

ALASKA LEGISLATURE COMMITTEE FILES 1995-1996 8672

8881 SENATE HEALTH EDUCATION & SOCIAL SERVICES

Contract compliance often requires on-site reviews for program compliance. Some states such as Massachusetts require participating HMOs to provide space for a permanent state worker whose function is to oversee the plan's operation, policies and procedures, plus act as a liaison to the Medicaid Division. While an on-site presence may not be necessary, frequent visits with the purpose of both compliance and education may be warranted. Providers should be expected to provide space for state personnel who visit the office. Periodic chart reviews and examination of other office documents will be necessary from time to time. Reasonable telephone availability for problem solving, education, and enrollment is recommended for recipients and providers.

Some states operate their own information telephone lines and others contract that function to an enrollment broker. Contracts are often written for a period of two to three years. The enrollment broker or health benefits manager offers written and verbal educational material, conducts off-site workshops and seminars, and is responsible for enrolling recipients into the plan. In some cases the enrollment broker may work with the State to educate providers and answer provider related questions, or the State may be solely responsible for those functions, or the State may contract that piece to another company.

DATA MANAGEMENT

The type of data that is collected and maintained in a managed care environment differs from the data needs under a fee-for-service program. In many cases, the SURS system must be modified in order to accommodate the data needs of a managed care program.

The data must be configured to fulfill a new function. Although claims processing will continue to be a needed ability of the system, other requirements of the new delivery system may require a redesign of the system.

The data system must be able to support the following functions:

- prior authorization systems must link the recipient, provider and the claim,
- case management fees must be paid monthly,
- lists of enrolled recipients must be mailed to providers,
- recipients must be notified of enrollment,
- on-line eligibility and enrollment inquiry must be available to providers, and
- cost savings must be calculated

If capitation is a part of the managed care delivery system, the data system must provide the needed elements so rates can be calculated fairly.

PROGRAM EVALUATION

While it is important to regularly evaluate the effectiveness of any program, states which have received waivers for managed care programs are required by HCFA to submit an evaluation of their managed care programs.

The Health Care Financing Administration requires states that have obtained waivers of 1915 (b) of the Social Security Act to evaluate their programs by an outside contractor during the first two waiver periods. Programs are evaluated for cost savings, access to care, and the quality of care patients receive. Client and provider satisfaction of the managed care plan is often included in the evaluation.

IDENTIFYING OVER-UTILIZATION OF SERVICES

A Recipient Monitoring Program (aka "Lock-in") and prior authorization are both administratively simple and very effective means of controlling utilization and costs. Often only a few recipients account for high utilization within a Medicaid program. Both "lock-in" and prior authorization can focus directly on these recipients so administrative costs are minimized while the impact is maximized.

An aggressive Surveillance, Utilization and Review System (SURS) analysis unit, an efficient SURS subsystem, a decisive medical consultant team, and cooperative field workers are required for "lock-in" and prior authorization to be effective. The SURS analysis unit using, modifying and updating the SURS subsystem identifies high utilizers on a timely basis. Then it targets over-utilizers and abusers for "lock-in" or prior authorization, based on experience and general medical practice knowledge. With the help of the local field workers, the SURS analysis unit places over-utilizers and abusers in either "lock-in" or prior authorization. The medical consultant team reviews cases where the analysts are unsure or if the recipients or their providers object. If the medical consultant team agrees, the SURS unit convinces the recipients to accept the placements, or the cases are taken to administrative hearings where judges may mandate the placements.

Administrative costs for identifying and placing high utilizers in "lock-in" or prior authorization are kept to a minimum. Since only a few recipients are high utilizers of services, the SURS unit only targets a few of these for placement, and only a very few of these objects to placement.

Further, administrative costs beyond identification and placement are very low. Recipients' Medicaid cards must display an appropriate message alerting providers of the recipients' status. The claims payment system must have appropriate edits to prohibit payment for unauthorized claims or claims billed by inappropriate providers. Field workers time in completing prior authorization forms must be accounted for.

The reason "lock-in" and prior authorization are so effective is they work hand-in-hand to curb over-utilization without reducing access for those who truly need a large number of procedures or expensive procedures. The SURS unit "locks-in" over-utilizers to primary providers located near the recipients. These providers then provide or authorize all services that will be paid by Medicaid for these recipients. In cases where the SURS unit cannot find willing providers, in cases where the recipients are changing their providers, or in cases where for some other reason the recipients cannot be assigned to primary providers, the SURS unit places the recipients in prior authorization. This placement requires the recipients to go to local field workers' offices before any services are rendered. This places the local workers in the uncomfortable position of appearing to determine medical necessity of requested services. However, simply requiring the recipients to obtain prior authorization usually deters unwarranted requests and the worker rarely denies requests. As soon as possible recipients, placed in prior authorization are placed in "lock-in".

In summary, "lock-in" and prior authorization, especially when used together, are effective and administratively low-cost methods of controlling over-utilization and high costs. An aggressive SURS analysis team, along with an efficient SURS subsystem, zeroes in on high utilizers of services and holds administrative costs to a minimum. Substantial cuts in utilization and costs can be realized for a minimal investment.

State of Alaska
DEPARTMENT OF HEALTH AND SOCIAL SERVICES
Division of Medical Assistance

MEDICAID PROGRAM CASE MANAGEMENT
RFP 95-0175

DELIVERABLE #3
REPORT OF OTHER STATES MANAGED CARE PROGRAMS

FEBRUARY 20, 1996

SUBMITTED BY:
FOX SYSTEMS INC.
HEALTH MANAGEMENT ASSOCIATES

SUBMITTED TO:
STATE OF ALASKA
DIVISION OF MEDICAL ASSISTANCE

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Exhibit A

**Medicaid Managed Care Status
State by State Commentary**

**Medicaid Managed Care Status
State by State Commentary**

Name of State	Comments	Contact Person(s)
Alabama	<ul style="list-style-type: none"> • No Medicaid managed care plans currently contracted • Plan to offer HMO option beginning in Mobile area in 1995 and then expand to other areas • 1115 Waiver submitted to HCFA, 7/95 • Licensing is slow • Capitation appears as if it would be low • 1915 waiver for a coordinated system of pregnancy related services 	<p>Evelyn Terry, Outreach and Marketing Director 205-242-5014</p> <p>Debra Moore, Managed Care Division 205-242-5012</p>
Alaska	<ul style="list-style-type: none"> • Plans for managed care currently underway • Currently have a contract for optical hardware 	
Arizona	<ul style="list-style-type: none"> • Fully implemented prepaid capitated managed care plan statewide • Enrollment is mandatory for all eligible recipients except Native Americans • Three-year HMO contract bid let 10/1/94 (some areas have one HMO and others may have more than one HMO-It depends on the population and size of the area) • New RFP will probably be out in 2/97 • 1115 waiver pending to cover individuals up to 100% of poverty 	<p>John Black, Executive Consultant, Office of Managed Care 602-254-5522 ext. 7024</p>

Name of State	Comments	Contact Person(s)
Arkansas	<ul style="list-style-type: none"> • Has a 1915(b) waiver • Operate a statewide PCCM • No HMO contracts • Nine county project for HMO option in the discussion stages • No commercial HMO covers the state now; BC/BS attempting to do so 	Roy Jeffus 501-682-8329
California	<ul style="list-style-type: none"> • California aggressively seeking PHP contracts, just awarded dual choice (one county initiative, one private health plan) contracts in several counties • Very competitive • Statewide managed care program (combination of PCCM partially capitated and fully capitated programs) in place • Offers coordinated care programs for the elderly, ON LOK is an example • 1915 (b) waiver approved 	Joseph Kelly/Kenneth J. Wagstaff, State of California-Health and Welfare Agency 916-654-8076 Jennifer Sugar Medi-Cal Managed Care Division 916-654-8070
Colorado	<ul style="list-style-type: none"> • Currently has a statewide PCCM plan: plan to phase out and use as "safety net" only in areas where no HMOs exist • Contracts with six HMOs, but HMOs do not cover the entire state • As HMOs become available in other service areas, will contract with them • 1915 (b) waiver approved 	Kim Gordon 303-866-2220
Connecticut	<ul style="list-style-type: none"> • Received 14 responses to an RFP for fully and partially capitated plans to serve the Medicaid population beginning 7-1-95 • Phasing in statewide enrollment • May re-bid in two years • No PCCM program; no Medicaid contracted HMOs prior to the recent RFP • 1915 (b) waiver approved 	James Gaito 203-424-5137

Name of State	Comments	Contact Person(s)
Delaware	<ul style="list-style-type: none"> • Received HCFA approval 5/95 for "The Diamond State Health Plan" (DSHP), which mandates enrollment in capitated managed care delivery systems • 1115 Waiver approved • Plan is effective 1/1/96 	Kay Holmes, DSHP Coordinator 302-577-4900
District of Columbia	<ul style="list-style-type: none"> • Implemented DC Medicaid Managed Care program (combination of fee-for-service and capitated options) in 4/94 • Mandatory for AFDC and AFDC-related recipients • Medicaid Program is in financial difficulty • 1915 (b) waiver approved 	Sue Brown, Commission of Health Care Finance 202-727-0735
Florida	<ul style="list-style-type: none"> • Florida has offered a managed care plan to Medicaid enrollees for 13 years • Plan to expand in March, 1996 • Has an HMO option, but it does not operate in all parts of the state; hopes to expand the areas where HMOs will serve Medicaid recipients • A QA study found all the capitated plans to be deficient so there is a temporary enrollment freeze for those plans • HMO Licensing; both with the State and the Medicaid Agency is bogged down • Present enrollment is 1/3 MediPass (PCCM program) 1/3 HMO, and 1/3 regular fee-for-service • 1915 (b) waiver approved 	Paige McGivern 904-487-3090

Name of State	Comments	Contact Person(s)
Georgia	<ul style="list-style-type: none"> • May begin to offer a Medicaid HMO option in the Atlanta area; currently reviewing HMO applications • Implemented their PCCM program. Georgia Better Health Care. in 10/1/93; operational in a few counties only • 1915 (b) waiver approved • Plans are underway to expand GBHC statewide 	Patrick Williams 404-657-7793
Hawaii	<ul style="list-style-type: none"> • Hawaii Health Quest, which began 8-1-94, provides medical, dental, and mental health benefits through a capitated managed care delivery system to persons receiving AFDC, GA, and the State Health Insurance Program • Five private insurers have been given two-year contracts to provide benefits • One year lock-in • Will issue another RFP in late 1995 for the next two-year period • Open to accepting bids from mainland companies Current companies all Hawaii-based 	Barbara Bianco, Public Information Officer 808-586-5454
Idaho	<ul style="list-style-type: none"> • PCCM model introduced in October, 1993 • No HMO option now • MMIS system will be reconfigured to meet managed care requirements. Work to be completed by 12/31/96. • After MMIS improved, will consider expanding the managed care option • Of the 44 counties, 7 are considered urban, 12 rural and 25 frontier (6 persons or less a square mile) • 1915 (b) waiver approved 	Jan Cheever, Supervisor of Healthy Connections 208-334-5804 or Robin Schmidt, Healthy Connections Representative 208-334-5804

Name of State	Comments	Contact Person(s)
Illinois	<ul style="list-style-type: none"> • 1115 waiver request pending with HCFA for MediPlan Plus, which will contract with HMOs statewide to care for the MediPlan Plus eligibles; a PCCM program is also operational • Has contracted with HMOs in portions of the state for 20 years • Hope to release an RFP soon for HMOs to bid • Medicaid eligibles concentrated in Chicago, Peoria, and East St. Louis 	<p>Dawn Claborn 217-524-7478</p> <p>Ed Hartman Bureau of Managed Care 217-524-7478</p>
Indiana	<ul style="list-style-type: none"> • Has a PCCM program and is introducing risk-based capitated managed care option • During the summer of 1994, implemented a mandatory managed care program called Hoosier-Healthwise • Phasing in managed care regionally over three-year period, depending on access and participation • Use an enrollment broker to enroll recipients • 1915 (b) waiver approved 	<p>Wendy Bokota 317-233-0237</p>
Iowa	<ul style="list-style-type: none"> • Currently offers a mandatory PCCM or HMO option to Medicaid recipients • The HMO option is not available statewide • Iowa wants to contract with HMOs to serve areas currently not offering an HMO option • 1915 (b) waiver approved 	<p>Mary Roberts, Dept. of Human Services 515-281-8747</p>

Name of State	Comments	Contact Person(s)
Kansas	<ul style="list-style-type: none"> • Has a statewide PCCM program • 1115 waiver pending: project (Community Care) would implement a managed cooperation demonstration project in four predominantly rural counties and would assess the success of a non-competitive managed care model in rural areas • In December, 1995, plans to offer an HMO option in Kansas City area and then will expand to different areas of the state • In December, 1996, proposes to sole-source contract with a prepaid health plan for the Wichita area (The plan is made up of hospitals and providers in Wichita) 	Brenda Jackson 913-296-3981
Kentucky	<ul style="list-style-type: none"> • 1115 Waiver approved by HCFA but state legislature has not allowed implementation • Medicaid agency wants to implement a mandatory HMO program for Medicaid eligibles • Currently has a PCCM program statewide • 1915 (b) waiver approved 	Larry McCarthy 502-564-8196
Louisiana	<ul style="list-style-type: none"> • State has amended 1115 waiver request (original waiver was disapproved by HCFA in 6/95); still under HCFA consideration • All Medicaid enrollees would be required to join competing HMOs under contract with the state • Currently has a PCCM program 	Carolyn Maggio, Director 504-342-2964 Bonnie Butler, Analyst Health Development 504-342-6068

Name of State	Comments	Contact Person(s)
Maine	<ul style="list-style-type: none"> • HMO RFP was released in April 1995 • Intends to implement a mandatory managed care option • Established PCCM program; will be phased out except in three rural counties • 1915 (b) waiver approved 	Deborah Curtis, Director, Division of Managed Care or Lauren Rice 207-287-3835
Maryland	<ul style="list-style-type: none"> • PCCM program (MAC Program) implemented 12/91 • HMO option available since 1975 • Enrollment in HMOs is voluntary • Capitation paid at 95.5% of fee-for-service, including a consideration for administration • 1915 (b) waiver approved 	Dawn L. Grosshandler, Chief 410-225-5444
Massachusetts	<ul style="list-style-type: none"> • HCFA 1115 waiver, MassHealth, approved 4/95; awaiting approval from state legislature • Statewide HMO and PCCM option • Enrollment mandatory • Health benefit managers enroll recipients (currently have a bias toward the PCCM program) 	Michael Bailit, Asst. Commissioner 617-348-5510
Michigan	<ul style="list-style-type: none"> • Has implemented a statewide mandatory managed care plan • Has a statewide PCCM plan, the Physician Sponsor Plan • The HMO option and the partially capitated plan, the Clinic Plan, are primarily available in central and southern MI, although expanding to other areas • Over 90% of non-institutionalized AFDC and SSI clients enrolled in managed care • 1915(b) waiver approved 	Mark Verleger 517-335-5501

CORRECTION

THE FOLLOWING DOCUMENT(S)
HAVE BEEN REFILMED TO
ASSURE LEGIBILITY OR PAGINATION



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Central Microfilm Services
Department of Education
State of Alaska

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Name of State	Comments	Contact Person(s)
Minnesota	<ul style="list-style-type: none"> • 1115 waiver, Prepaid Medical Assistance Project Plus (PMAP), approved 4/95 • Will expand eligibility and place persons in integrated service networks • Especially interested in expansion in rural areas • HMO option currently available in some regions 	Kathleen Schuler, Acting Director, Managed Care Division 612-297-4668
Mississippi	<ul style="list-style-type: none"> • Has a PCCM option; considering HMO option, but nothing has been developed • Currently has a 1915(b) waiver • HMO licensing regulations currently being changed by the legislature 	Judith Michael 601-359-6133
Missouri	<ul style="list-style-type: none"> • Has submitted both a 1915 (b) and an 1115 waiver request; approval is still pending • Has operated mandatory choice health plan options program in Kansas City since 1984 • Seeking legislative support for managed care expansion • Plan a three to five year process to fully implement managed care on a regional basis • HMOs will bid based on a capitation range published in the RFP 	Gary Bailey 314-751-6922 Linda Vaughn, Management Analysis Specialist; Managed Care Division 314-751-7820
Montana	<ul style="list-style-type: none"> • Expanding the PCCM option and introducing an HMO option • Many counties are rural and frontier • Encouraging HMO development/expansion in areas not covered currently • 1915 (b) waiver approved 	Sharon Donovan 406-444-4148

Name of State	Comments	Contact Person(s)
Nebraska	<ul style="list-style-type: none"> • Let two competitively bid contacts (each covering one half of the state) with two HMOs who will cover the state in Spring, 1995 • Will not re-bid for two years • Implementing a statewide PCCM program using a contracted network manager 	Bob Seiffert, Medical Services Division 402-471-9718
Nevada	<ul style="list-style-type: none"> • PCCM program since 1983 • Medicaid has contracted to provide care and service under a pre-paid health plan since May, 1988 • Current contractors are University of Nevada School of Medicine, NevadaCare, Inc., and Community Health Centers of Southern Nevada (an FQHC) 	Joanne Grundmen, Program Specialist 702-687-4768
New Hampshire	<ul style="list-style-type: none"> • Currently contracts with HMOs • Voluntary program at this time • State is looking at pilot initiatives to help in the redesign of its healthcare system • 1115 waiver pending 	Diane M. Kemp, Program Specialist 603-271-4365
New Jersey	<ul style="list-style-type: none"> • 1915 (b) waiver pending at HCFA • Plans to implement an HMO-only mandatory enrollment program • Currently contracts with HMOs but not in every area of the state • Have 400,000 additional recipients to enroll in a plan • Use health benefit managers to enroll recipients 	Daniel Walsky, Director of Medicaid Managed Care 609-588-2705

Name of State	Comments	Contact Person(s)
New Mexico	<ul style="list-style-type: none"> • Primary Care Network (PCN), a PCCM program, is currently operational statewide • Plans to offer an HMO option in the urban areas in 1996 • Currently redesigning MMIS to support full managed care functionality • 1915 (b) waiver approved 	Paul Benson, Chief Office of Managed Care 505-827-3122
New York	<ul style="list-style-type: none"> • Currently has capitated, partially capitated and PCCM programs • Plans to implement a mandatory HMO program throughout the state within the next two years • New York City plans to enroll all Medicaid eligibles living in NYC within one year, HCFA disallowed the plan • The governor appointed a director of managed care in the Dept. of Public Health who will coordinate all efforts outside of NYC • NYC will administer its own program • 1915 (b) waiver approved 	Jim Wray Director, Office of Managed Care 518-473-5600
North Carolina	<ul style="list-style-type: none"> • Carolina Access, a PCCM program is in 38 of 100 counties (covers 50% of eligible population); currently re-grouping; plans to expand in early 1996 • Has an HMO contract with Kaiser Permanente • May introduce an HMO option in the Charlotte area • 1915 (b) waiver pending 	Nancy O'Dowd or Joe Robbins, Division of Medical Assistance 919-715-5417

Name of State	Comments	Contact Person(s)
North Dakota	<ul style="list-style-type: none"> • PCCM program for AFDC eligibles; preparing waiver renewal for statewide program • May implement an HMO option in the eastern part of the state • Has done preliminary rate setting only • Only two small regional HMOs in the state now • 1915 (b) waiver approved 	Darlene LeNoue, Administrator, Medical Services Division 701-328-4577
Ohio	<ul style="list-style-type: none"> • Plans to implement OhioCare; the 1115 waiver (approving OhioCare and expanding eligibility) was approved 1/95. However, State has decided to delay expansion pending Congress' discussion on budgetary matters • Current recipients will be moved into managed care plans; mental health and drug addiction benefits will be coordinated • Will rely heavily on HMO contracts • Currently contracts with HMOs to provide services for the Medicaid population • RFP will be issued • 1915 (b) waiver pending 	Cynthia Burnell 614-466-4693
Oklahoma	<ul style="list-style-type: none"> • Wants to begin "Sooner Care"; HCFA approval of 1115 waiver is pending • Project would be a five-year statewide managed care program using both fully and partially capitated delivery systems. Emphasis will be to address access problems in rural areas • Issued an RFP to HMOs that was due back 3/24/95; will reopen HMO bidding annually 	Leigh Brown, J.D. M.P.H., Deputy Administrator for Health Policy 405-530-3439

Name of State	Comments	Contact Person(s)
Oregon	<ul style="list-style-type: none"> • Began the Oregon Health Plan 1115 demonstration on 3/19/93 • Uses managed care models including fully capitated, partially capitated, and PCCM programs • Currently contracts with many HMOs • 90,000 eligibles enrolled in HMOs as of 6/1/94 • Considering proposal for \$5 co-payment for doctor visits for those newly eligible • 1915 (b) waiver approved 	<p>Hersh Crawford, Director 503-945-5767</p> <p>D'Anne Gilmore, Health Plan Unit 503-945-9827</p>
Pennsylvania	<ul style="list-style-type: none"> • State has a PCCM program (HealthPASS) • Has some HMO contracts and is interested in contracting with additional HMOs in other areas of the state • Planning statewide expansion over next three year; expansions will begin 7/96 in Philadelphia area • Uses a competitively bid approach in parts of Philadelphia for an HIO to manage PCCM program; huge profits were reaped in first contract period • 1902 (b) waiver approved 	<p>Frank Lentz, Director, Bureau of Special Medical Assistance Programs</p> <p>Michael Jacobs 717-772-6198</p>
Rhode Island	<ul style="list-style-type: none"> • 1115 waiver approved in Fall, 1993 for Rite Care which will: <ul style="list-style-type: none"> • expand eligibility under Medicaid • implement a fully capitated managed care delivery system • Recipients enroll in one of 5 existing HMOs 	<p>Ron Ek 401-464-3113</p>

Name of State	Comments	Contact Person(s)
South Carolina	<ul style="list-style-type: none"> • Originally wanted to implement a statewide capitated managed care plan but have scaled that back and may not offer an HMO option at all, or if it does, will be voluntary • Currently has a PCCM program • 1902 (b) approved 	Debbie Francis, Chief 803-253-6119
South Dakota	<ul style="list-style-type: none"> • 7/1/93 began a PCCM program • Currently awaiting approval of waiver renewal • No HMO contracts • 1902 (b) wavier approved 	Donna Keeler, Dept. of Social Services 605-773-3495
Tennessee	<ul style="list-style-type: none"> • TennCare, 1115 waiver approved Fall 1993, replaced the Medicaid program and extended eligibility to 1 million additional recipients • Services are offered through five PPOs and seven HMOs • Market-based pricing 	Manuel Martins, Ass't. Commissioner 615-741-0213
Texas	<ul style="list-style-type: none"> • Legislature currently debating the future of Medicaid • Many want to offer or mandate HMO coverage in most parts of the state • Has both an HMO and a PCCM option in different areas of the state • 1915 (b) waiver approved 	Stacey Hull, Program Specialist 512-794-6852
Utah	<ul style="list-style-type: none"> • Choice of Health Care Delivery (CHCD), a 1915(b) waiver program, is mandatory in urban areas only; recipients choose between HMO and primary care physician • HMO option available in urban areas only • 1115 Waiver pending to expand eligibility to 100% of poverty 	Ed Furia or Barbara Christensen, Div. of Health Care Financing, Bureau of Managed Health Care 801-538-6505 or 538-6456

Name of State	Comments	Contact Person(s)
Vermont	<ul style="list-style-type: none"> • 1115 waiver approved. The Vermont Health Access Plan, proposes to implement mandatory HMO enrollment. It will also expand coverage to 150% of poverty; HCFA approved the waiver 7/95 • State legislature has approved plan to expand coverage, effective 1/96; funding will be gained through cigarette tax revenues 	Paul Willis 802-828-2900
Virginia	<ul style="list-style-type: none"> • There are three managed care programs: Medallion I, a PCCM, started in 1992; Options, the state's voluntary HMO; and Medallion II, the state's mandatory HMO. Medallion II is scheduled to go into effect 1/96 • Will begin to offer HMO option in the Norfolk area 1/96 and will implement in other urban areas every six months (Northern VA, Richmond, Roanoke) • PCCM program was expanded to cover elderly, blind and disabled recipients in July, 1995 • 1902 (b) waiver approved • 	Thomas McGraw 804-371-6400
Washington	<ul style="list-style-type: none"> • Has a PCCM program • Mandatory enrollment in managed care is required for AFDC and AFDC-related • 1902 (b) waiver approved • 	Joan Bentz, Acting Director, Office of Managed Care 206-586-2583
West Virginia	<ul style="list-style-type: none"> • Has a statewide PCCM program • In the planning stages and wants to offer an HMO option, probably one year away • 1902 (b) waiver approved 	Sharon Carte 304-926-1717

Name of State	Comments	Contact Person(s)
Wisconsin	<ul style="list-style-type: none"> • Has both HMO and PCCM programs • HMOs are present in only 5 of the 72 counties; HMO enrollment is mandatory in these counties for AFDC recipients • PCCM program is available in 7 counties • Will release an RFP for statewide expansion in December 1995 • Plan to implement managed care in stages • 1902 (b) waiver approved 	<p>Ruth Belshaw, Managed Care Unit Supervisor 608-266-1935</p> <p>Mary Durkin 608-267-7927</p>
Wyoming	<ul style="list-style-type: none"> • No managed care programs in operation • Hoping to offer both a PCCM and HMO option 	<p>Kenneth C. Kamis, Administrator, Division of Health Care Financing 307-777-7531</p>

Exhibit B
Glossary of Abbreviations
Used in the Text

Glossary of Abbreviations
Used in the Text

Abbreviation	Meaning
1115 Waiver	A research and demonstration waiver granted by the Health Care Financing Administration
1915 (b) Waiver	A waiver granted by the Health Care Financing Administration aka Freedom of Choice Waiver
AFDC	Aid to Families with Dependent Children
BC/BS	Blue Cross Blue Shield
Carolina Access	North Carolina's primary care case management program
Case Managed Fee-for-Service	A health plan which requires prior authorization of most services not rendered by the primary care provider. The primary care provider is usually paid on a fee-for-service basis. Also known as enhanced fee-for-service or managed fee-for-service.
Community Health Aide	A person living in a remote Alaskan village who has been appointed to oversee health care activities and provide services within a specified framework.
DMA	Division of Medical Assistance
DSHP	Diamond State Health Plan, Delaware's 1115 waiver program

Enhanced Fee-for-Service	A health plan which requires prior authorization of most services not rendered by the primary care provider. The primary care provider is usually paid on a fee-for-service basis. Also known as case managed fee-for-service or managed fee-for-service.
EPSDT	Early Periodic Screening, Diagnosis and Treatment
FFS or ffs	Fee-for-Service
FQHC	Federally Qualified Health Center
GA	General Assistance -- state-only funded medical program
GBHC	Georgia Better Health Care; Georgia's PCCM program
HCFA	Health Care Financing Administration
Healthy Connections	Idaho's primary care case management plan
HEDIS	National Committee for Quality Assurance, Health Plan Employer Data and Information Set
HIO	Health Insuring Organization
HMO	Health Maintenance Organization
IHS	Indian Health Services
KenPac	Kentucky's primary care case management plan
Lock-In	Refers to a period of time during which a health plan enrollee may not disenroll from a health plan except for good

	cause. May also refer to a recipient monitoring program developed to monitor access to care for high utilizing recipients.
Managed Fee-for-Service	A health plan which requires prior authorization of most services not rendered by the primary care provider. The primary care provider is usually paid on a fee-for-service basis. Also known as enhanced fee-for-service or case managed fee-for-service.
MCO	Managed Care Organization
MediPass	Florida and Iowa's primary care case management plan
MediPlan Plus	Illinois' 1115 waiver program
Mid-Level Providers	Nurse Practitioners, Nurse Midwives and Physician Assistants are often referred to as mid-level providers
MMIS	Medicaid Management Information System
Partial Capitation	Programs are structured to reimburse managed care organizations for a specific set of contracted services at a per member per month capitation rate. Members must seek care covered by the MCO within the MCO's panel of providers. Services outside of the partial capitated contract may be reimbursed through a contract or fee-for-service basis.
Passport to Health	Montana's primary care case management
PCCM	Primary Care Case Management

PCCP	Colorado's Primary Care Physician Program (a PCCM program)
PCN	Primary Care Network, New Mexico's primary care case management
PCP	Primary Care Physician
pmpm	Per Member Per Month
PPP	Primary Provider Program, Wisconsin's primary care case management program
PSP	Physician Sponsor Plan, Michigan's primary care case management program
QA	Quality Assurance
RFP	Request for Proposals
RHC	Rural Health Center
Rite Care	Rhode Island's 1115 waiver program
RMP	Recipient Monitoring Program, also known as "lock-in"
SSI	Supplemental Security Income
SURS	Surveillance, Utilization and Review System
Waiver	A mechanism by which HCFA authorizes a state Medicaid agency to "waive" Title XIX regulations. There are two waiver authorities that HCFA can do -- 1115 and 1915(b).

CS FOR HOUSE BILL NO. 393(FIN)
IN THE LEGISLATURE OF THE STATE OF ALASKA
NINETEENTH LEGISLATURE - SECOND SESSION

BY THE HOUSE FINANCE COMMITTEE

Offered: 4/15/96

Referred: Rules

Sponsor(s): REPRESENTATIVE ROKEBERG

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to managed care for recipients of medical assistance; and
2 providing for an effective date."

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 * **Section 1. FINDINGS AND PURPOSE.** The legislature finds that

5 (1) the Medicaid program has provided adequate health care for low income
6 individuals in the state since its enactment in Alaska in 1972;

7 (2) Medicaid program costs have increased an average of 13.9 percent a year
8 over the past five years, and the number of eligible individuals has grown from 57,251 in
9 1991 to 86,445 in fiscal year 1995 due to the addition of services and eligible groups by the
10 Congress and the Alaska State Legislature;

11 (3) Medicaid program management has evolved from a fee-for-service payment
12 structure to a point where, by 1995, 94 percent of the states include some type of managed
13 care model in at least one geographic area of their state;

14 (4) primary care case management offers an effective system of care, similar

1 to the existing fee-for-service environment, which can generate program savings and preserve
2 quality of care, and which has been successful in both urban and rural areas; and

3 (5) Alaska has many unique features due to the geography, weather, and wide
4 dispersion of population centers that challenge the ability to have successful managed care
5 systems in the state; however, the projected downturn in state revenue requires the state to
6 seek creative solutions in providing health care coverage for low-income persons at a reduced
7 cost in the future.

8 * Sec. 2. MANAGED CARE PROGRAM. (a) The Department of Health and Social
9 Services shall begin development of a managed care system for recipients of medical
10 assistance under AS 47.07 by designing and planning to implement two innovative managed
11 care pilot projects. The projects must be in one or more predominantly urban areas of the
12 state that take into account the unique features of the project areas and include a rural element,
13 if feasible. The department shall involve affected consumers and providers of health care
14 services in the probable project areas in the development of the managed care system that will
15 be used in the projects.

16 (b) Upon developing a system required under (a) of this section, the Department of
17 Health and Social Services shall submit through the governor draft legislation that would
18 provide for implementation of the proposed system in two or more pilot project areas to the
19 legislature on the first day of the First Regular Session of the Twentieth Alaska State
20 Legislature.

21 (c) The draft legislation under this section may require that a recipient of medical
22 assistance under AS 47.07 must participate in a managed care system in order to remain
23 eligible for medical assistance under AS 47.07. This participation requirement may be based
24 on geographical, financial, social, medical, and other factors that the Department of Health and
25 Social Services determines are relevant to the development and efficient management of the
26 managed care system.

27 (d) The draft legislation under this section may authorize the Department of Health
28 and Social Services to apply for waivers of federal law or for other federal approval if federal
29 approval is required in order to implement the pilot projects for the managed care system
30 developed under this section.

31 * Sec. 3. This Act takes effect immediately under AS 01.10.070(c).

ALASKA STATE LEGISLATURE

House of Representatives

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ECONOMIC DEVELOPMENT MEMBER



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Representative Norman Rokeberg

Sponsor Statement CSHB 393(FIN)

"An act relating to managed care for recipients of medical assistance; and providing for an effective date"

The debate in Congress over Medicaid is focused on two proposals: replacing Medicaid with block grants ("MediGrants") to the states or instituting a *per capita* cap on the federal contribution to Medicaid spending. The former plan would remove the individual entitlement, which guarantees services to eligible persons; the latter would retain the individual entitlement. Both plans would offer states unprecedented flexibility in administering their programs but there will be significant reductions in federal funds.

As the costs of medical care rises, managed care is a way of ensuring a high level of care while keeping costs down. Medicaid costs have risen by more than 50 percent over the last four years, and will cost the state \$336 million dollars this year.

Persons eligible for Medicaid include the Aid to Families with Dependent Children group -- AFDC adults, poor pregnant women, and generally healthy, but poor children; and the SSI-related group -- the elderly and persons who are aged, blind and disabled. The AFDC-related group represents about 71 percent of all Medicaid recipients nationwide, but accounts for only about 30 percent of all spending.

Medigrants will distribute funds to states without regard to the particular needs and circumstances in a state and literally ignores changes in enrollment. HB 393 will prepare the state for changes in Medicaid funding at the federal level. The bill ensures adequate public debate over the issue. HB 393 asks the Department of Health and Social Services to develop legislation creating a managed care program for Medicaid.

Managed care replaces current "fee for service" program with one that requires recipients to use designated doctors and other medical providers to be eligible for benefits. Recipients can use only pre-approved doctors. At recent count, 43 states have some form of managed care in their programs.

HB 393 makes sure that the program developed by the department is one that takes into account the views of the public, the medical community and the legislature. A managed care program developed by the department should be crafted with input from everyone affected by the program. *The legislature should have a voice in this matter.*

Furthermore, the department has already begun working on a Medicaid Managed Care Project. As recent as October 1995, an RFP was awarded to a health management company to assist the Division of Medical Assistance in a draft five-year managed care plan. HB 393 will require legislative approval of a plan, and allow the department to have the benefit of public debate surrounding this issue.

CSHB 393(FIN) is a timely bill. I urge your support for this legislation.



ALASKA STATE MEDICAL ASSOCIATION

4107 Laurel Street • Anchorage, Alaska 99508-5334 • (907) 562-2662 • FAX (907) 561-2063

April 11, 1996

Representative Norman Rokeberg
Alaska State Legislature
State Capitol (MS 3100)
Juneau, AK 99801-1182

Re: HB 393 managed care for Medicaid recipients

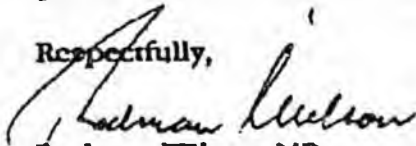
Dear Representative Rokeberg:

After further deliberation, the Alaska State Medical Association favors HB 393, a billing calling upon DHSS to develop pilot managed care projects for Medicaid beneficiaries.

We are dubious that there are enough Medicaid recipients, even in cities, to run two plans competitively side by side.

We are pleased that providers will be involved in the development and implementation of managed care. Among other features a plan or plans should contain language which clearly spells out to actual or potential patients exactly what is covered and what is not covered under the plan, what their other options are, if any, and clearly delineates the criteria for acceptance of a licensed physician or other provider into the plan and the grounds and due process for dismissal. These features, as you know, come generally under the rubrics "any willing provider" and "patient protection." Perhaps language about this could be written into HB 393.

Respectfully,



Rodman Wilson, MD
Acting Executive Director



CORRESPONDENCE

ALASKA STATE

HOSPITAL & NURSING HOME

ASSOCIATION

March 21, 1996

Representative Con Bunde, Co-Chair
Representative Cynthia Toohey, Co-Chair
Health, Education & Social Services Comm.
Alaska House of Representatives
Juneau AK 99811-1182

Re: Support, HB 393
Medicaid Managed Care

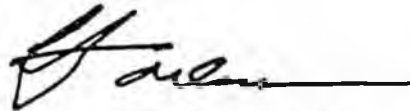
Dear Co-Chair & Members House HESS:

Community hospitals and nursing homes support HB 393, directing the DHSS to develop a managed care or capitated health care system for Medicaid recipients.

Up until now, we have tended to dismiss "managed" care as not feasible in Alaska because of our small population and large (geographic) size, but the "no growth" Medicaid budget and/or potential reductions in Medicaid funding now mandates that we look at all options for the purchase and payment of health care.

Secondly, we understand HB 393 sponsor, Representative Rokeberg, is considering a substitute bill that would encourage the Department to work with provider groups in the development of a managed care option for the state, and that this plan would allow "pilot projects" to determine the feasibility of managed care before it is implemented statewide. These amendments strengthen HB 393.

Sincerely,



Harlan R. Knudson
President/CEO

Feb. 16, 1996

Rep. Con Bunde &
Rep. Cynthia Toohey
Co-chairs, HESS
House of Representatives
Mail Stop 3101
State Capitol
Juneau, AK 99801-1182

RE: HB 393

Dear Reps. Conde and Toohey,

I am writing on behalf of the Tanana Chiefs Conference, Inc. in general support of House Bill 393. We are aware that similar health delivery models have been implemented successfully in other states. Conceptually, we have no problem with recipients of medical assistance being served through a managed care model.

The bill does raise some questions about how Indian Health Service (IHS) beneficiaries will be treated under this bill. We note that Section 1(b) states *A system developed under (a) of this section MAY require that a recipient... participate.* Will IHS beneficiaries be exempt from participation under this clause, assuming they will continue to receive care at IHS funded facilities?

We would appreciate receiving any additional information to help us understand the full intent of HB 393, particularly as it applies to IHS beneficiaries. And, as always, the opportunity to comment is appreciated. Thank you.

Sincerely,

TANANA CHIEFS CONFERENCE, INC.


Eileen Kozevnikoff
Director, Health Services

SUPPORT

ALASKA STATE LEGISLATURE

LEGISLATIVE BUDGET AND AUDIT COMMITTEE

Division of Legislative Finance



P O Box 113300
Juneau AK 99811-3300
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MEMORANDUM

DATE: January 8, 1996

TO: Representative Norman Rokeberg
Attn. Mia Costello

FROM: Jenta Whittaker *JWH*
Fiscal Analyst

SUBJECT: Medicaid Funding

You asked for a five or ten year summary of Medicaid funding broken out by major funding source. The attached spreadsheet offers a funding history starting with Actuals from FY92.

In order to get you some information as soon as possible, I started with data that was fairly readily available. To present a history for the years before FY92 Actuals will take a bit more effort, in that General Funds summaries were not routinely done and the numbers will have to be calculated. If you would like me to pursue this further, please don't hesitate to call.

Department of Health and Social Services
 Medicaid Funding - Total Funds, General Funds, and Other Funds*

	<u>FY92</u>	<u>FY93</u>		<u>FY94</u>		<u>FY95</u>		<u>FY96</u>
	Actual	Auth	Actual	Auth	Actual	Auth	Actual	Enacted
Medicaid Facilities	99,548.1	126,863.4	105,609.0	112,951.3	131,803.1	125,387.3	131,465.5	145,270.4
General Funds	49,970.2	63,221.1	52,751.5	56,827.2	66,176.3	62,925.4	65,130.8	72,765.9
Other Funds	49,577.9	63,642.3	52,857.5	56,124.1	65,626.8	62,461.9	66,334.7	72,504.5
Medicaid Non-Facilities	86,446.6	90,893.2	100,766.7	116,460.5	114,343.9	133,892.6	121,220.5	135,333.4
General Funds	42,957.4	44,839.1	50,695.2	58,291.5	57,004.8	66,226.0	61,058.4	66,473.6
Other Funds	43,489.2	46,054.1	50,071.5	58,169.0	57,339.1	67,666.6	60,162.1	68,859.8
Indian Health Services	12,672.6	16,529.8	16,673.2	16,698.0	20,150.9	19,822.0	21,149.0	24,432.7
General Funds	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other Funds	12,672.6	16,529.8	16,673.2	16,698.0	20,150.9	19,822.0	21,149.0	24,432.7
Medicaid State Programs	3,954.6	5,174.7	4,601.6	11,784.9	17,444.5	19,385.2	19,353.8	19,941.2
General Funds	0.0	186.6	0.0	1,663.3	3,649.5	2,081.7	2,187.8	3,523.2
Other Funds	3,954.6	4,988.1	4,601.6	10,121.6	13,795.0	17,303.5	17,166.0	16,422.0
Waivers Services				11,483.6	724.7	8,881.5	4,006.2	11,248.8
General Funds				5,741.9	362.4	2,364.8	886.6	2,256.3
Other Funds				5,741.7	362.3	6,516.7	3,119.6	8,992.5
TOTAL	202,621.9	239,461.1	227,650.5	269,378.3	284,467.1	307,368.6	297,195.0	336,230.5
General Funds	92,927.6	108,246.8	103,446.7	122,523.9	127,197.0	133,597.9	129,263.6	145,019.0
Other Funds	109,694.3	131,214.3	124,203.8	146,854.4	157,270.1	173,770.7	167,931.4	191,211.5

* "General Funds" includes General Fund, General Fund Match, General Fund/Program Receipts, General Fund Mental Health, and General Fund Program Receipts/Designated. "Other Funds" includes mainly Federal Funds, but may also include some InterAgency Receipts

House of Representatives

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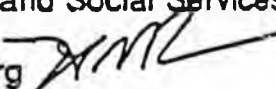
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Representative Norman Rokeberg

Memorandum

To: Representative Cynthia Toohy
Chair, House Health, Education and Social Services Committee

From: Representative Norman Rokeberg 

Date: March 12, 1996

Re: Managed Care for the Alaska Medicaid Program

I thought you'd be interested in the attached pages taken directly from the Department of Health and Social Services FY 97 budget overview.

As this paper indicates, the department is aggressively pursuing managed care and has already awarded a contract for a review of managed care options for the Alaska Medicaid Program.

Without passage of HB 393, the public, health care providers, health care consumers and the legislature are left without a voice in the matter. The bill requires the department to introduce their managed care program in the form of legislation next year.

I believe the department will benefit from having this managed care discussion in the public forum. Again, I urge your support for HB 393.

BACKGROUND

EXAMINING MANAGED CARE ALTERNATIVES

Background

In FY 94, the Legislature provided a clear message that the Division should manage medical assistance programs to slow down the rate of growth in the program. (See Legislative intent statement, Ch. 3, FSSLA 94, page 21, lines 36-38). Some actions were taken during FY 94 to assure appropriate use of services, resulting in cost avoidance/savings of about \$25 million. Many cost savings actions were enhanced or initiated in the past two fiscal years to achieve both the Legislative intent and the department's goals. The Division's Annual Reports provide brief descriptions of these activities, including contracting for case reviews and services, and initiating special projects for development of case management services and managed care programs. Some of these actions are designed to show an immediate reduction in costs, while others were begun with the knowledge that cost savings will not occur until later. Some cost-saving measures which, at first, appeared to promise savings were later found to be impractical because the action would result in utilization shifts to services which cost more, would be contrary to federal law, or cost more to administer than the service cost savings gained.

Managed Care

Building on the successes of the past two years, the division awarded a contract in the fall of 1995 for a review of managed care options for the Alaska Medicaid Program. This contract will update health care delivery information formerly contained in the now defunct State Health Plan, analyze expenditure information, review other states experiences in implementing managed care arrangements, and make recommendations for managed care delivery system options likely to work in the state. Because Alaska's health care system has not developed a managed care infrastructure, the division will not be able to simply purchase services from existing managed care networks. Movement into the managed care arena will necessitate the education of health care providers and fostering the development of health care delivery networks in addition to receiving required federal waiver approvals. The contract is timely, in that its recommendations should assist the division in dealing with Congressional restructuring, and budget reductions, currently being debated in Washington.

The division is giving special consideration to implementation in FY 97 of a managed care model called Primary Care Case Management (PCCM). The PCCM project would begin in selected areas of the state. PCCM is a case management system in which a patient enrolls with primary care provider for basic medical care. The primary care provider also manages the care of the patient, authorizing certain services such as laboratory, x-ray, and emergency room care. PCCM is the managed care model usually adopted in rural areas of the country where Health Maintenance Organizations (HMOs) don't exist.

This PCCM approach using physicians and mid-level practitioners, such as advanced nurse practitioners and physician assistants as case managers, allows states to provide appropriate access for recipients to primary care, and to reduce unnecessary Medicaid expenditures. Under PCCM, Medicaid recipients typically are required to select a physician or mid-level practitioner who will be their case manager -- providing primary care services and authorizing in advance all other medical services (except for instances of bona fide emergency). In this way the primary care case manager functions as a "gatekeeper" for recipients who may over-utilize services and/or prescriptions. As a result of the responsibility vested in the case manager, the physician or mid-level practitioner provides more individual oversight of the recipient and, thereby, assures that the total use of services is appropriate. This effort increases the quality of care for those recipients and, at the same time, reduces expenditures for duplicative or overlapping and unnecessary services.

A waiver from the federal Health Care Financing Administration is required before the state may initiate a PCCM program. To obtain a waiver for this purpose the state must complete an application for review by the federal Health Care Financing Administration. The waiver application must clearly delineate and document the characteristics of the population to be served, the geographic area to be covered, the cost-efficiency of the proposed activity. An assurance must be made that the recipient's access to care is not limited. Waivers granted for this purpose have been relatively flexible, allowing states to design a program for physician enrollment as a primary care case manager that meets the particular need identified by the state.

FISCAL NOTE

No. 1

STATE OF ALASKA
1996 LEGISLATIVE SESSION

Bill Version: CSHB 393(HES)

(H) Publish Date: ?/27/96

Revision Date: _____	Dept. Affected: <u>Health and Social Services</u>
Title: <u>"An Act relating to managed care for recipients of medical assistance; ..."</u>	BRU: <u>Medical Assistance</u>
Sponsor: <u>Rep. Rokeberg</u>	Component: <u>Medicaid Services</u>
Requestor: _____	COMPONENT SERIAL NO. <u>2077</u>
	See also (SN#): _____

Expenditures/Revenues: (Thousands of Dollars)

OPERATING EXPENDITURES	FY97	FY98	FY99	FY00	FY01	FY02
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
CHANGES IN REVENUES	0.0	0.0	0.0	0.0	0.0	0.0

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1037 GF/Mental Health	0.0	0.0	0.0	0.0	0.0	0.0
Other (please specify)	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY96) cost: \$0.0

POSITIONS:

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

ANALYSIS: (Attach a separate page if necessary)

HB 393 charges the Department of Health and Social Services with development of managed-care or capitated health care systems for recipients of medical assistance. A project is already underway within the division to accomplish the purposes of HB 393 with completion scheduled for June of 1996. For this reason there is no cost shown on the fiscal note for the development of the managed care system.

The Division of Medical Assistance began a project in late 1995 that is expected to identify the appropriate approaches for managed care for medical assistance programs and the steps necessary for implementation. This project is to be completed by June of 1996. Division staff are being assisted by a contractor in review of program cost and utilization data to identify those medicaid services that may be successfully administered under a managed care approach. Identification of recipient participation requirements is included in the contract. The contractor is familiar with managed care arrangements used by medical assistance programs of other states and will help division staff to identify those which appear practical for Alaska based upon historical cost and utilization data and the availability of health-related resources in Alaska.

Prepared by: D. Williams *BE*
 Division: Division of Medical Assistance
 Approved by Com: Karen Perdue, Commissioner *Jayshury*
 Agency: Department of Health & Social Services

Phone: 465-3355
 Date: 01/17/96
 Date: 1-23-96

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HB

465

Alaska State House of Representatives
House District 39

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Juneau, Alaska 99801-1182
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Representative Ivan M. Ivan

SPONSOR STATEMENT - SCS for CS for House Bill 465 (RLS)

I introduced House Bill 465 to promote quality, performance, accountability and fairness in our educational system and the youth it serves. This bill also gives our school districts a degree of flexibility when dealing with increased costs associated with our educational system.

Senate Committee Substitute for Committee Substitute for House Bill 465 (RLS) would allow school districts to lay off teachers who have acquired tenure rights, but only if the school district finds it necessary to reduce the number of teachers due to declining enrollment or declining revenues and after all nontenured teachers are given notice of nonretention. However, a school district may retain a nontenured teacher and place a tenured teacher on lay off if there is no tenured teacher in the district who is qualified to replace the nontenured teacher.

The bill also increases tenure from two to three years and removes the costly trial de novo portion of our statutes which allows a school district employee who, if not satisfied with a district led investigation, to go to the court system to begin an entirely new trial. The district's investigation, most often, must be recreated. New procedures for appealing a decision to dismiss or nonretain a tenured teacher are established in House Bill 465.

An extensive evaluation system and an improvement of performance plan is included in House Bill 465. The evaluation system can be used for nonretention purposes. Should a tenured or nontenured teacher not meet district performance standards, a plan of improvement would be implemented. If the district demonstrates the teacher's performance does not meet professional performance standards and objectives defined in the plan of improvement, the teacher is subject to nonretention.

Sections 2 and 4 of House Bill 465 apply only to those teachers who are hired after the bill is signed into law. Sections of the bill dealing with loss of tenure rights, layoff and rehire and elimination of trial de novo go into effect after the bill is signed and will have an effect on all teachers. Section 4, employee evaluation, is effective on July 1, 1997.

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Alaska State House of Representatives
House District 39



Session
Alaska State Capital
Juneau, Alaska 99801-1182
Phone: (907) 465-4942

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Representative Ivan M. Ivan

SECTIONAL ANALYSIS - SCS for CS for House Bill 465 (RLS)

Section 1: Amends AS 14.20.140, Notification of Nonretention. Amends the section to include the lay off provisions found in Section 10 of the bill. A tenured teacher subjected to lay off for the following school year would have to be notified of the lay off before March 16. A nontenured teacher would have to be notified of lay off for the following school year by the last day of the school term.

Section 2: Amends AS 14.20.145, Automatic Reemployment. States that if a teacher is not given a notice of nonretention and is not laid off under the new provisions of AS 14.20.177 (Section 10 of this bill), the teacher is entitled to be reemployed in the same school district for the following school year. Should the teacher not accept reemployment within thirty days of the contract offer, this section would not be applicable. If a teacher is in lay off status and is working in another school district and is contractually obligated to provide services to another educational program within the state, then this section does not apply.

Section 3: Amends AS 14.20.147(b), Transfer or Absorption of Attendance Area or Federal Agency School. Changes tenure from two to three years for those teachers who taught in a school operated by a federal agency and has transferred to or is absorbed into a new or existing school district.

Section 4: Adds a new section to AS 14.20, Teachers and School Officials. This section establishes an evaluation system and improvement of performance plan for a district's certificated employees. The evaluation system must:

- (1) establish evaluation criteria based on professional performance standards;
- (2) require at least two observations for the evaluation of each nontenured teacher in the district;
- (3) require an annual evaluation of each tenured teacher who met district performance standards during the previous school year;
- (4) permit the school district to limit evaluations of tenured teachers who consistently exceed the district's professional performance standards to one evaluation every two years;
- (5) require an annual evaluation for each administrator;

Page Two
Sectional Analysis
SCS for CSHB 465 (RLS)

(6) require the district to prepare and implement a plan of improvement for a teacher or administrator whose performance did not meet district performance standards; and,

(7) provide an opportunity for students, parents, teachers, community members and administrators to provide evaluation information on the teacher's performance.

The school board will consider information from students, parents, community members, classroom teachers, affected collected bargaining units and administrators in the design and periodic review of the evaluation system.

Before an evaluation can be conducted, the evaluator has to complete training in the use of the district's evaluation system and in service training must be offered to those who are subject to the evaluation system. The evaluator must hold a type B certificate or be a site administrator under the supervision of a person with a type B certificate.

A tenured teacher whose performance, after evaluation, did not meet district performance standards must be provided a plan of improvement which must address ways the tenured teacher's performance can be improved. The evaluating administrator will consult with the teacher in setting clear, specific performance expectations that will be included in the plan. This plan is to last for not less than 90 work days and for not more than 180 work days. If, at the conclusion of the plan of improvement, the teacher's performance does not meet district performance standards, the district may nonretain the teacher.

An administrator must be provided a plan of improvement which must address ways the administrator's performance can be improved if the administrator's evaluation is less than acceptable.. This plan is to last for not less than 90 work days and not more than 210 work days. If, at the conclusion of the plan of improvement, the administrator's performance is does not meet district performance standards, the district may terminate its contract with the administrator.

Information provided to a school district under the evaluation system concerning the individual's performance is not public record. However, the person who is being evaluated may waive confidentiality concerning this information.

Section 5: Repeals and reenacts AS 14.20.150, Acquisition of Tenure Rights. Changes acquisition of tenure from two to three years. Tenure is acquired when the teacher possesses a valid teaching certificate; has been employed in the same district continuously for three full school years; receives an acceptable evaluation in the third year of any three year period of continuous employment; and, accepts a contract

Page Three
Sectional Analysis
SCS for CSHB 465 (RLS)

for employment in the district for a fourth consecutive year. A full school year means employment beginning on or before the first student count day which is October 15th.

Section 6: Amends AS 14.20.155(a), Effect of tenure rights. States that a teacher who has acquired tenure has the right to employment within the district with the exceptions noted in AS 14.20.

Section 7: Amends AS 14.20.160, Loss of tenure rights. Clarifies that a teacher on layoff status does not lose tenure rights during the layoff period except as provided by AS 14.20.177 (Section 10 of this bill).

Section 8: Adds a new subsection to AS 14.20.170, Dismissal. States that a teacher dismissed under this section is not entitled to a plan of improvement.

Section 9: Amends AS 14.20.175(b), Nonretention. Deletes incompetence as a reason for nonretention and replaces it with failure to meet performance objectives defined in the individual's plan of improvement that is based on locally adopted professional performance standards and the teacher does not meet district performance standards. The school district may not nonretain a teacher under this section unless the district has complied with the requirements set out in AS 14.20.149 (Section 4 of this bill) and the district demonstrates the teacher's performance does not meet professional performance standards established by evaluation.

Section 10: Adds a new section to AS 14.20, Teachers and School Officials. This new section provides for layoff of a tenured teacher when there is a decrease in school attendance or the basic need of the school district determined under AS 14.17.021 (b) and adjusted under AS 14.17.225 (B) decreases by three percent or more from a previous school year. Before a tenured teacher is laid off, all nontenured teachers must be given notice of nonretention.

Before a school district lays off any tenured teacher, a lay off plan must be adopted which must include academic and other programs that the district intends to maintain in implementation of the plan. This section also establishes standards for qualifications in which a school district may retain a nontenured teacher if there is no tenured teacher in the district to replace the nontenured teacher. Procedures addressing the length of time that a teacher retains hire rights after a layoff, the circumstances under which a teacher may lose rehire rights after a layoff and other provisions are provided under this section. In the event a teacher is offered a teaching position while on layoff status, the teacher may remain on the layoff list for retention within the school district where tenure was acquired.

Page Four
Sectional Analysis
SCS for CSHB 465 (RLS)

Section 11: Repeals and reenacts AS 14.20.80, Procedures upon notice of dismissal or nonretention. Eliminates a de novo trial whenever a school district reaches an unfavorable decision to a teacher. The new section allows a tenured teacher, following written notice of the proposed dismissal, a pretermination hearing. This section describes the pretermination process. This section also states that the dismissal is effective when the notice is delivered to the teacher.

After the pretermination hearing or notice of nonretention of a tenured teacher, procedures, under which the school district must comply, are established.

Within 15 days after receipt of a decision of dismissal or nonretention, the teacher may notify the employer in writing that a hearing is requested before the school board for a full hearing with possible appeals going to superior court or will invoke grievance procedures.

Under the full school board hearing in which all evidence is revealed and any witnesses are cross examined or subpoenaed the teacher may appeal to superior court if the decision of the school board remains unfavorable to the teacher. Judicial review will be based on the already established record in previous proceedings.

In the event the teacher provides notice invoking grievance procedures to the school board, an informal hearing will be immediately scheduled by the board. If the board sustains the dismissal or nonretention, the teacher may give written notice to the school board and submit the matter to arbitration under the rules of the American Arbitration Association. An arbitrator's decision will be final and binding on the school board, the teacher and the bargaining unit representing the teacher. If the school board and teacher agree, the informal hearing may be waived and the matter will be submitted directly to arbitration.

Section 12. Adds a new paragraph to AS 14.20.215, Definitions. Defines district performance standards.

Section 13: Adds a new section to AS 23.40, Labor Organizations. Prior to beginning bargaining, this section states the school board will provide opportunities for public comment on issues to be addressed in the collective bargaining process. Initial proposals, last best offer proposals, tentative agreements before ratification and final agreements reached by the parties are public documents.

Section 14: Repeals AS 14.20.205, Judicial review. Elimination of the trial de novo.

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Sectional Analysis
SCS for CSHB 465 (RLS)

Section 15: The amendments in sections 2 and 4 of this bill apply only to;
(1) individuals hired as a teacher on or after the effective date of the bill;
(2) rehired teachers on or after the effective date of the bill and following an interruption in continuous service that resulted in a loss of tenure rights or failure to acquire tenure rights.

Section 16: States that nothing in this legislation affects a collective bargaining agreement in effect on the effective date of this legislation.

Section 17. Effective date of July 1, 1997, for Section 4 (employee evaluations) of the bill.

FISCAL NOTE

BILL NO. HB 465

STATE OF ALASKA
1996 LEGISLATIVE SESSION

Revision Date: _____

Title: Teacher Employment Rights

Sponsor: Representative Ivan

Requester: Representative Ivan

Department Affected: Education

BRU: Executive Administration

Component: Commissioner's Office

COMPONENT SERIAL NO. _____ 185

Expenditures/Revenues:

(Thousands of Dollars)

OPERATING	FY 97	FY 98	FY 99	FY 00	FY 01	FY 02
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
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CHANGE IN REVENUES						
---------------------------	--	--	--	--	--	--

FUND SOURCE

(Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
Other						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year (FY96) impact: \$ 0.0

ANALYSIS: (Attach a separate page if necessary.)

This legislation addresses issues including teacher layoff, rehire, dismissal, nonretention, evaluation, tenure and public school bargaining. There will be no fiscal impact on the department; however, school districts may incur additional costs and savings associated with provisions of the legislation.

Prepared by: Kimberly Homme, Special Assistant

Phone: 465-2803

Division: Commissioner's Office

Date: February 12, 1996

Approved by Commissioner: _____

Shirley Holloway, Ph.D.

Agency: Education

Date: February 12, 1996

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DRAFT

Position on Proposed Amendment to Section 11 of House Bill 465

Fairbanks North Star Borough School District and the Anchorage School District propose an amendment to Section 11 of House Bill 465. The proposed amendment is to delete Section (d) and revise the last sentence of section (c) to read as follows:

If the school board sustains the dismissal or nonretention, the teacher may appeal the decision to the superior court, in accordance with Part VI of the Rules of Appellate Procedure. [APPLICABLE RULES OF COURT FOR A JUDICIAL REVIEW BASED ON THE RECORD.]

There are important public policy reasons for supporting this proposed amendment. The proposed amendment is fair to the interests of both school districts and teachers for a number of reasons. The proposal is a fair compromise.

First, under Part VI of the Rules of Appellate Procedure, the superior court sits as the appellate court for appeals from administrative decisions. While most appeals from administrative decisions are on the record, the rules permit the superior court in its discretion to grant a trial de novo. Appellate Rule 609. This

DRAFT

discretion is exercised by the court to grant a trial de novo and conduct a new evidentiary hearing when the prior administrative proceedings, or school board decision, is so fundamentally unfair that the teacher has not received constitutional due process. When a teacher is able to demonstrate that the school board proceeding violated the teacher's constitutional due process rights and that the school board hearing was not fair, the superior court has the discretion to grant a new trial. Absent such a showing that the hearing before the school board was so flawed as to deny constitutional due process, the superior court would review the school board decision on the record. This proposed amendment would eliminate the automatic duplication of two full evidentiary hearings under existing law. The proposed amendment would provide teachers with a full independent review of a school board's decisions on non-retentions and dismissals, by giving teachers an impartial third-party review of any school board decision to non-retain or dismiss.

Second, the language in the bill passed by the House allows a teacher to waive the hearing before the Board and to file an original action in superior court within sixty days of notice of dismissal or non-retention. By giving a teacher a new right to file an independent action in superior court, the local school board is completely by-passed in making a decision on dismissal or non-retention. This eliminates the school Board's role in the decision making process, usurping the authority of the local school board to review the Superintendent's decision to

DRAFT

dismiss or non-retain a teacher. Additionally, the local school board would be deprived of the opportunity to apply the standards of teaching performance adopted by the local school Board. By-passing the local school board on important policy decisions like the retention or dismissal of tenured teachers is unnecessary and an unwelcome result.

Third, the House Bill gives teachers a new right by permitting them to file an original action in superior court and demand a jury trial. Under the House Bill, a court could interpret an original action to allow the expansion of claims against the district for matters in addition to those involving a review of the school board's decision. For example, a teacher could include a claim for defamation, violation of civil rights, and wrongful discharge, as part of the original action to review a Board's decision. These claims will involve prohibitive costs, delays, and expenses for local school districts that make the tough decision to terminate non-performing teachers. An original action gives teachers access to the civil discovery process which will include depositions, production of documents, and pretrial motions. Pre-trial discovery will substantially increase costs. These additional costs and expenses will likely act as a financial deterrent to school districts making recommendations to dismiss or non-retain teachers who fail to perform to acceptable standards. Under the House Bill as passed, teachers would be expected to waive the school board hearing and demand a jury trial in most

DRAFT

cases. Districts will be under enormous pressure to settle cases and pay off poor teachers given the costs they will encounter in proceeding to a jury trial.

In short, Section 11 of the House Bill affords teachers greater rights than they have under the current law in cases of non-retention or dismissal. Rather than being a progressive step forward to hold teachers accountable for their performance, the House Bill increases the risks and costs of proceeding with nonretentions and dismissals. The increased risk may result in districts being too hesitant to act in dismissing unacceptable teachers. The House Bill will make nonretentions and dismissals more difficult for school districts.

(web.c:\pwwork\1464022\sect1.doc)

AMENDMENT

Offered by Anchorage & Fairbanks School Districts

In the Senate HESS Committee:
CSHB 465(HES)am

"An Act relating to employment of teachers and school administrators and to public school collective bargaining"

Page 9 Line 3:

after the word "with" delete the rest of the sentence and add:

"Part VI of the Rules of Appellate Procedure"

Page 9 Line 4 through 7:

Delete all language in subsection (d)

ASSOCIATION OF ALASKA SCHOOL BOARDS

316 W. 11th St. • Juneau, Alaska 99801-1510

(907) 586-1083 • Fax (907) 586-2995

POSITION PAPER

IN SUPPORT OF CSHB 465

"An Act relating to employment of teachers and school administrators and to public school collective bargaining."

Addressing Quality Education

Issues...

- Quality
- Performance ...through...
- Fairness
- Accountability

CSHB 465...

- Acquisition of Tenure
- Evaluation Process
- Layoff Status
- Non-retention Standards
- De novo
- Public Information

★ HISTORICAL REVIEW

The Association of Alaska School Boards has, for over 15 years, passed resolutions designed to improve the quality of education. Tenure acquisition, layoff status, de novo trials, and public access to negotiations are issues that have been around for years. Over the last five years there has been a steady increase in public awareness of these issues not only in Alaska, but throughout the country.

Last year the Legislature passed a bill addressing the issues listed above. Gov. Knowles vetoed that legislation, primarily due to provisions calling for tenure acquisition after four years, failure to address evaluations of certified staff, and inclusion of an early retirement incentive program in HB 217. In place of HB 217, Gov. Knowles introduced HB 398 and SB 204 this session, putting forth recommendations by a Task Force that deliberated over the interim. Rep. Ivan Ivan, original sponsor of HB 217, again introduced legislation addressing quality education—HB 465. The bill incorporates some of the proposals forwarded in the governor's bill as well as some new ideas. More recently, Education Commissioner Shirley Holloway reconstituted the governor's Task Force to comment on HB 465. On Feb. 26, 1996 Rep. Ivan met with the Task Force. The result of that meeting is that nearly all of the Task Force recommendations have been incorporated into HB 465.

★ ASSOCIATION OF ALASKA SCHOOL BOARDS POSITION

The Association of Alaska School Boards supports CSHB 465. It incorporates the concerns of school boards and addresses concerns of the governor regarding: tenure acquisition after three years, a performance based evaluation process for educators, layoff, addresses the de novo process, and grants greater public access to information regarding the collective bargaining process.

★ TENURE ACQUISITION

Improving education in the classroom starts with quality educators. Current tenure laws provide inadequate time for administrators to thoroughly evaluate teachers. It also gives insufficient time for teachers (and administrators) to improve. This can shortchange a new educator's career or result in less than fully qualified teachers receiving tenure. Extending the time it takes to acquire tenure will help ensure new people entering the teaching profession, and experienced teachers whose performance has been determined to be less than adequate, are provided an opportunity to attain quality in the classroom.

★ EVALUATION

Current regulation requires that evaluations be conducted for tenured teachers. Teachers, administrators, school boards, and most important, the public, are demanding improvement in the classroom. Establishing a more thorough evaluation process based on professional performance standards in statute may be necessary to ensure that evaluations are effectively implemented. This bill also requires a "plan of improvement" for teachers and administrators who need assistance. Quality in education through effective evaluation of teachers and administrators is perhaps the single most significant issue addressed by this legislation.

★ LAYOFF

Current law does not allow our schools to layoff tenured staff when a district's revenue declines (only if enrollment declines). This has resulted in deterioration of children's education programs, and nonretention of critical staff. AASB supports creating a layoff status in statute, with rehire rights, that is designed to meet the needs of kids and treat teachers fairly. Ensuring that the most qualified teachers are retained, especially during financially difficult times, is paramount to a successful educational program for kids.

★ NONRETENTION STANDARDS

Under AS 14.20.175 tenured teachers may only be nonretained for reasons of 1) incompetence, 2) immorality, 3) substantial noncompliance, and 4) a decrease in enrollment. AASB maintains that the standard of incompetence is too low. CS HB 465 provides for an acceptable level of performance based on a professional performance standards assessment.

★ DE NOVO

Under AS 14.20.205 JUDICIAL REVIEW a school district is obligated to submit to a trial de novo (a new trial) if a decision by the school board is unfavorable to a tenured teacher, and the teacher appeals the decision by the board. This is an extraordinary standard that has not been extended to any other group of employees. When a teacher appeals the findings of a district hearing, the school district must repeat the entire process again before the court, usually at a much later date, and incur the financial cost once again. AASB views this requirement as duplicative and costly. The history of de novo trials in various school districts has established a pattern of unnecessary legal expenses. In addition, de novo law has a substantial chilling effect on school districts, due to costs, when deciding whether or not to attempt the dismissal of a tenured teacher.

The judicial review of dismissal proceedings in school districts should be treated no differently than other state agencies. School boards serve as quasi-judicial bodies-- accountable in the court system and to the public. Judicial review should be "on the record" pursuant to the Administrative Procedures Act. This would provide an opportunity for the superior court to review the established record of the local hearing to determine that due process has been followed and that the agency did not exceed its discretionary authority.

★ PUBLIC INFORMATION/NEGOTIATIONS

AASB believes that school boards should provide opportunities for public comment on the issues addressed in the collective bargaining process. Initial proposals, last-best-offer proposals, tentative agreements before ratification, and final agreements should be made public records and available for the public to review.

★ SUPPORT HB 465

The public has been demanding that something be done to improve the quality of our public education system. This bill addresses that concern on many fronts. It is the culmination of much work put forth by parents, teachers, administrators, school boards, the Governor's Task Force on Professional Excellence, the Department of Education, and legislators who care about kids. HB 465 is as close as we have ever come to significantly addressing quality instruction in Alaska's schools. We urge you to support HB 465.



POSITION PAPER

CSHB 465

"An Act relating to employment of teachers and school administrators and to public school collective bargaining"

The Alaska Council of School Administrators supports the CS of House Bill 465.

We believe that the focus of every school in Alaska must be on the children. To that end, we believe that they deserve to have effective, talented and knowledgeable educators in their classrooms and their schools. This is why we are willing to be accountable as administrators for the responsibility bestowed on us as principals.

We believe Sec. 3. AS 14.20 Employee Evaluation to be fair to all professional educators who have direct contact with students. It allows for a thorough review of the performance and if necessary a period of improvement which will provide time for professional growth and evaluation.

It is unfortunate that we must consider reductions in force due to significant, demonstrated reduction in per-pupil expenditures. We would much prefer the necessary increases of school funding to allow for significant class size reductions. However, understanding the reality of the current revenue forecasts and budget deliberations, there must be a mechanism in place to allow school districts to reduce staff due to serious financial shortfalls. The process outlined in this legislation allows for a student focused process.

It has been proven that a school district which allows for public involvement in all areas of their schools is more productive and publicly supported. To that end, the allowance for public input in the negotiations process is a positive step in that direction.

Overall, this legislation will sets up a procedure which will provide one more avenue for providing an educational standard to our schools which will have far reaching benefits to Alaska's children.

Stephen McPhetres, Executive Director, ACSA

**ANCHORAGE
SCHOOL
DISTRICT**



Anchorage School Board

P.O. Box 196614, Anchorage, Alaska 99519-6614 • (907) 333-9561

**Kathi Gillespie
2741 Seafarer Loop, Anchorage, Alaska 99516
(907) 345-5335; Fax 345-9891**

**To: The Members of the House HESS Committee
Date: March 19, 1996
RE: HB 465**

I watched with great interest your meeting on Friday and was most interested in the testimony on the relevance of parental input in the evaluation of a teacher's performance in the classroom.

Public education is one of the few places that I've found where the consumer, the student, parent, and taxpayer, has little to no input or choice in the service they are purchasing. I believe that in order to increase the quality of our schools, parents must have the ability to communicate their level of satisfaction in the education their child receives on a daily basis. Many parents I know would like to credit their teachers for the good job they do and occasionally I find a parent who is dissatisfied for good reason. Both types of information will be valuable for both the teacher and the administrator to hear.

I trust parents and community members and I support public education. I believe that change must occur in the way we do business if public education, as we know it, is to survive. Part of that process is in opening the doors of the school and respecting that everyone, even parents, have a right to comment on the quality of the product we are being paid to deliver.

HB 465 is a positive step in the right direction.

**ANCHORAGE
SCHOOL
DISTRICT**



Anchorage School Board

P. O. Box 196614, Anchorage, Alaska 99519-6614 • (907) 333-9561

Kelly Haney
3281 Amber Bay Loop, Anchorage, Alaska 99515
Phone and Fax (907) ~~348-8282~~ 522-4351

March 25, 1996

Dear Representative,

I strongly urge you to vote in favor of CSHB 465 (Professional Excellence). There are many aspects of this bill that are vitally important to the students of Alaska. To have student input in individual, yearly teacher evaluations is one of this bill's strong points. Talking to students and parents in the community of Anchorage for the last year, I found that people are aghast when they realize that students have no say as to whether a teacher gets a good evaluation or not. Students are the ones who are in the classrooms everyday and have to deal with a teacher even if they are rotten.

Thank you for your time, I strongly urge you to pass CSHB 465, keeping in mind the students of Alaska. If it were not for the students, there would be no need for education.

Sincerely,

Kelly Haney

For the Kids!

*id this please
distributed
by 3/25?
Thx.
Kelly*



P. 10

**ANCHORAGE COUNCIL OF
PARENT TEACHER ASSOCIATIONS**
ADVOCATING FOR ANCHORAGE CHILDREN SINCE 1960

March 24, 1996

To: All Anchorage Caucus Legislators
From: Sue Templeton, President of the Anchorage Council of PTAs
Subject: CSB 465

Dear Legislators,

I am writing to encourage you to move CSB 465 onto the Senate. The Anchorage Council of PTAs general membership has been seeking changes to public education legislation for several years. This past November the Anchorage Council of PTAs general membership set their legislative priorities for the 1996 legislative session. CSB 465 supports several of the council's legislative priorities. Improvement in teacher evaluation has the support of the PTAs general membership, as well as tenure reform. We also continue to support changes to bring about public involvement in negotiations. The Anchorage Council and the Alaska State PTA have standing resolutions on open negotiations and teacher tenure.

Teacher evaluation is a new legislative priority for the council. It is also the fourth strategy under our first goal of Promoting Academic Excellence. PTA has tried to be part of the Anchorage School Districts evaluations committee but has not seen progress in addressing many of the current problems in the evaluation process. Many of the components in this bill would bring the evaluation process to a place where parents could and would have a respected voice in the evaluation process. It is important that you realize how validating and complimentary it is to parents to have the legislature realize parents can contribute and support professional excellence by including them in the evaluation portion of this legislation. Just as it is important to have you seek public involvement in school district negotiations. The Anchorage Council of PTAs is thrilled with these aspects of CSB 465. This piece of legislation is in line with many of the changes we have been seeking on a district level.

Again, I would encourage you to give this legislation your stamp of approval and move it onto the Senate.

Thank you for your time,

Sue Templeton, President
Anchorage Council of PTAs 1995-1996

Attention: Anchorage Caucus Representatives
From: Luan Sitzmann, 4th VP, Anchorage Council of PTAs
Subject: CSHB 465

During the past few years, the PTA has written several resolutions that support: an increase to teacher tenure years, improving the evaluation system, and to adding parental and community involvement in educational decisions.

We were disappointed when HB 217 did not pass. However, we are encouraged by the compromise bill currently under consideration.

I understand the NEA is opposed to the parental and community involvement. It is often felt that parents are uneducated and unable to make these decisions. I do not believe this to be true and encourage you to pass this bill. I personally spend hundreds of hours in the schools. I currently have seven children in the Anchorage School District. I feel more than qualified to make any decision concerning my children and their education and know many others who feel the same. Parents must be involved!

Our new principal selection process, here in Anchorage, is an excellent example of how this process could work. Parents and students will now be included in the selection process. With the final decision being made at the administrative level.

Allowing the community a part in the evaluations, or negotiations will give a new perspective to the process. It can only complement it.

Please vote in favor of CSHB-465. Many thanks for your time.

Luan Sitzmann
1833 Skilak Circle
Anchorage, AK 99504
907-333-0698 home
907-333-6212 fax

ANCHORAGE SCHOOL DISTRICT



Anchorage School Board

P.O. Box 196614, Anchorage, Alaska 99519-6614 • (907) 333-95

Kathi Gillespie
2741 Seafarer Loop, Anchorage, Alaska 99516
(907) 345-5335; Fax 345-9891

To: The Anchorage Caucus Representatives
From: Kathi Gillespie
Date: March 24, 1996
Re: CSHB 465

I support the passage of CSHB 465 and I hope that I can count on each of you to vote in support of students, parents, and this community. CSHB 465 addresses several professional excellence issues that we desperately need in order to assure a quality educational experience for each of our students.

Changes in the evaluation process that will allow parents an opportunity to comment on the service that is being delivered to their child; changes in the openness of contract negotiations that will allow this community to understand what is being negotiated on their behalf; changes in law that will allow the District to assure quality in the work force even in times of financial distress; and local control in the establishment of performance standards will be something the this legislature will be able to point to proudly in the years to come as a major achievement on behalf of our children.

Like you, I am well aware of our constituents' interest in making these positive changes in public education. Over the past weeks, as I have been out speaking on the upcoming bond election, I have heard over and over again the sense of frustration and in some cases outright anger over the lack of control of community members in the quality of public education. In my mind, this community of parents and students and taxpayers is sending a strong message for change. CSHB 465 will be a step forward in addressing the concerns that I am hearing and that I have heard for years. I'm telling the people who ask and the people who call with concerns that there is hope for the kind of change that they have been waiting for as their children progressed through our schools.

I know that you worked very hard last year to bring forward legislation that would address those concerns. I, as well as many other people in Anchorage, was disappointed when the Governor vetoed HB 217. However, as I look at CSHB 465, I have renewed faith. I believe that this bill will go even further to ensure a quality education for each of our children and will strengthen education throughout Alaska.

I thank you for your continued commitment to kids and on behalf of the children of this state I ask you to vote yes on CSHB 465.



GALENA CITY SCHOOL DISTRICT

GALENA, ALASKA 99741

PHONE (907) 656-1205

FAX (907) 656-1368

SUPERINTENDENT
OFFICE

This fax consists of
2 pages

COPY

Representative Irene Nicolaj
State Capital
Juneau, AK 99801
FAX (907) 465-2197

Dear Irene:

I am writing on behalf of our school board and myself in support of CSHB 465 (Rep. Ivan). We have been following the changes that have occurred during the hearings on this bill. We feel that some of the features of the bill are necessary to assist us in providing a quality educational program for our students.

The section on Layoffs is vital to provide the district with the ability to retain programs rather than retain teachers. We must not forget that we operate the schools for the benefit of the students not the employees. The section of Judicial review that provides for creating a record once will save us time and money. We also believe the Teacher Evaluation section provides for an improved process that ultimately will assist teachers in doing a better job and protect them from unfair treatment. As you know, the Galena City School Board favored the Four Year Tenure bill that was vetoed by Governor Knowles last year. We feel the Middle Ground proposed, using three years before granting tenure, is fair to both teachers and the school district.

The Galena City School Board and I, urge you to vote **YES** on House Bill 465 and lay this issue to rest once and for all.

We are also concerned about the proposed cuts in Public Broadcasting funds. The bush communities rely very heavily on the communications provided by our radio station. It would be a terrible blow to our residents to have any reductions in the current level of service.

Single site funding is very important to us. We urge you to fight any attempt to reduce or eliminate this necessary element of our school funding formula. We also oppose SB 280 that would eliminate most of the single sites. I will discuss this further when I see you in Juneau.

COPY

page 2
Representative Irene Nicholia

Lisa said she would let me know if I can have the honor of taking you to lunch Tuesday, March 26, 1996. I will be staying at the Westmark Juneau. I hope to have some time with you to visit about the above issues. Keep up the good work!

Yours in Education,



Carl Knudsen,
Superintendent



KENAI PENINSULA BOROUGH SCHOOL DISTRICT

148 North Binkley Street • Soldotna, AK 99669-7598 • Phone 907/262-5846 • Fax 907/262-9645

OFFICE OF THE DISTRICT SUPERINTENDENT

March 21, 1996

Members, Alaska House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear House Representative:

This letter is written to encourage your support for HB 465 which is scheduled for House consideration. The Kenai Peninsula Borough School District school board and administration supports this legislation and urges its passage in both the House and Senate.

Thank you for your continued support of important educational issues.

Sincerely,

Walter E. Bromenschenkel, Ed.D.
Superintendent of Schools

bj

Kake City School District

P.O. BOX 450
KAKE, ALASKA 99830
(907) 785-3741

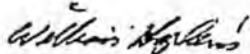
March 22, 1996

Representative Ivan Ivan
House of Representatives
Alaska State Capital
Juneau, AK 99801-1182

Dear Representative Ivan:

The Kake City School District Board of Education fully supports House Bill No. 465 (HES). We urge you to vote for this bill, it will allow districts to make better choices in the future.

Sincerely,



William Hopkins
Superintendent of Schools



The Mission of the Bering Strait School District is to educate students to become self-sufficient productive citizens in a changing world, recognized for their social, academic, and marketplace skills, by providing standards of excellence, quality programs, and a supportive environment for both traditional Native and Western styles of learning.

DISTRICT OFFICE • P.O. BOX 225
UNALAKLEET, ALASKA 99684-0225
(907) 624-3611 • FAX 624-3000

BERING STRAIT SCHOOL DISTRICT

BREVIWISSON • DOMEDE • ELBA • GAMSELL • OLOVIN • KOYUK • SAINT MICHAEL • SAVOONGA
SHAKTOOLUK • SHISHMARIEF • STEBINS • TELLER • UNALAKLEET • WALES • WHITE MOUNTAIN

March 21, 1996

Honorable Richard Foster
Alaska State Legislature
Juneau, Alaska 99811

Dear Representative Foster:

This letter is in support of HB465 - Quality Education.

School districts have struggled with the need for changes in the current law regarding tenure and the evaluation process. We applaud the efforts of this bill to change the acquisition of tenure from 2 to 3 years, ensuring that only the most qualified teachers are retained during financially difficult times and providing an acceptable level of teacher performance based on a professional standard. We also endorse the removing of the duplicative and costly trial de novo.

Please support this bill. Thank you for your continued efforts to improve education in this state.

Sincerely,

David Bowling
Superintendent

cc: BSSD Board Members
Correspondence file

NOME PUBLIC SCHOOLS

Box 131, Nome, Alaska 99762 • FAX: (907) 443-5144 • Telephone (907) 443-2231



March 21, 1996

Representative Richard Foster
House of Representatives
Room 409, Capitol Building
Juneau, Alaska 99811

Dear Representative Foster:

The Nome Public School District and School Board supports HB 465. Passage of this Bill is important to the quality of education of all students in the State of Alaska. Your support of HB 465 will be very much appreciated.

Sincerely,

A handwritten signature in cursive script that reads "Robert G. Kinna". The signature is written in black ink and is positioned above the printed name and title.

Robert G. Kinna
District Superintendent



P.O.Box 157 Hoonah, Alaska 99829 (907) 945-3611 Fax (907) 945-3614

March 21, 1996

PUBLIC OPINION MESSAGE

We offer our full support of HB465. The amendments having to do with teacher evaluation improved the bill considerably. Allowing public input into the evaluation of teachers, yet not being a part of the formal written evaluation, is already done by most school districts; however, the amendment addressing that promotes clarification.

Hoonah City Schools Board of Education
Jacqueline Dick
Mary Peterson
Grace Hillman
Leona Lindhoff
Cynthia Skaflestad
Superintendent of Schools
Dr. Virgie L. Fryrear



ST. MARY'S SCHOOL DISTRICT

P.O. Box 171 St. Mary's, Alaska 99658
(907) 438-2311 or (907) 438-2834

Accredited by Northwest Accreditation Association



Representative Ivan
State Capitol
Juneau, Alaska 99801

22 Mar 96

Honorable Representative Ivan;

The St. Mary's City School District would like to support your efforts to improve the educational process in the state of Alaska, HB 465 is a step in the right direction. We experienced the problems of down sizing, it isn't easy even with cooperation of all of the people involved. Your bill will alleviate many of the obstacles that are in the path of the school districts that have to make the necessary adjustments in their budget to remain in solvent.

Your continued support of the St. Mary's City School District and education in the state of Alaska is deeply appreciated.

Geraldine Beans
Geraldine Beans
Chairman

Suzanne Mike
Suzanne Mike
Secretary

Ron Tweto
Ron Tweto
Board Member

Esther Tyson
Esther Tyson
Board Member

Deborah Vo
Deborah Vo
Vice-Chairman

Gary C. Greseth
Gary C. Greseth
Superintendent



KASHUNAMIUT SCHOOL DISTRICT

985 KSD Way
Chevak, Alaska 99563
(907) 858-7713 FAX (907) 858-7328

Rep. Ivan -
For your
information.
AL W.

March 13, 1996

Members of House HESS Committee
Juneau, AK 99801

Re: CS for HB 465

Dear Representative:

I urge your careful consideration of CS for HB 465. This bill supports excellence in instruction, it provides substantial safeguards for teachers while requiring accountability, and it helps school districts conserve scarce resources.

Based upon my experience in public school management of almost thirty years, I believe this is an excellent bill, with the exception of two areas wherein minor modifications would serve to strengthen it. The first area of concern is Sec. 14.20.149 (b)(7), which requires opportunity for incorporation into the evaluation process of information provided by "students, parents, community members," Such procedures are likely to produce side effects that are inappropriate and counterproductive to a professional evaluation process designed to improve instruction and to assist in making personnel decisions. For example, educators might cater to those students, parents, and others who they believe might be influential in their evaluations, public campaigns might be waged for or against particular educators, and educators might inappropriately reward or punish those who made reports affecting their evaluations.


Although the possible catering, campaigns, and paybacks would tend to detract from a serious professional process, another issue is of greater concern. An educator would have the right to confront and cross examine at a hearing any person who provided information used in an adverse personnel decision. It takes little imagination to see that having students, parents, and community members routinely brought in as witnesses in quasi judicial proceedings would probably be much more detrimental than beneficial.

For the reasons cited, I strongly recommend that this section be permissive rather than mandatory. Thus, if districts encountered the types of problems indicated above, they could discontinue the practice of formally incorporating input from students, parents, and others into the evaluation process itself.

The other area of concern is Sec. 14.20.149 (c), which seems to limit evaluators to regularly employed district administrators, to the exclusion of persons who might be retained on a contractual basis. I believe this is unnecessarily restrictive. A district should be able to contract with a person with expertise in supervision of instruction who has a Type B certificate and is trained in the district's evaluation system but who is not a regular employee of the district.

With the two minor modifications suggested above, I urge your support of CS for HB 465 as an excellent bill that will benefit public education in Alaska.

Sincerely,


B. A. Weinberg, Superintendent
KASHUNAMIUT SCHOOL DISTRICT

(5) be able to participate in reasoned discussions of public policy related to scientific innovations and proposed technological solutions to problems; and

(6) be able to act upon reasoned decisions and evaluate the effectiveness of the action. (Eff. 1/4/95, Register 133)

Authority: AS 14.03.015 AS 14.07.020 AS 14.07.165
AS 14.03.120 AS 14.07.060

4 AAC 04.200. TEACHER EDUCATION STANDARDS. (a) A classroom teacher in a public school should reflect the highest abilities and qualities of the teaching profession.

(b) A classroom teacher should be able to describe the teacher's philosophy of education and demonstrate its relationship to the teacher's teaching practice. A teacher who meets this goal should be able to

(1) demonstrate consistency between the teacher's philosophy of education and the teacher's teaching practice; and

(2) engage in thoughtful and critical examination of the teacher's teaching practice.

(c) A classroom teacher should understand how students learn and develop and should be able to apply that knowledge in the teacher's teaching practice. A teacher who meets this goal should

(1) know the characteristics of human development and teach to the developmental abilities of students; and

(2) understand students' differences in intelligence, perception, and cognitive processes and should be able to broaden the teacher's teaching practices to incorporate these differences.

(d) A classroom teacher should be able to teach students with respect for their individual and cultural characteristics. A teacher who meets this goal should

(1) be able to recognize and build on the cultural strengths of the teacher's students and community; and

(2) understand and address a student's individual and special needs.

(e) A classroom teacher should know the teacher's subject and know how to teach it. A teacher who meets this goal should

(1) be able to demonstrate an understanding of the complexities of the teacher's subject;

(2) understand the particular instructional challenges that the teacher's subject presents to students who are at different developmental levels;

(3) be able to draw from a wide repertoire of strategies and adapt them to fit the instructional context; and

(4) be able to connect the teacher's subject to other subjects and to practical situations encountered outside of school.

(f) A classroom teacher should be able to facilitate and monitor student learning. A teacher who meets this goal should

(1) be able to organize instruction based on the characteristics of the students and the curricular goals;

(2) be able to create, select, adapt, and use a variety of instructional resources that are aligned with the curricular goals;

(3) be able to create and select a variety of evaluation strategies that provide information about student learning, that are aligned with the curricular goals, and that assist students in reflecting on their own progress;

(4) be able to reflect on information gained from assessments and adjust the teacher's teaching practices as necessary; and

(5) understand the advantages and disadvantages of a variety of methods of reporting to students and parents.

(g) A classroom teacher should be able to create and maintain an environment where students are contributing members of a learning community. A teacher who meets this goal should

(1) be able to create and maintain

(A) a stimulating, inclusive, and safe learning community in which students take intellectual risks and work independently and collaboratively; and

(B) high expectations for all students, and

(2) understand and be able to use a variety of classroom management techniques to support student learning.

(h) A classroom teacher should be able to use technology as an educational tool. A teacher who meets this goal should be able to

(1) enhance instruction and student learning;

(2) access current trends, strategies and resources in the teaching profession;

(3) organize and maintain information about student learning; and

(4) connect classroom activities to practical situations encountered outside of school.

(i) A classroom teacher should be able to work as a partner with student families and with the community. A teacher who meets this goal should be able to

(1) promote clear two-way communication among the school, student families, and the community;

(2) support comprehensive programs for parental involvement;

(3) help student families support their children's learning efforts;

(4) participate in the community; and

(5) connect school and classroom activities with student homes, work places, and the community;

(j) A classroom teacher should be able to participate in and contribute to the teaching profession. A teacher who meets this goal should be able to

4 AAC 04.200 ALASKA ADMINISTRATIVE CODE 4 AAC 04.200

- (1) maintain a high standard of professional ethics;
 - (2) maintain and update the teacher's knowledge base;
 - (3) engage in program, instruction, and curriculum development;
- and
- (4) work cooperatively with the teacher's colleagues in the learning community.

(k) A classroom teacher should receive postsecondary training in special education. (Eff. 12/17/94, Register 132)

Authority: AS 14.03.015 AS 14.07.060 AS 14.20.020
AS 14.07.020 AS 14.20.010

CHAPTER 19. EVALUATION OF PROFESSIONAL EMPLOYEES

4 AAC 19.010 Purpose Of Evaluations

Evaluation of the performance of professional employees of each school district shall be directed toward improving the quality of instruction and facilitating the learning process in the public schools. Additionally, formal evaluations shall serve as a method for gathering data relevant to subsequent employment status decisions pertaining to the person evaluated. (Eff. 8/30/75, Register 55)

Authority: AS 14.07.020
AS 14.07.060

4 AAC 19.020 Scope Of Evaluation

The evaluation should emphasize such factors as teaching or administrative skills, processes and techniques and interpersonal relationships with students, parents, peers and supervisors, as well as those additional factors which the school district considers relevant to the effective performance of its professional employees. The standards for performance must be measurable and relevant. (Eff. 8/30/75, Register 55)

Authority: AS 14.07.020
AS 14.07.060

4 AAC 19.030 Method For Evaluating Professional Employees

(a) Formal written evaluation of professional employees of each school district must be made at least once per contract year for each certificated staff member, without regard to tenured or nontenured status, including teacher evaluation of principals and other administrators.

(b) An acknowledgment of content signed by both the evaluator and the person evaluated must appear on all formal evaluations. The person evaluated must be informed that he has the right to review each written evaluation prior to its final submission and comment in writing on any matter contained in it and that he may, at his request, retain the evaluation for a reasonable amount of time, but not less than 24 hours, for the purpose of reviewing and commenting upon it. The fact that a person evaluated exercises his right to comment on his evaluation in the manner described may not be used against him. Failure to submit written comments by a person evaluated prior to his acknowledgment of the evaluation constitutes a waiver of this right.

(c) The evaluation may include information other than specific observations of the evaluator. Districts may adopt procedures whereby input such as students' evaluation of teachers, principals' evaluation of administrators, peer and self-evaluation are utilized. The evaluation must clearly indicate that this kind of information has been used and clearly identify the source of the information.

(d) The evaluation must be approved by a person who possesses an administrative certificate issued under 4 AAC 12.030. (Eff. 8/30/75, Register 55; am 1/12/83, Register 85)

Authority: AS 14.07.020
AS 14.07.060

4 AAC 19.040 Use Of The Evaluation

(a) Neither the formal evaluation document, nor any notes, comments, or other information used in its preparation is a matter of public record.

(b) The evaluation may be reviewed upon demand at reasonable times by the person evaluated or some other person designated in writing by the person evaluated.

(c) Each school district shall establish procedures as to which supervisory personnel may have access to the evaluation documents.

1995 Alaska Education Regulations

(d) Unless mutually agreed otherwise by both the person evaluated and the school board (or its designee), no portion of an evaluation may be made public, except as evidence in a proceeding relative to an evaluated person's certification or employment, or as otherwise allowed or required by a court of law. (Eff. 8/30/75, Register 55)

Authority: AS 14.07.020
AS 14.07.060

4 AAC 19.050 Development Of Local Evaluation Procedures

(a) Responsibility for evaluation of the performance of professional employees rests with the individual school district. To this end, each school board shall develop and adopt procedures for evaluation of its professional employees. These procedures must be consistent with the standards and guidelines set out in this chapter, as well as other relevant provisions of federal or state law and regulations.

(b) Prior to final adoption, the local procedures must be submitted to the department for review.

(c) Each school district in the state, whether or not it has previously adopted evaluation procedures, shall submit current procedures to the department for review no later than July 1, 1976.

(d) Each school district is encouraged to invite, obtain, and consider community input, including that of students, parents, teachers, and administrators, in the design of the procedure and content for evaluation. (Eff. 8/30/75, Register 55)

Authority: AS 14.07.020
AS 14.07.060

4 AAC 19.060 Evaluation Training

Each school district shall provide in-service training in evaluative techniques for all certificated staff. (Eff. 8/30/75, Register 55)

Authority: AS 14.07.020
AS 14.07.060

AMENDMENT *(D)*

Senator Green

11

	<i>Y</i>	<i>N</i>
<i>L</i>		
<i>M</i>		
<i>E</i>		
<i>S</i>		
<i>G</i>		

OFFERED IN THE SENATE

TO: CSHB 465(HES) am

- 1 Page 3, line 6:
- 2 Delete "evaluation criteria"
- 3 Insert "district performance standards"

- 4 Page 3, line 12:
- 5 Delete "received an acceptable evaluation"
- 6 Insert "met the district performance standards"

- 7 Page 3, line 14:
- 8 Delete "district's professional"
- 9 Insert "district"

- 10 Page 3, lines 19 - 20:
- 11 Delete "is evaluated as less than acceptable"
- 12 Insert "did not meet the district performance standards"

- 13 Page 4, lines 2 - 3:
- 14 Delete "is found, after evaluation, to be less than acceptable"
- 15 Insert ", after evaluation, did not meet the district performance standards"

- 16 Page 4, line 11:
- 17 Delete "is again evaluated to be less than acceptable"
- 18 Insert "again does not meet the district performance standards"

- 19 Page 4, line 15:

1 Delete "is less than acceptable"

2 Insert "does not meet the district performance standards"

3 Page 4, line 19:

4 Delete "is again evaluated to be less than acceptable"

5 Insert "again does not meet the district performance standards"

6 Page 5, lines 6 - 7:

7 Delete "under the district evaluation system, an acceptable evaluation"

8 Page 5, line 8, after "district":

9 Insert ", an evaluation under the district's evaluation system stating that the teacher's
10 performance meets the district performance standards"

11 Page 7, lines 14 - 15:

12 Delete "of acceptable or better in the subject or subjects"

13 Insert "stating that the teacher's performance in the subject or subjects meets the
14 district performance standards"

15 Page 7, lines 18 - 19:

16 Delete "of acceptable or better in the subject or subjects"

17 Insert "stating that the teacher's performance in the subject or subjects meets the
18 district performance standards"

19 Page 9, after line 7:

20 Insert a new bill section to read:

21 **** Sec. 12.** AS 14.20.215 is amended by adding a new paragraph to read:

22 (8) "district performance standards" means evaluation criteria for the
23 district's teachers and administrators that are adopted by a school district under
24 AS 14.20.149 and that are based on the professional performance standards adopted
25 by the department."

1 Renumber the following bill sections accordingly.

AMENDMENT

#2

Senator Green

OFFERED IN THE SENATE

TO: CSHB 465(HES) am

- 1 Page 7, line 14, after "has":
- 2 Insert ", within the five years immediately preceding the last date on which the teacher
- 3 performed teaching services in the district before being laid off,"

- 4 Page 7, line 18, after "has":
- 5 Insert ", within the five years immediately preceding the last date on which the teacher
- 6 performed teaching services in the district before being laid off,"

Y	N
M	E
L	S
G	

Senator Green

AMENDMENT #3

OFFERED IN THE SENATE

TO: CSHB 465(HES) am

1 Page 6, lines 3 - 9:

2 Delete "failure to meet performance objectives defined in the individual's plan of
3 improvement which is based on locally adopted professional performance standards as
4 identified in AS 14.20.149; however, a school district may not nonretain a tenured
5 teacher under this paragraph unless the school district has fully complied with the
6 requirements of AS 14.20.149 and unless the district demonstrates that the teacher's
7 performance does not meet professional performance standards adopted by the school
8 districts"

9 Insert "the school district demonstrates that

10 (A) the district has fully complied with the requirements of
11 AS 14.20.149 with respect to the tenured teacher;

12 (B) the teacher's performance, after completion of the plan
13 of improvement, failed to meet the performance objectives set out in the
14 plan; and

15 (C) the teacher does not meet the district performance
16 standards"

*Amend to correct
line 9
add "by clear & convincing evidence"*

Y	N
L	E
M	S
G	

Y	N
F	L
S	M
	G

AMENDMENT

#4

OFFERED IN SENATE HESS
TO: CSHB 465(HES) am

SENATOR SALO

Page9, after line 27

Insert a new section to read:

"Sec. ____ This act takes effect on July 1, 1997"

Y/N
E/M
S/O

AMENDMENT #5

OFFERED IN SENATE HESS
TO: CSHB 465(HES) am

SENATOR SALO

Page 9, after line 27

Insert a new bill section to read:

"Sec __. Nothing in this act will be construed to limit or curtail a teacher's exercise of free speech rights, freedom of association, or academic freedom. Any attempt to restrict a teacher's rights as a citizen or as a teacher shall be voided under AS 14.20."

Y	N
E	L
S	M
	B

AMENDMENT

#6

OFFERED IN THE SENATE

BY SENATOR ^{Miller}~~GREEN~~

TO: CSHB 465(HES) am

- 1 Page 9, line 3:
- 2 Delete "applicable rules of court, for a judicial review based on the record"
- 3 Insert "Rules of Appellate Procedure concerning appeals from administrative agencies"
- 4 Page 9, lines 4 - 7:
- 5 Delete all material.

Y	N
G	E
L	S
M	

AMENDMENT

#7

OFFERED IN THE SENATE

BY SENATOR ^{Miller} GREEN

TO: CSHB 465(HES) am

1 Page 4, line 7:

2 Delete "nine and not more than 12 months"

3 Insert ~~9~~ 90 work days and ~~12~~ not more than 180 work days", unless shortened by mutual agreement between the evaluating and the teacher administrator

4 Page 4, lines 16 - 17:

5 Delete "nine and not more than 12 months"

6 Insert ~~9~~ 90 work days and ~~12~~ not more than ~~180~~ 210 work days, unless shortened by mutual agreement between the evaluating administrator and the administrator

amend to amend (S. Leman)

Y	N
S	0
F	
G	
M	
L	

#7

Y	N
M	S
L	E
G	

AMENDMENT

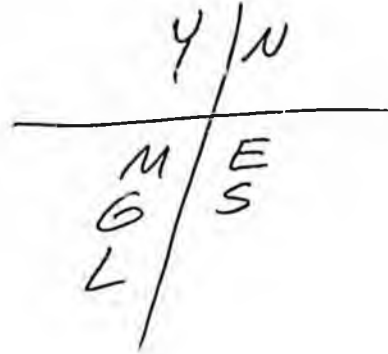
#8

Senator Green

OFFERED IN THE SENATE

TO: CSHB 465 (HES) am

- 1 Page 6, Line 24, after "decreased"
- 2 Delete ";"
- 3 Insert "or"



AMENDMENT

#9

OFFERED IN SENATE HESS
TO: CSHB 465(HES) am

SENATOR SALO

withdrawn

Delete section 10 and insert:

* Sec. 10. AS 14.20 is amended by adding a new section to read:

Sec. 14.20.177. LAYOFF STATUS. (a) A school district may place on layoff status a teacher who has acquired continuing employment status if

(1) it is necessary for the district to reduce the number of teachers because of a decrease in school attendance or because the school board has determined that a financial emergency exists; and

(2) except as provided in (b) of this section, the district has first given notice of nonretention to all probationary teachers.

(b) A school district may retain a probationary teacher and place on layoff status a continuing employment status teacher only if there is no qualified continuing employment status teacher to replace the probationary teacher.

(c) A school district must have a reduction-in-force plan. The plan must be consistent with this section and must include procedures for layoff and recall and for determining who is a qualified teacher for purposes of layoff and recall. If the reduction-in-force plan required by this section is provided for entirely or partially in a district's collective bargaining agreement, the district shall inform the department of that fact and the terms of the agreement constitute the relevant portion of the district's plan. If the negotiated plan does not contain all of the procedures required by this section, or if there is no negotiated reduction-in-force plan, the school board shall adopt a plan, or the necessary portion of a plan, that meets the requirements of this section and shall file the plan or portion of the plan and any subsequent revisions with the department. Nothing in this section prohibits a school district from negotiating or adopting a reduction-in-force plan that contains terms in addition to those required by this subsection.

(d) A teacher on layoff status is not entitled to reemployment under AS 14.20.145, does not accrue leave, and, except as provided for in the district's reduction-in-force plan, is not entitled to continuation of other employee benefits. However, layoff status does not constitute termination or an interruption in service for purposes of retaining acquired continuing employment status or retaining accrued sick leave.

AMENDMENT

#10

OFFERED IN THE SENATE

TO: CSHB 465 (HES)am

Page 1, line 10 after "under":

Insert "the school district's layoff procedures negotiated under"

Page 5, line 27, after "provided":

Insert "in layoff procedures negotiated"

Page 6, line 21, through page 8, line 4:

Delete all material and insert:

"Sec. 14.20.177. NEGOTIATED LAYOFF AND RECALL PROCEDURES. The school board and the employee bargaining organization representing certificated employees shall adopt as part of the negotiated agreement covering the employment of the certificated employees procedures for the layoff and recall of the employees. The procedures shall provide that a school district may only lay off certificated employees if there is a demonstrated reduction in school revenue or if the reduction in staff is necessary because of a decrease in school attendance."

Y/N
E L
S M
G

AMENDMENT

#11

OFFERED IN THE SENATE

TO: CSHB 465 (HES)am

Page 2, line 28, through page 4, line 28

Delete all material and insert:

"Sec. 14.20.149. NEGOTIATED EVALUATION SYSTEM. A school board shall bargain with the employee bargaining organization representing its certificated employees to establish an evaluation system for those employees. The system must include professional performance standards and must provide a method for adopting and implementing a plan of improvement to develop the competency of a teacher whose performance is less than acceptable."

Y	N
E	M
S	L
	G

AMENDMENT

#12

Offered by the Fairbanks North Star Borough School District

Senator Miller

In the Senate HESS Committee:
CSHB 465(HES)am

"An Act relating to employment of teachers and school administrators and to public school collective bargaining"

Page 4 Line 13:

Delete "an"
Insert "a tenured"

Page 4 Line 20:

after the word "administrator" add:

Nothing in this paragraph is intended to restrict a district's right to reassign an administrator to a teaching position, consistent with the terms of an applicable collective bargaining agreement.

Y/N
L/E
M/S
G