State of Alaska FY2013 Governor's Operating Budget

Department of Health and Social Services
Public Health
Results Delivery Unit Budget Summary

Public Health Results Delivery Unit

Contribution to Department's Mission

Protect and promote the health of Alaskans

Core Services

- Prevent and control epidemics and the spread of infectious disease.
- Prevent and control injuries.
- Prevent and control chronic disease and disabilities.
- Respond to public health emergencies, disasters and terrorist attack.
- Assure access to early preventative services and quality health care.
- Protect against environmental hazards impacting human health.
- Manage and administer public health programs and services effectively and efficiently.
- Death investigation and medical examination to determine identity of deceased and cause of death.

Results at a Glance

(Additional performance information is available on the web at http://omb.alaska.gov/results.)

End Result A: Healthy people in healthy communities.

- Target #1: Reduce Alaska's tuberculosis (TB) rate.
- Status #1: The target to reduce Alaska's tuberculosis (TB) rate was not met. The 2010 rate of tuberculosis was 8.0 cases/100,000 population, a 51% increase from 2009.
- Target #2: Reduce Alaska's unintentional injury death rate.
- Status #2: The 2009 death rate caused by unintentional injuries was 54.0 per 100,000 population, slightly lower than the 2008 rate of 54.7; however, it did not meet the Healthy Alaskans 2010 target of 31.0 per 100,000 population.
- Target #3: Reduce prevalence of overweight and obesity.
- Status #3: The overall target to reduce prevalence of overweight and obesity was not met. The rate of overweight/obese high school students in 2009 was 26.2%, down from 27.3% in 2007; however, the Department's Healthy Alaskans 2010 target of 17% for high school students was not met. The rate of overweight/obese adults in 2010 was 66.7%, up from 65.02% in 2009. The Department's Healthy Alaskans 2010 target of 48% for adults was not met.
- Target #4: Increase the prevalence of pregnant women who receive adequate prenatal care to at least 75%.
- Status #4: The 75% target was last met in 2003. Since then, the percentage of women receiving adequate prenatal care, as measured by the Kotelchuck Index, has decreased steadily. In 2009, 67% of women with a live birth met the criteria of receiving adequate prenatal care.
- Target #5: Reduce cases of vaccine-preventable disease in Alaska.
- Status #5: The number of reportable conditions that are vaccine-preventable in 2010 was 99, a decrease from 128 in 2009. However, it did not meet the Healthy Alaskans 2010 target of zero cases.
- Target #6: Increase number of adults who visited a dentist in the last year.
- Status #6: The number of adults who visited a dentist in 2008 was 65.3% of the Alaska adult population. During 2010 the percentage of Alaskan adults that visited a dentist increased slightly to 68.3%. However, this percentage is still far below the target of 80% set for 2010.
- Target #7: Reduce the rate of uninsured Alaskans to less than 14.6%.
- Status #7: The target to reduce the rate of uninsured Alaskans to less than 14.6% was not met but is improving. In 2009, the rate of uninsured Alaskans was 17.7%, down from 19.8% in 2008. (Source: U.S. Census Bureau, Current Population Survey for Alaska)
- Target #8: Increase the number of active, licensed health care providers in Alaska in proportion to population growth.
- Status #8: The target to increase the ratio of active licensed healthcare providers in Alaska in proportion to the population growth has not been met. The ratio of active physicians to Alaska residents decreased slightly,

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- with 1 physician per 424 residents as of July 1, 2011, as compared to 1 per 405 residents during 2010.
- Target #9: Reduce the percentage of high school students in Alaska who use any tobacco products.
- Status #9: The target to reduce the percentage of high school students in Alaska who use any tobacco products was not met. Also, the Department's Healthy Alaskans 2010 target of 20% was not met. 25.2% of high school students used tobacco products in 2009, up from 24.1% in 2007, but below the 25.7% national average.

Strategy A1: Prevention and Health Promotion

- Target #1: Less than 20% of children aged 2 to 5 served by WIC are overweight or obese.
- Status #1: In 2009, 41% of children aged 2 to 4 served by WIC were overweight or obese. This does not meet the Healthy Alaskans 2010 target of less than 20% overweight or obese WIC children.

Strategy A2: Reduce the risk of epidemics and the spread of infectious disease.

- Target #1: 95% of persons with tuberculosis (TB) will complete adequate treatment within one year of beginning treatment.
- Status #1: In 2009, 88% of persons with tuberculosis (TB) completed adequate treatment within one year; this was a slight increase from the previous year but still below the target rate of 95%, primarily due to some difficult cases.
- Target #2: Young children between 19 and 35 months of age receive all vaccines recommended by the Centers for Disease Control and Prevention (CDC).
- Status #2: The target for young children to receive all vaccines was not met, as 56.6% of these children received vaccines in 2009, down from 69.2% in 2008.

Strategy A3: Reduce suffering, death, and disability due to injuries.

- Target #1: Reduce the number of Alaskans who die from drowning each year.
- Status #1: The 2009 death rate due to unintentional drowning was 2.6 per 100,000 population, lower than 2008 rate of 4.2. Alaska's drowning rates are consistently 3 to 4 times higher than comparable US rates.

Strategy A4: Assure access to early preventative services and quality health care.

- Target #1: At least 95% of three-year olds receive an annual well-child checkup or physical exam.
- Status #1: In 2009, 87.5% of mothers of three-year old toddlers reported that their child had seen a health care provider for routine medical care.
- Target #2: At least 95% of children 0-18 years of age having continuous health insurance coverage during the year.
- Status #2: The target of at least 95% of children 0-18 years of age have continuous health insurance coverage during the year was not met. In 2009, 88% of children 0-18 years of age had continuous health insurance coverage. At least 17% of three-year old toddlers had experienced a gap in health insurance coverage since they were born.

Strategy A5: Emergency response planning and preparedness

- Target #1: At least 25 percent of Alaska's hospitals will be certified as trauma centers at the recommended level.
- Status #1: In 2010, 21%, or 5 of the 24 acute care facilities in Alaska achieved designation as trauma centers.

 This rate was unchanged from 2008. This percentage did not meet the Healthy Alaskans 2010 target of 100% trauma designation of all acute care facilities
- Target #2: Increase the number of certified air medical services statewide to at least 20.
- Status #2: In FY 2011 there are 19 Certified Air Medical Services operating in the State of Alaska. This represents an increase of two services from FY 2010 but remains below the target of 20.

Strategy A6: Reduce Alaskans' exposure to environmental human health hazards.

- Target #1: Increase the number of health impact assessments (HIAs) performed on new large-scale development projects in Alaska.
- Status #1: During 2010, the Alaska HIA Program worked on seven HIAs for several large-scale natural resource development projects. The Alaska Department of Health and Social Services established an HIA Program in July 2010.

Strategy A7: Health care workforce

Target #1: Decrease by 10 percent the number of communities with severe health care shortages as defined by

low provider to population ratios (determined by federal Health Professional Shortage Area designations).

Status #1: The target was not met. Alaska regained one geographical primary care HPSA due to physician departure.

Key RDU Challenges

As the Division of Public Health (DPH) works to protect and promote the health of Alaskans, challenges abound in the general categories of preventing chronic disease and promoting good health, fighting infectious disease, preventing injuries, improving outcomes for children, and protecting vulnerable Alaskans. In each of these categories, progress will continue through the right mix of necessary investments in the division's programs, expanded partnerships with the entire public health community, and the recruitment and retention of expert, dedicated staff.

More specifically, the fight against chronic diseases is critical: three of every five deaths in Alaska are linked to chronic diseases. The primary risk factors for such diseases are obesity, poor diet, lack of exercise and tobacco use. As federal funding shrinks for disease prevention and health promotion programs, a major challenge for the division is to continue its work to prevent chronic diseases and promote good health through better education efforts, especially the important fight to reverse or at least slow Alaska's growing and alarming rates of overweight and obesity. This makes sense financially because investments in a healthier Alaska now will save healthcare dollars in the years to come. Another major challenge is the fight against infectious disease, with new diseases discovered all the time and old scourges still lingering. Alaska must remain prepared for the threat of avian influenza while continuing to battle long-familiar diseases such as tuberculosis. Alaska's role as a transportation and tourism crossroads exacerbates the challenge as people from around the world come to our state. In addition, there is an urgent and ever-present need in the division to assure an adequate public health nursing workforce around the state. These nurses are the "foot soldiers" of Alaska's public health system and deliver critical services in every corner of Alaska.

Other challenges for the Division of Public Health include:

- Continuing to build on progress made by reducing adult and youth smoking in Alaska; efforts must continue to lessen the negative impact of tobacco on all Alaskans.
- Working within the division and with health partners around the state to increase the number of children who
 are fully immunized.
- Providing accurate and timely advice to Alaskans regarding fish consumption and protecting the fishing industry by dispelling misconceptions about chemical contaminants in Alaska seafood.
- Supporting the Alaska Health Care Commission to serve as the state health planning and coordinating body, and to provide recommendations for and foster the development of a comprehensive statewide health care policy and a strategy for improving the health of Alaskans.

Significant Changes in Results to be Delivered in FY2013

- Expand efforts to improve Alaska's childhood immunization rates.
- Continued leadership with the Alaska Health Care Commission to improve the quality, accessibility, and affordability of health care for Alaskans.
- Expand the number of Alaska hospitals that undergo trauma system certification and designation.
- Continue with Phase II of expanding the State Medical Examiner's Office function to serve statewide needs more adequately.

Major RDU Accomplishments in 2011

- Coordinated Health and Social Services' massive surveillance and response to H1N1 Pandemic Influenza including distribution of 228,405 doses of vaccine to providers. Public health nurses vaccinated 68,232 Alaskans against this disease, giving 48% of the vaccine administered by health care providers in Alaska. More than 150 mass and targeted vaccine dispensing clinics were conducted with local communities and partners. Antiviral medications, masks, gowns, gloves, and other personal protective equipment from state and federal stockpiles were sent to 38 communities during the response. Public Health laboratories tested more than 5,000 specimens for H1N1 pandemic influenza.
- Investigated a large-scale outbreak of gonorrhea infection that has already affected more than 1,000

- individuals across the state. Provided disease notification and prevention strategies; collaborated with public and private health providers; and evaluated ways to control sexually transmitted infections, including the use of expedited partner therapy to reduce transmission of gonorrhea and other sexually transmitted diseases.
- Investigated numerous smaller infectious disease outbreaks, including outbreaks of paralytic shellfish poisoning, botulism, meningococcal disease, and a restaurant-associated outbreak of salmonella infection that sickened at least seven people and resulted in two hospitalizations.
- Alaskans Taking on Childhood Obesity (ATCO) established a Memorandum of Agreement between Health and Social Services and Education and Early Development that identified obesity prevention strategies for the departments to coordinate and implement. A School Nursing Advisory Committee was established and a plan of action was developed and implemented to work on the highest priorities. The School Nursing Consultant contributed significantly to the Department of Education and Early Development's Health and Safety plan and is actively working with school nurses statewide on obesity reduction efforts for school-aged children.
- As a result of having three pathologists, the Office of the State Medical Examiner has seen a dramatic increase in case load. Eighty percent of cases were transported to the Office for further examination, compared to 24% in FY2009. This year the Office performed 484 autopsies (up from 253 in FY2009) and 265 inspections (up from 124 in FY2009).
- The Code Blue Program is entering its 11th year. The Department, in cooperation with the seven EMS Regions, has documented a critical need to provide vehicles and equipment throughout the state, particularly in rural areas, to ensure continued viability of a life-saving EMS system. One dollar in State general funds in this program leverages four dollars from other funding sources.
- Residential care licensing staff investigated complaints and took enforcement actions when necessary for more than 525 complaints, as compared to 299 complaints in FY2009.
- Eighteen different communities in Alaska received 1,450 smoke alarms. More than 500 child safety seats and booster seats were distributed to moderate and low-income families. The Poison Prevention and Control Program reported 9,006 calls to the Alaska Poison Control System. Kids Don't Float drowning prevention program added 87 sites, totaling 580 active sites and education centers statewide. Nineteen lives were saved statewide by direct use of personal flotation devices from Kids Don't Float.
- Overall youth tobacco use prevalence is at an all time low of 16%; this is statistically significant and lower than the US average for the first time ever.
- The Bureau of Vital Statistics completed a five-year project to enter all deaths into its information system and create electronic images of paper marriage and divorce files. Each record that can be located electronically saves staff three to five minutes per search.

Contact Information

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Public Health RDU Financial Summary by Component

All dollars shown in thousands

	FY2011 Actuals				FY2012 Management Plan				FY2013 Governor			
	UGF+DGF	Other	Federal	Total	UGF+DGF	Other	Federal	Total	UGF+DGF	Other	Federal	Total
	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds
Formula												
Expenditures												
None.												
Non-Formula												
Expenditures												
Health Planning &	0.0	0.0	0.0	0.0	1,149.3	1,751.1	2,022.4	4,922.8	1,375.8	1,751.2	2,185.1	5,312.1
Systems Develo					,	•	•	·	•	·	•	
Certification and	2,646.5	34.8	766.7	3,448.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Licensing Nursing	22 470 4	665.6	3.123.0	26.959.0	27.134.0	906.5	4.725.8	32.766.3	28.820.0	906.5	4.838.5	34.565.0
Women, Children	23,170.4		-,	-,	,		,	- ,	-,		,	- ,
and Family Healt	3,702.4	666.4	5,367.5	9,736.3	3,344.0	934.6	7,161.3	11,439.9	3,411.2	934.6	7,218.9	11,564.7
Public Health	1,496.7	0.0	345.5	1,842.2	1,064.5	678.1	935.5	2,678.1	810.8	978.1	536.9	2,325.8
Admin Svcs	1, 100.7	0.0	0 10.0	1,012.2	1,001.0	0.0.1	000.0	2,070.1	0.0.0	0.0	000.0	2,020.0
Emergency	1,955.6	60.2	6,108.4	8,124.2	788.3	169.8	7,005.7	7,963.8	823.4	169.8	7,040.2	8,033.4
Programs												
Chronic Disease	2,869.1	423.3	4,368.0	7,660.4	3,171.7	664.4	6,758.2	10,594.3	3,241.8	672.2	6,703.2	10,617.2
Prev/Hlth Promo Epidemiology	2,870.3	1,557.5	6,974.6	11,402.4	2,438.8	1,476.5	8,153.8	12,069.1	3,119.8	1,703.6	8,317.5	13,140.9
Bureau of Vital		218.8		,		212.1	•	,				3,225.7
Statistics	2,071.4	210.0	288.9	2,579.1	2,396.3	212.1	517.4	3,125.8	2,473.1	222.9	529.7	3,223.7
Emergency	2,820.6	0.0	0.0	2,820.6	2,820.6	0.0	0.0	2,820.6	2,820.6	0.0	0.0	2,820.6
Medical Śvcs	_,0_0.0	0.0	0.0	_,0_0.0	_,0_0.0	0.0	0.0	_,0_0.0	_,0_0.0	0.0	0.0	_,0_0.0
Grants												
State Medical	2,727.2	91.7	0.0	2,818.9	3,073.5	0.0	11.0	3,084.5	3,120.8	0.0	11.0	3,131.8
Examiner Public Health	F 000 0	004.4	4 407 4	7 405 4	4.040.7	000.0	4 505 0	0.545.5	4.700.0	000.0	4 500 0	0.005.0
Laboratories	5,003.3	994.4	1,197.4	7,195.1	4,616.7	393.0	1,505.8	6,515.5	4,706.2	393.0	1,536.0	6,635.2
Tobacco	7,813.3	0.0	0.0	7,813.3	8,563.3	0.0	0.0	8,563.3	8,563.3	0.0	0.0	8,563.3
Prevention and	7,010.0	0.0	0.0	7,010.0	0,000.0	0.0	0.0	0,000.0	0,000.0	0.0	0.0	0,000.0
Control												
Totals	59,146.8	4,712.7	28,540.0	92,399.5	60,561.0	7,186.1	38,796.9	106,544.0	63,286.8	7,731.9	38,917.0	109,935.7

Public Health Summary of RDU Budget Changes by Component From FY2012 Management Plan to FY2013 Governor

				All dollars shown in thou				
	Unrestricted	Designated	Other Funds	<u>Federal</u>	Total Funds			
	Gen (UGF)	Gen (DGF)		<u>Funds</u>				
FY2012 Management Plan	46,878.8	13,682.2	7,186.1	38,796.9	106,544.0			
Adjustments which will								
continue current level of								
service:								
-Health Planning & Systems	26.5	0.0	-319.9	162.7	-130.7			
Develo								
-Nursing	685.4	10.6	0.0	2.7	698.7			
-Women, Children and	66.7	0.5	-75.0	57.6	49.8			
Family Healt								
-Public Health Admin Svcs	-253.7	0.0	0.0	-98.6	-352.3			
-Emergency Programs	35.1	0.0	0.0	34.5	69.6			
-Chronic Disease Prev/Hlth	53.0	17.1	7.8	-55.0	22.9			
Promo								
-Epidemiology	51.0	0.0	227.1	93.7	371.8			
-Bureau of Vital Statistics	5.1	71.7	10.8	12.3	99.9			
-State Medical Examiner	47.3	0.0	0.0	0.0	47.3			
-Public Health Laboratories	88.8	0.7	0.0	30.2	119.7			
Proposed budget								
decreases:								
-Public Health Admin Svcs	0.0	0.0	0.0	-300.0	-300.0			
Danie and hardwat								
Proposed budget increases:								
	200.0	0.0	320.0	0.0	520.0			
-Health Planning & Systems Develo	200.0	0.0	320.0	0.0	520.0			
-Nursing	990.0	0.0	0.0	110.0	1,100.0			
-Women, Children and	0.0	0.0	75.0	0.0	75.0			
Family Healt	0.0	0.0	75.0	0.0	7 3.0			
-Public Health Admin Svcs	0.0	0.0	300.0	0.0	300.0			
-Epidemiology	630.0	0.0	0.0	70.0	700.0			
Leidolliiology	000.0	0.0	0.0	70.0	700.0			
FY2013 Governor	49,504.0	13,782.8	7,731.9	38,917.0	109,935.7			