

ALASKA LEGISLATURE COMMITTEE FILES 1999-2000 8672

9815 HOUSE HEALTH EDUCATION & SOCIAL SERVICES

HB

253

Alaska State Legislature

Representative Jim Whitaker

Session
Capitol Building, Room 13
Juneau, Alaska 99801
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Interim
Legislative Affairs Agency, LIO
119 N. Cushman St. Suite 101
Fairbanks, AK 99701

Proposed Amendments to Committee Substitute for House Bill 253 (NEA suggestions)

1. Page 2, line 5: after the word "program", before the period, add- "developed by the community with input from parents, teachers and other persons responsible for students" (The proposed language by NEA is actually "developed by teachers and other persons responsible for students with input from parents and the community." The change to NEA's proposed language is to keep the wording in line with a primary emphasis of the bill – community involvement- and to still make sure teachers are in the loop.)

The rationale here is that there is a benefit in specifying who is to actually develop the program. There may be a tendency for Principals to rubber stamp a "template" program provided by the school district to fulfill the letter and not the intent of the law if the players are not identified specifically.

2. Page 3, line 6: add new sub section which reads:
"School districts will report information related to the school disciplinary and safety program as required by the Department of Education and Early Development (EED) to include reporting of incidents of disruptive and violent student behavior. Procedures for reporting will be developed by EED."

The rationale is that this will provide useful information for evaluation of effectiveness of school disciplinary, behavior, and safety programs.

3. Page 3, line 6: add new subsection, which reads:
"The Department of Education and Early Development (EED) may provide schools with character development curriculum, behavior intervention strategies, and alternative programs and services that emphasize prevention, early intervention, and long term reduction of disruptive and violent behavior."

The rationale here is that NEA is willing to use their resources to encourage and assist EED in providing these resources for schools. The permissive language is to prevent mandating expenditures and to give EED the option of doing nothing if expenditures are not possible or deemed unproductive.

FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. CS HB 253(HES)

Revision Date/Time (Note if correction) _____ Dept. Affected Education & Early Dev.
 Title School Disciplinary and Safety Program BRU Teaching & Learning Support
 Component Special & Supplemental Services
 Sponsor House HESS Committee
 Requester House HESS Committee Component No. 166

Expenditures/Revenues (Thousands of Dollars)

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

| OPERATING EXPENDITURES | FY 2001 | FY 2002 | FY 2003 | FY 2004 | FY 2005 | FY 2006 |
|------------------------|------------|------------|------------|------------|------------|------------|
| 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 |

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|-----------------------------|--|--|--|--|--|--|
| 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 | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (Specify Type) | | | | | | |
| TOTAL | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

Estimate of any current year (FY2000) cost: _____

POSITIONS

| | | | | | | |
|-----------|--|--|--|--|--|--|
| Full-time | | | | | | |
| Part-time | | | | | | |
| Temporary | | | | | | |

ANALYSIS: (Attach a separate page if necessary)

School disciplinary and safety programs are essential for school learning environments conducive to academic success. These programs are currently being implemented to some degree in all of Alaska's schools and school districts. This bill can be implemented within current school and district budgets, therefore the Department does not anticipate increased costs as a result of this bill.

Prepared by: Barbara Thompson, Deputy Director Phone 465-8727
 Division Teaching and Learning Support Date/Time _____
 Approved by Commissioner  Date 1.20.2000
 Agency _____

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CS FOR HOUSE BILL NO. 253(HES)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-FIRST LEGISLATURE - SECOND SESSION

BY THE HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES COMMITTEE

**Offered:
Referred:**

Sponsor(s): REPRESENTATIVE DYSON

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to a school disciplinary and safety program; and providing for
2 an effective date."

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

4 * **Section 1.** AS 14.33 is amended by adding new sections to read:

5 **Article 3. Required School Disciplinary and Safety Program.**

6 **Sec. 14.33.110. Purpose of school disciplinary and safety program.** The
7 purpose of AS 14.33.110 - 14.33.140 is to

8 (1) implement and maintain community-based standards of school
9 behavior that are understood, accepted, and upheld by students, parents, teachers,
10 school administrators, and the community;

11 (2) facilitate the creation of a standard of school behavior and safety
12 by local communities for the schools in those communities;

13 (3) protect and support teachers who enforce standards of student
14 behavior and safety in the classroom established under AS 14.33.120; and

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(4) ensure that all schools and school districts receiving state funds, that may not have already done so, implement and maintain an effective school disciplinary and safety program.

Sec. 14.33.120. School disciplinary and safety program. Each school shall adopt a written school disciplinary and safety program. A disciplinary and safety program adopted by a school must include the following:

(1) standards for student behavior and safety that reflect community standards and, at a minimum, basic requirements for respect and honesty;

(2) policies and procedures for developing and maintaining student behavior and safety standards as a collaborative community effort;

(3) policies and procedures for authorizing a teacher to remove a student from the classroom for failure to follow the school behavior and safety standards;

(4) policies and procedures for authorizing a teacher to remove a student for behavior described under AS 14.30.045(1) or (2);

(5) procedures to notify teachers of dangerous students consistent with AS 47.12.310(b);

(6) policies authorizing a teacher, teacher's assistant, or other person responsible for students to use reasonable and appropriate nondeadly force to maintain classroom safety and discipline as described under AS 11.81.430(a)(2).

Sec. 14.33.130. Enforcement of approved program; additional safety obligations. (a) A teacher, a teacher's assistant, or another person responsible for students may not be terminated or otherwise punished for enforcement of an approved school disciplinary and safety program, including behavior standards, adopted under AS 14.33.120.

(b) A teacher, a teacher's assistant, or another person responsible for students who

(1) receives information about a student under AS 47.12.310(b) or receives information that may affect the safety of students or staff shall notify the student's teacher or a school administrator; and

(2) observes a student committing a crime shall report the crime to the

1 local law enforcement agency; in this paragraph, "crime" has the meaning given in
2 AS 11.81.900.

3 (c) If a member of the governing body of a school district knowingly allows
4 a teacher, a teacher's assistant, or another person responsible for students to be
5 terminated or punished in violation of (a) of this section, the member is guilty of a
6 class A misdemeanor.

7 **Sec. 14.33.140. Civil liability for enforcing disciplinary and safety**
8 **program.** A teacher, a teacher's assistant, or another person responsible for students
9 is not liable for civil damage resulting from an act or omission arising out of
10 enforcement of an approved school disciplinary and safety program adopted under
11 AS 14.33.120 unless the act or omission constitutes gross negligence or reckless or
12 intentional misconduct.

13 * **Sec. 2.** The uncodified law of the State of Alaska is amended by adding a new section
14 to read:

15 **TRANSITION.** A school shall adopt the initial school disciplinary and safety program
16 required by AS 14.33.120, enacted in sec. 1 of this Act, by January 1, 2001.

17 * **Sec. 3.** This Act takes effect July 1, 2000.



Alaska State Legislature

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REPRESENTATIVE FRED DYSON

HB 253 Sponsor Statement

"An Act establishing a school disciplinary and safety program"

School Teachers must be able to control their classrooms and enforce appropriate student behavior to keep classrooms civil and safe.

HB 253 Requires Schools to:

- Install community agreed-upon student behavior standards,
- Establish disciplinary procedures for students who are unwilling or unable to abide by school behavior standards, and
- Protect teachers against retribution when the teachers use the established disciplinary procedures to enforce the community agreed-upon behavior standards.

Many schools and school districts in Alaska are doing a good job of following the letter and intent of this legislation. However, there are also schools in our state where the school board and/or administration do not enforce behavior and safety standards and do not back up teachers who try. This legislation does not set behavior and safety standards. It merely requires that local standards be identified and established and that teachers be protected for adhering to and enforcing these standards.

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Statutes referenced in CSHB 253 (HES)

1-LS0599\I

A. Referenced page 2, line 15:

Sec. 14.30.045. Grounds for suspension or denial of admission.

A school age child may be suspended from or denied admission to the public school that the child is otherwise entitled to attend only for the following causes:

(1) continued wilful disobedience or open and persistent defiance of reasonable school authority;

(2) behavior that is inimicable to the welfare, safety, or morals of other pupils or a person employed or volunteering at the school;

(3) a physical or mental condition that in the opinion of a competent medical authority will render the child unable to reasonably benefit from the programs available;

(4) a physical or mental condition that in the opinion of a competent medical authority will cause the attendance of the child to be inimicable to the welfare of other pupils;

(5) conviction of a felony that the governing body of the district determines will cause the attendance of the child to be inimicable to the welfare or education of other pupils.

B. Referenced page 2, line 17:

Sec. 47.12.310. Agency records.

(a) Except as specified in ..., and (b) - (g) of this section, all information and social records pertaining to a minor... are privileged and may not be disclosed directly or indirectly to anyone without a court order.

(b) A state or municipal agency or employee

(1) shall disclose information regarding a case to a federal, state, or municipal law enforcement

agency for a specific investigation being conducted by that agency; and

(2) shall disclose appropriate information regarding a case to

(A) ...

(C) school officials as may be necessary to protect the safety of the minor who is the subject of the case and the safety of school students and staff or to enable the school to provide appropriate counseling and supportive services to meet the needs of a minor about whom information is disclosed;

C. Referenced page 2, line 20:

Sec. 11.81.430. Justification: Use of force, special relationships.

(a) The use of force upon another person that would otherwise constitute an offense is justified under any of the following circumstances:

(1) When and to the extent reasonably necessary and appropriate to promote the welfare of the child or incompetent person, a parent, guardian, or other person entrusted with the care and supervision of a child under 18 years of age or an incompetent person may use reasonable and appropriate nondeadly force upon that child or incompetent person.

(2) When and to the extent reasonably necessary and appropriate to maintain order and when the use of force is consistent with the welfare of the students, a teacher may, if authorized by school regulations and the principal of the school, use reasonable and appropriate nondeadly force upon a student. If authorized by school regulations and the principal of the school, a teacher may use nondeadly force under this paragraph in any situation in which the teacher is responsible for the supervision of students. A teacher employed by a school board, including a regional educational attendance area school board, may use nondeadly force under this paragraph only if the school regulations authorizing the use of force have been adopted by the school board.

HB 253: Sectional Analysis

Section 1:

New Section 14.33.110 describes, in broad terms, the goals and purposes of HB 253.

New Section 14.33.120 requires each school to produce a written school disciplinary and safety program. Schools should have most of the elements of this mandate in place so compliance will simply be a matter of documenting what exists and ensuring that the program reflects community values. Elements of the program are to include:

- 1) Behavior standards representative of the values of the community in which the school resides.
- 2) Policies and procedures for a teacher to follow to remove students who are a threat to safety from the classroom.
- 3) Procedures for notifying teachers of students who may be a threat to safety.
- 4) Policies authorizing a teacher to use appropriate force to maintain classroom discipline.

New Section 14.33.130 makes it a class A misdemeanor to terminate or discipline a teacher who is enforcing an established school disciplinary and safety program. It also requires a teacher, teacher's assistant, principal, or other school official who receives certain information about a student to report it to the student's teacher and to report student criminal activity to the local law enforcement agency.

Section 2:

Gives a deadline for school compliance

Section 3:

Sets an effective date.

HB

256

ALASKA STATE HOUSE OF REPRESENTATIVES

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REPRESENTATIVE JOHN COGHILL

HB 256 MANDATORY VIDEOTAPING IN CINA CASES SPONSOR STATEMENT

The requirement of videotaping in interviewing children to determine if they are a Child in Need of Assistance has been an issue highly debated. The objection to mandatory videotaping has been the cost to the State of Alaska to implement such a requirement. Fiscal notes in past legislation have been based on outdated videotaping methods. They have not taken into account new technology for videotaping, nor have they taken into consideration the savings to be realized by the State of Alaska. Mandatory videotaping will reduce numbers of interviews, reduce determinations of CINA cases, reduce costs for foster care and medical expenses, and reduce workloads for the attorney general's, public defender's, and Office of Public advocacy's offices.

The reasons for requiring mandatory videotaping are threefold.:

- Videotaping reduces trauma to the child because the videotaped interview can be used in place of multiple interviews by social workers, school officials, guardian ad litem, attorney general's office and the public defender's office.
- The videotape will contain information that the judge can review at the 48-hour-hearing to determine if the child is in need of aid without subjecting the child to yet one more interview.
- Videotaping increases the quality of the interview because the interviewer knows his or her method of interviewing the child will be scrutinized by all parties

The court system has expressed support of videotaping in other states for other reasons:

- Once a child has been interviewed on videotape, it is harder for he or she to recant what was said. It is also easier for the court to determine if the child was manipulated into answering certain questions a certain way.
- A person accused of child abuse is more likely to confess, if he or she views a videotaped interview.
- Expert witnesses can review the videotape and give expert testimony on their findings.
- Videotapes often refresh the victims memory which has faded with time in cases where months or years pass before a case is tried.

With cost no longer being an objection Alaska should join Ohio in leading the charge for States to minimize child abuse both by friends or members of their families and by the system.

Alaska State Legislature

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Representative John Coghill

HB 256 Mandatory Videotaping in CINA Cases SPONSOR STATEMENT

Videotaping of interviews when determining if a Child is in Need of Assistance (CINA) is one of the best ways to insure accountability for all involved, and is one of the least subjective means of getting information to a court for CINA hearings.

Videotaping should be mandatory for cases where a child is taken into protective custody. Because probable cause has yet to be determined, the testimony of the child is important to the validity of any subsequent charges that may be imposed. At this time, the interpretation of an interview with a child by the social worker may be all that is presented as evidence for action.

Mandatory videotaping will reduce the number of interviews for a child and protect the child from "system abuse", while giving many agencies that get involved a first hand testimonial.

The primary reasons for requiring mandatory videotaping can be summed in the following:

- Videotaping reduces trauma to the child because the videotaped interview can be used in place of multiple interviews by social workers, school officials, guardian ad litem, attorney general's office, and the public defender's office.
- The videotape will contain information that the judge can review at the 48-hour-hearing to determine if the child is in need of aid without subjecting the child to yet one more interview.
- Videotaping increases the quality of the interview because the interviewer knows his or her method of interviewing the child will be scrutinized by all parties.

The court system has expressed support of videotaping in other states for other reasons:

- Once a child has been interviewed on videotape, it is harder for he or she to recant what was said. It is also easier for the court to determine if the child was manipulated into answering certain questions in a certain way.
- A person accused of child abuse is more likely to confess, if he or she views a videotaped interview.
- Expert witnesses can review the videotape and give expert testimony on their findings.
- Videotapes often refresh the victims memory which has faded with time in cases where months or years pass before a case is tried.

FISCAL NOTE

STAT. OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. HB 256

Revision Date/Time (Note if correction): _____
 Title: Relating to recording CINA interviews.
 Sponsor: Rep. Coghill
 Requestor: _____

Dept. Affected: Health and Social Services
 BRU: Family and Youth Services
 Component: Front Line Social Workers
 COMPONENT SERIAL NO. 2305
 See also (SN#): _____

Expenditures/Revenues: (Thousands of Dollars)

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

| OPERATING | FY2001 | FY2002 | FY2003 | FY2004 | FY2005 | FY2006 |
|------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| PERSONAL SERVICES | 1,665.0 | 1,665.0 | 1,665.0 | 1,665.0 | 1,665.0 | 1,665.0 |
| TRAVEL | 235.0 | 197.5 | 197.5 | 197.5 | 197.5 | 197.5 |
| CONTRACTUAL | 1,282.0 | 1,282.0 | 1,282.0 | 1,282.0 | 1,282.0 | 1,282.0 |
| SUPPLIES | 46.2 | 46.2 | 46.2 | 46.2 | 46.2 | 46.2 |
| EQUIPMENT | 48.8 | 7.3 | 7.3 | 7.3 | 7.3 | 7.3 |
| LAND & STRUCTURES | | | | | | |
| GRANTS, CLAIMS | | | | | | |
| MISCELLANEOUS | | | | | | |
| TOTAL OPERATING | 3,277.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 |

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|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES | | | | | | |
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|---------------------|--|--|--|--|--|--|
| CHANGES IN REVENUES | | | | | | |
|---------------------|--|--|--|--|--|--|

FUND SOURCE (Thousands of Dollars)

| | | | | | | |
|--------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | 3,277.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (please specify) | | | | | | |
| TOTAL | 3,277.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 |

Estimate of any current year (FY2000) cost: \$0.0

POSITIONS:

| | | | | | | |
|-----------|----|----|----|----|----|----|
| FULL-TIME | 37 | 37 | 37 | 37 | 37 | 37 |
| PART-TIME | 0 | 0 | 0 | 0 | 0 | 0 |
| TEMPORARY | 0 | 0 | 0 | 0 | 0 | 0 |

ANALYSIS: (Attach a separate page if necessary)

This bill requires that all interviews with children regarding alleged abuse or neglect be videotaped. This will require videotaping in the field (when interviews occur in schools, in homes, in other locations) and in DFYS offices. DFYS would need to purchase video cameras for every field office, multiple cameras for larger offices where several interviews are occurring at the same time, and accessories for field and fixed taping sites. DFYS would have to hire 37 employees at the Social Service Associate III (SSA III) level to operate cameras and support the cataloging, duplication, organization, storage, and retrieval of tapes. There will be cleaning, repair, maintenance, and replacement costs for the cameras. There will be transcription costs, assuming an average of two hours per investigation and translation costs, assuming that approximately 10% will require translation from Native and other non-English languages.

Travel for training and for direct client services will be required (SSA's must travel with the social workers to do some interviews, or children must be brought to locations where videotaping can occur).

Prepared by: Theresa Tanoury, Director
 Division: Family and Youth Services

Phone: 465-3191
 Date/Time: 2:25:00 2:07 PM

Approved by Commissioner: Karen Perdue, Commissioner
 Agency: Department of Health & Social Services

Date: 2/28/00

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ANALYSIS (cont.):

Fiscal projections are based on an estimated 13,200 investigations that will be required to be videotaped. Personal services estimates based on videotaping 13,200 investigations per year which will require the assistance of 37 SSA III's Statewide. This will provide field offices with a trained Social Services Associate to facilitate videotaping, documentation, and archiving of the tapes.

Contractual Services: all videotaped interviews would have to be transcribed. The Department estimates an average of two hours per investigation will be required for transcription. Additionally, the Department estimates that a Native language or other non-English language interpreter will be needed for 10% of the investigations. Training is a crucial element to ensure that DFYS Social Workers and SSA's perform videotaping in a consistent and professional manner which takes into consideration court/legal requirements and the sensitivity of our clients.

| | <u>FY2001</u> | <u>Annual Cost FY2002-FY2006</u> |
|--|---------------------|--------------------------------------|
| Personal Services | <u>71000</u> | |
| 37 New Social Services Associate III positions Range 12: | 1,665.0 | 1,665.0 |
| Travel | <u>72000</u> | |
| SSA III's to assist in videotaping investigations | 185.0 | 185.0 |
| Staff travel to attend training | 35.0 | 8.8 |
| Community Orientations: | <u>15.0</u> | <u>3.8</u> |
| | 235.0 | 197.5 |
| Contractual | <u>73000</u> | |
| Transcription (Based on 13,200 assigned investigations). | 1,056.0 | 1,056.0 |
| Language Translation for Videotapes (10%) | 184.8 | 184.8 |
| Archiving Videotapes | 5.3 | 5.3 |
| Training | 27.0 | 27.0 |
| Repair Maintenance of Equipment: | <u>8.9</u> | <u>8.9</u> |
| | 1,282.0 | 1,282.0 |
| Supplies | <u>74000</u> | |
| Videotapes (Based on 13,200 investigations@ \$3.50 per tape) | 46.2 | 46.2 |
| Equipment | <u>75000</u> | |
| Video Cameras (\$650 per unit x 37 units) | 24.1 | |
| Carrying Cases (\$250 per unit * 37 units) | 9.3 | |
| Tripods (\$75 per unit * 37 units) | 2.8 | |
| VCR's (\$125 per VCR) | 4.3 | |
| Monitors (\$250 per monitor) | <u>8.5</u> | |
| Sub-total Equipment: | 48.8 | |
| Equipment Replacment (15% per year) | | 7.3 |
| Total Lines 100-500: | 3,277.0 | 3,198.0 |

FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. HB 256

| | |
|---|---|
| Revision Date | Dept. Affected <u>Public Safety</u> |
| Title <u>RECORDING OF INTERVIEWS WITH</u> | BRU <u>Alaska State Trooper Detachment</u> |
| <u>CHILDREN</u> | Component: <u>Alaska State Trooper Detachment</u> |
| Sponsor <u>Representative Coghill</u> | |
| Requester <u>House HESS Committee</u> | Component No. <u>2325</u> |

Expenditures/Revenues (Thousands of Dollars)

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

| OPERATING EXPENDITURES | FY 2001 | FY 2002 | FY 2003 | FY 2004 | FY 2005 | FY 2006 |
|-------------------------------|-------------|------------|------------|------------|------------|------------|
| Personal Services | | | | | | |
| Travel | | | | | | |
| Contractual | | | | | | |
| Supplies | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |
| Equipment | 52.0 | | | | | |
| Land & Structures | | | | | | |
| Grants & Claims | | | | | | |
| Miscellaneous | | | | | | |
| TOTAL OPERATING | 58.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |
| CAPITAL EXPENDITURES | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| CHANGE IN REVENUES () | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

FUND SOURCE (Thousands of Dollars)

| | | | | | | |
|--------------------------|-------------|------------|------------|------------|------------|------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | 58.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (Specify Type) | | | | | | |
| TOTAL | 58.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |

Estimate of any current year (FY2000) 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)

To have the ability to videotape interviews as required under this bill the division will need 40 new video camera kits at about \$1300.00 each (\$52,000.00). This 40 unit request will allow AST to assign camera kits to each post (34), to the General Investigative Unit (3) and to the Criminal Investigation Bureau (3). Also requested is funding for 750 video tapes at \$9.00 each (\$6,700.00). The video tapes would have to be purchased each year as new cases would be coming in and the used tapes would be in storage as evidence.

| | |
|---|----------------------------|
| Prepared by: <u>Royce Weller, Special Assistant</u> | Phone <u>465-4322</u> |
| Division <u>Office of the Commissioner</u> | Date/Time <u>2/29/2000</u> |
| Approved by: _____ | Date <u>2/29/00</u> |
| Agency <u>Commissioner Ronald L. Otte, Dept. of Public Safety</u> | |

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FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. HB 256

| | | |
|---|---|--|
| Revision Date _____ | Dept. Affected <u>Public Safety</u> | |
| Title <u>RECORDING OF INTERVIEWS WITH</u> | BRU <u>Alaska State Trooper Detachment</u> | |
| <u>CHILDREN</u> | Component: <u>Alaska State Trooper Detachment</u> | |
| Sponsor <u>Representative Coghill</u> | | |
| Requester <u>House HESS Committee</u> | Component No. <u>2325</u> | |

Expenditures/Revenues (Thousands of Dollars)

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

| OPERATING EXPENDITURES | FY 2001 | FY 2002 | FY 2003 | FY 2004 | FY 2005 | FY 2006 |
|-------------------------------|-------------|------------|------------|------------|------------|------------|
| Personal Services | | | | | | |
| Travel | | | | | | |
| Contractual | | | | | | |
| Supplies | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |
| Equipment | 52.0 | | | | | |
| Land & Structures | | | | | | |
| Grants & Claims | | | | | | |
| Miscellaneous | | | | | | |
| TOTAL OPERATING | 58.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |
| CAPITAL EXPENDITURES | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |
| CHANGE IN REVENUES () | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

FUND SOURCE (Thousands of Dollars)

| | | | | | | |
|--------------------------|-------------|------------|------------|------------|------------|------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | 58.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (Specify Type) | | | | | | |
| TOTAL | 58.7 | 6.7 | 6.7 | 6.7 | 6.7 | 6.7 |

Estimate of any current year (FY2000) 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)

To have the ability to videotape interviews as required under this bill the division will need 40 new video camera kits at about \$1300.00 each (\$52,000.00). This 40 unit request will allow AST to assign camera kits to each post (34), to the General Investigative Unit (3) and to the Criminal Investigation Bureau (3). Also requested is funding for 750 video tapes at \$9.00 each (\$6,750.00). The video tapes would have to be purchased each year as new cases would be coming in and the used tapes would be in storage as evidence.

| | |
|--|-----------------------------|
| Prepared by: <u>Royce Weller, Special Assistant</u> | Phone: <u>465-4322</u> |
| Division: <u>Office of the Commissioner</u> | Date/Time: <u>2/29/2000</u> |
| Approved by: _____ | Date: <u>2/29/00</u> |
| Agency: <u>Commissioner Ronald L. Otte, Dept. of Public Safety</u> | |

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FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. HB 256

Revision Date/Time (Note if correction): _____
 Title: Relating to recording CINA interviews.
 Sponsor: Rep. Coghill
 Requester: _____

Dept. Affected: Health and Social Services
 BRU: Family and Youth Services
 Component: Front Line Social Workers
 COMPONENT SERIAL NO. 2305
 See also (SN#): _____

Expenditures/Revenues: (Thousands of Dollars)

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

| OPERATING | FY2001 | FY2002 | FY2003 | FY2004 | FY2005 | FY2006 |
|------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| PERSONAL SERVICES | 1,665.0 | 1,665.0 | 1,665.0 | 1,665.0 | 1,665.0 | 1,665.0 |
| TRAVEL | 235.0 | 197.5 | 197.5 | 197.5 | 197.5 | 197.5 |
| CONTRACTUAL | 1,282.0 | 1,282.0 | 1,282.0 | 1,282.0 | 1,282.0 | 1,282.0 |
| SUPPLIES | 46.2 | 46.2 | 46.2 | 46.2 | 46.2 | 46.2 |
| EQUIPMENT | 48.8 | 7.3 | 7.3 | 7.3 | 7.3 | 7.3 |
| LAND & STRUCTURES | | | | | | |
| GRANTS, CLAIMS | | | | | | |
| MISCELLANEOUS | | | | | | |
| TOTAL OPERATING | 3,277.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 |

CAPITAL EXPENDITURES

CHANGES IN REVENUES ()

FUND SOURCE (Thousands of Dollars)

| | | | | | | |
|--------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | 3,277.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 |
| 1005 GF Program Receipts | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (please specify) | | | | | | |
| TOTAL | 3,277.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 | 3,198.0 |

Estimate of any current year (FY2000) cost: \$0.0

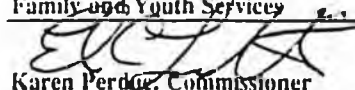
POSITIONS:

| | | | | | | |
|-----------|----|----|----|----|----|----|
| FULL-TIME | 37 | 37 | 37 | 37 | 37 | 37 |
| PART-TIME | 0 | 0 | 0 | 0 | 0 | 0 |
| TEMPORARY | 0 | 0 | 0 | 0 | 0 | 0 |

ANALYSIS: (Attach a separate page if necessary)

This bill requires that all interviews with children regarding alleged abuse or neglect be videotaped. This will require videotaping in the field (when interviews occur in schools, in homes, in other locations) and in DFYS offices. DFYS would need to purchase video cameras for every field office, multiple cameras for larger offices where several interviews are occurring at the same time, and accessories for field and fixed taping sites. DFYS would have to hire 37 employees at the Social Service Associate III (SSA III) level to operate cameras and support the cataloging, duplication, organization, storage, and retrieval of tapes. There will be cleaning, repair, maintenance, and replacement costs for the cameras. There will be transcription costs, assuming an average of two hours per investigation and translation costs, assuming that approximately 10% will require translation from Native and other non-English languages.

Travel for training and for direct client services will be required (SSA's must travel with the social workers to do some interviews, or children must be brought to locations where videotaping can occur).

Prepared by: Theresa Tanoury, Director
 Division: Family and Youth Services

 Approved by Commissioner: Karen Perdue, Commissioner
 Agency: Department of Health & Social Services

Phone: 465-3191
 Date/Time: 2:25:00 2:07 PM
 Date: 2/28/00

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ANALYSIS (cont.):

Fiscal projections are based on an estimated 13,200 investigations that will be required to be videotaped. Personal services estimates based on videotaping 13,200 investigations per year which will require the assistance of 37 SSA III's Statewide. This will provide field offices with a trained Social Services Associate to facilitate videotaping, documentation, and archiving of the tapes.

Contractual Services: all videotaped interviews would have to be transcribed. The Department estimates an average of two hours per investigation will be required for transcription. Additionally, the Department estimates that a Native language or other non-English language interpreter will be needed for 10% of the investigations. Training is a crucial element to ensure that DFYS Social Workers and SSA's perform videotaping in a consistent and professional manner which takes into consideration court/legal requirements and the sensitivity of our clients.

| | <u>FY2001</u> | <u>Annual Cost FY2002-FY2006</u> |
|--|---------------------|--------------------------------------|
| Personal Services | <u>71000</u> | |
| 37 New Social Services Associate III positions Range 12: | 1,665.0 | 1,665.0 |
| Travel | <u>72000</u> | |
| SSA III's to assist in videotaping investigations | 185.0 | 185.0 |
| Staff travel to attend training | 35.0 | 8.8 |
| Community Orientations: | <u>15.0</u> | <u>3.8</u> |
| | 235.0 | 197.5 |
| Contractual | <u>73000</u> | |
| Transcription (Based on 13,200 assigned investigations). | 1,056.0 | 1,056.0 |
| Language Translation for Videotapes (10%) | 184.8 | 184.8 |
| Archiving Videotapes | 5.3 | 5.3 |
| Training | 27.0 | 27.0 |
| Repair/Maintenance of Equipment: | <u>8.9</u> | <u>8.9</u> |
| | 1,282.0 | 1,282.0 |
| Supplies | <u>74000</u> | |
| Videotapes (Based on 13,200 investigations@ \$3.50 per tape) | 46.2 | 46.2 |
| Equipment | <u>75000</u> | |
| Video Cameras (\$650 per unit x 37 units) | 24.1 | |
| Carrying Cases (\$250 per unit * 37 units) | 9.3 | |
| Tripods (\$75 per unit * 37 units) | 2.8 | |
| VCR's (\$125 per VCR) | 4.3 | |
| Monitors (\$250 per monitor) | <u>8.5</u> | |
| Sub-total Equipment: | 48.8 | |
| Equipment Replacment (15% per year) | | 7.3 |
| Total Lines 100-500: | 3,277.0 | 3,198.0 |

1-LS1049K
Luckhaupt
3/27/00

CS FOR HOUSE BILL NO. 256()

IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-FIRST LEGISLATURE - SECOND SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVE COGHILL

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to reports of suspected child abuse or neglect, and to the
2 recording of interviews with children who are alleged to have been abused or
3 neglected."

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

5 * Section 1. AS 47.17.010 is amended to read:

6 Sec. 47.17.010. Purpose and intent. (a) In order to protect children whose
7 health and well-being may be adversely affected through the infliction, by other than
8 accidental means, of harm through physical injury or neglect, mental injury, sexual
9 abuse, sexual exploitation, or maltreatment, the legislature requires the reporting of
10 these cases by practitioners of the healing arts and others to the department. It is not
11 the intent of the legislature that persons required to report suspected child abuse or
12 neglect under this chapter investigate the suspected child abuse or neglect before they
13 make the required report to the department. Reports of suspected child abuse or
14 neglect must be made when there is a reasonable cause to suspect child abuse or

1 neglect in order to make state investigative and social services available in a wider
2 range of cases at an earlier point in time.

3 (b) It is the intent of the legislature [, TO MAKE SURE] that investigations
4 regarding reports of suspected child abuse and neglect

5 (1) be [ARE] conducted by trained investigators;

6 (2) [, AND TO] avoid subjecting a child to multiple interviews about
7 the abuse or neglect; and

8 (3) ensure that each interview with a child concerning the alleged
9 abuse or neglect that is made as part of the investigation of a report is recorded
10 on videotape or, if videotaping is not feasible, on audiotape.

11 (c) It is the further intent of the legislature that, as a result of requiring the
12 making of these reports of suspected child abuse or neglect, protective services will
13 be made available in an effort to

14 (1) prevent further harm to the child;

15 (2) safeguard and enhance the general well-being of children in this
16 state; and

17 (3) preserve family life unless that effort is likely to result in physical
18 or emotional damage to the child.

19 * Sec. 2. The uncodified law of the State of Alaska is amended by adding a new section
20 to read:

21 VIDEOTAPING PILOT PROJECT. (a) Not later than October 1, 2000, the
22 Department of Health and Social Services shall select one municipality and, in that
23 municipality, shall establish a pilot project to study the use of videotaping of interviews with
24 children who are alleged to have been abused or neglected. In the municipality selected, an
25 employee of the Department of Health and Social Services, the Department of Law, the
26 Department of Public Safety, or a municipal law enforcement agency investigating a report
27 that a child is in need of aid under AS 47.10 shall videotape a scheduled interview with a
28 child who is alleged to have been abused or neglected. The Department of Health and Social
29 Services shall coordinate the purchase of videotape equipment and the distribution of that
30 equipment to state and municipal officials who may be expected to interview children who
31 are alleged to have been abused or neglected. The pilot project shall continue for not less

1 than 18 months.

2 (b) The Department of Health and Social Services shall prepare a written interim
3 report for submission to the Twenty-Second Alaska State Legislature not later than the 10th
4 day of the second regular session. The interim report must discuss the pilot project, problems
5 encountered, benefits discovered, and other information pertinent to designing a statewide
6 videotaping program. A final report shall be prepared for submission to the Twenty-Third
7 Alaska State Legislature not later than the 10th day of the first regular session. The final
8 report must include a final evaluation of the pilot project and recommended draft legislation
9 to put in place a permanent statewide videotaping program for videotaping interviews of
10 children who are alleged to have been abused or neglected.

11 (c) The municipality selected under (a) of this section must have a population, based
12 upon the most recent population statistics available from the Department of Community and
13 Economic Development, of not less than 40,000 and not more than 150,000.

14 (d) If videotaping equipment proves to be unavailable or unreliable before or during
15 a scheduled interview with a child, every effort shall be made to record the interview on audio
16 tape.

17 (e) The failure to videotape a scheduled interview of a child as required under (a) of
18 this section does not mean the statement of the child taken at the scheduled interview is
19 inadmissible in any subsequent civil or criminal proceeding.

20 (f) In this section, a "scheduled interview" is an interview that is planned to occur,
21 does not happen spontaneously, and at which it is anticipated that the child will, or possibly
22 might, relate facts or allegations that the child has been abused or neglected.

23 * Sec. 3. This Act is repealed January 31, 2003.

HB

257

1-LS1055V
Ford
2/2/00

CS FOR HOUSE BILL NO. 257()

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-FIRST LEGISLATURE - SECOND SESSION

BY

**Offered:
Referred:**

Sponsor(s): REPRESENTATIVE JAMES

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to funding for school districts operating secondary school**
2 **boarding programs; and providing for an effective date."**

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

4 *** Section 1. AS 14.16 is amended by adding a new section to read:**

5 **Article 2. School District Operating Boarding Programs.**

6 **Sec. 14.16.200. State funding for districts operating secondary school**
7 **boarding programs. (a) A district is eligible to receive reimbursement for the costs**
8 **incurred by the district in operating a secondary school boarding program. To be**
9 **eligible for reimbursement for costs, the district secondary school boarding program**
10 **must provide a suitable student dormitory and daily access to a school offering the**
11 **appropriate grade level.**

12 **(b) Costs that may be claimed by a district for reimbursement are**

13 **(1) one round trip between the student's community of residence and**
14 **the school during the school year if the district expends money for the trip; and**

1 (2) a per-pupil stipend determined by the department on a regional
2 basis.

3 (c) In this section, "district" has the meaning given in AS 14.17.990.

4 * Sec. 2. The uncodified law of the State of Alaska is amended by adding a new section
5 to read:

6 REVISOR INSTRUCTIONS. The revisor of statutes shall substitute the spanned
7 reference "AS 14.16.010 - 14.16.080" for a reference to "this chapter" in AS 14.16.010.

8 * Sec. 3. This Act takes effect July 1, 2000.

ALASKA STATE LEGISLATURE

REPRESENTATIVE
JEANNETTE JAMES
PO Box 56622
North Pole, Alaska 99705
(907) 488-1546
FAX (907) 488-4271



While in Juneau
State Capitol
Juneau, Alaska
99801-1182
(907) 465-3743
FAX (907) 465-2381

House of Representatives
House District 34

Sponsor Statement

HB 257

BOARDING SCHOOL FUNDING

1/2700

Conversations with people throughout Alaska indicate we have a growing problem with unavailable classes and restricted educational opportunities in Alaska's isolated rural regions. Many people have indicated that regional secondary boarding schools are the ideal solution.

In addition to offering rural students a greater availability of expertise in specialized subject matter, boarding schools are also a viable option for non-traditional students who are failing or dropping out of traditional school settings from urban areas as well. We have all heard wonderful success stories of students who turned their lives around by attending a boarding school.

This bill would not replace any existing boarding programs. By allowing the Department of Education to pay a regional stipend to school districts which offer dormitory facilities, it would expand the opportunities for existing as well as new boarding schools in Alaska.

FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. CS HB 257 (HES)

| | |
|--|--|
| Revision Date/Time _____ | Dept. Affected: <u>Education & Early Development</u> |
| Title <u>An act relating to funding for school districts</u> | BRU <u>K-12 Support</u> |
| <u>operating secondary school boarding programs</u> | Component <u>Boarding Home Grants</u> |
| Sponsor <u>Representative James</u> | |
| Requester <u>House HESS</u> | Component No. <u>148</u> |

Expenditures/Revenues (Thousands of Dollars)

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

| OPERATING EXPENDITURES | FY 2001 | FY 2002 | FY 2003 | FY 2004 | FY 2005 | FY 2006 |
|------------------------|--------------|----------------|----------------|----------------|----------------|----------------|
| Personal Services | | | | | | |
| Travel | | | | | | |
| Contractual | | | | | | |
| Supplies | | | | | | |
| Equipment | | | | | | |
| Land & Structures | | | | | | |
| Grants & Claims | 601.7 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 |
| Miscellaneous | | | | | | |
| TOTAL OPERATING | 601.7 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 |

| | | | | | | |
|-----------------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES | | | | | | |
|-----------------------------|--|--|--|--|--|--|

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

FUND SOURCE (Thousands of Dollars)

| FUND SOURCE | FY 2001 | FY 2002 | FY 2003 | FY 2004 | FY 2005 | FY 2006 |
|--------------------------|--------------|----------------|----------------|----------------|----------------|----------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | 601.7 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (Specify Type) | | | | | | |
| TOTAL | 601.7 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 | 1,459.6 |

Estimate of any current year (FY2000) cost: _____

POSITIONS

| | | | | | | |
|-----------|--|--|--|--|--|--|
| Full-time | | | | | | |
| Part-time | | | | | | |
| Temporary | | | | | | |

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

This legislation will provide an allocation to a school district for a portion of the residential cost of a district operated boarding home program. The fiscal impact noted above is based on the assumption that the stipend rate developed for the secondary boarding home program as defined in 4 ACC 09.050 will be used by the department. The entitlement was calculated as follows: number of students times the monthly stipend rate times nine months.

These cost estimates are based on projected students/capacity for programs that are currently offering boarding programs and those who have expressed interest in providing boarding programs. Any new or expanded programs in the future would require additional resources.

| | |
|--|-----------------------|
| Prepared by: <u>Eddy Jeans, School Finance Manager</u> | Phone <u>465-8679</u> |
| Division <u>Education Support Services</u> | Date/Time _____ |
| Approved by: <u>Richard S. Cross, Commissioner</u> | Date <u>2/25/00</u> |
| Agency <u>Education & Early Development</u> | |

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Alaska Department of Education & Early Development

Residential Boarding Home Information
CS HB 257

Number of Students projected to be served in FY2001

| District | # of Students | Stipend Rate | Stipend | Comments |
|-------------------------|---------------|--------------|------------|----------------------------|
| Lower Kuskokwim: | | | | |
| Bethel | 30 | \$443 / mo | \$ 119,610 | Lease a facility |
| Nenana | | 425 / mo | - | Will be owned and operated |
| Galena | 70 | 522 / mo | 328,860 | Leased from Air Force |
| Iditarod | 15 | 443 / mo | 59,805 | Rent Houses in Takotna |
| Pribilof: | | | | |
| St. Paul | 8 | 443 / mo | 31,896 | House - District owned |
| Totals Stipends | 123 | | \$540,171 | |
| Roundtrip Airfare | \$500 | | \$61,500 | |
| Total FY2001 | | | \$601,671 | |

Number of Students projected to be served in FY2002

| District | # of Students | Stipend Rate | Stipend | Comments |
|-------------------------|---------------|--------------|-------------|----------------------------|
| Lower Kuskokwim: | | | | |
| Bethel | 30 | \$443 / mo | \$ 119,610 | Lease a facility |
| Nenana | 96 | 425 / mo | 367,200 | Will be owned and operated |
| Galena | 150 | 522 / mo | 704,700 | Leased from Air Force |
| Iditarod | 20 | 443 / mo | 79,740 | Rent Houses in Takotna |
| Pribilof: | | | | |
| St. Paul | 9 | 443 / mo | 35,883 | House - District owned |
| Totals Stipends | 305 | | \$1,307,133 | |
| Roundtrip Airfare | \$500 | | \$152,500 | |
| Total FY2002 | | | \$1,459,633 | |

HB

258

FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. CS HB 258 (HES)

Revision Date/Time (Note if correction): Jan. 31, 2000, 2:51pm Dept. Affected: Health and Social Services
 Title: An Act Related to Assisted Living Homes BRU: Community Mental Health Grants
 Component: Gen Community Mental Hlth Grants
 Sponsor: Representatives J. James & J. Coghill, Jr. COMPONENT SERIAL NO. 307
 Requestor: House (HES) See also (SN#): _____

Expenditures/Revenues: (Thousands of Dollars)

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

| OPERATING | FY2001 | FY2002 | FY2003 | FY2004 | FY2005 | FY2006 |
|------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| PERSONAL SERVICES | | | | | | |
| TRAVEL | | | | | | |
| CONTRACTUAL | | | | | | |
| SUPPLIES | | | | | | |
| EQUIPMENT | | | | | | |
| LAND & STRUCTURES | | | | | | |
| GRANTS, CLAIMS | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 |
| MISCELLANEOUS | | | | | | |
| TOTAL OPERATING | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 |

| | | | | | | |
|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES | | | | | | |
|----------------------|--|--|--|--|--|--|

| | | | | | | |
|-------------------------|--|--|--|--|--|--|
| CHANGES IN REVENUES () | | | | | | |
|-------------------------|--|--|--|--|--|--|

FUND SOURCE (Thousands of Dollars)

| | | | | | | |
|--------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | | | | | | |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | 1,869.8 | 1,869.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 |
| 1092 MHTAAR | 459.0 | 459.0 | | | | |
| TOTAL | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 | 2,328.8 |

Estimate of any current year (FY2000) cost: \$0.0

POSITIONS:

| | | | | | | |
|-----------|--|--|--|--|--|--|
| FULL-TIME | | | | | | |
| PART-TIME | | | | | | |
| TEMPORARY | | | | | | |

ANALYSIS: (Attach a separate page if necessary)

Assisted living Homes (formerly known as Adult Residential Care) are a cost-effective alternative to institutional care for individuals choosing to remain in their home communities. The FY2000 budget is \$622.2. 7AAC 47.450-470 governs the fee structure for Assisted Living Homes and has not been revised since 1982. The lack of cost of care adjustments to the ALH's fee structure jeopardizes the health and safety of residents and the future of ALH's options. This bill would require the Department of Health & Social Services, Division of Mental Health & Developmental Disabilities (DMHDD) to increase the rate paid to ALHs under the existing general relief assistance program for 131 consumers to a base rate of \$75/day in FY01. The number of individuals receiving support for ALH services varies each year. This fiscal note would include a geographic cost of living differential (an analysis without the geographic differential is also attached). An augmented rate of \$35/day would be paid for 26 (20%) of consumers from the total population of 131 consumers. The augmented rate covers care of consumers with increased service needs. A personal needs allowance would be paid at \$100/month for all consumers. Both DMHDD and the Division of Senior Services are requesting this increase from \$75/month.

Prepared by: Anne Henry Phone: 465-4852
 Division: Mental Health & Dev. Disabilities Date/Time: 1/31/00 3:03 PM

Approved by Commissioner:  Date: 1/31/00
 Agency: Department of Health & Social Services

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CALCULATIONS, ALH Fiscal Notes (with geographic index applied)

| location | % of service | geographic index | RATE \$75/day |
|---|--------------|------------------|------------------------|
| Anchorage | 77% | 1.00 | \$2,761,316 |
| Palmer/Wasilla | 5% | 1.04 | \$186,479 |
| Southeast | 5% | 1.00 | \$179,306 |
| Northern | 7% | 1.15 | \$288,683 |
| Western | 5% | 1.33 | \$238,477 |
| N/Western | 1% | 1.38 | \$49,489 |
| Cost of Providers' Standard Service: | | | \$3,703,750 |
| client contrib of \$862 std rate x 11 mo x 131 clients (11 mo adjusts for vacancies, hospitalizations, 1st time eligibility funding lag) | | | \$1,242,142 |
| less: proposed pers needs allowance \$100/mo x 12 mo x 131 clients | | | \$157,200 |
| Portion of Costs Paid by Clients | | | \$1,084,942 |
| Proposed State's Portion of Costs | | | \$2,618,808 |
| current state costs budgeted | | | \$622,200 |
| Proposed Increase to Current State Costs | | | \$1,996,608 |
| AUGMENTATION, \$35/day x 26 clients x 365 days | | | \$332,150 |
| Proposed Increase Including Augmentation | | | \$2,328,758 |
| | | | In thousands \$2,328.8 |

DAILY RATE, with geographic index applied

| | TOTAL | | daily |
|-------------------|----------------|---|---------|
| current rate | client portion | [(862 std monthly allowance x 11 mo) - (\$75 pers needs x 12 mo)] / 365 days | \$23.51 |
| | state portion | budgeted \$622,200 / 365 days / 131 clients | \$13.01 |
| proposed \$75/day | TOTAL | total indexed cost of providers' std svc @ \$75 / 365 days / 131 clients | \$77.46 |
| | client portion | [(862 std monthly allowance x 11 mo) - (\$100 pers needs x 12 mo)] / 365 days | \$22.69 |
| | state portion | difference | \$54.77 |

Alaska State Legislature

REPRESENTATIVE
JEANNETTE JAMES

P.O. Box 56622
North Pole, Alaska 99705
(907) 488-1546
FAX (907) 488-4271

While in Juneau
State Capitol
Juneau, Alaska
99801-1182
(907) 465-3743
FAX (907) 465-2381

House of Representatives House District 34

Prime Sponsor Statement HB 258 - Assisted Living Homes

Did you know that Alaska has the fastest growing elderly population in the country? Over the next 20 years, according to the Labor Department, the number and percentage of older Alaskans in the state will increase dramatically. In 2018, the population of age 65 and older is expected to triple to 92,356, up from 32,729 in 1998. Older Alaskans will comprise almost 12 percent of the total population in 2018, up from 5.3% in 1998. All this considered, you may be interested to know Alaska is also the least prepared of all the states to meet the needs of our aging population.

The Labor Department projects that the Municipality of Anchorage should see the largest increase in older Alaskans (+23,412), then Matanuska-Susitna Borough (+7,498), the Fairbanks North Star Borough (+6,246); Kenai Peninsula Borough (+6,089); Juneau Borough (+3,319); Ketchikan Borough (+2,077); Valdez-Cordova census area (+1,143); and finally, the Kodiak Island Borough (+1,006). These combined areas should account for 85 percent of the growth in the senior population in the next 20 years.

Clearly, the State of Alaska needs to prepare for this increase and ensure that our senior programs are adequate to meet the needs of our elderly. With our aging population there is an increased demand for assisted living facilities and many of our elderly prefer to live in the family environment rather than being in nursing homes or other institutions.

Today we have approximately 278 frail elders in Alaska on general relief that live in assisted living homes. If it were not for assisted living homes these elders would have to be placed in the facilities such as Denali Center, or the Pioneers' Home. In the Pioneers' Home the daily rate is \$280 per person with an annual cost of \$90,520.00. At Denali Center the daily rate per person is \$345.00 with the annual cost amount to \$124,925.00. Compare these figures with the \$35.00 per elder per day that the State of Alaska currently pays caregivers in private assisted living homes. This is \$12,756.75 per elder annually. HB 258 would provide a long overdue raise for Assisted Living Providers to the amount to \$50.00 in July 1, 2000; to \$75.00 in the year 2001, and \$100.00 in the year 2002. These amounts are still considerably less than the State expense per elder in other state facilities.

Our hope is that the passage of HB 258 will lead to the expansion of assisted living facilities for elderly individuals on general relief, as well as a reduction of general relief costs for frail elders in Alaska.

1-LS1076D ✓
Lauterbach
1/29/00

CS FOR HOUSE BILL NO. 258()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-FIRST LEGISLATURE - SECOND SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES JAMES AND COGHILL

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to assisted living homes; and providing for an effective date."

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

3 * Section 1. AS 47.07.070 is amended by adding a new subsection to read:

4 (h) This section does not apply to the minimum daily reimbursement rate
5 specified by law under AS 47.24.017 or AS 47.25.195(f) for assisted living homes.

6 * Sec. 2. AS 47.24.017 is amended by adding a new subsection to read:

7 (d) If the protective services under this section include the placement of a
8 vulnerable adult in an assisted living home at the state's expense, the minimum daily
9 reimbursement rate to the assisted living home for the vulnerable adult is \$75. The
10 department may, under its regulations, provide for a daily rate higher than \$75 if the
11 additional care provided to the vulnerable adult in the assisted living home justifies the
12 additional reimbursement. In this subsection, "assisted living home" means an assisted
13 living home licensed under AS 47.33.

14 * Sec. 3. AS 47.25.195(b) is amended to read:

15 (b) Except as provided in (f) of this section, a [A] health facility receiving

1 a payment under this chapter is subject to the requirements of AS 47.07.070 -
2 47.07.075.

3 * Sec. 4. AS 47.25.195(c) is amended to read:

4 (c) Except as provided in (f) of this section, if [IF] insufficient money is
5 appropriated to fund medical assistance under AS 47.25.120 - 47.25.300 when taking
6 into consideration projected use and the health facility payment rates established in
7 accordance with (b) of this section, the department may, by regulation, establish at any
8 time in the fiscal year a prospective pro rata reduction of the facilities' established
9 payment rates that will be paid by the department for services provided by facilities
10 under AS 47.25.120 - 47.25.300.

11 * Sec. 5. AS 47.25.195(d) is amended to read:

12 (d) Notwithstanding (a) - (c) of this section, the department may enter into
13 agreements with a facility to provide services at a payment rate lower than the rate
14 established in accordance with (b) of this section, except that the department may
15 not enter into an agreement with an assisted living home to provide services at a
16 daily reimbursement rate lower than \$75.

17 * Sec. 6. AS 47.25.195(e) is amended to read:

18 (e) For purposes of this section,

19 (1) "assisted living home" means an assisted living home licensed
20 under AS 47.33;

21 (2) "health facility" includes a hospital, skilled nursing facility,
22 intermediate care facility, intermediate care facility for the mentally retarded,
23 rehabilitation facility, inpatient psychiatric facility, home health agency, rural health
24 clinic, and outpatient surgical clinic.

25 * Sec. 7. AS 47.25.195 is amended by adding a new subsection to read:

26 (f) Notwithstanding other provisions of this section and the provisions of
27 AS 47.07, if the assistance provided to a needy person under AS 47.25.120 - 47.25.300
28 includes the initiation or continuation of placement of the person in an assisted living
29 home at the state's expense, the department's minimum daily reimbursement rate to
30 the assisted living home for the person is \$75. This minimum rate is not subject to
31 reduction under (c) of this section. The department may, under its regulations and

1 under the procedures of AS 47.07.070 - 47.07.075, provide for a daily rate higher than
2 \$75 if the care provided to the needy person in the assisted living home justifies the
3 higher reimbursement. A daily rate higher than \$75 for assisted living homes may be
4 reduced under (c) of this section, but not below \$75.

5 * Sec. 8. The uncodified law of the State of Alaska is amended by adding a new section
6 to read:

7 APPLICABILITY. The minimum daily reimbursement rate set under AS 47.24.017(d),
8 enacted by sec. 2 of this Act, and AS 47.25.195(f), enacted by sec. 7 of this Act, applies to
9 services provided on or after July 1, 2000, and is not dependent on the adoption of regulations
10 by the Department of Health and Social Services.

11 * Sec. 9. This Act takes effect July 1, 2000.

FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. HB 258

Revision Date: _____
 Title: An act related to assisted living homes
 Sponsor: Rep. James, Rep. Coqhill
 Requestor: (H) HESS

Department Affected: Administration
 BRU: Central Administrative Services
 Component: Protection, Community Services, Administration
 COMPONENT SERIAL NO. 2083

EXPENDITURES/REVENUES: (Thousands of Dollars)

| OPERATING EXPENDITURES | FY 2001 | FY 2002 | FY 2003 | FY 2004 | FY 2005 | FY 2006 |
|------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| PERSONAL SERVICES | | | | | | |
| TRAVEL | | | | | | |
| CONTRACTUAL | | | | | | |
| SUPPLIES | | | | | | |
| EQUIPMENT | | | | | | |
| LAND & STRUCTURES | | | | | | |
| GRANTS, CLAIMS | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 |
| MISCELLANEOUS | | | | | | |
| TOTAL OPERATING | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 |

| | | | | | | |
|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES | | | | | | |
|----------------------|--|--|--|--|--|--|

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

FUND SOURCE: (Thousands of Dollars)

| | | | | | | |
|--------------------------|----------------|----------------|----------------|----------------|----------------|----------------|
| 1002 Federal Receipts | | | | | | |
| 1003 GF Match | | | | | | |
| 1004 GF | 1,572.9 | 2,018.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | 445.6 | 0 | 0 | 0 | 0 | 0 |
| OTHER MHTAAR | 391.0 | 391.0 | 0 | 0 | 0 | 0 |
| TOTAL | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 | 2,409.5 |

Estimate of any current year (FY 2000) cost: \$ _____

POSITIONS:

| | | | | | | |
|-----------|--|--|--|--|--|--|
| FULL-TIME | | | | | | |
| PART-TIME | | | | | | |
| TEMPORARY | | | | | | |

ANALYSIS: (Attach a separate page if necessary.)

This bill would require the Department of Administration to increase the rate paid to assisted living homes under the existing general relief assistance program for 120 clients to a base rate of \$75 a day beginning July 1, 2000. This fiscal note would include a geographical cost of living differential. An augmentation rate of \$22 a day would be paid for 40 (33%) clients out of the total client population of 120 clients. A personal needs allowance would be paid at \$100 a month per client. The requested increase in the monthly personal needs allowance from \$75 to \$100 is needed for clients because they have increasing copayments to make for medical coverage, and the costs of personal items clients normally purchase are no longer affordable at the \$75 rate. DSS and DMHDD are jointly asking that this \$75 rate be increased to \$100 at this time.

Recommendation: This bill is consistent with the existing general relief assistance program objective to provide financial assistance to eligible vulnerable adults who are in need of assisted living resources. The current base rate of \$30 a day is not adequate to meet rising costs of providing assisted living care. A rate increase is overdue. This bill would require substantial funding which has not been approved by OMB. This bill would allow for improving the current system of general relief payment by increasing rates to an adequate amount based on the Alaska Rate Study Report completed December 1998. This analysis continues past practice of applying a regional geographic differential to rates paid across the state. An analysis without the geographical is also included on page 4.

Prepared by: Dwight Becker
 Division: Senior Services

Phone: 269-3674
 Date: 1/31/00

Approved by Commissioner: Robert Poe, Jr.
 Agency: Department of Administration

Date: 2/1/00

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FISCAL NOTE

STATE OF ALASKA

BILL NO. HB 258

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ANALYSIS: (continued)

Calculation of General Relief Payment by State
(including geo differential)

| First Year FY 2001 and following years with geographical differential | | | | | | | |
|---|----------------------------------|---------|-----------|------------|------------|--------------------|--------------------|
| GR Rate | Anchorage | Mat-su | Southeast | Northern | Western | N Western | |
| with Geographical | | | | | | | |
| <input type="text" value="75"/> | 2,135,250 | 170,820 | 164,250 | 566,662.50 | 218,452.50 | 226,665 | 3,482,100 |
| Augmentation Rate | Augmentation Cost for 40 clients | | | | | | |
| <input type="text" value="22"/> | 321,200 | | | | | | 321,200 |
| Personal Needs Allowance | | | | | | | 144,000 |
| <input type="text" value="100"/> | | | | | | | 144,000 |
| Client's Contributions | | | | | | | Less (1,137,840) |
| Current FY 2000 General Relief Budget Request | 400,000 | | | | | | Less (400,000) |
| | | | | | | Grand Total | \$2,409,460 |

The Mental Health Trust Authority has agreed to provide funding in the amount of 391.0 for each of two years, FY 2001 and FY 2002.

In addition the Mental Health Trust Authority has approved 445.6 in GF Mental Health funds.

The current FY 2001 Division of Senior Services GR budget is 400.0.

FISCAL NOTE

STATE OF ALASKA

BILL NO. HB 258

2000 LEGISLATIVE SESSION

The general relief payment made by the state is the amount needed to supplement the client's contribution to meet the base rate indicated in the specific geographic region. An estimated 33% of the clients have higher needs and require augmented rates. The augmented rate is calculated at \$22.00 over the base rate multiplied by the index. The average contribution of the clients is the adult public assistance payment standard of \$862.00 per month or \$28.34 per day. Emergency protective service placements make up about one month or 1/12th of the total of 32,850 days which are paid by the by the state at the full rate without any contribution by clients because of the time needed to investigate and resolve client financial issues. The current budget request for FY2000 is \$400.0. The MHTA has committed 391.0 of MHTAAR funds for FY2001 and FY2002.

Days of Service provided by General Relief Program

120 clients per month x 365 days = 43,800 days of service per year

Days of Service by Region

| | | |
|----------------|----------------------|--------------------|
| Anchorage | 65% of 43,800 days = | 28,470 days |
| Palmer/Wasilla | 5% | = 2,190 |
| Southeast | 5% | = 2,190 |
| Northern | 15% | = 6,570 |
| Western | 5% | = 2,190 |
| N/Western | 5% | = 2,190 |
| | | <u>43,800 days</u> |

Client Contribution Towards Payment for Assisted Living

\$862 payment standard per mo. x 11 mo. x 120 clients = \$1,137,840

Cost Calculation for Geographical Differential

| <u>Region</u> | <u>Index</u> |
|----------------|--------------|
| Anchorage | 1.00 |
| Palmer/Wasilla | 1.04 |
| Southeast | 1.00 |
| Northern | 1.15 |
| Western | 1.33 |
| N.Western | 1.38 |

Personal Needs Allowance for all Clients

\$100 x 120 clients x 12 months = \$144,000

Augmentation Calculation

\$22 a day x 40 clients x 365 day = \$321,200

FISCAL NOTE

STATE OF ALASKA

BILL NO. HB 258

2000 LEGISLATIVE SESSION

Calculation of General Relief Payment by State
(including no geo differential)

| First Year FY2001 and following years GR Rate with No Geographical | Place numerical entries in white boxes to the left. | Total |
|--|---|-----------------------|
| <input type="text" value="75"/> | | 3,285,000 |
| Augmentation Rate | Augmentation Cost for 40 clients | |
| <input type="text" value="22"/> | 321,200 | 321,200 |
| Personal Needs Allowance | | |
| <input type="text" value="100"/> | | 144,000 |
| Client's Contributions | 853,380 | Less (1,137,840) |
| Current FY 2000 General Relief Budget Request | 400,000 | less (400,000) |
| | | Grand Total 2,212,360 |

HB

260

PHONE CALL

FOR Jessie Collins DATE 2/18 TIME _____ A.M. P.M.

M _____

OF _____ PHONED _____

PHONE FAX MOBILE HB 267 RETURNED YOUR CALL _____

MESSAGE Just starting to get the kids to school. She needs the program PLEASE CALL _____

WILL CALL AGAIN _____

CAME TO SEE YOU _____

WANTS TO SEE YOU _____

PHONE CALL

FOR Leslie DATE 2/18 TIME 1:40 A.M. P.M.

M Ruth Sanwick Petersen

OF _____ PHONED _____

PHONE FAX MOBILE _____ RETURNED YOUR CALL _____

MESSAGE Oppose HB 260 PLEASE CALL _____

WILL CALL AGAIN _____

CAME TO SEE YOU _____

WANTS TO SEE YOU _____

SIGNED She wants her voice Office AD1154

PHONE CALL

FOR Dulcie Nelson DATE 2/17 TIME _____ A.M. P.M.

M _____

OF 262-3546 PHONED _____

PHONE FAX MOBILE _____ RETURNED YOUR CALL _____

MESSAGE Off Site PLEASE CALL _____

WILL CALL AGAIN _____

CAME TO SEE YOU _____

WANTS TO SEE YOU _____

SIGNED Said Rep Smalley - told her to contact out of office.

PHONE CALL

FOR Fred DATE 2/18 TIME 10 A.M. P.M.

M Jane Fine

OF _____ PHONED _____

PHONE FAX MOBILE _____ RETURNED YOUR CALL _____

MESSAGE HB 260 - 37yr Single mom w/ planned program on bed rest - 28 weeks Has Insur / DCC Supplements She will fly up / evaluate Hotel rooms all covered w/ DCC PLEASE CALL _____

WILL CALL AGAIN _____

CAME TO SEE YOU _____

WANTS TO SEE YOU _____

SIGNED _____ Office AD1154

PHONE CALL

FOR Jessie Collins DATE 2/18 TIME 11 AM

M _____

OF AK 10K PHONED _____

PHONE FAX MOBILE _____ RETURNED YOUR CALL _____

MESSAGE has applied - not receiving yet PLEASE CALL _____

WILL CALL AGAIN _____

CAME TO SEE YOU _____

WANTS TO SEE YOU _____

SIGNED Wants DCC to stay Office AD1154

Subject: HB 260

Date: Thu, 10 Feb 2000 13:05:27 -0900

From: Paula McMeen <reach@ptialaska.net>

To: Representative_Fred_Dyson@legis.state.ak.us, representative_John_Cogill@legis.state.ak.us

I am writing to testify to oppose this bill. I work with families who have children with disabilities who have recently enrolled in DenaliKid Care. They are able to afford the various therapy and medical treatments that are needed for thier children. So many children who are in real need of PT, OT, Speech Therapy, Audiology, medical exams, etc had very limited access to this care. If you provide the care early in a child's life the disability can be reduced or eliminated making it more possible for lifelong success. We care for our elderly in this state--why is there not the compassion and importance in caring for our children and thier families. You and I both have health insurance--would either of us be able to afford this level of care if we did not have access to medical insurance?

Heather Gallatin-Baker
Program Manager
Health Access Program Initiative
1217 E. 10th Ave.
Anchorage, AK 99501

If Alaska's children are supposed to be our most valuable renewable asset, why do we place them in jeopardy time and time again? The proposed change to the Denali Kid Care program will be punishing the children of parents who can't afford health coverage or who don't have health coverage through their employers or, have such a large deductible that they can not meet it. The state government spends a lot of time asking the citizens to trust them to have their best interest at heart, but how can people trust the government when the government wants to punish people for working.

With Denali Kid Care, parents had one less stressor in their lives. Parents knew that they could take their children in to have earaches looked at, to have regular dental exams, to have eyes examined and to have a whole host of other health problems addressed. If you lower the income guidelines to 100% or even 133% of the federal poverty level there is no incentive for people to have routine preventative care visits for either children or pregnant women. Working parents who are barely making ends meet are the people that are going to be affected. It is easy to say that there are low-cost health centers that the parents can go to, but the reality is that these centers are already filled to capacity, the parents have formed trusting relationships with their doctors, and employer sponsored health coverage is at an all time low.

Being politicians I am sure that you are concerned with the bottom line, which is the cost. One cost that I would like you to keep in mind is, that one bad outcome of a birth can cost the state upwards of 1 million dollars per child. In covering pregnant women you can be circumventing that staggering price tag.

Government is not the only entity concerned with healthcare. The Anchorage Access to Health Care Coalition is equally concerned with making sure that everyone has access to affordable health coverage. If you lower the income levels then you are taking away one more tool that the coalition can use to see that everyone, including children, can receive adequate health care. The tools that have been used in the past such as the PCII program have been done away with, putting even greater stress on community programs and low-cost health centers. These programs and centers can't afford to keep providing the services that the government keeps cutting.

Please remember that Denali KidCare ultimately protects those that need it most, Alaska's children. Please do not pass HB 260. My program has no vested interest in Denali KidCare. We do not sign up participants nor do we provide services, but our program does note that there has been a significant drop in the number of children who are going to the emergency room to receive primary care.

I understand that the Privatization Subcommittee on Health & Social Services recommended using a loan program, but that will still have the same affect as lowering the income guidelines. People are less likely to use the loan program because it will still place an undue burden on people's financial situations. Having people pay their bills is a wonderful ideal but reality would fall far, far short of its mark if you do pass HB 260 or even if you convert the money to a loan program.



Alaska Native Health Board

4201 Tudor Centre Dr., Suite 105
Anchorage, Alaska 99508

Phone: (907) 562-6006
FAX: (907) 563-2001

January 26, 2000

FEB 07 2000

Representative Fred Dyson
House of Representatives
Alaska State Legislature
State Capitol
Juneau, Alaska 99801-1182

Dear Representative Dyson:

I am writing on behalf of the Alaska Native Health Board and several of the organizations we advocate for, concerning HB 260, which if adopted, will in effect, eliminate the Denali KidCare Program.

I strongly urge that the Legislature reject HB 260 as it will adversely affect many children and pregnant women currently under this program. Further, Alaska would then stand as the only state without a State Child Health Insurance Program. Adopting HB 260 would be grossly unfair to those currently covered under the program.

Alaskan children and pregnant women need this program as it makes it possible for them to obtain health insurance, which would, otherwise, be impossible. In addition, it is a program for the low-income "working poor", and meets the basic need for Alaska parents to be able to provide health care for their children while working at a low paying job without benefits. Denali KidCare makes it possible for families to get off welfare and they can still provide for their children's health care needs. Welfare reform in Alaska is working successfully to keep people off welfare and cash assistance and keeping people off welfare means more money for support services needed by working families such as health insurance for children.

As an advocate for Alaska Native Health issues, this proposed cut will affect the Alaska Natives enrolled in this program and will deprive them of healthcare which they otherwise would receive if enrolled in the Denali KidCare Program. Specifically, over 30% currently enrolled in the Denali Kidcare Program are Alaska Native women and children.

In addition, prenatal care is the single most cost-effective health care expenditure, ensuring the best birth outcome for the baby. It is in effect, the best method for assuring a health start for Alaskan children.

I strongly urge that the Legislature not adopt HB260 for the reasons stated above.

Sincerely,

Cynthia J. Navarrette
CEO

ALEUTIAN/PRIIBILOF ISLANDS ASSOCIATION
ARCTIC SLOPE NATIVE ASSOCIATION
BRISTOL BAY AREA HEALTH CORPORATION
CHUGACHMIUT
COPPER RIVER NATIVE ASSOCIATION
EASTERN ALEUTIAN TRIBES
KETCHIKAN INDIAN COMMUNITY
VALDEZ NATIVE TRIBE

MANILAQ ASSOCIATION
METLAKATLA INDIAN COMMUNITY
MT. SANFORD TRIBAL CONSORTIUM
NATIVE VILLAGE OF EKLUTNA
NATIVE VILLAGE OF TYONEK
NINILCHIK TRADITIONAL COUNCIL
KODIAK AREA NATIVE ASSOCIATION

NORTON SOUND HEALTH CORPORATION
SELDOVIA VILLAGE TRIBE
SOUTHCENTRAL FOUNDATION
SOUTHEAST ALASKA REGIONAL HEALTH CONSORTIUM
TANANA CHIEFS CONFERENCE
YUKON-KUSKOKWIM HEALTH CORPORATION
NORTH SLOPE BOROUGH

FEB 10 2000

It's very disturbing to me that the state legislatures in Juneau are proposing a bill, HB 260, to eliminate the existing health insurance program for thousands of children in Alaska. Many families who work hard and make a decent living just cannot afford basic health insurance for their children. Many of us must pay a \$2000 deductible per family member for basic health insurance which sometimes does not include vision, emergency rooms, or dental services.

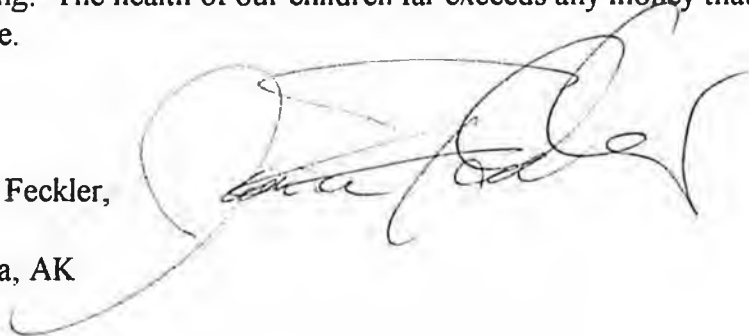
Rep. Coghill, who is proposing the bill, is willing to eliminate the Denali Kidcare Program to save a buck or two in return preventing our children from becoming healthy. Why take away such a program that benefits our children and keeps them healthy in life? Aren't our children worth it?

According to a recent survey, in 1996, Alaska finished behind only Idaho and Utah as the worst state in the nation when it came to the number of childhood immunizations. By eliminating the Denali Kidcare Program, this will not only mean that more children will become unhealthy and more parents will have stay home, but Alaska will be one of the only state in the country without a Health Insurance Program. We need to let Governor Tony Knowles and our state legislatures know that our children worth it. We must stop HB 260 from ever seeing the light of day.

By eradicating Denali Kidcare, we are not allowing our children to grow into healthy adults. We, as parents, must do all that is possible to allow our children to live prosper without any worries of costs or money and to provide them the basic health coverage that they so desperately deserve. We must not punish the children just because the families are working. The health of our children far exceeds any money that the government is willing to save.

Janice Feckler,

Wasilla, AK

A handwritten signature in cursive script, appearing to read 'Janice Feckler', written in black ink over a light background.

Subject: HB 260

Date: Thu, 10 Feb 2000 14:43:52 -0900 (AKST)

From: reach@ptialaska.net

To: Representative Fred Dyson <Representative_Fred_Dyson@legis.state.ak.us>

I oppose HB 260. Denali Kid Care has provided children who have disabilities or delays in development access to needed therapy and health care services. As the director of the REACH Infant Learning Program, I have seen families struggle over the years to get these needed medical services for thier children. Treatment early is effective in reducing or eliminating developmental problems. I work with many single parents who do not have adequate medical coverage. We insure our elderly, why not continue to insure our children. It is an investment in the future. Denali Kid Care has been one the best programs I have seen for children--please do not turn change this program.

Testimony to the House HESS Committee
Hearing on HB 260
February 8, 2000
From Beverly Churchill

I am here on behalf of scores of families currently being served by Denali KidCare. I work at the Anchorage Neighborhood Health Center with the DKC Outreach Program. Our program has assisted close to a thousand women and children in applying for Denali Kidcare. The parents are not here because most of them are working or caring for their children. Many of them are not articulate or experienced in public speaking. But most of them are voting citizens, and hard-working people. They work at our airports assuring their smooth operations. They work at hotels, supporting our tourism industry. They work at gas stations, schools, restaurants—they are the bread and butter of our economy right now. But every one of them I have talked to has been extremely grateful for Denali KidCare. It has allowed them to take their children for medical care when they needed to be seen. It has enabled parents to take their children to the dentist and eye doctor. It assures that women get good prenatal care. So I want to speak for these families, and give them your gratitude in supporting their efforts to work and care for their children.

I would like to add my two cents worth as well. The Denali KidCare Program is one of the best state-operated programs I have ever seen. It is truly user-friendly and efficient. Our state is one of the last in the country to buy into this expansion of Medicaid. Yet, we have a top record of getting eligible children enrolled. I have watched as our support to women at risk for poor birth outcomes has been eroded away. Our health programs have been regressive in this respect. Denali KidCare has replaced two other state programs that were assisting pregnant women: Prenatal Care II and Pregnant Women's Medicaid. With DKC's demise, we are left in far worse shape than when we started in this respect. I worked in the Perinatal Program at our health center for five years. I saw the number of women who still came to us late in care because they didn't know there was help out there.

Cutting Denali KidCare will result in the loss of millions of dollars in federal funds for health care that we desperately need with the state's current economy. Welfare reform has been successful in getting people to work—but it has not adequately provided for a way to continue health care for these families and countless others who have not found jobs with insurance. Denali KidCare is a beautifully designed program. If cuts need to be made, let us look at ways, but don't throw the proverbial baby out with the bath water. Thank you for your attention.

Public Testimony
HB260
Jennifer DuFord

I urge you to vote down HB260. Do not place the burden of balancing the state's budget on the shoulders of our children. Denali KidCare is a highly efficient and effective program. The federal government pays for over 70% of the program. The remainder of the program can be funded by the federal government's increased Medicaid reimbursement to the state, by the lower welfare rolls, and by the tobacco settlement. Of the \$25 million per year that the state is receiving from the tobacco settlement, only \$1.4 is designated for tobacco awareness/cessation programs. The entire amount should be used for health programs--as this was the reason the state received the money in the first place.

While my husband and I have always worked, and have never been on public assistance, we have lived without health insurance. One of the times we were without insurance was when we started our own company. We couldn't afford medical insurance for ourselves, much less our 10 employees. It was a very scary situation. Each time one of our kids got sick, we wondered how much the doctor's bill would cut into our tight budget. We gave up our business in part because of the lack of medical insurance. Therefore, I believe eliminating Denali KidCare will hurt economic development.

The elimination of Denali KidCare will also hurt welfare reform. A person who now sits home and receives a variety of state-supported benefits will have no incentive to go to work. A single-parent in this situation may have to spend \$800 per month on child-care, and \$800 per month on family health insurance. What's the benefit of working?

Statistics from the Alaska Department of Health & Social Services show that: providing adequate health care, along with other measures, reduces child abuse and neglect; uninsured children are 6 times more likely to go without needed medical care; children without health insurance are 5 times more likely to use the hospital emergency room as a regular source of care—resulting in no preventive care; and, children without insurance are 4 times more likely to have necessary care delayed—often turning what would have been a simple health problem, into a serious one. The legislature would be shortsighted in eliminating Denali KidCare. The choice is either to pay up-front in hope, or at the end in despair.

If some tweaking of the program is necessary--for example, reducing the mental health benefits or increasing the co-pay for families on the higher end of the income scale--then do that. Don't eliminate the program.

Fairview Center/OCP
1217 East 10th Ave.
Anchorage, AK 99501
(907) 257-4600 phone
(907) 257-4654 fax



Family Practice Center/OCP
3546 LaTouche Street
Anchorage, AK 99508
(907) 562-9229 phone
(907) 562-1603 fax

February 8, 2000

The alteration in qualifying income for DKC will result in a denial of prenatal care for many women.

It has been well documented through many studies that a lack of prenatal care, or late entry into care, results in a higher incidence of complications including premature birth. This entails enormous costs in terms of prolonged stays in intensive care nurseries.

Please, vote against this bill, and continue to provide health access to pregnant women and their children, Alaskas most important asset.

Gillian Trotter RN

Perinatal Case Manager

Heather Gallatin-Baker
Program Manager
Health Access Program Initiative
1217 E. 10th Ave.
Anchorage, AK 99501

If Alaska's children are supposed to be our most valuable renewable asset, why do we place them in jeopardy time and time again? The proposed change to the Denali Kid Care program will be punishing the children of parents who can't afford health coverage or who don't have health coverage through their employers or, have such a large deductible that they can not meet it. The state government spends a lot of time asking the citizens to trust them to have their best interest at heart, but how can people trust the government when the government wants to punish people for working.

With Denali Kid Care, parents had one less stressor in their lives. Parents knew that they could take their children in to have earaches looked at, to have regular dental exams, to have eyes examined and to have a whole host of other health problems addressed. If you lower the income guidelines to 100% or even 133% of the federal poverty level there is no incentive for people to have routine preventative care visits for either children or pregnant women. Working parents who are barely making ends meet are the people that are going to be affected. It is easy to say that there are low-cost health centers that the parents can go to, but the reality is that these centers are already filled to capacity, the parents have formed trusting relationships with their doctors, and employer sponsored health coverage is at an all time low.

Being politicians I am sure that you are concerned with the bottom line, which is the cost. One cost that I would like you to keep in mind is, that one bad outcome of a birth can cost the state upwards of 1 million dollars per child. In covering pregnant women you can be circumventing that staggering price tag.

Government is not the only entity concerned with healthcare. The Anchorage Access to Health Care Coalition is equally concerned with making sure that everyone has access to affordable health coverage. If you lower the income levels then you are taking away one more tool that the coalition can use to see that everyone, including children, can receive adequate health care. The tools that have been used in the past such as the PCII program have been done away with, putting even greater stress on community programs and low-cost health centers. These programs and centers can't afford to keep providing the services that the government keeps cutting.

Please remember that Denali KidCare ultimately protects those that need it most, Alaska's children. Please do not pass HB 260. My program has no vested interest in Denali KidCare. We do not sign up participants nor do we provide services, but our program does note that there has been a significant drop in the number of children who are going to the emergency room to receive primary care.

I understand that the Privatization Subcommittee on Health & Social Services recommended using a loan program, but that will still have the same affect as lowering the income guidelines. People are less likely to use the loan program because it will still place an undue burden on people's financial situations. Having people pay their bills is a wonderful ideal but reality would fall far, far short of its mark if you do pass HB 260 or even if you convert the money to a loan program.

Subject: HB 260 - Elimination of Denali Kid Care

Date: Wed, 9 Feb 2000 11:45:48 -0900

From: "Amanda Adams" <asadams@ptialaska.net>

To: <Representative_Fred_Dyson@legis.state.ak.us>,
<Representative_John_Coghill@legis.state.ak.us>,
<Representative_Joe_Green@legis.state.ak.us>,
<Representative_Carl_Morgan@legis.state.ak.us>,
<representative_jim_whitaker@legis.state.ak.us>,
<Representative_Tom_Brice@legis.state.ak.us>,
<representative_allen_lemplin@legis.state.ak.us>

Dear Representative,

I am writing to express my strong opposition to the proposed House Bill 260, which proposes to eliminate the Denali Kid Care program. I live in a rural community whose need for the continuance of this program is desperate. Many families in this community rely on the Denali Kid Care program to provide their children with very needed services. The elimination of the program would, in effect, deprive these families of a healthy lifestyle. I hope that you will very seriously consider this action and its potential negative affects.

All of America has decided that providing health care to children and pregnant women is a vital need. It is important to America and important to Alaskans. Should you pass this bill, Alaska will become the only state without a state child insurance program. In a time of terrible budget constraints, it is understandable the great stresses you must endure in trying to deal with budget issues. However, cutting Denali Kid Care is not the answer to this problem.

As you are well aware, much of Alaska's employment stems from Commercial fishing and related industries. Denali Kid Care helps those families whose main income does not provide insurance or benefits - such as fishing. This is so needed.

The legislature worked so diligently on implementing this program. It is vital to Alaskans. It is a great program!! Please don't deprive your constituents of a solution to very real needs. You have it in you power to ensure healthy lives for a great number of Alaskan children. Please use that power very wisely - vote no to House Bill 260.

Thank you for your time.
Sincerely, Amanda Adams

Board Member, Sound Alternatives-Mental Health Clinic, Cordova

Subject: HB 260

Date: Tue, 8 Feb 2000 18:24:52 -0900

From: "Jeri Lanier" <fcsajeri@mosquionet.com>

Organization: Family Centered Services of Alaska

To: "Allen Kemplen" <Representative_Allen_Kemplen@legis.state.ak.us>,
 "Carl Morgan" <Representative_Carl_Morgan@legis.state.ak.us>,
 "Fred Dyson" <Representative_Fred_Dyson@legis.state.ak.us>,
 "Jim Whitaker" <Representative_Jim_Whitaker@legis.state.ak.us>,
 "Joe Green" <Representative_Joe_Green@legis.state.ak.us>,
 "John Coghill" <Representative_John_Coghill@legis.state.ak.us>,
 "Tom Brice" <Representative_Tom_Brice@legis.state.ak.us>

Dear Representative Dyson and HESS committee Representatives,

I participated in the hearing today (2/8/00) and have a few additional comments to make on this subject. I was told, Rep. Dyson, that you were not in the room when I directed a few comments to you so I will repeat those. You were quoted in our local newspaper as being concerned with the number of children (and the dollars being spent) that are receiving Mental Health services. I just want to say that this is a very positive point in Denali Kid Care's existence. It means that more needs are being identified at earlier ages and that the children are receiving help when it is most cost effective and behaviors & symptoms are most successfully treated. Many parents who at least access physical health services without insurance cannot even begin to seek mental health services due to cost prohibition. Even when you can find an agency that works on a sliding fee scale, it is still too high a price to justify the family going without food, electric, fuel or whatever else they may have to give up to pay. Yet when early intervention is used, it has a very high treatment success rate.

Rep. Coghill speaks of being worried about parental responsibility. How responsible is a parent that is so steeped in medical bills and counseling bills that the family has no place to live? There is a major difference between enabling system abuse and providing cost efficient, necessary treatment to children. If the system were being asked to extend the same services to adults, I could maybe see your point. Although enough services have already been cut in adult medicaid that we as a State should be ashamed of ourselves. But, Denali Kid Care is only funding children. I was in the LIO office early enough to hear the one gentleman speaking of a State run Health Insurance Cooperative. If that was already in place then we wouldn't even have to have this conversation, because we could then put the responsibility back into the hands of the family. However until there is an option, Denali Kid Care should not be considered socialized medicine, but society's preference to raising healthy children and infants (include Pregnant women) instead of the run-away health care costs associated with unpaid bills that continue to stack up and increase costs.

My family is no longer eligible for Denali Kid Care or any other state relief, I have only one child living at home and I pay to have her on my company insurance. if she were to suffer a catastrophic illness or need mental health care like my older two children did, then I am afraid of what would become of us. Yet I do not begrudge some of the slight security of a healthy child to any one of less income than myself. You each have the benefit of the State Health Care plan. I don't begrudge you your better benefits that I can afford. Do your constituents deserve to be penalized for doing the best they can for now? Please consider carefully before advancing this bill any further.

Thank You
 Jeri B. Lanier
 Natural Support Specialist/Parent Advocate
 Family Centered Services of Alaska, Inc.
 620 5th Avenue, Fairbanks, AK 99701-4512
 Phone: 907-474-0890 Fax: 907-451-8945
 E-mail: fcsajeri@mosquionet.com

Subject: Denali KidCare coverage

Date: Wed, 9 Feb 2000 15:58:33 -0900

From: "Tundra Womens Coalition" <twcpeace@alaska.com>

To: <Representative_Fred_Dyson@legis.state.ak.us>,
<Representative_John_Coghill@legis.state.ak.us>,
<Representative_Joe_Green@legis.state.ak.us>,
<Representative_Carl_Morgan@legis.state.ak.us>,
<Representative_Jim_Whitaker@legis.state.ak.us>,
<Representative_Tom_Brice@legis.state.ak.us>,
<Representative_Allen_Kemplin@legis.state.ak.us>

I am in support of Denali KidCare coverage to help working families who work in low paying jobs with no health benefits. Denali KidCare helps families who move off welfare because they can still receive health coverage for their children. Coverage for pregnant woman provides a child with a healthier start. It is well proven that the health of a child in utero is essential to a healthy start in life. Low income women will avoid health care until later in the pregnancy, when complications or other problems can be detected early on and corrected. Spending a few dollars early in a child's life for better health is much better spent prevention than spending more later when complications arise and one's health deteriorates.

As the mother of two young children with different types of health problems, and many trips to the doctor, I was fortunate to prevent later problems by having their illnesses diagnosed. I could have lost two children unnecessarily if I did not have health care.

I have heard of the loss of a child simply because the mother did not get the child to the doctor early enough in the lower 48. Alaska, as the last frontier, should not have children that deal with health complications just because they don't have insurance. Living in Alaska is tough enough without having legislators who think about spending money now to avoid higher costs later.

Thank you very much. Sometimes it is easiest to let go of programs that affect those who will not vote for us. Our conscience must tell us otherwise.

Sincerely,

Agnes Phillips
Executive Director
Tundra Women's Coalition

STATE OF ALASKA

TONY KNOWLES, GOVERNOR

DEPARTMENT OF HEALTH & SOCIAL SERVICES

MEDICAL CARE ADVISORY COMMITTEE

P.O. BOX 110660
JUNEAU, ALASKA 99811-0660
PHONE: (907) 465-3355
FAX: (907) 465-2204

February 7, 2000

FEB 09 2000

The Honorable Fred Dyson
Alaska State Legislature
Capitol Room 104
Juneau, AK 99801

Dear Representative Dyson,

On behalf of the Medical Care Advisory Committee, I would like to express the committee's concern regarding House Bill 260. Required by federal law, the Alaska Medical Care Advisory Committee is responsible for advising the State's Medicaid agency on policy and program changes to the Medicaid program. The committee members include health care consumers and providers from across the state of Alaska.

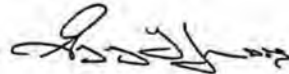
The Medical Care Advisory Committee has had the opportunity to provide input to the Department of Health and Social Services on the Denali KidCare program throughout its development. At a recent committee meeting, we heard from consumers and providers about their experiences with the Denali KidCare program. From our review, we learned that the program has been overwhelmingly successful in reaching needy families and has contributed immensely to the stability of these families. We also learned that parents were able to stay employed even if their children got ill because their children had health care coverage through the Denali KidCare program. These families feel empowered that they can both maintain employment and provide the right care for their children.

From the beginning, the Medical Care Advisory Committee supported the development of Denali KidCare program for a number of reasons. Numerous studies have documented that the percentage of children without health insurance has grown rapidly in recent years. Contributing significantly to the declining trend in health insurance is the decline in employer financial support for health care coverage for their employee's dependents. Families who meet the income eligibility guidelines for Denali KidCare often do not have the option of an employer financed health insurance plan for their dependents, and even if they do, they can not afford to pay their share of the health care premiums, deductibles, and copayments. The Medical Care Advisory Committee knows that children without health care coverage are six times more likely to go without needed medical care, five times more likely to use the hospital emergency room as a regular source of care, and four times more likely to have necessary care delayed. It is important to a child's development that they receive appropriate medical care. If a child develops a chronic

health problem, studies have shown that it can affect that child's health and well being for decades to come and children, especially young children, should receive annual doctor visits to monitor their growth and development. Children without health care coverage are also more likely to be missing some of their immunizations.

For these reasons, the Medical Care Advisory Committee strongly supports the Denali KidCare program and urges the Legislature to maintain the program in its current form.

Sincerely,



Greg Johnson, DDS
Chair

Medical Care Advisory Committee members:

David Alexander, MD, Anchorage
Chris Ashenbrenner, Juneau
Sam "Lavada" Bush, Fairbanks
Patricia Conners-Allen, Juneau
Kathy Dillard, Kodiak
Gary Givens, R.Ph., Anchorage
Patty Hong, RN, Girdwood

Greg Johnson, DDS, Fairbanks
Bob Labbe, Juneau
Frances Martin, Ketchikan
Marilyn Mories, Palmer
Dennis Murray, Soldotna
Peter Nakamura, MD, Juneau

cc: All members, Alaska State Legislature
Governor Tony Knowles
Commissioner Karen Perdue



Alaska State Legislature

Please enter into the record my testimony to the (H) HESS
committee name

committee on HR 260, dated 2-8-2000
bill/subject

I believe the Devil KidCare program is one that needs to stay in effect. It is a very necessary program that helps many children in our state.

I have a niece that needed heart surgery and we looked several places for assistance. When DKC went into effect, it was a God-send. There's no way my sister could have afforded \$40,000 for this surgery no matter how much she cares for her child.

I am a student, graduating in May. I will be attaining employment that will support my family and get off welfare. I do have four children and three of them have medical issues that require ongoing care. I know that no job will be able to pay me enough to keep up with those issues.

I also believe that if the Government is willing to pay for medical coverage for all natives, it should also pay for all other Americans. We all live here and should have the same coverage. Children need medical coverage to be taken care of. It's important to keep DKC available so our children will be protected.

Signed: Yvonne A. Feller
Testifier

Representing (Optional)

801 Airport Hts # 245
Address

274-4309
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Health Education & Social Services committee name
 committee on HB 260 , dated Feb 8, 2000 .
 bill/subject

I request that the attached letter from the ~~AK~~ Medical Care Advisory Committee be made part of the record of this today's committee hearing.

Signed: Patricia Hong
 Testifier
AK Medical Care Advisory Committee
 Representing (Optional)
PO BOX 321 Gudwood AK 99587
 Address
(907) 783-2675
 Phone No.

Health Access Program Initiative
1217 E 10th Avenue
Anchorage, AK 99501

February 9, 2000

House Committee on Health, Education and Social Services

Dear Committee Members,

My name is Harmony Brown, I am the Program Coordinator for the Health Access Program Initiative at the Anchorage Neighborhood Health Center and I do not support HB 260. I have been fortunate enough in my life to have been raised by parents who had insurance and could afford healthcare. I also have been very privileged to work for companies, both large and small, who provided me with health insurance benefits after I got married. I understand that Representative John Coghill is trying to move Alaskan residents away from dependency on state and government funds. Lowering the income guidelines for the Denali KidCare program is not the best way to accomplish this. The Denali KidCare program will, in itself, achieve this over time by improving education. Healthier children have a better opportunity to receive education. Educated children will grow to be more responsible, successful adults. Responsible, successful, educated adults are more likely to get a higher paying job that includes health benefits. Educated children are less likely to become teenage parents, they are less likely to become criminals, and they will less likely need to depend on government programs. Therefore, moving away from dependency on local, state and government programs as Representative Coghill desires.

Sincerely,



Harmony Brown
Program Coordinator
Health Access Program Initiative

PHONE CALL

| | | | |
|--|---------------------------------|---------------|---|
| FOR _____ | DATE <u>2/9</u> | TIME <u>4</u> | <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. |
| M <u>Wendy Parsons</u> | | | |
| OF _____ | <u>338-2843</u> | | PHONED |
| PHONE <input type="checkbox"/> FAX <input checked="" type="checkbox"/> MOBILE | | | RETURNED YOUR CALL |
| MESSAGE <u>Oppose HB 260</u> | AREA CODE | NUMBER | EXTENSION |
| | | | PLEASE CALL |
| | | | WILL CALL AGAIN |
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| SIGNED _____ | Office DEPOT Item OD1154 | | |

PHONE CALL

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| FOR _____ | DATE <u>2/11</u> | TIME <u>11¹⁵</u> | <input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M. |
| M <u>Jayce</u> | | | |
| OF _____ | <u>694-1521</u> | | PHONED |
| PHONE <input type="checkbox"/> FAX <input checked="" type="checkbox"/> MOBILE | | | RETURNED YOUR CALL |
| MESSAGE <u>Dr. Donald Reid Case</u> | AREA CODE | NUMBER | EXTENSION |
| <u>is a good support to families</u> | | | PLEASE CALL |
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| M <u>Jessie Evans</u> | | | |
| OF _____ | <u>696-0494</u> | | PHONED |
| PHONE <input type="checkbox"/> FAX <input checked="" type="checkbox"/> MOBILE | | | RETURNED YOUR CALL |
| MESSAGE <u>Oppose HB 260</u> | AREA CODE | NUMBER | EXTENSION |
| <u>- has child w/ special needs</u> | | | PLEASE CALL |
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| SIGNED _____ | Office DEPOT Item OD1154 | | |



WILLIAM RANSOM WOOD
PRESIDENT (EMERITUS), UNIVERSITY OF ALASKA



February 10, 2000

HESS Committee Members
Alaska State Legislature
State Capitol
Juneau, Alaska 99801-1182

Dear HESS Committee Members,

House Bill 297 and Senate Bill 195 relating to the Certificate of Need (CON) program are bad for community hospitals around the state and I urge you to oppose them.

For over 30 years, the Greater Fairbanks Community Hospital Foundation has endeavored to provide the best medical care at the lowest cost possible. I was the President of the Foundation when we began that effort and remain a member of the Foundation today. It remains a fine example of what a community can do when it put its mind to it. Personally, I do not know of any other community that has taken care of its health care needs as well as Fairbanks.

As you know, Alaska is a rural state with rugged terrain and vast distances separating its people and medical systems. To fracture those systems and divert patient volumes necessary to support hospital services will only hurt hospitals and will likely raise costs to the patients and community. Many traditional services such as emergency care, general medical, mental health, etc. are not financially viable and are in part supported by outpatient services such as lab, radiology, surgery and pharmacy. Is it in the public interest to allow these competitors to "cherry pick" services?

Please do not rush to pass legislation that will damage a delicately balanced health care system. Before any such action as lifting "Certificate of Need" requirements shouldn't lawmakers take time to reason together with the public interests directly involved? I urge you to oppose these bills.

Sincerely,

Wm R. Wood

William R. Wood

cc:

Interior Legislative Delegation
Commissioner Karen Perdue
Governor Tony Knowles

CORRECTION

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



Rev. 6/98

Central Microfilm Services
Department of Education & Early Development
State of Alaska

PHONE CALL

| | | | |
|---------|--|--------|------------------------------|
| FOR | DATE | TIME | A.M. P.M. |
| M | Wendy Parsons | | |
| OF | 337-2843 | | |
| PHONE | <input type="checkbox"/> FAX <input checked="" type="checkbox"/> MOBILE | | PHONED RETURNED YOUR CALL |
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PHONE CALL

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| FOR | DATE | TIME | A.M. P.M. |
| M | Dina | | |
| OF | 694-4821 | | |
| PHONE | <input type="checkbox"/> FAX <input checked="" type="checkbox"/> MOBILE | | PHONED RETURNED YOUR CALL |
| MESSAGE | AREA CODE | NUMBER | EXTENSION |
| | # Donali Kid Care | | |
| | is a good support | | |
| | to families | | |
| | | | PLEASE CALL |
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| | | | CAME TO SEE YOU |
| | | | WANTS TO SEE YOU |
| SIGNED | Office DEPOT Item OD1154 | | |

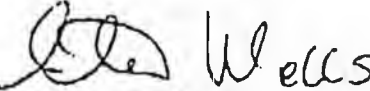
PHONE CALL

| | | | |
|---------|--|--------|------------------------------|
| FOR | DATE | TIME | A.M. P.M. |
| M | Jason Conrad | | |
| OF | 696-0494 | | |
| PHONE | <input type="checkbox"/> FAX <input checked="" type="checkbox"/> MOBILE | | PHONED RETURNED YOUR CALL |
| MESSAGE | AREA CODE | NUMBER | EXTENSION |
| | Oppose HB 260 | | |
| | - has child w/ special needs | | |
| | | | PLEASE CALL |
| | | | WILL CALL AGAIN |
| | | | CAME TO SEE YOU |
| | | | WANTS TO SEE YOU |
| SIGNED | Office DEPOT Item OD1154 | | |

 **ALASKA STATE LEGISLATURE**

Please enter into the record my testimony to the House Hess
Committee Name
Committee on Denali Kid Care Dated 2-8-00
Bill / Subject

On behalf of the City of Anaktuvuk we oppose Bill 260. Denali Kid Care is very helpful. Eliminating this program would be a detriment to our people. Thank you for considering our testimony.

SIGNED:  Steve Wells
Testifier
CITY OF ANAKTUVUK PASS City Clerk
Representing
Box 21030 907 661-3612
Address / Phone Number

Post-It™ brand fax transmittal memo 7671 # of pages 1

| | | | |
|-------|----------------|---------|---------------|
| To | STEVE WELLS | From | FAIRBANKS LIO |
| Co. | CITY ANAT. ASS | Co. | |
| Dept. | | Phone # | |
| Fax # | 661-3613 | Fax # | 456-3346 |



WILLIAM RANSOM WOOD
PRESIDENT (EMERITUS), UNIVERSITY OF ALASKA



February 10, 2000

HESS Committee Members
Alaska State Legislature
State Capitol
Juneau, Alaska 99801-1182

Dear HESS Committee Members,

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As you know, Alaska is a rural state with rugged terrain and vast distances separating its people and medical systems. To fracture those systems and divert patient volumes necessary to support hospital services will only hurt hospitals and will likely raise costs to the patients and community. Many traditional services such as emergency care, general medical, mental health, etc. are not financially viable and are in part supported by outpatient services such as lab, radiology, surgery and pharmacy. Is it in the public interest to allow these competitors to "cherry pick" services?

Please do not rush to pass legislation that will damage a delicately balanced health care system. Before any such action as lifting "Certificate of Need" requirements shouldn't lawmakers take time to reason together with the public interests directly involved? I urge you to oppose these bills.

Sincerely,

Wm R. Wood

William R. Wood

cc:

Interior Legislative Delegation
Commissioner Karen Perdue
Governor Tony Knowles



FEB 10 2000
FEB 10

February 7, 2000

Representative Fred Dyson
Capitol Building
Room 104
Juneau, AK 99801-1182

Dear Representative Dyson:

Please accept this resolution unanimously passed by the Valley Hospital Association Operating Board of Directors urging the State of Alaska Legislature to leave the existing Certificate of Need Laws of the State of Alaska unchanged.

Representing a fully accredited, freestanding community hospital, I urge you to consider this matter carefully. Healthy competition and business growth are critical to the health care market. Today's health care institutions must be efficient, lean, and practical to remain fiscally viable. At the same time, our citizens expect their community hospitals to represent the best interests of the community and to be responsible stewards of the community's resources. With this CON process in place, Alaska guarantees our citizens that health care providers will be both profitable *and* accountable.

In light of national healthcare trends, board members and administrators of Valley Hospital Association are specifically concerned that for-profit ventures will choose to serve only those with the means to pay and will leave all charity, Medicare, and Medicaid patients to our existing delivery system. If this happens, many of the mission-oriented programs designed to meet the needs of our specific community will be eliminated.

I would welcome an opportunity to discuss this with you personally. Please call me at (907) 373-3575. Thank you for your consideration of this important matter to our citizens and to our community hospital.

Sincerely,

A handwritten signature in cursive script that reads "Kristan Cole".

Kristan Cole
President
Operating Board of Directors

RESOLUTION

Whereas, the State of Alaska established the Certificate of Need in 1973 to control unneeded health expenditures and to minimize undue duplication and fragmentation;

Whereas, based on January 1999 data from the American Health Planning Association, 75% of all states require some form of Certificate of Need review to ensure accountability and responsible stewardship of community resources;

Whereas, the Certificate of Need review has the ability to facilitate the development of a responsible marketplace in which the desired benefits of competition and real value in health care are realized;

Whereas, the Certificate of Need considers cost, quality, capacity, convenience and access issues at the community level in order to balance competing needs and the community's priorities;

Whereas, the Certificate of Need process holds health care institutions more accountable for their responsible stewardship of the public's resources;

Whereas, the Board of Directors of Valley Hospital Association, Inc. recognizes its joint responsibilities of clinical and financial stewardship to the Mat-Su Valley;

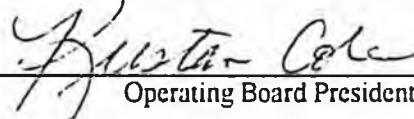
Whereas, the Valley Hospital Association, Inc. Board of Directors recognizes that expensive health planning decisions in a relatively small community must always be made for the greatest good;

Whereas, altering, amending, or doing away with the present Certificate of Need procedure would likely undermine the financial viability of Valley Hospital, which strives to represent the best interests of our community by relying on profitable services to support other mission-driven health programs;

Therefore be it resolved that the majority of the Valley Hospital Association, Inc. Operating Board of Directors calls upon the Alaska Legislature to leave the existing Certificate of Need Laws of the State of Alaska unchanged. In particular, the Valley Hospital Association, Inc. Operating Board of Directors advises the Alaska Legislature to maintain the \$1,000,000 Certificate of Need threshold currently recommended by the State of Alaska.

Be it resolved that the majority of the Valley Hospital Association, Inc. Operating Board of Directors calls upon all health care providers to join in supporting these efforts to encourage continued healthy discussions of health policy planning in the Mat-Su Valley, keeping in mind that all policy decisions should be made for the community's greatest good.

Valley Hospital Association, Inc.


Operating Board President

ATTEST:



ALASKA STATE HOUSE OF REPRESENTATIVES

Interim Address:
119 N. Cushman, Suite 211
Fairbanks, AK 99701
(907)-456-5081
Fax# (907)-456-8245



Session Contact:
(907)-465-3719
FAX# (907)-465-3258
State Capitol
Room 416

REPRESENTATIVE JOHN COGHILL

HB 260 DENALI KID CARE QUALIFICATIONS SPONSOR STATEMENT

The federal government has slowly been imposing guidelines to provide more and more public assistance to more and more people, many of whom are not living in poverty. Working Alaskans are now not only being asked to provide medical care for the poor, they are being asked to provide medical care for Alaskans living at 250% of the poverty level.

This legislation serves two purposes. First, it brings the definition of poverty back to the basic assumption that a family is poor if they do not have the resources to provide for essential needs such as food, clothing and shelter.. Second, it tells the federal government that we disapprove of its move to instill socialized medicine as status quo in this country, even if it means sending federal dollars back to Washington.

Why in a state where unemployment is 4.7% are we providing medical assistance to 105,000 Alaskans. The simple truth is that we are broadening the definition of poor. The federal government already allows Alaska to define 100% of poverty level at 125%, but in passing HB 375, the legislature redefined poverty at 250% by expended medical assistance to families "whose household income does not exceed 200 percent of the federal poverty level..."

The Privatization Subcommittee on Health & Social Services recommended that the medical assistance program be converted into a loan program for people who are physically able to support themselves and their family, but have medical needs and do not have the immediate resources to pay for that need. This could enable the State of Alaska to turn back federal dollars with unfunded mandates attached. This would eliminate such requirements placed on doctors as the stipulation that they can not charge less to any patient than what a Medicaid patient pays. The elimination of that requirement would enable doctors to perform medical services to certain patients at no cost. The department responded that any attempt to convert to a loan program would jeopardize \$332 million in federal Medicaid funds annually and "put health coverage at risk for 105,000 Alaskans."

Wall Street Journal
November 2, 1999

Defining Poverty Up
by
W. Michael Cox and Richard Alm

America could soon get a lot poorer.

The Census Bureau is experimenting with a new formula that would raise the poverty threshold for a family of four to \$19,500 from \$16,660. Through a simple change of definition, one that has nothing to do with economic realities, 12 million Americans might become "poor" overnight.

It's true that existing measures of poverty are riddled with flaws. But the problem isn't that they underestimate poverty; it's that they overestimate it. When we're trying to determine well being, the proper yardstick is consumption, not income. They aren't the same thing--especially among the poor. The poverty rate tells us how many Americans earn low incomes, not what they're able to buy.

Households in the bottom fifth of the income distribution consume well beyond their earnings. In 1997 an average low-income household made \$7,086 year before taxes. Consumption--what the poor spent, not what they earned--totaled \$14,670.

How can poor families consume more than they earn? Many supplement their income through welfare, Food Stamps, unemployment benefits, Medicare, Medicaid, school lunches, rent subsidies and other programs, all of which the statistics leave uncounted. And the poverty statistics ignore wealth, which can be more important than current income. Workers temporarily laid off don't get paychecks, but they often have savings to fall back on. Although many retirees earn low incomes, their houses, cars and furnishings are paid for, and they've got nest eggs. In 1993, 302,000 families with incomes of less than \$20,000 lived in homes worth more than \$300,000.

When you're really poor, everything you see is something you can't have. But over the years, the poor have gained access to more goods. Government statistics show that poor households own many of the consumer goods usually associated with middle class life in the United States.

The percentage of poor households with washing machines rose to 72% in 1996 from 58% in 1984. Ownership of dryers went to 50% from 36%. Two-thirds of poor families had microwave ovens in 1996, up from one in eight a decade ago. Ninety-seven percent of poor households have color televisions, and three-fourths have videocassette recorders. Almost three-quarters of poor families own at least one car.

By the standard of day-to-day living--the standard that really matters--the poor have gotten much richer. Indeed, poor households in the 1990s are in many ways better off than average families in the early 1970s. Two-thirds of poor households had air-conditioners in 1997, compared with less than a third of all households in 1971. And it wasn't a welfare program that made it possible; it was the free market, which has introduced innovative new products and brought the prices down.

Spending patterns help explain how the poor can afford more of the trappings of middle-class life yet still not escape the poverty statistics. Among households below the poverty line, outlays for food, clothing and shelter were 37% of consumption in 1995, compared with 52% two decades earlier, 57% in 1950 and 75% in 1920. Thus poor households have considerably more discretionary income than they once did.

One reason is that the government has already been raising the poverty threshold too quickly. For more than three decades the government has been adjusting the poverty line every year for inflation. The Boskin Commission concluded in 1996 that the consumer price index overstates the actual rise in the cost of living by a percentage point a year. What's more, the overall CPI has risen 40% faster than the cost of groceries since 1965.

The crux of the debate over the proposed new statistics is the purpose of measuring poverty. As originally conceived, the poverty statistics were meant to be diagnostic. They emerged in the mid-1960s as a benchmark for President Johnson's "war on poverty." What we wanted to know then--what we should still want to know today—is whether we're reducing the number of families struggling to obtain the basic necessities of life.

The answer is yes. A recent Heritage Foundation study examines the incidence of the bedrock problems of poverty--malnutrition, crowded housing and lack of access to medical care. It concludes that 8.7 million Americans, or just 3.7% of the population, make up the nation's "hardship population"--the truly poor.

In 1993, University of Texas economist Daniel Slesnick recalculated the poverty rate based on spending rather than income. To remove the vagaries of inflation, he established the poverty threshold at three times the cost of a nutritionally adequate diet for all members of a household. Mr. Slesnick's results show that the proportion of poor in the U.S., measured by consumption, has fallen steadily, from 31% in 1949 to 13% in 1965 to 2% at the end of the 1980s.

It's not hard to discern the political agenda of those who want to conjure up another 12 million poor people. Having more poor families enlarges the constituency for programs that dole out money to the poor. But if it's simply a matter of deciding which families are eligible for government programs, then the issue really comes down to how much we're willing to sacrifice to the insatiable god of equality.

FISCAL NOTE

STATE OF ALASKA
2000 LEGISLATIVE SESSION

BILL NO. HB 260

Revision Date/Time (Note if correction): _____ Dept. Affected: Health and Social Services
 Title: Relating to coverage of women and children BRU: Medical Assistance
under medical assistance program Component: Medicaid Services
 Sponsor: Coghill COMPONENT SERIAL NO. 2077
 Requestor: H HESS See also (SN#): _____

Expenditures/Revenues: (Thousands of Dollars)

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

| OPERATING | FY2001 | FY2002 | FY2003 | FY2004 | FY2005 | FY2006 |
|------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| PERSONAL SERVICES | | | | | | |
| TRAVEL | | | | | | |
| CONTRACTUAL | | | | | | |
| SUPPLIES | | | | | | |
| EQUIPMENT | | | | | | |
| LAND & STRUCTURES | | | | | | |
| GRANTS, CLAIMS | (10,047.5) | (17,594.9) | (19,008.1) | (19,008.1) | (19,008.1) | (19,008.1) |
| MISCELLANEOUS | | | | | | |
| TOTAL OPERATING | (10,047.5) | (17,594.9) | (19,008.1) | (19,008.1) | (19,008.1) | (19,008.1) |

| | | | | | | |
|----------------------|--|--|--|--|--|--|
| CAPITAL EXPENDITURES | | | | | | |
|----------------------|--|--|--|--|--|--|

| | | | | | | |
|-------------------------|--|--|--|--|--|--|
| CHANGES IN REVENUES () | | | | | | |
|-------------------------|--|--|--|--|--|--|

FUND SOURCE (Thousands of Dollars)

| | | | | | | |
|--------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| 1002 Federal Receipts | (7,326.3) | (12,841.7) | (13,665.3) | (13,665.3) | (13,665.3) | (13,665.3) |
| 1003 GF Match | (2,721.2) | (4,753.2) | (5,342.8) | (5,342.8) | (5,342.8) | (5,342.8) |
| 1004 GF | | | | | | |
| 1005 GF/Program Receipts | | | | | | |
| 1037 GF/Mental Health | | | | | | |
| Other (please specify) | | | | | | |
| TOTAL | (10,047.5) | (17,594.9) | (19,008.1) | (19,008.1) | (19,008.1) | (19,008.1) |

Estimate of any current year (FY2000) cost: \$0.0

POSITIONS:

| | | | | | | |
|-----------|--|--|--|--|--|--|
| FULL-TIME | | | | | | |
| PART-TIME | | | | | | |
| TEMPORARY | | | | | | |

ANALYSIS: (Attach a separate page if necessary)

This bill would eliminate the expansion of Medicaid coverage to pregnant women and children with family incomes up to 200 percent of the federal poverty level that started March 1, 1999. The proposed effective date for the legislation is July 1, 2000. Regulations will be needed in order to discontinue Medicaid coverage, however, since pregnant women are guaranteed eligibility through two months past partum and children are granted eligibility for six months, those already eligible when the regulations go into effect will remain eligible for the appropriate period. There is also a delay of claims processed from the date of service that impacts the financial outcome of elimination of services; this claims delay will result in 95 percent completion of claims processing for children in August of 2001 and in December of 2001 for pregnant women. This fiscal note assumes regulations to eliminate the coverage expansion go into effect October 1, 2000.

7/28/11/3/19

Prepared by: Nancy Weller *NW* *BS* Phone: 465-3355
 Division: Division of Medical Assistance Date/Time: 1/13/00 2:53 PM
 Approved by Commissioner: Karen Perdue, Commissioner Date: 1/21/00
 Agency: Department of Health & Social Services

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ANALYSIS (cont.):

The basis for the fiscal note analysis is the following assumptions:

| <u>GROUP</u> | <u>NUMBER</u> | <u>TOTAL FUNDS</u> | <u>GF</u> | <u>MATCH RATE</u> |
|--------------|---------------|--------------------|-------------|-------------------|
| PG women | 780 | \$5,963,043 | \$2,017,894 | 33.8% |
| Children | 6696 | \$13,045,037 | \$3,324,918 | 24.25% |

ANNUAL COST: PGwomen - \$7,644.93 CHILDREN - \$1,948.18

MONTHLY COST: PGwomen - \$637.08 CHILDREN - \$162.35

This fiscal note assumes that beginning October 1, 2000, 780 pregnant women and 6696 children would be newly denied Medicaid coverage. The cost experience for the Medicaid Program for these groups is indicated above in annualized and monthly average expenditures. The match rate is the effective general fund match rate for these groups factoring in the 100 percent federal funding for Alaskan Natives who receive services in tribal health facilities. This fiscal note assumes that the eligible pregnant women and children applied for coverage equally over the months of the year and that claims for health care services are submitted equally over the six months following the date of service.

| <u>FY01 PROJECTED EXPENDITURES</u> | <u>SAVINGS</u> | <u>GF</u> | <u>FFP</u> |
|------------------------------------|----------------|-------------|-------------|
| PG WOMEN | \$2,981.5 | (\$2,981.5) | (\$1,973.8) |
| CHILDREN | \$5,979.0 | (\$7,066.0) | (\$5,352.5) |

The projected expenditures for pregnant women and children for FY01 are based on the eligibility segments for those groups who remain on Medicaid after October 1, 2000. Due to the guaranteed six month eligibility period for children, children will drop off Medicaid coverage monthly through February of 2001, and the six month filing period for claims for their services will extend through August of 2001. Pregnant women are required to receive coverage through two months following the termination of the pregnancy; therefore, the last group of pregnant women will not lose coverage until the end of June of 2001. Claims for pregnant women coverage should be largely completed by the end of December of 2001.

| <u>FY02 PROJECTED EXPENDITURES</u> | <u>SAVINGS</u> | <u>GF</u> | <u>FFP</u> |
|------------------------------------|----------------|--------------|-------------|
| PG WOMEN | \$896.6 | (\$5,093.4) | (\$3,371.8) |
| CHILDREN | \$543.5 | (\$12,501.5) | (\$9,469.9) |

The expenditures for pregnant women and children in FY02 are due to the delay in claims processing until six months following the dates of service. Claims will continue to be processed for children through August of 2001 and through December of 2001 for pregnant women.



- Priority Alert
 Information & Background
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Priority Alert - Action Required

HB 260 - Medical Assistance Bill

Eliminates DenaliKid Care

January 25, 2000

HB260 is a bill that will eliminate the Denali KidCare Program!

There will be a hearing in House HESS, Thursday, January 27 at 3:00 p.m. This hearing will be teleconferenced through the Legislative Information Offices in Anchorage, Fairbanks, Juneau and Sitka. Additional sites must be requested by the representatives on House HESS committee.

The attached information sheets were provided by Diane DiSanto and will certainly help in forming arguments to simply drop this bill.

Your calls, letters, POM's, and personal testimony will make a difference! Please do not hesitate to contact me should you require any further information!

Jan McGillivary, Coordinator

Denali KidCare is a program that went into effect March 1, 1999 to provide health care insurance primarily to uninsured children in working and non-working families and to pregnant women. Funded mainly with federal dollars, this program expanded Medicaid income levels to assure that more Alaskan children receive a healthy start in life.

Denali KidCare takes advantage of enhanced federal funding under the State Child Health Insurance Program (S-CHIP) adopted by Congress in 1997 to provide health care insurance for uninsured children in America. Over 10.5 million children are uninsured in this country, and the number is increasing as employer coverage of dependents becomes less common.

HB 260, if adopted by the Legislature, will eliminate the Denali KidCare program.

Alaska would be the only state or territory without a State Child Health Insurance Program.

WHY COVER HEALTH INSURANCE FOR CHILDREN?

- Health care insurance coverage for children is cheap - \$472 per year, per child in state funds.
- With Denali KidCare, 72 cents of every dollar spent is federal funds; only 28 cents comes from state general funds.
- Services for children enrolled in Denali KidCare who also are eligible for Tribal or Indian Health Service are paid for with 100% federal funds.
- Health care insurance is vital to the wellbeing of Alaska's children.
- Children with health care coverage are more likely to receive well-baby/well-child care, adequate immunizations, and have health care problems discovered early.
- Denali KidCare helps working families who work in jobs with no benefits to provide health care for their children.
- The state used part of the \$30 million savings from the Medicaid federal match rate change to expand coverage for children and pregnant women.
- Program elimination will result in a huge loss of federal funds for health care.

WHY COVER HEALTH INSURANCE FOR PREGNANT WOMEN?

- Prenatal care is the single most cost-effective health care expenditure.
- Prenatal care ensures the best birth outcome for the baby.
- Prenatal care is the best method of assuring a healthy start for Alaskan children.

1. Helping the working poor—

Denali KidCare offers health care coverage for children in families that make too much to be on Medicaid—but not enough to buy health insurance

1. It is a program for the low-income “working poor”—and meets the basic need for Alaska parents to be able to provide health care for their children while working at a low paying job with no benefits.
2. Denali KidCare provides health insurance coverage for children and teens through age 18 and for pregnant women.
3. To be eligible, the family must meet income and other eligibility guidelines.
4. It is primarily for individuals without health insurance whose income is 200% or below the Federal Poverty Level (FPL) Guidelines.
5. If the family income is quite low, 150% Federal Poverty Level or below, children with other health insurance may be eligible.
6. Children, teens and pregnant women covered by Indian Health Service may also be eligible if they meet income and other eligibility guidelines.

II. Changing Alaska economy—

More retail, low paying jobs—a Walmart instead of an ARCO economy— means more parents are unable to provide health insurance coverage for their children.

1. "According to data published by the U.S. Department of Commerce, Alaska is the only state with real (inflation-adjusted) Gross State Product (GSP) lower in 1997 than it was in 1982."
2. "Alaska has gone from having the highest per capita personal income in the country to a position below the national average."
3. "At the current rate of decline, Alaska's per capita personal income will fall into the lowest 25 percent within 10 years."
4. "Declining real GSP in the face of rising population and labor force means that Alaska has endured a sustained 15 year period of net aggregate disinvestment."
5. "Real wages and real household income have continued to fall."

(Quoted from the *Anchorage Daily News*, "Economic downturn threatens Alaska,, by David Reaume, October 24, 1999.)

III. Assisting families going from welfare to work—

Denali KidCare makes it possible for families to get off welfare because with Denali KidCare, they can still provide for their children's health care needs.

1. State welfare rolls are down to the lowest level in almost a decade. (*Juneau Empire*, November 24, 1999)
 - In April 1994, there were 13,161 Alaskans on temporary assistance cash payments. As of October 1999, that number was down to 7,718 and more than half of these people are working part-time or training for work.
 - From July 1997 to July 1999, more than 4000 Alaska families left welfare for jobs, dropping the welfare caseload to its lowest level since 1991.
 - Of the roughly 7,700 Alaskans currently receiving temporary assistance, more than half are working part-time jobs or participating in job training or education programs.
 - In cash payments alone, the state is projected to have spent some \$47 million less from 1997 through 2000."
 - Declining welfare rolls have allowed the state to replace state funding for some programs with federal money.
2. "In the past three years, we have moved thousands from welfare to meaningful jobs, cut the welfare caseload by a third, and saved the state millions of dollars in the process." (Governor Knowles, press release dated November 24, 1999.)
3. Welfare reform in Alaska is working successfully to keep people off welfare and cash assistance.
4. Keeping people off welfare takes money to support services needed by working families—such as health insurance for their children.

(Quoted from the *Juneau Empire*, "Welfare rolls drop by third, by Svend Holst, November 24, 1999 and related press release from governor Knowles.0)

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Disanto, Diane M. (907) 269-7800 diane_disanto@health.state.ak.us

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Jan 25 23:00

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