youth from the milieu of a structured setting or treatment program could be detrimental to the rehabilitation process. To date, no delinquent has been removed from the Department's custody under this statute (enacted two years ago in conjunction with the new Children's Code legislation) because there has been no case in which a blood relative has requested custody. This does not preclude this happening in the future.

Presently, the Division of Corrections has 661 children under probation supervision. Approximately 630 of these children are residing in their own homes. Even though these children have been adjudicated delinquent, the majority of the children are under supervision in the community. Only in cases where a youngster has special treatment needs which cannot be met in the community or where the youngster presents a potential danger to himself/herself or to the community is a child placed in an institutional setting.

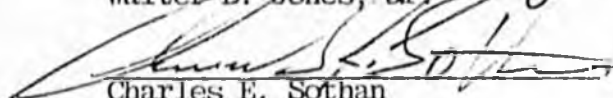
It should be noted that legislation allows review hearings at any time concerning youth commitments; thus, the youth's rights are adequately protected. Any citizen or relative may file for a review hearing.

Recommended by:



Walter B. Jones, Jr.

Date:

1-17-79

 Director
Charles E. Sothan
Division of Corrections

Approved by:


Helen D. Beirne, Commissioner
Department of Health and Social Services

Date:

1-17-79

THE LEGISLATURE OF THE STATE OF ALASKA
ELEVENTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Proposed Amendment to 47.10.230 (e)
 Title Amend to exclude youngsters who have been adjudicated delinquent minor by Court.
 Requested by Department of Health and Social Services Date 1/9/79

II. FISCAL DETAIL

Agency Affected Department of Health & Social Services
 Program Category Affected Administration of Justice
 Budget Request Unit(s) Affected Juvenile Confinement

EXPENDITURES (Thousands of Dollars)

	FY 79	FY 80	FY 81	FY 82	FY 83	FY 84
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
TOTAL	0	0	0	0	0	0

FUNDING (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER (Specify)						

POSITIONS

FULL TIME						
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

IV. DATE January 9, 1979 PREPARED BY Leland T. Dally
 AGENCY Division of Corrections
 PHONE 465-3376
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)

SB

35

COMMITTEE REPORT
SENATE

FURTHER: None

1/16/79

Date: 1/31/79

Mr. President: Health, Education & Social Services
The Committee on Social Services has had SB 35

relating to adult education

under consideration and (a majority of the committee) (the committee) reports it back with the following recommendations:

- do pass do not pass
- do pass with attached amendments (s).
- replace with CS for _____ same title
 new title
- and recommends _____
- AND attaches a "Letter of Intent" New Fiscal Note
- reports it back without recommendation
- referred to the _____ Committee

MEMBERS SIGNING
DO PASS

MEMBERS HAVING
OTHER RECOMMENDATIONS:

Mike Gallotta

Ardis Stungulovich

Steve Academy

CHAIRMAN

SB*35 "An Act relating to ^{S. HESS 79-80!} adult ~~educ.~~

By: Rules Comm. by request of Gov.

Introduced 1-16-79

Logged 1-16-79

Referral - NONE

Comm. meeting 1-31-79

" action - Passed with amendments.

AMENDMENT

OFFERED IN THE SENATE:

BY: SENATE HESS

TO: _____ SENATE BILL No. 35

HOUSE BILL No. _____

PAGE: 1

LINE: 19

Page 1, line 19: after "education" delete ";" and add "or those activities governed by the Alaska Commission on Postsecondary Education."

Handwritten notes:
Page 171
Page 164

AMENDMENT #1

OFFERED IN THE SENATE:

BY: SENATE HESS

TO: _____ SENATE BILL No. 35

HOUSE BILL No. _____

PAGE: 1

LINE: 19

Page 1, line 19: after "education" delete ";" and add "or those activities governed by the Alaska Commission on Postsecondary Education."

*adopted
voice
vote*

Meeting of 1/31/79 SB 35 - relating to adult education

Jim Beima - Alaska Commission on Postsecondary Education

My only concern is with the last line of the bill where it says . . . "but not including degree programs of post-secondary education." At the present time there are 27 schools other than community colleges that come under the regulation of the Postsecondary Commission who offer certificate programs and or other programs that have to be licensed and have their agents registered. This would definitely hit in there. I think it should actually read "but not including degree and certificate programs of post secondary under regulation by Chapter 25." Under Chapter 25 they must be licensed and have their agents registered. That would allow the adult education to operate at the secondary schools and other places that are public facilities but outside of licensed schools. What I think the department of education is after is to do adult training in public schools and things of this type to support community interest

SB 35 is in conflict with chapter 25, I would say which has already designated the responsibility of the Postsecondary Education Commission.

Asked to give an outline of Adult Basic Education . . .

The programs I administer come under the Veterans Administration and we have to approve all of the schools that offer programs which the veterans enroll. Fundamentally, they are school operations and not secondary schools or community schools. We do not go out and review adult programs in welding for the community, such as body fender welding.

Marylu Maddan - Department of Education

We asked that this bill be introduced essentially as a clean up piece of legislation which would give a statutory authority for our current activity in the adult education area. Right now we have that authority through the budget process which gives us the authority to receive and disburse grant funds in several basic areas adult basic education and the GED program, fire service training and adult vocational education, including CETA. The bulk of these funds come from the federal government with the Department of Education being the eligible recipient in the state. We then disburse them to public schools, community college systems, whatever institutions actually provide the education. We also operate the Alaska Skill Center which is essentially an adult facility.

The proposed legislation would simply amend Titles 14 and 44 which speak to the duties of the department by giving us authority to administer programs. We added the final sentence in an attempt to avoid confusion with community college and university structure in that we did not want to get into degree or credit programs. If that is confusing, we would certainly look to the type of amendment that Mr. Beima suggested.

Senator Hackney - what portion of your budget funds come from the feds as compared to general fund?

Marylu Maddan - I can't give exact figures. All of the CETA monies, about \$212,000 is all federal. Of our ABE budget of \$1,173,000, about 50% general fund and 50% federal; fire service training's \$91,000 is totally state and in the adult vocational education area half is federal.

It is not mandated by the federal government that we have statutory authority. The problem that we do have in receiving federal money is that our authority comes only through the budgetary process and we would prefer to have it stated as part of the duty of the department. I do not want to give the impression that unless this passes the department won't get federal funds, because that is not true.

I think Mr. Beima's point was the term "administer" could cause confusion with the postsecondary's mandate to administer the certification of nondegree programs.

Ms Maddan and Mr. Beima discussed the amendment and came back to the meeting with a mutually agreeable amendment which the committee adopted. Amendment is attached.

Introduced: 1/16/79
Referred: Health, Education &
Social Services

1 IN THE SENATE

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

2 SENATE BILL NO. 35

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 ELEVENTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to adult education."

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

8 * Section 1. AS 14.07.020 is amended by adding a new paragraph to read:

9 (12) provide educational opportunities in the areas of
10 vocational education and training, basic education, and fire service
11 training to individuals over 16 years of age who are no longer attend-
12 ing school.

13 * Sec. 2. AS 44.27.020(1) is amended to read:

14 (1) administer the state's program of education at the ele-
15 mentary, [AND] secondary, and adult levels, including, but not limited
16 to, programs of vocational education and training, vocational rehabi-
17 litation, library services, [AND] correspondence courses, adult basic
18 education, and fire-service training, but not including degree pro-

19 grams of post-secondary education or those activities
20 governed by the Alaska Commission
21 on Postsecondary Education.
22
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AMENDMENT

2

OFFERED IN THE SENATE:

SB

By: RAY

To: ~~SB~~

SENATE BILL No. ~~3~~ 35

HOUSE BILL No. _____

PAGE: 1

LINE: 15

after first comma add "and"
after second "and" add "certain"

LINE 17 & 18

Delete "adult basic education"

adopted

MEMORANDUM

TO: The Honorable Glenn Hackney
Alaska State Senate
Pouch V
Juneau, Alaska 99811

DATE: February 6, 1979

FILE NO:

TELEPHONE NO:

FROM: Marshall L. Lind, *Marshall*
Commissioner
Department of Education

SUBJECT: Senate Bill 35

Senate Bill 35 was introduced by the Governor in order to formalize the responsibility of the Department in administering a number of programs for the adult population of the state. These programs are authorized by an appropriation by the legislature each year. It is not the intent of the Department to enter into the direct operation of programs, except for continuation of the Alaska Skill Center.

We anticipate administering the programs as we have in the past, using various educational institutions as direct delivery agencies. We realize there is some concern that the Department might become an operational agent for adult programs across the state. Such direct operations authority is not spoken to in the bill, nor is it considered with overall Department responsibility.

By establishing the responsibility on an ongoing basis, we could develop better long range plans and be able to articulate programs with other Departmental programs. Also, this legislation will provide the legal entity for the receipt of Federal funds.

If additional information is needed, please contact us.

cc: Marilou Madden
Gerald Hiley
Senator Ray
Senator Kerttula
Senator Rodey
Senator Stimson