

ALASKA LEGISLATURE COMMITTEE FILES 1981-1982 86/2

133 HESS HB 144 - HB 174 / 333

Yakutat High School
Yakutat, Alaska

Work and apparatus as described herein to be furnished by the Seller except when clauses specify Buyer to furnish.

SPRINKLERS

A wet pipe system of Grinnell Duraspeed Sprinklers to be installed in Yakutat High School protecting all the interior areas of the building. No automatic sprinklers are included for non-combustible blind spaces or under any exterior canopies or overhangs.

Buyer to provide sufficient heat throughout all portions of the building to be equipped with a wet pipe system to prevent any freezing of water in the pipes.

Piping for sprinklers to be installed concealed above the ceiling where there is 2' x 4' lift-out tile. All other areas are to be exposed.

Installation to be in accordance with the rules and regulations governing Light Hazard Occupancy.

SPECIAL SPRINKLERS

No coated sprinklers, plated sprinkler or sprinkler guards are included in this proposal.

ALARM VALVE

Four inch Grinnell alarm valve and connections in supply to Grinnell wet pipe system, without electric alarm switch.

ALARM

Grinnell water motor alarm to be furnished and connected to alarm valve; gong to be located on exterior wall of building with drain extended through wall of building for discharge.

GATE VALVES

Four inch gate valve to be installed controlling alarm valve.

HANGERS

Necessary Underwriters Approved hangers in place for supporting the sprinkler piping.

1978-79 2.7 M K-12 at Karub
2.5 M K-12. Chiniab

1979-80 3.6 M K-12 Karub
3.3 M K-12 Shiniab

SB 561
\$960.

Yakutat - HB 143 - \$60⁺⁺ --
HB 144 - 100,000

advers conditior -

Feb. '79 - 23 sprinkles for
\$40,244.00
169 sprinkles for
\$35,841^{00/100}

\$212⁺⁺ per sprinkler
169) 35841
338

204
169

351⁺⁺

\$169⁺⁺ per sprinkler
238) 40244
238

1644
1428

2164

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Seward General Hospital

P.O. BOX 365
SEWARD, ALASKA 99664
(907) 224-5205

January 20, 1981

Representative Betty Cato
Pouch Y
Juneau, Alaska 99811

Dear Representative Cato:

Seward General Hospital is a non-profit corporation serving the health needs of the 3,600 full time residents of the eastern portion of the Kenai Peninsula.

The bulk of our equipment has been in use since 1958 and is past or swiftly approaching its useful life. Most of the funds that are available to the Hospital Board must be spent on day to day operations, leaving very few funds for modernization. The Hospital Board has ascertained that a one-time infusion of funds is necessary to adequately re-equip the hospital with current State-of-the-Art items of equipment. Once adequately equipped, a program for maintaining and up-dating, along with a plan for replacement of obsolete items would be meaningful and practical.

The hospital has been operational in the current facilities since 1958. All of the major equipment, with the exception of the X-ray machine, was installed as part of the initial construction effort. Time, usage and technical innovations in the State-of-the-Art have made these equipment items obsolete. In order to maintain quality care, funds have been expended as they became available to upgrade equipment requirements. The advancing age necessitates the contemplation of total replacement of the bulk of the patient care equipment.

The objective of upgrading equipment encompasses all departments of the hospital operation. Needs exist for items directly concerned with patient care such as cardiac monitoring and patient data systems, though ancillary items such as a floor scrubber and a one-half ton van are purely support items. All items considered for acquisition are essential for continued modern hospital care. They can be installed with currently available utilities and are within the scope of the existing employees to install and operate, and with limits, maintain with minimal training.

A perusal of the attached listing, with approximate pricing information, will indicate no unusual items of equipment requested.

Thank you for your consideration.

Sincerely,


C. Keith Campbell, Administrator

CKC:ecb

Enclosure

EQUIPMENT REQUIREMENTS
SEWARD GENERAL HOSPITAL

INDEX

Cardiac Monitoring Unit	\$ 1,140.
Autoclave Controls (Alternative)	6,500.
Replacement Autoclave (Alternative)	25,000.
Cardioscope/Defibrillator	4,800.
Drainage Pump	900.
Suction Unit	900.
Respirator	9,000.
Aneroid Sphygmomanometers	1,242.
Spirometer	4,452.
Crash Cart	4,848.
Gas Sterilizer	9,270.
Decubiti Prevention System	780.
Floor Scrubbing Machine	3,600.
Wet-Dry Vacuum Machine	360.
Television Shelves	6,000.
Waste Paper Shredder	438.
Infusion Controller	1,380.
Patient Furniture	58,598.
Stretcher/Table	3,000.
Geriatric Chair	
Rocking Chair	180.
Resuscitator (Two Units)	1,800.
Van	7,200.
Arc Welder	300.

EQUIPMENT REQUIREMENTS

INDEX

S.G.H. PAGE TWO

Embossing System	\$ 4,200.
Reception Area Furniture	6,000.
Electrocardiograph	2,400.
Bath Lift	3,000.
Executive Pagers	4,500.
Infant Circle Filter Anesthesia App	570.
Window Mount Air Conditioner	6,000.
Washer-Extractor	14,003.
Laundry Conditioner-Dryers (Two)	10,940.
Air Vent System (Laundry)	3,600.
Dietetic Ice Machine	1,644.
Food Freezer	2,305.
Kitchen Work Table	218.
Deep Fat Fryer	841.
Dishwasher	4,200.
Entry Ramp	5,500.
Nursing Station Call System	70,000.
Coffeemaker	700.
Boiler/Burner	8,714.
Bill-Meter and Bill-Timer	1,231.
Pressure Sensor Valve	255.
Silver Recovery Unit	1,634.
Patient IV Walker(s) Two	299.
Laboratory Furniture	13,725.

Phase Contact Microscope	\$ 5,195.
Laboratory Computer/Printer	5,100.
Centrifuge	750.
Waterbath	580.
Blood Gas Machine	6,995.
Calcium Analyzer	2,150.

Equipment Requirements

\$339,177.

TRANSITIONAL LIVING - A STEP TOWARD INDEPENDENCE

AS PROPOSED

BY

ANCHORAGE COMMUNITY MENTAL HEALTH CENTER

3944 Spenard Road

Anchorage, Alaska 99503

Telephone: 907-243-5411

Submitted by:

Gary W. Vreeman, Ph.D.
Executive Director

Assisted by:

Jeffry Duncan, M.A.
Aftercare Supervisor

Ninn Daggett, R.N.M.A.
Transition Coordinator

TRANSITIONAL LIVING - A STEP TOWARD INDEPENDENCE

Just as a person's treatment plan must be individualized and based on his/her particular needs, so must a plan for living and housing be individualized. The planning and development of discharge goals should be obtainable, appropriate and started already at the time of admission. Individual needs and wishes provide the basis for planning and development of main discharge goals. One factor that has often been overlooked in treatment planning and for maximizing a client's chances for success in any kind of a rehabilitation program, is an assessment of the quality of the client's residential situation. Two major factors must be considered: (a) The client's current family situation, and (b) The extent to which the residential setting is conducive to rehabilitation. An inadequate and destructive family setting, such as involving excessive dependence on family members, or substandard boarding homes or apartment settings are seen as posing the greatest threat to any successful outcomes. If it is determined that at least for a temporary period a client would make more progress away from a family, or in a separate setting, or as an alternative to hospitalization, a community mental health center should be prepared to offer some alternatives.

Basically, staff should be aware of the possibility that the client may have special needs within the community, including: (1) A residential setting which provides appropriate support and offers the least restrictive environment; (2) A mutually caring relationship with one or more persons; (3) Opportunity for social and recreational activities; (4) Assistance to and education of family and significant others in relation to difficulties they may experience as a result of the client's return to his/her home; (5) Vocational guidance training and assistance in securing and holding a job; (6) Provision for useful daily activities for those who are incapable of holding a regular job; (7) Assistance in taking advantage of services as citizens of their respective communities, e.g., S.S.I. payments, food stamps, housing benefits, etc.; (8) A place to go to or person to call for help in dealing with problems with stress; (9) Medical and psychiatric treatment as necessary, including review and assessment of drug therapy; (10) A coordinator or a therapist to provide linkage between the various service delivery systems and the client to assure the client has access to all the needed services.

This link in services from hospital to community, or as an alternative to hospitalization, is missing in many communities. One of the more recent concepts is the development of a transitional living facility which is designed to fill the gap between the institution and the community, or in providing therapeutic services which do not require hospitalization. This facility is designed as short-term, highly therapeutic, with a basic goal of rehabilitating the client in as little time as possible to resume or begin "normal" community living.

This document is a proposal for the development of a transitional home facility for the Anchorage catchment area. The home will be directed toward people who are experiencing a situational crisis, as well as requiring services which are now offered by the Mental Health Center. The funding required for such a program will involve monies allocated for capital outlay for the purchase, construction or lease of a facility adequate for a maximum of twelve individuals who qualify for this program, as well as money to fund the program, to support operating costs, and staff required to operate a quality program.

All of this would be based on a premise that many of the people who are experiencing the types of situational crises which warrant admission to this program, would be without adequate financial resources to fully pay for these services. As such, we are estimating that the operating cost will require a substantial amount of public money as a means of alleviating admission to a psychiatric hospital, or other residential care facility.

Staff has been asked to provide an overview and to research the needs for transitional housing in Anchorage for citizens who require additional situational support. The professional literature reviewed to date points to the following areas of consideration: (1) There is a serious shortage of facilities nationally to deal with the need for housing coupled with a program to improve coping abilities. (2) Federal and State laws mandate care for this population, but a gap in the system is residential living with supervision present to assist in individuals being discharged from a hospital without adequate situational support, and preventing hospitalization when needs can be addressed in the community with adequate resources. (3) Linking people, programs, and organizations is crucial for effective treatment and is consistent with the continuity of care concept which underlies the NIMH commitment to community support. (4) Need for meaningful evaluation criteria to assure quality community service. (5) Need for a coordinating body with clear lines of communication and minimal administrative detail. (6) Need for exclusion of individuals with active primary problems of substance abuse. (7) Needs assessment conducted by the Municipal Health Commission, by the University of Alaska, and by the Department of Health and Social Services indicate that there is a serious gap in this type of living facility to serve the Anchorage catchment area.

Adequate housing for the emotionally unstable is a national problem dating back for generations. The advent of psychotropic drugs in the 1950's and the process for deinstitutionalization and acceleration of the community psychiatry movement in the 1960's appear to be major factors affecting the declining acceptance of state mental hospitals as a means for dealing with consumers' lack of support systems in the community. Many of the needs of the acute and chronic "mental patient" are absorbed by the core of the community--family, friends, schools, clergy, community services, professional boarding homes, foster care, independently operated

hotels, apartments and the hospitals. This core has varying levels of commitment, skill, and understanding to assist the individuals with transitional coping needs. Even on the professional end of the spectrum, there is a limited milieu for observation of structured living and monitored progress outside of the hospital. Consequently, the hospital, primarily A.P.I., is inundated with people needing situational support, not necessarily inpatient psychiatric care.

The following is a perception of factors affecting the potential resident population we are addressing: Dysfunctional precursors such as distorted perception of events; inadequate situational and emotional support; inadequate coping abilities and symptoms of mental illness lead to a stressed, potential resident. This potential resident then exhibits such things as dysfunctional attempts at stabilization, loss of motivation, crisis to crisis lifestyle, substance abuse, legal encounters, marginal existent transient lifestyle, agency bouncing, community bouncing, exhaustion of community resources, stressed family, friends and community, and in general, needs not being met. This inability to cope with and relate to the community leads to request for hospitalization and regression to institutionalization.

Stress is an inherent factor of life. The population that is being spoken of does not exhibit the wherewithall of adequate stress management. The theoretical causes or enhancers of this inability to cope are numerous and will not be explored here. Rather, we will look at the interventions and education which can be utilized to assist people with coping needs. The need for, and at times the number of, support systems that this population utilizes to compensate for this inability to cope, is at times a stress source in and of itself defining an imperative need for coordination. The individual's ability to coordinate and to cope with living at the highest potential is the goal. A transitional residence program would provide a base where staff with adequate theoretical knowledge and experience could assist a resident in assessing what coping skills they are lacking to achieve and maintain maximum functioning in the community.

At present there are few statistics available to document the need for this facility in Anchorage. In consultation with planning agencies, and in a review of the various documents and assessments that have variously been done, the need seems evident. The consensus of professionals in the area is that such a facility is desperately needed.

The residential transitional home that we are addressing here is thought to be a short-term facility. Short-term is defined as a maximum single stay of up to a 90-day period of time. This seems like a reasonable period in which an assessment of the individual needs and linkages in the community could be achieved. In some cases, an additional 90-day stay could be recommended. The acceptance criteria for such a facility would be as follows: (1) Age 19 or over. (2) Primary problem of

emotional instability and not other related issues. (3) Inadequate or no support system. (4) Inability to cope with stressful events. (5) Needing coordination of services. (6) Capable of functioning without constant direct supervision. (7) Accepting of and willing to participate in the contract agreed upon with screening person and staff as well as residents. (8) Not imminently dangerous to self or others. (9) Engaged in a therapeutic relationship or willing and able to engage in such. (10) As an alternative to 24-hour inpatient hospital care.

During the resident's stay, growth will be facilitated by: (1) Community meetings, peer supported feedback, decision-making and problem-solving. Here plans for residence managing will occur, including disciplinary actions, allocation of chores for housekeeping, maintaining, purchasing, group therapy, etc. (2) The therapeutic community environment milieu will focus on interaction between members, not intrapsychic content of individual. (3) Group therapy, emotional interdependence, nature of living situation, and review of individual's plan, action, support and confrontation. (4) Individual or conjoint sessions with significant others as necessary. Program framework would undoubtedly have included a preventative approach to self-care, educational resources, community classes, stress management, recreation and physical fitness, nutrition--whatever else is possible or necessary. Complete details of the program will be addressed in the policy and procedures manual.

This facility would receive residents from numerous community areas. The channels that would be utilized to determine acceptance would be as follows: (1) Potential residents would demonstrate need for situational support and express a desire to explore the options and initiate change. (2) Referee consults with Community Mental Health Center's staff as part of pre-discharge planning, identifies status as medically and psychiatrically cleared for discharge without adequate situation support; (3) Potential resident is then interviewed by the Community Mental Health Center staff; (4) Following the interview and screening, if the facility is suitable for the potential resident's needs, expectations and responsibilities of potential resident and the facility will be discussed, and if agreed upon, a treatment plan will be initiated.

Linkages within the community for a resident of this facility is imperative. Therefore, due to the nature of the environment of this facility and the individual housed therein, the communication between the facility, the resident and the following community resources must be open, collaborative and responsive: (1) Community consumers; (2) Division of Vocational Rehabilitation; (3) A.P.I., Community Hospital, Community Services; (4) Adult Basic Education; (5) Work and recreational resources; (6) Social Security, Alaska State Housing Authority, Food Stamps, and other supportive services; (7) Police and legal department systems; (8) Substance abuse programs; (9) Emergency services; (10) Community professionals.

In looking at quality assurance for such a facility, it appears that formal evaluation criteria is one of the major areas lacking in documentation of published literature. Due consideration in this area will need to be given. At present, it seems reasonable to measure the following areas:

(1) The resident

- (a) Initial resident's assessment of needs and goals
- (b) Monthly formal monitoring evaluation
- (c) Termination evaluation with report regarding status of goal attainment. Appropriateness of services, follow-up availability.

(2) Staff

- (a) Regular supervision and evaluation program
- (b) Six-month review of overall operation of program
- (c) Yearly evaluation with input from referral sources; follow-up on prior residents and staff recommendations
- (d) Two-year evaluation of needs for program changes, funding, referral criteria and other major overall program changes.

It appears that a transitional facility of this nature would be far less expensive than a hospital stay, and a much more favorable and healthier choice for the individual in terms of residing in the community. Hopefully, in the future some arrangements in terms of assisting residents in moving toward semi-independent or apartment living would be the next feasible step for those on the higher end of dysfunctioning continuum. Utilizing data from the ongoing assessment of the resident while in the facility, appropriate referrals to family, friends, boarding home, etc., within the community could be made with the clear understanding of the individual's needs and growth potential.

The emphasis should be on incorporating the facility into an already existing neighborhood. This facility would involve the necessity of meeting the existing codes required by the Municipality of Anchorage, as well as the State of Alaska, in addition to any Federal NIMH or JCHA standards which are warranted. The facility itself would be adequate in terms of square footage to meet zoning requirements per individual, as well as adequate fire, health and other code and zoning requirements. We visualize this facility as housing a maximum of twelve clients with a hoped for average of about eight. This would involve sleeping and cooking facilities adequate to cover the maximum number of clients in the program, as well as leisure and recreation areas such as a TV and recreational room.

Other budgetary items necessary would be to support the program involving money for equipment and supplies of an ongoing nature. This would include funds for capital improvement and upkeep; funds for acquisition; funds for fixed costs such as electricity, gas, telephone and salaries of staff and purchase of equipment which would be necessary for the proper operation of the program. A vehicle should be provided which can be used by the Mental Health Center staff to provide transportation for clients, either on a full or part time basis, or in a shared arrangement with another part of the program.

Staffing pattern would include: (a) One full time resident manager who would be required to be on the premises 24 hours a day, five days a week; (b) A part-time cook who would also serve as dietician in arranging for and supervising preparation of at least two meals per day; (c) A part-time or backup manager who will work on weekends and serve as backup to the resident manager; (d) A professional staff person who would do most of the screening, provide the group therapy; provide the liaison with a variety of community agencies; maintain the records; and provide the follow-up.

In 1955, well over half a million people resided in state and county hospitals. The latest data shows that this population has now been reduced by more than half or about 200,000 people. This decrease has been accompanied by a rise to over a million people who now reside in a community nursing homes which have grown in number and now house a large proportion of these former patients. There are many residents currently in nursing homes, however, who are not in need of this type of expensive care, yet inadequate boarding homes or slum hotels offer no solution either. In reviewing the literature concerning those best equipped to initiate a transitional living program, there seems to be general agreement that this type of living should be an extension of the community mental health service. In many aspects, the Community Mental Health Center is considered a host agency. Research also seems to point to a special need and special attention must be given to the type of community which is to be home to the residents of this facility. This is particularly true in regard to community mores and sociocultural variables. The staff of the Anchorage Community Mental Health Center feels very strongly that residents of this home should not be an instrument of social reform, but rather should be a part of an existing community which is most nearly representative of the clients who will be living in the facility.

A second factor that becomes increasingly apparent is that this facility must not be seen as simply a convenient place to house a patient when the emergency or chronic wards are overcrowded in the institution. We will use special care that this facility not become a dumping ground for all those who have no other place.

The third major pitfall to avoid is in reference once again to the host agency. Several instances have shown that the likelihood of success is considerably less where private agencies try to develop programs by themselves without entire community support. Of vital necessity is the support of other service providers. If agencies operate in an isolated fashion, very likely there will be a narrow concentration of similar clients when a mix of clients is much more desirable.

In conclusion, it must become apparent to all that a major value underlying all programs is that those who are suffering from mental disabilities have the same right as anyone else to live in a type of environment which affords a quality of life conducive to self-realization and growth. Since a transitional facility offers relative anonymity to the residents and presents less cause for community fears, they have many advantages not often realized by other residential modalities such as boarding homes. Chief among such advantages is the avoidance of stigma-prone situations brought about in conspicuous community living arrangements, such as large residential care facilities or large hotels. The whole concept of normalization seems to become increasingly apparent in this endeavor.

Anchorage Community Mental Health Center - G. Vreeman

TRANSITIONAL LIVING FACILITY BUDGET

Facility construction acquisition	\$300,000.
Equipment and furniture	40,000.
Transportation	10,000.
Food and consumables	23,000.
Utilities	4,000.
Insurance	<u>2,000.</u>

\$379,000.

Staff:

Home Manager	24,000.
Assistant Manager	19,000.
Clinician	23,000.
Cook/aide	<u>14,000.</u>

\$80,000.

Fringes 20%	<u>16,000.</u>
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96,000.

Misc. start-up remodel, etc.	30,000
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Contract - emergency, Medical, etc.	<u>20,000.</u>
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TOTAL \$525,000.

JOB DESCRIPTION

JOB TITLE: TRANSITIONAL HOME MANAGER

SUPERVISED BY: AFTERCARE SERVICES SUPERVISOR

POSITIONS SUPERVISED: ASSISTANT TRANSITIONAL HOME MANAGER
COOK/AIDE

BASIC RESPONSIBILITIES: Manage the daily operations of a co-ed residential home for up to twelve (12) adults (age 19 and over), whose primary problems relate to emotional stability and the need to make a transition from the psychiatric hospital to independent living.

DUTIES AND RESPONSIBILITIES:

House Management

Establish general procedures for routine housekeeping and operations.
Purchase supplies, including food, cleaning supplies, etc.
Provide for general and emergency maintenance of facility.
Establish fire and other emergency procedures.

Program Responsibilities

Develop and maintain a therapeutic community environment as staff person in charge under the direction of the Clinician II, Transitional Home Clinician.
Assist residents to meet particular needs, receive support, and achieve goals of independent living.
Assist in group and individual therapy.
Provide crisis management when necessary.
Be responsible for house milieu: i.e., discipline, rules, structure, etc.
Ensure that State Division of Social Services licensing requirement and Municipal regulations for adult residential care facilities are maintained and followed.

Business Management Responsibilities

Maintain financial record and budgetary controls for transitional home budget.
Participate in development of yearly budget.

Supervisory Responsibilities

Directly supervise Assistant Transitional Home Manager and Cook/Aide.
Supervise volunteers and residents in their activities.
Participate in selection of Assistant Manager and Cook/Aide.

DESIRABLE REQUIREMENTS:

1. Education - Four years of college with a degree in Humanities: Sociology, Psychology, Anthropology, or related fields. Some knowledge of business management and program management desirable.
2. Experience - One to two years' experience employment in an adult residential facility. Preference given to persons who have worked in programs dealing with chronic mental illness and aftercare programming.

DESIRABLE REQUIREMENTS: (continued)

3. Special Knowledge, Skill and Abilities - Ability to work with chronically mentally ill. Ability to follow programming guidelines and participate positively in program development and implementation. Ability to relate positively to community agencies working with chronic mental illness. Knowledge of psychotropic medications, use, and after effects.

TERMS OF EMPLOYMENT CONTRACT:

Work Hours

Five days per week - 24 hours per day - live in.

Compensation:

\$1662 per month/\$19944 per year, plus benefits.

Classification:

Residential Manager I - Range 16 A

JOB DESCRIPTION

JOB TITLE: ASSISTANT MANAGER
PROJECT: TRANSITIONAL HOME
SUPERVISED BY: MANAGER, TRANSITIONAL HOME
POSITIONS SUPERVISED: PARTIAL SUPERVISION OF COOK/AIDE

BASIC RESPONSIBILITIES: In the absence of the Manager, manage the daily operations of a co-ed residential home for up to twelve (12) adults (age 19 and over), whose primary problems relate to emotional stability and the need to make a transition from the psychiatric hospital to independent living.

DUTIES AND RESPONSIBILITIES:

House Management

Establish general procedures for routine housekeeping and operations. Purchase supplies, including food, cleaning supplies, etc. Provide for general and emergency maintenance of facility. Establish fire and other emergency procedures.

Program Responsibilities

- Develop and maintain a therapeutic community environment as staff person in charge under the direction of the Clinician II, Transitional Home Clinician.
- Assist residents to meet particular needs, receive support, and achieve goals of independent living.
- .. Assist in group and individual therapy.
- Provide crisis management when necessary.
- Be responsible for house milieu: i.e., discipline, rules, structure, etc.
- Ensure that State Division of Social Services licensing requirements and Municipal regulations for adult residential care facilities are maintained and followed.

Business Management Responsibilities

Maintain financial record and budgetary controls for transitional home budget.
Participate in development of yearly budget.

Supervisory Responsibilities

Directly supervise Assistant Transitional-Home Manager and Cook/Aide.
Supervise volunteers and residents in their activities.
Participate in selection of Assistant Manager and Cook/Aide.

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positively to a variety of community agencies and persons.

TERMS OF EMPLOYMENT CONTRACT:

Work Hours - Forty (40) hour week, range of six to ten hour days.

Compensation - \$24,132 annually, plus benefits.

Classification - Clinician II

JOB DESCRIPTION

JOB TITLE: CLINICIAN II
PROJECT: TRANSITIONAL HOME
SUPERVISED BY: AFTERCARE SUPERVISOR
POSITIONS SUPERVISED: NONE

BASIC RESPONSIBILITIES: To develop, implement, and maintain a co-ed therapeutic transitional residential program for up to twelve (12) adults (age 19 and over), whose primary problems relate to emotional stability and the need to make a transition from the psychiatric hospital to independent living.

DUTIES AND RESPONSIBILITIES:

Program Responsibilities:

Screen clients for possible admission to the transitional home.
Assess individual client needs.
Develop, implement and maintain a therapeutic residential community, involving community meetings, feedback, decision-making and problem solving.
Train management and support staff.
Provide and coordinate group and individual therapy for residents.
Provide for meeting client educational, vocational, recreational, spiritual, and social needs.
Be available for crisis intervention.
Provide liaison with a variety of community agencies: i.e., A.P.I., D.S.S., A.N.H.S., employers, etc.
Provide follow-up services to those who leave the program.

Administrative Duties:

Maintain individual client records.
Maintain daily logs of client and program activity.

Supervisory Activities:

Although not actively involved as supervisor of the manager, assistant manager, and cook/aid, the Clinician II will provide training and supervise the therapeutic community milieu.

DESIRABLE REQUIREMENTS:

1. Education - Master's Degree in Clinical Psychology or Social Work with major emphasis of training upon chronic mental illness and programming for the chronically mentally ill.
2. Experience - At least three years' employment in an adult residential facility, focusing upon the chronically mentally ill. Preference given to persons who have worked in aftercare and transitional living programming. Knowledge of therapeutic community program setting essential.
3. Special Knowledge, Skills and Abilities - Ability to work cooperatively in a leadership position with subordinates. Ability to relate positively with chronically mentally ill persons. Knowledge of therapeutic models and techniques. Knowledge of psychotropic medications. Ability to relate

DESIRABLE REQUIREMENTS:

1. Education - Four years of college with a degree in Humanities: Sociology, Psychology, Anthropology, or related fields. Some knowledge of business management and program management desirable.

- Experience - One to two years' experience employment in an adult residential facility. Preference given to persons who have worked in programs dealing with chronic mental illness and aftercare programming.

3. Special Knowledge, Skill and Abilities - Ability to work with chronically mentally ill. Ability to follow programming guidelines and participate positively in program development and implementation. Ability to relate positively to community agencies working with chronic mental illness. Knowledge of psychotropic medications, use, and after effects.

TERMS OF EMPLOYMENT CONTRACT:

<u>Work Hours</u> -	Two days per week - 24 hours per day - live in.
<u>Compensation</u> -	\$1032 per month/\$12,384 per year.
<u>Classification</u> -	Range 11-A.

JOB DESCRIPTION

JOB TITLE: COOK/AIDE
PROJECT: TRANSITIONAL RESIDENTIAL HOME
SUPERVISED BY: MANAGER, TRANSITIONAL HOME
POSITIONS SUPERVISED: MAY SUPERVISE RESIDENTS

BASIC RESPONSIBILITIES: To provide for food service and kitchen management for up to twelve (12) adult (age 19 and over) residents and two staff in a co-ed transitional residential home for persons whose primary problems relate to emotional stability and the need to make a transition from the psychiatric hospital to independent living to assist in program implementation.

DUTIES AND RESPONSIBILITIES:

Kitchen Management:

Establish procedures for the operation of the kitchen.
Purchase and maintain necessary kitchen equipment.
Arrange for sanitary storage of foodstuffs according to Municipal Environmental Health Division regulations.

Food Service:

Develop nutritionally balanced menus, utilizing a variety of foods.
Purchase foods.
Establish procedures and standards for preparing and serving food.
Be sensitive to special dietary needs of individual residents.

Program:

Assist in maintenance of a therapeutic community environment.
Assist residents in learning food preparation and service.
Assist in crisis management as needed.

DESIRABLE REQUIREMENTS:

1. Education - Training in food services and preparation.
2. Experience - At least three years' experience with employment in a residential setting. Preference given to a person who has experience with chronic mental illness and aftercare services.
3. Special Knowledge, Skills and Abilities - Ability to work with chronic mentally ill persons.

TERMS OF EMPLOYMENT CONTRACT:

Work Hours - Forty hours per week.
Compensation - \$1032 per month/\$12,384 per year
Classification - Range 11-A

POSITION PAPER

HOUSE BILL NO. 149

"An Act making a special appropriation to the Municipality of Anchorage for the operation of a mental health transitional facility; and providing for an effective date."

Federal law defines a transitional facility as:

"A program of transitional half-way house services for mentally ill individuals who are residents of the catchment area and who have been discharged from a mental health facility or would without such services require in-patient care in such a facility."

Presently, this sector in the continuum of care for the mentally ill adult and adolescent in Alaska is deficient.

The Division of Mental Health and Developmental Disabilities fully supports the concept of developing transitional care for the mentally ill in Alaska. We have recognized this as an integral service in the continuum of care for the mentally ill. Both housing accommodations and supervision in a structured setting are necessary ingredients in the successful reintegration into the community for many discharged patients. Also, this type of facility could serve to prevent the hospitalization of certain patients by providing care in a less restrictive setting.

While Anchorage is not the only community in Alaska that would benefit from this type of facility, it is certainly an appropriate area to establish the first such facility. Anchorage is an excellent community to begin this type of program due to the presence of the Alaska Psychiatric Institute and the Anchorage Mental Health Center which offers comprehensive mental health services on an out-patient basis.

We fully support the intent of this bill and the need for this service; however, we would like to suggest that the sections in the bill providing for a grant under AS 37.05.315 be amended to allow the Division of Mental Health and Developmental Disabilities to contract for this service. Normally, residential services that are provided by non-state providers for our clients are done so under a contractual arrangement. This allows for payments for services rendered and further guarantees that the services will be available.

Recommended by: Verner Stillner, M.D.
Verner Stillner, M.D., M.P.H.
Director, Division of Mental Health and Developmental Disabilities

Date: 2/26/81

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

Date: 2-26-81

FISCAL NOTE

I. REQUEST

Bill/Resolution No. House Bill No. 149

Title An Act making a special appropriation to the Municipality of Anchorage...mental health

Requested by Commissioner's Office Date 2/19/81 transitional facility

II. FISCAL DETAIL

Agency Affected Dept. of Health & Social Services

Program Category Affected Div. of Mental Health & Developmental Disabilities

BRU, Program, or Subprogram(s) Affected _____

(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 81	FY 82	FY 83	FY 84	FY 85	FY 86
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)

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
GENERAL FUND						
FEDERAL FUNDS						
OTHER (Specify Fund Source)						
	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
FULL TIME						
PART TIME						
TEMPORARY						
	-0-	-0-	-0-	-0-	-0-	-0-

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

IV. DATE _____

PREPARED BY [Signature]

AGENCY Division of Mental Health & [unclear]

PHONE 465-3370

Original: Legislative Finance
cc: Budget and Management

Funding Sponsor (First Legislator Named) M&B Approval [Signature]

Date [Signature]

HB

164

COMMITTEE REPORT

HOUSE

2/17/81

FURTHER: FINANCE

(5)

Date: April 16, 1981

Mr. Speaker:

The Committee on HEALTH, EDUCATION & SOCIAL SERVICES has had HB 164

"An Act making a special appropriation for equipment for the Kodiak Island Hospital; and providing for an effective date."

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 HB 164 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

John Cloche
[Signature]
[Signature]
[Signature]

MEMBERS HAVING
OTHER RECOMMENDATIONS:

[Signature]
[Signature]

[Signature]
 CHAIRMAN

THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. House Bill 164
 Title "An Act making a special appropriation for equipment for the Kodiak Island Hospital;*
 Requested by Department of Health & Social Services Date March 4, 1981
 * and providing for an effective date."

II. FISCAL DETAIL

Agency Affected Department of Health & Social Services
 Program Category Affected Health
 BRU, Program, or Subprogram(s) Affected _____
 (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 81	FY 82	FY 83	FY 84	FY 85	FY 86
100 PERSONAL SERVICES		0				
200 TRAVEL		0				
300 CONTRACTUAL		0				
400 COMMODITIES		0				
500 EQUIPMENT		0				
600 LAND & STRUCTURES		0				
700 GRANTS, CLAIMS, ETC.		0				
TOTAL		0				

FUNDING (Thousands of Dollars)

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

POSITIONS

FULL TIME						
PART TIME						
TEMPORARY						

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

This bill does not directly impact the Division of State Health Planning and Development

IV. DATE March 5, 1981 PREPARED BY Robert A. Lindse
 AGENCY DHSS - Div. of State Health Planning & Development
 PHONE 465-3037
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named) M&B Approval U. Schindler Date 3/6/81

HOUSI BILL NO. 164
BY ZHAROFF AND ANDERSON

KODIAK ISLAND HOSPITAL; EQUIPMENT

POSITION PAPER
ON
HOUSE BILL 164

"An Act making a special appropriation for equipment for the Kodiak Island Hospital; and providing for an effective date."

This bill proposes to provide to Kodiak Island Borough the sum of \$64,000 to purchase three types of equipment for that facility.

The Department has recommended approval under the 1122 capital expenditure review program for the offering of the diagnostic ultrasound equipment.

The Department has also noted in earlier reports to the Legislature the need for assistance to small rural hospitals in particular for operating costs. Increased assistance may be possible through municipal assistance grants or increased health facility revenue sharing levels. It is recognized that communities may also seek specific appropriations as is posed by House Bill 164.

On the basis of the Department's recommendation that diagnostic ultrasound be added as a service in Kodiak, the Department has no objection to the provision of equipment funds by the Legislature.

Recommended by: Phoebe A. Lindsey
Phoebe A. Lindsey, Director
Division of State Health
Planning and Development

Date: March 12, 1981

Approved by: Helen D. Beirne
Helen D. Beirne
Commissioner

Date: 3/12/81

THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

FISCAL NOTE

REQUEST

Bill/Resolution No. House Bill 164

Title "An Act making a special appropriation for equipment for the Kodiak Island Hospital;*

Requested by Department of Health & Social Services Date March 4, 1981

* and providing for an effective date."

II. FISCAL DETAIL

Agency Affected Department of Health & Social Services

Program Category Affected Health

BRU, Program, or Subprogram(s) Affected _____

(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 81	FY 82	FY 83	FY 84	FY 85	FY 86
100 PERSONAL SERVICES		0				
200 TRAVEL		0				
300 CONTRACTUAL		0				
400 COMMODITIES		0				
500 EQUIPMENT		0				
600 LAND & STRUCTURES		0				
700 GRANTS, CLAIMS, ETC.		0				
TOTAL		0				

FUNDING (Thousands of Dollars)

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

POSITIONS

FULL TIME						
PART TIME						
TEMPORARY						

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

alaska
state
hospital
association

319 Seward St., Juneau, Alaska 99801 (907) 586-1790

REPRESENTING ACUTE, LONG TERM AND OUTPATIENT FACILITIES

President
Sister Barbara Haase
Ketchikan General Hospital
Ketchikan

President Elect
Tom Myggen
Fairbanks Memorial Hospital
Fairbanks

March 13, 1981

Secretary/Treasurer
Ron Pavallas
Alaska Hospital & Medical
Center
Anchorage

Immediate Past President
A. Camosso
Providence Hospital
Anchorage

Executive Director
Dennis L. DeWitt
Juneau

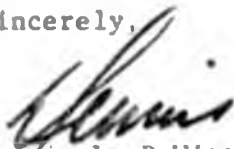
The Honorable Fred F. Zharoff
Alaska House of Representatives
Pouch V, State Capitol Building
Juneau, Alaska 99811

Dear Fred:

The Alaska State Hospital Association wishes to inform you of our support for House Bill 164.

Kodiak Island Hospital is in great need of the equipment that would be purchased as a result of the enactment of this measure. We will be happy to assist you in any way possible.

Sincerely,



Dennis L. DeWitt
Executive Director

DLD/b

cc: Representative Don Clocksin
Dan Van Wieringen, Kodiak Island Hospital

KODIAK ISLAND BOROUGH
RESOLUTION NO. 81-7-R

A RESOLUTION OF THE KODIAK ISLAND BOROUGH ASSEMBLY
SETTING THE FISCAL YEAR 1982 CAPITAL PROJECTS PRIORITY LIST

WHEREAS, the Kodiak Island Borough Assembly has determined the needs and goals of the citizens of the Kodiak Island Borough, through public input of these needs and goals;

NOW, THEREFORE BE IT RESOLVED, that the following list is the fiscal year 1982 Capital Projects priority list:

1. Near Island Port Development	\$ 11,315,000
2. Terror Lake Power Project	34,000,000
3. Sewer & Water Service District	8,500,000
4. Paving Mission & Mill Bay Roads	1,000,000
5. Roads to platted lots with no access	4,880,000
6. Port Lions access to boat harbor	150,000
7. Akhiok access to dock	400,000
8. Village fuel delivery and bulk storage	1,000,000
9. Hospital Equipment	133,000
10. Bells Flats up-grade roads	3,650,000
11. Larsen Bay access to sanitary landfill	170,000
12. Sanitary landfill - Karluk	350,000
13. Swimming pool - Old Harbor	750,000
14. Sanitary landfill - Chiniak	750,000
15. Chiniak School	2,000,000
16. Karluk School	1,700,000
17. Senior Citizen's Center	2,750,000
18. Agricultural Agent	75,000
19. Anton Larsen Bay Road	No Estimate
20. Interior work on East Elementary School	700,000
21. Parking lot - East Elementary School	600,000
22. Additional paving of State Highway	2,500,000
23. Borough building parking	600,000
24. Old Harbor teacher housing	No Estimate
25. Old Harbor hot lunch program	No Estimate
26. Old Harbor school water system	No Estimate
27. Relax State regulations for small contractors on electrical and plumbing installation	No Estimate
28. Monashka Dam addition	No Estimate
29. Recreation center roller rink	2,000,000
30. Improve road to Saltry Cove	3,000,000
31. Extend Otmuloi Point road to Anton Larsen Bay	No Estimate
32. Mission Lake Park	No Estimate

PASSED AND APPROVED this _____ day of February, 1981.

KODIAK ISLAND BOROUGH

ATTEST:

Borough Clerk

By _____
Borough Mayor

Kodiak Island Hospital

P O Box 1187
KODIAK, ALASKA 99615

OPICATED BY
LUTHERAN HOSPITALS AND HOMES SOCIETY
FARGO NORTH DAKOTA 58103

December 11, 1980

Jerome Selby, Chairman
Hospital Advisory Committee
P.O. Box 172
Kodiak, Alaska 99615

Dear Mr. Selby:

Attached find an invitation from the Kodiak Island Borough to except written comments and suggestions for capital projects which would qualify for State Funding for the coming physical year. As I discussed with the Hospital Advisory Council on Monday, December 8, 1980, I feel that there are two projects which would be appropriate for consideration and recommendation to the Borough Council.

The first capital construction project I would like to recommend would be the construction of a 3,000 square foot maintenance, purchasing and storage facility attached to the hospital. I am informed that the area to the rear of the hospital was specifically designed to be added on and would be an ideal location for this type of facility. My reasoning for the request to attach the facility is that in observing the maintenance activities I have noticed that the maintenance department is conducting maintenance activities in the presence of the boiler which would be considered, from a fire-safety stand-point, to be unacceptable. For example, I have noticed that their saw for wood-working is located next to the boiler which creates a hazard not only of possible dust explosion but also creates the hazard of saw-dust getting into the controls of the boilers which could conceivably cause a malfunction. The second issue is that the space presently available for maintenance activities is so cramped that they are unable to perform efficiently in what is an unacceptable environment.

The second consideration for the addition of the purchasing and storage facility is that the present storage facility is completely inadequate as to size and environment. I noticed that there are motors and condensers which result in moisture being able to get to medical supplies. It is not only a danger to the supplies themselves that the environment cannot be controlled as to temperature and humidity but also there is the danger that the motors presently located next to the supplies could cause a fire which would ignite the supplies. I will take what I consider to be remedial action to correct what I have observed, but I do not feel that anything I can do could be considered a permanent solution considering the extremely limited storage areas within the Kodiak Island Hospital Facility.

The cost estimate for the above addition would be approximately \$450,000.00 based on 3,000 square foot at \$150.00 per square foot.

The last item for consideration would be the obtaining of materials for the construction of a garage to be located next to the residence located on the grounds of the Kodiak Island Hospital facility. I would see this addition as being approximately 700 square feet in size and not only including a garage but also storage space for grounds-keeping equipment which is presently inadequately stored in the boiler room. As I discussed with the Board, I would be prepared to construct this addition with the cooperation of the architect from the Lutheran Hospital and Homes Society with the singular provision that the cost for materials and site preparation be born either by the Borough or the State as a capital project. The estimated cost for this addition is \$19,600.00 based on 700 square feet at \$28.00 per square foot.

Sincerely,



Daniel G. Van Wieringen

Administrator

cc: Tom Mingen

Kodiak Island Hospital

P.O. Box 1187
KODIAK, ALASKA 99615

OPERATED BY
LUTHERAN HOSPITALS AND HOMES SOCIETY
FARGO, NORTH DAKOTA 58103

November 2, 1980

Mr. Murray Snyder
Borough Manager
Kodiak Island Borough
Kodiak, Alaska

Dear Mr. Snyder:

As you are aware, effective October 1 Mr. Robert Groff, the administrator of Kodiak Island Hospital, was transferred. Since that time I have been responsible for the operation of the hospital, in addition to my present position as the administrator of Fairbanks Memorial Hospital in Fairbanks. In this interim period I have been helped out by my two assistant administrators in Fairbanks, Russ Cox and Jan Emmert, who have also served interimsly at the Kodiak Hospital.

I am happy to report to you that the Lutheran Hospitals and Homes Society has hired a new administrator for Kodiak Island Hospital. His name is Dan Van Wieringen, and he will start at Kodiak Island Hospital officially on January 3, 1981. He recently started his employment with the Society and has been training in the home office and during the month of December will be training at Fairbanks. He is spending this time to become acquainted with the Society and hospital administration in Alaska before assuming the position in Kodiak. I believe that you will be very impressed with his credentials and with him as an administrator.

Since I am somewhat ignorant about the process or relationship between the Kodiak Island Borough and the hospital, I have taken the opportunity to submit this packet to you so that you might distribute it to all Borough assemblymen for the December meeting. As you know, the hospital's financial year is on a calendar basis and, therefore, we feel it is necessary to appraise the Borough of the budget for the upcoming year at Kodiak Island Hospital.

On page 1 you will find a financial summary for January through September 1980 for Kodiak Island Hospital and intermediate care facility. As you will note, the total combined hospital and home net gain or loss through September is (\$16,572.44). One of the main reasons for this loss is the loss that has occurred in the nursing home, that being (\$119,935.79). This loss was mainly due to the hospital's inability to negotiate with the State of Alaska for an increased rate for the nursing home patients in the facility. I am happy to report that effective October 1 this rate

Mr. Murray Snyder
November 20, 1980
Page Two

has been increased to meet the operating expenses of this facility. What this will mean is that throughout the end of this year, this facility should at least break even for the months of October, November and December. It will depend upon the operating costs associated with the intermediate care facility if this will continue to break even during 1981. Since we were successful in revising the rate effective October 1, we will be watching our operating expenses in this area very closely and will be going back to the state if additional increases are necessary.

On page 2 of the package you will find a projected income and expense budget for Kodiak Island Hospital for 1981. In addition on page 3, you will find a summary of the budget prepared for the intermediate care facility for 1981. In preparing the hospital budget for 1981 we took into consideration certain increases in revenues which we feel should be instituted. All of these revenue increases which we are recommending would go into effect as of January 1, 1981. In addition, the main justification for raising the rates in these specific areas is to have these areas come as close as possible to breaking even. On page 4 you will note the increases by percentages which we are recommending. By recommending these increases we are not recommending that all tests or examinations in each specific area go up by a certain percent. Rather, we are recommending that the total revenue produced in the department be increased by that percent. What this means is that we will be evaluating the tests in each specific department to determine which tests should be adjusted either upward or downward. We will be utilizing the relative value scale in determining what tests or procedures should cost as they relate to any other test or procedure. This will thus mean some tests in the hospital in a certain service will increase while other tests will actually decrease in cost. These recommended increases will not put Kodiak higher in relation to other hospitals the size of Kodiak in the State of Alaska. In fact, Kodiak will be very competitive with hospitals in an area such as Seward, Homer and Soldotna.

On page 5 you will note a proposed equipment list. The first portion of the proposed equipment list has been sent to both Representative Zharoff and Senator Mulcahy. We are hoping, as we did last year, to receive a portion of this equipment through state funding. The second portion of the equipment list is primarily new equipment which we feel to be justified and which should be added to the facility. And, the third portion of the equipment list is for replacement equipment. It should be noted in identifying replacement equipment it is very difficult to tell when many of the items at hospital was actually purchased, since when the Society took over, many of the inventory records were not complete in terms of when the equipment was purchased, how much was paid for the equipment and so forth. Medical equipment is estimated to have a useful life in the range of approximately five years. This is primarily due to obsolescence. You should note on the equipment list there are many items that probably will not be purchased during the next year, but because the hospital has

Mr. Murray Snyder
November 20, 1980
Page Three

no way of identifying when the item had been purchased and what age the items are, it is difficult to determine exactly what items will require replacement in the next year. We have taken a very conservative approach on this and can assure the Borough Assembly that this will be the extent of the items that will need to be purchased. It is also estimated that a number of the items on the list will not have to be purchased.

I will be presenting this material to the Borough Assembly on December 4. At that time I would be more than happy to attempt to answer any questions that any Borough assemblyman or you might have as it relates to the budget proposed, equipment proposed or to the rate increases proposed. I am thanking you in advance for forwarding this information on to the Borough assemblymen so that they might have time to consume this before the December 4 meeting.

Sincerely,


Tom Mingen
Acting Administrator

TM/mw

Kodiak Island Hospital

P. O. Box 1187
KODIAK, ALASKA 99615

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

October 14, 1980

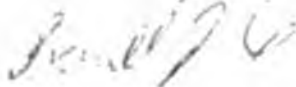
To whom it may concern:

Please find attached an equipment list for Kodiak Island Hospital. Some items on this list are extremely expensive and can be considered important but non-essential. Others will be used relatively little but may be vital in the treatment or care of a patient that otherwise may have to recover in Anchorage or Seattle. There are yet other items that must be considered essential if we plan to maintain high quality patient care.

For your perusal the "First Priority" equipment has been marked with two asterisks (**), the "Second Priority" equipment has been marked with one asterisk (*).

Cost figures are estimates only. Firm quotes can be obtained from vendors as the need arises.

Thank You,



Russell J. Cox
Acting Administrator,
Kodiak Island Hospital

0.00 0.7

278.00 +
1,054.00 +
2,588.00 +
1,200.00 +
950.00 +
750.00 +
450.00 +
700.00 +
1,000.00 +
5,000.00 +
5,000.00 +
5,000.00 +
1,666.67 +
21.00 +
2,103.00 +
1,000.00 +
255.00 +
9,000.00 +
750.00 +
350.00 +
300.00 +
200.00 +
475.00 +
3,750.00 +
3,000.00 +
450.00 +
750.00 +
2,400.00 +
775.00 +
1,000.00 +
500.00 +
1,250.00 +
500.00 +
500.00 +
500.00 +
1,325.00 +
6,000.00 +
14,000.00 +
300.00 +
300.00 +
250.00 +
300.00 +
25,000.00 +
30,000.00 +
10,000.00 +
7,500.00 +
200.00 +
151,640.00 +

LAE

1. SEROFUGE: \$278.00

Our present serofuge was purchased prior to 1974. It is an indispensable part of blood banking, including the typing and cross matching of blood. Due to our present units advanced age and it's importance, I feel that this unit should be used as a back-up by a new unit.

1 FIBROMETER: (coagulation timer) \$1,054.00

Purchased prior to 1974. Does prothrombin times and partial thromboplastin times which monitor coumadin and heparin therapy. We are currently timing by the use of stop watch as the timer isn't working. A new timer is on order. We would like to keep this as a back-up unit to a new unit.

1 PLASMA STORAGE FREEZER: \$2,588.00

Gives the hospital the ability to hold single donor plasma for up to 5 years. This component is useful in the treatment of conditions in which there is a need to replace volume, eg., various forms of shock including acute blood loss while waiting for whole blood. Single donor fresh frozen plasma may also be obtained and used when the labile clotting factors are needed. Can be stored for 1 year.

TO BE
A/RCH.
FROM
LAB
FUNDS

I.C.F.

1 SCALE \$1200.00 FROM ICF FUNDS

1 TV ~~\$950.00~~ DONATED

1 REFRIGERATOR ~~\$750.00~~ DONATED

2 SECRETARY CHAIRS ~~\$450.00~~ DELETED

ANESTHESIA

1 TEMPERATURE PROBE: \$700.00

This device is part of the monitoring requirements of Anesthesia. Our present equipment does not have this capability.

1 VENTILATOR: \$1,000.00

With this piece of equipment we could get accurate flows and analyze the oxygen content in accurate amounts. Also we would have accurate anesthesia levels.

} From
ANES.
FUNDS

OPERATING ROOM

- 1 WASHER STERILIZER WITH STEAM CLEANING CAPABILITY: \$5,000.00

To properly decontaminate instruments and equipment between surgical cases.

- 1 GAS STERILIZER:

~~\$5,000.00~~

{ Until addition is
built we could not
install this.

To reuse unused disposable and non-autoclavable items that would otherwise get thrown out. Cut-out cold sterilization of items that need to be packaged sterily.

- 1 FRACTURE TABLE (depends on "C"-Arm) \$5,000.00

To do hip surgery.

PHYSICAL THERAPY

- 1 ULTRASONIC GENERATOR with underwater treatment set (which includes;

\$2,800.00

- 1 FIBERGLASS BASIN:

~~\$1,666.55~~

An ultrasound machine is essential to our department. It is the basic modality used in treatment of inflamed muscles, tendons, ligaments and nerves. In addition to this it is used with a wide variety of other diagnoses commonly treated in a physical therapy setting. We have no modalities which provide a therapeutic deep heat.

- 1 HAND GRIP EXERCISE SET:

~~\$21.10~~ ordered

Presently we have no graded hand-strengthening system in the department. Again, this is essential for our rehabilitation department.

- 1 TRACTION TABLE PKG: \$2,103.00

This apparatus is equipped to provide constant and intermittent pelvic and cervical traction for those patients requiring it. At present we have only a wall cervical traction unit which does not have an adequate weight regulation or measurement unit. The traction table desired will provide pelvic traction for the many low back strain cases frequently seen with measurable resistance.

BOOKS

~~-----~~ DELETED -

We do not have any rehabilitation literature here. We desperately need some.

NURSING SERVICE

1 AQUA - K-PAD PUMP:

~~\$255.00~~ ORDERED

Presently we have two pumps available for patient use. A third has been ordered. These are used for continuous, warm, moist soaks for patients with cellulitis. Frequently, we have more than two and three patients needing this equipment. During these times, the staff is forced to utilize hot water bottles, or curity heat packs to maintain heat and moisture for brief periods of time. These methods do not meet the patients needs and physicians orders. A forth pump will alleviate this frequent shortage and cover for breakdowns.

4 CARDIAC MONITORS to replace those in ICU and at the Nurses Station
\$9,000.00

Our present monitors are 8-10 years old. The medical electronics technician has reported that the present equipment is not solid-state and therefore will continue to break down frequently. We presently utilize the monitors on an average of 13.3 days each month for 5.5 ICU/CCU patients per month.

1 PORTABLE BILIRUBIN LIGHT:

\$750.00

This equipment is necessary for newborn care. We presently have a home constructed model that overheats and turns off frequently during the treatment regimes for the newborn infant with hyperbilirubinemia. We now utilize the portable model from the U.S.C.G. Base to provide safe and continuous therapy.

1 THE DUKANE PROJECTOR:

~~\$350.00~~ DELETED

This is newer model (#28A1A) that has a coordinated audio cassette and film projector on a small portable screen. It will be utilized by the hospital staff for continuing education and for patient teaching.

10 TRAINEX FILMS FOR NURSES USE:

~~\$800.00~~ DELETED

There are several films for patient teaching that the staff will utilize with individuals and groups of patients. These include areas of cardiac, nutrition, infant care and emergency care among others.

1 PRESSURE MATTRESS:

Requested by a physician. Presently, we utilize egg shell mattresses for bed ridden patients. The requested mattress is an alternating pressure water mattress.

1 CRAIG LANGUAGE TRANSLATOR WITH TAPES:

~~\$200.00~~ DELETED

For use with foreign patients - usually from Medivac's. Translator works with cartridges that give the programmed foreign work or phrase when the English is keyed in. The translator would assist all hospital personnel in working with the foreign patients. Languages needed include Spanish, Japanese, Korean, Russian, Polish and German.

NURSING SERVICE CONTINUED

1	DOPTONE	\$475.00
1	KRISELMAN - OHIO UNIT	\$3750.00
1	ISOLETTE	\$3000.00
1	TYPEWRITER	\$950.00
1	AIR COMPRESSOR	\$750.00
2	IVAC TO REPLACE HOLTER PUMPS	\$2400.00
5	PORTABLE IV STANDS	\$775.00
1	O ₂ & SUCTION UNIT	\$ —
1	REFRIGERATOR	\$500.00
1	ICE MACHINE	\$1250.00
1	PREP TABLE	\$500.00
1	TV	\$500.00
1	CRADLE	\$500.00
3	GOMCO'S	\$1325.00
5	RECOVERY ROOM BEDS	\$6000.00

LEASED

Requested as donation

COMBINATION UNIT
UNDER CONSIDERATION

DONATED

DELETED

HOUSEKEEPING

1 WASHING MACHINE AND 1 CLOTHES DRYER:

~~\$14,000.00~~

ORDERED - TO BE
PAID FROM BOROUGH FUNDS
One of them is always

The present clothes washer and dryer are worn out. breaking down.

1 RUG SHAMPOOER:

~~\$300.00~~

ORDERED

The shampooing was always done with the old buffer in the past. That buffer has been replaced now and the new one does not have shampooing capabilities.

1 VACUUM CLEANER:

~~\$300.00~~

ORDERED

The present vacuum cleaner is very old. The bearings fall out of it when it is used.

1 VACUUM CLEANER:

~~\$250.00~~

ORDERED

Back-Pak

HOUSEKEEPING CONTINUED:

6pr. Washable drapes for the isolation rooms.

~~\$500.00~~ DELETED

X-RAY

1 14 x 17 GRID:

~~\$300.00~~

ORDERED

Our present 14 x 17 grid has been well used and is slightly bent. The corners are also beginning to fray. To put it simply, our grid has been well used and is worn out.

1 ULTRASOUND UNIT: (with Real Time)

\$25,000.00

Ultrasound capability has tremendously increased diagnostic imaging in the past couple of years. Ultrasound is compatible with diagnostic x-ray in many areas such as gall bladders, prenatal studies, kidney and bladder exams. In these examinations ultrasound imaging often surpasses the information obtainable with standard x-rays. So far as it is known ultrasound eliminates radiation hazards, an important factor, especially during pregnancy. Another advantage of ultrasound, is the ability to examine body parts, organs, vessels, etc., which is not possible or feasible with our present diagnostic x-ray set-up.

1 PORTABLE X-RAY MACHINE:

\$30,000.00

Our present portable x-ray machine is approximately 10 years old. It has been tested for calibration and is 10KUP less at all KUP stations than our main unit. Our present mobile unit requires plug-in of either 200 V or 110 Volt. Every circuit in the hospital has 110 Volt but there are few 220 Circuits. Using the 110 Volt outlets reduces the flexibility of this machine by one-half (4). The machine I've requested is battery operated to eliminate this problem.

1 14 x 30 CASSETTE:

~~\$500.00~~

ORDERED

I didn't request this. It could be used for scoliosis studies, but it doesn't fit in the table. Grids for front must be included, which would raise the cost to \$1,500.00.

1 REPLACEMENT X-RAY TUBE

\$10,000.00

1 REPLACEMENT X-RAY TUBE-PORTABLE

\$7,500.00

CONTINGENCY FROM
BOROUGH FUNDS.

PURCHASING

1 Set of shelves

~~\$200.00~~

DELETED

To provide additional storage.

H B

167

February 17, 1981

Speaker of the House
Alaska State Legislature
Pouch V
Juneau, AK 99811

Dear Mr. Speaker:

Under the authority of art. III, sec. 18, of the Alaska Constitution, I am transmitting a bill making amendments in the Alaska Child Support Enforcement Act (AS 47.23). The bill would make technical amendments in the law for the purpose of clarification. The bill also would enhance the ability of the Child Support Enforcement Agency to enforce child support obligations in the state.

The bill would allow the agency to seek an order for the payment of child support based upon the non-custodial parent's ability to pay without limitation as to the amount of public assistance provided to the minor child. The difference between the support collected and the amount of the public assistance grant will be paid to the obligee. This change may permit the agency to collect enough support to remove the minor child from the public assistance rolls.

The bill would amend the authority of the agency to administratively order the delivery of earnings of an obligor to make the order effective for as long as a support debt exists. This change will free the agency from the burden of refiling the withhold and deliver order against earnings for each pay day of the obligor.

The bill would also exempt 50 percent of the earnings of an obligor from a withhold and deliver order. Existing law allows the seizure of all of an obligor's earnings to satisfy a support debt. The proposed amendment would protect enough of the earnings of the obligor to provide for that person's subsistence while also providing a contribution to the support obligation.

Sincerely,

JSH

Jay S. Hammond
Governor

Child Support Enforcement Admendment

The Agency shall provide to the obligor upon his request the address of the obligee under the following conditions:

- 1) The obligor is current in child support payments
 - 2) There is a court order granting the obligor visitation rights
- The address of the obligee shall not be provided to the obligor if the agency knows of any court order forbidding contact between the obligee and obligor.

MEMORANDUM


State of Alaska

TO File

DATE March 3, 1981

FILE NO:

TELEPHONE NO:

FROM:  Dan Kopsland
Director

SUBJECT: HB 167 "An Act relating to the
Enforcement of Child Support"

This bill makes a number of legal terms clarification which will help all parties. Other states have adopted measures similar to those proposed in this bill with great benefit to all parties. From our perspective the changes, clarifications and improvements most noteable would be the following:

1. A change in the consumer price index of 20% or more could be used by either party to support a change in circumstances when modifying an existing order.
2. The absolute mandate to charge fees for service provided by the agency would be changed to allow the agency the discretion to charge reasonable fees if needed. Those individuals who could not afford to pay a fee would still receive the services for free.
3. The agency could proceed to establish a child support order for an AFDC recipient obligee for the full amount of the obligors ability to pay rather than limiting the order to the amount of AFDC granted to the obligee.
4. When the agency attaches an obligors wages, 50% of the income would be exempt from attachment.
5. The agency would not be required to reserve withhold and deliver attachments every 30 days to people that have already been formally notified of the unpaid obligation.

All of the points discussed will aid the agency in its effort to collect child support. Collection of child support on a regular basis has the direct effect of reducing the possibility that the single parent family will want financial assistance in the form of AFDC and Medicaid. No part of this bill requires the obligors to do anything that they have not already promised that they would do in the first place.

STATE OF ALASKA

JAY S. HAMMOND, GOVERNOR

DEPARTMENT OF REVENUE

OFFICE OF THE COMMISSIONER

POUCH 5
JUNEAU, ALASKA 99811

January 23, 1981

The Honorable Jalmer Kerttulla
President, Alaska State Senate
Alaska State Legislature
Pouch V
Juneau, AK 99811

Subject: Status of Child Support Agency Fee Development

Dear Mr. Kerttulla:

Since 1975 the Federal Government has provided 75% of the funds to operate each state's child support enforcement program. This federal funding was unlimited as long as the state provided the matching 25% and all program activities were directly related to child support enforcement. The funding covered both the Aid to Families with Dependent Children (AFDC) and non-AFDC child support cases. However, on March 31, 1980 the federal funding for the non-AFDC caseload terminated and reinstatement of this funding did not appear possible in FY 82.

When this problem was brought to the attention of the legislature by the department and concerned obligees, immediate action was taken. The Budget Free Conference Committee added \$300,900 to the Child Support Enforcement Agency (CSEA) FY 82 budget to specifically fund staff to handle the non-AFDC caseload. The committee also added the following intent language to the budget:

"The Department of Revenue will establish a sliding scale collection fee schedule for the non-AFDC caseload based upon an individual's economic ability to pay. The amount of the General Fund appropriation is to be reduced by the amount of those non-AFDC case collection fee receipts."

In June of 1980, Congress unexpectedly passed legislation which reinstated the federal funding for the non-AFDC caseload. As a result of this legislation, all of the additional \$300,900 will be returned to the General Fund at the end of the fiscal year. In my letter of October 13, 1980 to each member of the legislature, the funding situation was explained in detail.

Even though all the additional funds provided will be returned to the General Fund, the Department has proceeded to implement the intent language. In reviewing the intent language the question is raised as to which party, the obligor, as the absent parent, or the obligee, as the child's custodial parent, should pay the fees. The Alaska Statute address this issue directly by stating that the obligee may be assessed a fee. AS 47.23.100 states in part:

"If the agency determines that the obligor is financially able to pay, costs shall be assessed according to regulations adopted by the department."

Consideration has also been given to charging fees to the obligor. In this regard, our initial review indicated clearly that charging the obligor a fee, in most cases, would simply deprive the children of some part of those funds which are currently being collected because of the detrimental effect the fee had on overall collections.

Based on their experiences prior to the creation of the Child Support Enforcement Agency, the Alaska Court System has advised against charging the obligor a fee for services. The Court system dealt with charging the obligor for a number of years. Initially they did not provide for a charge, this was followed by a change to charging the obligor and then they changed back to not charging either party. Prior to March 1, 1965, a 3% collection fee was deducted from the money sent to the obligee on cases where the State of Alaska provided reciprocal action. After that, from March 1, 1965 to June 30, 1974 a 3% collection fee was added to the required payment from the obligor. On July 1, 1974 the courts abolished all fees to either party. The fees were dropped for the following reasons:

1. The 3% level was too low to make the fee administratively effective.
2. Collecting the fee from the obligor had a strong tendency to discourage payment altogether.
3. Collecting the fee from either party had a tendency to encourage people to not use the system at first. In most cases the people returned to the system because of subsequent collection problems. The cases were then far more difficult to handle and required substantial work to collect all of the information for the periods the system was not used.
4. In view of the generally high payment delinquency, it was determined that all money collected should be used to provide the needed support of the children.

As an additional preparatory step in establishing a sliding scale fee schedule, in July 1980 the agency completed a study of the thirty states in the nation which charge a fee of any type for child support services. The two main conclusions which resulted from doing this study are as follows:

1. When a fee is collected in sufficient amount to have any significant financial impact on the agency, the fee acts as a deterrent to the non-AFDC client seeking services.
2. When the ability to pay determinations are made with a formal screening process, that process itself takes substantial effort. For example, the necessity to update the ability to pay determination periodically throughout the eighteen year emancipation period would be very time consuming.

The directors of each state's child support program hold an annual meeting to discuss national legislation and exchange views on various issues such as Alaska's fee program. In the September 1980 meeting, the two conclusions developed in the Fee study and the court system's experiences were analyzed further. The other directors concurred with the conclusions we had reached.

Proposed regulations as required by AS 47.23.100 were then prepared for public hearing. The regulations were drafted to make administration of the program as simple as possible. However, the requirement to initially determine and periodically review the obligees ability to pay the fee will require four full time positions. These positions would either have to come from our present enforcement staff or would need to be authorized as additional positions if the current staff assignments are to remain unchanged. The fee program is projected to collect \$321,600 annually and the direct personnel cost will be \$102,330 annually. It is impossible to measure the effect of the reduction in collection effort if the four positions were taken from current staff.

Public hearings on the proposed regulations were conducted in December, 1980, in Anchorage, Fairbanks, Juneau and teleconferenced to Sitka. Comments were received from obligors, obligees, interested individuals and organizations. The following organizations provided both written and oral comment; Alaska Legal Services, Aiding Women from Abuse and Rape Emergencies, Advocates for Child Support, Alaska Commission of the Status of Women, Women in Crisis, Coalition

for Economic Justice, National Organization for Women, Federally Employed Women, Radical Women's Group, Women's Resource Center, Valley Women's Group, Fairbanks Child Protection Task Force, and the Alaska Court System.

All of the testimony either generally opposed the imposition of a fee on either party or made salient points about the operation or funding of the agency. In the operational area it was pointed out that the agency should not attempt to replace the Courts in deciding ability to pay, parental responsibility, or the amount of money due from the obligor. It was also stated that when the obligee approaches the agency, they are not requesting a service, but are filing a complaint of noncompliance with an established court order. With regard to the general funding of the agency several people pointed out that the state is only required to fund 25% of the agency's costs and these costs to the state were reduced even further by one half of the AFDC collections. The apparent abundance in the state Treasury and the state's limited funding requirement made most people suggest a change in the law to delete the imposition of fees on either party.

In regard to the issue of funding, it should be noted that the state's 25% funding requirement for the CSEA FY 82 budget is \$655,300 of General Fund matching funds. The projection for the collection of AFDC by the agency for FY 82 is \$1,250,000. This will return \$625,000 directly to the General Fund. In addition to this, our projection is that we will collect \$75,000 in program receipts which all go into the General Fund. Thus, at this level of collection, even without the fee program, CSEA will actually produce receipts in excess of the state's appropriation and will return to the General Fund in FY 1982 700 more than the amount required to operate the program.

In conclusion, the primary testimony from all parties was in opposition to the fee program. The following were the main points of objection:

1. The terminated federal funding which created the agency's financial need for the fee program has been reinstated.
2. Administering a fee schedule will either take people away from the current enforcement effort and thereby reduce the current collection potential or will require additional staff.
3. All money collected should be used for the child, not to pay the state which is already receiving more funds from the collection efforts than the general fund appropriation.

4. AS 47.23.100 should be amended to eliminate the requirement to assess fees for child support services.

After our public hearings were concluded, we received several inquiries from individuals who were unable to come and testify either; (1) due to the extreme weather during the week of the hearings; (2) because the hearings were held during working hours and they could not get away from work in order to provide their testimony; or (3) because the majority of the obligees were not aware that the fee schedule was being considered. As a result of these inquiries, additional hearings are scheduled for March 2, 3, 4, 1981. These hearings will be conducted at 7:00 p.m. rather than 1:00 p.m., which will allow the working parents to attend. Also, all obligees who are currently receiving payments will be notified of the hearings to enable them to attend and express their concerns. The proposed effective date of the regulation has been extended to April 15, 1981.

Upon conclusion of this next group of hearings, careful consideration will be given to all the input we have received and a determination will be made as to whether to proceed with charging fees, and if so, who should pay the fees and how much should be charged.

Sincerely,

Thomas K. Williams
Commissioner

cc: Senator Don Bennett
Co-Chairman Senate Finance Committee

• Senator M. E. Dankworth
Co-Chairman Senate Finance Committee

5-4 1209
825
C. K. 1209
825
Mona Clark
P. O. Box 1429
Valdez, Alaska 99686

February 26, 1981

MAR 2 1981

Department of Revenue
Child Support Enforcement Agency
201 E. 9th Avenue, Suite 202
Anchorage, Alaska 99501

To Whom It May Concern:

I hereby urge that AS 47.23.100 be amended to eliminate the requirement to assess fees for child support.

This piece of legislation is unnecessary. The federal funding for AFDC which was terminated in March of 1980 has been reinstated; the state funding of the remaining 25% is also guaranteed.

Any fees that could be collected would certainly be used in the administering of a fee schedule in determining the obligee's ability to pay and in the continuous updating of the obligee's financial status, etc.

I also question whether the imposition of such an assessed fee would be discriminatory. An obligee should not be penalized for earning an adequate income!

Sincerely,

Mona Clark

Mona Clark

cc: Jalmer Kerttula, President, Alaska State Senate
Bette Lato, Representative, Alaska State Legislature

Beth if possible, let me know how this goes.

*Shanker.
Mona*

Feb 28, 1981

Betty Cate,

This letter concerns AS 47.23.100. Legislators must amend the law so that it doesn't add oppression upon custodial parents, the majority who are women, and so that it cannot be said that our state, so rich, must snatch food from babies.

If the law were not amended, many parents, hoping to make ends meet, would opt out of the program, even though in the long run this would probably be a costly mistake. Times are hard, especially for single female parents.

The question is, how greedy is our state, and how morally bankrupt are our legislators? Thankyou for your effort to amend this law.

Elaine Vondraich
3513 Bruce Lane
Anch AK 99503

POSITION PAPER

ON

House Bill No. 167

3/5/81

yes

"An Act relating to the enforcement of child support"

Among numerous other changes, this bill would expand the Department of Revenue's authority to adjust child support payment amounts to keep pace with inflation, and to more fairly obtain an absent parent's money and property in order to satisfy an obligation to support.

This Department is aware that other states have adopted measures similar to those proposed in this bill, with strikingly effective results. We have no doubt that these changes would increase the effectiveness of Alaska's Child Support Enforcement Agency. From our perspective, improvements would be most noticeable in the following ways:

1. Court-ordered child support payment amounts in our Aid to Families with Dependent Children (AFDC) recipients' cases tend to be inadequate when the court order is new. With the effects of years of increases in living costs, they get more and more inadequate. Even if child support is being collected it is not likely to be in an amount sufficient to enable the children to go off of assistance and live in dignity and independence.

Section 3 of HB No. 167 would undoubtedly have two beneficial effects by promoting revision of ordered amounts to keep pace with the actual costs of raising children: (a) single-parent families now able to exist without public assistance payments will be less likely to come on the AFDC rolls if the cost of living would no longer erode the purchasing power of their child support payments; and (b) Those families now receiving AFDC assistance on whose behalf the Agency is collecting child support are more likely to reach a level of child support collections which will eventually exceed the AFDC qualifying income standards. They would therefore leave the AFDC program and be able to live independently.

2 Similarly, the expanded ability of the Child Support Enforcement Agency to establish and adjust child support obligations, with its expanded ability to more easily compel withholding and delivery of the absent parents' earnings, will have positive preventive and corrective effects. Efficiency in these areas help insure that modest-income single parent families will be less likely to need or want financial assistance of all types, including AFDC and Medicaid. Similarly, improving the capability of CSEA to collect substantial child support will be reflected by a decrease in the total amount of public funds paid to recipients, and by an increase in the number of families who are able to leave the assistance rolls.

POSITION PAPER/Department of Health & Social Services

The Department supports the passage of HB No. 167.

Recommended by:

Rod Betit

Rod Betit, Director
Division of Public Assistance

Date:

2-28-81

Approved by:

Helen D. Beirne

Helen D. Beirne
Commissioner

Date:

2-28-81

THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST
 Bill/Resolution No. House Bill No. 167
 Title An Act relating to the enforcement of child support
 Requested by Rules, by Request Date 2/27/81

II. FISCAL DETAIL
 Agency Affected Health & Social Services
 Program Category Affected Social & Economic Assistance for the general population
 BRU, Program, or Subprogram(s) Affected Assistance payments, AFDC
 (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 81	FY 82	FY 83	FY 84	FY 85	FY 86
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.		0	0	0	0	0
TOTAL		0	0	0	0	0

FUNDING (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

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

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

The Department believes that passage of HB No. 167 may well result in an eventual small reduction in the rate of growth of AFDC expenditures. However, the amount of any such reduction would be contingent upon so many factors that its actual amount cannot be estimated.

IV. DATE 2/27/81 PREPARED BY [Signature]
 AGENCY Health & Social Services
 PHONE 465-3112
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named) M&B Approval Date 2/27/81

MEMORANDUM

State of Alaska

TO File

DATE March 3, 1981

FILE NO

TELEPHONE NO

FROM Dan Copeland
Director

SUBJECT House Bill 167

The following is a detailed commentary on HB 167.

Section: 1 AS 25.25.010(1)

Adding new language to AS 25.25.010(1) will allow the agency to enter into reciprocal agreements with foreign countries that have a similar Uniform Reciprocal Enforcement of Support Act. This would include such countries as Federal Republic of Germany (West Germany), Great Britain, Canada, and other commonwealth countries. This would allow the agency to obtain a child support order when the absent parent is located or resides in a foreign country.

Section: 2 AS 47.23.020(2)(A)

The additions and deletions to AS 47.23.020(2)(A) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "minor child" and "obligee".

Section: 3 AS 47.23.060

Adding a new subsection to AS 47.23.060 will make it easier to modify an existing child support order. Allowing a change of 20% or more to be used as evidence of a change of circumstance relieves both parties and the court system of some of the clerical burdens in requesting a modification. Allowing the change to be used in this manner does not lead either party to believe that the increase or decrease they are seeking will be automatic.

Section: 4 AS 47.23.100

The additions and deletions to AS 47.23.100 will correct the current language to allow the Department of Revenue the discretion as to whether or not the agency should charge fees. The current language does not allow the department to make this decision. The agency is now required to determine each obligee's ability to pay and then assess costs or fees accordingly. The statute change will allow the agency to charge fees when funding or other requirements dictate it, but will not require the agency to maintain fee regulations unless those regulations are to be utilized.

Section: 5 AS 47.23.110(4)

The additions and deletions to AS 47.23.110(4) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "minor child" and "custodial parent".

Section: 6 AS 47.23.110 (7), (8) and (9)

Adding new sections AS 47.23.110 (7), (8) and (9) will provide a definition for the "consumer price index", "interest" and "disposable earnings".

Section: 7 AS 47.23.130

The additions and deletions to AS 47.23.130 will allow the agency to establish child support orders based upon an obligor's full ability to pay rather than limiting the order to the public assistance issued. Making regular collections for orders established based on an obligor's full ability to pay will in some cases take the obligee off of the AFDC rolls. Any collections over the assistance granted will be given to the obligee for the care of the child.

Section: 8 AS 47.23.150

Adding a new subsection AS 47.23.150(C) will eliminate part of the obligor's option to simply ignore the child support obligation.

Section: 9 AS 47.23.160(b)

The additions and deletions to AS 47.23.160(b) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "minor child", "obligee" and "custodian".

Section: 10 AS 47.23.160(C)

Adding a new subsection AS 47.23.160(c) will eliminate part of the obligor's option to simply ignore the child support obligation.

Section: 11 AS 47.23.170(e)

The additions and deletions to AS 47.23.170(e) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of terms "minor child" and "obligee".

Section: 12 AS 47.23.170(F)

The additions and deletions to AS 47.23.170(F) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of terms "finding" and "filing".

Section: 13 AS 47.23.190(a)

The deletions to AS 47.23.190(a) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "obligee" / "custodian".

Page 3
File/HB 167
March 3, 1981

Section: 14 AS 47.23.190(c)

The deletions to AS 47.23.190(c) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "obligee" and "custodian".

Section: 15 AS 47.23.255

Adding a section to AS 47.23 will make an order to withhold and deliver more efficient by requiring less repetitive paperwork. This subsection will allow a third party to continue holding 50% of wages or earnings as it becomes due to the delinquent obligor until the total arrearage stated in the notice of the delinquent obligor's liability has been satisfied. Prior to issuing a withhold and deliver attachment the obligor is formally notified of the delinquency and is given 30 days to make arrangements with the agency to satisfy the delinquency. The agency and the third party will only have to serve and receive the order to withhold and deliver once in those cases where the obligor has not made the payments as required by court order.

Adding a new section will also allow the agency to attach any tax refunds or any other distributions made by the state to delinquent obligors up to the amount of arrearage stated in the order to withhold and deliver.

MEMORANDUM

State of Alaska

TO: File

DATE: March 3, 1981

FILE NO:

TELEPHONE NO:

FROM: Dan R. Copeland
Director

SUBJECT: SB/181 "An Act Relating to the Enforcement of Child Support and Changing Rule 56 of the Alaska Rules of Civil Procedure".

This bill makes a number of legal terms clarifications which will help all parties. Other states have adopted measures similar to those proposed in this bill with great benefit to all parties. From our perspective the changes, clarifications and improvements most notable would be the following:

1. Child Support payments could be modified through normal judicial means, based upon a change of 20% in the consumer price index.
2. Arrearage from non payment of child support could be reduced to judgement via a simplified process by changing Rule 56 of the Alaska Rules of Civil Procedure.
3. The absolute mandate to charge fees for service provided by the agency would be changed to allow the agency the discretion to charge reasonable fees if needed. Those individuals who could not afford to pay a fee would still receive the services for free.
4. The agency could proceed to establish a child support order for an AFDC recipient obligee for the full amount of the obligor's ability to pay rather than limiting the order to the amount of AFDC granted the obligee.
5. The agency could file a child support order obtained through administrative means with the superior court. The normal appeal process would be available, but if appeals were not filed, the court may issue an order confirming the administrative decision.
6. The agency would not be required to re-serve withhold and deliver attachments every thirty days to people who have already been formally notified of the unpaid obligation.

All of the points discussed will aid the agency in its' effort to collect child support. Collection of child support on a regular basis has the direct effect of reducing the possibility that the single parent family will want financial assistance in the form of AFDC and medicaid. No part of this bill requires the obligors to do anything that they have not already promised that they would do in the first place.

3/25

Introduced: 2/17/81
Referred: Health, Education &
Social Services and Judiciary

1 IN THE HOUSE

BY THE RULES COMMITTEE BY
REQUEST OF THE GOVERNOR

2 HOUSE BILL NO. 167

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TWELFTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to the enforcement of child support."

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

8 * Section 1. AS 25.25.010(1) is amended to read:

9 (1) "state" includes the State of Alaska and a state, terri-
10 tory, or possession of the United States and the District of Columbia,
11 and a foreign country in which this or a substantially similar recipro-
12 cal law has been enacted;

13 * Sec. 2. AS 47.23.020(2)(A) is amended to read:

14 (A) schedu' is for determining the amount an obligor is
15 liable to contribute toward the support of a minor child [AN
16 OBLIGEE] under this chapter and under Title IV-D, Social Security
17 Act;

18 * Sec. 3. AS 47.23.060 is amended by adding a new subsection to read:

19 (d) In any proceeding to modify the duty of support, a change of
20 20 percent or more in the consumer price index which occurs after the
21 establishment of or modification of a judicial or administrative sup-
22 port order is evidence of a change of circumstances.

23 * Sec. 4. AS 47.23.100 is amended to read:

24 Sec. 47.23.100. ALL PERSONS MAY USE AGENCY. The agency shall
25 provide aid to any person due child support under the laws of this
26 state upon application. If the obligee is indigent or otherwise unable
27 to pay for these services, the agency shall act without charge to the
28 obligee. The agency may impose fees for services provided under this
29 chapter, which [IF THE AGENCY DETERMINES THAT THE OBLIGEE IS FINAN-

1 CIALY ABLE TO PAY, COSTS] shall be assessed according to regulations
2 adopted by the department and [BE] paid into the fund established in
3 AS 47.23.030.

4 * Sec. 5. AS 47.23.110(4) is amended to read:

5 (4) "obligee" means the custodial parent or person who has
6 physical custody and responsibility for the minor child [A PERSON] to
7 whom a duty of support is owed;

8 * Sec. 6. AS 47.23.110 is amended by adding new paragraphs to read

9 (7) "consumer price index" means the All Urban Consumer
10 Price Index as compiled by the United States Department of Labor,
11 Bureau of Labor Statistics, for Anchorage, Alaska or, if the obligor
12 and obligee live in the same judicial district, the index for a muni-
13 cipality within that judicial district, if the United States Department
14 of Labor compiles an index;

15 (8) "earnings" (A) means compensation paid or payable for
16 personal services, whether denominated as wages, salary, commission,
17 bonus, or other similar description and includes the gain derived from
18 the investment of capital, from labor, or from a combination of in-
19 vestment and labor; and (B) does not include profit gained from the
20 sale or conversion of a capital asset;

21 (9) "disposable earnings" means that part of the earnings of
22 an individual which remains after the deduction from those earnings of
23 any amount required by law to be withheld.

24 * Sec. 7. AS 47.23.130 is repealed and reenacted to read:

25 Sec. 47.23.130. SUBROGATION OF STATE. (a) If the obligor is li-
26 able to the state under AS 47.23.120(a) or (b), the state is subrogated
27 to the rights of the obligee to:

28 (1) bring an action in the superior court seeking an order
29 of support or modifying an existing order of support;

1 (2) proceed under AS 47.23.160 -- 47.23.270 to establish or
2 modify a duty of support; or

3 (j) enforce by execution, in accordance with AS 47.23.230 --
4 47.23.270, or otherwise, a support order entered in favor of the obli-
5 gee.

6 (b) To establish, ~~modify~~ or enforce an order of support, based
7 upon the subrogation of the state, the agency is not limited to the
8 amount of assistance being granted to the minor child.

9 (c) The recovery of any amount for which the obligor is liable
10 which exceeds the total assistance granted under AS 47.25.310 -- 47.25.-
11 420 shall be paid to the obligee.

12 * Sec. 8. AS 47.23.160 is amended by adding a new subsection to read:

13 (c) ~~Refusal~~ by the obligor to accept the notice is considered
14 service ~~as of~~ the time of the refusal.

15 * Sec. 9. AS 47.23.160(b) is amended to read:

16 (b) The notice and finding of financial responsibility served
17 under (a) of this section shall state

18 (1) the sum or periodic payments for which the alleged
19 obligor is found to be responsible, calculated by taking into consid-
20 eration the need of the ~~minor~~ child [ALLEGED OBLIGEE], the alleged
21 obligor's liability to the state under AS 47.23.130 if any, and his
22 duty of support under the law;

23 (2) the name of the alleged obligee and ~~the minor~~ child [HIS
24 CUSTODIAN];

25 (3) that the alleged obligor may appear and show cause in a
26 hearing held by the agency why the finding is incorrect, should not be
27 finally ordered, and should be modified or rescinded, because (A) no
28 duty of support is owed, or (B) the amount of support found to be owed
29 is incorrect;

1 (4) that if the person served with the notice and finding of
2 financial responsibility does not request a hearing within 30 days, the
3 property of the person will be subject to execution in accordance with
4 AS 47.23.230 -- 47.23.270 in the amounts stated in the finding without
5 further notice or hearing.

6 * ~~Sec. 10.~~ AS 47.23.160 is amended by adding a new subsection to read:

7 (c) ~~Refusal~~ by the obligor to accept the notice is considered
8 service as of the time of the refusal.

9 * Sec. 11. AS 47.23.170(e) is amended to read:

10 (e) The hearing officer shall consider the following in making
11 his determination under (d) of this section:

12 (1) the needs of the ~~minor child~~ [ALLEGED OBLIGEE], disre-
13 garding the income or assets [OF THE CUSTODIAN] of the alleged obligee;

14 (2) the amount of the alleged obligor's liability to the
15 state under AS 47.23.120 [AS 47.23.125] if any;

16 (3) the intent of the legislature that children be supported
17 as much as possible by their natural parents;

18 (4) the ability of the alleged obligor to pay.

19 * Sec. 12. AS 47.23.170(f) is amended to read:

20 (f) If the alleged obligor requesting the hearing fails to appear
21 at the hearing, the hearing officer shall enter a decision declaring
22 the property of the alleged obligor subject to execution in accordance
23 with AS 47.23.230 -- 47.23.270 in the amounts stated in the notice and
24 finding [FILING] of financial responsibility.

25 * Sec. 13. AS 47.23.190(a) is amended to read:

26 (a) Unless a support order has been entered, the obligor, or the
27 ~~obligee~~ [OR HIS CUSTODIAN], may petition the agency or its designee for
28 a modification of the finding or decision of responsibility previously
29 entered with regard to future periodic support payments.

1 * Sec. 14. AS 47.23.190(c) is amended to read:

2 (c) If a hearing is granted, the agency shall serve a notice of
3 hearing together with a copy of the petition and affidavits submitted
4 on the obligee (OR HIS CUSTODIAN) and the obligor personally or by
5 registered, certified, or insured mail, return receipt requested, for
6 restricted delivery only to the person to whom the notice is directed
7 or to the person authorized under federal regulation to receive his
8 restricted delivery mail.

9 * Sec. 15. AS 47.23 is amended by adding a new section to read:

10 ~~Sec. 47.23.255. EARNINGS EXEMPT FROM ORDER OR LIEN. (a) Not~~
11 ~~more than 50 percent of the disposable earnings of the obligor is~~
12 ~~exempt from an order to withhold and deliver under AS 47.23.250. The~~
13 ~~exempt part of the disposable earnings may be paid to the obligor even~~
14 ~~if the earnings are paid monthly, weekly, or at other intervals.~~

15 (b) A person, political subdivision, or department of the state
16 shall withhold the nonexempt part of the earnings of the obligor at
17 each succeeding interval of payment until the entire amount of the debt
18 stated in the order to withhold and deliver has been withheld.

19 (c) An order to withhold and deliver issued to the Department of
20 Revenue remains in effect throughout the calendar year in which it is
21 served. That order applies to any tax refund or other disbursements to
22 which the obligor is entitled even if the tax refund or disbursement is
23 issued more than 30 days after service of the order.
24
25
26
27
28
29

MEMORANDUM

State of Alaska

TO: File

DATE: March 3, 1981

FILE NO:

TELEPHONE NO:

FROM:

Dan Copeland
Director

SUBJECT: HB 167 vs SB 181 on all points
HB 167 vs HB 175 on the fee issue

The two bills are very similar in nature, both making identical technical changes to clarify legal terms. Each bill then goes on to deal with four common points, with HB 167 providing language which provides a better overall approach and technical applicability.

HB 167 includes a good clarification of an income exemption for the obligor. This point is critical as the obligor's gainfull employment as well as the reasons to stay that way are most important for continued collections.

SB 181 makes four additional changes which are not of great importance to the operation of the agency. The first change requires changing civil procedure rules and the second may require a rule change. This makes final passage into law more difficult. The agency does not feel the changes which can be accomplished by operational shifts are worth the increased difficulty in getting final approval. The third change is to cover a potential problem if the agency starts to have trouble registering foreign orders. The fourth is a title change in a section which is not critical in any way.

The current statute mandates the agency to charge reasonable fees to those that can afford to pay for the services. HB 175 takes the opposite approach and mandates providing the services to everyone regardless of conditions. HB 167 provides the Department of Revenue the discretion to charge fees to those that could afford it, if financial or other requirements mandated it.

My opinion as the State of Alaska, Child Support Director is that HB 167 rather than HB 175 or SB 181 would be of considerable benefit to the State of Alaska.

MEMORANDUM

State of Alaska

TO File

DATE March 3, 1981

FILE NO

TELEPHONE NO

FROM Dan R. Copeland
Director

SUBJECT Senate Bill 181

The following is a detailed commentary on SB 181.

Section: 1 AS 09.55.220 The new subsection to be added to AS 09.55.220 will be used in the effort to modify an existing child support order. Allowing the change in consumer price index to be used as prima facie evidence of a change in circumstances will cut the handling time required by the court system and reduce the contact required from both parties. Each side will have a better idea as to when a modification may be requested. The index will be used as one of the burdens of proof but can not be used to require automatic modifications. All child support orders and subsequent modifications are based upon two factors; ability of the obligor to pay and the needs of the child. This change appears to be aimed at automatic modification upon a 20% change in the index. Actually both parties may use the change to support an increase or decrease. Section 3 of HB 167 accomplishes much the same thing without clouding the issue.

Section: 2 AS 25.55.010(1) Adding new language to AS 25.55.010(1) will allow the agency to enter into reciprocal agreements with foreign countries that have a similar Uniform Reciprocal Enforcement of Support Act. This would include such countries as Federal Republic of Germany (West Germany), Great Britain, Canada, and other commonwealth countries. This would allow the agency to obtain child support order when the absent parent is located or resides in a foreign country.

Section: 3 AS 25.25.010(6) Adding new language to AS 25.25.010(6) will provide the obligor in URSEA cases with an incentive to make payments on a current basis. The overdue fee will be charged and subsequently collected or reduced to judgment. This additional charge will make the delinquent obligor, who in fact creates the need for the agency, pay for a portion of the agency cost.

Section: 4 AS 25.15.010(11) Adding new language to AS 25.25.010(11) will simply provide an explanation as to what interest means. This amendment should be changed to read "or at the rate established by the Department of Revenue (was the Department of Health and Social Service)

Section: 5 AS 25.25.250 Adding a new sub-section to AS 25.25.250 will allow the agency to register a support order from another state when the obligee is not a resident of Alaska and the obligor is a resident of

Alaska without opening the matter of custody and visitation. This will simplify obtaining an Alaska order by reducing handling, legal processing, and court time when the obligee has already obtained a child support order in another state. Some states do request the State of Alaska to register their orders under the current statute. No problems have been noted to date in this matter of reopening custody or visitation. This statute change would ensure that it stays this way.

Section: 6 AS 47.23.020(2)(A) The additions and deletions to AS 47.23.020(2)(A) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "minor child" and "obligee".

Section: 7 AS 47.23.020(2)(C) Adding new language to AS 47.23.020(C) requires the agency to notify the obligor as to when an overdue or insufficient funds fee is assessed.

Section: 8 AS 47.23.020(b) Adding a new subsection to AS 47.23.020 will clarify when notification is required in section 7 above. Notification in this case requires mailing by first class mail a copy of the appropriate documents to the last known address of the obligor available to the agency. All court orders currently require the obligor to notify the agency of any change in address.

Section: 9 AS 47.23.045 The additions and deletions to AS 47.23.045 corrects the existing title. Currently the title implies that this section deals with the determination of support obligations. The section actually deals with the agency right to intervene in support obligation cases.

Section: 10 AS 47.23.092 Adding a new section as 47.23.092 will allow the agency to obtain a judgment on court ordered support payments that are past due and unpaid by the obligor. This change will allow the agency to submit a certified statement of such arrearages to the Superior Court, and at the same time notify the obligor of the arrears and the agency's request for a judgment. If the obligor does not present a defense, the Superior Court may then reduce the arrearages to judgment and include any overdue charges and interest due. This would simplify the obtaining of judgment by reducing handling, legal processing and court time when the obligor has failed to comply with a court order. This is a change in the Alaska rules of Civil Procedure.

Section: 11 AS 47.23.100 The additions and deletions to AS 23.100 will correct the current language to allow the Department of Revenue the discretion as to whether or not the agency should charge fees. The current language does not allow the department to make this decision. The agency is now required to determine each obligee's ability to pay and then assess costs or fees accordingly. The statute change will allow the agency to charge fees when funding or other requirements dictate it, but will not require the agency to maintain fee regulations unless those regulations are to be utilized.

Section: 12 AS 47.23.110(3) Adding new language to AS 46.23.110(3) will provide the obligor with an incentive to make payments on a current basis. The overdue fee will be charged and subsequently collected or reduced to judgment. This additional charge will make the delinquent obligor, who in fact creates the need for the agency, pay for a portion of the agency cost.

Section: 13 AS 47.23.110(4) The additions and deletions to AS 47.23.110(4) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "minor child" and "custodial parent".

Section: 14 AS 47.23.110(7) Adding new language to AS 47.23.110(7) will simply provide an explanation as to what interest means. This amendment should be changed to read "or at the rate established by the Department of Revenue".

Section: 15 AS 47.23.130 The additions and deletions to AS 47.23.130 will allow the agency to establish child support orders based upon an obligor's full ability to pay rather than limiting the order to the public assistance issued. Making regular collections for orders established based on an obligor's full ability to pay will in some cases take the obligee off of the AFDC roles. Any collections over the assistance granted will be given to the obligee for the care of the child.

Section 7 of HB 167 accomplishes the same thing but with more direct language which clearly explains the entire process.

Section: 16 AS 47.23.150 Adding a new subsection AS 47.23.150(C) will eliminate part of the obligor's option to simply ignore the child support obligation.

Section: 17 AS 47.23.160(b) The additions and deletions to AS 47.23.160(b) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "minor child", "obligee" and "custodian".

Section: 18 AS 47.23.160(c) Adding a new subsection AS 47.23.160(c) will eliminate part of the obligor's option to simply ignore the child support obligation.

Section: 19 AS 47.23.170(e) The additions and deletions to AS 47.23.170(e) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of terms "minor child" and "obligee".

Section 20 AS 47.23.170(f) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of terms "finding" and "fillin".

Section 21 AS 47.23.182

Adding a new section AS 47.23.182 will allow the agency to file all administratively established child support obligations with the Superior Court. The Superior Court will review the determination and allow the obligor a thirty day appeal period. Upon completion of the review and the appeal period, the Superior Court may issue a court order confirming the entire process and making the order enforceable through either the courts or administrative means. This may be a change in the Alaska Rules of Civil Procedures.

Section 22: AS 47.23.190(a)

The deletions to AS 47.23.190(a) will correct the existing language. There will be no change in the meaning of the section, only a clarification in the use of the terms "obligee" and "custodian".

Section 23: AS 47.23.190(c)

The deletions to AS 47.23.190(c) will correct the existing language. There will be no change in the meaning of the section, only a clarification of the use of the terms "obligee" and "custodian".

Section 24: AS 47.23.250

Rewriting AS 47.23.250 will make an order to withhold and deliver more efficient by requiring less repetitive paperwork. This new section will allow a third party to continue holding fifty percent of wages or earnings as it becomes due to the delinquent obligor, until the total arrearages stated in the notice of the delinquent obligor liability has been satisfied. Prior to issuing a withhold and deliver attachment, the obligor is formally notified of the delinquency and is given thirty days to make arrangements with the agency to satisfy the delinquency. The agency and the third party will only have to serve and receive the order to withhold and deliver once in those cases where the obligor has not made payments as required by court order.

Rewriting the section will also allow the agency to attach any tax refunds or any other distributions made by the state to delinquent obligors, up to the amount of arrearage stated in the order to withhold and deliver. Section 15 of House Bill 167 accomplishes the same thing, but more direct language, which clearly explains the entire process. Several terms are also defined in House Bill 167 which further explain the working process of withhold and deliver attachments.

Section 25: AS 47.23.092

This section simply points out that his act has the effect of changing Civil Procedure rules. This will require a larger majority in each house of the legislature for the act to become a potential law available for the Governor's signature.

3/15/81

New England ~~that~~ child support Eng. Ag.

Eng collects on AFDC person + refunds 50/50 to Fed - States

Keeps people off A + DC rules

i.e. welfare case gov. pays collection expenses.

non-welfare case will pay fee over them.

7000 cases. has "support order b/court" for ea. one.
What % call, vs Total collectible?

2500 welfare cases

5000 non " " "

10,000 cases - no support order

Priority now is collection.

4 enforcement teams @ 12-1500 cases / team.

FEE - Shall we, may?

If Fed force a fee, shall State refuse + pick up bill for this? (Chr. says yes)

1.5 m he figures in fee expense, plus penalties
to 2 m Fed funds in '82

75% of \$ from Fed as if fee imposed he would get them

What %?

1M owed to us. :

38% collected of no obj. - current!

10-15% on arrears (2.5 m total arrears)

3/5 Teleconf. 7-9 P.M. ^{MS 167, 175} "Child Support Enforcement Agency"

live monthly call is on -

Jan - 14th Shenker - drastic change needed etc!

Soldotna - Mida Strauman

all appeal to fees
most criticize agency severely

HB

174



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
REGION X
ARCADE PLAZA BUILDING
1321 SECOND AVENUE
SEATTLE, WASHINGTON 98101

MAY 16 1980

SOCIAL SECURITY ADMINISTRATION
OFFICE OF THE REGIONAL
COMMISSIONER

RECEIVED
MAY 20 1980
RUSUR: SPDX11-2
COMM. AND. SERVS.

Dr. Helen D. Boirne
Commissioner
Department of Health & Social Services
Pouch H-01
Juneau, Alaska 99811

Dear Dr. Boirne:

We have analyzed Alaska House Bill 968, dated May 1, 1980 and wish to comment on certain of its provisions which, if enacted, would raise compliance issues with respect to Federal regulations.

Alaska House Bill 968 provides an Aid for Dependent Children (AFDC) benefit payment increase of \$100 for a family household consisting of a caretaker parent and one child under age eighteen. If enacted, this legislation would increase the current payment provided under AS 47.25.320(a)(2)(A) from \$350 to \$450. The Bill would also provide a benefit payment increase of \$25 for each additional child in the home (after the second child) under the age of eighteen. This would increase the current payment provided to those children, under AS 47.25.320(a)(2)(C) from \$50 to \$75.

The increases provided under House Bill 968 do not appear to apply to the category of children living with non-needy, non-legally responsible relatives. This category is described under AS 47.25.320(a)(1). The omission of provision of these benefit increases to the category of recipient children living with non-needy relatives, while provided for the category of recipient children living with needy parents, appears to be based on the assumptions that:

- (1) children who live with non-needy, non-legally responsible relatives are less needy than children who live with needy relatives; and,
- (2) non-legally responsible, non-needy relatives automatically provide some support for the child's(ren) needs; and,
- (3) such child's(ren) needs are reduced by shared costs.

These assumptions are in direct conflict with Federal Regulations:

- (a) To treat groups of children differently because of living arrangement based on legal responsibility or not of non-needy caretaker relatives distinguishes the groups on an arbitrary basis thereby creating an unreasonable classification which is expressly prohibited at 45 CFR 233.10(a)(1) which states:

(a) State plan requirements. A State plan under title I, IV-A, X, XIV, or XVI, of the Social Security Act must:

(1) Specify the groups of individuals based on reasonable classifications, that will be included in the program, and all the conditions of eligibility that must be met by the individuals in the groups. The groups selected for inclusion in the plan and the eligibility conditions imposed must not exclude individuals or groups on an arbitrary or unreasonable basis, and must not result in inequitable treatment of individuals or groups in the light of the provisions and purposes of the public assistance titles of the Social Security Act.

- (b) The assumption that non-legally responsible caretaker relatives automatically provide some support for the dependent child(ren) and a grant reduction based on that assumption (in this instance, a different and reduced standard as compared to needy children in other circumstances) is expressly prohibited at 45 CFR 233.20(a)(2)(viii) which states:

" . . . Provided that the money amount of any need item included in the standard will not be prorated or otherwise reduced solely because of the presence in the household of a non-legally responsible individual; and the agency will not assume any contribution from such individual for the support of the assistance unit."

- (c) The assumption that a child's(ren) needs are reduced by shared costs and a grant reduction based on that assumption clearly constitutes proration which is expressly prohibited at 45 CFR 233.90(a) which states in part:

" . . . nor may the State agency prorate or otherwise reduce the money amount for any need item included in the standard on the basis of assumed contributions from non-legally responsible individuals living in the household."

Further, the Supreme Court case of Van Jare v. Hurley (1975) prohibits assumption of income for AFDC children in a household with non-needy individuals. A State may not have a separate and reduced standard of living for a child with non-needy, non-legally liable caretaker relatives than with needy caretakers. A State is required to have a single statewide standard, expressed in money amounts, to be used in determining on an objective and equitable basis the needs of applicants and recipients and the amount of the assistance payment (45 CFR 233.20(a)(1) and (2)). To assign two different values to the same item or items of need (such items collectively constitute the standard) for a child based solely on whether or not the child lives with a non-needy, non-legally liable caretaker relative is arbitrary, bearing no relationship to the needs of the child who is receiving the lesser payment.

A State standard may have different dollar amounts for food or clothing for different reasonably defined age groups since older individuals may generally have more costly needs than younger individuals. Differing shelter amounts may result from a State's election to have shelter differentials but this is permitted only when there is objective evidence that there are actual differences in shelter costs between geographic areas and such differences are appreciable. However, such differences appear reasonably based. But this bears no relation to an assumption of income on the unsubstantiated basis that a non-needy, non-legally liable caretaker relative is contributing income towards the support of the needy child in his care and custody.

These rules prohibiting the assumption of income apply to non-legally liable relatives, and to legally liable relatives

other than spouse for spouse or parent for minor child as specified above. Thus, except for spouse for spouse or parent for minor child, a State may not assume that the income of other legally responsible relatives under State law is available to the child.

Notwithstanding, a grant reduction (not a standard reduction), is permitted in those instances where a documented voluntary contribution is made by the non-needy, non-legally responsible caretaker relative.

The following table illustrates the effect of H.B. 968 without the cost-of-living adjustment on State AFDC standards:

Family Size	Children with Needy Relatives		Children with Non-Needy, Non-Legally Responsible Relatives	
	Current Standard	Proposed Standard Under H.B. 968	Current Standard	Proposed Standard Under H.B. 968
1			\$150	\$150
2	\$350	\$450	\$300	\$300
3	\$400	\$525	\$350	\$350
4	\$450	\$600	\$400	\$400
	Plus \$50/month for each additional child under 18	Plus \$75/month for each additional child under 18	Plus \$50/month for each additional child under 18	Plus \$50/month for each additional child under 18

Note that for the category of children living with needy relatives, there is no identification of the amount of the standard that is attributable to the adult caretaker relative. It merely says that for family size of two, a grant of \$350 is made. For two children living with non-needy, non-legally responsible relatives, a grant of \$300 is made. It may be reckoned that the additional \$50 (\$350-50) provided to the needy relative situation is reasonable due to increased costs of shared standard items for adults (this would not hold true for shelter). This was the rationale for Federal approval of the current standard.

Under the proposed H.B. 968 standard, no standard increment is provided to the category of children with non-needy, non-legally responsible caretaker relatives. A difference of \$150 between the two categories

Dr. Helen D. Bohrno - page 5


of recipients is too great to account for an addition based on shared costs that would require an amount of that magnitude for the adult. The Bill did not even address the non-needy, non-legally responsible caretaker relative category. It would appear clear that legislative intent was to increase the needy caretaker relative group, per se.

It must, therefore, be concluded that the new standard results in proration and assumes the availability of income for the non-needy, non-legally responsible caretaker relative category. In no event may income be assumed or shelter costs be prorated.

In summary, should Alaska House Bill 968 be enacted, the State agency, upon implementation, would be out of compliance with Federal regulations as cited herein. In addition, a new or revised State plan submitted to implement such legislation would be unapprovable.

We would be pleased to offer technical assistance including testifying before the legislature on this Bill if so desired.

Sincerely,



Donald C. Sutcliffe
Regional Commissioner

Enclosures

cc:
Rod Holit

§ 47.25.310 WELFARE, SOCIAL SERVICES AND INSTITUTIONS § 47.25.320

Article 3. Aid to Families with Dependent Children Act.

Section	Section
310. Eligibility for assistance	380. Reconsideration and alteration of assistance
320. Amount of assistance	390. [Repealed]
330. Duties of department	395. Alienation and attachment
340. Application for assistance	400. Purpose
350. Investigation of application	402. Reporting change of status
360. Granting of assistance	405. Obtaining assistance by fraud
365. Retraining of parent or family member	410. Definitions
370. [Repealed]	420. Short title

Sec. 47.25.310. Eligibility for assistance. The department shall grant assistance to the family of each dependent child it determines is eligible for assistance under AS 47.25.310 — 47.25.320, or to employers under a work incentive program established by AS 23.15.650, and by § 432(c) (1) of the Federal Social Security Act (12 USC 601 et seq.), as amended. (S 61 2 32 A.C.L.A 1919; am § 2 ch 57 S.L.A 1919; am § 1 ch 73 S.L.A 1963; am § 2 ch 134 S.L.A 1968)

Editor's note. -- The federal provision referred to in this section was added by § 201 of the Social Security Amendments of 1967 (P.L. 90 249; 81 Stat. 821).

A statutory prohibition of welfare benefits to residents of less than a year creates a classification which constitutes an invidious discrimination denying such

residents equal protection of the law. *Shapiro v. Thompson*, 391 U.S. 618, 19 S. Ct. 1027, 72 L. Ed. 2d 1017 (1968).

Cited in *Public Defender Agency v. Superior Court*, Third Judicial Dist., Sup. Ct. Op. No. 1110 (File No. 2071), 531 P.2d 917 (1975).

Sec. 47.25.320. Amount of assistance. (a) The department shall determine the amount of assistance for a dependent child and the relative with whom the dependent child is living, with regard to the resources and necessary expenditures of the family and the condition existing in each case. Assistance is sufficient if, when added to all other income and support available to the child, the child and relative have reasonable subsistence compatible with decency and health. However, the amount of assistance may not exceed the following:

(1) dependent child living with nonrelatives: for a child under age 18 who is living in the home of a nonrelatives, \$150, plus an additional \$150 for the second child, and \$50 a child for the third and each additional child.

(2) dependent child living with parent:

(A) for a parent and one child under 18, a maximum of \$350;

(B) (repealed)

(C) for each additional child under age 18, \$20 a month per child.

(b) The monetary maximums in (a) of this section do not apply to payments made under this program for the care of a dependent child in a foster family home. The payment shall conform to foster care rates as provided by the department.

174/176 AFDC backup

I believe the Lord is with me today to see how we treat his children. How many of you legislators have ever been on welfare?

Suppose at the breakfast table I had kids related to me and also had children not related by blood, and we had eggs for breakfast. You kids that are my grandchildren take one egg apiece, you others can have two eggs. How come grandpa they get two eggs? Well grandson, my State thinks I can buy you the other egg. But grandpa! you don't have the money to do that. I know, but the State gives me more money to feed and buy their clothes. But grandpa, that's not fair.

We all say our kids are our most precious of our resources. We are building schools, highways and so forth for them. I want sound minds and bodies built also for their future.

This State has never, I repeat, never checked to see who is a non-needy relative. We are all classified as non-needy.

Our State has never checked to see if the money given is sufficient for their keep in the first place under the Aid to Dependent Children Program.

I want the increases effective immediately, (before this legislature adjourns, not like last year (effective Jan. 1, 1981)).

The July 1st, percent increase last year was the same as I got Social Security. That was inexcusable.

To make them wait 6 months for the other increase

Leo J. Land

I'll omit any salutations Mr. Chairman and get down to business.

It's my duty as a Alaskan citizen to protect Alaska's resources for Alaskans, and my prime responsibility to protect the poor and needy. The old and ^{especially} the young who cannot protect themselves.

The legislators have the added responsibility by their oath of office to make laws that protect them, their major priority.

The Senior Citizens are ~~protecting~~ ^{able} ~~to~~ protect their rights, the children depend on me and you. (who else is there to do it?) That's our sacred duty as Alaskans.

Leo A. Land