

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Pioneer Homes Management (2731)
RDU: Alaska Pioneer Homes (503)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	946.1	701.4	6.1	219.3	14.3	5.0	0.0	0.0	7	0	1
1002 Fed Rcpts		83.7										
1004 Gen Fund		798.1										
1037 GF/MH		64.3										
ETS Chargeback Transfer from Department of Administration												
	Atrin	52.4	0.0	0.0	52.4	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		52.4										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	998.5	701.4	6.1	271.7	14.3	5.0	0.0	0.0	7	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	998.5	701.4	6.1	271.7	14.3	5.0	0.0	0.0	7	0	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer Contractual Authorization to Personal Services												
	LIT	0.0	23.8	0.0	-23.8	0.0	0.0	0.0	0.0	0	0	0
Transfer contractual authorization to personal services to make up for the decreased federal receipt authority.												
Decrease Federal Receipt Authorization												
	Dec	-23.8	-23.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-23.8										
The Project Coordinator is no longer working entirely on projects resulting in federal receipts. This results in a decrease to the federal recovery we may claim.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.6	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.1										
1004 Gen Fund		0.5										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.6

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FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	14.2	14.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		14.2										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$14.2												
	Subtotal	989.5	716.2	6.1	247.9	14.3	5.0	0.0	0.0	7	0	1
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	10.3	10.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		10.3										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$10.3												
	Totals	999.8	726.5	6.1	247.9	14.3	5.0	0.0	0.0	7	0	1

Change Record Detail - Multiple Scenarios With Descriptions
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Component: Pioneer Homes (2671)
RDU: Alaska Pioneer Homes (503)

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										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	49,603.1	37,522.8	18.2	6,699.2	5,046.6	212.6	103.7	0.0	547	49	66
1002 Fed Rcpts		231.0										
1004 Gen Fund		16,600.1										
1007 I/A Rcpts		3,343.8										
1037 GF/MH		12,447.3										
1108 Stat Desig		3,466.4										
1156 Rcpt Svcs		13,514.5										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	386.2	386.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		185.3										
1007 I/A Rcpts		31.3										
1037 GF/MH		130.0										
1156 Rcpt Svcs		39.6										
Costs associated with the bargaining unit contract terms applicable to this component.: \$386.2												
FY 08 Bargaining Unit Contract Terms: Confidential Unit												
	SalAdj	5.6	5.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		2.7										
1007 I/A Rcpts		0.4										
1037 GF/MH		1.9										
1156 Rcpt Svcs		0.6										
Costs associated with the bargaining unit contract terms applicable to this component.: \$5.6												
First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	Atrin	144.0	0.0	0.0	144.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		144.0										
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
	Subtotal	50,138.9	37,914.6	18.2	6,843.2	5,046.6	212.6	103.7	0.0	547	49	66
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												

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ADN #0680010 Position Reconciliation													
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2	1	-14	

The FY 2008 budget includes the following new permanent positions:

06-6230 (06-#187) - Nurse IV - Sitka Pioneer Home

There was no one in the Sitka Pioneer Home's organizational structure to supervise and provide clinical assistance for the nurses. This full time position was created to provide that oversight and supervision.

06-#253 - Maintenance General Journey - Anchorage Pioneer Home

The Anchorage Pioneer Home is an aging facility of over 160,000 square feet. Major systems are beginning to fail and major projects are needed to keep the facility operational. The current maintenance personnel are unable to keep up with the demand for preventive maintenance and repairs. The inability to complete the preventive maintenance results in high costs as systems fail. This position will allow the maintenance department staff to focus on the major repairs and projects necessary for operation, while this position will take on the much needed painting projects.

06-#254 - Nurse III - Juneau Pioneer Home

An additional full time nurse position is required at the Juneau Pioneer Home (JPH) to meet the increasing demands of Assisted Living Licensing and other regulations (Board of Nursing, Occupational Safety Health, etc.) that require increased attention and diligence from the nursing staff. The current population in JPH has significant care needs and a higher level of acuity, resulting in more intensive assistance needed, and increased medication management. In the past few years the pool of nurses has decreased markedly resulting in increased overtime costs. This additional nursing position will significantly reduce the need for overtime.

The other adjustments are explained below:

#02-7348 (Food Service Sub-Journey) was changed from full-time to part-time.

The Division of Personnel within the Department of Administration is changing the way PCNs are used for non-permanent food service workers. They are replacing individual PCNs for each employee with PCNs that can be filled with multiple employees.

Food Service Positions added: 06-#188 (06-N07082), 06-#189 (06-N07083), 06-#192 (06-N08001), 06-#193 (06-N08002), 06-#194 (06-N08003), 06-#195 (06-N08004), 06-#196 (06-N08005), 06-#197 (06N-08006)

Food Service PCNs deleted: 02-7288S, 02-7289S, 02-7372S, 02-7376S, 02-7379S, 02-7382S, 02-7383S, 02-7661S, 02-7663S, 02-7665S, 02-7666S

Non-permanent positions were added and deleted to reflect actual positions at the time of Management Plan reconciliation.

Non-Permanent Positions added: 06-#183 (02-74MS1), 06-#190 (06-N07102), 06-#191 (06-N07109)

Non-Permanent Positions deleted: 02-71M53, 02-71MS4, 02-72M53, 02-72MS1, 02-72MS4, 02-72MS6, 02-7309S, 02-7326S, 02-73MS1, 02-73MS3, 02-73MS4, 02-73MS6, 06-74MS1, 06-74MS2

ADN #0680010 Realignment to meet operating needs													
LIT		0.0	0.0	0.0	362.6	-250.0	-112.6	0.0	0.0	0	0	0	0

The Legislature authorized an additional 34 positions for the Pioneer Homes for FY 2007 for increased resident safety and security and to open additional beds in the Alaska Veterans and Pioneers Home located in Palmer, AK. The increased funding was all personal services authorization. Because most state charge-backs are based on position count, the Pioneer Homes contractual costs increased.

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The Legislature did not fund the \$131.6 for increased utility costs for FY 2008. Although utility costs have increased, the most significant increase for the Pioneer Homes resulted with the termination of the state's natural gas contract for the three Northern homes. The cost for natural gas for those Homes averaged a nearly 34% increase.

Utility and charge-back costs are both nondiscretionary and must be paid. This change record transfers supply and equipment authorization to cover the additional contractual costs.

Equipment authorization is available in FY 2008 as the Pioneer Homes over-collections are transferred to the capital budget for Pioneer Home equipment purchases. However, because the receipt supported services in the Pioneers Home base budget continues to increase, future over-collections of receipts for equipment purchases are not anticipated. Funds for equipment purchases need to be built into the base budget.

Subtotal	50,138.9	37,914.6	18.2	7,205.8	4,796.6	100.0	103.7	0.0	549	50	52
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***** **Changes From FY2008 Management Plan To FY2009 Governor** *****

Cost of Feasibility Study related to Privatizing Pioneer Homes or Services (Reg Chg)

Inc	50.0	0.0	0.0	50.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	50.0										

The question is often asked whether it is an appropriate or necessary role for the state of Alaska to be in the assisted living business, owning and operating the five Pioneer Homes located in Anchorage, Fairbanks, Juneau, Sitka and Ketchikan. Because the Alaska Veterans and Pioneers Home located in Palmer has a different status as a state veterans home, it must be viewed differently in several of the considerations mentioned below.

In an effort to ensure that the state's funds are most efficiently utilized and to identify cost-saving opportunities, the division will hire a contractor to undertake a feasibility study to determine if the state should continue under statutory authority to operate the Pioneer Homes, or if it is feasible to privatize the Homes, or contract out some of the services in the Homes currently handled by state employees, such as food service, housekeeping services and laundry services, or management functions currently handled by administrators in Juneau and each of the Homes.

The contract needs to address schedules and timelines for transitioning out of the business if deemed feasible and desirable, and to recommend whether all the Homes or just select Homes be considered for privatization. If the Homes are to be privatized, a transition plan or phase in/out plan must be discussed with recommendations for how a phase out and free market take over might be accomplished. If environmental services or management services can be contracted out, the feasibility study needs to address union contracts and transition plans.

The cost of the study is based on \$100/hour and an estimated 500 hours. Establishing and completing the study could take six months or more.

Increase Base Budget for Equipment Purchases

Inc	500.0	0.0	0.0	0.0	0.0	500.0	0.0	0.0	0	0	0
1156 Rcpt Svcs	500.0										

Previously, the Pioneer Homes received Legislative approval to transfer unexpended resident payments (receipt supported services) and those collected in excess of the amount authorized to the capital budget for equipment needs. This funding is used to purchase equipment for the Pioneer Home residents and includes items such as special beds, resident safety lift equipment, unique bathing tubs appropriate for the frail elderly, industrial kitchen equipment for bulk food preparation, and commercial capacity washers and dryers.

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Although the FY08 Governor's budget did not include this language, in lieu of a supplemental request, the Legislature authorized any unexpended and unobligated balance of FY07 support receipts collected to be appropriated for Pioneer Home equipment and supply needs. Rather than relying on the inclusion of this language in the operating budget or supplemental budget request to pay for the equipment the Pioneer Homes need, this change record builds the equipment needs into the base budget.

MISSION AND MEASURES REFERENCE:
 Division Level End Result - A: Outcome Statement: Eligible Alaskans and veterans will live in a safe environment.

Increment For Reduced FMAP

	Inc	214.4	0.0	0.0	214.4	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		214.4										

The Pioneer Homes bill for and receive Residential Supported Living Medicaid Waiver receipts. Both the federal and general fund match are received as inter-agency receipts. The inter-agency receipts are a funding source for the Pioneer Homes and the general fund match is a contractual expense paid by the Pioneer Homes to the Division of Senior and Disabilities Services.

The FMAP will have dropped from 57.58 percent in the 1st quarter of SFY08 and will average 51.02 percent in SFY09. This decrease results in a 6.6 percent increase in the general fund match expenditure.

The FY09 budget includes \$3,268.5 of Medicaid waiver receipts. The first quarter and remaining three quarter's FY09 general fund match are 42.42 and 48.98 percent, respectively. The increased general fund match will cost the Pioneer Homes \$214.4.

This increment increases as the inter-agency receipt authority increases from pay, retirement or other funding changes made to the FY08 budget.

MISSION AND MEASURES REFERENCE:
 Division Level End Result - A: Outcome Statement: Eligible Alaskans and veterans will live in a safe environment.

ETS Chargeback Redistribution

	Atrin	32.4	0.0	0.0	32.4	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		32.4										

Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.

Amounts transferred from state agencies are as follows:
 Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).

Amounts transferred to state agencies are as follows:
 Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.

Position Reconciliation

	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	-1	-13
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The following non-permanent food service positions are deleted because new non-permanent food service positions were established for each Pioneer Home. The new positions may be filled with multiple employees.

02-7187S, 02-7189S, 02-7190S, 02-7191S, 02-7282S, 02-7292S, 02-7294S, 02-7660S, 02-7664S, 02-7667S, 02-7522S, 02-7523S, 02-7524S, and 02-7525S.

06N08016 (06-#383) non-permanent Food Service Sub-Journey is added (Sitka Pioneer Home). This position may be filled with multiple employees.

02-7408 Physical Therapist (APH) is changed from a part-time to a full-time position in the budget. Although the prior incumbent worked a reduced work week, this position is a full-time position in the payroll system.

Increase Interagency Receipts for Providing Food Service to Youth Facilities

	Inc	113.0	68.0	0.0	0.0	45.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		113.0										

With the new food service contract, effective July 1, 2007, the Juneau Pioneer Home is now providing the food for Johnson Youth Center.

Prior to this contract, the Division of Juvenile Justice paid the Pioneer Homes \$67.0 for a part-time food service worker in the Ketchikan and Palmer Homes to compensate for providing meals to the youth facilities in those locations. At that time, the Fairbanks Home also provided the meals to the Fairbanks Youth Facility.

With the new contract in place, the Division of Alaska Pioneer Homes and the Division of Juvenile Justice renegotiated the financial agreement. The Division of Juvenile Justice now pays the Division of Alaska Pioneer Homes \$180.0 for providing meals to the four youth facilities located in Fairbanks, Juneau, Ketchikan and Palmer. This amount funds three food service workers at \$45.0 each and provides \$45.0 for supplies and equipment related to the increased number of meals that the Homes must now prepare. Funding for a food service worker in Juneau Home is not provided as their food service staff are contract employees, not state employees. This is a \$113.0 increase over the amount previously paid for the services.

Delete one-time authorization for First FY2008 Fuel/Utility Cost Increase Funding Distribution

	OTI	-144.0	0.0	0.0	-144.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-144.0										

One-time funding deleted for fuel/utility increases which were added in the FY08 budget as follows:

Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.

The amounts transferred to state agencies are as follows:

Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.

FY 09 Health Insurance Increases for Exempt Employees

	SalAdj	1.8	1.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.8										

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1007 I/A Rcpts		0.2										
1037 GF/MH		0.6										
1156 Rcpt Svcs		0.2										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$1.8

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	1,869.4	1,869.4		0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	859.9											
1007 I/A Rcpts	168.3											
1037 GF/MH	644.9											
1156 Rcpt Svcs	196.3											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$1,869.4

FY 09 Bargaining Unit Contract Terms: Confidential Unit

SalAdj	1.8	1.8		0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	0.8											
1007 I/A Rcpts	0.2											
1037 GF/MH	0.6											
1156 Rcpt Svcs	0.2											

The FY09 health insurance increase of \$17.02 from \$854.00 per month to \$868.02 per month and the FY09 3% wage increase applicable to this component.
: \$1.8

FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit

SalAdj	184.5	184.5		0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	84.9											
1007 I/A Rcpts	16.6											
1037 GF/MH	63.6											
1156 Rcpt Svcs	19.4											

The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component.
: \$184.5

Subtotal	52,962.2	40,040.1		18.2	7,358.6	4,841.6	600.0	103.7	0.0	550	49	39
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***** Changes From FY2009 Governor To FY2009 Governor Amended *****

Increase Medicaid Waiver Receipts

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1007 I/A Rcpts	Inc	1,500.0	784.3	0.0	715.7	0.0	0.0	0.0	0.0	12	0	0

The Division of Alaska Pioneer Homes projects an additional \$1.5 million in Medicaid Waiver receipts for FY 2009. These receipts come to the division as inter-agency receipts from the Division of Senior and Disabilities Services.

The division requests additional authorization for these receipts, the following positions, and the general fund match to ensure the division is obtaining the maximum federal receipts available. When Pioneer Home residents became eligible for Medicaid and the Older Alaskans Medicaid Waiver, the division did not request new positions to work directly with residents, families or their responsible parties on their eligibility and continued eligibility. Receiving and managing this funding has come with a significant increase in documentation, correspondence and follow-up that takes numerous man hours. In order for the Homes to continue to receive and increase these revenues, meet the increased documentation requirements, and assist residents in meeting the legislative intent that requires them to apply for all appropriate benefit programs prior to the state's payment assistance program, the Homes request that the funding be used, in part, for the following positions:

- Anchorage Pioneer Home: 1 Social Service Associate II, 2 Medical Record Clerks and 1 Certified Nurse Aide
- Fairbanks Pioneer Home: 1 Social Services Specialist II
- Juneau Pioneer Home: 1 Nurse I and 1 Administrative Assistant III
- Ketchikan Pioneer Home: 1 Nurse III and 2 Certified Nurse Aides
- Palmer Pioneer Home: 1 Licensed Practical Nurse
- Sitka Pioneer Home: 1 Social Services Specialist II

These positions will:

- Handle correspondence, transcription and paperwork for Medicaid residents
- Assist families and residents in the Medicaid application and re-qualification process
- Work as liaison between resident, power of attorney, eligibility technicians, physicians and care coordinators to manage the flow of information required for eligibility, authorization and service delivery
- Coordinate with health care providers for assessing services for Medicaid Waiver residents
- Assist families, residents and incoming seniors with a financial and resource assessment to determine Medicaid eligibility
- Track changes in resident care and reassess eligibility for Medicaid, the Medicaid Waiver, Medicare Part D, long term insurance coverage, and other insurance benefits to help them and the state cover the cost of care
- Provide the appropriate clinical and coding information required for Medicaid eligibility determination
- Coordinate with vendors to supply medical equipment and supplies to Medicaid residents rather than relying on state funded equipment and supplies
- Track resident days and prepare necessary Medicaid Waiver census reports
- Work with the resident's care coordinators to ensure assessment deadlines are met for continued eligibility
- Nursing and administrative positions will work together to assess residents' level of care and complete the electronic comprehensive assessment required for each Medicaid resident

As stated above, Medicaid Waiver receipts come to the division as inter-agency receipts from the Division of Senior and Disabilities Services (DSDS). The inter-agency receipts are a funding source for the Pioneer Homes and include both the federal and state general fund match. The general fund match is a contractual expense paid by the Pioneer Homes to DSDS. The FY 2009 general fund match is 42.42% and 49.47% for the 1st and last 3 quarters, respectively resulting in a 47.71% average. The additional inter-agency receipts result in an increased contractual expense of \$715.7.

FY09 Bargaining Unit Contract Terms: Supervisory Unit												
SalAdj	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP	
	172.7	172.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	

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										PFT	PPT	NP
1004 Gen Fund		79.1										
1007 I/A Rcpts		15.9										
1037 GF/MH		58.7										
1156 Rcpt Svcs		19.0										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$172.7</p>												
Totals		54,634.9	40,997.1	18.2	8,074.3	4,841.6	600.0	103.7	0.0	562	49	39

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: AK Fetal Alcohol Syndrome Program (2598)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,296.0	0.0	0.0	979.9	0.0	0.0	1,316.1	0.0	0	0	0
1002 Fed Rcpts		1,003.2										
1004 Gen Fund		1,292.8										
	Subtotal	2,296.0	0.0	0.0	979.9	0.0	0.0	1,316.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680018 Transfer Excess Federal Authority to the Severely Emotionally Disturbed Youth Component												
	Trout	-200.0	0.0	0.0	-200.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-200.0										
	Subtotal	2,096.0	0.0	0.0	779.9	0.0	0.0	1,316.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Reduction of federal funds												
	Dec	-803.2	0.0	0.0	-779.9	0.0	0.0	-23.3	0.0	0	0	0
1002 Fed Rcpts		-803.2										
	Subtotal	1,292.8	0.0	0.0	0.0	0.0	0.0	1,292.8	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	1,292.8	0.0	0.0	0.0	0.0	0.0	1,292.8	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alcohol Safety Action Program (ASAP) (305)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,718.6	1,240.1	43.0	302.5	73.0	2.0	1,058.0	0.0	16	0	0
1002 Fed Rcpts		330.1										
1004 Gen Fund		290.8										
1007 I/A Rcpts		1,423.7										
1092 MHTAAR		120.0										
1156 Rcpt Svcs		368.6										
1180 Alcohol Fd		185.4										
Subtotal		2,718.6	1,240.1	43.0	302.5	73.0	2.0	1,058.0	0.0	16	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680018 Realign funding to meet staffing needs												
	LIT	0.0	100.0	0.0	0.0	0.0	0.0	-100.0	0.0	2	0	0
The grants line expends approximately \$720.1 each fiscal year. The grant line is authorized at \$1,058.0. This transfer from grants to personal services will allow the re-establishment of two positions that are funded with I/A receipts.												
06-#238 - This new PCN will allow the continuation of an Adult Probation Officer II position (filled under 06-2328) that was deleted during the FY08 budget process. This position provides substance abuse screening, case management and accountability for DWI and other alcohol/drug related misdemeanor cases in the Anchorage community, serving as a liaison between the justice and health care delivery systems throughout court-ordered education and/or treatment requirements. This position is critical to maintaining the caseload from the Anchorage therapeutic court program and is funded 100% by I/A from a Reimbursable Service Agreement with Alaska Court System.												
06-#245 - This new PCN will allow the continuation of an Administrative Clerk II position (filled under 06-0396) that was deleted during the FY08 budget process. In FY07, the Alaska Safety Action Program (ASAP) initiated a new data collection system that will allow increased efficiency in the overall processing of offender cases and greater data access for statistical analyses. This Administrative Clerk position is critical to the filing, copying and data entry tasks associated with this data collection project and it is not cost effective for the Adult Probation Officers to do these tasks. Funding for the data collection project, including funding for this position, is 100% I/A from a Reimbursable Service Agreement with DOT-PF using three-year federal Highway Safety money. FY08 is the second of three years that this funding is available to DOT-PF.												
Subtotal		2,718.6	1,340.1	43.0	302.5	73.0	2.0	958.0	0.0	18	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Underage Drinking Initiative Increment												
	Inc	823.4	68.5	5.5	4.4	5.0	0.0	740.0	0.0	1	0	0
1004 Gen Fund		823.4										

In 2007, the Surgeon General of the United States issued a Call to Action to Prevent and Reduce Underage Drinking. Underage drinking in Alaska has long been a concern of health professionals, criminal justice personnel, educators, treatment providers, and prevention specialists. In 2005, Alaska joined states across the nation in establishing an underage drinking coordinating committee (Alaska Interagency Coordinating Committee on the Prevention of Underage Drinking) and hosting town hall meetings to address the underage drinking dilemma. Following Town Hall meetings in Anchorage (two times), Juneau, Valdez,

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alcohol Safety Action Program (ASAP) (305)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Fairbanks, Galena, Yakutat, Nome, and Sitka, recommendations made it clear that Alaska needed to develop its own strategy to reduce and prevent underage drinking.

This increment is part of a comprehensive initiative to reduce and prevent underage drinking among Alaska's youth. It will allow a coordinated response by the Alaska Court system, Division of Juvenile Justice, Department of Motor Vehicles, local law enforcement and school districts to respond more effectively in addressing and reducing underage drinking in the state.

In February 2007, the committee met for several days to review plans developed by other states, to prioritize recommendations for Alaska's response, and to develop a state Plan to Reduce and Prevent Underage Drinking (currently in draft form). One of the top priorities identified by the committee is to expand assessment, treatment and prevention services to all youth, including those entering the court system for alcohol-related offenses.

The Alaska Alcohol Safety Action Program (ASAP) is based on a national approach to provide screening, early and brief intervention, and referrals to education or treatment, as determined appropriate. In addition, ASAP provides monitoring of the clients' progress, their completion of services and ongoing change in client behavior. ASAP includes programs for adults, as well as youth. Past and recent audits of the Alaska ASAP programs show continued improvement in re-arrest rates for subsequent alcohol related offenses among clients who participate in ASAP services. This increment will enhance and expand the Alaska Juvenile ASAP program - enhancing the existing eight programs to reach more youth and their families, and expanding services to five new communities where data indicates a critical need for ASAP services for youth.

The budget for this increment is \$823,400 and includes:

One Adult Probation Officer II - ASAP to help identify and track habitual minor consuming offenders who have been referred to the statewide education and treatment system. This position will work with Juvenile ASAP programs across Alaska to develop outcome measures, evaluation tools and improved programming to increase appropriate services to youth, to reduce re-offenses/recidivism, and to decrease underage drinking in Alaska.

Salary, travel, communications & supplies \$ 83,400

Increase funding to 8 existing juvenile ASAP programs (Anchorage- VOA, Fairbanks, Juneau, Kenai, Ketchikan, Kotzebue, Kodiak & Mat-Su)

Increased juvenile ASAP grant capacity \$ 240,000

Expand juvenile ASAP grants to 5 new communities (Bethel, Barrow, Dillingham, Nome & Seward) where there have been repeated requests and support for ASAP services to screen, assess, monitor and treat minor consuming offenders.

Expanded juvenile ASAP grant capacity \$ 500,000

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-1: Provide enhancements to prevention and early intervention services.

BH-A-1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Fund Source Change from Interagency Receipts to Capital Improvement Project

	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts	-950.0											
1061 CIP Rcpts	950.0											

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alcohol Safety Action Program (ASAP) (305)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Behavioral Health requests a change in fund source from Interagency (IA) receipts to Capital Improvement Program (CIP) receipts. An annual Reimbursible Services Agreement (RSA) is awarded to the Alcohol Safety Action Program from the Highway Safety Planning Agency (HSPA) in DOTPF. The federal funding to the HSPA is budgeted in CIP receipts. When HSPA RSAs the funds to H&SS it is required that the CIP funds be reflected, rather than IA. Also, a portion of the annual RSA agreement with the Court system is funded with federal funds that are reflected as CIP authority rather than operating budget, so should be reflected in the budget as CIP rather than IA.												
Performance Measures Affected: Dept-Core Services: Provide an integrated behavioral health system Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems. BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.												
Reverse FY2008 MH Trust Recommendation												
1092 MHTAAR	OTI	-120.0	-95.0	-10.0	-10.0	-5.0	0.0	0.0	0.0	0	0	0
Eliminates Trust funding for Therapeutic Case Management and Monitoring												
MH Trust: Dis Justice - ASAP Therapeutic Case Mgmt/Support, Monitor Treatment												
1092 MHTAAR	Inc	135.0	110.0	10.0	10.0	5.0	0.0	0.0	0.0	0	0	0
Grant 569.03 The MH Trust: Dis Justice - ASAP Therapeutic Case Mgmt/Support, Monitor Treatment project will continue funding an existing position within the Alcohol Safety Action Program (ASAP) located in Barrow. This position identifies available treatment, makes treatment recommendations to the court and monitors adherence to those court order recommendations. The Program Coordinator manages and supervises the position.												
This project is a critical component of the Disability Justice Focus Area plan. The program provides a therapeutic court alternative in rural/remote Alaska. Therapeutic courts address the underlying disorder that contributed to the individual's contact with the justice system, which can potentially decrease future costs associated with the criminal justice system, and care within correctional settings or psychiatric institutions.												
The MH Trust: Dis Justice - ASAP Therapeutic Case Mgmt/Support, Monitor Treatment project was funded in FY08 with \$120.0 MHTAAR and is being increased in FY09 to \$135.0 MHTAAR.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1007 I/A Rcpts	SalAdj	52.8	82.6	82.6	0.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		6.0										
1156 Rcpt Svcs		14.7										
1180 Alcohol Fd		9.1										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alcohol Safety Action Program (ASAP) (305)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
: \$82.6												
Subtotal		3,639.6	1,506.2	48.5	306.9	78.0	2.0	1,698.0	0.0	19	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	8.9	8.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1061 CIP Rcpts		0.9										
1156 Rcpt Svcs		8.0										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component												
: \$8.9												
Totals		3,648.5	1,515.1	48.5	306.9	78.0	2.0	1,698.0	0.0	19	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-4,217.5										
1003 G/F Match		4,217.5										
FY2008 Conference Committee												
	ConfCom	170,085.4	0.0	0.0	1,620.0	0.0	0.0	168,465.4	0.0	0	0	0
1002 Fed Rcpts		106,868.2										
1003 G/F Match		29,898.2										
1004 Gen Fund		262.9										
1037 GF/MH		30,656.1										
1108 Stat Desig		900.0										
1180 Alcohol Fd		1,500.0										
ADN 06-8-0004 Medical Asst Eligibility CH 48 SLA07 (SB27) CH 28 SLA07 (HB95) Sec2 P45 L14-16												
	FisNot	455.9	0.0	0.0	0.0	0.0	0.0	455.9	0.0	0	0	0
1002 Fed Rcpts		311.1										
1003 G/F Match		144.8										
Resets the upper income limit for Denali KidCare pregnant woman and uninsured children to 175% of prevailing federal poverty guideline.												
	Subtotal	170,541.3	0.0	0.0	1,620.0	0.0	0.0	168,921.3	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	170,541.3	0.0	0.0	1,620.0	0.0	0.0	168,921.3	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer out Medicaid Mental Health Prior Authorization Contract to Behavioral Health Administration												
	Trout	-1,620.0	0.0	0.0	-1,620.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-810.0										
1003 G/F Match		-810.0										

This request transfers the authorization for the Medicaid mental health utilization review and care coordination contract out of the Behavioral Health Medicaid Services component and into the Behavioral Health Administration component. This contract is an administrative cost, not a direct medical service, and should not be in the Medicaid services component. The contract will continue to be eligible for 50% federal reimbursement once it has been moved to the administrative component.

This contract is for federally required behavioral health utilization review and care coordination services. Federal utilization control regulations for mental hospitals (42 CFR 456.150-456.245) require that medical and other professional personnel must evaluate each applicant's or recipient's need for admission to behavioral health facilities.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Performance Measures Affected:												
Dept-Core Services--Manage health care coverage for Alaskans in need												
Dept-Core Services--Provide an integrated behavioral health system												
Dept-Core Services--Protect and promote the health of Alaskans												
Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems												
Dept-D-4--Provide quality management of health care coverage services providers and clients												
DBH-A-1-A1.1a--Improve and enhance the quality of life of children with serious emotional disturbance by implementing the Bring the Kids Home program												
DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system												
HCS-B--Provide affordable access to quality health care services to eligible Alaskans												
DPH-A--Healthy people in healthy communities												
DPH-A-A2--Reduce suffering, death and disability due to chronic disease												
DPH-A-A4--Assure access to early preventative services and quality health care												
FY09 Projected Medicaid Formula Growth												
	Inc	6,821.6	0.0	0.0	0.0	0.0	0.0	6,821.6	0.0	0	0	0
1002 Fed Rcpts		3,861.7										
1037 GF/MH		2,959.9										

This increment funds increases in Medicaid service costs due to increases in enrollment and utilization. For SFY09, Behavioral Health Medicaid costs are projected to grow 4% over the authorized amount of 170,541.3. This increment request is necessary to maintain the current level of behavioral health services in Medicaid. The Behavioral Health Medicaid Services component funds three types of services: inpatient psychiatric hospitals, residential psychiatric treatment centers, and outpatient behavioral health services.

In SFY07 Behavioral Health Medicaid provided services to about 12,600 beneficiaries at an average cost of \$914 per month. Cost containment efforts begun in SFY04 have successfully dampened the rate of growth in recent years. Behavioral Health Medicaid claims grew 9% from SFY04 to SFY05, but only 4% from SFY05 to SFY06. The growth rate from FY06 to FY07 was 5%. The projection for FY09 is to use the projected growth rate between the FY08 projected and the FY09 Baseline from the short term forecasting model, STAMP.

Although growth has been relatively slow for the past 5 years, rate rebasing, increases in utilization, Certificate of Need (CON) projects, changes in residential psychiatric treatment center (RPTC) provider rates, and revision of income criteria for children and pregnant women (Senate Bill 27, 2008) have all contributed to the approximately 15% increase expected in FY08 over FY07. Growth is expected to slow in FY09 following these changes.

The fund source projection is based on the actual amount of federal revenue collected in FY07, approximately 68%, and assumes that the proportion of expenditures eligible for each type of federal reimbursement remains the same. It also assumes that the FY09 average federal medical assistance percentage remains at 53.76% for regular Medicaid and 67.63% for enhanced Medicaid.

The additional funding supports the department's mission to manage health care for Alaskans in need. This increment will help the department improve the following performance measures:

- Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A1.1a--Improve and enhance the quality of life of children with serious emotional disturbance by implementing the Bring the Kids Home program
- DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
comprehensive, integrated BH service system												
HCS-A-A2--Expand fund recovery efforts												
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
DPH-A---Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
FY09 Medicaid SCHIP Allotment Shortfall												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-900.0										
1037 GF/MH		900.0										

**CONTINGENT UPON CONGRESSIONAL ACTION TO REAUTHORIZE SCHIP PROGRAM. CURRENT LEGISLATION BEFORE CONGRESS COULD FULLY FUND THE CURRENT PROGRAM AND NEGATE THE NEED FOR THIS INCREMENT.

This request replaces lost federal revenues resulting from a decrease in the amount of federal funds available for the State Children's Health Insurance Program (SCHIP), a part of Alaska's Medicaid program operated through Denali KidCare. This increment is necessary to maintain the current level of health care provided to these children and supports the department's mission to manage health care for Alaskans in need.

SCHIP helps reach uninsured children whose families earn too much to qualify for regular Medicaid but not enough to afford private coverage. Each month, SCHIP provides health coverage for about 9,000 uninsured children under age 19. Without this funding, low-income children now enrolled in Denali KidCare could lose their SCHIP health coverage and become uninsured.

The federal and state governments jointly fund SCHIP. The amount of federal funding depends on the federal SCHIP allotment, which has not grown to keep pace with SCHIP expenditures. The federal medical assistance percentage, or FMAP, determines the amount of state matching funds. The state receives a higher, enhanced FMAP for SCHIP than for regular Medicaid; however, this enhanced reimbursement is capped at the SCHIP allotment. If costs exceed available SCHIP funds, claims are reimbursed at the lower, regular FMAP, resulting in reduced federal revenues. Alaska will have only 49% of the federal SCHIP funding needed to cover program expenditures in 2009, exhausting its SCHIP funds in the second quarter. When it reverts to regular Medicaid, the difference in federal reimbursement rates means that Behavioral Health Medicaid Services component will need an additional \$900.0 GF in 2009.

Alaska's annual allotment has fluctuated between \$7 and \$11 million. Since Alaska's annual allotment represents only about 30% of our costs, we have relied heavily on unspent funds from other states which were redistributed to Alaska to maintain access to the enhanced FMAP. As more and more states have increased their SCHIP programs, there is less and less redistributed funding available, and we do not anticipate any further redistributions.

FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid

	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-4,560.6										
1037 GF/MH		4,560.6										

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual rate the federal government reimburses the state for Medicaid benefits that will take effect on October 1, 2008.

The federal and state governments jointly fund Medicaid. The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. One in five Alaskans is enrolled in Medicaid at some time each year. Without the increment the state would be forced to

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

reduce eligibility or services currently provided to low income children, pregnant women, persons with disabilities, and the elderly. By approving this change record, the department will be able to continue to meet its mission of managing health care for Alaskans in need.

The amount of federal funds the state receives for its Medicaid program depends on a complex array of reimbursement rates, some of which change each October 1 with the start of a new federal fiscal year. The bulk of the federal funding for Medicaid benefits comes from claims reimbursed at the federal medical assistance percentage or FMAP. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%. Also affected are the State Children's Health Insurance Program (SCHIP) and the Breast and Cervical Cancer program (BCC) which are part of Alaska's Medicaid program. Eligible claims for SCHIP and BCC are reimbursed at an enhanced FMAP rate that reduces the state share of costs by 30% over the regular FMAP.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%. The regular FMAP for SFY09 will average 51.02% across two federal fiscal years (52.48% from July-Sept. 2008 and 50.53% from Oct. 2008-June 2009). The enhanced FMAP for SFY09 will average 65.71% (66.74% from July-Sept. 2008 and 65.37% from Oct. 2008-June 2009).

Approximately 91% of the Behavioral Health Medicaid Services component's claims are reimbursed at the regular FMAP and another 4% at the enhanced FMAP (the remaining 5% is IHS and is not affected by the change in FMAP). Based on current estimated expenditures for Medicaid, the FFY09 change in FMAP will require an estimated \$4,560.6 increase in GF to replace the lost federal funds and maintain services at the current level.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

Subtotal	175,742.9	0.0	0.0	0.0	0.0	0.0	0.0	175,742.9	0.0	0	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

AMD: Increase Outpatient Behavioral Health Provider Rates - 8%

Inc	6,837.8	0.0	0.0	0.0	0.0	0.0	6,837.8	0.0	0	0	0
1002 Fed Rcpts	3,488.6										
1037 GF/MH	3,349.2										

With this increment, adjustments to the mental health reimbursement schedule will be implemented to bring rates for behavioral health professionals up to the level of most other medical professionals and to reimburse services provided by substance abuse clinics and mental health clinics at comparable rates. This should help prevent loss of provider participation, which would seriously threaten the department's goal to provide an integrated behavioral health system.

The current rates for substance abuse services have been in effect since 1994. Except for psychiatric assessments and family psychotherapy, rates for mental health clinic services have been in effect since 1992. (In 2000, the rate for psychiatric assessments increased from \$105 to \$230 and family therapy increased from \$37.50 to \$40.00.) The current rates for mental health rehab services have been in effect since 2000 to correspond with service revisions that were effective at that time.

In SFY07, Medicaid reimbursed outpatient behavioral health agencies for services provided to 12,139 persons. Community mental health clinics comprise 95% of total Medicaid outpatient behavioral health with substance abuse clinics making up the remaining 5%.

Behavioral health professionals are reimbursed for many procedures at lower rates than other medical professionals providing similar services. For example, physicians are paid \$94.59 for individual psychotherapy but mental health clinics are paid only \$40.00 for the same service. For psychological testing, physicians are paid \$139.58 while mental health clinics are paid only \$85.00. For neuropsychological testing, physicians are paid \$190.16 while

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

mental health clinics are paid \$85.00.

Within the mental health provider community, mental health clinics are sometimes reimbursed at different rates than substance abuse clinics for similar services. For example, mental health clinics are paid \$12.50 for case management services while substance abuse clinics are paid only \$7.50 for similar services. Mental health clinics are paid \$7.50 for group skills development while substance abuse clinics are paid \$5.00 for group counseling.

The Division of Behavioral Health (DBH) has completed a formal rate study and estimates that rate increases to address such fee-for-services inequities could increase total outpatient behavioral health services costs by 8% in SFY09.

An 8% increase to outpatient behavioral health fee for service rates will add \$6,837.8.

Federal % = 51.02% SFY09 avg FMAP

This increment will help the department improve the following performance measures:

- Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A1.1a-Improve and enhance the quality of life of children with serious emotional disturbance by implementing the Bring the Kids Home program
- DBH-A-1-A2.1b-Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- HCS-B--T1-Increase the number of providers
- DPH-A---Healthy people in healthy communities
- DPH-A--A2-Reduce suffering, death and disability due to chronic disease
- DPH-A--A4-Assure access to early preventative services and quality health care

AMD: Medicaid Facility Rates Rebased - Inpatient Psychiatric Hospital (API) - 6.5%

	Inc	288.1	0.0	0.0	0.0	0.0	0.0	288.1	0.0	0	0	0
1002 Fed Rcpts		147.0										
1037 GF/MH		141.1										

This increment is necessary to maintain Alaska inpatient psychiatric hospital services at their current level and to prevent loss of provider participation.

By regulation, payment rates for most in-state facilities must be re-based at least every four years. In other years the facility gets a rate adjustment for inflation. The last rebasing year was FY04.

This is the second year of a two year process to phase in these required rate increases. Only the rate increase for the Alaska Psychiatric Institute will require an increment to the FY09 budget. North Star's rate was re-based last year.

There are two in-state inpatient psychiatric hospital facilities, Alaska Psychiatric Institute and North Star. Medicaid paid for inpatient psychiatric hospital services for 788 persons in FY07. Based on claims paid during FY07, about 79% of Medicaid inpatient psychiatric clients were children and 21% were disabled.

The rebased rates for Alaska Psychiatric Institute (API) are cost-based from a review of API's FY07 operating expenses and Medicaid billing activity. Its new

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

rate will become effective at the start of its 2009 fiscal cycle. The Department estimates that the rate adjustment will be about 6.5% above medical inflation.

The additional cost to Medicaid inpatient psychiatric hospital rate increases (API) in FY09 is estimated to be \$288.1.

Federal % = 51.02% SFY09 avg FMAP.

This increment will help the department improve the following performance measures:

- Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b-Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- HCS-B--T1-Increase the number of providers
- DPH-A---Healthy people in healthy communities
- DPH-A--A2-Reduce suffering, death and disability due to chronic disease

AMD: Reduce Authorization to Reflect Current Medicaid Projections

Dec	-10,000.0	0.0	0.0	0.0	0.0	0.0	0.0	-10,000.0	0.0	0	0	0
1002 Fed Rcpts	-5,000.0											
1003 G/F Match	-5,000.0											

The Medicaid budget is based on projections of the number of Alaskans who will access Medicaid funded services, the quantity of services used and the anticipated changes in the costs of those services. Medicaid services are funded through both state general funds and federal matching funds. There must be sufficient state general funds available in order to maximize utilization of federal funds. Through the FY09 budget process, the House Finance Subcommittee requested that the department rebase Medicaid by reducing the budget by \$30 million, \$15 million in state general funds and \$15 million in federal Medicaid match. The \$30 million cut represents three percent of the total Medicaid budget of \$1 billion, and reduces by half the total requested increase for FY09.

One in five Alaskans is enrolled in Medicaid in any given year. In an average week, 25,500 Alaskans receive some level of medical care that costs between \$17-25 million in Medicaid benefit payments made to an average of 2,100 health care providers. The proposed increase for Medicaid funding in the FY09 budget is less than 6% compared to past years' inflationary increases of nearly 16% or more annually. Considered in our projections for this very modest increase is the fact that \$28,487.7 is required to offset lost federal funding due to the regular FMAP dropping from 52.48% to 50.53% for 2009.

Good business practice requires adequate funding to ensure that timely payments can be made to service providers. The Legislature has also requested that departments minimize supplemental budget requests through careful budget projections. There is significant potential liability associated with the \$30 million reduction to the FY09 budget requested by the House Finance Subcommittee in that the department may be forced to present a supplemental funding request to the Legislature next session if the projected amount of Medicaid services required or the costs of those services increases more than 3%.

The \$30,000.0 reduction will be split between two components:

- Behavioral Health Medicaid Services component -\$10,000.0 total (\$5,000.0 federal/\$5,000.0 GFM), and
- Health Care Medicaid Services component -\$20,000.0 (\$10,000.0 federal/\$10,000.0 GFM).

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Medicaid Services (2660)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	172,868.8	0.0	0.0	0.0	0.0	0.0	172,868.8	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	22,027.1	0.0	0.0	3,275.0	0.0	0.0	19,552.1	-800.0	0	0	0
1002 Fed Rcpts		3,107.6										
1004 Gen Fund		2,203.2										
1007 I/A Rcpts		297.4										
1037 GF/MH		500.0										
1092 MHTAAR		910.0										
1180 Alcohol Fd		15,008.9										
ADN 06-8-0005 Spread GF/MH Unallocated Legislative Reduction												
	LIT	0.0	0.0	0.0	0.0	0.0	0.0	-1,000.0	1,000.0	0	0	0
Spread GF unallocated reduction.												
ADN 06-8-0005 Spread Unallocated MHTAAR Legislative Add-Ons												
	LIT	0.0	0.0	0.0	0.0	0.0	0.0	200.0	-200.0	0	0	0
Spread legislative unallocated add-ons:												
Detox/Treatment Capacity												
Assisted Living Home Training												
Develop Sleep Alternatives												
	Subtotal	22,027.1	0.0	0.0	3,275.0	0.0	0.0	18,752.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Transfer GF to Community Action Prev & Interv Grants												
	Trout	-158.3	0.0	0.0	0.0	0.0	0.0	-158.3	0.0	0	0	0
1004 Gen Fund		-158.3										
The GF increment for FY08 contained \$158.3 of CAPI prevention funding. This transfer will allow the prevention grants to be funded from the correct component.												
	Subtotal	21,868.8	0.0	0.0	3,275.0	0.0	0.0	18,593.8	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	3,448.2	0.0	0.0	0.0	0.0	0.0	3,448.2	0.0	0	0	0
1037 GF/MH		3,448.2										
This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments, and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general fund (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Performance Measures Affected:

- Dept-Core Services--Manage health care coverage for Alaskans in need
- Dept-Core Services--Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of Proshare Financing

Trin	820.9	0.0	0.0	0.0	0.0	0.0	820.9	0.0	0	0	0
1004 Gen Fund	820.9										

In SFY 08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Behavioral Health Grants provide grant funding to local non-profit agencies to support mental health and substance abuse treatment services in order to provide statewide mental health and substance abuse treatment services. This transfer of \$820.9 is necessary to give the division the funding needed to continue these services.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Senior Outreach, Assessment, and Referral Project (SOAR)												
	Inc	300.0	0.0	0.0	0.0	0.0	0.0	300.0	0.0	0	0	0
1037 GF/MH		300.0										

Senior service providers report a growing number of clients experiencing serious behavioral health needs. Aggressive behavior and substance abuse are becoming more widespread and problematic in settings such as senior centers and independent-living senior housing. Depression, isolation, and grief issues are common among older Alaskans. Suicide among Alaska seniors is more prevalent than for seniors living outside. While reasons for higher rates of suicide among Alaska seniors are not known, we do know that it is difficult for seniors to access basic mental health care, such as treatment for depression, in many Alaskan communities. A lack of appropriate behavioral health services for seniors, fear of social stigma, insufficient prevention and intervention programs, and shortage of trained geriatric providers are some of the barriers to delivering services appropriate for seniors. We are requesting funding for this project to provide a statewide structure for developing senior-friendly forms of outreach and assessment, and where necessary, will invest in the development of appropriate local treatment options. Our advocacy partners include the Alaska Mental Health Board/Alaska Board on Alcohol and Drug Abuse.

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.

BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Community Prevention and Early Intervention for Behavioral Health Programs

	Inc	1,000.0	0.0	0.0	0.0	0.0	0.0	1,000.0	0.0	0	0	0
1037 GF/MH		1,000.0										

Brief Summary: We need to prevent behavioral health problems. This will in turn decrease secondary problems in our communities such as criminal behaviors, suicidal thoughts and actions, traumatic brain injuries and fetal alcohol disorders. This increment will be used to expand the community-based programs that offer prevention and early intervention evidence-based services and the administrative support services for these programs within the division.

Population in Need: This affects all Alaskans. All Trust beneficiaries (70,000) would benefit from these services. Number Currently Served: 64,850 duplicated contacts in FY06

Number to Be Served With This Increment: 5,000 additional Alaskans

FY09 GF/MH Increment Amount: \$1,000,000

Anticipated Measurable Outcomes:

- Changed public attitudes measured by community surveys
- Fewer domestic violence cases
- Increase in beneficiaries' involvement in health activities
- Decrease in gun related incidents where substance use is involved
- Decreased substance abuse as reflected in CIMHP data
- Decreased harmful effects of alcohol as measured by fewer babies born with FAS/FASD
- Decrease in sales to minors and minor consuming

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

-- Increased GED/high school completion rates

Performance Measures Affected:
 Dept-Core Services: Provide an integrated behavioral health system
 Dept-B-1: Provide enhancements to prevention and early intervention services.

Services for Substance Use Disorders Comprehensive System of Care

Inc	1,750.0	0.0	0.0	0.0	0.0	0.0	1,750.0	0.0	0	0	0
1037 GF/MH	1,750.0										

Brief Summary: Beneficiaries in large urban communities currently must wait one to three months to receive treatment if they do not present a danger to themselves or others. Available detoxification services are at maximum capacity and failure to meet the need leads to more costly hospital admissions, inappropriate incarceration, public inebriation, and placement into the correctional system. In addition, there is a failure to appropriately serve dual disordered clients, such as those with traumatic brain injury and a substance use disorder. This increment will fund grants to create an enhanced continuum of care, from the least restrictive - Case Managed Detoxification - to the most intensive - Residential Treatment Services, for Alaskans seeking substance abuse treatment and administrative support for these services within the Division of Behavioral Health.

Population in Need: 37,000 Alaskans need, but have not received treatment for alcohol abuse (Alaskan data from National Survey of Drug Use and Health, 2004-5)
 Number Currently Served: 6,300 Alaskans
 Number to Be Served With This Increment: 500 Alaskans with chronic alcoholism or at risk of becoming chronic alcoholics

Anticipated Measurable Outcomes:
 -- Increase availability of safe alcohol and drug detoxification
 -- AKAIMS will measure individual outcomes:
 Increased employment
 Improvement in housing
 Improvement in assessed quality of life
 Reduced severity of disorder
 Improvement in social functioning
 -- Community outcomes will include reduction in demands on the emergency medical system, correctional systems, and family and social networks

Performance Measures Affected:
 Dept-Core Services: Provide an integrated behavioral health system
 Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.
 BH-A1, A3: Strategy #1C: Improve and enhance the quality of life for Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Treatment and Wrap Around Services for Clients with Severe Mental Illness and Co-occurring Disorders

Inc	1,750.0	0.0	0.0	0.0	0.0	0.0	1,750.0	0.0	0	0	0
1037 GF/MH	1,750.0										

Brief Summary: This project provides case management and wraparound services for individuals experiencing long-term chronic behavioral illnesses who have been unsuccessful in the current system. It will target people with severe mental illness and dual diagnoses, such as chronic mentally ill substance

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

abusers, seriously mentally ill people discharged from Department of Corrections with multiple problems, and clients with low cognitive functioning or traumatic brain injury who also have a second diagnosis. Assuring that a person is safely housed; fed; involved in gainful activity through connection with their family, friends and community; and receiving appropriate medical and behavioral treatment will prepare them for increasing independence.

Population in Need: 27,000 Adults with severe mental illness.
 Number Currently Served: 7200 adults with severe mental illness
 Number to Be Served With This Increment: 500 Alaskans with co-occurring disorders or severe mental illness.

Anticipated Measurable Outcomes:

- Reduced readmissions to API and other crisis treatment facilities
- Reduced involvement with the correctional system
- Reduced number of severely disabled homeless beneficiaries
- Increased ability of beneficiaries to live at the level of least restriction
- Long term supports for beneficiaries who relapse without ongoing support

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system
 Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.
 BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Reverse FY2008 MH Trust Recommendation

1092 MHTAAR	OTI	-910.0	0.0	0.0	0.0	0.0	0.0	-910.0	0.0	0	0	0
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This removes the FY08 MHTAAR funding in order to start FY09 Trust projects at zero based budgeting. The FY08 MHTAAR projects are:

- Expanded Treatment for Therapeutic Court -150.0
- Develop/Expand Detox Alternatives -\$480.0
- Assisted Living Home Training & Capacity -\$100.0
- Transition to Full Time Work Project -\$85.0
- Develop Sleep Off Alternatives -\$25.0
- Convene a Biennial Summit -\$70.0

MH Trust: AB-Gov Cncl - Brain Injury training for providers

1037 GF/MH	Inc	100.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0
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MH Trust: AB-Gov Cncl - Brain Injury training for providers

The traumatic brain injury (TBI) training program includes three separate components: 1) Contracted brain injury specialists utilizing Alaska Psychiatric Institute's telebehavioral health project and other communication options for case consultation; 2) Regional workshops specific to needs of the area utilizing multidisciplinary hub and spoke model highlighting the needs across several life domains, and 3) Developing training format and material to include self study modules utilized in other states. (Minnesota example www.mitbitraining.org; DVD training for specific provider groups Alabama, Rhode Island example, and Virtual Program Centers utilizing telehealth, Idaho example). The project is a designated grant request to the Alaska Brain Injury Advisory Board.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The Comprehensive Integrated Mental Health Plan for FY09 has identified a lack of early-intervention services. Once a brain injury has occurred, early intervention, appropriate treatment, and skilled professionals are factors in the expected course of recovery for mild, moderate, and severe brain injury. It is estimated that there are more than 10,000 Alaskans living with a brain injury. In 2006, 800 Alaskans were hospitalized with a moderate to severe brain injury. There is little data showing the prevalence of mild TBI. In general, most mild TBI individuals recover completely within several months; nonetheless, a subset of patients do not return to their pre-injury level of functioning and are highly symptomatic. Nearly 15% of patients with mild brain injury continue to complain of symptoms one year after injury. Research indicates these patients will likely not get better. These survivors are being found in Trust beneficiary provider agencies, Division of Behavioral Health and Senior/Disabilities Services programs, Department of Corrections, the School Systems, Division of Vocational Rehabilitation, and the Veterans Administration.

This increment will ensure that every provider serving Alaskans with a brain injury will have access to brain injury specialists for consultation, will have a road map on how to address the screening, assessment, referral, and treatment planning, and will feel confident in their service capabilities.

MH Trust: AB-AK MH/Aic & Drug - Transition to Full-Time Work Project

1092 MHTAAR	Inc	85.0	85.0	0.0	0.0	0.0	0.0	0.0	85.0	0.0	0	0	0
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MH Trust: AB-AK MH/Aic & Drug - Transition to Full-Time Work Project

This project provides grant funding to provider(s) to enhance work skills of those experiencing behavioral health problems. Temporary employment can give skill sets which are needed in a variety of industries. It gives clients a chance to develop work skills and habits which may then lead to more permanent employment. However, many of our beneficiaries need initial support and mentoring to stay on the job. This includes help managing activities of daily living and other employment logistics such as child care and housing. It also includes support for developing work attitudes and competencies. With help getting through the first steps of employment, the probability of eventual independence is greatly increased. A successful example of this is Gastineau Human Services partnership with Alaska Employment Group. Funded project(s) would be expected to show client outcomes via the existing DHSS/Behavioral Health data efforts in showing life domain improvements and consumer satisfaction with services. This is continuation funding of FY08 at \$85.0 MHTAAR.

MH Trust: Dis Justice - Expand Treatment Capacity for Therapeutic Court Participants with Co-occurring Disorders

1092 MHTAAR	Inc	150.0	150.0	0.0	0.0	0.0	0.0	0.0	150.0	0.0	0	0	0
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This request will fund the MH Trust: Disability Justice - Expand Treatment Capacity for Therapeutic Court Participants with Co-occurring Disorders. This will continue providing essential co-occurring assessment and treatment services for participants in the Palmer Mental Health Court. This project will be managed by the Division of Behavioral Health Grant component staff with funds disseminated to a behavioral health provider.

This project maintains access to a critical component of the Disability Justice Focus Area plan. It provides access for Palmer Mental Health Court participants to community co-occurring treatment services so an individual can address the underlying mental health and substance abuse issues that contributed to their contact with the criminal justice system. This increases public safety and decreases the potential for future high costs incurred by contacts with the criminal justice system and care within correctional settings or psychiatric institutions. The Behavioral Health Grants staff, in collaboration with the behavioral health grantee and the court system, will collect outcome data on participants accessing this treatment.

The MH Trust: Dis Justice - Expand Treatment Capacity for Therapeutic Court Participants with Co-occurring Disorders project was funded in FY08 with \$150.0 MHTAAR and is maintained at that level in FY09 with \$150.0 MHTAAR.

MH Trust: Dis Justice - Assess Sleep-Off Alternatives

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
1092 MHTAAR	Inc	50.0	0.0	0.0	0.0	0.0	0.0	50.0	0.0	0	0	0
<p>Grant 1380.01 This request will fund MH Trust: Disability Justice - Assess Sleep-Off Alternatives project, which will continue to support Behavioral Health (BH) staff and targeted communities in the pre-development and planning process for a community system of service alternatives to incarcerating persons under Title 47 substance abuse protective custody holds. This project will be managed by Behavioral Health Grants staff with funds disseminated to behavioral health providers through grant agreements.</p> <p>This project maintains a critical component of the Disability Justice Focus Area Plan by developing community service alternatives to avoid the high costs incurred by the use of state correctional institutions for Title 47 substance abuse protective custody holds.</p> <p>The MH Trust: Dis Justice - Assess Sleep-Off Alternatives project was funded in FY08 with \$25.0 MHTAAR and increased in FY09 to \$50.0 MHTAAR.</p>												
MH Trust: Housing - Oxford House Adaptation												
1037 GF/MH	Inc	75.0	0.0	0.0	0.0	0.0	0.0	75.0	0.0	0	0	0
<p>Nationally, recovery homes offer a self-help program for alcoholics and drug users that provides low cost, high quality group home living in a supportive environment free of drugs and alcohol. Residents must be employed, pay their share of expenses, complete their chores, and stay free of drugs and alcohol. The Oxford House is one example of such a self-help recovery program and offers a template for replication of the program in Alaska. This is the fifth year of Trust support for the sobriety homes in Alaska and many lessons have been learned over the years. The primary lesson is that this project requires state support and commitment to safely administer the housing program. Oversight of this project is key to success; however, once it is in place, the per person costs are very low and the model will eventually be self-sustaining. The long-term development plan includes a 20 home project which will generate up to \$300 net income per household per month. There are currently Oxford Homes in Fairbanks, Bethel, Wasilla, Anchorage, and Soldotna. The homes have maintained a 70% success rate over the first five years in Alaska. This project has been funded for three years at \$125.0 annually by the Trust and this request represents a match of GF/MH in the amount of \$75.0.</p>												
MH Trust: Housing - Operations Support for Sober Housing for Recovery												
1037 GF/MH	Inc	300.0	0.0	0.0	0.0	0.0	0.0	300.0	0.0	0	0	0
<p>This request is to support several years of capital resources to develop viable options for long term supported housing to maintain sobriety. On-site and case management support are vital to maintenance of sobriety for Trust beneficiaries. The department's Facilities section staff has managed housing resources for the past five years to develop housing; however, without operations resources that may cover the 'rent-up' period while residents are becoming employed and ongoing case management support services, these projects are unable to 'pencil.' This request will match capital resources available with operations support to maintain safe, stable sober housing for Trust beneficiaries.</p>												
MH Trust: Dis Justice - Detox and Treatment Capacity												
1092 MHTAAR	Inc	480.0	0.0	0.0	0.0	0.0	0.0	480.0	0.0	0	0	0

This request will fund the Justice for Trust Beneficiaries (JFTB) - Detox and Treatment Capacity project, which will continue development of community detoxification capacity and treatment alternatives to avoid the high costs incurred by the use of state correctional institutions for Title 47 substance abuse

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Grants (2669)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
protective custody holds.												
This project will be managed by Behavioral Health Grants staff. The funds will be disseminated through grants, contracts or a combination of the two to behavioral health providers. This project maintains a critical component of the Disability Justice Focus Area plan by developing alternative community detoxification and treatment services to avoid the higher costs incurred in the correctional or hospital emergency room setting. Behavioral Health Grants staff will collect outcome data on how the funding is utilized to save correctional and hospital costs.												
The Justice for Trust Beneficiaries (JFTB) - Detox and Treatment Capacity project was funded in FY08 with \$480.0 MHTAAR and is maintained at that level in FY09 with \$480.0 MHTAAR.												
MH Trust: Housing - Assisted Living Home Training and Targeted Capacity for Development												
	Inc	100.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0
1092 MHTAAR		100.0										
Grant 1377.01												
The Assisted Living home training and targeted capacity development project is a continuation of an FY08 Trust project to improve the quality of training available to assisted living home providers. The department's Behavioral Health General Relief Adult Residential Care (ARC) program funds assisted living costs for approximately 142 indigent individuals with severe mental health disabilities statewide. In addition, AMHTA funds assisted living care for approximately 10-12 high needs individuals exiting correctional facilities. Both of these programs are intended to prevent homelessness and to improve daily functioning for very impaired beneficiaries. This project will support these goals by providing training to assisted living home caregivers with the goal of increasing the capacity of these providers to house individuals with intensive behavioral health needs. The project will be administered by the Division of Behavioral Health through a grantee to provide the prescribed training program.												
	Subtotal	31,367.9	0.0	0.0	3,275.0	0.0	0.0	28,092.9	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	31,367.9	0.0	0.0	3,275.0	0.0	0.0	28,092.9	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	7,777.0	4,891.6	433.9	2,077.1	144.4	64.9	135.0	30.1	56	2	21
1002 Fed Rcpts		4,145.4										
1003 G/F Match		116.1										
1004 Gen Fund		164.2										
1007 I/A Rcpts		89.6										
1013 Alchl/Drug		2.0										
1037 GF/MH		1,901.5										
1092 MHTAAR		360.0										
1156 Rcpt Svcs		135.0										
1168 Tob Ed/Ces		651.6										
1180 Alcohol Fd		211.6										
ADN 06-8-0004 Sale of Tobacco to Minors CH 61 SLA07 (SB84) CH 28 SLA07 (HB95) Sec2 P45 L23-25												
	FisNot	38.6	0.0	0.0	38.6	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		38.6										
To ensure due process of persons holding a tobacco endorsement on their business license when their employees are selling tobacco to persons under the age of 19.												
ADN 06-8-0005 Spread Unallocated MHTAAR Legislative Add-on												
	LIT	0.0	30.1	0.0	0.0	0.0	0.0	0.0	-30.1	0	0	0
Spread unallocated MHTAAR legislative Add-on for ongoing policy planning. The Legislature added positions; however funding is not adequate to fund three PCNs.												
ETS Chargeback Transfer from Department of Administration												
	Atrin	27.7	0.0	0.0	27.7	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		27.7										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	7,843.3	4,921.7	433.9	2,143.4	144.4	64.9	135.0	0.0	56	2	21
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	7,843.3	4,921.7	433.9	2,143.4	144.4	64.9	135.0	0.0	56	2	21

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Suicide Prevention Statewide Initiative												
	Inc	1,000.0	80.0	0.0	370.0	50.0	0.0	500.0	0.0	1	0	0
1037 GF/MH		1,000.0										

Behavioral Health, in partnership with the Statewide Suicide Prevention Council, is proposing a Suicide Prevention Initiative to begin in state fiscal year 2009. Alaska's vision is that all children, youth and adults are mentally healthy, connected, resilient and living successfully. Alaska continues to have the highest rate of suicide in the nation-the suicide rate for Alaska is 23.4 per 100,000 populations, more than double the U.S. rate of 11 per 100,000. The proposed initiative will develop a cross-disciplinary, community-driven and research-based approach to reducing the number of suicides in Alaska.

To begin making progress toward this vision of a healthy Alaska, the short-term goals of the initiative are:

- reduce the number of attempted and completed suicides in Alaska;
- increase understanding that suicide is preventable;
- remove the stigma associated with depression, mental illness, substance use disorder and suicidal tendencies;
- promote community-based action to develop prevention and early intervention strategies;
- increase the availability and accessibility of early mental health services;
- develop data-driven approaches to reduce Alaska's suicide statistics; and
- monitor and document outcomes, results and change in statistics.

The project will award grant dollars to community-based agencies to develop suicide prevention programs in their local community. Strategies will be evidence-based and/or will use research-based principles of suicide prevention (i.e. programs should be designed to enhance protective factors; programs should be long-term; programs should be family-focused, not just individual-focused; programs should be multi-strategy; etc.). Service areas priorities will be selected based on regional suicide statistics and an assessment of other available services. Alaska's statewide suicide statistics clearly indicate that suicide incidents are more prevalent in Northwest and Southwest Alaska. Data also indicate that young males (ages 15-35), especially Alaska Native young men, are at most risk for completed suicides. Young women, of all races, most often attempt suicide. Projects and services areas will be determined based on current Alaska suicide data.

The Project Coordinator will coordinate the development of a request for proposals to solicit community-based programs to reduce and prevent suicide. Grant programs will be incorporated into the Behavioral Health Comprehensive Prevention Grant program to look not only at suicide, but the other influences leading to suicidal ideation such as depression; mental illness; substance use and addiction; and family violence. The Project Coordinator will provide training and technical assistance to communities as they develop and implement funded programs; develop outcome measures and survey tools; work with treatment grantees and Regional Coordinators; and implement statewide efforts to prepare communities to become suicide prevention gatekeepers. The Project Coordinator will lead the initiative, working closely with diverse partners including Alaska Native Tribal Health corporations, Department of Education & Early Development, Department of Corrections, faith-based organizations and others.

We are proposing a 5-year initiative, \$1.0 million per year. Year 1 will be a planning year, to evaluate data, establish specific outcome measures, determine target populations and initiate grant solicitations. The Statewide Suicide Prevention Council will act as the advisory board, working with BH staff to focus and plan our strategy. Training and technical assistance in community assessment; readiness and planning; and evaluating program outcomes and accomplishments will be made available to all successful community grantees.

In addition to community grants, initiative activities will include:

- Development and implementation of a Knowledge, Attitudes, Beliefs and Behaviors (KABB) Survey;
- Expansion of the Suicide Prevention Council's media/public education campaign;
- Enhancement and expansion of the Alaska Careline;

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

-- Training for Primary Care physicians, health care providers, clergy, educators, public safety professionals and other community "gatekeepers"

This initiative will be a department effort coordinating with the Divisions of Public Health, Juvenile Justice, Senior and Disabilities Services, Office of Children's Services, Public Assistance and the advisory boards. In addition, the department will invite other state departments and organizations to be a partner in reducing suicide in Alaska. With a clear, well designed and evidence-based approach to suicide prevention, early intervention, and treatment Alaska can reduce the incidence of trauma, substance use, depression and hopelessness that often lead to the perception of suicide as the "only option." The Initiative will be statewide and broad in one sense; but targeted and focused in other ways. Universal strategies will include public education, de-stigmatizing of mental illness, community planning & readiness. Selected and indicated strategies will include school-based education programs, community gatekeeper prevention training, screening and brief interventions, better statewide coverage for the Alaska Careline, and improved access and capacity for mental health services for all Alaskans.

The financial request for the Suicide Prevention Initiative is \$1.0 million. These resources will primarily be allocated for community-based grant programs, with an emphasis on community planning, assessment and readiness. The Initiative will focus on communities with few or no resources and enhancement of programming in communities with some services.

Personal services - 1position: \$80,000 (Project Coordinator to work with communities)

Administration, materials, supplies: \$50,000

Contracts: \$370,000 (Training, TA and consultation for communities; Media, public education, Community Meetings, etc.)

Community-based grant programs: \$500,000 (Communities will be selected through a competitive solicitation process, focusing on regions and communities identified as high-risk for suicidal incidents)

TOTAL: \$1,000,000

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.

Dept-B-1: Provide enhancements to prevention and early intervention services.

BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Secured Detoxification and Treatment for Involuntary Substance Abuse Commitment

1037 GF/MH	Inc	1,989.7	256.9	0.0	26.2	6.6	0.0	1,700.0	0.0	3	0	0
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The expansion in services is a result of the establishment and creation of an enhanced secure detoxification and treatment center.

The Division of Behavioral Health will select and fund a non-profit or municipal agency with a regional and accessible support network to operate a secure 24-hour detoxification and treatment center for persons who are involuntarily committed under AS 47.37.190. The facility would employ clinical staff who have been trained in integrated and comprehensive screening and assessment practices, and provide intensive case management services for persons who have been incapacitated by alcohol or drugs, including persons who are diagnosed with co-occurring disorders. The pilot project would terminate no later than July 1, 2012 and include an evaluation report with outcome measures, including baseline data. Long term impacts include reduced emergency room

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

costs, lower acute care medical costs, decreased incarcerations, and reduced emergency responder costs.

The expansion in services creates the need for:

- 1.0 Probation Officer II, Range 16: provide training and triage with therapeutic courts to the successful applicant or grantee; provide urinalysis screening; and treatment referral;
- 1.0 Health Facility Surveyor II, Range 20: provide project oversight, training and technical assistance to the successful applicant or grantee, monitor for grant regulation and report compliance, monitor performance /outcome /evaluation measures of successful grantee;
- 1.0 Research Analyst III, Range 18: compile data on overall pilot project including performance measures, outcome indicators/measures, prepare evaluation report;
- Annual costs for office space, phones and supplies are calculated at a cost of \$8.8 per additional staff;
- One time cost for computers and software at \$2.2 for each additional staff; and
- \$1,700.0 additional grants issued through a competitive RFP.

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.

BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Transfer in Medicaid Mental Health Prior Authorization Contract from Behavioral Health Medicaid

Trin	1,620.0	0.0	0.0	1,620.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	810.0										
1003 G/F Match	810.0										

This request transfers the authorization for the Medicaid mental health utilization review and care coordination contract out of the Behavioral Health Medicaid Services component and into the Behavioral Health Administration component. This contract is an administrative cost, not a direct medical service, and should not be in the Medicaid services component. The contract will continue to be eligible for 50% federal reimbursement once it has been moved to the administrative component.

This contract is for federally required behavioral health utilization review and care coordination services. Federal utilization control regulations for mental hospitals (42 CFR 456.150-456.245) require that medical and other professional personnel must evaluate each applicant's or recipient's need for admission to behavioral health facilities.

Performance Measures Affected:

Dept-Core Services--Manage health care coverage for Alaskans in need

Dept-Core Services--Provide an integrated behavioral health system

Dept-Core Services--Protect and promote the health of Alaskans

Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems

Dept-D-4--Provide quality management of health care coverage services providers and clients

DBH-A-1-A1.1a--Improve and enhance the quality of life of children with serious emotional disturbance by implementing the Bring the Kids Home program

DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system

HCS-B--Provide affordable access to quality health care services to eligible Alaskans

DPH-A--Healthy people in healthy communities

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
DPH-A-A2--Reduce suffering, death and disability due to chronic disease												
DPH-A-A4--Assure access to early preventative services and quality health care												
Medicaid Mental Health Prior Authorization Contract Increase												
	Inc	400.0	0.0	0.0	400.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		200.0										
1037 GF/MH		200.0										

This increment covers cost increases anticipated for the contract for federally required behavioral health utilization review services that goes out for bid in SFY08. Utilization control requirements for mental hospitals (42 CFR 456.150-456.245) require that medical and other professional personnel must evaluate each applicant's or recipient's need for admission to behavioral health facilities.

The contract supports the division's goal to improve and enhance the quality of life of Alaskans with severe emotional disturbances, severe mental illness and/or a substance abuse disorder through the development of a comprehensive, integrated BH service system. Although the contract extension is expected to cost more, its funding will make sure that only those who truly need institutional care receive it. This ties into the Bring the Kids Home initiative by controlling admissions to residential psychiatric treatment centers.

Health Care Services transferred the funding for the First Health MMIS Prior Authorization Contract to the Behavioral Health Medicaid component in the FY 07 budget process. The cost per review for the contract is projected to increase as well as the number of reviews.

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.

BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

National Accreditation Contract - Phase I of V Increment

	Inc	200.0	0.0	0.0	200.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH		200.0										

The Division of Behavioral Health has initiated a process to evaluate and overhaul its business practice and management philosophy. This will involve a shift away from its historical focus on oversight and compliance and move forward toward a focus on delivery of high quality service and improving treatment outcomes. The expectation is that the grantee/provider's administrative burden associated with periodic reporting and operational oversight will be reduced and the expectation of accountability and a results orientation will increase.

A critical strategy linked with this change to a business practice that is outcomes-based includes national accreditation. Ultimately, program standards will be embodied in national accreditation that will be required for all providers. Reaching this goal will take several years of preparation involving a partnership with the Division of Behavioral Health, the provider organizations, the Alaska Mental Health Board, the Advisory Board on Alcoholism and Drug Abuse and the Alaska Mental Health Trust Authority. The intent is that with the assistance of necessary financial and technical resources, all providers will succeed in this endeavor.

This request funds Phase I (Year 1 of a 5 year project) of obtaining national accreditation for all providers. These funds will enable the purchase of the following deliverables: national consultation in assisting the Division of Behavioral Health to map out a five year plan; provide regional training and technical assistance conferences, assistance with planning and implementation of "shared-networked" accreditation; readiness assessment development and

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

distribution, and local provider delivered technical assistance.

Subsequent Phase II-V for the remaining 4 years will include requests of funding state grantee organizations for the costs associated with obtaining national accreditation.

Total: \$200,000

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.

BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Medicaid FASD Demonstration Project

	Inc	574.0	225.0	36.3	306.5	6.2	0.0	0.0	0.0	2	0	0
1002 Fed Rcpts		287.0										
1003 G/F Match		287.0										

This increment requests funding for a new Mental Health Clinician III position in Juneau for a Medicaid demonstration project for children with fetal alcohol spectrum disorder, and a new Medical Assistance Administrator IV position in Juneau for a Medicaid demonstration project for children with fetal alcohol spectrum disorder. \$300.0 of this increment will include provider training. These costs are eligible for 50% federal reimbursement from Medicaid.

This project allows Alaska to use Medicaid money formerly spent on residential psychiatric treatment on new home and community based services. Children with disabilities, such as those with Fetal Alcohol Spectrum Disorder (FASD) and those who are Severe Emotionally Disturbance (SED), are particularly difficult to identify. These youth are often misdiagnosed and are subsequently provided with treatment that is often ineffective. Alaska was one out of ten states chosen for this demonstration and is the only state targeting interventions based on modeling, mentoring and monitoring for these dually-diagnosed 14 to 21 year olds. Our hope is that Alaska will become a model for other states at the end of the five-year project.

Youth with an FASD and SED stay in residential psychiatric treatment centers (RPTC) nearly twice as long as the general population because traditional mental health treatments are ineffective due to the brain damage caused by prenatal exposure to alcohol. As these youth age, the health issues become more complex. Coping and learning skills are often compromised so they are more susceptible to pregnancy, poverty, drug and alcohol abuse, incarceration and victimization.

The FASD/RPTC Demonstration Project was launched in October 2007 with the goal of reducing the number of youth, ages 14 to 21, in RPTCs who are dual-diagnosed with FASD and SED. The Demonstration Project will focus on services that mirror the Alaska Native practices of modeling desired behaviors and mentoring children to learn their roles in a larger culture while monitoring the youth as the treatment is delivered. This is especially important because Native Americans are disproportionately represented in the target group. The children selected for this demonstration will be clients of Behavioral Health, Children's Services, and Juvenile Justice. The project has capped funding and has a requirement that services under the waiver cost no more than the institution services. This limits enrollment in the waiver to no more than 88 children.

The department has responsibility for approval and oversight of plan implementation and fidelity to the model. The Mental Health Clinician will approve individual plans for waiver clients twice a year. These plans will describe the youth's service package. The Mental Health Clinician will also identify system issues including problems of duplicative service delivery, barriers to collaboration, or other service delivery, and to bring these to the waiver project manager for resolution. The intensity of oversight and review of individual plans of care require the addition of one Mental Health Clinician III to handle the caseload.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The Medical Assistance Administrator oversees the implementation of the demonstration project and functions as a coordinator between divisions by interfacing with appropriate division directors to ensure compliant and effective policy development for children in the target group. Duties of this position include: ensuring effective and timely communication of all policy and procedure decisions; ensuring active stakeholder involvement in policy development by coordinating advisory groups and committees and overseeing all communication between the department and stakeholders. Project management also requires specialized Medicaid administrative experience to assist with implementation plan development, state regulatory requirements, demonstration project implementation across divisions, and contract management. The department has responsibility for adhering to all the evaluation criteria, financial reporting, and data analysis required by the federal agency.

Contractual services will be used to procure training services to identify evidence-based trauma-informed interventions. Under the waiver, service providers must undergo a State approved training program resulting in qualifying endorsement. To become qualified as providers of all waiver services, agencies must ensure their employees have received specific training related to the service delivery model and the needs of children with co-occurring SED/FASD. The state will offer training on topics such as wraparound service delivery, treatment planning, transition planning, aftercare, and physical environment for youth with FASD to ensure a level of proficiency and the ability to deliver effective technical assistance to community agencies. The department is required to show evidence of continuing provider training upon annual recertification of the waiver.

- Dept-Core Services-Manage health care coverage for Alaskans in need
- Dept-Core Services-Provide an integrated behavioral health system
- Dept-Core Services-Protect and promote the health of Alaskans
- Dept-Core Services-Promote independence of Alaska senior and people with physical or developmental disabilities
- Dept-B-2- Improve and enhance the quality of life for Alaskans with serious behavioral health problems
- Dept-D-4- Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b-Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-A-A1-Increase IHS participation
- HCS-B-Provide affordable access to quality health care services to eligible Alaskans
- HCS-B-T1-Increase the number of providers
- DPH-A-Healthy people in healthy communities
- DPH-A-A4-Assure access to early preventative services and quality health care

Reverse FY2008 MH Trust Recommendation

1092 MHTAAR	OTI	-360.0	-342.0	-12.5	-2.0	-3.5	0.0	0.0	0.0	0	0	0
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This zero based adjustment includes a Fund Source change of \$50.0 from MHTAAR to GF/MH for BTKH - Tool kit development and expand school-based services capacity via contract. See separate increment. It also eliminates MHTAAR funding for BTKH regulations planning for therapeutuc foster homes.

- Policy Level Planning & Implementation -75.0 personal services
- BTKH Took Kit & School Expansion -100.0 personal services
- Office of Integr Housing -167.0 personal services
- 12.5 travel
- 2.0 services
- 3.5 commodities

MH Trust: Workforce Dev - Develop credentialing and quality standards steering committee

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1092 MHTAAR	Inc	49.0	0.0	0.0	49.0	0.0	0.0	0.0	0.0	0	0	0

Credentialing and Quality Standards Steering Committee: The Trust Workforce Development Focus Area is supporting the formation of a credentialing and quality standards steering committee. This committee will support the development and coordination of competencies, credentialing, and standardization processes for certificate level programs to increase consistency, and decrease duplication across programs.

The Committee will research competencies for the broad range of positions serving Trust beneficiaries and will draft a strategic plan for the standardization and coordination of credentialing and certificate level programs.

The Committee will be composed of representatives from the following:

- Training Directors of not-for-profit treatment and service agencies;
- Treatment professionals serving each of the beneficiary populations, including specialists in developmental disabilities, gerontology, child mental health, adult behavioral health, and juvenile and adult criminal justice;
- Dept. of Labor, Alaska Commission on Behavioral Health Certification, DHSS Divisions of Behavioral Health and Senior and Disabilities Services, and Alaska Native Tribal Health Consortium Behavioral Health Aid Program;
- Educational specialists from University of Alaska, Regional Alcohol and Drug Abuse Counselor Training (RADACT), and the Rural Human Services Program

The Committee will require technical assistance and support for group management and facilitation, to conduct research, and to draft the strategic plan. To maintain continuity with the broader Workforce Development Initiative, the Committee will utilize the WICHE consultants to conduct the research and to draft the strategic plan. The Committee will contract with a professional Project Coordinator to provide the weekly activities management and group facilitation necessary to keep this project moving forward.

MH Trust: BTKH - Southcentral Foundation Eklutna Residential Psychiatric Treatment Center Training Site

1092 MHTAAR	Inc	50.0	0.0	0.0	0.0	0.0	0.0	50.0	0.0	0	0	0
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This funding, managed by DHSS/Behavioral Health, provides grant funding to allow for planning and implementation of a training site within the new Southcentral Foundation (SCF) Eklutna Residential Treatment Facility expected to be completed in the fall of 2008. Forty percent of youth experiencing serious emotional disturbance (SED) are Alaska Native. SCF's Eklutna program will focus on those youth and ways to ensure services are provided in a way that supports cultural differences. The program's proximity to Anchorage will generate a future BTKH workforce from UAA and other sites who would seek this cross-cultural training about serving Alaska Native youth. This is new funding for FY09 at \$50.0 MHTAAR.

MH Trust: Dis Justice - Clinical position within Office of Integrated Housing

1092 MHTAAR	Inc	75.0	75.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
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The MH Trust: Dis Justice - Clinical position within Office of Integrated Housing will work closely with the existing Social Services Coordinator to provide clinical expertise on Trust beneficiary needs as an appropriate housing inventory is developed in the State. This position will also serve as a single point of contact for public guardians and the Department of Health and Social Service's Regional Behavioral Health Coordinators for Trust beneficiaries that have exhausted available community treatment and housing resources.

This position maintains a critical component of the Disability Justice Focus Area and Housing Focus Area plans by ensuring that clinical and treatment needs

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

are considered and incorporated into Alaska's housing inventory for beneficiaries. It will also aim to prevent incidences of the incarceration or institutionalization of beneficiaries by convening key state and community treatment experts to problem solve specific cases involving beneficiaries that have exhausted available community treatment and housing resources.

The MH Trust: Dis Justice - Clinical position within Office of Integrated Housing was funded in FY08 with \$75.0 MHTAAR and is maintained at that level in FY09 with \$75.0 MHTAAR.

MH Trust: BTKH - Tool kit development and expand school-based services capacity via contract

1092 MHTAAR	Inc	100.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0	0	0
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Tool Kit Development project maintains the FY08 funding level for a contractor to utilize a 'tool kit' of effective school-based programs that is shared statewide to encourage new programming in school districts dealing with youth experiencing serious emotional disturbance (SED). Funding will be managed by the Division of Behavioral Health Administration component via contract. This funding provides for a vital part of the Bring the Kids Home (BTKH) Initiative plan by encouraging partnerships between behavioral health providers and schools to ensure success for youth at risk for residential placement but trying to stay at home. As a result, this effort should save the state considerable funding in avoided costs in residential care. Project was funded in FY08 at \$100.0 MHTAAR, and continues so for FY09.

MH Trust: Housing - Office of Integrated Housing

1092 MHTAAR	Inc	185.0	167.0	12.5	2.0	3.5	0.0	0.0	0.0	0	0	0
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Grant 383.04
This request is for an ongoing project through the Division of Behavioral Health for technical assistance to develop supported housing for Trust beneficiaries. Recognizing the affordable and supported housing crisis that exists in Alaska, the Trust and Behavioral Health advocated for the integration of supported housing-now the 'Special Needs Housing Office'-to develop housing and support opportunities for consumers struggling with mental illness and/or substance abuse. The stated mission of this office is to aggressively develop the expansion and sustainability of supported housing opportunities statewide for Behavioral Health consumers in safe, decent, and affordable housing in the least restrictive environment of their choice that is supportive of their rehabilitation process and to receive individualized community services and supports. In FY08 a baseline assessment of available housing will be completed, while setting targets for development and sustainability in the regions identified. This project has been funded with Trust and GF/MH funds dating back to FY01. Current project is \$185.0 Trust funds with a match through a joint Trust/state position for clinical technical assistance in the Special Needs Housing Office.

ETS Chargeback Redistribution

1004 Gen Fund	Atrin	17.2	0.0	0.0	17.2	0.0	0.0	0.0	0.0	0	0	0
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Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.

Amounts transferred from state agencies are as follows:
Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).

Amounts transferred to state agencies are as follows:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.												
Delete Non-Perm Positions												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	-2
Removal of Non-Perm Administrative Clerk II position in Anchorage 06-N06073 and 06-N06032 Mental Health Clinician III in Anchorage												
Transfer out PCN 06-2002 to Commissioner's Office												
	Trout	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
Transfer PCN 06-2002 from Behavioral Health Administration to Commissioner's Office.												
Transfer out PCN 06-0507 to Administrative Support Services												
	Trout	-70.1	-70.1	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
1037 GF/MH												
Transfer PCN 06-0507 from Behavioral Health Administration to Administrative Support Services.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.9	0.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts 0.4												
1003 G/F Match 0.1												
1037 GF/MH 0.3												
1168 Tob Ed/Ces 0.1												
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.9												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	236.0	236.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts 83.4												
1003 G/F Match 2.3												
1004 Gen Fund 8.9												
1007 I/A Rcpts 5.0												
1037 GF/MH 91.4												
1092 MHTAAR 16.2												
1168 Tob Ed/Ces 18.3												
1180 Alcohol Fd 10.5												
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$236.0												
Subtotal		13,910.0	5,550.4	470.2	5,232.3	207.2	64.9	2,385.0	0.0	60	2	19

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Behavioral Health Administration (2665)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	68.1	68.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		28.4										
1037 GF/MH		32.2										
1168 Tob Ed/Ces		7.5										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$68.1</p>												
Totals		13,978.1	5,618.5	470.2	5,232.3	207.2	64.9	2,385.0	0.0	60	2	19

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Action Prevention & Intervention Grants (2596)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,715.0	0.0	0.0	504.2	0.0	0.0	2,210.8	0.0	0	0	0
1002 Fed Rcpts		935.3										
1004 Gen Fund		821.6										
1037 GF/MH		958.1										
	Subtotal	2,715.0	0.0	0.0	504.2	0.0	0.0	2,210.8	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680018 Transfer Contractual to Grants												
	LIT	0.0	0.0	0.0	-170.0	0.0	0.0	170.0	0.0	0	0	0
The component has identified an additional \$170.0 prevention grants to be granted in FY 08. This transaction will transfer excess authorization from the contractual line to the grants line.												
Transfer in GF from Behavioral Health Grants												
	Trin	158.3	0.0	0.0	0.0	0.0	0.0	158.3	0.0	0	0	0
1004 Gen Fund		158.3										
The GF increment from Behavioral Health Grants FY08 contained \$158.3 of CAPI prevention funding. This transfer allows the grants to be funded from the correct component.												
	Subtotal	2,873.3	0.0	0.0	334.2	0.0	0.0	2,539.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	2,873.3	0.0	0.0	334.2	0.0	0.0	2,539.1	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	2,873.3	0.0	0.0	334.2	0.0	0.0	2,539.1	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Rural Services and Suicide Prevention (2597)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,401.1	0.0	0.0	300.0	0.0	0.0	2,101.1	0.0	0	0	0
1004 Gen Fund		285.9										
1037 GF/MH		128.4										
1180 Alcohol Fd		1,986.8										
Subtotal		2,401.1	0.0	0.0	300.0	0.0	0.0	2,101.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		2,401.1	0.0	0.0	300.0	0.0	0.0	2,101.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		2,401.1	0.0	0.0	300.0	0.0	0.0	2,101.1	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		2,401.1	0.0	0.0	300.0	0.0	0.0	2,101.1	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	6,103.4	0.0	0.0	402.5	0.0	0.0	5,700.9	0.0	0	0	0
1037 GF/MH		6,103.4										
	Subtotal	6,103.4	0.0	0.0	402.5	0.0	0.0	5,700.9	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	6,103.4	0.0	0.0	402.5	0.0	0.0	5,700.9	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	1,631.6	0.0	0.0	0.0	0.0	0.0	1,631.6	0.0	0	0	0
1037 GF/MH		1,631.6										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Performance Measures Affected:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Dept-Core Service--Manage health care coverage for Alaskans in need												
Dept-Core Services--Protect and promote the health of Alaskans												
Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems												
Dept-D-4--Provide quality management of health care coverage services providers and clients												
DBH-A-1-A1.1a--Improve and enhance the quality of life of children with serious emotional disturbance by implementing the Bring the Kids Home program												
DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system												
HCS-A--Mitigate service reductions by replacing general funds with alternate funds												
HCS-B--Provide affordable access to quality health care services to eligible Alaskans												
DPH-A--Healthy people in healthy communities												
DPH-A-A4--Assure access to early preventative services and quality health care												

Transfer in General Funds from Medicaid Services due to Elimination of Proshare Financing

	Trin	614.4	0.0	0.0	0.0	0.0	0.0	614.4	0.0	0	0	0
1004 Gen Fund		614.4										

In SFY08 a general fund (GF) increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Psychiatric Emergency Services provided mental health services intended to aid people in psychiatric crisis and may include crisis intervention and brief therapeutic interventions to help stabilize the client and follow-up services through the ProShare program. This transfer of \$614.4 is necessary to give the division the funding needed to continue these services.

FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid

	Inc	158.0	0.0	0.0	0.0	0.0	0.0	158.0	0.0	0	0	0
1037 GF/MH		158.0										

This request is for additional GF needed to match federal revenues for the Single Point of Entry Psychiatric services funded through the Medicaid ProShare program. The annual rate the federal government reimburses the state for Medicaid benefits will decline on October 1, 2008, requiring additional GF to maintain services at the current level.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

This increment will help the department improve the following performance measures:

- Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- DPH-A---Healthy people in healthy communities
- DPH-A--A2--Reduce suffering, death and disability due to chronic disease
- DPH-A--A4--Assure access to early preventative services and quality health care

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Psychiatric Emergency Services (1435)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Subtotal		8,507.4	0.0	0.0	402.5	0.0	0.0	8,104.9	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Increase GF Auth to Replace Lost Federal Share of Proshare SPEP												
	Inc	1,100.0	0.0	0.0	0.0	0.0	0.0	1,100.0	0.0	0	0	0
1004 Gen Fund		1,100.0										
Totals		9,607.4	0.0	0.0	402.5	0.0	0.0	9,204.9	0.0	0	0	0

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Single Point of Entry Psychiatric (SPEP) Medicaid program by the federal Medicaid Agency. The larger, non-SPEP, portion of the Private ProShare program was previously disallowed and change records reflecting that disallowance are already included in the Governor's Budget. This amendment became necessary after the reconsideration of the SPEP portion of the ProShare program was denied.

There is an existing change record in the Governor's Budget Health Care Services (HCS) Medicaid component requesting a \$16,000.0 decrement in federal funding. There is also a corresponding amendment in HCS Medicaid reducing federal funding by an additional \$1,100.0.

The department has made payments to hospitals for several years under this program. SPEP was an important part of the ProShare program and the department's strategy to provide access to quality health care services. ProShare SPEP Medicaid funds have supported mental health care programs that benefit many Alaskans. Without the ProShare SPEP Medicaid program the same services will have to be funded with 100 percent GF.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost the appeal when the U.S. Department of Health and Human Services Department Appeals Board upheld the disallowed claim. At that time it was not yet determined how the SPEP portion of that claim would be handled.

The department is committed to continue funding these services at the same level in support of its mission to manage mental health care for Alaskans in need. While the federal authority is no longer needed in Health Care Services, in order to maintain current service levels, the department is requesting additional funds in the Behavioral Health division to replace this lost federal money.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services to the Seriously Mentally Ill (800)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	10,784.6	0.0	0.0	135.9	0.0	0.0	10,548.7	100.0	0	0	0
1002 Fed Rcpts		989.5										
1004 Gen Fund		395.8										
1037 GF/MH		7,999.3										
1092 MHTAAR		1,400.0										
06-8-0005 Spread Unallocated GF/MH and MHTAAR Unallocated Legislative Add-on												
	LIT	0.0	0.0	0.0	0.0	0.0	0.0	100.0	-100.0	0	0	0
Spread unallocated legislative add-on for Peer Supported Services.												
	Subtotal	10,784.6	0.0	0.0	135.9	0.0	0.0	10,648.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	10,784.6	0.0	0.0	135.9	0.0	0.0	10,648.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	3,324.9	0.0	0.0	0.0	0.0	0.0	3,324.9	0.0	0	0	0
1037 GF/MH		3,324.9										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching GF through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services to the Seriously Mentally Ill (800)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Performance Measures Affected:

- Dept-Core Services--Manage health care coverage for Alaskans in need
- Dept-Core Services--Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of Proshare Financing

	Trin	798.7	0.0	0.0	0.0	0.0	0.0	798.7	0.0	0	0	0
1004 Gen Fund		798.7										

In SFY 08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services however, these services are provided by other divisions. Services to Chronically Mentally Ill, through community mental health agencies, offer an array of assessment, treatment, rehabilitation and support services for adults with severe mental illnesses. This transfer of \$798.7 is necessary to give the division the funding needed to continue these services.

Reverse FY2008 MH Trust Recommendation

	OTI	-1,400.0	0.0	0.0	0.0	0.0	0.0	-1,400.0	0.0	0	0	0
1092 MHTAAR		-1,400.0										

A portion of this zero base adjustment is actually a fund source change from MHTAAR to GF/MH for:

- Beneficiary Projects - peer operated support services (\$50.0)
- Housing - Department of Corrections discharge incentive grants (\$100.0)
- See separate increments pertaining to these projects.

The remaining is a zero base adjustment.

MH Trust: Housing - Bridge Home Pilot Project

	Inc	750.0	0.0	0.0	0.0	0.0	0.0	750.0	0.0	0	0	0
1092 MHTAAR		750.0										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services to the Seriously Mentally Ill (800)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This project is a replication of successful transition programs in other states for individuals 'cycling' through emergency and institutional settings. The focus location for the project for now is Anchorage and institutions targeted for re-entry include Alaska Psychiatric Institute, Department of Corrections facilities, Providence Emergency rooms and other high cost social service and health programs. The project will allow for up to 60 individuals to receive less expensive, continuous services, including a rental subsidy (estimate based on 60% of income) in order to 'bridge' from institutional discharge onto the HUD Housing Choice voucher program (formerly known as the Section 8 housing voucher program) paired with intensive in-home support services. This pairing of resources for beneficiaries has proven successful in other states in reducing recidivism and impacts on service systems. Alaska's efforts have reduced the number of returns to Corrections and in the use of emergency level services in the first full year of the project.

MH Trust: Housing - Flexible special needs housing "rent up"

1092 MHTAAR	Inc	300.0	0.0	0.0	0.0	0.0	0.0	300.0	0.0	0	0	0
		300.0										

This project is a DHSS/Trust/AHFC collaboration ongoing since FY01 to provide capital related operations funding for special needs housing projects for Trust beneficiaries. Funding covers the costs associated with the 'rent-up' period after development: rent vacancies, staff costs prior to full rental income resources, etc. The funds will serve as a matching allocation in the AHFC 'Special Needs Housing Grant' program and are available through DHSS Behavioral Health. Behavioral Health allocates the funds as a component of technical assistance provided to successful applicants. In this manner, housing providers are assured the technical assistance resources needed to successfully house Trust beneficiaries. Outcomes of this project are to assist in making development of special needs housing affordable as has been documented over the past 7 years.

MH Trust: Housing - Department of Corrections discharge incentive grants

1037 GF/MH	Inc	300.0	0.0	0.0	0.0	0.0	0.0	300.0	0.0	0	0	0
1092 MHTAAR		200.0										
		100.0										

The trust has switched \$100.0 in MHTAAR to GF/MH in FY09 for this project.

This project is a strategy in the Trust's Affordable Housing initiative and the Disability Justice workgroups. It is consistent with the Housing workgroup's focus on 'community re-entry'. It targets beneficiaries exiting Department of Corrections settings who are challenging to serve, and who will require extended supervision and support services to avoid becoming repeat offenders or public safety concerns. These funds will be administered by the Division of Behavioral Health as Assisted Living Home vouchers or support service resources. Resources will also increase the skill level and capacity for assisted living providers to successfully house this population. Project has been funded by Trust funds \$225.0 and \$300.0 in FY 07 and FY08 respectively. Current request is for a total of \$300.0: \$200.0 MHTAAR and \$100.0 GF/MH.

MH Trust: Benef Projects - Peer operated support svcs

1037 GF/MH	Inc	100.0	0.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0
1092 MHTAAR		50.0										
		50.0										

Grant 1396.01

The Trust's Beneficiary Projects Initiative targets development of consumer-operated programs such as drop-in centers, case management programs, outreach programs, businesses, employment, housing programs, and crisis services that are a growing part of the behavioral health system development nation-wide. Research conducted by the U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) shows that participating consumers are satisfied with peer provided services and that programs met their objectives. The Division of Behavioral Health endorses the Evidence Based Practices established to date by SAMHSA and is working with the Trust's Beneficiary Projects Initiative to incorporate

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services to the Seriously Mentally Ill (800)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
these programs into our service delivery system as cost-effective services that are preferred by a sector of consumers.												
	Subtotal	14,958.2	0.0	0.0	135.9	0.0	0.0	14,822.3	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	14,958.2	0.0	0.0	135.9	0.0	0.0	14,822.3	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Designated Evaluation and Treatment (1014)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
1037 GF/MH	ConfCom	1,211.9	0.0	0.0	0.0	0.0	0.0	1,211.9	0.0	0	0	0
		1,211.9										
	Subtotal	1,211.9	0.0	0.0	0.0	0.0	0.0	1,211.9	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,211.9	0.0	0.0	0.0	0.0	0.0	1,211.9	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Designated Evaluation and Treatment Increment												
1037 GF/MH	Inc	700.0	0.0	0.0	0.0	0.0	0.0	700.0	0.0	0	0	0
		700.0										

As a payer-of-last resort, the Designated Evaluation and Treatment program funds are made available to designated local community and specialty hospitals for evaluation, stabilization and treatment services, inpatient physician services and transportation for people under court-ordered commitment. It is also available to people who meet those criteria, but have agreed to accept services voluntarily in lieu of commitment, and who would otherwise go to the Alaska Psychiatric Institute. Local hospitalization is often the treatment of choice, keeps an individual connected to family or other support, and facilitates a rapid return home. Clinical management procedures have contained the growth rate to just the most needy individuals, only the necessary hospital days, and with the most economical transportation to Alaska Psychiatric Institute or other designated hospitals, but costs have continued to rise just as they have in other medical areas.

Using this funding, a local Designated Evaluation and Stabilization/Treatment facility may provide up to 72-hour inpatient psychiatric evaluations, up to 7 days of crisis stabilization, or up to 40 days of inpatient hospital services close to the consumer's home, family, and support system. Component funding also supports consumer and escort travel to designated hospitals and back to their home community and inpatient physician services that are not covered under the hospitals' daily rate. Fairbanks Memorial Hospital in Fairbanks and Bartlett Regional Hospital in Juneau provide designated evaluation and treatment services, and Ketchikan General Hospital in Ketchikan, Mt. Edgecumbe Hospital (SEARHC) in Sitka and Yukon-Kuskokwim Health Corporation in Bethel provide designated evaluation and stabilization services.

However, this State mandated program has continued to be under-funded each year for the last 6 years; budgets have usually been short between \$500,000 -750,000 each year. Due to an inadequate budget, some of the payments to hospitals, physicians and guard/escort services have been delayed. Efforts are made to use subsequent year's budgets to pay unpaid bills from the previous year, continuing the inadequacy of each year's budget. 6615 bed days were covered for 1215 patients costing a total of \$10,541,653.85; the overall daily hospital rate has increased \$1,611.76 or 18.7% between FY 03 and FY 08. There were 992 physician bills paid costing a total of \$292,852.24; the amount for covered physician charges has increased \$11,507.32, or 16.8 %, between FY03 and FY06. There were 3015 transports to Alaska Psychiatric Institute or other designated hospitals, costing a total of \$1,871,090.21; this cost has increased \$259,715.02 or, 80.2%, between FY03 and FY06.

Performance Measures Affected:

- Dept-Core Services: Provide an integrated behavioral health system
- Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.
- BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Designated Evaluation and Treatment (1014)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
of a comprehensive, integrated Behavioral Health Service System.												
FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid	Inc	200.0	0.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
1037 GF/MH		200.0										
This request is for additional GF needed to match federal revenues for the Designated Evaluation and Treatment services funded through the Medicaid Disproportionate Share Hospital program. The annual rate the federal government reimburses the state for Medicaid benefits will decline on October 1, 2008, requiring additional GF to maintain services at the current level.												
The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.												
This increment will help the department improve the following performance measures:												
Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems												
Dept-D-4--Provide quality management of health care coverage services providers and clients												
DBH-A-1-A2.1b-Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system												
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
DPH-A--Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
	Subtotal	2,111.9	0.0	0.0	0.0	0.0	0.0	2,111.9	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	2,111.9	0.0	0.0	0.0	0.0	0.0	2,111.9	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services for Severely Emotionally Disturbed Youth (1436)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	9,604.9	55.0	0.0	814.2	0.0	0.0	8,735.7	0.0	0	0	0
1002 Fed Rcpts		317.7										
1004 Gen Fund		687.0										
1037 GF/MH		6,750.2										
1092 MHTAAR		1,850.0										
	Subtotal	9,604.9	55.0	0.0	814.2	0.0	0.0	8,735.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680018 Transfer Federal Authority from the Fetal Alcohol Syndrome Component												
	Trin	200.0	0.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
1002 Fed Rcpts		200.0										
	Subtotal	9,804.9	55.0	0.0	814.2	0.0	0.0	8,935.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	902.0	0.0	0.0	0.0	0.0	0.0	902.0	0.0	0	0	0
1037 GF/MH		902.0										

We will be transferring excess federal authorization from Fetal Alcohol Syndrom Program to allow full federal funding for grantees.

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching GF through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services for Severely Emotionally Disturbed Youth (1436)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Performance Measures Affected:

- Dept-Core Services--Manage health care coverage for Alaskans in need
- Dept-Core Services--Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b--Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of Proshare Financing

	Trin	211.0	0.0	0.0	0.0	0.0	0.0	211.0	0.0	0	0	0
1004 Gen Fund		211.0										

In SFY08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Services to Severely Emotion Disturbed Youth, through community mental health agencies, offer an array of assessment, psychotherapy, chemotherapy, case management and rehabilitation services for seriously emotionally Disturbed youth and their families, and to those youth who are at risk of becoming seriously emotionally disturbed. This transfer of \$211.0 is necessary to give the division the funding needed to continue these services.

Reverse FY2008 MH Trust Recommendation

	OTI	-1,850.0	0.0	0.0	0.0	0.0	0.0	-1,850.0	0.0	0	0	0
1092 MHTAAR		-1,850.0										

This zero base adjustment includes \$1,000 of MHTAAR that is fund source change to GF/MH. Projects are as follows:

- BTKH - Individualized Services (\$250.0) moved to GF/MH
 - BTKH - Home and Community based start-up grants (\$200.0) moved to GF/MH
 - BTKH - peer navigator program (\$100.0) moved to GF/MH
 - BTKH - Expansion of school-based services capacity via grants (\$200.0) moved to GF/MH
 - BTKH - Community Behavioral Health Centers outpatient and emergency residential services and training (\$250.0) moved to GF/MH
- See separate incremental records.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services for Severely Emotionally Disturbed Youth (1436)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Remaining MHTAAR is net zero base adjustment.

MH Trust: BTKH - Anchorage Crisis Stabilization, 15 beds and develop single point of entry

	Inc	300.0	0.0	0.0	0.0	0.0	0.0	300.0	0.0	0	0	0
1037 GF/MH		200.0										
1092 MHTAAR		100.0										

Anchorage Crisis Stabilization program and Single Point of Entry project expands services to youth-in-crisis for higher placements via 15 crisis stabilization beds, and develops a new single point of entry for children's services: assessment, service coordination and placement in community stabilization and/or into acute care as appropriate. It provides multiple grants to assist both custody (Juvenile Justice and Children's Services) and non-custody (Division of Behavioral Health) youth. Some youth will be Medicaid eligible; some will not (non-resourced), hence the proposed mixture of grant funds and GF/MH Medicaid match for operations of the facilities. This critical component of the BTKH overall plan is expected to save Medicaid funds for acute hospitalizations and eventual referrals to Residential Psychiatric Treatment Centers (RPTCs). This project was first funded in FY08 at \$100.0 MHTAAR and \$184.0 GF/MH; in FY09 funding levels are \$100.0 MHTAAR and \$200.0 GF/MH increment. Including the base funding, this project totals \$484.0: \$384.0 GF/MH and \$100.0 MHTAAR.

MH Trust: BTKH - Individualized Services

	Inc	500.0	0.0	0.0	0.0	0.0	0.0	500.0	0.0	0	0	0
1037 GF/MH		250.0										
1092 MHTAAR		250.0										

Of this request \$250.0 reflects a fund source change from FY08 to FY09 of MHTAAR to GF/MH as recommended by the Trust.

Bring the Kids Home (BTKH) Individualized Services project will continue funding for additional care for youth experiencing serious emotional disturbance (SED) who are not qualified under Medicaid or who need non-Medicaid eligible services to stay at lower levels of care and avoid Residential Psychiatric Treatment Center (RPTC) placement. The project will be managed by Behavioral Health Utilization Staff with funds disseminated to behavioral health providers through simple grant agreements. This project maintains a critical, flexible component of the BTKH Focus Area plan by providing services to avoid costs of much more expensive residential care. The Utilization Review Staff provides quarterly outcome data to the BTKH Quarterly Work Group meetings on how the funding is utilized to save residential costs, number of youth served, and average cost per youth. BTKH Individualized Services was funded in FY07 with \$780.0 MHTAAR, in FY08 with \$500.0 MHTAAR and \$700.0 GF/MH, and is maintained at that level in FY09 with \$250.0 MHTAAR and \$250.0 GF/MH increment. The total for this project is \$1,200.0, which includes the base funding of \$700.0 GF/MH, increment GF/MH of \$250.0 and MHTAAR of \$250.0.

MH Trust: BTKH - Expansion of school-based services capacity via grants

	Inc	200.0	0.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
1092 MHTAAR		200.0										

BTKH Expansion of School-Based Services Capacity via Grants Support project continues the FY08 funding level for Evidence-Based Practice (EBP) in schools and collaborations between Community Behavioral Health Centers (CBHC) and schools. It also tracks the educational needs of Seriously Emotionally Disturbed Youth (SED Youth) transitioning to and from residential care. Managed by DHSS/BH who is disseminating funding with multiple grants, this funding enhances schools and providers to work together to ensure success of returning youth from Residential Psychiatric Treatment Centers (RPTC). Project was funded in FY08 at \$200.0 MHTAAR and \$250.0 GF/MH, and continues at that level in FY09.

MH Trust: BTKH - Home and Community based start up grants

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services for Severely Emotionally Disturbed Youth (1436)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1092 MHTAAR	Inc	500.0	0.0	0.0	0.0	0.0	0.0	500.0	0.0	0	0	0

This project provides multiple start up grants to providers to expand services within Alaska at the outpatient and residential level for youth experiencing serious emotional disturbance (SED). Grants are managed by the Division of Behavioral Health. This effort is another key ingredient of the Bring the Kid Home (BTKH) initiative plan to develop in-state lower levels of care that avoids costly Residential Psychiatric Treatment Center (RPTC) care whenever possible and appropriate. Project gathers data on avoiding RPTC care. FY09 is the third year of start up funding as programs taper to other forms of reimbursement. Funded in FY08 at \$400.0 MHTAAR and \$250.0 GF/MH, and maintained in FY09 at \$500.0 MHTAAR increment. Including the base funding, this project totals \$750.0, which is \$250.0 GF/MH and \$500.0 MHTAAR.

Subtotal	10,567.9	55.0	0.0	814.2	0.0	0.0	9,698.7	0.0	0	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

MH Trust: BTKH - Community Behavioral Health Centers Outpatient and Emergency Residential Services and Training

1037 GF/MH	Inc	1,250.0	0.0	0.0	0.0	0.0	0.0	1,500.0	0.0	0	0	0
1092 MHTAAR		250.0										

Grant 1392.01
 Managed DHSS/Behavioral Health, funding expands multiple grants to Community Behavioral Health Centers (CBHC) to enhance outpatient services with innovative programs/training to reduce the need for residential level services for youth experiencing serious emotional disturbance (SED). It will also emphasize special populations such as Fetal Alcohol Syndrome, birth to six years, etc. This increase in outpatient care assists in dealing with youth at the home and community-based level and avoids utilizing costly residential care. A separate evaluation component is funded by the Trust to demonstrate the cost effectiveness of this outpatient service. Project was funded in FY08 at \$925.0 MHTAAR and \$500.0 GF/MH, and expands services by \$500.0 in FY09 with \$250.0 MHTAAR and \$1,250.0 GF/MH increment. This brings the funding for this project to \$2,000.0 which is \$250.0 MHTAAR, \$1,250.0 GF/MH increment and \$500.0 GF/MH included in base funding.

MH Trust: BTKH - Peer Navigator Program

1037 GF/MH	Inc	100.0	0.0	0.0	0.0	0.0	0.0	150.0	0.0	0	0	0
1092 MHTAAR		50.0										

Grant 1388.01
 Parent and Youth Navigator project continues funding to allow parents (predominantly) but also youth, to be hired to assist their peers in navigating the service delivery system for youth experiencing serious emotional disturbance (SED). Grant funding would be managed by DHSS/BH to fund multiple grantees that would provide a variety of approaches allowing several different agencies to establish peer navigation programs. Grant funding would also be available for volunteer coordination to develop a volunteer youth advisory group, with grant funding for travel and per diem for volunteer youth and volunteer chaperones. This group would meet to educate various groups about issues from their perspective. Parent/peer navigation and parent/youth input in policy making has always been a critical part of the BTKH Initiative, to ensure the increased in-state capacity that is developed is as responsive to the needs of youth and parents as possible. Grantees will be required to report outcomes such as number of parents involved, results of the interaction, and effectiveness of services. This project was first funded in FY08 at \$150.0 MHTAAR and \$200.0 GF/MH; in FY09 project is funded with \$50.0 MHTAAR and \$100.0 GF/MH increment. Including the \$200.0 GF/MH in the base, this project totals \$350.0: \$300.0 GF/MH and \$50.0 MHTAAR.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Services for Severely Emotionally Disturbed Youth (1436)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	12,217.9	55.0	0.0	814.2	0.0	0.0	11,348.7	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	23,172.7	18,985.0	63.3	2,870.9	969.2	47.3	169.4	67.6	220	12	39
1002 Fed Rcpts		61.3										
1004 Gen Fund		583.4										
1007 I/A Rcpts		12,232.0										
1037 GF/MH		7,094.6										
1092 MHTAAR		67.6										
1108 Stat Desig		3,133.8										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	43.6	43.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.2										
1007 I/A Rcpts		21.8										
1037 GF/MH		15.5										
1108 Stat Desig		6.1										
Costs associated with the bargaining unit contract terms applicable to this component.: \$43.6												
Correct Unrealizable Fund Sources for LTC Increase												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		-21.8										
1037 GF/MH		27.9										
1108 Stat Desig		-6.1										
06-8-0005 Spread unallocated MHTAAR legislative add-on												
	LIT	0.0	0.0	0.0	67.6	0.0	0.0	0.0	-67.6	0	0	0
Spread unallocated MHTAAR legislative add-on for API tele-psychiatry.												
First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	Atrin	76.8	0.0	0.0	76.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		76.8										
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
Subtotal		23,293.1	19,028.6	63.3	3,015.3	969.2	47.3	169.4	0.0	220	12	39

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680018 On Call Position Adjustments, Correcting Pharmacists PCN and 5 New Positions	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5	1	-32

This Change Record Net Balances position counts for this component. Various aspects of position changes in this component are as follows:

1. New On-call PCN:

This change record is to record the deletion of XX Substitute/On Call Positions and re-establish new PCNs that will be filled with up to 25 Substitute/On Call positions at a time (multiple filled under one PCN).

PCN 06-#226 (new PCN 06-N07078) will establish a new substitute on call Correspondence Secretary III position and will replace Deleted PCN 06-N103.

PCN 06-#227 (new PCN 06-N07099) will establish a new substitute on call Mental Health Clinician II and will replace Deleted PCN 06-5011S and 06-50111S.

PCN 06#220 (new PCN 06-N07105) will establish a new substitute on call Psychiatric Nurse Assistant I and the following 21 (twenty-one) PCNs have been deleted: 06-5180S, 06-5187S, 06-5188S, 06-5189S, 06-5191S, 06-5192S, 06-5193S, 06-5194S, 06-5195S, 06-5196S, 06-5230S, 06-5231S, 06-5260S, 06-5261S, 06-5278S, 06-5300S, 06-5301S, 06-5334S, 06-5357S, 06-5358S, 06-5359S.

PCN 06-#221 (new PCN 06-N07106) will establish a new substitute on call Nurse I and will replace multiple PCNs listed with an "S" which will be deleted.

PCN 06-#222 (new PCN 06-N07107) will establish a new substitute on call Nurse II (Psych) and the following 11 (eleven) PCNs have been deleted: 06-5031S, 06-5034S, 06-5068S, 06-5070S, 06-5073S, 06-5074S, 06-5076S, 06-5077S, 06-5083S, 06-5085S, 06-5086S.

Partial funding for these positions will come from both I/A and SDPR collections. I/A and SDPR collections have increased due to an increase in Medicaid hospital in-patient daily rates. Rates have increased from \$982.15 in FY06 to \$1,016.16 in FY07 to \$1,048.23 in FY08. These figures are based on Medicare and Medicaid allowable rates.

2. Pharmacist Positions:

In September 2006 API's two pharmacists were statutorily designated as exempt positions. The new PCNs were created but never implemented in FY07. PCN 06-5258 in FY07 was used to pay for these two filled pharmacist positions. We are requesting that the following two exempt PCNs be added:

PCN 06-#228-Pharmacist (was assigned PCN 06-X115, currently filled). It will replace PCN 06-5258 which has been deleted.

PCN 06-#230 (was assigned PCN 06-X116) acts as the Chief Clinical Pharmacist for the hospital.

3. Changing non-perm positions to permanent full-time and part-time positions:

This change record is establishing 5 new full time positions that will be replacing 5 long-term non-permanent positions, establishing 2 permanent part time College IV interns that will be replacing 2 non-permanent College Intern IV, and deleting one secretary position no longer needed. The descriptions below indicate which positions are currently filled with AKPAY PCNs that were not established in ABS for FY07.

The funding for these positions will come from both I/A and SPDR collections. I/A and SDPR collections have increased due to an increase in Medicaid hospital in-patient daily rates. rates have increased from \$982.15 in FY06 to \$1,016.16 in FY07 to \$1,048.23 in FY08. These figures are based on Medicare and Medicaid allowable rates.

PCN 06-#211 Administrative Clerk III - establish PCN to replace existing PCN 06N06010 budgeted as a project non-permanent long term classified position. A

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

new position will allow continued work with payroll processing, auditing rescue system program (a specialized Nursing Department program that tracks hospital scheduling and hospital administrative statistics), and assist as backup for the travel desk. The non-permanent PCN 06-N0610 (PCN number is actually 06-N06010) in conjunction with 06-#211 would equal funding one FTE for this fiscal year.

PCN 06-#215 Administrative Assistant II - will replace existing PCN 06N06061 (currently filled, PCN 06N06061 is not in ABS) which was budgeted as a project non-permanent long term classified position. This new position supports the Quality Improvement process and Joint Commission standards for hospital accreditation.

PCN 06-#217 - Medical Records Assistant, replaces 06-N06095 and moves it from a non-permanent to permanent full-time position.

PCN 06-#219 Mental Health Clinician III. A permanent full-time position added to replace the non-permanent PCN 06-N07004 (currently filled and not included in ABS) in conjunction with 06-#219 would equal one FTE for this fiscal year. The TeleBehavioral Health position coordinates the clinical activity for the API telemedicine program between three major subscriber networks (GCI Connect MD, Alaska Rural Telehealth Network and Alaska Native Tribal Health Consortium) as well as multiple sites across the State of Alaska (Galena, Ft. Yukon, Fairbanks, Talkeetna, Homer, Kenai, Kotzebue and Naknek) that are currently participating sites.

PCN 06-#223 - College Intern IV - non-perm (currently filled and assigned PCN 06-N07040). This position will be reclassified to a seasonal part-time position that assists the psychology department with quality improvement initiatives to meet hospital accreditation, statistical analysis and projects as identified by the API director.

PCN 06-#224 - College Intern IV - non-perm (currently filled and assigned PCN 06-N07069). This position will be reclassified to a seasonal part-time position that assists the psychology department with quality improvement initiatives to meet hospital accreditation, statistical analysis and projects as identified by the API director.

PCN 06-#225 - PCN 06-2367. A permanent part-time Mental Health Clinician II was established in December 2006 to provide patient care during high hospital census and replaces the non-permanent PCN 06-N089.

PCN 06-N137 - Secretary is being deleted. It was originally established to assist with moving API hospital from the old building to the new facility.

Subtotal	23,293.1	19,028.6	63.3	3,015.3	969.2	47.3	169.4	0.0	225	13	7
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***** **Changes From FY2008 Management Plan To FY2009 Governor** *****

Feasibility Study on Privatization of API (Stat Change)

Inc	50.0	0.0	0.0	50.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH	50.0										

A decision to privatize Alaska's only state mental hospital, API, would require significant review and discussion. Key items for review include:

- Statutory requirements for the DHSS for Title 47 and Title 12;
- Statutory requirements for the state's Behavioral Health agency;
- Contractual implications for this change relative to the Bargaining Unit Contracts;
- Fiscal impacts on the community and hospital systems (other states have found that privatizing the state psychiatric hospital increases costs and decreases the number of acute care beds in the systems);
- Community planning for integrating the DET/DES services with a private provider at the state psychiatric hospital;

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<ul style="list-style-type: none"> -- Service components most easily privatized: housekeeping, pharmacy and maintenance; -- Satisfy IRS requirement to retire public bonds that financed construction of new hospital. 												
SDPR Authorization Increase												
	Inc	2,200.0	900.0	30.0	1,100.0	140.0	0.0	30.0	0.0	0	0	0
1108 Stat Desig		2,200.0										

Behavioral Health is requesting additional expenditure authority of \$2,200.0 Statutory Designated Program Receipt (SDPR). SDPR collections have increased over the past two fiscal years due to revenue enhancement strategies. The increased authority to collect will allow API to continue improving patient care and treatment, help the Veteran's Administration serve Alaskans returning from active duty with psychiatric needs, and pay for TeleBehavioral Health and the Electronic Medical Record System.

This funding request will be in addition to the \$3,133.8 SDPR approved in the FY08 budget and the FY08 supplemental request for an additional \$2,200.0. It was not known that additional SDPR authorization would be needed during the FY08 budget process. The new Medicaid billing and collection processes did not become apparent until late in FY07.

PURPOSE

SDPR collections have increased due to new Medicare regulations effective 7/2/2006, which allowed reimbursement for:

- Diagnosis Related Group activities at the institution;
- billing for Medicare Part B (Physician Services) identified by consultants in October 2006;
- billing for Medicare Part D (Pharmaceutical) as identified by consultants in October 2006; and
- scheduled increases in the Medicaid daily rate that impacts the amount billed to Medicare and other third party payers.

The increase in Medicaid hospital in patient daily rate has increased from \$982.15 in FY06 to \$1,016.16 in FY07 and is anticipated to be \$1,048.23 in FY08.

The SDPR funding will be used to improve and implement the following API activities.

- The exploration of improvements to person centered treatment plans and implementation of a mall concept service plan has begun at this type of facility across the United States. Currently, API has implemented this new care concept that allows patients to receive disease-related education and psychiatric treatment in a setting that will promote recovery for chronic and acute patients. This program educates and encourages patients to learn to function more independently in their daily life, and to become less dependent on the structures provided by a hospital setting. It is anticipated that this system of care will reduce recidivism.

- Tele-Behavioral Health (TBH) is emerging as a new technique across the United States, and has been piloted in Alaska with a federal grant, which expired August 2007. This program will allow for psychiatric evaluation and treatment of patients from remote villages. The development of this infrastructure allows for rapid treatment in the patient's home setting without requiring transport to API.

- The Veteran's Administration has limited resources to assist returning Alaskans Veterans from active duty in Iraq and Afghanistan. These services will be provided as in-patient treatment as well as outpatient treatment through TeleBehavioral Health.

- The Electronic Medical Records (EMR) system is partially funded with an existing Capital project and the balance (approximately \$350.0) from the operating budget. This system is designed to track important patient data and will provide API with reliable funding and census information.

TIMING ISSUES

The new TeleBehavioral Health program in FY07 was federally funded through August 30, 2007. The excess \$1,247,289 collected in FY07 is being carried

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

forward to FY08, which reduces API's ability to care for clients as intended by the Statutory Designated Program Receipts. Because of the shortage of medical professionals and the difficulty in recruiting in Alaska, the program will be carried out by existing positions, contracted physician services (Locum Tenens physicians) and on-call nurses.

Acute psychiatric care will continue to be a community need across the State of Alaska, as API continues to build a clinical infrastructure to meet anticipated needs as the default "safety net" when other services are not available. It is anticipated that approximately 3,600 combat troops from Stryker Brigade and 700 non-combat reserves are expected to return to Alaska from the Iraq War Theater this fiscal year. It is estimated that up to 30% of this population will require screening and intervention for Post Traumatic Stress Disorder. In the past five years increase in care to this population has grown between 13-17% yearly, with the largest increase this year.

BUDGETARY ISSUES

Continuing authority will be requested in future budget submissions to assist API in its dedication and commitment to serve the citizens of the State of Alaska. Recovery is our goal.

Performance Measures Affected:

Dept-Core Services: Provide an integrated behavioral health system

Dept-B-2: Improve and enhance the quality of life for Alaskans with serious behavioral health problems.

BH-A1, A3: Strategy #1C: Improve and enhance the quality of life of Alaskans with a SED, SMI and/or a substance abuse disorder through the development of a comprehensive, integrated Behavioral Health Service System.

Reverse FY2008 MH Trust Recommendation

1092 MHTAAR	OTI	-67.6	0.0	0.0	-67.6	0.0	0.0	0.0	0.0	0	0	0
		-67.6										

Eliminates MHTAAR funding support for tele-psychiatry.

Correct Unrealizable Fund Sources for Salary Adjustments: GGU

1007 I/A Rcpts	FndChg	-214.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1108 Stat Desig		214.1										

Adjust line item allocations

	LIT	0.0	0.0	0.0	-400.0	21.2	-21.2	400.0	0.0	0	0	0
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Reduce 73000 line to reclassify Locum Tenen expenditures from Services to Grants line and reduce Capital Outlay to reclassify to Commodities line those expenditures that are less than \$5.0 per item.

Electronic Medical Records Information Technology Project Manager

	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
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This position will be the lead position during the entire Electronic Medical Records (EMR) implementation process and will coordinate, train, test the system and implement the new system for the hospital.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Transfer out Statutory Designated Program Receipts to Administrative Support Services												
	Trout	-70.6	-70.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1108 Stat Desig		-70.6										
This transfer to Administrative Support Services will support a new position for the Finance and Management Services Division, API Support unit. This position will support the business office of API.												
Delete one-time-authorization for First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	OTI	-76.8	0.0	0.0	-76.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-76.8										
One-time-funding deleted for fuel/utility increases which were added in the FY08 budget as follows:												
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
Change position to Full Time												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	-1	0
PCN 06-2282 Health practioner from part-time to full-time.												
Transfer out PCN 06-2335 to Administrative Support Services												
	Trout	-75.7	-75.7	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
1007 I/A Rcpts		-75.7										
This is to transfer PCN 06-2335 from Alaska Psychiatric Institute to Administrative Support Services for the Division Support Services for API. This position was missed in the original reorganization.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	2.3	2.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		1.4										
1037 GF/MH		0.9										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$2.3												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	1,096.5	1,096.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		4.1										
1004 Gen Fund		6.5										
1007 I/A Rcpts		521.3										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Psychiatric Institute (311)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1037 GF/MH		372.6										
1108 Stat Desig		192.0										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$1,096.5

FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit

SalAdj	22.8	22.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	0.1											
1007 I/A Rcpts	11.4											
1037 GF/MH	7.9											
1108 Stat Desig	3.4											

The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component.
: \$22.8

Subtotal	26,374.0	20,903.9	93.3	3,620.9	1,130.4	26.1	599.4	0.0	226	12	7
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj	104.7	104.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	0.1											
1007 I/A Rcpts	29.0											
1037 GF/MH	72.3											
1108 Stat Desig	3.3											

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component.
: \$104.7

Totals	26,478.7	21,008.6	93.3	3,620.9	1,130.4	26.1	599.4	0.0	226	12	7
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Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Suicide Prevention Council (2651)
RDU: Behavioral Health (483)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH		0.1										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.1												
	Subtotal	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Medicaid Services (2661)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-490.0										
1003 G/F Match		490.0										
FY2008 Conference Committee												
	ConfCom	16,145.7	0.0	0.0	0.0	0.0	0.0	16,145.7	0.0	0	0	0
1002 Fed Rcpts		9,065.1										
1003 G/F Match		1,215.8										
1004 Gen Fund		2,034.8										
1037 GF/MH		3,830.0										
Subtotal		16,145.7	0.0	0.0	0.0	0.0	0.0	16,145.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		16,145.7	0.0	0.0	0.0	0.0	0.0	16,145.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-355.6										
1037 GF/MH		355.6										

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual rate the federal government reimburses the state for Medicaid benefits that will take effect on October 1, 2008.

The federal and state governments jointly fund Medicaid. The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid Services and is outside the control of the state government. One in five Alaskans is enrolled in Medicaid at some time each year. Without the increment the state would be forced to reduce eligibility or services currently provided to low income children, pregnant women, persons with disabilities, and the elderly. By approving this change record the department will be able to continue to meet its mission of purchasing health care for Alaskans in need.

The amount of federal funds the state receives for its Medicaid program depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The bulk of the federal funding for Medicaid benefits comes from claims reimbursed at the federal medical assistance percentage or FMAP. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%. Also affected are the State Children's Health Insurance Program (SCHIP) and the Breast and Cervical Cancer program (BCC) which are part of Alaska's Medicaid program. Eligible claims for SCHIP and BCC are reimbursed at an enhanced FMAP rate which reduces the state share of costs by 30% over the regular FMAP.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%. The regular FMAP for SFY09 will average 51.02% across two federal fiscal years (52.48% from July-Sept. 2008 and 50.53% from Oct. 2008-June 2009). The enhanced FMAP for SFY09 will average 65.71% (66.74% from July-Sept. 2008 and 65.37% from Oct. 2008-June 2009).

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Medicaid Services (2661)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Approximately 75% of the Children's Medicaid component's claims are reimbursed at the regular FMAP and another 2% at the enhanced FMAP. The remaining 23% is Indian Health Service (IHS) or non-reimbursable and is not affected by the change in FMAP. Based on current estimated expenditures for Medicaid, the FFY09 change in FMAP will require an estimated \$355.6 increase in GF to replace the lost federal funds and maintain services at the current level.												
The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.												
	Subtotal	16,145.7	0.0	0.0	0.0	0.0	0.0	16,145.7	0.0	0	0	0
*****		Changes From FY2009 Governor To FY2009 Governor Amended									*****	
	Totals	16,145.7	0.0	0.0	0.0	0.0	0.0	16,145.7	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Services Management (2666)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	7,966.3	3,516.5	17.9	1,781.3	97.0	72.0	2,481.6	0.0	37	1	0
1002 Fed Rcpts		5,365.2										
1003 G/F Match		651.3										
1004 Gen Fund		1,443.0										
1007 I/A Rcpts		442.7										
1037 GF/MH		64.1										
ETS Chargeback Transfer from Department of Administration												
	Atrin	43.1	0.0	0.0	43.1	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		43.1										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	8,009.4	3,516.5	17.9	1,824.4	97.0	72.0	2,481.6	0.0	37	1	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680012 Transfer System Reform Administrator (06-9130) from Front Line Social Workers												
	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
Transferring System Reform Administrator Position to Management Services Component to align personal services. Management positions and other administrative services positions are budgeted in the Management Services component.												
ADN 0680012 Transfer Clerical Position (06-1469) from Infant Learning Program												
	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
Transfer clerical position from Infant Learning Program to Children's Services Management Component to realign administrative support services costs in the division.												
ADN 0680012 Transfer Deputy Commissioner (06-3001) to Commissioner's Office												
	Trout	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
Transfer Deputy Commissioner to the Commissioner's Office. The position has been replaced in the Children's Services Management Component with a Division Director.												
	Subtotal	8,009.4	3,516.5	17.9	1,824.4	97.0	72.0	2,481.6	0.0	38	1	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
ETS Chargeback Redistribution												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Services Management (2666)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1004 Gen Fund	Atrin	26.7	0.0	0.0	26.7	0.0	0.0	0.0	0.0	0	0	0

Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.

Amounts transferred from state agencies are as follows:
Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).

Amounts transferred to state agencies are as follows:
Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.

FY 09 Health Insurance Increases for Exempt Employees

1002 Fed Rcpts	SalAdj	0.2	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.6										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.8

FY 09 Bargaining Unit Contract Terms: General Government Unit

1002 Fed Rcpts	SalAdj	94.9	136.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1003 G/F Match		20.4										
1004 Gen Fund		14.1										
1007 I/A Rcpts		7.1										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$136.5

Subtotal	8,173.4	3,653.8	17.9	1,851.1	97.0	72.0	2,481.6	0.0	38	1	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

1002 Fed Rcpts	SalAdj	47.0	76.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1003 G/F Match		13.2										
1004 Gen Fund		11.8										
1037 GF/MH		4.0										

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Services Management (2666)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$76.0												
Totals		8,249.4	3,729.8	17.9	1,851.1	97.0	72.0	2,481.6	0.0	38	1	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Services Training (2667)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,397.8	18.0	135.8	1,244.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		755.1										
1003 G/F Match		419.1										
1004 Gen Fund		223.6										
	Subtotal	1,397.8	18.0	135.8	1,244.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,397.8	18.0	135.8	1,244.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Basic Staff Training and Development												
	Inc	427.0	0.0	207.5	219.5	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		57.9										
1004 Gen Fund		369.1										

This request addresses an area that the Office of Children's Services (OCS) anticipates will make a positive difference to its ability to retain staff at a minimal cost to the state: 1) improve new employee training for frontline workers by extending the length of training so that it is in line with other child welfare agencies nationwide and by enhancing the curriculum to provide new employees with all of the tools necessary to achieve OCS system improvements; and 2) provide all OCS staff the opportunity for continued education that is on point with their specific job class and beneficial to the state.

Any effort toward extending retention of employees is key to accomplishing our mission to protect children from abuse and neglect.

Enhanced Training for Frontline Workers: Two weeks of Training of New Employees (TONE) curriculum is offered to each newly hired child protective services caseworker through contracted services from the University of Alaska. This training is mandatory for every new front line worker and should include the critical tools necessary to achieve OCS system improvements. It should provide a solid base for new workers whereby OCS can retain and recruit effective staff members so that our mission to protect children from abuse and neglect can be achieved. This training should be in step with nationwide standards.

In July of 2006, Office of Children's Service (OCS) management began to review the training curriculum, and formed a TONE Advisory Group that consisted of OCS staff and Tribal partners. The goal of the advisory group was to review and revise the current curriculum to be more practice oriented, incorporate the new replaced practice standards and enhance cultural competency throughout all training, rather than offering it in just one training module. OCS has also reached out to consultants and staff for guidance.

Prior to the OCS-initiated effort to assess currently offered TONE, the DHSS contracted with ACTION for Child Protection, Inc., a national child safety intervention organization, to study and evaluate the OCS business functions. The ACTION report recommended that training should employ the Adoption & Safe Families Act as a foundation or framework to the entire curriculum; that the training curriculum should clearly identify the OCS mission and define who OCS serves; that there be a clear distinction in curriculum regarding the difference between maltreatment, risk and safety; and that much more time should be spent training staff on state-of-the-art best practice standards. The executive summary portion of the ACTION report recommended that OCS develop an exceptional training program for new and experienced workers.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Services Training (2667)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

In January of 2007, the University of Alaska Anchorage's School of Social Work - Social Work Evaluation Program, released a brief to the OCS titled "Child Welfare Training Opportunities in Alaska". This brief was prepared in response to a request from OCS to provide additional recommendations about Alaska's child protection new worker training.

UAA's research revealed what they refer to as "overarching issues and recommendations" that include:

* Alaska has a low number of training days as compared to other states. Arizona 6 weeks; Oregon 5 weeks; Nevada and Idaho 4 weeks; and Alaska follows with only 2 weeks. In fact, 3 weeks was the lowest number of full weeks reported other than Alaska's 2 weeks.

Recommendation: Alaska could expand the breadth and depth of new employee training to be consistent with other states' standards.

* Cultural competence is discussed but not clearly so.

Recommendation: Alaska's child welfare training should rigorously incorporate the elements of Native culture and the laws that affect Native children into new employee training.

* There could be strong relationships between Children and Family Services Review (CFSR) outcomes and training.

Recommendation: Alaska CSFR deficiencies are improving; however, the state can tailor training so that employees have stronger skills in the areas of CFSR deficiencies.

In addition to the two studies previously discussed, OCS initiated an employee survey recently in an effort to determine what staff within OCS agreed with and disagreed with. Questions focused on salaries, organization, leadership, communication, problem recognition and solving, supervision, community relations, quality of office settings, records management, and training. Of the 345 respondents, 39.4% disagreed and 20.9% strongly disagreed with the statement: The quality of initial and ongoing training for staff is good. Further, 52% of all staff responding said that initial and ongoing and quality of training for staff requires the most immediate attention in order to improve the effectiveness of the organization.

This increment request reflects the DHSS' desire to expand OCS TONE training by two additional weeks to offer its staff the full spectrum of training that is being recommended by national experts, UAA professionals, Tribal partners and its own management. OCS anticipates \$219.5 in costs to expand the existing TONE curriculum with the University of Anchorage based on the average cost for 92 new employee training episodes annually. OCS anticipates \$207.5 of travel related costs associated with an additional 2-week training course for new frontline workers. Travel costs are based on an average two-week TONE training expense of \$2,260 per employee. This includes transportation, per diem, and lodging. Prices increase significantly when training occurs between May and October in Anchorage.

Alaska's children and their families deserve caseworkers that have been given the tools and training necessary to provide exemplary services. This total increment reflects a necessary employer effort for the OCS to develop and maintain a professional work force.

Department Measures

C: Result - Outcome Statement #3 Children who come to the attention of the Office of Children's Services are, first and foremost, protected from abuse or neglect.

Target #1 Decrease the rate of substantiated allegations of child abuse and neglect in Alaska.

Target #2 Decrease the rate of repeat maltreatment to meet or exceed the national standard of 6.1 percent.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Services Training (2667)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions			
										PFT	PPT	NP	
Target #3 Decrease the percentage of substantiated maltreatment by out-of-home providers. Target #4 Annual employee turnover rate; number of positions available to provide direct services. OCS Measures A: Result - To prevent abuse and neglect of children. Target #1 Increase the number of Early Intervention/Infant Learning Program screenings for children age 0 - 3 to meet federal requirements. A1: Strategy - Improve the referral process from Children's Protective Services to Early Intervention/Infant Learning Program services. Target #1 Increase the percentage of child protection services referrals to children ages 0 - 3 and attain federal compliance. A2: Strategy - To reunify children in out-of-home placements with parents and caretakers as soon as it is possible. Target #1 Increase the rate of children reunified with their parents or caretakers within 12 months of removal.													
		Subtotal	1,824.8	18.0	343.3	1,463.5	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****													
		Totals	1,824.8	18.0	343.3	1,463.5	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Front Line Social Workers (2305)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		37,389.2	32,602.9	288.5	3,699.6	274.4	343.0	180.8	0.0	420	1	14
1002 Fed Rcpts		13,329.0										
1003 G/F Match		6,534.4										
1004 Gen Fund		14,869.8										
1007 I/A Rcpts		2,133.0										
1037 GF/MH		148.6										
1108 Stat Desig		374.4										
Subtotal		37,389.2	32,602.9	288.5	3,699.6	274.4	343.0	180.8	0.0	420	1	14
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680012 Transfer System Reform Administrator (06-9130) to Management Component to align Personal Services Costs												
Trout		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
Transferring System Reform Administrator Position to Management Services Component to align personal services. Management positions and other administrative services positions are budgeted in the Management Services component.												
ADN 0680012 Realign grant authorization to services line to reflect operations												
LIT		0.0	0.0	0.0	180.8	0.0	0.0	-180.8	0.0	0	0	0
Transfer excess grant line item authority to the services line item. This shift in authority will realign authorization with anticipated services line item expenditures incurred to provide child protection services such as investigations, crisis intervention and case management services. The excess grant authority is available as the Office of Children's Services does not anticipate awarding grants from this component.												
ADN 0680012 Budget Existing Positions and Delete Expired Non-Perms												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2	0	-7
The following 6 established Non Perm Positions are being added to the budget: 06-#171 Permanent PCN is 06N07016 06-#172 Permanent PCN is 06N07049 06-#173 Permanent PCN is 06N07063 06-#175 Permanent PCN is 06N07080 06-#174 Permanent PCN is 06N07103 06-#176 Permanent PCN is 06N07104												
06-#165 - Adding PFT established Accounting Clerk II to replace prior budgeted non-perm position. Southeast Regional Office established a permanent position to perform the ongoing work. PCN for the permanent position is 06-9268 and replaces non-perm PCN 06-N06029.												
06-#184 - Adding new PFT Social Services Associate to replace expiring non-permanent position PCN 06-07N016.												
The following 13 expired non-permanent positions are being deleted. 06-N06019 06-N06029 06-N06035												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Front Line Social Workers (2305)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
06-N06050												
06-N06086												
06-N035												
06-3022S												
06-3042S												
06-3642S												
06-3663S												
06-3935S												
06-4541S												
06-3021S												
Subtotal		37,389.2	32,602.9	288.5	3,880.4	274.4	343.0	0.0	0.0	421	1	7
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Implementation of Front Line Workload Study Recommendations - Phase 2												
Inc		860.9	602.7	30.5	204.8	15.5	7.4	0.0	0.0	10	0	0
1002 Fed Rcpts		260.9										
1003 G/F Match		600.0										

In response to legislative concerns and Citizen's Review Panel findings, the Department contracted with Hornby Zeller Associates in 2006 to conduct a six-month workload study and analysis to determine whether or not front line caseworkers have sufficient time to meet the basic requirements of their jobs -- protecting children and serving families.

The six-month study compared the time needed to handle a case appropriately to the time available for case-specific work and caseload per worker. Staff was categorized by the type of work completed by each position: intake, ongoing, generic, licensing and supervision. A random moment survey and time study was conducted for a six-week period, and Online Resources for the Children of Alaska system (ORCA) data was analyzed.

Findings indicated, but were not limited to the following.

* Of 132.1 hours available for work each month (excludes nonwork time and training):

- case specific time for supervisors is 84 hours per month, 86 hours for licensing workers, 111 hours for urban and midsized regional area workers, and 105 for workers in remote areas;

- Administrative time for supervisors is 40.4 hours per month, 38.2 for licensing workers, 13.4 for urban and midsized regional area workers, and 19.15 hours for workers in remote areas.

* Of the types of cases handled by workers, permanency cases require the most time - up to 19.9 hours per month; in-home services with court involvement consume 11.9 hours per month; investigations 9 hours per month; licensing assessments 5.8 hours; and intake 3.2 hours.

* Face-to-face contact occurs most frequently among intake workers; workers in remote areas are in contact with clients less frequently in part due to fewer clients, more time necessary for court preparation, and travel.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Front Line Social Workers (2305)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

In summary, the results published indicate a need for 19 additional workers. OCS has noted an error in the study accounting and determined the need to be 17 additional workers after adjustments for unassigned existing positions. The OCS received 6 additional workers in FY 2008 and is now requesting funding for 7 of the remaining recommended positions and 3 administrative staff workers.

The OCS is requesting 3 support positions to help alleviate some of the administrative duties that fall on line workers. The workload study revealed that line workers spend an average of 12.4% of their time on administrative tasks. OCS has increased its frontline staff by 63 positions over the last 3 years.

The addition of these workers had a significant impact on the total number of workers available to provide direct services at any given time - an increase of 14% from 2004 to 2005 and an additional 5% from 2005 to 2006, holding steady in 2007. In addition, vacancy rates fell from 11.35% in FY 2006 to 9.5% in FY 2007.

Request:

7 Social Worker IIs - Range 18
 4 Anchorage @ 97.2
 3 Wasilla @ 97.2
 Total Line Workers: 680.4

3 Administrative Clerk III - Range 10
 1 Fairbanks @ 60.2
 1 Anchorage @ 60.1
 1 Wasilla @ 60.2
 Total Admin Clerks: 180.5

260.9 Federal, 600.0 General Funds for 860.9 Total

Adequate staffing in OCS will impact the achievement of several desired end results for this division. This request for additional front line workers rides on the back of the above referenced Workload Study and follows three years of staffing increases for OCS.

Almost all division and department performance measures pivot upon the ability of frontline workers to provide the direct services required to keep children safe. Without adequate staffing, caseload numbers increase, the ability to provide quality service decreases, worker frustration increases, and people leave their jobs. Funding of this request directly impacts the following end results and all efforts to meet them:

Department Level Measures:

End Result C: Outcome Statement #3: Children who come to the attention of the Office of Children's Services are first and foremost protected from abuse or neglect.

Strategy: C3: Children placed outside of the home are protected from further abuse and neglect.

Strategy: C4: Retain an effective and efficient workforce.

Division Level Measures:

End Result: A. To prevent children from abuse and neglect.

A2: To reunify children in out-of-home placements with parents or caretakers as soon as it is safe to do so.

A3: Safe and timely adoptions.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Front Line Social Workers (2305)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Increased Lease Costs - Anchorage												
	Inc	583.3	0.0	0.0	583.3	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		143.3										
1004 Gen Fund		440.0										

In FY 2003, the Division of Family and Youth Services, predecessor to the Office of Children's Services (OCS), recognized the need for increased space for division staff in Anchorage. The division requested and received \$550.0 from the legislature to procure the additional lease space required.

A Request for Proposals (RFP) was issued to procure 30,500 square feet of office space for 132 employees. The proposal was challenged, and in 2005, OCS was still without additional space.

Since the original request in FY 2003, the OCS Anchorage office staff has increased in size by 44 positions. This increase is in part due to the increased number of line workers in the Anchorage office as well as the transfer in of positions from the Division of Public Health as a result of the Department of Health and Social Services reorganization of 2004. OCS staff in Anchorage are currently housed in 3 different buildings with more than 40% of professional frontline workers sharing office space.

In May of 2005, the OCS received permission to resurrect the 2-year old RFP and update it based on new staff counts. A new RFP was issued in 2006 and after more challenges and false starts, OCS is finally planning to move to new space in March of 2008.

Since the original funds were appropriated, costs have increased due to the higher number of staff. Also, the space needs have been reconfigured to comply with state standards, resulting in increased square footage. The new space configuration provides for adequate security and safety of OCS employees and clients.

In addition, the OCS has absorbed \$81.0 in lease costs to support a recently established facility known as Alaska CARES. Alaska CARES is a very successful Children's Advocacy Center (CAC) in the Anchorage Providence Alaska Medical Center that provides waiting areas, interview rooms, and exam rooms -- a "one-stop" center for children and non-offending family members experiencing the crisis of sexual and/or severe physical abuse.

The center also provides Multidisciplinary Team (MDT) staff offices, training facilities, and meeting space. The foundation of a CAC is the MDT. Alaska CARES MDT members include staff from Alaska CARES, the Anchorage Police Department, Office of Children's Services, medical practitioners, mental health professionals, prosecutors, victim advocates, and prevention. MDTs, while never working directly with a victim, guide a case through the investigatory process that may lead to prosecution while making certain all non-offending family members receive the appropriate services to help them through the trauma. The CAC provides the best setting in which an investigation can occur to assure victims are not re-traumatized by repeated interviews and examinations.

With these changes, the OCS finds itself in need of \$583.3 to fully fund current space needs over that which was funded in FY 2003. AKSAS records show that the Anchorage regions expended about \$45.0 on leased space in 2003. Costs are currently \$576.9. Costs in FY 2008 will increase to \$1,160.2. Without this funding, OCS will be forced to cut services in other areas of the budget to cover increased lease costs.

While a comfortable, adequately sized space in which to work should be provided to every employee, this request also addresses OCS's ongoing recruitment and retention issues. It also is directly related to the OCS's efforts to provide prevention services to children who come into the OCS system. Currently, all prevention service staff for OCS are housed in the Frontier Building, completely separate from regional and field staff. Bringing management, child protective services, and prevention staff into the same building will promote communication and interaction, thus promote the awareness of prevention services available to children and families.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Front Line Social Workers (2305)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The additional meeting space available to staff in the new Anchorage Office of Children's Services (OCS) building enhances the ability of OCS staff to partner with other professionals in Alaska's child protection system and invite stakeholders to gather face-to-face in a collaborative effort to improve the system. Having the ability to host large meetings on OCS premises also provides OCS with a real opportunity to educate and engage the Anchorage community about the realities of child abuse and neglect, i.e., child abuse and neglect is a social, community-based problem which requires a community-based response. Caseworkers, law enforcement officials, guardians ad litem, parents, extended family members, tribal partners, school officials, foster parents, court system officials, health care and social services providers, members of the clergy, attorneys, and the business community must all work together for the best interests of Alaska's children.

In September, 2007, OCS conducted a staff survey that included the statement: the agency has strong relationships with the community. 40.7% of the 344 staff that responded agree with the statement while 27.6% were undecided and 31.7 disagreed. This request will help to increase and enhance community relationships that currently exist simply by providing an adequate and comfortable meeting place.

This request relates directly to the following performance measures:

Department Measures

C: Result - Outcome Statement #3 Children who come to the attention of the Office of Children's Services are, first and foremost, protected from abuse or neglect.

Target #4 Annual employee turnover rate; number of positions available to provide direct services.

OCS Measures

A: Result - To prevent children from abuse and neglect.

Target #1 Increase the number of Early Intervention/Infant Learning Program screenings for children age 0 - 3 to meet federal requirements.

A1: Strategy - Improve the referral process from Children's Protective Services to Early Intervention/Infant Learning Program services.

Target #1 Increase the percentage of child protection services referrals to children ages 0 - 3 and attain federal compliance.

A2: Strategy - To reunify children in out-of-home placements with parents and caretakers as soon as it is possible.

Target #1 Increase the rate of children reunified with their parents or caretakers within 12 months of removal.

Transfer out Interagency Receipts to Infant Learning Program

	Trout	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
1007 I/A Rcpts	-425.0	-425.0	0.0	0.0	-425.0	0.0	0.0	0.0	0.0	0	0	0

Infant Learning Program (ILP) receives an annual Reimbursable Services Agreement (RSA) from Medicaid for services provided to children who are Medicaid eligible. This Line Item Transfer (LIT) provides adequate authority to process the RSA.

FY 09 Bargaining Unit Contract Terms: General Government Unit

	SalAdj	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
1002 Fed Rcpts	591.8											
1003 G/F Match	344.2											
1004 Gen Fund	725.8											
1007 I/A Rcpts	44.7											
1108 Stat Desig	6.0											
		1,712.5	1,712.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Front Line Social Workers (2305)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$1,712.5												
Subtotal		40,120.9	34,918.1	319.0	4,243.5	289.9	350.4	0.0	0.0	431	1	7
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
SalAdj		596.7	596.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		192.6										
1003 G/F Match		83.4										
1004 Gen Fund		254.6										
1007 I/A Rcpts		47.3										
1108 Stat Desig		18.8										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$596.7												
Totals		40,717.6	35,514.8	319.0	4,243.5	289.9	350.4	0.0	0.0	431	1	7

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Family Preservation (1628)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	10,440.6	0.0	121.3	1,103.1	0.0	0.0	9,216.2	0.0	0	0	0
1002 Fed Rcpts		7,440.0										
1004 Gen Fund		2,300.7										
1007 I/A Rcpts		699.9										
	Subtotal	10,440.6	0.0	121.3	1,103.1	0.0	0.0	9,216.2	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	10,440.6	0.0	121.3	1,103.1	0.0	0.0	9,216.2	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	322.4	0.0	0.0	0.0	0.0	0.0	322.4	0.0	0	0	0
1004 Gen Fund		322.4										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching GF through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Family Preservation (1628)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Performance Measures Affected:

- Dept-Core Services--Manage health care coverage for Alaskans in need
- Dept-Core Services--Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of Proshare Financing

Trin	76.9	0.0	0.0	0.0	0.0	0.0	76.9	0.0	0	0	0
1004 Gen Fund	76.9										

In SFY 08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid; Services however, these services are provided by other divisions. Children's Services/ Family Preservation statewide grants to non-profit agencies to provide services that keep children safe in their own homes, strengthen and support adoptive, foster, and extended families. This transfer of \$76.9 is necessary to give the division the funding needed to continue these services.

This increment will help the department improve the following performance measures:

- Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- DBH-A-1-A2.1b-Improve and enhance the quality of life of Alaskans with SED, SMI and /or a substance abuse disorder through the development of a comprehensive, integrated BH service system
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- HCS-B--T1-Increase the number of providers
- DPH-A---Healthy people in healthy communities
- DPH-A--A2-Reduce suffering, death and disability due to chronic disease
- DPH-A--A4-Assure access to early preventative services and quality health care
- SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services

Continued Support for Child Advocacy Centers

Inc	1,300.0	0.0	0.0	0.0	0.0	0.0	1,300.0	0.0	0	0	0
1004 Gen Fund	1,300.0										

In 2002, the Division of Family and Youth Services, predecessor to the Office of Children's Services (OCS), requested federal authority in order to receive and utilize federal grants from the United State Department of Justice, Office of Juvenile Justice and Delinquency Prevention (OJJDP) to establish and operate Child Advocacy Centers in Alaska. Alaska was to receive specific funding for a 5-year period beginning in 2001/2002. From the beginning of Phase 1 of the project through 2007, Alaska has established and helped to maintain seven fully functioning CAC's located in Juneau, Wasilla, Anchorage, Nome, Bethel, Dillingham, and Fairbanks. To date, the CACs in Juneau, Anchorage, and Wasilla are nationally accredited and Fairbanks CAC accreditation is pending.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Family Preservation (1628)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Beginning in July 2005, Alaska Statute 47.17.033 required that all child sexual abuse interviews be videotaped at a Child Advocacy Center (CAC) whenever possible. Because this Statute states "whenever possible", it is not an absolute mandate. However, OCS believes legislative intent strongly urged utilization of the Child Advocacy Centers and alluded to "whenever possible" only because there were few centers available at the time. Nonetheless, OCS has committed to the use of CACs statewide and to making certain CACs are available where needed.

In SFY07, OCS Child Protective Services investigated 2,837 reports of child sexual and physical abuse. Of these 2,837 reports, 1,378 or 49% were referred to Alaska's Child Advocacy Centers.

Region/Area	Sexual Abuse	Physical Abuse	Total Allegations	Total Referrals
Anchorage	287	859	1,146	720 - 63%
Northern	126	374	500	197 - 39%
Southcentral	279	587	866	329 - 38%
Southeast	80	245	325	132 - 41%
TOTAL	772	2,065	2,837	1,378 - 49%

Child Advocacy Centers provide child sexual abuse and severe physical abuse victims age 0 through 18 and their non-offending parents a safe, child-friendly place to interview, receive forensic medical examinations, and mental health services or referrals. Each victim is assigned a specialized family advocate who will remain with the child and family throughout the investigative process. CAC interviews are legally sound and neutral, and they coordinate fact-finding to avoid duplicative interviews.

The foundation of a CAC is the Multidisciplinary Team (MDT) that is comprised of community, tribal, medical, social service, and legal representatives. MDTs, while never working directly with a victim, guide a case through the investigatory process that may lead to prosecution while making certain all non-offending family members receive the appropriate services to help them through the trauma. The CAC provides the best setting in which an investigation can occur to assure victims are not re-traumatized by repeated interviews and examinations.

Each MDT receives training from Office of Juvenile Justice and Delinquency Prevention (OJJDP) Regional Children's Advocacy Centers (RCACs). The RCACs provide regional services to help strengthen Children's Advocacy Centers, and provide training that allows each MDT member, from their specific approach, to serve each family with the least amount of intrusion upon the victims.

Currently, there are fully trained MDT's in Kotzebue, Homer, and Kenai. These areas are ready for CACs. In addition, Galena, Glenallen, and Ketchikan are in various stages of developing MDTs, and the OCS continues to receive inquiries, most recently from Prince of Whales Island, regarding development of new MDTs and CACs.

To date, a good portion of the costs to establish Alaska's CACs and MDTs have been funded through OJJDP federal grants. Once established, the CACs work hard to find other sources of support through grants and fund raisers. The state continues to provide annual support to each CAC and estimates the need for an average of \$212.0 annually to continue current levels of support for each existing CAC, for a total of \$1,488.2.

The OCS has \$1,123.5 in federal funds remaining to move forward to the second phase of the project - establishment of CACs statewide. The OCS estimates a cost of \$935.3 to establish it's goal of two new CACs in FY 2009. As these two CACs in Kotzebue and Homer/Kenai become more self-supporting, the OCS plans to divert available funds to continue development of CACs in Galena, Glenallen, and Ketchikan as their MDTs are trained and ready to begin work through a CAC.

This request asks for \$1,300.0 in general funds to maintain the current level of CAC support in FY 2009. It should be noted that the OCS may need to ask for

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Family Preservation (1628)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

continued legislative support in FY 2010, when no federal dollars are available.

CACs are in place to assure Alaska children are not re-traumatized after experiencing child sexual abuse or severe physical abuse and that all non-offending family members receive support and treatment when required. This supports OCS's mission to promote stronger families, safer children. While every OCS performance measure is geared toward that goal, CACs are more closely attached to the following measures:

Department Measures

C: Result - Outcome Statement #3 Children who come to the attention of the Office of Children's Services are, first and foremost, protected from abuse or neglect.

- Target #1 Decrease the rate of substantiated allegations of child abuse and neglect in Alaska.
- Target #2 Decrease the rate of repeat maltreatment to meet or exceed the national standard of 6.1 percent.

MH Trust: BTKH - Foster Parent and Parent Services: recruit, train, support

Inc	150.0	0.0	0.0	150.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH	75.0										
1092 MHTAAR	75.0										

Project provides resources to recruit and screen potential foster parents, and provide training and technical assistance for parents and foster parents. Therapeutic Foster Homes are recognized in BTKH planning as an economical and effective alternative to costlier types of residential care for youth experiencing serious emotional disturbance (SED). Funding would utilize contractors to recruit and screen foster parents, and to provide technical assistance that would assist in retaining these parents. Biological parents would also be included in relevant trainings as available. This is new funding for FY09 at \$75.0 MHTAAR and \$75.0 GF/MH.

Subtotal	12,289.9	0.0	121.3	1,253.1	0.0	0.0	10,915.5	0.0	0	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

Totals	12,289.9	0.0	121.3	1,253.1	0.0	0.0	10,915.5	0.0	0	0	0
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Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Base Rate (2236)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	10,245.9	0.0	95.8	144.4	0.0	0.0	10,005.7	0.0	0	0	0
1002 Fed Rcpts		2,927.4										
1003 G/F Match		3,845.7										
1004 Gen Fund		1,730.1										
1156 Rcpt Svcs		1,742.7										
	Subtotal	10,245.9	0.0	95.8	144.4	0.0	0.0	10,005.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	10,245.9	0.0	95.8	144.4	0.0	0.0	10,005.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
IV-E Federal Fund Participation Decrease												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-57.1										
1003 G/F Match		57.1										
Increase Receipt Supported Services for Child Support Enforcement Collections												
	Inc	600.0	0.0	0.0	0.0	0.0	0.0	600.0	0.0	0	0	0
1156 Rcpt Svcs		600.0										

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual Federal Medical Assistance Percentage rate. This statutory rate is used for Title IV-E funded programs that reimburse foster parents and providers for services provided to children in state custody. This decreased rate will take effect on October 1, 2008.

The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. The amount of federal funds the state receives depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

This fund source change effects every aspect of the OCS's ability to provide services to children in need.

This request assures the OCS can collect all child support enforcements reimbursements collected for child welfare recipients. Under Title VI-D and VI-E of the Social Security Act, states must pursue the collection of child support for children in state custody. The state Child Support Services Division (CSSD) must, under federal law, collect child support from the biological parents of children in state custody. Those collections are then used to offset the Office of Children's Services (OCS) expenditures for foster care for these children. Those collections come into the division as Receipt Supported Services (RSS) funds. In FY 2007, DSSD collections exceeded the authority available to OCS by more than \$400.0. This request for \$600.0 in RSS authority in the Foster

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Base Rate (2236)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Care Base component will assure that OCS will have adequate authority to accept all of the CSSD collections.												
Once these funds are received by OCS, Federal fund participation is calculated and the federal Administration for Children and Families Title IV-E program is refunded. Remaining funds offset Foster Care Base expenditures preventing the need for additional general fund requests related to growth.												
	Subtotal	10,845.9	0.0	95.8	144.4	0.0	0.0	10,605.7	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
AMD: Foster Care Base Rate Increase Proposal												
	Inc	3,165.5	0.0	0.0	0.0	0.0	0.0	3,165.5	0.0	0	0	0
1002 Fed Rcpts		378.6										
1004 Gen Fund		2,786.9										

Each day foster families make a difference by providing safe and caring homes for children who are unable to remain in their own homes because of abuse or neglect. Alaska, like most states, has an ongoing need for foster parents, especially homes that can care for sibling groups, teenagers, and children with disabilities.

There are approximately 1,200 foster homes in Alaska that house upwards of 2,000 children at any given time. Foster homes are temporary homes as the state works to reunify children with their families, or in some cases find adoptive parents for the child. Foster homes receive monthly reimbursement for the costs of care provided to foster children. Expenditures that are reimbursed include food, clothing, daily supervision, personal items, school supplies, games and recreational activities, allowance, usual transportation costs, and other items relevant to raising a child.

There has not been a foster care standard rate increase for eight years. This request to increase rates paid to the people of Alaska willing to bring children who have had to be removed from their own homes into their homes, and to care for them, is long overdue.

As the costs of raising children has increased, social workers must use other means to adequately reimburse care providers, forcing expenditure increases in other areas of the budget, in particular Augmented Rates and Foster Care Special Needs. It is reasonable to assume that the Divisions of Public Assistance, Behavioral Health, and Senior and Disabilities Services have also experienced cost increases as social workers and foster parents work for adequate reimbursement of the costs of care.

Beginning in 1990, the Department could include in its annual budget request to the governor's budget office, and ultimately the legislature, a request for sufficient funds to increase the family foster care base rate based on the federal poverty guideline. 7AAC 53.020. This strategy worked for the first two years. Since, there has been one family foster care rate increase in the last fifteen years and that was eight years ago. Even then, the rate increase was based on a four-year old poverty guideline.

The rate setting methodology for family foster parents became effective 16 years ago. Since that time, there have been three rate adjustments:

- FY 1991 (effective July 1, 1990) - based on 1989 poverty guideline - \$20.49
- FY 1992 (effective July 1, 1991) - based on 1990 poverty guideline - \$21.48
- FY 1999 (effective July 1, 1998) - based on 1993 poverty guideline - \$23.84

The foster care base rate is calculated using a standard rate provided by the United States Health and Human Services (HHS) Poverty Guidelines. The 1993 standard rate is currently applied.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Base Rate (2236)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This FY2009 increment is proposing to utilize the FY 2007 standard rate of \$34.98 as published in the US HHS Poverty Guidelines for an Alaska family unit of one and applies a seven-year median average growth rate. A percentage of the standard rate will apply to the following age ranges:

- (A) birth through 29 months - 90 percent
- (B) 30 months through 11 years - 80 percent
- (C) 12 years through 19 years - 95 percent

After the standard (or base) rate has been determined and adjusted by percentage for age or emergency shelter status, the final foster parent daily rate is multiplied by the geographic cost-of-living differential. This differential was set originally by Kenneth M. McCaffres in his arbitrated decision on Alaska Geographic Wage Differentials dated October 24, 1986. It was adopted for determining the foster care rate. Its application to the family foster care rates is spelled out in the administrative code.

The differential is based on where the child is living. For example Anchorage and Juneau are both coded at the base rate adjusted for age. Currently this is \$21.45 per day for a 1 year old. If the foster parents move to a community with a higher cost of living, their daily rate is adjusted based on the differential. For example, if the child moves from Anchorage to Ambler, Big Horn, Canyon Village, Fort Yukon or Deadhorse, the daily rate for the same 1 year old increases to \$30.46 per day (an increase of \$9.01 per day). Of course, if the family moves from Fort Yukon to Anchorage, their family rate decreases by \$9.01 per day.

All communities in the state are coded for the differential rate. The rate changes when the address for the child and thus the monthly payment to the foster family changes. It is the responsibility of the social worker as the case manager to enter a change of address when the child's address changes.

Under this incremental request, foster care for a 1 year old in Anchorage or Juneau would increase from \$21.45 to \$32.06 per day. Example:

FPL in use = \$23.84*90%=\$21.45 x 30.25 days = \$645.86 monthly
 Current FPL = \$34.98*90% = \$37.48 x 30.25 days = \$952.27 monthly

Incremental Request Calculations:

7 year median average FTEs	1,181
2007 Annual cost	10,086,071
Average monthly cost per FTE	712
Percent daily increase	31.39%
Monthly rate increased	935
Monthly cost	1,104,299
Annual cost	13,251,584
Incremental Need	3,165,513

Foster homes are licensed and in place to assure children who must be removed from their homes under traumatic circumstance are cared for appropriately and adequately. Adequate reimbursement to foster parents for the cost of providing the best possible care to foster children under these most difficult circumstances has a direct effect on OCS's ability to recruit and retain good homes and therefore has some impact on every OCS outcome.

Department Measures

C: Result - Outcome Statement #3 Children who come to the attention of the Office of Children's Services are, first and foremost, protected from abuse or

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Base Rate (2236)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
neglect.												
Target #1 Decrease the rate of substantiated allegations of child abuse and neglect in Alaska.												
Target #2 Decrease the rate of repeat maltreatment to meet or exceed the national standard of 6.1 percent.												
Target #3 Decrease the percentage of substantiated maltreatment by out-of-home providers.												
Target #4 Annual employee turnover rate; number of positions available to provide direct services.												
OCS Measures												
A: Result - To prevent children from abuse and neglect.												
Target #1 Increase the number of Early Intervention/Infant Learning Program screenings for children age 0 - 3 to meet federal requirements.												
A1: Strategy - Improve the referral process from Children's Protective Services to Early Intervention/Infant Learning Program services.												
Increased Cost for Foster Parent Payment Due to Growth												
	Inc	3,384.6	0.0	0.0	0.0	0.0	0.0	3,384.6	0.0	0	0	0
1002 Fed Rcpts		414.0										
1004 Gen Fund		2,770.6										
1156 Rcpt Svcs		200.0										

OCS has identified current trends resulting in increased funding needed to reimburse foster parents for care provided to children in custody. Current growth rates of about 15 percent indicate a need for \$2,770.6 in general funds to match \$414.0 in federal funds.

This request also amends the existing FY 2009 budget request for a \$600.0 increase in Receipt Supported Services (RSS) authority. New projections for RSS collections indicate that an additional \$200.0 of authorization (for a total of \$800.0) may be needed to cover costs for increased foster care caseload.

There are approximately 1,200 licensed foster homes in Alaska that provide care to over 2,000 abused and neglected children at any given time. Foster homes provide temporary care for children in state custody while the state works to rehabilitate and reunify children with their families. In some cases, reunification is not an option and foster homes are used while the state seeks adoptive parents for the child. Foster homes receive monthly reimbursement for the costs of care provided to foster children. Expenditures that are reimbursed include food, clothing, daily supervision, personal items, school supplies, games and recreational activities, allowance, usual transportation costs, and other items relevant to raising a child.

The Office of Children's Services monitors and projects foster care costs for base rates by FTE (full time equivalent) calculated on the number of days service is provided rather than the number of children that receive services. FTEs provide the division with a more accurate picture as children move in and out of the system regularly. One FTE equals thirty days of services provided.

Not unlike many other states in the nation, Alaska has been experiencing increased volume of workload, reports of abuse and neglect, and investigations that have resulted in increased FTEs for foster care base services. In FY 2007:

Protective Services Reports increased 11.8%;
 Investigations completed increased 15.1%;
 Substantiated investigations increased 8%;
 Children removed from the home 36.4%

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Base Rate (2236)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

While the reasons for the increases are difficult to pinpoint, national trends indicate an increase in neglect cases with methamphetamine use and mental health being cited as two of the reasons. For example, the State of Washington is currently experiencing a 16 percent increase in the numbers of children in foster homes. Alaska's growth has increased by 15.2 percent in FY 2007 and is on track to increase 15.5 percent in FY 2008. With the uncertainty of the economy, casework trends, and national trends that do not indicate a slowing of children entering into the system, the OCS must move forward under the assumption that increases in the number of children in FY 2009 will follow those experienced in FY 2007 and FY 2008.

A 12 year history of foster care FTEs with FY 2008 projected through fiscal year end and based on monthly averages to date, clearly shows marked increases over the last two years. These marked increases begin in FY 2006 after a stagnant period of 6 years. With historical expenditures within such close proximity for so many years, the OCS was cautious about increases in FY 2007 but now is seeing the same increases in FY 2008 and has no reason to believe FY 2009 will experience decreases. The following lists FTE averages and percentage increase for the past 12 years:

FY	Ave FTEs	% Increase
1996	878	
1997	846	-4%
1998	990	17%
1999	1,150	16%
2000	1,216	6%
2001	1,141	-6%
2002	1,090	-4%
2003	1,125	3%
2004	1,170	4%
2005	1,215	4%
2006	1,358	12%
2007	1,564	15%
2008	1,807	16% Projected

The current average cost per FTE is \$724.00 per month. Rates are determined in consideration of a child's age and the location of the foster home. For example, foster parents receive reimbursement for the cost of a one-year old child in Anchorage or Juneau at a daily rate of \$21.45. If that same child were to be placed in Fort Yukon, the daily rate increases by \$9.01 to \$30.46.

Calculations below set out the division's projected costs based on a current average monthly rate of \$724.00:

FY 2006 monthly average FTEs 1,358 @ \$724.00 per month for annual total of \$11,798,304
 FY 2007 monthly average FTEs 1,564 @ \$724.00 per month for annual total of \$13,588,032
 FY 2008 projected average FTEs 1,807 @ \$724.00 per month for annual total of \$15,699,216
 FT 2009 projected average FTEs 2,087 @ \$724.00 per month for annual total of \$18,131,856

A supplemental request has been submitted for FY 2008, and this amendment request brings that anticipated shortfall into the base budget as follows:

Additional cost in FY 2008 = \$2,111,184
 Additional RSS in FY 2008 = 680,000 (net \$800.0 - \$120.0 for retroactive federal reimbursement)
 Additional GF to cover growth = 1,245,130
 Additional Federal to cover growth = 186,053

The included amendment request related to growth in FY 2009 has been calculated as:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Base Rate (2236)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Additional cost in FY 2009 =		\$2,433,421										
Additional RSS in FY 2008/2009 =		680,000 (net \$800.0 - \$120.0 for retroactive federal reimbursement)										
Additional GF to cover growth =		1,525,476										
Additional Federal to cover growth =		227,945										
Total request for anticipated growth in FY 2008 and FY 2009:												
Rcpt Sup Svcs=		200.0										
General Funds =		\$2,770.6										
Federal Funds =		\$ 414.0										
Total =		\$3,384.6										
This calculation does not take into consideration any pending, potential foster care base rate increases as those numbers are currently being determined under contract with Meyers and Stauffer at the department level.												
By federal law, states are required to collect child support from the biological parents of children in the child welfare system. In SFY08, the division believes it possible to collect approximately \$2,400.0 in RSS but has only \$1,742.0 of RSS authorization. The OCS is requesting an additional \$200.0 in RSS authority through this amendment in addition to the \$600.0 requested in the FY 2009 Governor's budget.												
While this \$2,400.0 projection is based on prior year collections and the increase in the number of FTEs, the amount of RSS collected is under the purview of the Child Support Services Division (CSSD) in the Department of Revenue. If the CSSD experiences high turnover, changes in priorities, or system problems, the amount of RSS collected for the OCS can drop. It should also be noted that the OCS is obligated to repay the federal government for any amount of funding collected on behalf of a child that was eligible for Title IV-E reimbursement during the time period in which the child support obligation was incurred. Of this \$800.0 request, the OCS can assume about \$120.0 will be reimbursed to the Administration for Children and Families.												
This amendment request is for a total of \$3,384.6: \$2,770.6 in general funds, \$414.0 in federal funds, and \$200.0 in RSS.												
Totals		17,396.0	0.0	95.8	144.4	0.0	0.0	17,155.8	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Augmented Rate (2237)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,126.1	0.0	0.0	0.0	0.0	0.0	2,126.1	0.0	0	0	0
1002 Fed Rcpts		396.2										
1003 G/F Match		1,229.9										
1037 GF/MH		500.0										
	Subtotal	2,126.1	0.0	0.0	0.0	0.0	0.0	2,126.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	2,126.1	0.0	0.0	0.0	0.0	0.0	2,126.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
IV-E Federal Fund Participation Decrease												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-7.7										
1003 G/F Match		7.7										
	Subtotal	2,126.1	0.0	0.0	0.0	0.0	0.0	2,126.1	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	2,126.1	0.0	0.0	0.0	0.0	0.0	2,126.1	0.0	0	0	0

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual Federal Medical Assistance Percentage rate. This statutory rate is used for Title IV-E funded programs that reimburse foster parents and providers for services provided to children in state custody. This decreased rate will take effect on October 1, 2008.

The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. The amount of federal funds the state receives depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

This fund source change effects every aspect of the OCS's ability to provide services to children in need.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Special Need (2238)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	3,362.0	0.0	0.5	1,022.6	0.0	0.0	2,338.9	0.0	0	0	0
1002 Fed Rcpts		860.7										
1003 G/F Match		192.3										
1004 Gen Fund		1,361.1										
1007 I/A Rcpts		200.0										
1037 GF/MH		747.9										
	Subtotal	3,362.0	0.0	0.5	1,022.6	0.0	0.0	2,338.9	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	3,362.0	0.0	0.5	1,022.6	0.0	0.0	2,338.9	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Increase Child Care Benefits for Child Protective Services												
	Inc	1,295.1	0.0	0.0	100.0	0.0	0.0	1,195.1	0.0	0	0	0
1007 I/A Rcpts		1,295.1										

All too often children in the child welfare system experience multiple losses of caregivers and multiple out-of-home placements, increasing their vulnerability as well as their risk for attachment disorders and other social and emotional problems. Stable foster homes and consistent child care for these children are paramount to their long term success.

Family foster care is an essential and valuable child welfare service for children who must be separated from their parents because of physical abuse, sexual abuse, neglect, maltreatment, special medical needs, or other circumstances. In order to recruit and maintain stable, quality foster homes, foster parents must be fairly compensated. For foster parents with young children in their homes, this includes the full cost of child care. Many foster parents are working parents and have the same child care needs as biological parents. If child care is not adequately reimbursed they are faced with the choice of quitting their jobs, paying out of their own pockets, or no longer taking in young foster children.

Thirty-five percent of protective services reports in Alaska are for children under the age of six. Research has shown that during this critical period, chronic stress can have an especially damaging affect on the developing brain and lead to lifelong learning, behavior, physical health and mental health problems. Children dealing with this special set of physical and emotional concerns require careful consideration when placed in child care. All child care programs are not equal in terms of quality. Staff training, staff retention, child/staff ratios, and programming may be very uneven. These children need compassionate, well-trained teachers in high quality programs providing for their care.

It has been the policy of the Office of Children's Service (OCS) for several years to reimburse foster families, unlicensed relatives, and biological parents needing child protective services child care) a maximum rate of \$550 for full-time child care services. This one rate applies regardless where the family lives or the age of the child. Those who are eligible for child care assistance due to low income status, receive child care assistance from the Department of Health and Social Services Division of Public Assistance (DPA). DPA child care assistance rates are based on geographic location and the age of the child (rates for children under six vary from \$550/month to \$730/month). Foster parents, unlicensed relatives, and biological parents needing child protective services child care who are not income eligible for child care assistance through DPA are receiving the lower \$550/month OCS rate. This creates a disparate system whereby foster parents and unlicensed relatives are receiving less support for this expense.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Special Need (2238)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

In addition, child care utilization rates have increased. This request is based on the increase in utilization experienced from 2004 through 2007. No funding has been requested for child care cost increases since prior to 2004.

OCS child care assistance payments are well below what most child care programs charge. Even DPA child care assistance payments are often below that which child care programs charge. Foster parents and unlicensed relatives are often in the position of paying for the balance of what the child care program charges out of their personal funds or placing the child in child care which may be of questionable quality. This request includes 96.1 to assist foster parents in making up the difference between state approved child care assistance rates and actual rates.

Currently foster parents, unlicensed relatives and biological parents are required to apply for DPA child care assistance, if deemed eligible based on income. They may be eligible for only a portion of the child care assistance reimbursement. When that is the case, DPA pays for a portion of the child care and OCS pays for a portion. This creates a dual approval system and a dual accounting system. It creates confusion on the part of providers who must bill both state agencies, and at worst, creates an opportunity for billing errors and over charging. If child care eligibility and reimbursement could be handled primarily through one system, these issues could be eliminated. This request includes 100.0 to purchase child care administrative services from the Division of Public Assistance so that foster parents are not forced to work with two separate child care agencies.

This request for funding will: (1) allow OCS to provide reimbursement to working foster parents, unlicensed relatives, and biological parents needing child protective services child care at the DPA child care assistance rate; (2) provide additional funds to cover the balance of the child care costs (not covered by the DPA child care assistance rate) when a quality child care program cannot be found for that amount; (3) allow funding to process child care applications in one location for foster parents and unlicensed relatives; and (4) will provide adequate funding for child care utilization by foster parents and relatives.

Request

- 1,099.0 Increased costs to bring OCS daycare rates in line with DPA daycare rates and growth
- 96.1 Estimated average 5% difference between child care assistance rates and actual costs
- 100.0 Estimated cost to purchase services placing all child care under the DPA umbrella

1,295.1 Total Request

This request for foster parent and unlicensed relative child care assistance does not relate directly to any OCS performance measure. It does however promote foster home recruitment and retention and therefore promotes child safety.

Department Measures

C: Result - Outcome Statement #3 Children who come to the attention of the Office of Children's Services are, first and foremost, protected from abuse or neglect.

- Target #1 Decrease the rate of substantiated allegations of child abuse and neglect in Alaska.
- Target #2 Decrease the rate of repeat maltreatment to meet or exceed the national standard of 6.1 percent.
- Target #3 Decrease the percentage of substantiated maltreatment by out-of-home providers.
- Target #4 Annual employee turnover rate; number of positions available to provide direct services.

OCS Measures

- A: Result - To prevent children from abuse and neglect.
- Target #1 Increase the number of Early Intervention/Infant Learning Program screenings for children age 0 - 3 to meet federal requirements.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Special Need (2238)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

A1: Strategy - Improve the referral process from Children's Protective Services to Early Intervention/Infant Learning Program services.
 Target #1 Increase the percentage of child protection services referrals to children ages 0 - 3 and attain federal compliance.

A2: Strategy - To reunify children in out-of-home placements with parents and caretakers as soon as it is possible.
 Target #1 Increase the rate of children reunified with their parents or caretakers within 12 months of removal.

IV-E Federal Fund Participation Decrease

FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-13.7											
1003 G/F Match	13.7											

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual Federal Medical Assistance Percentage rate. This statutory rate is used for Title IV-E funded programs that reimburse foster parents and providers for services provided to children in state custody. This decreased rate will take effect on October 1, 2008.

The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. The amount of federal funds the state receives depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

This fund source change effects every aspect of the OCS's ability to provide services to children in need.

Subtotal	4,657.1	0.0	0.5	1,122.6	0.0	0.0	3,534.0	0.0	0	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

Increased Foster Care Special Need Costs Due to Growth

Inc	1,506.2	0.0	0.0	0.0	0.0	0.0	1,506.2	0.0	0	0	0
1002 Fed Rcpts	180.7										
1003 G/F Match	1,325.5										

OCS has identified current trends resulting in increased reimbursement to foster parents for care provided to children in custody. Current growth rates of about 15 percent indicate a need for \$1,325.5 in general funds to match \$180.7 in federal funds for a total need of \$1,506.2.

There are approximately 1,200 licensed foster homes in Alaska that provide care to over 2,000 abused and neglected children at any given time. In addition to a monthly reimbursement for costs of care related to items every parent would expect to provide, the Office of Children's Services (OCS) provides special funding on an as-needed basis to cover certain costs not covered under foster care base rate reimbursements. These costs include child care for working foster parents; respite care for parents with children at risk; clothing and food in emergency situations; travel related to the safety of a child or for continuity in placements such as foster family vacations or visitation with biological parents; and other costs associated with the individual needs of each child.

The Office of Children's Services monitors and projects foster care costs for special needs by FTE (full time equivalent) calculated on the number of days

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Special Need (2238)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

service is provided rather than the number of children that receive services. FTEs provide the division with a more accurate picture as children move in and out of the system regularly. One FTE equals thirty days of services provided.

Not unlike many other states in the nation, Alaska has been experiencing increased volume of workload, reports of abuse and neglect, and investigations that have resulted in increased FTEs for foster care base services. In FY 2007:

Protective Services Reports increased 11.8%;
 Investigations completed increased 15.1%;
 Substantiated investigations increased 8%;
 Children removed from the home 36.4%

While the reasons for the increases are difficult to pinpoint, national trends indicate an increase in neglect cases with methamphetamine use and mental health being cited as two of the reasons. For example, the State of Washington is currently experiencing a 16 percent increase in the numbers of children in foster homes. Alaska's growth has increased by 15.2 percent in FY 2007 and is on track to increase 15.5 percent in FY 2008. With the uncertainty of the economy, casework trends, and national trends that do not indicate a slowing of children entering into the system, the OCS must move forward under the assumption that increases in the number of children in FY 2009 will follow those experienced in FY 2007 and FY 2008.

A 12 year history of foster care FTEs with FY 2008 projected through fiscal year end and based on monthly averages to date, clearly shows marked increases over the last two years. These marked increases begin in FY 2006 after a stagnant period of 6 years. With historical expenditures within such close proximity for so many years, the OCS was cautious about increases in FY 2007 but now is seeing the same increases in FY 2008 and has no reason to believe FY 2009 will experience decreases. The following lists FTE averages and percentage increase for the past 12 years:

FY	Ave FTEs	% Increase
1996	878	
1997	846	-4%
1998	990	17%
1999	1,150	16%
2000	1,216	6%
2001	1,141	-6%
2002	1,090	-4%
2003	1,125	3%
2004	1,170	4%
2005	1,215	4%
2006	1,358	12%
2007	1,564	15%
2008	1,807	16% Projected

The current average special needs cost per FTE is \$240.00 per month. The division uses this average cost to calculate need but in reality, special needs costs are higher upon a child's entrance into the child welfare system. The following calculation has been used to determine additional need in FY 2008 (supplemental) and for FY 2009 for Foster Care Special Needs:

1,564 FY 2007 average FTEs
 1,807 FY 2008 projected FTEs
 243 projected increase

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Foster Care Special Need (2238)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions			
										PFT	PPT	NP	
\$2,880	FY 2007 average annual cost per FTE												
243	FY 2008 projected increase in FTEs												
\$699,840	projected increase in costs related to FY 2008												
1,807	FY 2008 average FTEs												
2,087	FY 2009 projected FTEs												
280	projected increase												
\$2,880	FY 2007 average annual cost per FTE												
280	FY 2009 projected increase in FTEs												
\$806,400	projected increase in costs related to FY 2009												
Totals		6,163.3	0.0	0.5	1,122.6	0.0	0.0	5,040.2	0.0	0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Subsidized Adoptions & Guardianship (1962)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	21,311.6	0.0	0.0	798.8	0.0	0.0	20,512.8	0.0	0	0	0
1002 Fed Rcpts		11,346.8										
1003 G/F Match		3,134.4										
1004 Gen Fund		6,830.4										
	Subtotal	21,311.6	0.0	0.0	798.8	0.0	0.0	20,512.8	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	21,311.6	0.0	0.0	798.8	0.0	0.0	20,512.8	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in Permanency Funding from Child Protection Legal Services for Legal Services to Adoptions												
	Trin	227.5	0.0	0.0	227.5	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		227.5										
	Subtotal	21,539.1	0.0	0.0	1,026.3	0.0	0.0	20,512.8	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	21,539.1	0.0	0.0	1,026.3	0.0	0.0	20,512.8	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Residential Child Care (253)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	5,152.9	0.0	0.5	72.5	0.0	0.0	5,079.9	0.0	0	0	0
1002 Fed Rcpts		519.5										
1004 Gen Fund		2,677.1										
1037 GF/MH		1,956.3										
Subtotal		5,152.9	0.0	0.5	72.5	0.0	0.0	5,079.9	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		5,152.9	0.0	0.5	72.5	0.0	0.0	5,079.9	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
IV-E Federal Fund Participation Decrease												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-12.2										
1003 G/F Match		12.2										
Subtotal		5,152.9	0.0	0.5	72.5	0.0	0.0	5,079.9	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		5,152.9	0.0	0.5	72.5	0.0	0.0	5,079.9	0.0	0	0	0

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual Federal Medical Assistance Percentage rate. This statutory rate is used for Title IV-E funded programs that reimburse foster parents and providers for services provided to children in state custody. This decreased rate will take effect on October 1, 2008.

The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. The amount of federal funds the state receives depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

This fund source change effects every aspect of the OCS's ability to provide services to children in need.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Infant Learning Program Grants (298)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	8,272.3	431.5	38.2	320.0	5.0	5.0	7,472.6	0.0	5	0	0
1002 Fed Rcpts		2,767.0										
1003 G/F Match		37.8										
1004 Gen Fund		802.7										
1007 I/A Rcpts		183.1										
1037 GF/MH		4,301.7										
1092 MHTAAR		180.0										
Subtotal		8,272.3	431.5	38.2	320.0	5.0	5.0	7,472.6	0.0	5	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680012 Transfer Clerical Position to Children's Svcs Management Component												
	Trout	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
Transfer clerical position (PCN 06-1469) to Children's Services Management Component to realign administrative support services in the division.												
ADN 0680012 Add Research Analyst Position												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
Adding Research Analyst III (PCN #180) in Infant Learning Program.												
Subtotal		8,272.3	431.5	38.2	320.0	5.0	5.0	7,472.6	0.0	5	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in Interagency Receipts from Front Line Social Workers												
	Trin	425.0	25.0	0.0	0.0	0.0	0.0	400.0	0.0	0	0	0
1007 I/A Rcpts		425.0										
ILP receives an annual RSA from Medicaid for services provided to children who are Medicaid eligible. This LIT provides adequate authority to process the RSA.												
Reverse FY2008 MH Trust Recommendation												
	OTI	-180.0	0.0	0.0	-80.0	0.0	0.0	-100.0	0.0	0	0	0
1092 MHTAAR		-180.0										
Includes reduction of MHTAAR support of (\$25.0) for BTKH early childhood comprehensive system grants (Birth to 8 years)												
MH Trust: AB-Gov Cncl - Behavior intervention and supports for early childhood system												
	Inc	80.0	0.0	0.0	0.0	0.0	0.0	80.0	0.0	0	0	0
1092 MHTAAR		80.0										
Grant 1207.1												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Infant Learning Program Grants (298)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The MH Trust: AB-Gov Cncl: Behavior Intervention and Supports for the Early Childhood System is a continuing pilot/demonstration project to gather information about the effectiveness of ongoing, statewide training in the use of positive behavioral supports (PBS) for direct service providers and families supporting individuals who experience developmental disabilities. PBS is an approach to help people improve difficult behavior based on an understanding that people do not control others but seek to support others; a belief that there is a reason behind most difficult behavior and that people with difficult behavior should be treated with compassion and respect and are entitled to effective services and lives of quality; the application of a large and growing body of knowledge about how to better understand people and make humane changes in their lives that can reduce the occurrence of difficult behavior; and a conviction to continually move from coercion - the use of unpleasant events to manage behavior. Specifically, this project targets children receiving early intervention services and early childhood special education. The project is managed by the Office of Children's Services through a grant to an agency experienced in providing PBS training.

This project fills a gap in adequate early behavior intervention and supports, to increase children's chances for succeeding in school and community environments. The number of younger children receiving diagnoses involving dysfunctional behaviors has grown significantly in recent years. Intervention during the early childhood years can alter the course of development to more favorable outcomes, reducing not only the cost of care over time but the burden on the individual, family and society. Evaluation data obtained through this project will demonstrate the efficacy of this model during the early childhood years.

This project was funded in FY08 with \$80.0 MHTAAR and is maintained at that level in FY09 with \$80.0 MHTAAR.

MH Trust: BTKH - Early childhood comprehensive system grants

Inc	75.0	0.0	0.0	0.0	0.0	0.0	75.0	0.0	0	0	0
1092 MHTAAR	75.0										

Grant 1393.01

Project continues grant funding for early intervention with very young children (birth to 6 years of age) at risk of becoming youth experiencing serious emotional disturbance (SED). The funds are disseminated to a single grantee, Juneau Youth Services. They utilize funds to visit daycare sites where young children attend. They work with providers there to assess youth, to develop productive ways of working with them to reduce the possibility that they will be expelled from the facility and to prevent a serious emotional disturbance (SED). This funds an important part of the Bring the Kids Home (BTKH) Initiative plan, namely to intervene early with youth at risk of experiencing an SED. Outcomes focus on the number of youth that are able to maintain placement at their site. Funded at \$100.0 MHTAAR in FY08 and reduced to \$75.0 MHTAAR in FY09.

MH Trust: BTKH - Early childhood mental health learning network and coordinator

Inc	200.0	0.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
1037 GF/MH	100.0										
1092 MHTAAR	100.0										

Project provides funding to create a learning network as a short-term approach to developing knowledge and skills in practicing mental health clinicians and advanced early interventionists. Managed by the DHSS/Office of Children's Services, the project would fund meetings, travel and distance communication to support this learning. It also provides for a state coordinator who would lead this effort. This position would also be responsible for working with complementary systems to ensure that young children with mental health concerns are being identified and directed to developmentally appropriate services. Data strongly supports that infants and toddlers not meeting developmental milestones, who live in high risk families or who are born into otherwise adverse life situations, have a substantially higher probability of developing severe emotional or behavioral disturbances. This is new funding for FY09 at \$100.0 MHTAAR and \$100.0 GF/MH.

Transfer in PCN 06-1403 from Women, Infants and Children

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Infant Learning Program Grants (298)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
Transfer of PCN 06-1403 from the Women, Infants and Children Component within the Division of Public Assistance, to the Infant Learning Program Component of the Office of Children's Services.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	23.1	23.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		14.4										
1004 Gen Fund		8.7										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$23.1												
	Subtotal	8,895.4	479.6	38.2	240.0	5.0	5.0	8,127.6	0.0	6	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	7.9	7.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		2.8										
1004 Gen Fund		5.1										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$7.9												
	Totals	8,903.3	487.5	38.2	240.0	5.0	5.0	8,127.6	0.0	6	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Trust Programs (2251)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,219.7	29.9	13.2	760.1	1.5	0.0	415.0	0.0	0	1	0
1002 Fed Rcpts		630.0										
1007 I/A Rcpts		40.0										
1098 ChildTrErn		399.7										
1099 ChildTrPrn		150.0										
	Subtotal	1,219.7	29.9	13.2	760.1	1.5	0.0	415.0	0.0	0	1	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,219.7	29.9	13.2	760.1	1.5	0.0	415.0	0.0	0	1	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Bring Line Items in Line with Business Practices												
	LIT	0.0	-29.9	0.0	29.9	0.0	0.0	0.0	0.0	0	0	0
The Children's Trust funds are currently managed via contracted services. This LIT brings authority in line with the business practices.												
FY09 Bargaining Unit Salary Adjustment												
	Dec	-2.0	-2.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1098 ChildTrErn		-2.0										
Salary adjustment to reduce the increment for FY 09 GG Bargaining unit increases to benefits, etc.												
Adjust Position Counts in Line with Business Practices												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	-1	0
The Children's Trust funds are currently managed via contracted services. This transaction deletes the vacant authorized part-time position.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	2.0	2.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1098 ChildTrErn		2.0										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$2.0												
	Subtotal	1,219.7	0.0	13.2	790.0	1.5	0.0	415.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Children's Trust Programs (2251)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	1,219.7	0.0	13.2	790.0	1.5	0.0	415.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Child Protection Legal Svcs (2712)
RDU: Children's Services (486)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	227.5	0.0	0.0	227.5	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		227.5										
	Subtotal	227.5	0.0	0.0	227.5	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	227.5	0.0	0.0	227.5	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer out Permanency Funding to Subsidized Adoption for Legal Services to Adoptions												
	Trout	-227.5	0.0	0.0	-227.5	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-227.5										
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

The Office of Children's Services (OCS) currently purchases services from the Department of Law, via Reimbursable Services Agreements (RSA), for legal services related to ongoing efforts to find permanent homes for children in state custody. A portion of the funding for this single RSA is in the Subsidized Adoption & Guardianship component and a portion is in the Child Protection Legal Services component. The \$227.5 authorization for this RSA in the Child Protective Legal Services component is the only funding in that component. OCS is requesting that this authorization be transferred to the Subsidized Adoption Component so that all funds dedicated to this purpose are in the same component.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Adult Preventative Dental Medicaid Svcs (2839)
RDU: Adult Preventative Dental Medicaid Svcs (541)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-233.9										
1003 G/F Match		233.9										
FY2008 Conference Committee												
	ConfCom	10,292.0	0.0	0.0	0.0	0.0	0.0	10,292.0	0.0	0	0	0
1002 Fed Rcpts		7,557.8										
1003 G/F Match		1,309.2										
1092 MHTAAR		1,425.0										
	Subtotal	10,292.0	0.0	0.0	0.0	0.0	0.0	10,292.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	10,292.0	0.0	0.0	0.0	0.0	0.0	10,292.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-258.1										
1003 G/F Match		258.1										

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual rate the federal government reimburses the state for Medicaid benefits that will take effect on October 1, 2008.

The federal and state governments jointly fund Medicaid. The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. One in five Alaskans is enrolled in Medicaid at some time each year. Without the increment, the state would be forced to reduce eligibility or services currently provided to low income children, pregnant women, persons with disabilities, and the elderly. By approving this change record the department will be able to continue to meet its mission of managing health care for Alaskans in need.

The amount of federal funds the state receives for its Medicaid program depends on a complex array of reimbursement rates, some of which change each October 1 with the start of a new federal fiscal year. The bulk of the federal funding for Medicaid benefits comes from claims reimbursed at the federal medical assistance percentage, or FMAP. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%. The regular FMAP for SFY09 will average 51.02% across two federal fiscal years (52.48% from July-Sept. 2008 and 50.53% from Oct. 2008-June 2009). The enhanced FMAP for SFY09 will average 65.71% (66.74% from July-Sept. 2008 and 65.37% from Oct. 2008-June 2009).

Approximately 92% of the Medicaid Services component's claims are reimbursed at the regular FMAP, and the remainder, 8%, is Indian Health Service, which is not affected by the change in FMAP. Based on current estimated expenditures for Medicaid, the FFY09 change in FMAP will require an estimated \$258.1 increase in GF to replace the lost federal funds and maintain services at the current level.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Adult Preventative Dental Medicaid Svcs (2839)
RDU: Adult Preventative Dental Medicaid Svcs (541)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

FY09 Medicaid Program Fund Change

	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-1,717.5										
1003 G/F Match		1,717.5										

This change record seeks to rebalance the fund source amounts for Adult Dental Preventative Dental (APD) Medicaid Services based on projections for increased recipients served by private dental providers and a reduction from previous estimates for Indian Health Service (IHS) recipients served by tribal dental programs. These enhanced dental services include preventative and enhanced restorative dental services as well as periodontal maintenance and denture services. The forecast is based on limited claims experience and should be updated for the Governor's amended budget.

The forecasted spending for SFY09 (upper bound as of Sept 13, 2007) is for \$9,088.9 (\$5,183.8 Fed/3.905.1 match). The FY08 authorized amount of \$10,292.0 is adequate, but the expected 40% IHS participation has not materialized, which has led to a surplus of federal authorization and a shortfall of state match. This change record seeks to balance the fund sources by increasing GF match by \$1,717.5 and decreasing federal by an equal amount.

IHS billings have been lower than anticipated. While some of this may be the longer lag time for Medicaid billing from tribal programs as compared with private dental offices, tribal programs also may lack adequate provider capacity to fully meet dental service demands from their adult beneficiaries. Tribal dental workforce capacity typically results in prioritization for children's dental services. To the extent tribal dental programs refer Alaska Native adults to private dental offices, estimated federal funding for the services will decrease. Correspondingly, general fund match funding for the services will increase. The prior authorization process for the enhanced dental services has been a frequent complaint of private and some tribal programs and could be restricting provider participation in the adult dental Medicaid services.

Based on the claims experience and preliminary analysis at this time, it is unlikely tribal programs will meet the level of participation in the enhanced dental services that was estimated in the fiscal note for the services.

The department will evaluate claims experience and revise the forecast before the end of the third-quarter of FY2008 to address the need to lower the annual cap in FY2009 and remain within overall expenditures estimated in the fiscal note for these dental services.

Fed % = 51.02 SFY09 avg. FMAP for non-IHS portion.

Reverse FY2008 MH Trust Recommendation

	OTI	-1,425.0	0.0	0.0	0.0	0.0	0.0	-1,425.0	0.0	0	0	0
1092 MHTAAR		-1,425.0										

Reduces MHTAAR support by (\$25.0)

MH Trust: Cont - Adult Dental Medicaid

	Inc	1,400.0	0.0	0.0	0.0	0.0	0.0	1,400.0	0.0	0	0	0
1092 MHTAAR		1,400.0										

Grant 599.02

Adult Dental Medicaid Match Funds: Alaska Mental Health Trust Authority Authorized Receipts (MHTAAR) funds are to match Medicaid expenditures for

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Adult Preventative Dental Medicaid Svcs (2839)
RDU: Adult Preventative Dental Medicaid Svcs (541)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>changes in the range of adult dental services allowed in the Medicaid program approved by the legislature. The program has enhanced the existing emergency dental program to include preventive and restorative care. The expanded program benefits those most in need as well as Alaskan seniors. The cap of \$1150 per year allows for a full set of dentures over a two-year period. The cap will be adjusted annually by emergency regulation to ensure the program remains within fiscal guidelines. The program will sunset in FY2010 unless extended by the legislature.</p> <p>The Alaska Mental Health Trust Authority (Trust) agreed to partner on the Medicaid match funds for the first three years because of the high percentage of adults with Medicaid who are Trust beneficiaries. Untreated infections of the mouth can result in numerous physical problems.</p>												
	Subtotal	10,267.0	0.0	0.0	0.0	0.0	0.0	10,267.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
AMD: Increase Dental Rates for non-Tribal Providers												
	Inc	891.9	0.0	0.0	0.0	0.0	0.0	891.9	0.0	0	0	0
	1002 Fed Rcpts	455.0										
	1003 G/F Match	436.9										
<p>Many dentists choose not to participate in Medicaid because of the low reimbursement rates. According to a study published by the Alaska dental provider community, Medicaid offers the lowest reimbursement rates for dental services in the state. Except for dental services billed at physician rates (oral surgeries) and dental services with codes developed after 1997, rates for most dental services have not been updated since February 1997.</p> <p>Current fee-for-service rates are based on 80% of billed charges (usual and customary) for dental procedures in 1995. In today's dollars, that means that Medicaid is currently paying only 60% of billed charges. The division proposes to bring reimbursement rates up to approximately 80% of current billed charges over two or three years.</p> <p>The division estimates that it will require an additional \$891.9 in SFY09 due to fee-for-service rate increases.</p> <p>Federal % = 51.02% SFY09 avg FMAP.</p> <p>This increment will help the department improve the following performance measures:</p> <p>Dept-D-4--Provide quality management of health care coverage services providers and clients HCS-A--A1-Increase IHS participation HCS-B---Provide affordable access to quality health care services to eligible Alaskans HCS-B--T1-Increase the number of providers DPH-A--Healthy people in healthy communities DPH-A--A4-Assure access to early preventative services and quality health care</p>												
	Totals	11,158.9	0.0	0.0	0.0	0.0	0.0	11,158.9	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-23,834.5										
1003 G/F Match		23,834.5										
FY2008 Conference Committee												
	ConfCom	687,498.9	0.0	0.0	10,000.0	0.0	0.0	678,075.0	-576.1	0	0	0
1002 Fed Rcpts		468,006.4										
1003 G/F Match		132,228.3										
1004 Gen Fund		65,374.4										
1007 I/A Rcpts		20,233.5										
1108 Stat Desig		906.3										
1156 Rcpt Svcs		750.0										
ADN 06-8-0004 Medical Asst Eligibility CH 48 SLA07 (SB27) CH 28 SLA07 (HB95) Sec2, P45, L14-16												
	FisNot	2,195.4	0.0	0.0	0.0	0.0	0.0	2,195.4	0.0	0	0	0
1002 Fed Rcpts		1,577.6										
1004 Gen Fund		617.8										
Resets the upper income limit for Denali KidCare pregnant woman and uninsured children to 175% of prevailing federal poverty guideline.												
06-8-0005 Spread unallocated legislative reduction												
	LIT	0.0	0.0	0.0	0.0	0.0	0.0	-576.1	576.1	0	0	0
Spread unallocated GF miscellaneous reduction pertaining to abortion expenditures.												
	Subtotal	689,694.3	0.0	0.0	10,000.0	0.0	0.0	679,694.3	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680011 Transfer Grant Auth to Contractual to reflect operations												
	LIT	0.0	0.0	0.0	1,000.0	0.0	0.0	-1,000.0	0.0	0	0	0
Line item transfer from grants to contractual to align authorization with anticipated expenditures.												
	Subtotal	689,694.3	0.0	0.0	11,000.0	0.0	0.0	678,694.3	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Reduce Medicaid Rates for Durable Medical Equipment (Reg Chg) 1/2 YR												
	Dec	-100.0	0.0	0.0	0.0	0.0	0.0	-100.0	0.0	0	0	0
1002 Fed Rcpts		-51.0										
1003 G/F Match		-49.0										

This proposal is to reduce Medicaid rates for high cost durable medical equipment items by changing the current pricing methodology and requiring

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

documentation of MSRP or true cost before establishing a rate of reimbursement.

Fed % = 51.02 SFY09 avg FMAP.

Performance Measures Affected:

- Dept-Core Services--Manage health care coverage for Alaskans in need
- Dept-Core Services--Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

FY09 Medicaid SCHIP Allotment Shortfall

	FndChg	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
1002 Fed Rcpts	-1,000.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1003 G/F Match	1,000.0											

****CONTINGENT UPON CONGRESSIONAL ACTION TO REAUTHORIZE SCHIP PROGRAM. CURRENT LEGISLATION BEFORE CONGRESS COULD FULLY FUND THE CURRENT PROGRAM AND NEGATE THE NEED FOR THIS INCREMENT.**

This request replaces lost federal revenues resulting from a decrease in the amount of federal funds available for the State Children's Health Insurance Program (SCHIP), a part of Alaska's Medicaid program operated through Denali KidCare. This increment is necessary to maintain the current level of health care provided to these children and supports the department's mission to manage health care for Alaskans in need.

SCHIP helps reach uninsured children whose families earn too much to qualify for regular Medicaid but not enough to afford private coverage. Each month, SCHIP provides health coverage for about 9,000 uninsured children under age 19. Without this funding, low-income children now enrolled in Denali KidCare could lose their SCHIP health coverage and become uninsured.

The federal and state governments jointly fund SCHIP. The amount of federal funding depends on the federal SCHIP allotment which has not grown to keep pace with SCHIP expenditures. The federal medical assistance percentage, or FMAP, determines the amount of state matching funds. The state receives a higher, enhanced FMAP for SCHIP than for regular Medicaid; however, this enhanced reimbursement is capped at the SCHIP allotment. If costs exceed available SCHIP funds, claims are reimbursed at the lower, regular FMAP, resulting in reduced federal revenues. Alaska will have only 43% of the federal SCHIP funding needed to cover program expenditures in FY09, exhausting its SCHIP funds in the second quarter. When it reverts to regular Medicaid, the difference in federal reimbursement rates means that Health Care Services Medicaid Services component will need an additional \$1,000.0 GF in FY09.

Alaska's annual allotment has fluctuated between \$7 and \$11 million. Since Alaska's annual allotment represents only about 30% of our costs, we have relied heavily on unspent funds from other states which were redistributed to Alaska to maintain access to the enhanced FMAP. As more and more states have increased their SCHIP programs, there is less and less redistributed funding available and we do not anticipate any further redistributions.

FY09 Projected Medicaid Formula Growth

	Inc	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
1002 Fed Rcpts	26,587.7	41,381.6	0.0	0.0	0.0	0.0	0.0	41,381.6	0.0	0	0	0
1003 G/F Match	14,793.9											

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This increment funds increases in Medicaid service costs due to increases in enrollment and utilization.

For SFY09, Health Care Services' Medicaid costs are projected to grow 6% over the authorized amount of \$689,694.3. This increment request is necessary to maintain the current level of long term health services in Medicaid. The Medicaid Services component funds acute health care services such as hospitals, physicians, pharmacy, and dental and other Medicaid services such as premium assistance and supplemental hospital payments.

In FY07 Health Care Services contracted approximately 6% from the previous fiscal year. Growth in FY08 is expected to be 9% higher FY07. The requested FY09 growth increment, 6%, is based on the FY08 projection and the FY09 baseline forecast from the short term forecasting model.

Most of the increase can be attributed to hospital services which are expected to grow at approximately 11% between FY07 and FY08 and 6% between FY08 and FY09. Hospital and physician services were both affected by rate rebasing in FY08. Transportation and Pharmacy also contributed to the overall growth with growth rates between 6 and 7%.

The fund source projection is based on the actual amount of federal revenue collected in SFY07 in this component, 68.2%, and assumes that the proportion of expenditures eligible for each type of federal reimbursement remains the same. It also assumes that the SFY09 average federal medical assistance percentage remains at 53.76% for regular Medicaid and 67.63% for enhanced FMAP.

The additional funding supports the department's mission to manage health care for Alaskans in need. This increment will help the department improve the following performance measures:

- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A-A2--Expand fund recovery efforts
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A--A2-Reduce suffering, death and disability due to chronic disease
- DPH-A--A4-Assure access to early preventative services and quality health care

FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid

	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-14,308.5											
1003 G/F Match	14,308.5											

This request replaces lost federal revenues resulting from a 1.95% decrease in the annual rate the federal government reimburses the state for Medicaid benefits that will take effect on October 1, 2008.

The federal and state governments jointly fund Medicaid. The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid and is outside the control of the state government. One in five Alaskans is enrolled in Medicaid at some time each year. Without the increment the state would be forced to reduce eligibility or services currently provided to low income children, pregnant women, persons with disabilities, and the elderly. By approving this change record the department will be able to continue to meet its mission of managing health care for Alaskans in need.

The amount of federal funds the state receives for its Medicaid program depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The bulk of the federal funding for Medicaid benefits comes from claims reimbursed at the federal medical assistance percentage or FMAP. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%. Also affected are the State Children's Health Insurance Program (SCHIP) and the Breast and Cervical Cancer program (BCC) which are part of Alaska's

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Medicaid program. Eligible claims for SCHIP and BCC are reimbursed at an enhanced FMAP rate which reduces the state share of costs by 30% over the regular FMAP.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%. The regular FMAP for SFY09 will average 51.02% across two federal fiscal years (52.48% from July-Sept. 2008 and 50.53% from Oct. 2008-June 2009). The enhanced FMAP for SFY09 will average 65.71% (66.74% from July-Sept. 2008 and 65.37% from Oct. 2008-June 2009).

Approximately 67% of the Medicaid Services component's claims are reimbursed at the regular FMAP and another 6% at the enhanced FMAP. The remaining 27% is Indian Health Service, family planning, or non-reimbursable and is not affected by the change in FMAP. Based on current estimated expenditures for Medicaid, the FFY09 change in FMAP will require an estimated \$14,308.5 increase in GF to replace the lost federal funds and maintain services at the current level.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

Discontinue Private ProShare Refinancing

1002 Fed Rcpts	Dec	-16,013.9	0.0	0.0	0.0	0.0	0.0	-16,013.9	0.0	0	0	0
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This change record reduces the federal funding no longer needed because the Private ProShare Medicaid program has been discontinued by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under this program, and ProShare was an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are totally GF.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative move to optimize use of Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions provided Health Care Services with the matching GF through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost the appeal when the U.S. Department of Health and Human Services Department Appeals Board upheld the disallowed claim.

The department is committed to continue funding these services at the same level in support of its mission to manage health care for Alaskans in need. While the federal authority is no longer needed in Health Care Services, in order to maintain current service levels, the department is requesting additional GF in the divisions with refinanced grants/services to replace this lost federal money.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Behavioral Health Grants		\$3,448.2										
Psychiatric Emergency Services		\$1,631.6										
Services to the Seriously Mentally Ill		\$3,324.9										
Seriously Emotionally Disturbed Youth		\$902.0										
Office of Children's Services/Family Preservation		\$322.4										
Public Health/Community Health		\$1,172.0										
Senior & Disabilities Services/Community DD Grants		\$4,815.7										
Juvenile Justice-McLaughlin YF		\$191.1										
Juvenile Justice-Mat-Su YF		\$25.1										
Juvenile Justice-Kenai YF		\$21.4										
Juvenile Justice-Fairbanks YF		\$46.5										
Juvenile Justice-Bethel YF		\$33.9										
Juvenile Justice-Nome YF		\$22.6										
Juvenile Justice-Johnson YF		\$38.9										
Juvenile Justice-Ketchikan Regional		\$17.6										
Performance Measures Affected:												
Dept-Core Services--Manage health care coverage for Alaskans in need												
Dept-Core Services--Protect and promote the health of Alaskans												
Dept-Core Service --Promote independence of Alaska senior and people with physical or developmental disabilities												
Dept-B-2--Improve and enhance the quality of life for Alaskans with serious behavioral health problems												
Dept-D-4--Provide quality management of health care coverage services providers and clients												
HCS-B--Provide affordable access to quality health care services to eligible Alaskans												
DPH-A--Healthy people in healthy communities												
DPH-A-A4--Assure access to early preventative services and quality health care												
SDS-A--Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
Transfer out General Funds to Programs due to Elimination of ProShare Financing												
	Trout	-4,044.0	0.0	0.0	0.0	0.0	0.0	-4,044.0	0.0	0	0	0
1004 Gen Fund		-4,044.0										

In SFY 08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services. This transfer of the general funds is necessary to provide the divisions the funding needed to continue these services.

Behavioral Health-Behavioral Health Grants \$820.9
 Behavioral Health-Psychiatric Emergency Services \$614.4
 Behavioral Health-Services to the Seriously Mentally Ill \$798.7
 Behavioral Health-Services for Severely Emotionally Disturbed Youth \$211.0
 Office of Children's Services-Family Preservation \$76.9
 Juvenile Justice- McLaughlin YF \$45.5
 Juvenile Justice-Mat-Su YF \$6.0
 Juvenile Justice-Kenai YF \$5.0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Juvenile Justice-Fairbanks YF \$11.1												
Juvenile Justice-Bethel YF \$8.1												
Juvenile Justice-Nome YF \$5.4												
Juvenile Justice-Johnson YF \$9.3												
Juvenile Justice-Ketchikan Regional YF \$4.2												
Public Health-Community Health Grants \$279.4												
Senior and Disabilities Services-Community DD Grants \$1,148.1												
Medicaid Cost Containment in Pharmacy												
	Dec	-1,020.4	0.0	0.0	0.0	0.0	0.0	-1,020.4	0.0	0	0	0
1002 Fed Rcpts		-520.4										
1003 G/F Match		-500.0										

Savings are anticipated from cost containment efforts in Medicaid pharmacy services. These efforts include expanding the list of drugs requiring prior authorization, using tamper resistant prescription pads, implementing a drug dose optimization program, and adoption of federal upper limit average manufacturer's price (AMP) for generic drugs effective January 2008. This is a conservative estimate. Actual savings possible from these initiatives could be higher but are highly uncertain at this time as most of the savings could be wiped out by the anticipated increase in pharmacy dispensing fees.

Fed % = 51.02 SFY09 avg. FMAP

Performance Measures Affected:
 Dept-Core Services--Manage health care coverage for Alaskans in need
 Dept-Core Services--Protect and promote the health of Alaskans
 HCS-B--Provide affordable access to quality health care services to eligible Alaskans
 DPH-A--Healthy people in healthy communities
 DPH-A-A4--Assure access to early preventative services and quality health care

Medicaid Cost Containment in End Stage Renal Dialysis (Reg Chg)												
	Dec	-500.0	0.0	0.0	0.0	0.0	0.0	-500.0	0.0	0	0	0
1002 Fed Rcpts		-255.1										
1003 G/F Match		-244.9										

This proposal would reduce costs for end stage renal dialysis (ESRD) through a change to the rate structure and by shifting eligible costs to Medicare. These changes are anticipated to save \$500.0 in FY 2009 (1/2 year); annually \$1 million could be saved.

Currently Medicaid pays providers 100% of their billed charges for each procedure and different providers can charge different rates for the same service. The new rate would be an inclusive composite rate so that all providers are paid the same rate for the same group of services. A comparison of the current rate to the Medicare rate found that in some cases Medicaid is paying as much as ten times what Medicare pays.

A large portion of Medicaid clients receiving end stage renal dialysis treatment are over age 65 and are likely eligible for Medicare. Medicaid is the "payor of last resort" so if a client is eligible for both Medicare and Medicaid, Medicare will be billed first. By making sure that dually eligible clients are enrolled in Medicare, Medicaid will be able to avoid the full cost of treatment.

Savings for SFY 2009 are estimated for 1/2 year due to the need to change regulations regarding the rate structure.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Fed % = 51.02 SFY09 avg FMAP

Performance Measures Affected:
 Dept-Core Services--Manage health care coverage for Alaskans in need
 Dept-Core Services--Protect and promote the health of Alaskans
 HCS-B--Provide affordable access to quality health care services to eligible Alaskans
 DPH-A--Healthy people in healthy communities
 DPH-A-A4--Assure access to early preventative services and quality health care

Review/Implement Medicaid Report recommendations (Stat Chg (SB 61) - Pacific Hlth Study

Inc	2,500.0	0.0	0.0	0.0	0.0	0.0	2,500.0	0.0	0	0	0
1002 Fed Rcpts	1,275.5										
1003 G/F Match	1,224.5										

The Senate Finance Committee's Medicaid Program Review report (PHPG Report), a report by the Pacific Health Policy Group that was completed January 2007, details inefficiencies in the Medicaid system that result in large general fund expenditures and addresses money currently paid by Medicaid to non-tribal providers on behalf of American Indians and Alaska Natives. The department and the Governor's Alaska Health Care Strategies Planning Council are currently considering many of the report's recommended changes to Alaska's Medicaid program. Most of the report recommendations, such as creation of new waiver programs and changes to rate methodologies, are long-term changes that require regulatory or statutory changes, or changes to the Medicaid State Plan. The Health Care Strategies Planning Council will provide the legislature a summary of their recommendations for implementing PHPG Report recommendations, and other changes the Planning Council recommends, by January 2008.

The Division of Health Care Services (HCS) is potentially impacted by PHPG Report recommendations. These include altering the methodology for setting drug dispensing fees in rural versus urban settings and increasing the number of drugs requiring prior authorization; implementing a disease management program; and seeking federal reimbursement for services currently provided under the CAMA program. Implementation of PHPG recommendations for increasing tribal reimbursements would also affect HCS funding.

Performance Measures Affected:
 Dept-Core Services--Manage health care coverage for Alaskans in need
 Dept-Core Services--Protect and promote the health of Alaskans
 Dept-D-4--Provide quality management of health care coverage services providers and clients
 HCS-B--Provide affordable access to quality health care services to eligible Alaskans
 DPH-A--Healthy people in healthy communities
 DPH-A-A2--Reduce suffering, death and disability due to chronic disease
 DPH-A-A4--Assure access to early preventative services and quality health care

Subtotal	711,897.6	0.0	0.0	11,000.0	0.0	0.0	700,897.6	0.0	0	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

AMD: Medicaid Facility Rates - Hospitals

Inc	1,521.5	0.0	0.0	0.0	0.0	0.0	1,521.5	0.0	0	0	0
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Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1002 Fed Rcpts		776.2										
1003 G/F Match		745.3										

This increment is necessary to maintain Alaska acute care hospital services at their current level.

By regulation, payment rates for most in-state facilities must be re-based at least every four years. In other years the facility gets a rate adjustment for inflation. The last rebasing year was FY04.

This is the second year of a two year process to phase in these required rate increases. Some hospitals were rebased last year. Hospitals remaining to be rebased in FY09 include Bartlett Regional Hospital in Juneau, Central Peninsula General Hospital in Soldotna, Cordova Community Medical Center, Ketchikan General Hospital, Wrangell Medical Center, and Norton Sound Regional Hospital in Nome. Most Indian Health Service (IHS) facilities are subject to payment rates determined by the federal government and adjusted annually. Norton Sound Regional Hospital is an exception in that its reimbursement schedule is determined by the state.

The six hospitals scheduled to rebase in FY09 comprise about 9.8% of Medicaid claims payments for all acute care hospitals and outpatient surgery centers in FY07. In FY07, claims for hospital services were paid by Medicaid for approximately 66,000 Medicaid beneficiaries.

The rebased rates are facility-specific and are cost-based from a review of FY07 operating expenses and Medicaid billing activity. Each facility's new rate will become effective at the start of its 2009 fiscal cycle. The Department estimates that the rate adjustment will be about 6.5% above medical inflation.

The additional cost to Medicaid from re-basing acute care hospitals in FY09 will be \$1,521.5.

Federal % = 51.02% SFY09 avg FMAP.

This increment will help the department improve the following performance measures:
 Dept-D-4--Provide quality management of health care coverage services providers and clients
 HCS-B---Provide affordable access to quality health care services to eligible Alaskans
 HCS-B--T1-Increase the number of providers
 DPH-A---Healthy people in healthy communities
 DPH-A--A2-Reduce suffering, death and disability due to chronic disease
 DPH-A--A4-Assure access to early preventative services and quality health care

AMD: Increase Dental Rates for non-Tribal Providers

	Inc	2,675.6	0.0	0.0	0.0	0.0	0.0	2,675.6	0.0	0	0	0
1002 Fed Rcpts		1,365.0										
1003 G/F Match		1,310.6										

Many dentists choose not to participate in Medicaid because of the low reimbursement rates. According to a study published by the Alaska dental provider community, Medicaid offers the lowest reimbursement rates for dental services in the state. Except for dental services billed at physician rates (oral surgeries) and dental services with codes developed after 1997, rates for most dental services have not been updated since February 1997.

Current fee-for-service rates are based on 80% of billed charges (usual and customary) for dental procedures in 1995. In today's dollars, that means that Medicaid is currently paying only 60% of billed charges for dental services. The division proposes to update reimbursement rates to approximately 80% of current billed charges over two or three years. Medicaid pays dental claims for about 42,000 persons a year, mostly children.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The division estimates that it will require an additional \$2,675.6 in SFY09 due to fee-for-service rate increases.

Federal % = 51.02% SFY09 avg FMAP.

This increment will help the department improve the following performance measures:

- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--A1-Increase IHS participation
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- HCS-B--T1-Increase the number of providers
- DPH-A---Healthy people in healthy communities
- DPH-A--A4-Assure access to early preventative services and quality health care

AMD: Increase Rates for Emergency Transportation

	Inc	2,668.5	0.0	0.0	0.0	0.0	0.0	2,668.5	0.0	0	0	0
1002 Fed Rcpts		1,361.5										
1003 G/F Match		1,307.0										

The Division of Health Care Services is requesting additional funding to increase the reimbursement rates for Medicaid Emergency Transportation Services. This will bring rates up to Medicare rates but still fall below current market rates.

These services are a high priority. Emergency air ambulance and ground ambulance transports very ill Medicaid beneficiaries. Often emergency transportation is the difference between life and death. About 1,500 persons use air ambulance services in a year; about 11,000 use ground ambulance services.

Historically, Medicaid and every other non-federal insurance carrier in Alaska paid a higher rate than Medicare. In 2002 when these rates were last set by Medicaid, they were equal to or higher than Medicare's rates. Since 2002 the cost of fuel, salaries, benefits, liability insurance, and worker's compensation benefits have risen sharply.

While Alaska's Medicaid rates remained unchanged, Medicare increased their rates for these services to the point that today Medicaid consistently pays a much lower rate than Medicare. Emergency transportation service providers have shown the department compelling evidence that they are actually losing money every time they transport a Medicaid recipient in an emergency situation.

Emergency transportation services included in this rate increase proposal are ambulance and emergency air transportation for medical evacuations. This increase does not apply to providers of non-emergency transportation, for example, when a child living in a small community has to be flown to a larger community for a routine dental appointment.

Federal % = 51.02% SFY09 avg FMAP.

Reduce Federal Authorization due to Loss of Proshare SPEP

	Dec	-1,100.0	0.0	0.0	0.0	0.0	0.0	-1,100.0	0.0	0	0	0
1002 Fed Rcpts		-1,100.0										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This change record reduces the federal funding no longer needed because the Private ProShare Single Point of Entry Psychiatric (SPEP) Medicaid program has been discontinued by the federal Medicaid agency. This is an amendment to an existing change record in the Governor's Budget requesting a \$16,000.0 decrement in federal funding due to the previously disallowed larger, non-SPEP, portion of the Private ProShare program. This increase became necessary after the reconsideration of the SPEP portion of the ProShare program was denied.

The department has made payments to hospitals for several years under this program. SPEP was an important part of the ProShare program and the department's strategy to provide access to quality health care services. ProShare SPEP Medicaid funds have supported mental health care programs that benefit many Alaskans. Without the ProShare SPEP Medicaid program the same services will have to be funded with 100 percent GF.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost the appeal when the U.S. Department of Health and Human Services Department Appeals Board upheld the disallowed claim. At that time it was not yet determined how the SPEP portion of that claim would be handled.

The department is committed to continue funding these services at the same level in support of its mission to manage mental health care for Alaskans in need. While the federal authority is no longer needed in Health Care Services, in order to maintain current service levels, the department is requesting an additional \$1,100.0 GF in the Behavioral Health division to replace this lost federal money.

AMD: Reduce Authorization to Reflect Current Medicaid Projections

	Dec	-20,000.0	0.0	0.0	0.0	0.0	0.0	-20,000.0	0.0	0	0	0
1002 Fed Rcpts		-10,000.0										
1003 G/F Match		-10,000.0										

The Medicaid budget is based on projections of the number of Alaskans who will access Medicaid funded services, the quantity of services used and the anticipated changes in the costs of those services. Medicaid services are funded through both state general funds and federal matching funds. There must be sufficient state general funds available in order to maximize utilization of federal funds. Through the FY09 budget process, the House Finance Subcommittee requested that the department rebase Medicaid by reducing the budget by \$30 million, \$15 million in state general funds and \$15 million in federal Medicaid match. The \$30 million cut represents three percent of the total Medicaid budget of \$1 billion, and reduces by half the total requested increase for FY09.

One in five Alaskans is enrolled in Medicaid in any given year. In an average week, 25,500 Alaskans receive some level of medical care that costs between \$17-25 million in Medicaid benefit payments made to an average of 2,100 health care providers. The proposed increase for Medicaid funding in the FY09 budget is less than 6% compared to past years' inflationary increases of nearly 16% or more annually. Considered in our projections for this very modest increase is the fact that \$28,487.7 is required to offset lost federal funding due to the regular FMAP dropping from 52.48% to 50.53% for 2009.

Good business practice requires adequate funding to ensure that timely payments can be made to service providers. The Legislature has also requested that departments minimize supplemental budget requests through careful budget projections. There is significant potential liability associated with the \$30 million reduction to the FY09 budget requested by the House Finance Subcommittee in that the department may be forced to present a supplemental funding request to the Legislature next session if the projected amount of Medicaid services required or the costs of those services increases more than 3%.

The \$30,000.0 reduction will be split between two components:

- Behavioral Health Medicaid Services component -\$10,000.0 total (\$5,000.0 federal/\$5,000.0 GFM), and
- Health Care Medicaid Services component -\$20,000.0 (\$10,000.0 federal/\$10,000.0 GFM).

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid Services (2077)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	697,663.2	0.0	0.0	11,000.0	0.0	0.0	686,663.2	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Catastrophic and Chronic Illness Assistance (AS 47.08) (2330)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		1,471.0	0.0	0.0	0.0	0.0	0.0	1,471.0	0.0	0	0	0
1004 Gen Fund		1,471.0										
Subtotal		1,471.0	0.0	0.0	0.0	0.0	0.0	1,471.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		1,471.0	0.0	0.0	0.0	0.0	0.0	1,471.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		1,471.0	0.0	0.0	0.0	0.0	0.0	1,471.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		1,471.0	0.0	0.0	0.0	0.0	0.0	1,471.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medical Assistance Administration (242)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	28,880.7	6,003.9	94.8	22,736.9	115.0	121.0	0.0	-190.9	56	1	7
1002 Fed Rcpts		20,659.5										
1003 G/F Match		7,468.6										
1004 Gen Fund		749.2										
1007 I/A Rcpts		3.4										
06-8-0005 Spread unallocated reduction related to sunset of Senior Care												
	LIT	0.0	-80.9	0.0	-110.0	0.0	0.0	0.0	190.9	0	0	0
Spread unallocated miscellaneous reduction related to sunset of Senior Care												
ETS Chargeback Transfer from Department of Administration												
	Atrin	6.2	0.0	0.0	6.2	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		6.2										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	28,886.9	5,923.0	94.8	22,633.1	115.0	121.0	0.0	0.0	56	1	7
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680011 Realign funding to reflect expenditures for Ak State Hospital and Nursing Home Assn Grant												
	LIT	0.0	0.0	0.0	85.0	0.0	-100.0	15.0	0.0	0	0	0
Funds is available in the capital outlay line due to equipment purchases being complete. \$85.0 is being transferred to the services line to cover projected expenditures and \$15.0 is transferred to the grants line for an ongoing grant with the Alaska State Hospital and Nursing Home Association (ASHNA).												
ADN 0680011 Adjustment to Balance Position Count												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15	-1	-1
New Medicaid Management Information System-Design Development and Implementation (MMIS-DDI) positions have been added to staff the MMIS-DDI project, currently expected to be completed by June 30th, 2009. These new MMIS-DDI PCNs are: 06-#233 (06-T010) Business Analyst, 06-#235 (06-T017) Associate Coordinator, 06-#240 (06-T012) Business Analyst, 06-#248 (06-T017) Business Manager, 06-#249 (06-T013) Business Transition Manager, 06-#250 (06-T009) Business Analyst, 06-#251 (06-T008) Business Analyst, 06-#252 (06-T011) Business Analyst, 06-#258 (06-T014) Testing Systems Analyst, 06-#259 (06-T015) Interfaces Systems Analyst, 06-#260 (06-T016) Conversion System Analyst, 06-#263 (06-T018) Internal Auditor III, 06-#312 (06-T018) Deputy Project Manager. The 13 PCN's come to a total of \$1,398.6 million and will be funded with an unbudgeted RSA with capital funds from the Facilities component.												
Other new positions include: 06-#237 (06-T016) Medical Assistant Administrator I, 06-#239 (06-4087S) Accounting Clerk II, 06-#246 (06-4019) Medical Assistant Administrator II, 06-#264 (06N08013) Medical Assistant Administrator II, 06-#265 (06N08012) Medical Assistant Administrator III, 06-#266 (06-												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medical Assistance Administration (242)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

N08007) Medical Assistant Administrator III.

Positions being deleted are as follows: 06N07001, 06N076, 06N117, 06N118, 06-X109, 06-N055.

Subtotal	28,886.9	5,923.0	94.8	22,718.1	115.0	21.0	15.0	0.0	71	0	6
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***** Changes From FY2008 Management Plan To FY2009 Governor *****

ETS Chargeback Redistribution

Atrin	3.8	0.0	0.0	3.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	3.8										

Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.

Amounts transferred from state agencies are as follows:
Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).

Amounts transferred to state agencies are as follows:
Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.

Transfer in Positions and Funding from Office of Program Review for Medicaid Policy Unit

Trin	768.8	668.5	30.0	60.0	10.3	0.0	0.0	0.0	5	0	1
1002 Fed Rcpts	384.4										
1003 G/F Match	384.4										

This transfers in from the Office of Program Review (OPR) six positions and their funding -- PCNs 06-0605, 06-0606, 06-0615, 06-4041, 06-4077, and 06-N036. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of OPR with the Medicaid and Health Care Policy Component. The Medicaid and Health Care Policy component includes Medicaid health care policy and operations within DHSS, which encompasses Medicaid policy and financing, Health Care Services, tribal health agreements, rate review; and design, development, and implementation of the new Medicaid Management Information System (MMIS).

Capital Improvement Projects (CIP) Receipts for Medicaid Management Information System (MMIS) Project Personnel

Inc	1,415.2	977.2	0.0	438.0	0.0	0.0	0.0	0.0	1	0	0
1061 CIP Rcpts	1,415.2										

This increment is being added to be able to receive funds from the capital project for the new Medicaid Management Information System Design Development and Implementation (MMIS-DDI) positions that have been added to staff the MMIS-DDI project. This change record further adds PCN 06-#433 (06-T019) Business Analyst which was approved by OMB in September 2007.

FY 09 Health Insurance Increases for Exempt Employees

SalAdj	3.4	3.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	1.2										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medical Assistance Administration (242)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

1003 G/F Match		0.2										
1004 Gen Fund		0.1										
1061 CIP Rcpts		1.9										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$3.4

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	206.9	206.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	103.5											
1003 G/F Match	77.9											
1004 Gen Fund	17.6											
1061 CIP Rcpts	7.9											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$206.9

Subtotal	31,285.0	7,779.0	124.8	23,219.9	125.3	21.0	15.0	0.0	77	0	7
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

Position Exchange from HCS MAA to DAS Q&A Audit

Trout	-314.8	-273.8	0.0	-41.0	0.0	0.0	0.0	0.0	0.0	-3	0	0
1002 Fed Rcpts	-157.4											
1003 G/F Match	-157.4											

This is to transfer PCNs 06-0456, 06-7000, and 06-7010 from Medical Assistance Administration component to the Quality Assurance and Audit component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of program integrity and audit into the Quality Assurance and Audit component. The Quality Assurance and Audit unit will improve coordination and reporting of department wide efforts related to program integrity and quality assurance and provide quality auditing, review, and program analysis services that support the department's programs. The realignment of these positions will separate out the technical assistance from the audit component.

Position Exchange from Q&A Audit to HCS MAA

Trin	289.1	251.4	0.0	37.7	0.0	0.0	0.0	0.0	0.0	3	0	0
1002 Fed Rcpts	144.6											
1003 G/F Match	144.5											

This is to transfer PCNs 06-4094, 06-4096, and 06-4098 from Office of Quality Assurance and Audit component to the Medical Assistance Administration component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates and realigns the functions across program integrity. The realignment of these positions will separate out the technical assistance from the audit component.

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj	77.1	77.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
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Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medical Assistance Administration (242)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions											
										PFT	PPT	NP									
1002 Fed Rcpts		33.6																			
1003 G/F Match		33.6																			
1004 Gen Fund		9.9																			
Totals											31,336.4	7,833.7	124.8	23,216.6	125.3	21.0	15.0	0.0	77	0	7

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$77.1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Rate Review (2696)
RDU: Health Care Services (485)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Subtotal		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Health Insurance Increases for Exempt Employees												
SalAdj		0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.1										
1003 G/F Match		0.1										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
SalAdj		68.6	68.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		34.3										
1003 G/F Match		25.8										
1004 Gen Fund		8.5										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$68.6												
Subtotal		68.8	68.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		68.8	68.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	14,247.3	12,079.3	4.2	1,144.4	800.7	0.0	218.7	0.0	162	0	3
1002 Fed Rcpts		50.0										
1004 Gen Fund		13,437.9										
1007 I/A Rcpts		411.0										
1037 GF/MH		159.2										
1092 MHTAAR		189.2										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	35.4	35.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		35.4										
Costs associated with the bargaining unit contract terms applicable to this component.: \$35.4												
	Subtotal	14,282.7	12,114.7	4.2	1,144.4	800.7	0.0	218.7	0.0	162	0	3
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680017 Transfer Mental Health Clinician to Fairbanks Youth Facility												
	Trout	-98.9	-85.0	0.0	-13.9	0.0	0.0	0.0	0.0	-1	0	0
1004 Gen Fund		-98.9										
This change record transfers one of the three new Mental Health Clinician positions that was budgeted in the FY08 budget to the Fairbanks component.												
ADN 0680017 Realign Funding to Meet Operational Needs for McLaughlin Youth Center												
	LIT	0.0	0.0	0.0	-79.3	79.3	0.0	0.0	0.0	0	0	0
Estimated FY08 expenditures warrant this line item transfer of funding from the contractual line to the supply line item within the McLaughlin Youth Center component. The costs for household/institutional supplies are expected to increase.												
ADN 0680017 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2	0	-1
This change record records the deletion of the two non-perm Maintenance Generalist Journey positions. Due to recruitment difficulties, it was decided to delete them. In addition, we are requesting the addition of two full-time positions and one non-perm position.												

PCN 06-#216--This proposed new permanent full time Administrative Assistant I/II position will be assigned to the Operations Unit to provide administrative support to Nursing, Training, Maintenance and Food Service. The need is most pronounced in Nursing where professional staffing (3:160) is not up to the minimum pattern established by the division. The professional staff cannot keep up with filing, copying, inventory and data entry tasks and it is not cost effective for them to do so. Current administrative staffing is inadequate to provide for the full-time needs of the Operations Unit. At best, the unit receives 4 hours per week of administrative support in Nursing and the administrative support needs of the Operations Manager, Training, Maintenance and Food Service are unfulfilled.

PCN 06-#218--This proposed new permanent full-time Maintenance Specialist Electronics Journey I position will be assigned to the Maintenance section to perform preventative, corrective and predictive maintenance and installation of electronic equipment. With the explosive growth of technology, many building

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>systems that were once mechanical are now electronic. Current maintenance staffing is inadequate for the current and growing need of electronics speciality skill in computers and peripheral equipment, industrial controls, logic circuitry, fire alarm detection and annunciation systems, video and audio security surveillance systems, card reader access control systems, telephonic switching equipment and devices, automated HVAC systems, parking control devices, loops and loop detectors, antenna arrays, radio transmission repeating equipment, programmable logic contols and fiber optic equipment.</p> <p>PCN 06-#214--This proposed new nonpermanent seasonal Food Service Journey position will provide staffing for the Food Service unit in the months when the permanent full-time staff use most of their annual leave, May through August. The coverage is currently provided through overtime because the permanent full-time staffing of the unit is insufficient for covering any staff leave use use. Staff are not able to use the leave they have accrued due to management of overtime. During FY07, Food Service reported approximately 406 hours of overtime or about 5% of the total for MYC. Therefore, the \$12,290 cost of funding this new nonpermanent position has been deducted from lump sum premium pay as overtime savings will occur.</p>												
	Subtotal	14,183.8	12,029.7	4.2	1,051.2	880.0	0.0	218.7	0.0	163	0	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	349.4	0.0	0.0	158.3	0.0	0.0	191.1	0.0	0	0	0
1004 Gen Fund		349.4										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

	Trin	45.5	0.0	0.0	0.0	0.0	0.0	45.5	0.0	0	0	0
1004 Gen Fund		45.5										

In SFY08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. McLaughlin Youth Center provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, this transfer of the general funds is necessary to give the division the funding needed to continue these services.

Safety and Security Funding for Juvenile Justice's Facilities

	Inc	1,016.5	1,016.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		1,016.5										

Authorized youth facility positions have historically not been fully funded based on the assumption that during the course of a year positions will become vacant and budget "savings" will therefore naturally occur. In order to generate the required amount of "savings" vacant positions are held open for a minimum of 30 days. However, juvenile facilities require adequate staffing at all times to keep both the youth and the facility staff safe. Hiring non-permanent staff and requiring permanent staff to work overtime have been necessary in order to maintain adequate staffing levels. This practice has not allowed the division to realize the savings a vacancy factor implies, and may be contributing to staff turnover and further vacancies. The lack of consistent staff during shifts and staff turnover is not conducive to effective treatment. Fully funding all authorized positions would resolve this issue.

In the FY08 management plan, the facilities need to make up over a million dollars to stay within the budget.

MYC: \$ 566.5 (4.78% vacancy)
MSYF: \$ 25.2 (1.65% vacancy)
KPYF: \$ 37.7 (2.97% vacancy)

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
FYF: \$ 129.3	(4.31% vacancy)											
BYF: \$ 70.9	(2.81% vacancy)											
NYF: \$ 69.6	(4.00% vacancy)											
JYC: \$ 92.0	(4.00% vacancy)											
KRYF: \$ 25.3	(2.23% vacancy)											
Total: \$ 1,016.5												

In FY07, the division had one facility component that had no turnover and several that had a very minimal amount of turnover. All of these components still incurred non-perm usage and overtime to cover shifts while staff attended training and staff meetings, as well as for staff that were out sick and on military leave.

This increment request will get us to a zero vacancy and avoid having to hold positions open for 30+ days. Each facility will not be required to make up the vacancy factor and can carry out the functions of the division without starting each year in the negative. This is a safety and security issue.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juveniles who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

Rather than hold positions vacant when they vacated in order to remain within the division's budget, the facilities will be able to recruit for positions as soon as notification is received of an upcoming vacancy. Having permanent staff in place will create a consistency and continuity that will benefit division staff and the youths we serve.

Front Line Staffing at McLaughlin Youth Center, Year 2 of Division Plan

	Inc	439.0	402.0	0.0	20.0	17.0	0.0	0.0	0.0	6	0	0
1004 Gen Fund		439.0										

The Division of Juvenile Justice is requesting an increment in the amount of \$439.0 to better staff the McLaughlin Youth Center (MYC) in Anchorage. The division is currently asking for five of the additional 18 Juvenile Justice Officer positions that are needed to provide the minimum staffing required to meet national practice standards for monitoring youth, ensuring the security and safety of residents and staff. The facility also is in need of one additional Nurse to provide adequate medical services.

This request is in keeping with the division's commitment to base decisions on resource needs on recommended practices and data based evidence. Using guidelines from the National Institute of Corrections, the division determined that an additional five staff are needed at McLaughlin Youth Center to enable this facility to further meet its minimal needs to assure the safety and security of residents and staff. Indeed, a number of challenges faced by the facility can be directly attributed to less than adequate staffing:

~ The current low staff-to-resident ratio limits effective interactions with youth. This is demonstrated by MYC's outcomes in the national Performance-based Standards (PbS) quality assurance process. According to the most recent report on McLaughlin's performance (April 2007), the average amount of time residents of McLaughlin's program units engage in "idle time" (i.e., are not actively engaged with staff in treatment activities) was more than two times the national average for this measure. In contrast, at the Nome Youth Facility which is staffed at a ratio approaching 1.76 staff per duty post, youth continued to have lower average amounts of idle time than the national average during the same reporting period.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Higher staff-resident ratios at MYC would reduce the frequency and length of idle time and room confinement and allow for more effective interaction. When permanent staff have frequent opportunities to work with residents, problems can be identified and resolved before they pose a threat to safety. Juveniles feel safer, feel less exposed to unknown threats, and are less likely to act out and harm others.

~ The current low staff-to-resident ratio increases the likelihood that residents will harm themselves. With fewer staff to monitor and engage youth, the frequency and length of time that they are confined to their rooms is increased. When youth must be confined to their rooms, they still must be checked at a minimum of 15-minute intervals (National Commission on Correctional Health Care), and more frequently if they have expressed suicidal thoughts. At current staffing levels McLaughlin Youth Center is unable to conduct these checks on the routine basis needed to ensure resident safety in some of the treatment cottages.

~ The current low staff-resident ratio increases the need for non-permanent employees and overtime hours. In FY07, MYC utilized more than 10,000 hours of work from non-permanent employees and more than 8,400 hours of overtime. At MYC, most of the hours and dollars attributed to insufficient staffing have occurred in the Center's detention and treatment units. In FY08, four of the five new positions went to the detention unit. One of the shift supervisors said that for the first time he was able to schedule shifts for the month without having to use non-perms for a shift. If the positions are approved for the FY09 request, four of these positions would be placed in the Treatment units and another in one of the detention units.

~ The current low staff-to-resident ratio at McLaughlin decreases the consistency of services youth receive. The detention units at McLaughlin had to cancel school for their residents on more than a dozen occasions over the course of FY07 due to short staffing that prevented adequate supervision of residents attending the McLaughlin School. Workers on the unit most consistently filled to capacity at McLaughlin (the Detention II Unit) also report that inadequate staffing is a significant source of stress that appears directly related to the number of incidents of resident misconduct and assaults, as well as the amount of sick leave utilized by staff on the unit.

~ Teenagers we see on a daily basis are often the same size as adult offenders and have committed crimes as serious as adult offenders. However, due to their age and lack of maturity they have a tendency to be more volatile, more unpredictable, and less able to understand the benefits of compliance. To keep our juvenile facilities safe, we do not use weapons, we do not use razors, we do not use pepper spray; we do not even use isolation. What we do use is our ability to relate to the youth in a professional manner to build a positive relationship based on trust and integrity, and that trust is what keeps our facilities safe. Without full staffing, it is much harder to build this trust if we have to use non-perms to fill shifts on a consistent basis.

~ Statewide, all of our facilities are dealing with a high number of youths who have a DSM- IV diagnosis. On October 9, 2007 we did a one day count trying to figure out how many of our youths do have a DSM - IV diagnosis and the number was 69%. Given that our youths are all considered to be high risk, when you add the mental health issues to the mix, this creates an atmosphere where numerous crisis situations could develop. These crisis situations cry-out for trained staff to assist the youths we serve.

~ Juvenile Justice does not have a training academy like the Office of Children's Services or the State Troopers, so our training is dependent upon one-on-one supervision by a seasoned staff with new workers; usually this intense one-on-one supervision lasts anywhere from four to six months. This method of training staff requires keen attention to strength of shift concerns as it is critical that staff on all shifts have the experience and training to maintain facility safety and security. Without full staffing, it is very difficult to make up shifts that ensure the seasoned staff are there.

~ A new problem at MYC is that gang members coming into MYC are more sophisticated, deeper into the criminal mindset, and recognize immediately that to gain an upper-hand they look for the weakest link amongst the authority figures, and that is the non-perm.

The hiring of five additional juvenile justice officers would help bring McLaughlin Youth Center into line with national recommendations for staff-to-resident ratios and could be expected to result in the following positive outcomes:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

- ~ Increased interactions of staff with institutionalized youth, resulting in better outcomes and lower likelihood of recidivism;
- ~ Reduced idle hours by youth;
- ~ Decreased need for room confinement for youth;
- ~ Increased ability to provide continuous, regular monitoring of youth at all shifts, decreasing the risk of successful suicide attempts;
- ~ Decreased need for non-permanent employees and overtime hours by existing staff;
- ~ Increased ability to conduct school and other activities according to schedule;
- ~ Decreased incidence of resident misconduct and assault, and staff sick leave, in the Detention II Unit.

This budget narrative also includes a request for an additional nurse position in the McLaughlin Youth Center. As with the other additional staff requested through this increment, this request is made to help assure the safety and health of residents.

McLaughlin Youth Center has far fewer nurses per resident than any other juvenile facility in Alaska. Currently, all youth facilities in Alaska except for McLaughlin are staffed with nurses at a rate of 1 fulltime nurse for every 10-20 juveniles. McLaughlin Youth Center, with 160 beds, employs 3 nurses, resulting in a ratio of 1 nurse for more than 50 juveniles. As a result, the nursing staff at McLaughlin Youth Center is overwhelmed in their ability to deal with their routine work:

- ~ Providing direct care to juveniles who are injured or sick;
- ~ Management and administration of medications;
- ~ Providing education and training to staff, particularly in providing initial health screenings for newly admitted juveniles;
- ~ Assisting and consulting with the contract physician and/or nurse-practitioner;
- ~ Providing information to parents and agencies that may work with the youth;
- ~ Conducting adequate documentation and recordkeeping.

The difficulties that the nursing staff at McLaughlin have in meeting these needs are compounded when emergencies arise, or when a nurse must be in training or take sick leave. Indeed, to adequately meet the health care needs of youth at the facility at least two nurse positions are truly needed. However, inadequate space in the nurse's station effectively prevents an appropriate number of nurses from being requested and hired at this time.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

By having the facility more appropriately staffed, the division will be able to focus on reducing the number of youth that re-offend. Permanent, trained staff is better able to carry out the division's programs that will help reduce the recidivism and assist the probation staff to go into the community to educate and mentor youth to keep them from re-offending.

Fairbanks Juvenile Treatment Court Support

	Inc	73.5	73.5	73.5	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1037 GF/MH		73.5											

This request includes funding for one specialized Mental Health Juvenile Probation Officer (JPO) located in Fairbanks.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The State is responsible for ensuring appropriate probation services are provided for youth who have behavioral health disorders. Demonstrated best practice indicates that treatment courts are the most appropriate course for many juveniles who have a primary behavioral health disorder and who have broken the law. The goal of the treatment court is to ensure the youth receives adequate treatment while at the same time does not violate any conditions of probation, including committing another offense. Juvenile Justice is a key partner with the Alaska Court System and other community stakeholders in the creation of the newly-developing Fairbanks Juvenile Treatment Court, the first juvenile court in Alaska. This request includes funding for one specialized Mental Health Juvenile Probation Officer (JPO) located in Fairbanks. The specialized JPO position will provide intensive case-management for these youth and families.

Data for FY07 has shown that 46% of youth formally involved with the Alaska Juvenile Justice system had at least one primary behavioral health disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders. Of those youth, 40% also had a co-occurring substance-related disorder. This is consistent with the first Juvenile Justice behavioral health data review conducted in 2001. Further, on October 9, 2007, facility data demonstrated that 69% of youth securely confined in either a detention or treatment institution in Alaska had an existing behavioral health disorder. With 2,186 admissions to secure detention and treatment in 2007, it is imperative that the State fulfill its responsibility to provide adequate access to behavioral health screening, evaluation, treatment and community referral for continued care.

Short-term outcomes are anticipated to include a decrease in the number of episodes of client behavioral management that include the use of physical restraints or room confinement, improved crisis intervention, and a decrease in the length of stay in treatment facilities for youth with DSM-IV diagnoses. Longer-term outcomes of having an appropriate staffing level of MHCs and a specialized Juvenile Treatment Court may include a shorter length of stay in detention, reduced recidivism in the juvenile system and a lowered risk of contact with the adult criminal system.

This increment request is part of the Division's plan to increase behavioral health services for youth in state custody. It is closely tied to the Trust recommendation for Mental Health Clinicians. Since the Trust did not recommend funding for this position, it was placed in a separate change record.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

Reverse FY2008 MH Trust Recommendations

1092 MHTAAR	OTI	-189.2	-189.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
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Each year, the trust zeroes out the funding from prior years. This change record zeroes out the \$189.2 that was established in FY08. A subsequent change record re-establishes this funding for FY09.

Transfer out Interagency Receipt Authority to Various Other Components

1007 I/A Rcpts	Trout	-23.2	0.0	0.0	0.0	-23.2	0.0	0.0	0.0	0	0	0
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This change records transfers I/A authority to the following components:

- Mat-Su Youth Facility: \$4.0 additional authority needed for Dept of Educ reimbursement for meals
- Kenai-Peninsula Facility: \$15.0 additional authority needed for Dept of Educ reimbursement for meals

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions			
										PFT	PPT	NP	
Johnson Youth Center: \$1.5 authority needed for reimbursement from Div of Public Health for maintenace service in parking lot Ketchikan Regional Youth Facility: \$2.7 authority needed for reimbursement from Div of Public Health for maintenace services provided.													
Transfer out Federal Authority to Delinquency Prevention Component													
1002 Fed Rcpts	Trout	-49.0	-49.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
This change record transfers \$49.0 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.													
MH Trust: Dis Justice - Mental Health Clinical capacity for juveniles in and/or transitioning out of detention													
1037 GF/MH	Inc	288.4	477.6	445.0	0.0	17.6	15.0	0.0	0.0	0.0	3	0	0
1092 MHTAAR		189.2											

Trust Description:
 Grant 1386.01

The MH Trust: Dis Justice - MH Clinical Capacity for Juveniles In/Transitioning out of Detention project will maintain momentum for ensuring that there is the adequate mental health clinical staff capacity to provide appropriate treatment to youth within Alaska's juvenile justice system statewide. The goal is have six new mental health clinicians statewide in youth facilities. This project will be managed by the Division of Juvenile Justice staff with funds targeted to those youth facilities with inadequate mental health clinical staff capacity.

This project maintains the momentum of a critical component of the Disability Justice Focus Area plan by ensuring mental health treatment is provided while a youth is detained as well as ensuring treatment is incorporated into each youth's transition plan back into the community as needed. The MH Trust: Dis Justice - MH Clinical Capacity for Juveniles In/Transitioning out of Detention was successful in securing funds for three positions in FY08 with \$189.2 MHTAAR.

This change record continues this funding for FY09.

Department Description:

This request includes funding for three Mental Health Clinician II (MHC) positions located in Anchorage. One of the MHC positions located in Anchorage will travel and serve both the Mat-Su Youth Facility and the Kenai Peninsula Youth Facility.

The State of Alaska is responsible for ensuring that the basic health needs of juveniles who are placed within its 24-hour secure institutions are met. These health needs include screening, evaluation and treatment for behavioral health disorders. The Department of Justice has found that constitutionally-mandated, reasonably safe, conditions of confinement include the right to adequate medical care, and behavioral health treatment has been identified as part of that medical care. Several states that have not provided basic access to behavioral health services within its 24-hour secure institutions have been found to be in violation of the federal Civil Rights of Institutionalized Persons Act (CRIPA).

Nationally, the trend to address the behavioral health needs in juvenile detention and treatment facilities is moving in the following two directions: either complete and separate units have been built at secure facilities to treat residents with these problems or clinical staff have been hired to work within existing secure facilities. The latter is the route DJJ is taking. It is recommended that one Mental Health Clinician (MHC) be on board for every 20 residents. Currently, at the McLaughlin Youth Center (MYC), there are three MHC positions for the entire facility (160 beds) and no MHC for either the Kenai Peninsula Youth Facility (KPYF) or the Mat-Su Youth Facility (MSYF). This request includes funding for three MHC II positions located in Anchorage. One of these MHC

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

positions will travel and be the sole clinician serving both KPYF and MSYF.

Data for FY07 has shown that 46% of youth formally involved with the Alaska Juvenile Justice system had at least one primary behavioral health disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders. Of those youth, 40% also had a co-occurring substance-related disorder. This is consistent with the first Juvenile Justice behavioral health data review conducted in 2001. Further, on October 9, 2007, facility data demonstrated that 69% of youth securely confined in either a detention or treatment institution in Alaska had an existing behavioral health disorder. With 2,186 admissions to secure detention and treatment in 2007, it is imperative that the State fulfill its responsibility to provide adequate access to behavioral health screening, evaluation, treatment and community referral for continued care.

Short-term outcomes are anticipated to include a decrease in the number of episodes of client behavioral management that include the use of physical restraints or room confinement, improved crisis intervention, and a decrease in the length of stay in treatment facilities for youth with DSM-IV diagnoses. Longer-term outcomes of having an appropriate staffing level of MHCs may include a shorter length of stay in detention, reduced recidivism in the juvenile system and a lowered risk of contact with the adult criminal system.

This increment request is tied to the separate request for a Mental Health Juvenile Probation Officer in Fairbanks. Since the Trust did not recommend funding for that position, it was placed in a separate record but is a strategic part of the division's support of the Fairbanks Juvenile Treatment Court.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

By having an appropriate number of behavioral staff, the State will assist youth in receiving services that will guide them towards being better able to function in life outside the facility and ultimately not recidivate. Having an adequate staffing level will assist the State in compliance with the federal Civil Rights of Institutionalized Persons Act.

Transfer out General Fund Authority to Mat-Su Youth Facility

Trout	-21.0	0.0	0.0	-21.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	-21.0											

This change record move authority from McLaughlin Youth Center to the Mat-Su Youth Facility. Beginning in FY08, the RSA with the Alaska Pioneers' Home and the Mat-Su Youth Facility was increased to cover the cost for the use of their equipment to prepare food for residents of the facility. This transfer will help to cover the increase to that RSA.

Establish Non-Permanent Position for McLaughlin Youth Center

PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	1
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This addition to the budget request reflects what has taken place in classification and payroll. PCN #06N08036 was authorized through Online Position Discription in AKPAY on 10/5/07. This Juvenile Justice Officer II level on-call non-permanent position was created to accommodate the return of a former permanent substitute in PCN 063550 to non-permanent on-call employment at the II level that was earned while permanently substituting for the militarily deployed incumbent. This position along with 06N073 provides a pool of not more than 15 such employees at the JJO I and II levels.

FY 09 Bargaining Unit Contract Terms: General Government Unit

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	SalAdj	751.6	751.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		733.9										
1037 GF/MH		7.2										
1092 MHTAAR		10.5										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$751.6

FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit

	SalAdj	17.6	17.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		17.6										

The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component.
: \$17.6

Subtotal	17,072.1	14,497.7	4.2	1,226.1	888.8	0.0	455.3	0.0	173	0	3
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

Fairbanks Juvenile Treatment Court Support

	Trout	-73.5	-73.5	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
1037 GF/MH		-73.5										

This is a request to transfer out funding for one specialized Mental Health Juvenile Probation Officer (JPO) to the Probation Services budget to support the new position in the Fairbanks probation office.

The State is responsible for ensuring appropriate probation services are provided for youth who have behavioral health disorders. Demonstrated best practice indicates that treatment courts are the most appropriate course for many juveniles who have a primary behavioral health disorder and who have broken the law. The goal of the treatment court is to ensure the youth receives adequate treatment while at the same time does not violate any conditions of probation, including committing another offense. Juvenile Justice is a key partner with the Alaska Court System and other community stakeholders in the creation of the newly-developing Fairbanks Juvenile Treatment Court, the first juvenile court in Alaska. This request includes funding for one specialized Mental Health Juvenile Probation Officer (JPO) located in Fairbanks. The specialized JPO position will provide intensive case-management for these youth and families.

Data for FY07 has shown that 46% of youth formally involved with the Alaska Juvenile Justice system had at least one primary behavioral health disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders. Of those youth, 40% also had a co-occurring substance-related disorder. This is consistent with the first Juvenile Justice behavioral health data review conducted in 2001. Further, on October 9, 2007, facility data demonstrated that 69% of youth securely confined in either a detention or treatment institution in Alaska had an existing behavioral health disorder. With 2,186 admissions to secure detention and treatment in 2007, it is imperative that the State fulfill its responsibility to provide adequate access to behavioral health screening, evaluation, treatment and community referral for continued care.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: McLaughlin Youth Center (264)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>Short-term outcomes are anticipated to include a decrease in the number of episodes of client behavioral management that include the use of physical restraints or room confinement, improved crisis intervention, and a decrease in the length of stay in treatment facilities for youth with DSM-IV diagnoses. Longer-term outcomes of having an appropriate staffing level of MHCs and a specialized Juvenile Treatment Court may include a shorter length of stay in detention, reduced recidivism in the juvenile system and a lowered risk of contact with the adult criminal system.</p> <p>This increment request is part of the division's plan to increase behavioral health services for youth in state custody. It is closely tied to the Trust recommendation for Mental Health Clinicians. Since the Trust did not recommend funding for this position, it was placed in a separate change record.</p> <p>Performance Measures:</p> <p>This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.</p>												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	134.6	134.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		134.6										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$134.6</p>												
Totals		17,133.2	14,558.8	4.2	1,226.1	888.8	0.0	455.3	0.0	172	0	3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Mat-Su Youth Facility (2339)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,855.5	1,573.8	3.2	167.9	106.2	0.0	4.4	0.0	20	0	1
1002 Fed Rcpts		20.0										
1004 Gen Fund		1,804.5										
1007 I/A Rcpts		31.0										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	3.4	3.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		3.4										
Costs associated with the bargaining unit contract terms applicable to this component.: \$3.4												
	Subtotal	1,858.9	1,577.2	3.2	167.9	106.2	0.0	4.4	0.0	20	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,858.9	1,577.2	3.2	167.9	106.2	0.0	4.4	0.0	20	0	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	25.1	0.0	0.0	0.0	0.0	0.0	25.1	0.0	0	0	0
1004 Gen Fund		25.1										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Mat-Su Youth Facility (2339)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

Trin	6.0	6.0	0.0	0.0	0.0	0.0	0.0	6.0	0.0	0	0	0
1004 Gen Fund	6.0											

In SFY 08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Mat-Su Youth Facility provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.

Transfer in Interagency Receipt Authority from McLaughlin Youth Center

Trin	4.0	4.0	0.0	0.0	0.0	4.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts	4.0											

This change records transfers I/A authority from the McLaughlin Youth Facility to this component to cover the additional monies that are collected from the Department of Education for the Child Nutrition Services. The amount of authority being transferred is \$4.0.

Transfer out Federal Authority to Delinquency Prevention Component

Trout	-19.5	-19.5	-19.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-19.5											

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Mat-Su Youth Facility (2339)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>This change record transfers \$19.5 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.</p>												
Transfer in General Funds from McLaughlin Youth Center												
1004 Gen Fund	Trin	21.0	0.0	0.0	21.0	0.0	0.0	0.0	0.0	0	0	0
		21.0										
<p>This change record moves general funds from McLaughlin Youth Center to the Mat-Su Youth Facility. Beginning in FY08, the RSA with the Alaska Pioneers' Home and the Mat-Su Youth Facility was increased to cover the cost for the use of their equipment to prepare food for residents of the facility. This transfer will help to cover the increase to that RSA.</p>												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1004 Gen Fund	SalAdj	104.5	104.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
		104.5										
<p>This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$104.5</p>												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
1004 Gen Fund	SalAdj	1.5	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
		1.5										
<p>The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component. : \$1.5</p>												
	Subtotal	2,001.5	1,663.7	3.2	188.9	110.2	0.0	35.5	0.0	20	0	1
<p align="center">***** Changes From FY2009 Governor To FY2009 Governor Amended *****</p>												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
1004 Gen Fund	SalAdj	16.7	16.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
		16.7										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$16.7</p>												
	Totals	2,018.2	1,680.4	3.2	188.9	110.2	0.0	35.5	0.0	20	0	1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Mat-Su Youth Facility (2339)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Kenai Peninsula Youth Facility (2646)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,551.8	1,292.2	5.3	129.1	121.4	0.0	3.8	0.0	17	1	1
1002 Fed Rcpts		13.3										
1004 Gen Fund		1,518.5										
1007 I/A Rcpts		20.0										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	3.2	3.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		3.2										
Costs associated with the bargaining unit contract terms applicable to this component.: \$3.2												
	Subtotal	1,555.0	1,295.4	5.3	129.1	121.4	0.0	3.8	0.0	17	1	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680017 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	1
PCN 06#179--Per OPD and AKPAY, this is PCN 06-N08008 eff 7/18/07 created and occupied by displaced permanent substitute for deployed incumbent of PCN 06-4900 who returned to work on 7/23/07. Salary based on FY06 actual + cola x .25.												
	Subtotal	1,555.0	1,295.4	5.3	129.1	121.4	0.0	3.8	0.0	17	1	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	21.4	0.0	0.0	0.0	0.0	0.0	21.4	0.0	0	0	0
1004 Gen Fund		21.4										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Kenai Peninsula Youth Facility (2646)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

1004 Gen Fund	Trin	5.0	5.0	0.0	0.0	0.0	0.0	5.0	0.0	0	0	0
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In SFY08 a general fund (GF) increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Kenai Peninsula Youth Facility provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.

Transfer in Interagency Receipt Authority from McLaughlin Youth Center

1007 I/A Rcpts	Trin	15.0	15.0	0.0	0.0	0.0	15.0	0.0	0.0	0	0	0
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This change records transfers I/A authority from the McLaughlin Youth Center to this component in the amount of \$15.0 to allow for the Kenai Peninsula

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Kenai Peninsula Youth Facility (2646)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Youth Facility to collect monies from the Department of Education's Child Nutrition Services reimbursement.												
Transfer out Federal Authority to Delinquency Prevention Component												
1002 Fed Rcpts	Trout	-12.3	-12.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record transfers \$12.3 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1004 Gen Fund	SalAdj	76.5	76.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$76.5												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
1004 Gen Fund	SalAdj	1.5	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component. : \$1.5												
Subtotal		1,662.1	1,361.1	5.3	129.1	136.4	0.0	30.2	0.0	17	1	2
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
1004 Gen Fund	SalAdj	15.4	15.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$15.4												
Totals		1,677.5	1,376.5	5.3	129.1	136.4	0.0	30.2	0.0	17	1	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Fairbanks Youth Facility (265)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	3,611.5	2,972.0	4.9	313.7	271.9	0.0	49.0	0.0	37	0	1
1002 Fed Rcpts		20.8										
1004 Gen Fund		3,406.2										
1007 I/A Rcpts		89.8										
1037 GF/MH		94.7										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	4.1	4.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		4.1										
Costs associated with the bargaining unit contract terms applicable to this component.: \$4.1												
	Subtotal	3,615.6	2,976.1	4.9	313.7	271.9	0.0	49.0	0.0	37	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680017 Add Position for On-Call Nurse at Fairbanks Youth Facility												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	1
(PCN 06-#247) This position is to be established to augment nursing coverage at the Fairbanks Youth Facility during periods of staff shortages providing a continuity of care to the residents of the facility.												
ADN 0680017 Transfer Mental Health Clinician from McLaughlin Youth Center												
	Trin	98.9	85.0	0.0	13.9	0.0	0.0	0.0	0.0	1	0	0
1004 Gen Fund		98.9										
(PCN 06-?142) This change record transfers one of the three new Mental Health Clinician positions that was budgeted in the FY08 budget to the Fairbanks Youth Facility component from the McLaughlin Youth Center component.												
	Subtotal	3,714.5	3,061.1	4.9	327.6	271.9	0.0	49.0	0.0	38	0	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	46.5	0.0	0.0	0.0	0.0	0.0	46.5	0.0	0	0	0
1004 Gen Fund		46.5										
This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Fairbanks Youth Facility (265)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

1004 Gen Fund	Trin	11.1	0.0	0.0	0.0	0.0	0.0	11.1	0.0	0	0	0
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In SFY08 a general fund (GF) increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Fairbanks Youth Facility provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Fairbanks Youth Facility (265)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.												
Transfer in Federal Authority from Delinquency Prevention												
1002 Fed Rcpts	Trin	36.2	36.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record transfers \$36.2 of federal authority to the Fairbanks Youth Facility component from the Delinquency Prevention component for the non-permanent position established for the Re-Entry grant.												
Fairbanks Youth Facility-Realign Funding to Meet Component Needs												
	LIT	0.0	0.0	0.0	30.0	-30.0	0.0	0.0	0.0	0	0	0
This change record moves \$30.0 from the 74000 line item to the 73000 line item to cover the RSA expense with the Alaska Pioneers' Home for the use of their kitchen for meal preparation. The savings we expect to realize from the Nana food contract allows us to free up some funds in the 74000 line to move these funds.												
Add Non-Permanent Juvenile Justice Officer Position and Reflect Change in Nurse II Status												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	1	1
This change record establishes the non-permanent Juvenile Justice Officer position that will work on the federal Re-Entry grant that the Division of Juvenile Justice received at the beginning of FY08. The Alaska Re-Entry Initiative has been an effort to reduce recidivism and increase the likelihood for success for juvenile offenders, specifically those aged 14-19 who have committed violent, serious, habitual crimes, and are being released after a period of incarceration of six months or longer. This position is being established to provide programming and services designed to begin preparing each institutionalized youth for a gradual and successful re-entry into the community from the time he/she is institutionalized. It is based on the Intensive Aftercare Program (IAP) model developed by Dr. David Altschuler, John Hopkins University, and Dr. Troy Armstrong, California State University, Sacramento. IAP is a theory-driven, risk and needs assessment based, and empirically grounded approach to transitioning youth from confinement into the community.												
In addition, the Nurse II position (PCN 06-4518) will become a part-time position. This change record reflects that change.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1004 Gen Fund	SalAdj	175.3	181.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH		6.3										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.												
: \$181.6												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
1004 Gen Fund	SalAdj	1.8	1.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Fairbanks Youth Facility (265)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
: \$1.8												
Subtotal		3,991.7	3,280.7	4.9	357.6	241.9	0.0	106.6	0.0	37	1	3
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	36.6	36.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		36.6										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component												
: \$36.6												
Totals		4,028.3	3,317.3	4.9	357.6	241.9	0.0	106.6	0.0	37	1	3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Bethel Youth Facility (268)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	3,009.8	2,595.6	7.8	273.1	103.3	0.0	30.0	0.0	26	0	1
1002 Fed Rcpts		30.0										
1004 Gen Fund		2,875.8										
1007 I/A Rcpts		48.3										
1037 GF/MH		55.7										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	3.8	3.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		3.8										
Costs associated with the bargaining unit contract terms applicable to this component.: \$3.8												
	Subtotal	3,013.6	2,599.4	7.8	273.1	103.3	0.0	30.0	0.0	26	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	3,013.6	2,599.4	7.8	273.1	103.3	0.0	30.0	0.0	26	0	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	33.9	0.0	0.0	0.0	0.0	0.0	33.9	0.0	0	0	0
1004 Gen Fund		33.9										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Bethel Youth Facility (268)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

1004 Gen Fund	Trin	8.1	0.0	0.0	0.0	0.0	0.0	8.1	0.0	0	0	0
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In SFY08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Bethel Youth Facility provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.

Front-Line Staffing for Bethel Youth Facility, Year 2 of Division Plan

1004 Gen Fund	Inc	95.0	83.3	0.0	11.7	0.0	0.0	0.0	0.0	1	0	0
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The Division of Juvenile Justice is requesting an increment in the amount of \$95.0 to better staff the Bethel Youth Facility (BYF). Currently, BYF is in need of three additional Juvenile Justice Officer positions to meet national practice standards for monitoring youth and ensuring the safety and security of residents and staff. To stay in line with the Division's five year plan, the division will request one of the three needed positions.

This request is in keeping with the division's commitment to base decisions on resource needs on recommended practices and data based evidence. Using

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Bethel Youth Facility (268)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

guidelines from the National Institute of Corrections, the division determined that an additional staff is needed at the Bethel Youth Facility to enable this facility to further meet its minimal needs to assure the safety and security of residents and staff. Indeed, a number of challenges faced by the facility can be directly attributed to less than adequate staffing:

Bethel Youth Facility is currently staffed at a ratio of 1.54 staff per duty post. This lower staffing ratio has resulted in a number of challenges:

~ The lower staff-resident ratio increases the likelihood that residents will harm themselves. With fewer staff to monitor and engage youth, the frequency and length of time that they are confined to their rooms is increased. When youth must be confined to their rooms, they still must be checked at a minimum of 15-minute intervals, and more frequently if they have expressed suicidal thoughts. At current staffing levels BYF is unable to conduct these checks on the routine basis needed to ensure resident safety.

~ The lower staff-resident ratio increases the need for non-permanent employees and overtime hours. In FY07, BYF utilized over 2,700 hours of work from non-permanent employees or overtime from current staff. A portion of these hours and dollars were attributed to insufficient staffing in the Facility's detention and treatment units. Only two workers staff BYF during graveyard shift, a dangerous situation that prevents any more than one staff from being present on either of the facility's two units. When an emergency or admission occurs during graveyard shift, a staff person often must be called in from home to assure that the duty posts are adequately staffed. Similarly, when difficulties arise late in the evening, such as a resident acting out in an aggressive or harmful manner, staff from the earlier shift are required to work overtime to ensure adequate staffing levels on the graveyard shift.

~ The lower staff-resident ratio at Bethel Youth Facility decreases the consistency of services youth receive. BYF is the most routinely overcrowded juvenile facility in Alaska, responsible for detaining youth and providing treatment services to juveniles from Bethel and the 56 neighboring villages throughout the Yukon-Kuskokwim Delta. Being filled over capacity regularly requires staff to escort youth to other facilities around the state; these escorts are in addition to the routine and frequent local escorts staff must make with youth to court and the local medical clinic. The constant pulling of staff away from their duty posts compounds the problem of being short-staffed, limiting opportunities for anger-management treatment groups, community work service, and other treatment-related activities.

The hiring of one of the three needed additional juvenile justice officers would bring Bethel Youth Facility more into line with Alaska's staff-resident ratio and would be expected to result in the following positive outcomes:

- ~ Increased interactions of staff with institutionalized youth, resulting in better outcomes and lower likelihood of recidivism;
- ~ Reduced room confinement and isolation of youth;
- ~ Decreased idle hours for youth;
- ~ Increased ability to provide continuous, regular monitoring of youth at all shifts, decreasing the risk of suicide attempts;
- ~ Decreased need for non-permanent employees and overtime hours by existing staff;
- ~ Increased ability to conduct school and other activities according to schedule;
- ~ Decreased incidence of resident misconduct and assault, and staff sick leave.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

By having the facility more appropriately staffed, the division will be able to focus on reducing the number of youth that re-offend. Permanent, trained staff is better able to carry out the division's programs that will help reduce the recidivism and assist the probation staff to go into the community to educate and

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Bethel Youth Facility (268)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
mentor youth to keep them from re-offending.												
Transfer out Federal Authority to Delinquency Prevention												
	Trout	-27.0	-27.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-27.0										
This change record transfers \$27.0 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	156.8	156.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		155.8										
1037 GF/MH		1.0										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$156.8												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
	SalAdj	1.7	1.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		1.7										
The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component. : \$1.7												
	Subtotal	3,282.1	2,814.2	7.8	284.8	103.3	0.0	72.0	0.0	27	0	1
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	27.7	27.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		27.7										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$27.7												
	Totals	3,309.8	2,841.9	7.8	284.8	103.3	0.0	72.0	0.0	27	0	1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nome Youth Facility (266)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,961.3	1,783.6	7.1	95.2	50.4	0.0	25.0	0.0	18	1	1
1002 Fed Rcpts		12.5										
1004 Gen Fund		1,948.8										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	3.6	3.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		3.6										
Costs associated with the bargaining unit contract terms applicable to this component.: \$3.6												
	Subtotal	1,964.9	1,787.2	7.1	95.2	50.4	0.0	25.0	0.0	18	1	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680017 Realign Funding to Meet Operational Needs for Nome Youth Facility												
	LIT	0.0	-23.4	0.0	23.4	0.0	0.0	0.0	0.0	0	0	0
This change record moves funding from personal services to the services line to better fund the anticipated FY08 utility expenses for the Nome Youth Facility.												
	Subtotal	1,964.9	1,763.8	7.1	118.6	50.4	0.0	25.0	0.0	18	1	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	22.6	0.0	0.0	0.0	0.0	0.0	22.6	0.0	0	0	0
1004 Gen Fund		22.6										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nome Youth Facility (266)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

Trin	5.4	0.0	0.0	0.0	0.0	0.0	5.4	0.0	0	0	0
1004 Gen Fund	5.4										

In SFY08 a general fund (GF) increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services however, these services are provided by other divisions. Nome Youth Facility provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.

Funding for Nome's Operating Costs

Inc	50.0	0.0	0.0	50.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	50.0											

We are requesting a \$50.0 increment in the Services line due to overhead cost increases associated with running this facility. Over the last two fiscal years, since the expansion of the building in FY06, Nome has increased services from 6 to 14 beds, and absorbed the increased costs of utilities, food and other

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nome Youth Facility (266)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

services associated with the additional youths being served at this facility.

During the FY06 budget process many of the current day overhead cost were not realized. To date, we have been able to cover these expenses because of vacancies in this component and in other components within the Juvenile Justice RDU. This budgeting practice is not sustainable. We would like to bring this component in line with its needs over a three year period.

Indicated below are the services and commodity expenses for the past three fiscal years for this component. In FY05, we paid \$72.3 from the services line for services such as telecommunications, utilities and interagency billings. In FY06, that amount rose to \$147.1 and in FY07, we paid a total of \$182.8 for these services. The difference from FY05 to FY07 is \$110.5. The FY06 increment only included \$13.8 additional funding for this line item. We would like to request \$100.0 increase for the contractual line item over a three-year period. At this point, we would like to request \$50.0; we will request the remaining amount needed in FY11.

In FY05, we paid \$26.6 from the commodities line for supplies such as food and regular office supplies. In FY06, that amount was \$69.8 and it was \$75.6 in FY07. The difference from FY05 to FY07 is \$49.0. We did not ask for an increment on the commodities line in the FY06 increment, but feel that \$50.0 increase to this line would be sufficient to appropriately fund this component. We will ask for this increase in FY10.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

Transfer out Federal Authority to Delinquency Prevention

Trout	-10.5	-10.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-10.5										

This change record transfers \$10.5 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	106.5	106.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	106.5										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$106.5

FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit

SalAdj	1.6	1.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	1.6										

The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nome Youth Facility (266)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
component. : \$1.6												
	Subtotal	2,140.5	1,861.4	7.1	168.6	50.4	0.0	53.0	0.0	18	1	1
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	19.7	19.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		19.7										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$19.7												
	Totals	2,160.2	1,881.1	7.1	168.6	50.4	0.0	53.0	0.0	18	1	1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Johnson Youth Center (267)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,911.8	2,372.2	3.5	247.6	228.0	0.0	60.5	0.0	32	0	2
1002 Fed Rcpts		30.2										
1004 Gen Fund		2,805.0										
1007 I/A Rcpts		76.6										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	3.2	3.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		3.2										
Costs associated with the bargaining unit contract terms applicable to this component.: \$3.2												
	Subtotal	2,915.0	2,375.4	3.5	247.6	228.0	0.0	60.5	0.0	32	0	2
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	2,915.0	2,375.4	3.5	247.6	228.0	0.0	60.5	0.0	32	0	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	38.9	0.0	0.0	0.0	0.0	0.0	38.9	0.0	0	0	0
1004 Gen Fund		38.9										

TThis increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Johnson Youth Center (267)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

1004 Gen Fund	Trin	9.3	9.3	0.0	0.0	0.0	0.0	9.3	0.0	0	0	0
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In SFY08 a general fund (GF) increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Johnson Youth Center provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.

Front-Line Staffing at Johnson Youth Center, Year 2 of Division Plan

1004 Gen Fund	Inc	70.0	70.0	63.3	0.0	6.7	0.0	0.0	0.0	0.0	1	0	0
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The Division of Juvenile Justice is requesting an increment in the amount of \$70.0 to better staff the Johnson Youth Center (JYC). Currently, JYC is in need of two additional Juvenile Justice Officer positions to meet national practice standards for monitoring youth and ensuring safety and security of residents and staff. The division has developed a five-year plan to acquire needed positions statewide; this is the second year of the plan and will bring us closer to full staffing at JYC.

This request is in keeping with the division's commitment to base decisions on resource needs on recommended practices and data based evidence. Using

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Johnson Youth Center (267)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

guidelines from the National Institute of Corrections, the Division determined that an additional staff is needed at the Johnson Youth Center to enable this facility to further meet its minimal needs to assure the safety and security of residents and staff. Indeed, a number of challenges faced by the facility can be directly attributed to less than adequate staffing:

- ~ The lower staff-resident ratio increases the likelihood that residents will harm themselves. With fewer staff to monitor and engage youth, the frequency and length of time that they are confined to their rooms is increased. When youth must be confined to their rooms, they still must be checked at a minimum of 15-minute intervals, and more frequently if they have expressed suicidal thoughts.
- ~ The lower staff-resident ratio increases the need for non-permanent employees and overtime hours. In FY07, JYC utilized more than 6,500 hours of work from non-permanent employees or overtime. A portion of these hours were incurred to make up for the lack of permanent direct line staff.
- ~ The lower staff-resident ratio at Johnson Youth Center decreases the consistency of services youth receive. According to the Performance-based Standards report for April 2007, staff self-reports demonstrated that employees were concerned for their personal safety at a level that exceeded the national average. The potential of two new community partnerships (Boys and Girls Club and Big Brothers Big Sisters) has been limited to date due to the lack of staff at JYC that can be made available to assist with the start up and implementation of these programs.

The hiring of an additional juvenile justice officer would help to bring JYC into line with Alaska's staff-resident ratio and would be expected to result in the following positive outcomes:

- ~ Increased interactions of staff with institutionalized youth, resulting in better outcomes and lower likelihood of recidivism;
- ~ Increased ability to provide continuous, regular monitoring of youth at all shifts, decreasing the risk of suicide attempts;
- ~ Decreased need for non-permanent employees and overtime hours by existing staff;
- ~ Decreased incidence of resident misconduct and assault, and staff sick leave.
- ~ Decrease staff concern for personal safety;
- ~ Increase effectiveness of partnerships with Boys and Girls Club and Big Brothers Big Sisters.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

By having the facility more appropriately staffed, the division will be able to focus on reducing the number of youth that re-offend. Permanent, trained staff is better able to carry out the division's programs that will help reduce the recidivism and assist the probation staff to go into the community to educate and mentor youth to keep them from re-offending.

Transfer in Interagency Receipt Authority from McLaughlin Youth Center

	Trin	1.5	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		1.5										

This change records transfers I/A authority from the McLaughlin Youth Center to allow for the Johnson Youth Center to collect monies for parking lot maintenance services provided to the Division of Public Health.

Transfer out Federal Authority to Delinquency Prevention

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Johnson Youth Center (267)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1002 Fed Rcpts	Trout	-29.2	-29.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record transfers \$29.2 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1004 Gen Fund	SalAdj	138.7	138.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$138.7												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
1004 Gen Fund	SalAdj	1.5	1.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component. : \$1.5												
Subtotal		3,145.7	2,551.2	3.5	254.3	228.0	0.0	108.7	0.0	33	0	2
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
1004 Gen Fund	SalAdj	32.9	32.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$32.9												
Totals		3,178.6	2,584.1	3.5	254.3	228.0	0.0	108.7	0.0	33	0	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Ketchikan Regional Youth Facility (2413)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,387.7	1,171.1	3.5	120.7	86.4	0.0	6.0	0.0	15	1	1
1002 Fed Rcpts		65.0										
1004 Gen Fund		1,302.7										
1007 I/A Rcpts		20.0										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	2.4	2.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		2.4										
Costs associated with the bargaining unit contract terms applicable to this component.: \$2.4												
	Subtotal	1,390.1	1,173.5	3.5	120.7	86.4	0.0	6.0	0.0	15	1	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,390.1	1,173.5	3.5	120.7	86.4	0.0	6.0	0.0	15	1	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
General Funds Required Due to Elimination of ProShare funding												
	Inc	17.6	0.0	0.0	0.0	0.0	0.0	17.6	0.0	0	0	0
1004 Gen Fund		17.6										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching general funds (GF) through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law, and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Ketchikan Regional Youth Facility (2413)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Juvenile Justice began utilizing ProShare funds in late FY04. Medical costs that would normally have been paid directly to a provider for medical needs were submitted to Providence Hospital for payment. These medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the ProShare funding for Juvenile Justice, these funds are necessary to provide the division the funding needed to continue these services.

Performance Measures Affected:

- Dept-Core Services --Manage health care coverage for Alaskans in need
- Dept-Core Services --Protect and promote the health of Alaskans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--Mitigate service reductions by replacing general funds with alternate funds
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A4--Assure access to early preventative services and quality health care

Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing

1004 Gen Fund	Trin	4.2	4.2	0.0	0.0	0.0	0.0	4.2	0.0	0	0	0
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In SFY08 a general fund (GF) increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Ketchikan Regional Youth Facility provides for medical needs included everything from prescriptions, psychiatric evaluations, dental work, to any necessary surgeries or hospital stays. The division is required by Alaska statute to provide necessary medical services to clients that are housed in our Juvenile Justice facilities (AS 47.12.150, AS 47.14.020). With the elimination of the Proshare funding for Juvenile Justice, this transfer of the general funds is necessary to provide the division the funding needed to continue these services.

Front-Line Staffing for Ketchikan Regional Youth Facility, Year 2 of Division Plan

1004 Gen Fund	Inc	70.0	70.0	63.3	0.0	6.7	0.0	0.0	0.0	0.0	1	0	0
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The Division of Juvenile Justice is requesting an increment in the amount of \$70.0 to adequately staff the Ketchikan Regional Youth Facility (KRYF). This facility is in need of one more Juvenile Justice Officer position to provide the minimum staffing required to meet national practice standards for monitoring youth, ensuring the security and safety of residents and staff. In FY08, the division requested and received one of the needed positions. This will be the final position needed to bring the facility to full staffing levels.

This request is in keeping with the division's commitment to base decisions on resource needs on recommended practices and data based evidence. Using

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Ketchikan Regional Youth Facility (2413)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

guidelines from the National Institute of Corrections, the division determined that this final position is needed to meet its minimal needs to assure the safety and security of residents and staff. Indeed, a number of challenges faced by the facility can be directly attributed to less than adequate staffing:

~ The lower staff-resident ratio limits effective interactions with youth. The facility consists of two units, a detention unit where youth are brought while awaiting a court appearance for an offense; and a crisis stabilization Unit, where youth are held in a non-secure setting to deal with mental health and other crisis needs. The crisis stabilization unit requires staff to spend a significant amount of time lining up services for youth and helping them access these services. Short staffing requires staff to forego many of these meetings or treatment related skill-building activities to stay behind at the facility to assure minimum safety and security.

~ The lower staff-resident ratio increases the likelihood that residents will harm themselves. With fewer staff to monitor and engage youth, the frequency and length of time that they are confined to their rooms is increased. When youth must be confined to their rooms, they still must be checked at a minimum of 15-minute intervals, and more frequently if they have expressed suicidal thoughts. At current staffing levels KRYF would be able to provide these room checks but unable to conduct any additional treatment programming or activities. This past year, employees on the crisis stabilization unit routinely were needed to assist staff in the Detention Unit, creating situations where youth in the crisis stabilization were unsupervised by direct contact for lengths of time, which increased the risk of harm or undetected misconduct.

~ The lower staff-resident ratio increases the need for non-permanent employees and overtime hours. In FY07, The Ketchikan Regional Youth Facility utilized more than 3,700 hours of work from non-permanent employees or overtime. A portion of these hours were incurred to make up for the lack of permanent direct line staff.

~ The lower staff-resident ratio at Ketchikan Regional Youth Facility decreases the consistency of services youth receive. The potential of new community partnerships, such as for community work service projects and victim-offender mediation has been limited due to the lack of staff at KRYF that can be made available to assist with the start up and implementation of these programs.

The hiring of this juvenile justice officer would bring the facility into line with Alaska's staff-resident ratio and would be expected to result in the following positive outcomes:

- ~ Increased interactions of staff with institutionalized youth, resulting in better outcomes and lower likelihood of recidivism;
- ~ Reduced room confinement and isolation of youth.;
- ~ Decreased idle hours for youth;
- ~ Increased ability to provide continuous, regular monitoring of youth at all shifts, decreasing the risk of suicide attempts;
- ~ Decreased need for non-permanent employees and overtime hours by existing staff;
- ~ Increased ability to conduct school and other activities according to schedule;
- ~ Decreased incidence of resident misconduct and assault, and staff sick leave.
- ~ Decrease staff concern for personal safety;
- ~ Increase partnerships with agencies that can benefit juveniles and victims, such as victim-offender mediation.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

By having the facility more appropriately staffed, the division will be able to focus on reducing the number of youth that re-offend. Permanent, trained staff

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Ketchikan Regional Youth Facility (2413)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
is better able to carry out the division's programs that will help reduce the recidivism and assist the probation staff to go into the community to educate and mentor youth to keep them from re-offending.												
Transfer in Interagency Receipt Authority from McLaughlin Youth Center												
1007 I/A Rcpts	Trin	2.7	2.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change records transfers I/A authority from the McLaughlin Youth Center to the Ketchikan Regional Youth Facility to allow for receipt of monies for various maintenance services provided to the Division of Public Health.												
Transfer out Federal Authority to Delinquency Prevention												
1002 Fed Rcpts	Trout	-27.0	-27.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record transfers \$27.0 of federal authority to the Delinquency Prevention component. The division is no longer able to charge the Federal Title II Formula grant for work spent on the Performance-based Standards as this is no longer considered a new initiative.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1004 Gen Fund	SalAdj	70.6	70.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$70.6												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
1004 Gen Fund	SalAdj	1.1	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component. : \$1.1												
Subtotal		1,529.3	1,284.2	3.5	127.4	86.4	0.0	27.8	0.0	16	1	1
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
1004 Gen Fund	SalAdj	12.9	12.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Ketchikan Regional Youth Facility (2413)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
this component : \$12.9												
Totals		1,542.2	1,297.1	3.5	127.4	86.4	0.0	27.8	0.0	16	1	1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	11,554.8	9,930.5	190.4	936.0	83.0	57.9	357.0	0.0	124	1	1
1002 Fed Rcpts		1,163.0										
1004 Gen Fund		10,063.7										
1007 I/A Rcpts		10.2										
1037 GF/MH		59.8										
1108 Stat Desig		258.1										
First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	Atrin	62.4	0.0	0.0	62.4	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		62.4										
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
ETS Chargeback Transfer from Department of Administration												
	Atrin	40.0	0.0	0.0	40.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		40.0										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	11,657.2	9,930.5	190.4	1,038.4	83.0	57.9	357.0	0.0	124	1	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680017 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2	0	2
06-#163 (06-4952 in AKPAY), State Office, Associate Coordinator--This position was created to work on compliance monitoring functions for the division. This position will assist with the statewide coordination of Compliance Monitoring activities. This position will be supervised by the Social Services Coordinator/Juvenile Justice Specialist, is a staff member of the Program Unit and works in conjunction with the statewide citizen advisory group (AJJAC) DJJ field staff and local law enforcement to ensure compliance with the core mandates of the federal Juvenile Justice and Delinquency Prevention Act. Compliance with the core mandates is essential to ensure continued federal funding for the Division of Juvenile Justice (DJJ).												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

It had been highly recommended by our federal contact that we develop a position to specifically perform the duties required to ensure we stay in compliance and continue to receive our federal funding.

06-#177, Bethel, Administrative Clerk III--The amount of juvenile probation officers in the Bethel office has tripled from two to six and the Bethel Youth Facility has added several juvenile justice officers, a Mental Health Clinician, changed a part-time Nurse to full time and moved the Deputy Director of Operations to Bethel. Over the course of these additions, no new clerical/support staff were been added. This position is needed to redistribute the increased workload.

06-#243 (06-N07061 in AKPAY), Fairbanks, College Intern IV--The probation intern position is a partnership between the Division of Juvenile Justice and the University of Alaska. It allows students to get experience performing some of the duties of a juvenile probation/justice officer and broadens the applicant pool for these positions when DJJ has vacancies.

06-#244 (06-N07038 in AKPAY), Nome, On-Call Non-Perm Juvenile Probation Officer II--This position was established for the Nome Probation Office to help with intakes, supervision of clients, and escorts. The Nome office is very busy and has a fluctuating workload. It was determined this position was needed to supplement existing staff and to fill in when staff are on leave or out of the office.

Subtotal	11,657.2	9,930.5	190.4	1,038.4	83.0	57.9	357.0	0.0	126	1	3
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***** **Changes From FY2008 Management Plan To FY2009 Governor** *****

General Funds Required Due to Decrease in Fed Medical Assistance Percentage Rate for Targeted Case Management Billing

Inc	32.9	32.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	32.9										

Beginning in late FY07, the division began to bill Medicaid for the Targeted Case Management services our Juvenile Probation Officers are providing to Medicaid eligible youth. For the first quarter of FY08, we will be reimbursed 57.58% of the cost to provide these services. Beginning October 1, 2007, we will be reimbursed 52.48%. This will average out to 53.76% for FY2008; in FY09, it is anticipated that rate will change to 50.53% effective October 1, 2008, which will make the average for that year 51.02% .

The division expects to bill Medicaid approximately \$1.2 Million dollars in FY08. At the current Federal Medical Assistance Percentage (FMAP) rate and change for this fiscal year, we expect to be reimbursed about \$645.1 in FY08. Assuming we will bill approximately the same amount in FY09, we expect to be reimbursed approximately \$612.2. This will mean a decrease in Medicaid reimbursement of approximately \$32.9. This increment request will make the division whole for the portion of Medicaid we will no longer be reimbursed beginning in FY09.

Funding for Performance-based Standards

Inc	115.0	0.0	0.0	115.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	115.0										

The Council of Juvenile Correctional Administrators (CJCA) is no longer receiving federal funding to help support Performance-based Standards. Their lack of funding has forced them to raise the cost to their clients. In FY08, the increased cost to the division will be covered with federal funding. For FY09 and beyond, because the JABG funding is not guaranteed, this increment in general funds is needed to cover the increased cost to the division.

The Council of Juvenile Correctional Administrators (CJCA) is the only national organization focused exclusively on the improvement of juvenile justice

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

services inside facilities (as opposed to adult corrections), promotion of best practices and adoption of Performance-based Standards (PbS) to promote these best practices in juvenile justice. CJCA developed PbS with the help and funding of the federal Office of Juvenile Justice and Delinquency Prevention and is the only agency that administers the PbS project in the nation.

CJCA provides the division with continued on-site training and implementation of PbS for all eight of Alaska's juvenile facilities and provides ongoing technical assistance to all sites as our facilities progress through the performance levels. CJCA will also visit each of Alaska's facilities to provide feedback and monitoring to ensure continued integration of these standards. PbS provides an ongoing quality assurance process that emphasizes performance and attainment of measurable goals within juvenile institutions. The performance standards focus on outcome measures in key areas of juvenile justice, including safety, order, security, health, programming, justice and reintegration. The PbS process is dynamic and is based upon sound data collection processes including information from records, reports and staff and resident interviews.

Participation in this national continuous self-improvement process allows for the PbS consultants and division staff to identify areas that need improvement and to use this as the basis for creation of an individualized Facility Improvement Plan (FIP). These FIPs focus on areas of service provision that are proven by data to need improvement, whether in the critical areas of safety and security or in treatment and rehabilitation program development. Or participation in PbS thus far has demonstrated the need for continued development and improvement of our facility programs, which is critical to the division's mission of holding kids accountable for their actions and providing competency development through assessment of need and specific program delivery.

The division has made the transition from the American Correctional Association (ACA) accreditation procedure to the adoption of PbS. PbS is focused solely on juvenile facilities and no other rival program exists which provides standards, improvement cycles and technical assistance. Unlike ACA accreditation, which is a static, once every three year visit and certification process, PbS is an ongoing, continuous quality improvement process. PbS allows for numerically based comparisons between Alaska facilities and other participating facility programs across the nation at a frequency of twice per year. This transition to PbS was timely as the division embarked on several system improvements which were closely related to the PbS standards of service. For future advancement and improvement of services to Alaska's incarcerated youth, the division's continued PbS membership is critical.

PbS provides an ongoing review of our state operated facilities that fulfills the State of Alaska Legislature's request of implementing performance measures for all state operated programs.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

This increment request also pertains to the Division's Measure A, Outcome Statement #1 (Improve the ability to hold juvenile offenders accountable for the behavior).

Youth Gang and Violence Reduction Project

	Inc	513.1	422.5	28.5	37.1	25.0	0.0	0.0	0.0	6	0	0
1004 Gen Fund		513.1										

Crime by young people is a top safety and security concern for Alaskans. High-profile shootings have occurred in public places and the number of violent, gun-related, and drug-related crimes involving youth remains unacceptably high. The City of Anchorage has formed a task force to find solutions to the problem. The City of Fairbanks has developed a partnership among local stakeholders to try and head off gangs before they're established in the Interior.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Legislators report that, as they meet with their constituents, youth crime in their neighborhoods heads their list of concerns.

It's time for the State of Alaska to provide a more focused response to these concerns. The Division of Juvenile Justice proposes implementation of Aggression Replacement Training® for youth displaying signs of bullying, aggression, and violence, as well as those who fully entrenched in criminal and delinquent behavior. Aggression Replacement Training® is a nationally recognized curriculum for juveniles that has been proven by research to be effective in reducing recidivism. The U.S. Office of Juvenile Justice and Delinquency Prevention has awarded Aggression Replacement Training "Model Program" status. In one study, young people in several Brooklyn gangs without Aggression Replacement Training® services had four times the number of arrests of similar young gang members who participated in the curriculum (Goldstein, Glick, Carthan, and Blancero, 1994). A major study by the Washington State Institute for Public Policy measured a 24% reduction in felony recidivism when Aggression Replacement Training® was delivered according to the standardized model (Barnoski, 2004).

In a 1998 study Professor Mark A. Cohen of Vanderbilt University found that preventing one teen from adopting a life of crime would save the country between \$1.7 million and \$2.3 million. Aggression Replacement Training® has been proven by research to be cost effective and save money for crime victims and taxpayers. In the Washington State study (Barnoski, 2004), the cost-benefit analysis demonstrated that when Aggression Replacement Training® is delivered competently, it generates \$11.66 in benefits (avoided crime costs) for each \$1.00 spent on the program.

Youth at risk for aggressive behavior in school or in the community will attend 30 one-hour Aggression Replacement Training® classes over 10-weeks. The classes will teach youth a broad array of pro-social behavioral skills, methods to identify and modify their own angry responses to conflict, and to consider how their actions will affect others. The program relies on repetitive learning techniques to teach participants to control impulsiveness and anger and use more appropriate behaviors. In addition, guided group discussion is used to correct antisocial thinking. Juvenile justice staff will facilitate these classes, and provide initial facilitator training, on-going refresher trainings, screening of referrals, and quality assurance and program outcome data collection, analysis and reporting.

This increment request will allow the division to provide this program to youth statewide with particular emphasis in Anchorage and Fairbanks during this first year. The division will hire three Juvenile Probation Officers in Anchorage; two Juvenile Probation Officers and one Juvenile Justice Officer in Fairbanks. In future years, the division will hire a Juvenile Probation Officer in Juneau; a Social Services Program Officer and Administrative Assistant to provide program oversight and management, quality assurance, and outcome data collection, analysis and reporting; and a Training Specialist to provide training support to staff statewide.

The Youth Gang and Violence Reduction Project will provide an effective intervention to reduce gang activities and prevent crime while providing a cost savings to victims of crime and the general public.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

ETS Chargeback Redistribution

	Atrin	24.8	0.0	0.0	24.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		24.8										

Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

cost allocation plan are redistributed to more closely align with costs.

Amounts transferred from state agencies are as follows:
Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).

Amounts transferred to state agencies are as follows:
Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.

Correct Unrealizable Fund Sources for Salary Adjustments: GGU

	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-27.9										
1004 Gen Fund		35.2										
1108 Stat Desig		-7.3										

Non-Permanent Position for Gang Prevention Grant

	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	1
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The Division of Juvenile Justice received a two-year grant from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) for a Gang Prevention Program in Fairbanks which included funding for a Juvenile Probation Officer I position. This non-permanent position was established to meet the intent of the grant.

The classification position control number that has been assigned to this position is 06-N08060.

Delete one-time-authorization for First FY2008 Fuel/Utility Cost Increase Funding Distribution

	OTI	-62.4	0.0	0.0	-62.4	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-62.4										

One-time-funding deleted for fuel/utility increases which were added in the FY08 budget as follows:

Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.

The amounts transferred to state agencies are as follows:
Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.

FY 09 Health Insurance Increases for Exempt Employees

	SalAdj	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.2										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	484.5	484.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		27.9										
1004 Gen Fund		449.3										
1108 Stat Desig		7.3										
Subtotal		12,765.3	10,870.6	218.9	1,152.9	108.0	57.9	357.0	0.0	132	1	4
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Fairbanks Juvenile Treatment Court Support												
	Trin	73.5	73.5	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1037 GF/MH		73.5										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$484.5

This request is to transfer in funding for one specialized Mental Health Juvenile Probation Officer (JPO) located in the McLaughlin Youth facility budget to the Probation Services Budget.

The State is responsible for ensuring appropriate probation services are provided for youth who have behavioral health disorders. Demonstrated best practice indicates that treatment courts are the most appropriate course for many juveniles who have a primary behavioral health disorder and who have broken the law. The goal of the treatment court is to ensure the youth receives adequate treatment while at the same time does not violate any conditions of probation, including committing another offense. Juvenile Justice is a key partner with the Alaska Court System and other community stakeholders in the creation of the newly-developing Fairbanks Juvenile Treatment Court, the first juvenile court in Alaska. This request includes funding for one specialized Mental Health Juvenile Probation Officer (JPO) located in Fairbanks. The specialized JPO position will provide intensive case-management for these youth and families.

Data for FY07 has shown that 46% of youth formally involved with the Alaska Juvenile Justice system had at least one primary behavioral health disorder as defined by the Diagnostic and Statistical Manual of Mental Disorders. Of those youth, 40% also had a co-occurring substance-related disorder. This is consistent with the first Juvenile Justice behavioral health data review conducted in 2001. Further, on October 9, 2007, facility data demonstrated that 69% of youth securely confined in either a detention or treatment institution in Alaska had an existing behavioral health disorder. With 2,186 admissions to secure detention and treatment in 2007, it is imperative that the State fulfill its responsibility to provide adequate access to behavioral health screening, evaluation, treatment and community referral for continued care.

Short-term outcomes are anticipated to include a decrease in the number of episodes of client behavioral management that include the use of physical restraints or room confinement, improved crisis intervention, and a decrease in the length of stay in treatment facilities for youth with DSM-IV diagnoses. Longer-term outcomes of having an appropriate staffing level of MHCs and a specialized Juvenile Treatment Court may include a shorter length of stay in detention, reduced recidivism in the juvenile system and a lowered risk of contact with the adult criminal system.

This increment request is part of the division's plan to increase behavioral health services for youth in state custody. It is closely tied to the Trust

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

recommendation for Mental Health Clinicians. Since the Trust did not recommend funding for this position, it was placed in a separate change record.

Performance Measures:

This increment request pertains to Department Measure E, Outcome State #5 (Improve juvenile offenders' success in the community following completion of services resulting in higher levels of accountability and public safety). Targets 1 and 2 state: 1) Reduce percentage of juvenile who re-offend following release from institutional treatment facilities to less than the year before; and 2) Reduce percentage of juveniles who re-offend following completion of formal court-ordered probation supervision to less than the prior year.

Fund Change from Federal to GF for Targeted Case Management

	FndChg	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
1002 Fed Rcpts	-600.0											
1004 Gen Fund	600.0											
		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

The Department of Health and Social Services, Division of Juvenile Justice, is requesting a budget amendment in the amount of \$600,000 in general funds to replace federal revenues that won't be realized for Targeted Case Management billings. The Division has also requested an FY08 supplemental funding for this amount.

The Division will not bill for Targeted Case Management services due to the recent federal ruling that disallows the ability to bill for these services. See Federal Register/Volume 72, No 232, dated December 4, 2007.

In the Fall of 2006 (when the FY08 budget was developed), billing for Targeted Case Management was a viable option for the division. The division requested and received a decrement to general funds for the FY08 budget and beyond. During FY07, the division worked to get billing processes in place for these services. In November 2007, the division was made aware of the possible ruling and so did not bill for services beyond August 2007.

BUDGETARY ISSUES:

Because of the reduction to the division's FY08 general fund budget and the fact that we are not able to bill for these services, the division needs to replace the federal funding with general funds. If this amendment to the FY09 budget is not approved, the division will have to cut other programs, i.e., probation services, community programs or youth courts to fund this gap.

This is an unanticipated need in that the division was fully expecting to bill Medicaid for the targeted case management services. Unless the ruling is reversed (which is not anticipated), the division will not be able to recoup these funds.

FY09 Bargaining Unit Contract Terms: Supervisory Unit

	SalAdj	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
1002 Fed Rcpts	9.4											
1004 Gen Fund	193.9											
1037 GF/MH	3.8											
		207.1	207.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$207.1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Probation Services (2134)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	13,045.9	11,151.2	218.9	1,152.9	108.0	57.9	357.0	0.0	133	1	4

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Delinquency Prevention (248)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,626.5	0.0	135.9	984.3	13.5	0.0	492.8	0.0	0	0	0
1002 Fed Rcpts		1,596.5										
1108 Stat Desig		30.0										
Subtotal		1,626.5	0.0	135.9	984.3	13.5	0.0	492.8	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		1,626.5	0.0	135.9	984.3	13.5	0.0	492.8	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in Excess Federal Revenue Authority from Facility Components												
	Trin	138.3	0.0	0.0	138.3	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		138.3										
Subtotal		1,764.8	0.0	135.9	1,122.6	13.5	0.0	492.8	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		1,764.8	0.0	135.9	1,122.6	13.5	0.0	492.8	0.0	0	0	0

The Division of Juvenile Justice is not able to continue to claim against federal funding for our Performance-based Standards as this is no longer considered a new initiative. Time spent by managers and staff that worked on inputting data had been charged to the Title II Formula grant; but this can only happen for new initiatives. After two years, we quite charging against the federal grant. This change record moves authority back to the Delinquency Prevention component.

In addition, this change record allows an additional \$36.2 to be moved to the Fairbanks Youth Facility for the non-permanent position established with the Re-Entry grant.

MYC: \$49.0
MSYF: \$19.5
KPYF: \$12.3
FYF: (\$36.2)
BYF: \$27.0
NYF: \$10.5
JYC: \$29.2
KRYF: \$27.0

Total: \$138.3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Delinquency Prevention (248)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Youth Courts (2768)
RDU: Juvenile Justice (319)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	848.0	0.0	50.0	50.0	0.0	0.0	748.0	0.0	0	0	0
1002 Fed Rcpts		568.5										
1004 Gen Fund		279.5										
	Subtotal	848.0	0.0	50.0	50.0	0.0	0.0	748.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	848.0	0.0	50.0	50.0	0.0	0.0	748.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	848.0	0.0	50.0	50.0	0.0	0.0	748.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	848.0	0.0	50.0	50.0	0.0	0.0	748.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Temporary Assistance Program (220)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	30,531.8	0.0	0.0	0.0	0.0	0.0	30,531.8	0.0	0	0	0
1002 Fed Rcpts		11,675.9										
1003 G/F Match		16,845.9										
1007 I/A Rcpts		2,010.0										
Subtotal		30,531.8	0.0	0.0	0.0	0.0	0.0	30,531.8	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		30,531.8	0.0	0.0	0.0	0.0	0.0	30,531.8	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer out General Fund Match to Tribal Assistance Program												
	Trout	-400.0	0.0	0.0	0.0	0.0	0.0	-400.0	0.0	0	0	0
1003 G/F Match		-400.0										
Subtotal		30,131.8	0.0	0.0	0.0	0.0	0.0	30,131.8	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		30,131.8	0.0	0.0	0.0	0.0	0.0	30,131.8	0.0	0	0	0

Bristol Bay Native Association has fully implemented their administration of Temporary Assistance for Needy Families (TANF) benefits in their region. With this fifth Native Organization in place, we are transferring the balance of General Fund Match needed to fully administer grants for the approximately 107 families and more than 30 Bristol Bay villages of Southwestern Alaska, from the Alaska Temporary Assistance Program (ATAP) Component to the Tribal Assistance Program Component.

MISSION AND MEASURES REFERENCE:
 Division End Result A: Low income families and individuals become economically self-sufficient.
 Strategy A4: Improve timeliness of benefit delivery.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Adult Public Assistance (222)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	57,231.4	0.0	0.0	0.0	0.0	0.0	57,231.4	0.0	0	0	0
1002 Fed Rcpts		1,030.0										
1004 Gen Fund		52,138.4										
1007 I/A Rcpts		4,063.0										
Subtotal		57,231.4	0.0	0.0	0.0	0.0	0.0	57,231.4	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		57,231.4	0.0	0.0	0.0	0.0	0.0	57,231.4	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		57,231.4	0.0	0.0	0.0	0.0	0.0	57,231.4	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		57,231.4	0.0	0.0	0.0	0.0	0.0	57,231.4	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Child Care Benefits (1897)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	48,498.1	2,713.1	143.0	1,541.7	62.6	0.0	44,037.7	0.0	35	0	0
1002 Fed Rcpts		41,276.5										
1003 G/F Match		6,290.2										
1004 Gen Fund		931.4										
Subtotal		48,498.1	2,713.1	143.0	1,541.7	62.6	0.0	44,037.7	0.0	35	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680015 Transfer of PCN from Public Assistance Administration to Child Care Benefits												
	Trin	105.9	105.9	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1002 Fed Rcpts		105.9										
Transfer of PCN 06-8577 from the Public Assistance Administration component to the Child Care Benefits Component, within the Division of Public Assistance, to better reflect the correct structure of the Child Care Benefits Component.												
ADN 0680015 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
PCN's 06-8112, 06-8240, 06-8341, 06-8429 and 06-8558 were scheduled for deletion in the SFY08 Governor's Budget. These PCN's were filled and PCN's 06-8186, 05-2315, 06-8263, 06-8170 and 06-8306, respectively, have been deleted in replacement of those originally scheduled for deletion. PCN 06-8386 was scheduled for deletion and not filled; this PCN was not replaced.												
For the Child Care Benefits Component: deletion of PCN 05-2315 in place of PCN 06-#306 (06-8240), which was added back to PA Field Services.												
Subtotal		48,604.0	2,819.0	143.0	1,541.7	62.6	0.0	44,037.7	0.0	35	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Reduce excess federal authorization for child care programs												
	Dec	-5,000.0	0.0	0.0	0.0	0.0	0.0	-5,000.0	0.0	0	0	0
1002 Fed Rcpts		-5,000.0										
Reducing excess federal authority.												
MISSION AND MEASURES REFERENCE: Division End Result A: Low income families and individuals become economically self-sufficient. Strategy A6: Increase the percentage of subsidy children in licensed care.												
Eligibility Services Grants for Child Care Assistance Programs, Phase 2 of 3												
	Inc	185.7	0.0	0.0	0.0	0.0	0.0	185.7	0.0	0	0	0
1002 Fed Rcpts		185.7										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Child Care Benefits (1897)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This request includes funding to support eligibility determinations for the Child Care Assistance Program, provided throughout the state by local community grantees. Historically, the methodology used to support this community-based service was inequitable and inconsistent, and the department is in the second year of a three-year plan to standardize funding for this service.

In year one of the plan (FY08) an increment of \$248.1 was authorized to increase grants to grantees that were funded below the targeted unit cost. In year two (FY09) an increment of \$185.7 is needed to increase the average unit cost by \$60, from \$520 to \$580. This increment will also be used to minimize the negative fiscal impact on grantees that have experienced a decrease in the number of children served, by sustaining funding at the FY08 levels.

MISSION AND MEASURES REFERENCE:
 Division End Result A: Low income families and individuals become economically self-sufficient.
 Strategy A6: Increase the percentage of subsidy children in licensed care.

FY 09 Health Insurance Increases for Exempt Employees

SalAdj	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	0.2											

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	142.1	142.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	122.2											
1003 G/F Match	19.9											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
 : \$142.1

Subtotal	43,932.0	2,961.3	143.0	1,541.7	62.6	0.0	39,223.4	0.0	35	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

AMD: Child Care Assistance Rate Increase

Inc	2,700.0	0.0	0.0	0.0	0.0	0.0	2,700.0	0.0	0	0	0
1002 Fed Rcpts	1,350.0										
1004 Gen Fund	1,350.0										

FY09 proposed budget increment to increase child care rates is \$2.7 million.

State rates for child care assistance have not been raised since July 2001, with the exception of the Fairbanks area, where rates were raised in 2006 to match those of Anchorage and Southeast.

As the rates decline in relation to the market, low income families on Child Care Assistance are faced with an increased financial burden to pay the difference between the state rate and the Child Care provider's rate (in addition to their co-payment) or are choosing lower priced and usually lower quality

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Child Care Benefits (1897)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>care. This has caused a drop in the number of children/families receiving subsidies.</p> <p>The 2007 Child Care Market Rate Survey showed that the majority of children in licensed child care are charged more than the child care assistance rate. The most dramatic is the difference in rates for infants and school-age children: 84% of the infants and school age children in licensed centers are being charged more than the full-time monthly rate allowed for care.</p> <p>The FY 09 proposed increment will bring licensed child care rates in line with the 50th percentile of the market rate. While some rates may go up as much as \$178 per month, others will be less. The increase in licensed child care rates will cost an average of \$67.50 a month per child.</p> <p>The federal government suggests that states set rates at the 75th percentile of market rates to ensure equal access to child care for families receiving child care assistance.</p> <p>Cost assumptions: *In FY 09 we expect 4003 children will receive a rate increase of \$67.5 per month *The increase in rates will take effect on Sept. 1, 2008, allowing two months for implementation, needed for automated system changes, and promulgating regulations *4003 kids x \$67.5 = \$270.2 x 10 months = \$2,702.0</p>												
Technical Adjustment to Federal Authority												
1002 Fed Rcpts	Inc	1,295.1	0.0	0.0	0.0	0.0	0.0	1,295.1	0.0	0	0	0
<p>The FY09 Governor's Request for the Child Care Benefits component contained a federal decrement for <\$5,000.0> in excess federal authority. This request for a federal increment of \$1,295.1 for the component is a technical adjustment to align authority levels with the spending plans in the Office of Children's Services.</p>												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
1002 Fed Rcpts	SalAdj	47.6	55.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1003 G/F Match		7.7										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$55.3</p>												
Totals		47,982.4	3,016.6	143.0	1,541.7	62.6	0.0	43,218.5	0.0	35	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: General Relief Assistance (221)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,355.4	0.0	0.0	0.0	0.0	0.0	1,355.4	0.0	0	0	0
1004 Gen Fund		1,355.4										
	Subtotal	1,355.4	0.0	0.0	0.0	0.0	0.0	1,355.4	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680015 Positions to support the Senior Benefits Program												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	6	0	0
New Positions PCN's 06-#287 (06-8630), 06-#290 (06-8633), 06-#292 (06-8632) 06-#295 (06-8641) and 06-#296. Positions established to support the Senior Benefits Program. Positions make eligibility determinations and benefit authorizations for clients applying for and/or receiving public assistance as offered by the Senior Benefits Program.												
	Subtotal	1,355.4	0.0	0.0	0.0	0.0	0.0	1,355.4	0.0	6	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Senior Benefits Program HCS CSSB 4(FIN) (Reg Chg)												
	Inc	20,345.4	460.2	9.7	169.7	43.5	0.0	19,662.3	0.0	0	0	0
1004 Gen Fund		20,345.4										
This increment provides funding for the new Senior Benefits Payment Program, authorized by the Legislature, which provides financial assistance to Alaska's needy seniors. In FY09, we estimate nearly 11,000 seniors will qualify for assistance under the Senior Benefits Payment Program for an annual cost of \$20,345.4. This request includes \$19,662.3 for cash payments to seniors and \$683.1 for the administrative costs of operating the program, which includes six positions (added in Management Plan) needed to support the initial and ongoing determination of eligibility.												
In FY08, the department temporarily transferred funds from the Adult Public Assistance program to the General Relief Assistance program to pay for the benefit and administrative costs of the new Senior Benefits Payment Program.												
MISSION AND MEASURES REFERENCE: Division End Result A: Low income families and individuals become economically self-sufficient. Strategy A4: Improve timeliness of benefit delivery. Strategy A5: Improve accuracy of benefit delivery.												
	Subtotal	21,700.8	460.2	9.7	169.7	43.5	0.0	21,017.7	0.0	6	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Transfer Out Senior Benefits Program to New Senior Benefits Component												
	Trout	-20,345.4	-460.2	-9.7	-169.7	-43.5	0.0	-19,662.3	0.0	0	0	0
1004 Gen Fund		-20,345.4										
This transfer moves funding for the new Senior Benefits Payment Program, authorized by the Legislature, which provides financial assistance to Alaska's												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: General Relief Assistance (221)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>needy seniors. In FY08 this program was initially established within the General Relief component, but to facilitate clearer reporting on this program, a separate Senior Benefits component has been established.</p> <p>MISSION AND MEASURES REFERENCE: Division End Result A: Low income families and individuals become economically self-sufficient. Strategy A4: Improve timeliness of benefit delivery. Strategy A5: Improve accuracy of benefit delivery.</p>												
	Totals	1,355.4	0.0	0.0	0.0	0.0	0.0	1,355.4	0.0	6	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Tribal Assistance Programs (2336)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	12,972.7	0.0	0.0	0.0	0.0	0.0	12,972.7	0.0	0	0	0
1003 G/F Match		12,088.0										
1007 I/A Rcpts		884.7										
Subtotal		12,972.7	0.0	0.0	0.0	0.0	0.0	12,972.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		12,972.7	0.0	0.0	0.0	0.0	0.0	12,972.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in General Fund Match from Alaska Temporary Assistance Program												
	Trin	400.0	0.0	0.0	0.0	0.0	0.0	400.0	0.0	0	0	0
1003 G/F Match		400.0										
Subtotal		13,372.7	0.0	0.0	0.0	0.0	0.0	13,372.7	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		13,372.7	0.0	0.0	0.0	0.0	0.0	13,372.7	0.0	0	0	0

Bristol Bay Native Association has fully implemented their administration of Temporary Assistance for Needy Families (TANF) benefits in their region. With this fifth Native Organization in place, we are transferring the balance of General Fund Match needed to fully administer grants for the approximately 107 families and more than 30 Bristol Bay villages of Southwestern Alaska, from the Alaska Temporary Assistance Program (ATAP) Component to the Tribal Assistance Program Component.

MISSION AND MEASURES REFERENCE:
 Division End Result A: Low income families and individuals become economically self-sufficient.
 Strategy A4: Improve timeliness of benefit delivery.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior Benefits Payment Program (2897)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Transfer In Senior Benefits Program from General Relief Component												
	Trin	20,345.4	460.2	9.7	169.7	43.5	0.0	19,662.3	0.0	0	0	0
1004 Gen Fund		20,345.4										
<p>This transfer moves funding for the new Senior Benefits Payment Program, authorized by the Legislature, which provides financial assistance to Alaska's needy seniors. In FY08 this program was initially established within the General Relief component, but to facilitate clearer reporting on this program, a separate Senior Benefits component has been established.</p> <p>MISSION AND MEASURES REFERENCE: Division End Result A: Low income families and individuals become economically self-sufficient. Strategy A4: Improve timeliness of benefit delivery. Strategy A5: Improve accuracy of benefit delivery.</p>												
Totals		20,345.4	460.2	9.7	169.7	43.5	0.0	19,662.3	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Permanent Fund Dividend Hold Harmless (225)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
1050 PFD Fund	ConfCom	12,884.7	0.0	0.0	455.0	0.0	0.0	12,429.7	0.0	0	0	0
		12,884.7										
	Subtotal	12,884.7	0.0	0.0	455.0	0.0	0.0	12,429.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	12,884.7	0.0	0.0	455.0	0.0	0.0	12,429.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	12,884.7	0.0	0.0	455.0	0.0	0.0	12,429.7	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Increase in PFD Hold Harmless Receipts												
1050 PFD Fund	Inc	700.0	0.0	0.0	0.0	0.0	0.0	700.0	0.0	0	0	0
		700.0										
	Totals	13,584.7	0.0	0.0	455.0	0.0	0.0	13,129.7	0.0	0	0	0

With a slight increase in the Food Stamp Program as a whole and the ever increasing PFD checks, the department estimates that the authorization for this component will be short approximately \$700.0 in PFD Hold Harmless.

This amendment increases the authorization in anticipation of this increased need.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Energy Assistance Program (226)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
1002 Fed Rcpts	ConfCom	9,778.6	602.9	12.5	142.0	14.0	0.0	9,007.2	0.0	4	8	0
		9,778.6										
	Subtotal	9,778.6	602.9	12.5	142.0	14.0	0.0	9,007.2	0.0	4	8	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	9,778.6	602.9	12.5	142.0	14.0	0.0	9,007.2	0.0	4	8	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1002 Fed Rcpts	SalAdj	27.1	27.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
		27.1										
	Subtotal	9,805.7	630.0	12.5	142.0	14.0	0.0	9,007.2	0.0	4	8	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
1002 Fed Rcpts	SalAdj	16.2	16.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
		16.2										
	Totals	9,821.9	646.2	12.5	142.0	14.0	0.0	9,007.2	0.0	4	8	0

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$27.1

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component
: \$16.2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Assistance Administration (233)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	3,026.8	1,845.9	34.4	1,006.6	19.9	0.0	120.0	0.0	20	0	0
1002 Fed Rcpts		1,888.7										
1003 G/F Match		815.2										
1004 Gen Fund		154.7										
1156 Rcpt Svcs		168.2										
ETS Chargeback Transfer from Department of Administration												
	Atrin	46.2	0.0	0.0	46.2	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		46.2										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	3,073.0	1,845.9	34.4	1,052.8	19.9	0.0	120.0	0.0	20	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
0680015 Transfer PCNs from Work Services to Public Assistance Administration												
	Trin	304.0	304.0	0.0	0.0	0.0	0.0	0.0	0.0	3	0	0
1002 Fed Rcpts		121.9										
1003 G/F Match		182.1										
Transfer of PCNs 06-8213, 07-5056, and 06-8497 from the Work Services Component to the Public Assistance Administration Component, within the Division of Public Assistance, to better reflect the correct structure of the Public Assistance Administration Component.												
0680015 Transfer of from Public Assistance Administration to Child Care Benefits												
	Trout	-105.9	-105.9	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
1002 Fed Rcpts		-105.9										
Transfer of PCN 06-8577 from the Public Assistance Administration Component to the Child Care Benefits Component, within the Division of Public Assistance, to better reflect the correct structure of the Child Care Benefits Component.												
0680015 Transfer PCN from Public Assistance Administration to Quality Control												
	Trout	-51.1	-51.1	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
1002 Fed Rcpts		-27.1										
1003 G/F Match		-23.0										
1004 Gen Fund		-1.0										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Assistance Administration (233)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Transfer of PCN 06-8009 from PA Admin Component to the Quality Control Component, within the Division of Public Assistance, to better reflect the structure of the Quality Control Component.												
0680015 Position reconciliation	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
PCN's 06-8112, 06-8240, 06-8341, 06-8429 and 06-8558 were scheduled for deletion in the SFY08 Governor's Budget. These PCN's were filled and PCN's 06-8186, 05-2315, 06-8263, 06-8170 and 06-8306, respectively, have been deleted in replacement of those originally scheuled for deletion. PCN 06-8386 was scheduled for deletion and not filled; this PCN was not replaced.												
For the Public Assistance Administration Component: deletion of PCN 06-8186 In place of PCN 06-#305 (06-8112), which was added back to PA Field Services.												
New Position 06-#302 (06-8638)	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
PCN 06-8638 established to oversee the development and ongoing management of statewide policies.												
Subtotal		3,220.0	1,992.9	34.4	1,052.8	19.9	0.0	120.0	0.0	21	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
ETS Chargeback Redistribution	Atrin	28.5	0.0	0.0	28.5	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund 28.5												
Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.												
Amounts transferred from state agencies are as follows: Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).												
Amounts transferred to state agencies are as follows: Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.												
Eligibility Information System Alternatives, phase II operating costs	Inc	264.0	175.1	25.0	57.7	6.2	0.0	0.0	0.0	2	0	0
1061 CIP Rcpts 264.0												
This increment provides the CIP Receipt authorization for FY09 estimated operating costs for the initial project team supporting the capital Eligibility Information System Alternatives project. Phase I of the capital project was funded in FY08, with project team hires planned for February 2008. FY08 project operating costs will be handled via an unbudgeted RSA, with budgeted continuing operating costs represented by this increment.												
FY 09 Health Insurance Increases for Exempt Employees	SalAdj	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Assistance Administration (233)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1002 Fed Rcpts		0.1										
1003 G/F Match		0.1										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	74.8	74.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		40.0										
1003 G/F Match		33.4										
1004 Gen Fund		1.4										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$74.8												
	Subtotal	3,587.5	2,243.0	59.4	1,139.0	26.1	0.0	120.0	0.0	23	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	59.6	59.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		27.6										
1003 G/F Match		22.3										
1004 Gen Fund		9.7										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$59.6												
	Totals	3,647.1	2,302.6	59.4	1,139.0	26.1	0.0	120.0	0.0	23	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Assistance Field Services (236)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	33,235.2	27,385.8	251.6	5,314.6	283.2	0.0	0.0	0.0	388	2	0
1002 Fed Rcpts		17,095.1										
1003 G/F Match		12,733.7										
1004 Gen Fund		2,527.6										
1007 I/A Rcpts		763.1										
1108 Stat Desig		115.7										
ADN 06-8-0004 Medical Asst Eligibility CH 48 SLA07 (SB27) CH 28 SLA07 (HB95) Sec2, P45, L14-16												
	FisNot	40.2	33.6	0.0	4.4	2.2	0.0	0.0	0.0	1	0	0
1002 Fed Rcpts		18.7										
1003 G/F Match		16.5										
1004 Gen Fund		4.4										
1007 I/A Rcpts		0.6										
Subtotal		33,275.4	27,419.4	251.6	5,319.0	285.4	0.0	0.0	0.0	389	2	0

***** Changes From FY2008 Authorized To FY2008 Management Plan *****

0680015 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	-1	0

SB27 raised the income limits for Denali KidCare services. PCN 06-8640, Eligibility Technician I, was established to accommodate the projected increase in workload. This position makes eligibility determinations and benefit authorizations for clients applying for Denali KidCare services.

PCN 06-8367, Eligibility Technician I, was established to determine eligibility for services in the Bethel District Office. This position makes eligibility determinations and benefit authorizations for clients applying for and/or receiving public assistance (cash, food or services) as offered by such programs as Temporary Assistance for Needy Families (TANF), Food Stamps, Medicaid, Adult Public Assistance (APA), General Relief Assistance, General Relief Medical, Energy Assistance, and various subprograms.

PCN's 06-8112, 06-8240, 06-8341, 06-8429 and 06-8558 were scheduled for deletion in the SFY08 Governor's Budget. These PCN's were filled and PCN's 06-8186, 05-2315, 06-8263, 06-8170 and 06-8306, respectively, have been deleted in replacement of those originally scheduled for deletion. PCN 06-8386 was scheduled for deletion and not filled; this PCN was not replaced.

For the Public Assistance Field Services Component: deletion of PCN's 06-8263, 06-8170 and 06-8306 in place of PCN's 06-#307 (06-8341), 06-#308 (06-8429) and 06-#309 (06-8558), which were added back to PA Field Svcs.

With regard to the Eligibility Technicians, the positions make eligibility determinations and benefit authorizations for clients applying for and/or receiving public assistance (cash, food or services) as offered by such programs as Temporary Assistance for Needy Families (TANF), Food Stamps, Medicaid, Adult Public Assistance (APA), General Relief Assistance, General Relief Medical, Energy Assistance, and various subprograms.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Assistance Field Services (236)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Subtotal		33,275.4	27,419.4	251.6	5,319.0	285.4	0.0	0.0	0.0	390	1	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Denali KidCare Performance Improvement												
Inc		395.7	329.7	0.0	0.0	66.0	0.0	0.0	0.0	6	0	0
1002 Fed Rcpts		197.8										
1003 G/F Match		197.9										

The effective and efficient delivery of services provided by the Denali KidCare (DKC) office is central to the department's mission to promote and protect the health and well-being of Alaskans. Each month, the DKC office provides essential medical coverage for approximately 30,000 children and 3,000 pregnant women.

Recent changes in federal eligibility requirements, such as the verification of citizenship, have greatly increased the complexity and processing time for each case handled by the office. For the preceding six months processing timeframes have greatly exceeded the 30 day standard for processing applications and, as a result, children have not received timely medical care, and payments to vendors and medical providers can be delayed. The implementation of the federal Payment Error Rate Measurement (PERM) requirements further impacts the processing timeframes by establishing higher expectations for program accountability and payment accuracy.

The DKC office, which relies on distance delivery to meet the needs of applicants and recipients across the state, handles a high volume of applications, phone calls and other contacts. While growth in Medicaid enrollment for children is expected to be slow in the coming years; even modest growth in a workload exceeding 21,000 cases is significant and could further impact the office's ability to provide quality, timely and accurate service.

Initially, it was assumed that each position in the DKC office could manage approximately 1,000 cases. However, the impact of changes affecting processing indicates that caseloads in the range of 850-900 per worker are needed to ensure effective and efficient service delivery. Delays in processing applications greatly increase the volume of calls into the office diverting clerical support staff from other important tasks. While, the DKC office was not originally intended to provide face-to face customer service, over 100 people come to the office each week to submit applications or to inquire on the status of their case. The advent of rigorous federal quality control reviews of Medicaid programs necessitates additional supervisory staff to conduct internal case reviews and to provide training and policy support for workers. Additional administrative supervision and support is also needed to maintain quality customer service.

Funding in this request will provide resources for adequate staff to sustain effective services in the Denali KidCare office. A total of 6 FTEs are needed to support this request: 1 Eligibility Technician III; 2 Eligibility Technician I's; 1 Administrative Supervisor; and 2 Administrative Clerk II's.

MISSION AND MEASURES REFERENCE:

Division End Result A: Low income families and individuals become economically self-sufficient.
 Strategy A4: Improve timeliness of benefit delivery. A5: Improve accuracy of benefit delivery.

FY 09 Bargaining Unit Contract Terms: General Government Unit

	SalAdj	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
		1,600.3	1,600.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		761.7										
1003 G/F Match		662.8										
1004 Gen Fund		127.0										
1007 I/A Rcpts		42.0										
1108 Stat Desig		6.8										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Assistance Field Services (236)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$1,600.3												
Subtotal		35,271.4	29,349.4	251.6	5,319.0	351.4	0.0	0.0	0.0	396	1	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
SalAdj		293.6	293.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		139.7										
1003 G/F Match		122.5										
1004 Gen Fund		27.5										
1007 I/A Rcpts		3.9										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$293.6												
Totals		35,565.0	29,643.0	251.6	5,319.0	351.4	0.0	0.0	0.0	396	1	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Fraud Investigation (237)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,698.7	1,379.6	8.4	300.7	10.0	0.0	0.0	0.0	16	0	0
1002 Fed Rcpts		952.4										
1003 G/F Match		706.3										
1004 Gen Fund		40.0										
Subtotal		1,698.7	1,379.6	8.4	300.7	10.0	0.0	0.0	0.0	16	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		1,698.7	1,379.6	8.4	300.7	10.0	0.0	0.0	0.0	16	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	79.0	79.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		41.9										
1003 G/F Match		35.5										
1004 Gen Fund		1.6										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$79.0												
Subtotal		1,777.7	1,458.6	8.4	300.7	10.0	0.0	0.0	0.0	16	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	16.9	16.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		9.0										
1003 G/F Match		7.6										
1004 Gen Fund		0.3										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$16.9												
Totals		1,794.6	1,475.5	8.4	300.7	10.0	0.0	0.0	0.0	16	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Fraud Investigation (237)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Quality Control (234)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,581.5	1,303.4	37.0	181.5	59.6	0.0	0.0	0.0	15	0	0
1002 Fed Rcpts		814.3										
1003 G/F Match		707.2										
1004 Gen Fund		60.0										
Subtotal		1,581.5	1,303.4	37.0	181.5	59.6	0.0	0.0	0.0	15	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
0680015 Transfer PCN from Public Assistance Administration to Quality Control												
	Trin	51.1	51.1	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1002 Fed Rcpts		27.1										
1003 G/F Match		23.0										
1004 Gen Fund		1.0										
Transfer of PCN 06-8009 from the PA Admin Component to the Quality Control Component, within the Division of Public Assistance, to better reflect the structure of the Quality Control Component.												
0680015 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2	0	0
PCN 06-#300 (PCN 06-8639) was established to conform with the eligibility requirements of Payment Error Rate Measurement (PERM) of eligibility in Medicaid and the State Children's Health Insurance Program (SCHIP). The requirements are set in 42 CFR Parts 431 and 457.												
PCN 06-#310 (PCN 06-8636) is established to support quality assurance for the Alaska Temporary Assistance Program.												
0680015 Transfer Eligibility Quality Control Technician I for PERM Regs from Office of Program Review												
	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
This is one of seven Eligibility Quality Control Technician I positions needed to perform the new Medicaid case eligibility and medical service reviews mandated by federal "Payment Error Rate Measurement" (PERM) regulations. For FY08, this position (06-4100) is transferred from the Office of Program Review and will be funded by I/A with a 50/50 split between Federal and GF dollars.												
Subtotal		1,632.6	1,354.5	37.0	181.5	59.6	0.0	0.0	0.0	19	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Child Care Program Performance Measures												
	Inc	91.6	80.6	0.0	0.0	11.0	0.0	0.0	0.0	1	0	0
1002 Fed Rcpts		45.8										
1003 G/F Match		45.8										

The Administration for Children and Families (ACF), Child Care and Development Fund (CCDF), issued proposed regulations that require states to review a random sample of cases to provide for the reporting of error rates in the expenditure of CCDF grant funds.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Quality Control (234)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

ACF issued these regulations to meet requirements in the Improper Payments Information Act (IPIA) passed by Congress. The regulations mandate a quality control review of cases estimated to achieve the calculation of annual improper authorizations for payment. ACF anticipates publishing a final rule with an effective date of October 1, 2007. According to the proposed rule, states are required to conduct reviews once in every 3 years, with Alaska scheduled for federal fiscal year 2008. However ACF encourages states to measure the impact of their corrective actions more frequently. The costs of conducting case reviews and preparing error rate reports are considered a part of service delivery and excluded from administrative costs subject to the five percent administrative cap.

To meet the requirements described in the regulation and incorporate regular on-going case reviews of CCDF grant funds, Alaska's Division of Public Assistance will need to increase Quality Control staff by 1 PFT at an estimated cost of \$91.6 in FY09.

MISSION AND MEASURES REFERENCE:
 Division End Result A: Low income families and individuals become economically self-sufficient.
 Strategy A5: Improve accuracy of benefit delivery.

Transfer in Funds from Office of Program Review for PCN 06-4100 Moved in FY08 Management Plan

Trin	78.1	78.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	39.1											
1003 G/F Match	39.0											

This transfers in funds from the Office of Program Review for PCN 06-4100 moved in FY08 Management Plan.

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	78.7	78.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	39.5											
1003 G/F Match	39.1											
1004 Gen Fund	0.1											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
 : \$78.7

Subtotal	1,881.0	1,591.9	37.0	181.5	70.6	0.0	0.0	0.0	0.0	20	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj	22.8	22.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	11.4											
1003 G/F Match	11.4											

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Quality Control (234)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
this component : \$22.8												
Totals		1,903.8	1,614.7	37.0	181.5	70.6	0.0	0.0	0.0	20	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Work Services (2337)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	16,324.0	1,759.2	95.0	12,225.1	14.7	0.0	2,230.0	0.0	18	0	0
1002 Fed Rcpts		13,171.2										
1003 G/F Match		1,929.7										
1004 Gen Fund		1,223.1										
Subtotal		16,324.0	1,759.2	95.0	12,225.1	14.7	0.0	2,230.0	0.0	18	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
0680015 Transfer PCNs from Work Services to Public Assistance Administration												
	Trout	-304.0	-304.0	0.0	0.0	0.0	0.0	0.0	0.0	-3	0	0
1002 Fed Rcpts		-121.9										
1003 G/F Match		-182.1										
Subtotal		16,020.0	1,455.2	95.0	12,225.1	14.7	0.0	2,230.0	0.0	15	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.4	0.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.4										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.4												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	68.9	68.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		51.8										
1003 G/F Match		8.5										
1004 Gen Fund		8.6										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$68.9												
Subtotal		16,089.3	1,524.5	95.0	12,225.1	14.7	0.0	2,230.0	0.0	15	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Work Services (2337)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	27.7	27.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		15.3										
1003 G/F Match		11.3										
1004 Gen Fund		1.1										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$27.7</p>												
Totals		16,117.0	1,552.2	95.0	12,225.1	14.7	0.0	2,230.0	0.0	15	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Infants and Children (1013)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	26,445.7	1,144.1	50.2	702.2	18,787.2	41.8	5,720.2	0.0	14	0	0
1002 Fed Rcpts		22,614.2										
1003 G/F Match		9.0										
1007 I/A Rcpts		187.8										
1061 CIP Rcpts		287.0										
1108 Stat Desig		3,347.7										
Subtotal		26,445.7	1,144.1	50.2	702.2	18,787.2	41.8	5,720.2	0.0	14	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		26,445.7	1,144.1	50.2	702.2	18,787.2	41.8	5,720.2	0.0	14	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Increased Statutory Designated Program Receipts												
	Inc	650.0	0.0	0.0	0.0	0.0	0.0	650.0	0.0	0	0	0
1108 Stat Desig		650.0										
Request an increase in Statutory Designated Program Receipts (SDPR) authority in order to allow for higher collections of manufacturer's rebates received for specific infant formula products in Women, Infant and Children (WIC) food packages. Federal Regulations require that infant formula rebate revenues be expended on WIC foods only.												
The current Statutory Designated Program Receipts authority is inadequate to receive the anticipated level of rebates in FY09. Increases are the result of new contract terms that increase the percentage of rebate levels and change the size and form of several infant formula packages eligible for rebate. Simply, this translates into us receiving a higher rebate per item, as well as more items now being eligible to earn those rebates.												
Without increased Statutory Designated Program Receipts, WIC will be unable to receive earnable levels of rebates and will still be bound by federal law to provide the same level of services; therefore, requiring general fund expenditures.												
MISSION AND MEASURES REFERENCE: Division End Result A: Low income families and individuals become economically self-sufficient. Strategy A4: Improve timeliness of benefit delivery.												
Correct Unrealizable Fund Sources for Salary Adjustments: GGU												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-26.6										
1004 Gen Fund		45.1										
1061 CIP Rcpts		-18.5										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Infants and Children (1013)
RDU: Public Assistance (73)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Transfer PCN 06-1403 to the Office of Children's Services												
Trout		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
Transfer PCN 06-1403 from the Division of Public Assistance, Women, Infants and Children Component, to the Office of Children's Services, Infant Learning Program Component.												
Line Item Transfer from the Equipment Line to the Supplies Line												
LIT		0.0	0.0	0.0	0.0	41.8	-41.8	0.0	0.0	0	0	0
Line Item Transfer of 41.8 from the Equipment Line of the Women, Infants and Children Component to the Supplies Line to properly expense items valued at less than \$5.0 per item such as computers.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
SalAdj		45.1	45.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		26.6										
1061 CIP Rcpts		18.5										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$45.1												
Subtotal		27,140.8	1,189.2	50.2	702.2	18,829.0	0.0	6,370.2	0.0	13	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
SalAdj		32.3	32.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		31.6										
1003 G/F Match		0.7										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$32.3												
Totals		27,173.1	1,221.5	50.2	702.2	18,829.0	0.0	6,370.2	0.0	13	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nursing (288)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	23,099.6	18,243.0	611.8	2,286.2	665.2	0.0	1,293.4	0.0	188	15	0
1002 Fed Rcpts		2,430.7										
1003 G/F Match		84.1										
1004 Gen Fund		11,904.3										
1007 I/A Rcpts		8,336.5										
1156 Rcpt Svcs		344.0										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	0.8	0.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.5										
1007 I/A Rcpts		0.3										
Costs associated with the bargaining unit contract terms applicable to this component.: \$0.8												
First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	Atrin	48.0	0.0	0.0	48.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		48.0										
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
	Subtotal	23,148.4	18,243.8	611.8	2,334.2	665.2	0.0	1,293.4	0.0	188	15	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	-2	4
Establish PCN 06-#201 (PCN 06-N07059) Program Coordinator non-perm position serves as public health nursing workforce specialist and resource person for Section of Public Health Nursing administration and management team.												
Establish PCN 06#202 Public Health Specialist II permanent position serves as public health nursing workforce specialist and resource person for Section of Public Health Nursing administration and Public Health Nurse Management team. Provides expertise and technical assistance on analysis of workforce retention and recruitment data, participates in staff building and orientation via Public Health Nurse Academy, facilitates and participates in training of public health nurse managers statewide related to public health workforce development and retention, and assists in resolving identified Section of Public Health Nursing workforce issues. Public Health Specialist II serves as Section of Public Health Nursing liaison with Division of Personnel Professional Recruiter, and with Division of Public Health Webmaster, in developing and implementing creative recruitment and communication strategies designed to attract qualified applicants to Section of Public Health Nursing positions, despite critical national nursing shortage.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nursing (288)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>Establish non-perm positions PCN 06-#206 Public Health Nurse II (PCN 06-N08010); PCN 06-#303 Public Health Nurse III (PCN 06-N07076); PCN #304 Public Health Nurse III (PCN 06-N07075) to provide nursing services during an extended period of short staffing due to recruitment difficulties for experienced Public Health Nurse III positions, nurses unwilling to relocate to a remote area.</p> <p>Re-establish position PCN 06#203 Health Practitioner I permanent PPT (PCN 06-2224) This position provides direct, comprehensive health screening, physical examination, diagnosis and treatment services to family planning, women's health, and reproductive health patients in Fairbanks and Interior Alaska.</p> <p>Re-establish position PCN 06#204 Nurse Consultant II permanent PFT (PCN 06-1687) This position provides expert technical assistance and consultation for public health based family planning, women's health, and reproductive health care services statewide. Duties include orientation and training of generalized public health nursing staff, quality assurance and quality improvement, and introduction of current evidence-based clinical practice standards related to this clinical area.</p> <p>Re-establish position PCN 06-#205 Administrative Clerk III PPT (PCN 06-1495) This position provides clerical and administrative support, including data entry and site management for the RPMS client data system, and generalized office management and clinic support in the Galena Public Health Nursing Office.</p> <p>All of these positions are funded with GF or a combination of GF and I/A.</p>												
ADN 0680013 Transfer surplus federal funds from Chronic Disease Prevention and Health Promotion												
1002 Fed Rcpts	Trin	585.5	0.0	0.0	585.5	0.0	0.0	0.0	0.0	0	0	0
<p>The Section of Chronic Disease Prevention and Health Promotion (CDPHP) has had reductions to several federal grant awards for FFY08. As such, their contractual obligations in the services line were reduced; the Section of Nursing needs additional funds in their services line for increased energy costs to maintain the Public Health Centers.</p>												
ADN 0680013 Transfer Surplus Receipt Supported Services Authority to Certification & Licensing												
1156 Rcpt Svcs	Trout	-44.0	0.0	-44.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<p>Using prior fiscal years to establish receipt support services collections trends, we project \$44.0 of unrealized receipts. The Certification & Licensing component is projecting a shortfall in RSS authority. This transfer moves funds to balance operational capacity.</p>												
Subtotal		23,689.9	18,243.8	567.8	2,919.7	665.2	0.0	1,293.4	0.0	189	13	4
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Public Health Nursing Grant Program												
1004 Gen Fund	Inc	120.7	0.0	0.0	0.0	0.0	0.0	120.7	0.0	0	0	0

This investment will provide the four public health nursing grant program recipients (Maniilaq Association, Norton Sound Health Corporation, North Slope Borough, and the Municipality of Anchorage) with a 5% increase in their state grant funding. These entities provide public health nursing services to the residents of these four geographical areas of the state not served by State Public Health Nursing. This investment will allow these entities to continue to

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nursing (288)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
provide basic public health nursing services such as infectious disease prevention and control services including immunizations, and screening, treatment and contact investigation for infectious diseases such as tuberculosis, sexually transmitted diseases, and other public health threats. In FY 07 state public health nursing grant funding allowed these four entities to provide over 28,000 client visits to more than 17,000 clients, and to provide almost 25,000 immunizations to prevent potential disease. This investment will allow our grantees to continue to provide these critical services themselves rather than pass the responsibilities back to the state and subsequently cost the state more.												
Realignment of Staff to increase efficiency for current public health services needs												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	-2	-1
Delete PCN 06-?201 Project Coordinator Established this Non-Perm Project Coordinator position in FY07. In FY08 PCN 06-?202 Public Health Specialist II position will cover these duties.												
Delete PCN 06-1297 Public Health Nurse Aide Position is funded by the Maternal, Child, and Family Health Block Grant to provide clerical support for the Specialty Clinic at the Fairbanks Public Health Center. The funding ends 6/30/08.												
PCN 06-?202 Public Health Specialist II Change from PPT to PFT This position serves as a statewide public health nursing workforce specialist and resource person for the Public Health Nursing administration and Public Health Nurse Management team. Provides expertise and technical assistance on analysis of workforce retention and recruitment data, participates in staff building and orientation via Public Health Nurse Academy, facilitates and participates in training of public health nurse managers statewide related to public health workforce development and retention, and assists in resolving identified Public Health Nursing workforce issues. Public Health Specialist II serves as Public Health Nursing liaison with Division of Personnel Professional Recruiter, Division of Public Health Webmaster, and the Publications Unit in developing and implementing creative recruitment and communication strategies designed to attract qualified applicants to Public Health Nursing positions, despite critical national nursing shortage.												
PCN 06-1852 Public Health Nurse (PHN) I/II Change from PPT to PFT We have had a number of PHN's in this half-time position, and it is difficult to recruit and harder to retain. The Homer Public Health Nurses serve a large geographic area with long driving distances. This area includes three Alaska Native villages across the Kachemak Bay requiring travel by plane, one road-access Native village, and five remote Old Believer Villages (one is accessible only by walking or all-terrain vehicle). The needs acuity of a substantial portion of the population is great, with many homeless and many families living in substandard conditions. Medicaid enrollment has been high in the past as was the teen birth rate.												
All these positions are funded with a combination of general funds and interagency receipts.												
Align Funding with Grant Allocations												
LIT		0.0	0.0	0.0	0.0	-5.0	0.0	5.0	0.0	0	0	0
This change record is to transfer funds to align funding with grant allocations to grantees that increased in FY08. This transfer is not expected to have an impact on the nursing component.												
Delete one-time authorization for First FY2008 Fuel/Utility Cost Increase Funding Distribution												
OTI		-48.0	0.0	0.0	-48.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund -48.0												

One-time funding deleted for fuel/utility increases which were added in the FY08 budget as follows:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nursing (288)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.

The amounts transferred to state agencies are as follows:
Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	1,074.4	1,074.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	85.1											
1004 Gen Fund	579.4											
1007 I/A Rcpts	409.9											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$1,074.4

FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit

SalAdj	0.3	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	0.2											
1007 I/A Rcpts	0.1											

The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component.
: \$0.3

Subtotal	24,837.3	19,318.5	567.8	2,871.7	660.2	0.0	1,419.1	0.0	190	11	3
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj	201.8	201.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	0.4											
1004 Gen Fund	101.9											
1007 I/A Rcpts	75.3											
1156 Rcpt Svcs	24.2											

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component.
: \$201.8

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Nursing (288)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	25,039.1	19,520.3	567.8	2,871.7	660.2	0.0	1,419.1	0.0	190	11	3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Children and Family Health (2788)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		9,291.5	4,047.0	132.9	3,751.7	151.9	0.0	708.0	500.0	43	1	5
1002 Fed Rcpts		6,254.7										
1003 G/F Match		356.9										
1004 Gen Fund		576.9										
1007 I/A Rcpts		819.6										
1037 GF/MH		250.0										
1092 MHTAAR		250.0										
1156 Rcpt Svcs		783.4										
06-8-0005 Spread Unallocated GF/MH and MHTAAR increment												
LIT		0.0	134.2	20.0	328.8	17.0	0.0	0.0	-500.0	0	0	0
Spread unallocated funding for Autism project												
Subtotal		9,291.5	4,181.2	152.9	4,080.5	168.9	0.0	708.0	0.0	43	1	5
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Realign expenditure lines to meet operational functionality												
LIT		0.0	-367.8	72.1	428.6	75.1	0.0	-208.0	0.0	0	0	0
<p>The Change Record is comprised of adjustments on all of the lines. First, the Personal Services line has been decreased to accommodate the deletion of non-permanent positions and reflect current and anticipated salaries and adjustments including the addition of four FTE's. The roles of these four new FTE's are outlined with each of the FTE's and are designated for Perinatal, Autism and the Breast and Cervical Health Check (BCHC) program. The additional authority on the Personal Services line was transferred to the following lines:</p> <p>1. Travel: Additional authority has been added to the non-employee/in-state code in support of additional funding to travel medical specialists and clinicians to rural and smaller urban locations to screen for Autism and other neurodevelopmental disorders. In addition, the increase in this travel category supports the funds needed to travel BCHC clients for their screening and diagnostic medical appointments from smaller rural communities where services are not available.</p> <p>2. Services: This line was increased in the category of professional service agreements in support of medical service agreements for expanded autism screening as well as increased contractual costs for newborn hearing screening, pediatric specialty clinics, genetics and birth defects and ongoing medical provider payments for clinical services for the BCHC program. In addition, the category of program management and consultation fees was increased to accommodate professional consultation as a part of the development of expanded autism screening and diagnostic clinics, as well as the development of local infrastructure for early intervention and educational supports. Additional costs for departmental and other state required RSAs were also adjusted to reflect anticipated increases.</p> <p>3. Commodities: Additional authority has been transferred to this line in support of the general supply costs associated with conducting state business. In addition, purchases of contraceptive medical supplies as part of our agreement with the Division of Public Assistance and the use of TANF funds are included in this expenditure line.</p> <p>4. Grants: The reduction on the Grant line reflects a decrease to the same amount of authority allocated in FY07. Expended and encumbered funds did not reach \$500.0 and several of the grants previously held have been reduced or are no longer in place for FY08 due to work process changes or changes in program goals or performance measures.</p>												
ADN 0680013 Position Reconciliation												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	-2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Children and Family Health (2788)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This change record balances the position count with the personal services staffing plan. Part of net reduction adjustment includes the addition of the following two positions:

PCN 06-#207, Public Hlth Specialist was added to budget PCN 06-2005 which was established on 9/25/06. The position provides expert consultation, technical assistance, program development, implementation and evaluation skills as well as advisory services on adolescent health statewide for public and private organizations, health care settings, educational institutions and the public in general.

One non-perm, 06-#209, Nurse Consultant II, non perm was added to budget PCN 06-N07044 and is funded via federal receipts.

Subtotal	9,291.5	3,813.4	225.0	4,509.1	244.0	0.0	500.0	0.0	42	1	3
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***** **Changes From FY2008 Management Plan To FY2009 Governor** *****

Reverse FY2008 MH Trust Recommendation

OTI	-250.0	-134.2	-20.0	-78.8	-17.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR	-250.0										

This item is a fund source change. The Trust has reduced MHTAAR support and moved to GH/MH in FY09 request.

MH Trust: AB-Gov Cncl - Multidisciplinary diagnostic team and comprehensive referral for autistic spectrum disorder

Inc	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH	125.0										
1092 MHTAAR	125.0										

This proposal reflects a fund source change of \$125.0 MHTAAR to GF/MH in FY09.

Grant 1440.0

This will replace half of the FY08 Mental Health Trust Authority Authorized Receipts (MHTAAR) funding of \$250.0 with General Fund/Mental Health (GF/MH) funding in FY09 to enhance the capacity to provide diagnosis and comprehensive, active referral for Autism Spectrum Disorders (ASD). A multidisciplinary-team approach assures that children receive an accurate diagnosis from a team of specialists (medical, psychology, speech/language, occupational therapy, physical therapy, audiology, ophthalmology) and rules out other possible medical conditions that may be associated with ASD.

The Legislature requested matching funds from the Trust in FY08 to support the GF/MH increment for autism diagnosis. The Trust originally agreed to provide \$250.0 in MHTAAR for one year only, but has most recently agreed to split full funding and support \$125.0 FY09 MHTAAR and \$125.0 FY09 GF/MH.

Autism is a spectrum disorder that is neurologically based and affects social skills, communication, play and behavior. Nationally, the disorders occurs in approximately 1/166 children - more than three times the number with Juvenile (Type 1) diabetes (CDC, 2005). About 60 Alaskan babies born each year are expected to have an autism spectrum disorder. It is estimated that the cost nationally of this disorder is \$35 billion annually with even more dollars spent on the loss of productivity of untreated individuals.

Children, who show signs of having an Autistic Spectrum Disorder (ASD) or have risk factors on a screening, require a comprehensive assessment across developmental and physical domains. A team of professionals from multiple disciplines are needed to conduct a comprehensive evaluation (i.e. neurodevelopmental pediatrics, psychology, speech, occupational and physical therapy, ophthalmology, audiology). For young children it is especially critical to perform a differential diagnosis to rule out any other possible genetic or medical disorders that may be associated with autism.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Children and Family Health (2788)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The comprehensive assessment leads not only to a differential diagnosis, but to a plan of intervention and services for the child and family. Families need information and active referral to link up with needed health, educational, financial and family support resources.

The capacity to diagnose ASD in Alaska is impacted by difficulties obtaining current assessments. This is due, in part, to a shortage of qualified professionals who have experience with young children on the autism spectrum and who are trained and experienced in conducting the assessments. In addition, Medicaid restrictions on billing for psychology services impede access. These factors lead to delays in getting a comprehensive diagnosis and thus appropriate services.

This program will enhance the current screening and assessment capacity for autism spectrum disorders leading to earlier intervention. Funds will support a child psychologist, family care coordinator, and a pediatric medical provider with a specialty in autism spectrum disorders, as well as administrative infrastructure needed to operate these services on a regular basis. Regional screening clinics will be held in eight locations throughout Alaska. Because not all children seen will receive a diagnosis of autism, children diagnosed with other possible developmental disabilities will benefit by early detection and referred for other services.

"What will the investment buy?"

1. Enhanced support of a statewide system to provide timely, comprehensive diagnosis using a multidisciplinary team and systematic referral to appropriate services. FY08 and FY09 would include the development of a centralized team with diagnostic capacity for autism spectrum disorders building on the existing neurodevelopmental clinic.
2. Identification and development of evidence-based, best practice autism treatment services using non-aversive behavioral interventions in FY08.
3. Increase in the number of children screened and diagnosed for autism spectrum disorders throughout the state of Alaska.
4. With increased capacity, a reduction in the wait time for an appointment for screening a diagnosis from six months to three months.
5. The number of outreach clinics offered in smaller Alaska communities will increase from three to six communities in FY08.
6. With an earlier diagnosis, families and their children can access services and maximize their effectiveness.

Population Indicators:

1. Number of children identified with a diagnosis of autism spectrum disorder

Performance Measures:

1. Annual number of children screened with a diagnosis of autism spectrum disorder will increase by 20% from current numbers.
2. Number of children referred to early intervention services with a diagnosis of autism spectrum disorder will increase by 20% from current numbers.
3. Number of children receiving special education services through their Individual Education Plan (IEP) in association with a diagnosis of autism spectrum disorder.
4. Number of outreach clinics offered in smaller Alaska communities. Goal for FY08-FY09 is to increase the number of outreach clinics by 20%.

Trust Write-up: The MH Trust: AB-Gov Cncl: Multidisciplinary Diagnostic Team and Comprehensive Referral for Autistic Spectrum Disorders will continue funding to screen, diagnose and refer children with autism spectrum disorders and other developmental disabilities leading not only to a differential diagnosis, but to a plan of intervention and services for the child and family. The project will be managed by the Section of Women's Children's and Family Health within Public Health and funds will be distributed through a single contract.

This project is a component of the overall initiative to address the growing population of children identified with an autism spectrum disorder. The capacity to diagnose autism spectrum disorders in Alaska is impacted by difficulties obtaining current assessments due, in part, to a shortage of qualified professionals. In addition, Medicaid restrictions on billing for psychology services impede access. Families need information and active referral to link up with needed health, educational, financial and family support resources.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Children and Family Health (2788)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Position Adjustment Record to Reflect Staff and Position Realignment												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	-1
This record reflects the following adjustments:												
06-#384 New Public Health Specialist II												
06-?209 Deleted Non-Perm Nurse Consultant II												
Transfer out Surplus Interagency Receipt Authority to Chronic Disease Prevention and Health Promotion												
	Trout	-130.0	-20.0	-35.0	-75.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts -130.0												
The Section of Women's, Children's, and Family Health is experiencing a decreased number of Reimbursable Service Agreements (RSA) from other state agencies which in turn generated a surplus of Interagency Receipt Authority, making it available to sections in need.												
The Section of Chronic Disease Prevention and Health Promotion has experienced increases in RSAs as the Servicing Agency. This added Interagency Receipt Authority will allow the section to report their RSAs as budgeted versus unbudgeted, which makes for a more transparent and accountable reporting structure.												
MH Trust: AB-Gov Cncl - Center for Human Development Capacity building for autism intervention												
	Inc	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH 125.0												
1092 MHTAAR 125.0												
Grant 1452												
The MH Trust: AB-Gov Cncl: CHD Capacity Building for Autism Intervention is a component of the overall autism initiative and will provide funding to train individuals to offer effective early autism intervention services. As a result, a cadre of professionals and paraprofessionals will be available to deliver intensive autism intervention soon after a child is diagnosed, and early in a child's life when research shows intervention has the greatest impact. The Department of Health and Social Services, Section of Women's Children's and Family Health will transfer funds to the University of Alaska Center for Human Development through a Reimbursable Services Agreement.												
A body of evidence supports the efficacy of early intensive intervention, with nearly 50 percent of those receiving intervention not requiring special education in school, or requiring reduced special education services. It is estimated that early intensive intervention offered over a three-year period to children with autism could save Alaska nearly \$100,000 per child, and nearly \$90 million for all children with autism, just during the school years. However, without the availability of a cadre of trained and qualified professionals and paraprofessionals to provide intensive intervention during the early childhood years the lifetime cost of care can be expected to be \$3.2 million for individuals with autism.												
The FY09 funding request is \$125.0 MHTAAR and \$125.0 GF/MH, maintaining momentum of effort to include the treatment of autism in our state's continuum of care.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.3	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts 0.2												
1003 G/F Match 0.1												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Women, Children and Family Health (2788)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.3												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	175.5	175.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		125.0										
1003 G/F Match		7.3										
1007 I/A Rcpts		29.6										
1156 Rcpt Svcs		13.6										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$175.5												
	Subtotal	9,587.3	3,835.0	170.0	4,855.3	227.0	0.0	500.0	0.0	43	1	2
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	74.1	74.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		48.5										
1003 G/F Match		7.7										
1156 Rcpt Svcs		17.9										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$74.1												
	Totals	9,661.4	3,909.1	170.0	4,855.3	227.0	0.0	500.0	0.0	43	1	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Health Administrative Services (292)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

***** Changes From FY2008 Conference Committee To FY2008 Authorized *****

FY2008 Conference Committee

ConfCom	2,237.8	1,427.5	18.6	738.1	44.6	0.0	9.0	0.0	14	0	1
1002 Fed Rcpts	1,830.6										
1003 G/F Match	85.8										
1004 Gen Fund	206.7										
1007 I/A Rcpts	26.0										
1108 Stat Desig	88.7										

ETS Chargeback Transfer from Department of Administration

Atrin	46.2	0.0	0.0	46.2	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	46.2										

Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.

The amounts transferred to state agencies are as follows:

Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.

Subtotal	2,284.0	1,427.5	18.6	784.3	44.6	0.0	9.0	0.0	14	0	1
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***** Changes From FY2008 Authorized To FY2008 Management Plan *****

ADN0680013 Transfer Federal Expenditure Authority for Preparedness Grant Expenditures from Laboratories

Trin	250.0	0.0	250.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	250.0										

Transfer surplus federal expenditure authority from PH Labs to PH Administration for Pandemic Flu; \$250.0 Non-employee travel to Pandemic Flu Community Forums. Community members and leaders throughout Alaska travel to Pandemic Flu Community Forums to learn and plan for outbreaks of infectious disease. This non-employee travel is paid from the CDC Preparedness FFY07 and FFY08, Pandemic Flu Supplemental.

ADN 0680013 Transfer from Epidemiology for Interagency Personnel Agreement with the Center for Disease Control

Trin	252.0	0.0	0.0	252.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	126.0										
1004 Gen Fund	126.0										

Public Health has an Interagency Personnel Agreement (IPA) with the Center for Disease Control for the Chief Medical Officer. In FY07 the funding resided in the Epidemiology component; the position has been reassigned to the Public Health Administration component.

ADN 0680013 Transfer Chief Medical Officer PCN to Commissioner's Office

Trout	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
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The Chief Medical Officer position is a federal employee on Interagency Personnel Agreement (IPA). This record shows his actual contractual amount, \$254.0. He does not draw retirement or receive health benefits from the State of Alaska. Payroll is not run via AKPAY; \$254.0 will be RSA'ed to the

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Health Administrative Services (292)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Commissioner's Office in FY08 to fund the salary.												
ADN 0680013 Position Adjustment												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	-1
PCN 06-N007, Administrative Manager II, was eliminated in FY08 due to completion of the Expenditure Tracking System project.												
ABS PCN 06-#313, Health & Social Services Planner II, represents permanent PCN 06-2012 which was approved on 10/11/06.												
ADN 0680013 Realign funding to meet Operational Capacity												
LIT		0.0	-210.0	0.0	210.0	0.0	0.0	0.0	0.0	0	0	0
Surplus funds are in personal services due to deletion of non-perm position and vacant Deputy Director position.												
Additional funds are needed in the services line to increase expenditure authority to purchase HT 50-H1 Ventilators for Preparedness Program.												
Subtotal		2,786.0	1,217.5	268.6	1,246.3	44.6	0.0	9.0	0.0	14	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
ETS Chargeback Redistribution												
Atrin		28.5	0.0	0.0	28.5	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		28.5										
Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.												
Amounts transferred from state agencies are as follows: Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).												
Amounts transferred to state agencies are as follows: Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.												
Line Item Transfer of Funds to Support Personal Services												
LIT		0.0	274.6	0.0	-274.6	0.0	0.0	0.0	0.0	0	0	0
Additional funds are needed in the personal services module to support filled positions, newly added positions, and maintain the required vacancy factor. Funds are available in the Services line due to a one-time-only purchase that occurred in FY08 and generated a surplus in FY09.												
Position Adjustment Record to Reflect Changes to Personal Services												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3	0	0
06-#353 = 06-2004 Project Coordinator (Preparedness Program). This position was created via revised program in FY07 and filled in January, 2007. This position should have been included in the FY08 Management Plan; however, an oversight occurred and it did not get added at that time.												
06-#354 = 06-2029 Administrative Clerk III (Juneau Director's Office admin support). This position was created via revised program in FY07 and filled in May, 2007. This position should have been included in the FY08 Management Plan; however, an oversight occurred and it did not get added at that time.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Health Administrative Services (292)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
06-#420 = 06-1899 Director (Anchorage Director's Office). This unbudgeted PCN was activated to appoint a fully-exempt Director into 06-1899 versus 06-1001 partially-exempt Division Director. The appointment was approved by the Governor's Office on 8/17/07.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.1										
1004 Gen Fund		0.1										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	52.5	52.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		49.4										
1003 G/F Match		3.1										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$52.5												
	Subtotal	2,867.2	1,544.8	268.6	1,000.2	44.6	0.0	9.0	0.0	17	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	24.3	24.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		20.3										
1004 Gen Fund		4.0										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$24.3												
Totals		2,891.5	1,569.1	268.6	1,000.2	44.6	0.0	9.0	0.0	17	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Certification and Licensing (245)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	5,597.2	3,294.1	364.9	1,878.5	66.0	0.0	0.0	-6.3	41	0	1
1002 Fed Rcpts		3,652.4										
1003 G/F Match		233.7										
1004 Gen Fund		894.8										
1007 I/A Rcpts		67.3										
1037 GF/MH		118.3										
1156 Rcpt Svcs		630.7										
06-8-0005 Spread unallocated legislative reduction												
	LIT	0.0	-6.3	0.0	0.0	0.0	0.0	0.0	6.3	0	0	0
Spread legislative unallocated reduction: AMHTA recommendation - reverse reallocation of legislative GF salary reversal in FY07 Mgt Plan budget.												
	Subtotal	5,597.2	3,287.8	364.9	1,878.5	66.0	0.0	0.0	0.0	41	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 - Transfer from travel to support lines for operational functionality												
	LIT	0.0	0.0	-48.5	24.9	23.6	0.0	0.0	0.0	0	0	0
FY08 expenditure projections reflect surplus travel funds.												
Additional \$24.9 was added to the services line to support two Wostmann & Associates task orders for background check system enhancements as well as full Department of Public Safety (DPS) database integration store and forward system to establish ability to exchange information with DPS.												
\$23.6 is added to support the commodities line for new, replacement, and upgraded office and computer equipment.												
ADN 0680013 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	1
This change record realigns position count with staffing plan and resources available.												
ADN 0680013 Transfer Surplus Receipt Supported Services Authority from Nursing												
	Trin	44.0	0.0	0.0	44.0	0.0	0.0	0.0	0.0	0	0	0
1156 Rcpt Svcs		44.0										
This record transfers surplus Receipt Supported Services (RSS) Authority into C&L; C&L exceeded RSS authority in FY07 as regulations for fees associated with licensing health care facilities and processing background checks/fingerprints went into effect. C&L projects collecting more than in FY07 and all DPH surplus of RSS will be transferred into C&L to support its capacity to collect these revenues.												
ADN 0680013 Transfer Surplus Receipt Supported Services Authority from State Medical Examiner's Office												
	Trin	11.7	0.0	0.0	11.7	0.0	0.0	0.0	0.0	0	0	0
1156 Rcpt Svcs		11.7										
This record transfers surplus Receipt Supported Services (RSS) Authority into C&L; C&L exceeded RSS authority in FY07 as regulations for fees												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Certification and Licensing (245)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
associated with licensing health care facilities and processing background checks/fingerprints went into effect. C&L projects collecting more than in FY07 and all DPH surplus of RSS will be transferred into C&L to support its capacity to collect these revenues.												
ADN 0680013 Transfer Surplus Interagency Receipt Authority to Bureau of Vital Statistics												
1007 I/A Rcpts	Trout	-54.3	0.0	0.0	-54.3	0.0	0.0	0.0	0.0	0	0	0
The Section of Certification and Licensing anticipates less reimbursable services agreements now the C&L regulations have gone into effect. Surplus authority of \$54.3 is transferred to the Bureau of Vital Statistics who is tasked with adding reimbursable services agreements for specialized upgrades to the vital statistics computer system on behalf of other DHSS Divisions (e.g. Div of Public Assistance, Health Care Services).												
ADN 0680013 Transfer Surplus Federal Receipt Authority to Epidemiology												
1002 Fed Rcpts	Trout	-78.8	0.0	0.0	-78.8	0.0	0.0	0.0	0.0	0	0	0
Certification and Licensing has surplus federal receipt authority due to the Background Check Pilot Grant discontinuation. The Section of Epidemiology needs \$78.8 additional federal receipt authority for potential supplemental federal grant awards and new grant awards.												
ADN 0680013 Realign funding to meet operational plans												
	LIT	0.0	-45.0	0.0	45.0	0.0	0.0	0.0	0.0	0	0	0
This line item change aligns funding to meet operational needs.												
Subtotal		5,519.8	3,242.8	316.4	1,871.0	89.6	0.0	0.0	0.0	42	0	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Incremental funding to support growth demand for Background Check Unit												
1156 Rcpt Svcs	Inc	1,000.0	135.5	75.0	789.5	0.0	0.0	0.0	0.0	2	0	0

In the past 12 months the Section of Certification and Licensing's services have been greatly impacted by both regulatory and statutory changes; AS 47.05 Criminal History; Criminal History Check, effective March 2006; 7 AAC 10.900-990 Barrier Crimes, Criminal History Checks, Centralized Registry, effective Feb. 2007; AS 47.32 Centralized Licensing and Related Administrative Procedures, effective March 2006 and 7 AAC 10 Environmental Health and Safety, effective June 2006.

Certification & Licensing estimated it would receive roughly 14,000 background check applications in the first year from hospitals, nursing homes, residential child care, assisted living homes and all health-related service providers. However, as of August 31, 2007, 23,009 applications have been processed. This is a significant workload increase; the good news is that this program is also generating more fees.

In FY07, C&L was authorized to collect \$630.7 Receipt Support Services revenue (RSS); C&L exceeded their RSS authority in FY07 by \$234.6, the excess authority was transferred to C&L utilizing surplus receipts in other sections within the Division of Public Health (DPH). At the end of the first quarter of FY08, C&L has collected 87.4% of its authorized RSS.

This trend is not likely to diminish in FY09 as C&L will be adding foster care homes and child care centers for background check processing. This increment

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Certification and Licensing (245)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

request is to provide adequate authority to continue collection of receipts supporting the statutory and regulatory mandates.

This increased authority will support the mission of Certification & Licensing by:

Increase existing RSA with Dept of Public Safety, \$535.4

The majority of this incremental request will be to support the reimbursable services agreement (RSA) with the Department of Public Safety (DPS). Under this RSA, DPS conducts the fingerprint search through the State of Alaska database and the FBI national database. DPS returns the results to the Background Check Unit (BCU), which then investigates any flagged applications. 45% of applications processed have been flagged as indicating the possibility of criminal activity. All records are kept by the BCU. The cost of processing one application and set of fingerprints is \$79.85; of this, C&L/BCU collects \$25 RSS for the application fee and \$54.25 RSS pass-through to process fingerprints. Due to increased transactions, the RSA needs to be increased accordingly.

RSA with DHSS-Finance and Management Services, Departmental Support Services, \$79.7

Current levels of accounting support need to be increased by one full-time position. Increasing the RSA will provide one Accountant III position dedicated to the revenue and expenditure tracking for C&L, as well as preparation of the required Centers for Medicaid and Medicare reports.

Personal Services, \$135.5

Two additional Criminal Justice Technician positions are being requested for the BCU to meet the higher-than-expected need for background checks and the upcoming increased demand as responsibility for conducting checks on child care and foster care providers (an additional 2,600 providers). The BCU is responsible for the intensive research of background information to meet mandates ensuring that service providers with a criminal past are prevented from employment with vulnerable populations. This populace is dependent on care providers for basic daily necessities. Ultimately, these positions will help ensure that vulnerable Alaskans are protected from potential harm, neglect or abuse.

Travel \$75.0

The need for travel will continue to increase with the addition of responsibilities and staff for the Background Check Program. Certification and Licensing staff is responsible for inspections and complaint investigations for over 700 health care and licensed facilities statewide and made more than 1,200 site visits last year. The purpose of these inspections/investigations is to determine a care provider's ability to offer services which are safe and of an acceptable quality.

Background Check Volunteer Fees \$104.4

Increased funding is requested to cover background checks for an estimated 4,200 volunteers throughout Alaska. Under current regulations, the application and verification fee of \$25 is waived for volunteers. During the early stages of implementing the new rules, it became clear some volunteers would not or could not afford to pay for the costs of a background check.

The regulations state that "subject to available appropriations, DHSS will pay the processing fees charged by the Department of Public Safety and the FBI for all volunteers." If there is no additional funding, the programs using volunteers will have to pay this cost or have the volunteers pay the cost themselves.

Volunteers in various programs, such as the Pioneer Homes, are a valuable asset. Many organizations utilize volunteers to ensure adequate services are provided for essential needs. The continued ability to fund background checks for volunteers will support many volunteer programs associated with licensed entities and other provider-based programs.

Automated Services \$70.0

Automated upgrades will result in long-term savings and may reduce the need for future (additional) staffing requests by ensuring consistent tracking, avoiding duplicate research, providing more reliable findings and allowing more time for staff to work with providers. In addition, access by staff to complete

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Certification and Licensing (245)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

data enhances oversight - which means safer facilities for Alaskans receiving care and services.

The Residential Licensing program needs an updated electronic database to help ensure effective and timely inspections, investigations, effective report functions, file maintenance, and more effective and efficient staff processes. Current databases are separate, severely outdated and do not connect complaint investigations to ensure a comprehensive overview of complaint history

The Assisted Living program, once administered by two different state departments and now including Child Residential facility oversight, continues to work on combining and streamlining policies, procedures and automated services.

MISSIONS AND MEASURES:

A: Result--Outcome Statemenet: Healthy People in Healthy Communities

A4: Strategy--Assure Access to Early Preventative Services and Quality Health Care

Target#2: 100% of Alaska's licensed and certified long-term care facilities are surveyed and re-certified annually

Measure#2: Percent of licensed and certified long-term care facilites surveyed and re-certified annually

Position Adjustment Record to Reflect Deleted Positions

PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	-2
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Deleted PCN's 06-?208 and 06-?209

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	160.0	160.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	118.4											
1003 G/F Match	14.0											
1004 Gen Fund	25.9											
1037 GF/MH	1.7											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$160.0

Subtotal	6,679.8	3,538.3	391.4	2,660.5	89.6	0.0	0.0	0.0	0.0	44	0	0
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj	76.4	76.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	49.1											
1004 Gen Fund	27.3											

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component
: \$76.4

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Certification and Licensing (245)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	6,756.2	3,614.7	391.4	2,660.5	89.6	0.0	0.0	0.0	44	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Chronic Disease Prevention and Health Promotion (2818)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	7,369.0	3,933.2	305.5	1,714.6	550.3	0.0	665.4	200.0	42	5	5
1002 Fed Rcpts		5,622.4										
1004 Gen Fund		762.5										
1007 I/A Rcpts		188.1										
1108 Stat Desig		10.6										
1168 Tob Ed/Ces		785.4										
06-8-0005 Spread Unallocated GF for Obesity increment												
	LIT	0.0	200.0	0.0	0.0	0.0	0.0	0.0	-200.0	0	0	0
	Subtotal	7,369.0	4,133.2	305.5	1,714.6	550.3	0.0	665.4	0.0	42	5	5
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Transfer from personal services to travel to balance personal services and expenditure detail												
	LIT	0.0	-11.3	11.3	0.0	0.0	0.0	0.0	0.0	0	0	0
The Section of Chronic Disease Prevention and Health Promotion is increasing its travel line to support increased outreach activities for Tobacco Education/Cessation Programs and the Obesity Program. Outreach activities in the form of education are critical to the success of these programs. Funds are available due the deletion of a position.												
ADN 0680013 Transfer surplus funds to Nursing to balance operational functionality												
	Trout	-585.5	-508.7	0.0	-73.0	-3.8	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-585.5										
The Section of Chronic Disease Prevention and Health Promotion (CDPHP) has had reductions to several federal grant awards for FFY08. As such, their contractual obligations were reduced accordingly; the Section of Nursing needs additional funds in their services support line for increased energy costs in their Public Health Centers.												
ADN 0680013 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	-1	0
This change record aligns position counts with staffing plan and personal services resources. It reflects a net adjustment to the position count.												
The Personal Services management plan includes the addition of 1 non-perm position to work on Tobacco Prevention and Education (PCN 06-#311). It also reflects the deletion of 1 PPT and 1 NP.												
ADN 0680013 Transfer Unrealized Statutorily Designated Program Receipt Authority to Section of Epidemiology												
	Trout	-10.6	0.0	0.0	-10.6	0.0	0.0	0.0	0.0	0	0	0
1108 Stat Desig		-10.6										
The Section of Chronic Disease Prevention and Health Promotion separated from the Section of Epidemiology and became its own section in FY07. In its first year as a separate budget component, \$10.6 Statutory Designated Program Receipt (SDPR) authority was added to their fund sources. The section does not have the ability to collect SDPR and this record transfers the SDPR authority back to the Section of Epidemiology, who overcollected SDPR in FY07 and will fully collect this additional \$10.6 in FY08.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Chronic Disease Prevention and Health Promotion (2818)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Subtotal		6,772.9	3,613.2	316.8	1,631.0	546.5	0.0	665.4	0.0	42	4	5
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Tobacco Systems Cessation Grant Program												
Inc		187.0	0.0	20.0	167.0	0.0	0.0	0.0	0.0	0	0	0
1168 Tob Ed/Ces		187.0										

This increment will allow the Division of Public Health to address the following areas, as a part of the comprehensive, evidence-based statewide Alaska Tobacco Prevention and Control (TPC) Program, to stem the tide of increasing poor health and health care costs, and decreasing quality and length of life in Alaska due to tobacco use.

Travel - \$20.0

These funds will be used to support grantees and other organization's staff travel and participation in FY09 training mentioned in the following paragraph. These funds will also cover travel for speakers.

Contractual Services - \$167.0

These funds will go towards the planning and support of different training opportunities. A series of trainings centered on capacity building and readiness geared towards communities not yet prepared to apply for the Community-Based Tobacco Prevention Grants, but ready to begin addressing tobacco issues will be provided. More training opportunities for our new school districts FY09 grantees, including training and in-service days on: curriculum, policy, capacity building, information and training for parent and community groups, and enforcement issues will also take place. Funding is needed for printing and greater dissemination of published reports and findings from the Alaska TPC Program, including poster presentations, and audiovisual displays.

WHY DOES IT MATTER TO ALASKANS?

Tobacco use is the number one cause of preventable death in Alaska. Of the adult Alaskan population: 24% of all adults, 48% of low income adults, 44% of Alaska Native adults, and 45% of adults with less than a high school education use tobacco. More than 77% of adult tobacco users in Alaska report that they want to quit. Each year, tobacco use and/or exposure to secondhand smoke cuts short the lives of nearly 600 Alaskans and costs the state over \$329 million in direct medical costs and lost productivity due to tobacco-related deaths. This amount is almost certainly an underestimate since it does not account for lost productivity from tobacco-related illness. At the same time, in 2003 it was estimated that the tobacco industry spends an annual estimated \$32.8 million in Alaska to promote tobacco use.

The number one cause of death in Alaska is cancer. Lung cancer, cancer of the oral cavity, esophagus, pancreas, cervix, colon and rectum are associated with tobacco use. In the Alaskan population, lung cancer is the most common and most fatal cancer, resulting in over 30% of cancer related deaths. Ninety percent of lung cancer is tobacco related. Many other health conditions are related to tobacco use. These include heart disease, stroke, emphysema, asthma, upper respiratory diseases, diabetes, and low birth weight babies.

Two new landmark reports issued this summer by the President's Cancer Panel and the Institute of Medicine, both recommend every state fund comprehensive tobacco prevention and cessation programs, at levels recommended by the Centers for Disease Control and Prevention, as one of the principle ways to combat tobacco-related disease and deaths. Currently, only three states - Maine, Delaware and Colorado - meet that standard. Alaska just reached the CDC minimum level funding recommendation in FY08 for the first time.

Given the high rate of tobacco use in Alaska and the disparities in tobacco use that exist in Alaska, it is vital to implement programs that decrease death, disability and the economic burden related to tobacco. The \$187.0 Tobacco Education/Cessation increment requested in this initiative will fund strategies to

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Chronic Disease Prevention and Health Promotion (2818)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
help Alaskan communities reduce tobacco use.												
MISSIONS AND MEASURES: A: Result--Outcome Statement: Healthy People in Healthy Communities A2: Strategy-Reduce Suffering, Death, and Disability Due to Chronic Disease												
Helping Alaska's Schools Address Childhood Overweight and Obesity												
	Inc	596.7	0.0	10.0	75.0	0.0	0.0	511.7	0.0	0	0	0
1004 Gen Fund		596.7										

The problem: Forty percent of premature death is due to the behavioral choices we make every day - including decisions to be inactive and not eat right, according to the New England Journal of Medicine. Childhood overweight is becoming a crisis in Alaska. This has dire health, social and economic consequences because we know youth overweight and inactivity leads to adult obesity - which, in turn, causes serious health complications, lost productivity, mounting medical costs for society and even premature death. Renowned epidemiologist and researcher S.J. Olshansky of the University of Illinois has said that the youth of today - this current generation of American children - may on average live less healthy and possibly even shorter lives than their parents. Additionally, the Rand Corp. says that 1 of every 5 health care dollars spent by older members of our families will be for conditions related to their obesity. The numbers in Alaska are staggering at all ages: A recent study in Anchorage schools revealed that 32% of students entering kindergarten or first grade are overweight or at risk of becoming overweight. While 11% of high school students are overweight and 14% are at risk for overweight, less than one-fourth attend daily physical education class. An August 2007 report from the Trust for America's Health ranked Alaska - a young and supposedly active state - 16th worst in the nation for adult obesity at nearly 26 percent of the population. According to another study, nearly two-thirds of adult Alaskans are considered overweight or obese.

What is needed: While the problem is complex, we know the best way to reverse this alarming trend is by starting with children, at the community level. The Alaska's School Physical Activity and Nutrition Promotion (PAN Promotion) grantee program will do so by enabling schools to improve policies and practices that support healthy eating and physical activity, thus empowering Alaska's youth to make healthy lifestyle choices and ultimately take responsibility for their own health. The PAN Promotion program will foster locally-designed, evidence-based improvements to the school environment that will result in healthier, more productive Alaskans. The PAN Promotion program has the added advantage of building upon successful existing programs by collaborating with the DPH-administered school-based tobacco grantee program and the Team Nutrition School Wellness Initiative funded by the Dept. of Education and Early Development and United States Department of Agriculture (USDA). This added focus on childhood overweight will maximize resources through utilization of existing infrastructure so we can do more with less. Additionally, this will further coordinate school health programs.

The PAN Promotion program will bolster school programs that have laid a strong foundation to address childhood overweight and inactivity. The six successful grantees will have already completed the Centers for Disease Control and Prevention (CDC) School Health Index (SHI), developed an action plan, compiled local data, organized an active local school health council and adopted a district Wellness Policy in compliance with federal law. Successful school grantees will use evidence-based local strategies to address childhood overweight and inactivity. Possible strategies will include providing age-appropriate and culturally sensitive instruction to help students adopt and maintain healthy eating habits and a physically active lifestyle; implementing policies to ensure that all foods and beverages available on school campuses and at school events are healthy and consistent with the Dietary Guidelines for Americans; and increasing the use of school facilities for physical activity programs during and after school hours. PAN Promotion grantees will hire a local coordinator at 0.75 Full-Time Equivalent (FTE) to manage the implementation of selected strategies; facilitate local wellness meetings; evaluate the program; attend Alaska School Wellness Institute training on implementing local policies and best-practice strategies; and receive regular training and technical assistance from DPH's Obesity Prevention and Control Program public health specialist.

The requested increment of \$596.7 will be spent as follows:

* \$511.7 will enable six schools the ability to hire a 0.75 FTE local PAN coordinator who will receive regular training and technical assistance from the PHS

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Chronic Disease Prevention and Health Promotion (2818)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

staff; attend the Alaska School Wellness Institute in-depth training on implementing school-based best practice strategies to promote healthy eating and physical activity; facilitate and build support for the local school health council; manage the implementation of selected evidenced-based strategies; and evaluate the PAN Promotion program.
 * \$75.0 will help sponsor the third annual Alaska School Wellness Institute and support the attendance of the local PAN coordinator and other school staff.
 * \$10.0 will permit the PHS to travel to provide personal training and technical assistance to each school and community.

By the end of fiscal year 2009, the PAN Promotion program will have:
 * Issued PAN Promotion grants for up to six school districts for implementation of activities that promote healthy eating and physical activities.
 * Conducted the Alaska School Wellness Institute for local PAN coordinators to train on best practice strategies to improve nutrition services and physical activity programs within the context of the CDC Coordinated School Health Program Model.
 * Provided regular contact, training, and technical assistance to grantees.
 * Developed and disseminated tools and resources for use by the local PAN coordinators.

Local PAN Promotion programs will have:
 1) Resulted in an active local school health council (or equivalent)
 2) Enabled School Health councils to prioritize the School Health Index action plan based on evidenced based strategies with the aim of implementing sustainable changes.
 3) Enabled School Health councils to develop an evaluation plan that includes the use of local Youth Risk Behavior Survey (YRBS) data to track progress and challenges.
 4) Increased school and community knowledge of the negative consequences of obesity, poor nutrition and inactivity.
 5) Increased community support, participation, partner involvement and in-kind support in the school health council.
 6) Begun implementation of locally identified physical activity and nutrition evidence-based strategies to reduce childhood obesity.

Transfer in Interagency Receipt Authority from Women, Children and Family Health

1007 I/A Rcpts	Trin	130.0	0.0	7.0	116.1	6.9	0.0	0.0	0.0	0	0	0
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The Section of Chronic Disease Prevention and Health Promotion has experienced increases in Reimbursable Service Agreements (RSA) as the Servicing Agency. This added Interagency Receipt Authority will allow the section to report their RSAs as budgeted versus unbudgeted, which makes for a more transparent and accountable reporting structure.

The Section of Women's, Children's, and Family Health is experiencing a decreased number of RSAs from other state agencies which in turn generated a surplus of Interagency Receipt Authority, making it available to sections in need.

Transfer in Federal Authority from Health Planning Infrastructure

1002 Fed Rcpts	Trin	75.0	0.0	0.0	65.0	10.0	0.0	0.0	0.0	0	0	0
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The component Health Planning and Infrastructure (HPI) was realigned and added to the RDU Public Health in FY09. HPI had one Reimbursable Service Agreement (RSA) with the Division of Public Health, Section of Chronic Disease Prevention and Health Promotion (CDPHP) for the continuation of the household survey. This record transfers the funding directly to CDPHP to continue the household survey.

FY 09 Health Insurance Increases for Exempt Employees

	SalAdj	0.5	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
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Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Chronic Disease Prevention and Health Promotion (2818)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1002 Fed Rcpts		0.5										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.5												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	186.8	186.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		140.0										
1004 Gen Fund		20.5										
1007 I/A Rcpts		2.5										
1168 Tob Ed/Ces		23.8										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$186.8												
	Subtotal	7,948.9	3,800.5	353.8	2,054.1	563.4	0.0	1,177.1	0.0	42	4	5
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	66.7	66.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		59.0										
1004 Gen Fund		5.5										
1168 Tob Ed/Ces		2.2										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$66.7												
	Totals	8,015.6	3,867.2	353.8	2,054.1	563.4	0.0	1,177.1	0.0	42	4	5

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Epidemiology (296)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	11,706.8	5,451.9	198.3	2,742.4	1,618.2	188.5	1,507.5	0.0	55	0	0
1002 Fed Rcpts		8,325.3										
1003 G/F Match		478.2										
1004 Gen Fund		2,235.0										
1007 I/A Rcpts		458.6										
1108 Stat Desig		209.7										
	Subtotal	11,706.8	5,451.9	198.3	2,742.4	1,618.2	188.5	1,507.5	0.0	55	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Transfer Funding to Public Health Admin for Center for Disease Control Interagency Personnel Agreement												
	Trout	-252.0	0.0	0.0	-252.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-126.0										
1004 Gen Fund		-126.0										
Public Health has an Interagency Personnel Agreement (IPA) with the Center for Disease Control for the Chief Medical Officer. In FY07, this funding was in the Section of Epidemiology. The position has been reassigned to the Public Health Administration component. This transaction transfers the funds.												
ADN 0680013 Transfer to balance support lines within operational functionality												
	LIT	0.0	0.0	174.0	-174.0	0.0	0.0	0.0	0.0	0	0	0
Transfer funds from services to travel to balance support lines for operational capacity. Fewer professional service contracts and RSAs will be issued from the services line due to reduction in federal grant awards.												
The Section of Epidemiology is required to send a team of investigators to communities in Alaska for various epidemiological outbreaks. For example, investigators were dispatched for a rabies outbreak and a botulism outbreak in rural Alaska communities. This section typically over-expendes their travel funds due to varying trends in infectious disease or epidemiological outbreaks. Adding funds to the travel line reflects the operational capacity of the section.												
ADN 0680013 Transfer funding to Community Health and Emergency Medical Services												
	Trout	-50.0	0.0	0.0	-50.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		-50.0										
The Section of Epidemiology has surplus Interagency Receipt Authority due to reductions in several federal grant awards; these reductions in turn reduce the number of RSAs.												
The Section of Community Health and Emergency Medical Services needed additional expenditure authority in its services line for the increase in the Poison Control contract from \$60.0 to \$120.0.												
ADN 0680013 Transfer Statutorily Designated Program Receipts from Chronic Health Prevention and Health Promotions												
	Trin	10.6	0.0	0.0	10.6	0.0	0.0	0.0	0.0	0	0	0
1108 Stat Desig		10.6										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Epidemiology (296)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

The Section of Chronic Disease Prevention and Health Promotion separated from the Section of Epidemiology and became its own section in FY07. In its first year as a separate budget component, \$10.6 Statutory Designated Program Receipt (SDPR) authority was added to their fund sources. The section does not have the ability to collect SDPR and this record transfers the SDPR authority back to the Section of Epidemiology, who overcollected SDPR in FY07 and will fully collect this additional \$10.6 in FY08.

ADN 0680013 Transferr Statutorily Designated Program Receipts from Public Health Laboratories

Trin	138.7	0.0	0.0	138.7	0.0	0.0	0.0	0.0	0	0	0
1108 Stat Desig	138.7										

Public Health Laboratories is installing new equipment to expedite lab results; the new Tigris system is scheduled to be fully operational after January 1, 2008 at which time Statutory Designated Program Receipts (SDPR) can be collected. PH Labs is projected to collect fewer receipts than authorized to collect; and, the Section of Epidemiology historically overcollects SDPR. This records transfers the projected surplus to support Epidemiology's operational capacity.

ADN 0680013 Transfer Surplus Interagency Receipt Authority to Bureau of Vital Statistics

Trout	-11.7	0.0	0.0	-11.7	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts	-11.7										

The Section of Epidemiology anticipates fewer reimbursable services agreements due to federal grant award reductions (e.g. PH Nursing). Surplus authority of \$11.7 is transferred to the Bureau of Vital Statistics who is tasked with adding reimbursable services agreements for specialized upgrades to the vital statistics computer system on behalf of other DHSS Divisions (e.g. Div of Public Assistance, Health Care Services).

ADN 0680013 Transfer Federal Receipt Authority from Certification and Licensing

Trin	78.8	0.0	0.0	78.8	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	78.8										

Certification and Licensing has surplus federal receipt authority due to the Background Check Pilot Grant discontinuation. The Section of Epidemiology needs additional federal receipt authority for potential supplemental federal grant awards and new grant awards.

Subtotal	11,621.2	5,451.9	372.3	2,482.8	1,618.2	188.5	1,507.5	0.0	55	0	0
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***** **Changes From FY2008 Management Plan To FY2009 Governor** *****

Human Biomonitoring for Chemical Contaminants

Inc	300.0	265.7	10.0	12.0	12.3	0.0	0.0	0.0	0	0	0
1004 Gen Fund	300.0										

Alaskans are bombarded with conflicting and confusing messages about the safety of fish consumption. On the one hand, health and nutrition professionals tout the significant health benefits of fish consumption, including cardiovascular benefits and optimal fetal brain development. On the other hand, advisories saying to limit fish consumption because of contaminant concerns are widespread. Due to concerns about mercury in fish, two federal agencies (the U.S. Environmental Protection Agency and the U.S. Food and Drug Administration) have jointly issued a national fish advisory recommending that children and women of childbearing age should limit their consumption of fish and seafood to 12 ounces a week. The Alaska Division of Public Health (ADPH) has documented its disagreement with the national fish advisory, which is inappropriate for the State of Alaska for a number of reasons.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Epidemiology (296)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

In 2001, the Alaska Dept. of Environmental Conservation (ADEC) initiated an ongoing Fish Monitoring Program to analyze contaminant levels in Alaska fish. Thousands of fish have been analyzed for a large number of chemical contaminants. The ADEC forwards the fish contaminant data to ADPH, who interprets their public health significance and develops fish consumption advice.

The ADPH Fish Consumption Advice program consists of two key components:

1. An ongoing Hair Mercury Monitoring program to document mercury exposures in Alaska. All Alaskan women of childbearing age are eligible to participate in this free, confidential program which began in 2002. Data from this program, which has tested over 500 women to date, are used to successfully defend the state's position that fish from Alaska is safe to eat in quantities far exceeding 12 ounces a week (the national, generic advisory level).
2. A toxicologist within Epidemiology to interpret fish chemistry data, prepare public health recommendations and reports, coordinate the Alaska Scientific Advisory Committee for Fish Consumption, and promote Alaska's balanced risk vs. benefit approach to fish consumption advice at a national level.

This increment request is the sole source of funding to continue this program beyond FY 2008. Previously the program was funded by a federal earmark, and then by an RSA from ADEC. The federal earmark no longer exists, and the RSA funds will be depleted during FY 2008.

This increment request of 300.0 will fund:

- 137.7 for 1.5 FTE in the Section of Epidemiology (both existing positions; a toxicologist and a clerk)
- 128.0 for 1.0 FTE in the Section of Laboratories (portions of two existing Chemist positions)
- 15.0 for supplies and travel funds to conduct mercury exposure assessments
- 19.3 for supplies and contractual funds to support mercury testing and analytical instrument maintenance

MISSIONS and MEASURES:

A. Result-Outcome Statement: Healthy People in Healthy Communities

A6: Strategy-Reduce Alaskans Exposure to Environmental Human Health Hazards

Target # 1: State lab has validated methods to test people for 100% of the important PCBs, pesticides, and trace heavy metals

Measure # 1: Each new testing method validated as required by the Clinical Laboratory Improvement Amendments (CLIA)

Tuberculosis Control Program

FndChg	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	PFT	PPT	NP
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-150.0										
1004 Gen Fund	150.0										

Alaska has the highest rate of tuberculosis in the country; the disease - once called the "Scourge of Alaska" - can still kill our citizens. Four Alaskans died with TB in 2004 because of delayed diagnosis and treatment. TB is an equal opportunity disease. It is transmitted through the air and can infect anyone at any time. A recent high-profile international case involved an American attorney who crossed several borders with a contagious, highly dangerous drug-resistant strain of the disease; it is still not known how he contracted TB. Even young children can be infected: Since 2000, as many as 27 percent of the cases in Alaska have involved children. Last year, 10 percent of the TB cases in Alaska were pediatric cases.

The TB rate in Alaska is more than twice the national average. In 2006 in Anchorage alone, 41 cases of TB were reported. Despite hard work and strong coordination between the Section of Epidemiology and the Municipality of Anchorage, that outbreak is continuing. It has lessened because of timely and persistent work with infectious patients, but it is not over - and the necessary interventions take time and money. On average 16 - 18 "contacts" are identified for each confirmed case of TB in Alaska. Each of these "contacts" to the confirmed case must be located and tested to determine if they also have TB. Some people with suspected or actual TB are hard to locate; this requires labor-intensive, gumshoe detective work. For those who do contract the

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Epidemiology (296)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

disease, the treatment regimen can require as many as 62 doses of medication administered over 6-9 months. Each dose can consist of as many as 15 pills and must be given under direct observation to be sure that the pills are actually swallowed. Without this increment, the state's ability to undertake these necessary contact investigations and to assure each patient completes the required therapy will be seriously jeopardized.

Lack of proper follow-through for any TB case is dangerous. For starters, a person with TB who is not properly treated is a risk to anyone else - at the movies, in a restaurant, on the bus. Also, lack of funding can increase the risk of multi-drug resistant TB (MDR-TB). The threat of deadly and costly MDR-TB is very real in Alaska, now a worldwide crossroads. In recent years there has been a steady increase in resistance to the cornerstone treatment drug, isoniazid - the greatest factor being the failure of patients to complete required therapy. This, in turn, allows the still-present disease to survive, mutate and spread. One MDR-TB case can cost more than \$100,000 to treat, while treating just two full-blown cases of extensively-resistant tuberculosis (XDR-TB) would likely cost in excess of \$1 million.

Alaska's TB Control Program has a long tradition of effectiveness - especially when today's rates are compared to the deadly outbreaks of the early to mid 20th Century. But it is a mistake to assume the war has been won. TB can still be a killer in any corner of Alaska.

This request - to replace lost federal funds - is critical if the state is to successfully maintain control and treatment of TB in Alaska. Since 2000, base federal funding from CDC has decreased from \$495.8 in 2004 to the CY2008 projection of \$431.1. Actual purchasing power has been lost to inflation and other costs, such as the soaring price of TB medications. However, the biggest impact on the TB Control Program is the loss of additional funding from federal earmarks, totaling about \$1.4 million since 2000. The last earmark - \$496.0 in addition to base CDC funding - was expended in SFY07. An earmark request for FFY08 was rejected by Congress.

With the requested state funding, this program will provide:

- Rapid detection of TB cases and outbreaks, to decrease transmission of the TB germ to other people.
- Directly observed therapy--the curative treatment for each new case of TB
- Contact investigations--timely investigation of each person who is a contact to a TB case, and where appropriate, treatment for TB infection or disease.
- Enhanced TB control efforts in regions of Alaska with the highest rates of disease.
- Tuberculosis medications for each Alaskan with TB disease or TB infection.

Line Item Transfer Surplus Personal Services to Support Lines

LIT	0.0	-250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
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Surplus funds existed in the personal services line due to numerous vacancies in the Section of Epidemiology. \$250.0 is transferred to Commodities for inflationary costs of pharmaceuticals.

FY 09 Health Insurance Increases for Exempt Employees

SalAdj	1.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	0.6											
1004 Gen Fund	0.4											

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$1.0

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	228.0	228.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	191.6											
1004 Gen Fund	36.4											

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Epidemiology (296)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$228.0												
Subtotal		12,150.2	5,696.6	382.3	2,494.8	1,880.5	188.5	1,507.5	0.0	55	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Reverses Fund Chg in 09 Gov's Tuberculosis Control Program due to Unanticipated Federal Earmark												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		150.0										
1004 Gen Fund		-150.0										
Since the time that the FY2009 Governor's budget was prepared, the department has received notice that the federal earmark for this project is continuing. Therefore, the fund change is no longer required.												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	81.5	81.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		70.8										
1004 Gen Fund		10.7										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$81.5												
Totals		12,231.7	5,778.1	382.3	2,494.8	1,880.5	188.5	1,507.5	0.0	55	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Bureau of Vital Statistics (961)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,362.3	1,562.6	23.3	719.2	57.2	0.0	0.0	0.0	26	0	3
1002 Fed Rcpts		310.4										
1004 Gen Fund		84.0										
1007 I/A Rcpts		163.0										
1156 Rcpt Svcs		1,804.9										
	Subtotal	2,362.3	1,562.6	23.3	719.2	57.2	0.0	0.0	0.0	26	0	3
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Transfer funding to support personal services												
	LIT	0.0	46.0	0.0	-46.0	0.0	0.0	0.0	0.0	0	0	0
This transfer of funds supports the addition of administrative support staff needed for the increased functions in the Bureau of Vital Statistics. Due to federal regulation implementation, this section is tasked with a higher volume of issuing birth certificates (new passport regulations).												
ADN 0680013 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2	0	0
This record balances the position count to reflect the addition of #212 and #213, Administrative Clerk IIIs. These positions will be funded with Receipt Supported Services.												
ADN 0680013 Transfer Interagency Receipt Authority from Epidemiology												
	Trin	11.7	0.0	0.0	11.7	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		11.7										
The Section of Epidemiology anticipates fewer reimbursable services agreements due to federal grant award reductions (e.g. PH Nursing). Surplus authority is transferred to the Bureau of Vital Statistics who is tasked with adding reimbursable services agreements for specialized upgrades to the vital statistics computer system on behalf of other DHSS Divisions (e.g. Div of Public Assistance, Health Care Services).												
ADN 0680013 Transfer Interagency Receipt Authority from Certification & Licensing												
	Trin	54.3	0.0	0.0	54.3	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		54.3										
The Section of Certification and Licensing anticipates less reimbursable services agreements now the C&L regulations have gone into effect. Surplus authority is transferred to the Bureau of Vital Statistics who is tasked with adding reimbursable services agreements for specialized upgrades to the vital statistics computer system on behalf of other DHSS Divisions (e.g. Div of Public Assistance, Health Care Services).												
	Subtotal	2,428.3	1,608.6	23.3	739.2	57.2	0.0	0.0	0.0	28	0	3
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Position Adjustment Record to Reflect Deleted Positions												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	-3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Bureau of Vital Statistics (961)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Delete PCN's 06-N080, 06-N081, and 06-N082												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	76.2	76.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1156 Rcpt Svcs		76.2										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$76.2												
	Subtotal	2,504.5	1,684.8	23.3	739.2	57.2	0.0	0.0	0.0	28	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	41.4	41.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		2.4										
1004 Gen Fund		3.6										
1007 I/A Rcpts		1.7										
1156 Rcpt Svcs		33.7										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$41.4												
	Totals	2,545.9	1,726.2	23.3	739.2	57.2	0.0	0.0	0.0	28	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Health/Emergency Medical Services (2078)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	5,108.3	2,151.5	101.4	515.4	171.1	43.7	2,125.2	0.0	21	0	7
1002 Fed Rcpts		3,986.0										
1003 G/F Match		199.6										
1004 Gen Fund		744.7										
1007 I/A Rcpts		107.0										
1156 Rcpt Svcs		71.0										
	Subtotal	5,108.3	2,151.5	101.4	515.4	171.1	43.7	2,125.2	0.0	21	0	7
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Transfer federal receipt authority for increased Preparedness grant awards												
	Trin	272.6	0.0	0.0	0.0	0.0	0.0	272.6	0.0	0	0	0
1002 Fed Rcpts		272.6										
Transfer-in of surplus federal receipt authority from PH Laboratories to support increased Preparedness Grant Awards to the Municipality of Anchorage, Alaska Native Health Tribal Consortium, and the Alaska State Hospital and Nursing Home Association (ASHNA).												
ADN 0680013 Transfer Interagency Receipt Authority from Epidemiology												
	Trin	50.0	0.0	0.0	50.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		50.0										
The Section of Epidemiology has surplus Interagency Receipt Authority due to reductions in several federal grant awards; these reductions in turn reduce the number of RSAs.												
The Section of Community Health and Emergency Medical Services needed additional expenditure authority in its services line for the increase in the Poison Control contract from \$60.0 to \$120.0.												
ADN 0680013 Transfer Surplus Personal Services to Support Lines												
	LIT	0.0	-350.0	0.0	130.5	0.0	0.0	219.5	0.0	0	0	0
This component deleted 5 non-perm positions and downgraded one position from a range 18 to a range 10. This generated a surplus of personal services funds. Continuation Preparedness grants were increased in FY08 by \$492.1; this transfer of funds supports increases to grants to Municipality of Anchorage, Alaska Native Health Tribal Consortium, and the Alaska State Hospital and Nursing Home Association. The transfer to the services line supports increased lease and professional services contracts.												
ADN 0680013 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	-5
This record balances the position count in the personal services module to reflect the deletion of 06-N06057, 06-N06074, 06-N06075, 06-N06083, and 06-N1403.												
	Subtotal	5,430.9	1,801.5	101.4	695.9	171.1	43.7	2,617.3	0.0	21	0	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Health/Emergency Medical Services (2078)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer out Structure to Newly Named Component, Injury Prevention/Emergency Medical Services (2876)												
	Trout	-5,524.6	-1,895.2	-101.4	-695.9	-171.1	-43.7	-2,617.3	0.0	-21	0	-2
1002 Fed Rcpts		-4,316.4										
1003 G/F Match		-211.6										
1004 Gen Fund		-765.2										
1007 I/A Rcpts		-157.0										
1156 Rcpt Svcs		-74.4										
Transfer to Injury Prevention/Emergency Medical Services (2876) to reflect name change of component.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	93.7	93.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		57.8										
1003 G/F Match		12.0										
1004 Gen Fund		20.5										
1156 Rcpt Svcs		3.4										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$93.7												
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Health Grants (2308)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,963.2	0.0	0.0	0.0	0.0	0.0	1,963.2	0.0	0	0	0
1004 Gen Fund		1,864.9										
1037 GF/MH		98.3										
	Subtotal	1,963.2	0.0	0.0	0.0	0.0	0.0	1,963.2	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,963.2	0.0	0.0	0.0	0.0	0.0	1,963.2	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	1,172.0	0.0	0.0	0.0	0.0	0.0	1,172.0	0.0	0	0	0
1004 Gen Fund		1,172.0										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching GF through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Health Grants (2308)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
MISSIONS AND MEASURES: Performance Measures Affected: Dept-Core Services: Manage health care coverage for Alaskans in need Dept-Core Services: Protect and promote the health of Alaskans Dept-D-4 Provide quality management of health care coverage services providers and clients HCS-A Mitigate service reductions by replacing general funds with alternate funds HCS-B Provide affordable access to quality health care services to eligible Alaskans DPH-A Healthy people in healthy communities DPH-A-A4--Assure access to early preventative services and quality health care SDS-A Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services The Division of Public Health provides financial assistance for the support of community-based health programs by providing grant funds, as well as guidance and technical assistance, to grantees to develop health promotion and education activities. Multi-program grants supporting public health functions are provided by Maniilaq Association, Norton Sound Health COrporation, Southeast Alaska Regional Health COnsortium, Tanana Chiefs Conference, and Yukon Kuskokwim Health Corporation. These public health functions include, but are not limited to: public health nursing, community health aide training and supervision, emergency medical services, tuberculosis control, and injury prevention.												
Transfer in General Funds from Medicaid Services due to Elimination of ProShare Financing												
1004 Gen Fund	Trin	279.4	0.0	0.0	0.0	0.0	0.0	279.4	0.0	0	0	0
Subtotal		3,414.6	0.0	0.0	0.0	0.0	0.0	3,414.6	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		3,414.6	0.0	0.0	0.0	0.0	0.0	3,414.6	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Injury Prevention/Emergency Medical Services (2876)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Subtotal		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Position Adjustment Record to Reflect Deleted Non-Perm Position												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	-1
Delete Non-perm Administrative Clerk III, 06-N06053.												
Transfer in Structure from Community Health and Emergency Medical Services												
Trin		5,524.6	1,895.2	101.4	695.9	171.1	43.7	2,617.3	0.0	21	0	2
1002 Fed Rcpts		4,316.4										
1003 G/F Match		211.6										
1004 Gen Fund		765.2										
1007 I/A Rcpts		157.0										
1156 Rcpt Svcs		74.4										
Transfer in from Community Health and Emergency Medical Services to Injury Prevention/Emergency Medical Services (2876) to reflect name change of component.												
Transfer in Federal Authority from Health Planning and Infrastructure												
Trin		55.0	0.0	30.0	25.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		55.0										
The component Health Planning and Infrastructure (HPI) was realigned and added to the RDU Public Health in FY09. HPI had two Reimbursable Service Agreements (RSA) with the Division of Public Health, Section of Injury Prevention/Emergency Medical Services (IPEMS). This record transfers the funding directly to IPEMS to continue supporting the Rural Medical Services program.												
Incremental Funding for Interagency Receipt Authority to Facilitate Budgeted Reimbursable Services Agreements												
Inc		843.5	0.0	0.0	843.5	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		843.5										
The Section of Injury Prevention and Emergency Medical Services (IPEMS) is receiving pass-through funding from the National Highway Transportation Safety Administration via the Alaska Highway Safety Office (AHSO) within the Department of Transportation and Public Facilities.												
\$562.5, Optimization of EMS Data Systems: This Reimbursable Services Agreement (RSA) is for IPEMS to capture ambulance run data from the largest Emergency Medical Services (EMS) providers as well as small rural providers, and enter the data into a web-based reporting feature. The data system also shares and links information with the Alaska Trauma Registry, the Fatal Accident Reporting System, and the Highway Analysis System traffic crash data.												
\$125.0, Child Passenger Safety (CPS) Coordinator: This RSA funds the IPEMS State Child Passenger Safety Technician Education Project and provides for CPS training and continuing education among all collaborating organizations and agencies allowing the state coordinator to identify training opportunities and to maintain the skills and knowledge of persons involved with CPS programs throughout Alaska.												
\$16.0, Help Along the Way: This RSA funds the brochure that has been printed and distributed for over 16 years using AHSO funding. This brochure serves Alaska's road travelers providing contact information for weather and road reports, and the state's 511 information system.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Injury Prevention/Emergency Medical Services (2876)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>\$85.0, American College of Surgeons: These pass-through funds will support contracting with a technical team to review the entire Alaska Trauma System to obtain recommendations and goals to further develop and improve the Alaska Trauma System for hospital and pre-hospital care that includes emergency room care, and rehabilitations for trauma-related injuries.</p> <p>\$55.0, Alaska State Hospital and Nursing Home Association (ASHNA): For capturing trauma-related injury data from ASHNA relating to emergency room discharge and hospital discharge data to enhance the Alaska Trauma Data collection efforts.</p>												
	Subtotal	6,423.1	1,895.2	131.4	1,564.4	171.1	43.7	2,617.3	0.0	21	0	1
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
SalAdj		33.7	33.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		8.1										
1003 G/F Match		0.2										
1004 Gen Fund		25.4										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$33.7</p>												
	Totals	6,456.8	1,928.9	131.4	1,564.4	171.1	43.7	2,617.3	0.0	21	0	1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Emergency Medical Services Grants (2309)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		2,062.1	0.0	0.0	0.0	0.0	0.0	2,062.1	0.0	0	0	0
1004 Gen Fund		2,062.1										
Subtotal		2,062.1	0.0	0.0	0.0	0.0	0.0	2,062.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		2,062.1	0.0	0.0	0.0	0.0	0.0	2,062.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		2,062.1	0.0	0.0	0.0	0.0	0.0	2,062.1	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		2,062.1	0.0	0.0	0.0	0.0	0.0	2,062.1	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: State Medical Examiner (293)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,993.7	1,516.8	18.5	304.5	103.9	50.0	0.0	0.0	15	0	2
1004 Gen Fund		1,972.0										
1156 Rcpt Svcs		21.7										
	Subtotal	1,993.7	1,516.8	18.5	304.5	103.9	50.0	0.0	0.0	15	0	2
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Transfer between support lines to bring parallel to spending plan												
	LIT	0.0	0.0	25.0	12.5	12.5	-50.0	0.0	0.0	0	0	0
Forensic X-ray equipment was purchased in FY07. The equipment line is reduced accordingly and reallocated to support operational capacity.												
ADN0680013 Transfer Unrealizable Receipt Supported Services to Certification & Licensing												
	Trout	-11.7	0.0	0.0	0.0	-11.7	0.0	0.0	0.0	0	0	0
1156 Rcpt Svcs		-11.7										
The Medical Examiners Office cannot fully collect the Receipt Supported Services for various pathology-related tests on a fee collection basis. This record transfers surplus Receipt Supported Services (RSS) Authority of \$11.7 into Certification & Licensing (C&L). C&L exceeded RSS authority in FY07 as regulations for fees associated with licensing health care facilities and processing background checks/fingerprints went into effect. C&L projects collecting more than in FY07 and all DPH surplus of RSS will be transferred into C&L to support its capacity to collect these revenues.												
ADN 0680013 Position Reconciliation												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	-2
Deleted unneeded non-perm PCNs 06-?064 and 06-N085.												
	Subtotal	1,982.0	1,516.8	43.5	317.0	104.7	0.0	0.0	0.0	15	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.6	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.6										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.6												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	56.4	56.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		56.4										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: State Medical Examiner (293)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
: \$56.4												
	Subtotal	2,039.0	1,573.8	43.5	317.0	104.7	0.0	0.0	0.0	15	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	2,039.0	1,573.8	43.5	317.0	104.7	0.0	0.0	0.0	15	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Health Laboratories (2252)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	6,468.9	3,578.6	114.4	940.4	1,380.8	454.7	0.0	0.0	47	0	2
1002 Fed Rcpts		2,244.5										
1003 G/F Match		97.9										
1004 Gen Fund		3,245.7										
1108 Stat Desig		811.6										
1156 Rcpt Svcs		69.2										
FY 08 Bargaining Unit Contract Terms: Labor, Trades and Crafts Unit (LTC)												
	SalAdj	7.5	7.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		7.5										
Costs associated with the bargaining unit contract terms applicable to this component.: \$7.5												
First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	Atrin	52.8	0.0	0.0	52.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		52.8										
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
	Subtotal	6,529.2	3,586.1	114.4	993.2	1,380.8	454.7	0.0	0.0	47	0	2
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680013 Transfer Funding to Support Increased Natural Gas Costs												
	LIT	0.0	0.0	0.0	82.1	0.0	-82.1	0.0	0.0	0	0	0
Due to the purchase of the Tigris System in FY07, we are able to reduce the equipment line. Additional funds are needed in the services line to support increased energy costs in the Laboratory facility in Anchorage. In January of 2007, natural gas costs were increased 33.3%. This is a significant increase in a facility that relies heavily on natural gas.												
ADN 0680013 Transfer Unrealized Federal Authority to CH/EMS and Public Health Administration												
	Trout	-522.6	0.0	0.0	0.0	-250.0	-272.6	0.0	0.0	0	0	0
1002 Fed Rcpts		-522.6										
Transfers excess Preparedness federal receipt authorization to Community Health/Emergency Medical Services (272.6) and Public Health Administration (250.0).												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Health Laboratories (2252)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
ADN 0680013 Transfer Unrealized Statutorily Designated Program Receipt Authority to Section of Epidemiology												
	Trout	-138.7	0.0	0.0	0.0	-138.7	0.0	0.0	0.0	0	0	0
1108 Stat Desig		-138.7										
Public Health Laboratories is installing new equipment to expedite lab results; the new Tigris system is scheduled to be fully operational after January 1, 2008 at which time Statutory Designated Program Receipts (SDPR) can be collected. PH Labs is projected to collect fewer receipts than authorized to collect; and, the Section of Epidemiology historically overcollects SDPR. This records transfers the projected surplus to support Epidemiology's operational capacity.												
	Subtotal	5,867.9	3,586.1	114.4	1,075.3	992.1	100.0	0.0	0.0	47	0	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Fairbanks Virology Lab Pro-rated for Lab Opening - 1/2 year funding												
	Inc	395.0	0.0	0.0	395.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		395.0										
In FY06 and FY07, the state Legislature provided funding to replace the aging virology laboratory of the Alaska Public Health Laboratories (AKPHL). A White Paper authored by the Association of Public Health Laboratories and the Centers for Disease Control and Prevention (CDC) stated that the current facility housing the Alaska State Virology Laboratory (ASVL) does not meet current Occupational Safety and Health Administration nor CDC bio-containment standards. Construction of the replacement virology laboratory commenced June 2007 and is expected to be completed December 2009. This increment is for six months pro-rated costs to support operating the new laboratory (utilities, janitorial, snow removal, parking, heat, electricity, natural gas, etc.)..												
The University of Alaska, Fairbanks (UAF) has contributed over \$1.5 million to the ASVL project. UAF researchers will have access to both a Biological Safety Level 3 (BSL3) and an Animal BSL3 laboratory for research purposes. UAF will also contribute an estimated additional \$400.0 per year for annual operational costs. Failure to fund the new laboratory operations will result in a complete shut-down of laboratory testing for viruses.												
The ASVL is the only laboratory of its kind in Alaska. The new ASVL will occupy 26,940 sq. ft., of which 9,495 sq. ft. will be occupied by UAF. In FY07, the ASVL received 62,352 requests for viral examination. This workload represents 50% of all testing done by AKPHL. Laboratory testing for viral diseases has increased 100% over the last 10 years. This is due to new diseases such as West Nile Virus, Severe Acute Respiratory Syndrome, and avian influenza (highly pathogenic influenza H5N1), re-emerging diseases such as measles and rabies, and common highly communicable viruses such norovirus and entero-viruses. An aging population as well as a general increase in the population has also contributed to an increase in hepatitis and Human Immunodeficiency Virus testing. A fully functional, modern virology laboratory will enable efficient and safe laboratory testing. Additionally, the State of Alaska will be able to respond to emergencies involving exotic diseases such as smallpox and novel influenza in a timely and efficient manner.												
Line Item Transfer to Balance Support Line												
	LIT	0.0	0.0	0.0	-87.0	87.0	0.0	0.0	0.0	0	0	0
Line item transfer to cover the increasing costs of testing supplies.												
Delete one-time-authorization for First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	OTI	-52.8	0.0	0.0	-52.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-52.8										

One-time-funding deleted for fuel/utility increases which were added in the FY08 budget as follows:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Health Laboratories (2252)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	191.6	191.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		64.9										
1004 Gen Fund		122.3										
1108 Stat Desig		4.4										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$191.6												
FY 09 Bargaining Unit Contract Terms: Labor Trades and Crafts Unit												
	SalAdj	3.5	3.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		3.5										
The FY 09 health insurance increase of \$17.08 from \$854.00 per month to \$871.08 per month and the FY 09 2% wage increase applicable to this component. : \$3.5												
	Subtotal	6,405.2	3,781.2	114.4	1,330.5	1,079.1	100.0	0.0	0.0	47	0	2
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	44.4	44.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		11.9										
1004 Gen Fund		32.5										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$44.4												
	Totals	6,449.6	3,825.6	114.4	1,330.5	1,079.1	100.0	0.0	0.0	47	0	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Tobacco Prevention and Control (2384)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
1168 Tob Ed/Ces	ConfCom	6,045.3	0.0	0.0	2,809.2	0.0	0.0	3,236.1	0.0	0	0	0
		6,045.3										
	Subtotal	6,045.3	0.0	0.0	2,809.2	0.0	0.0	3,236.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	6,045.3	0.0	0.0	2,809.2	0.0	0.0	3,236.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Tobacco Prevention and Control												
1168 Tob Ed/Ces	Inc	813.0	0.0	0.0	428.0	0.0	0.0	385.0	0.0	0	0	0
		813.0										
	Subtotal	6,858.3	0.0	0.0	3,237.2	0.0	0.0	3,621.1	0.0	0	0	0

WHAT IS NEEDED:

This increment will allow the Division of Public Health to address the following areas, as a part of the comprehensive, evidence-based statewide Alaska Tobacco Prevention and Control (TPC) Program, to stem the tide of increasing poor health and health care costs, and decreasing quality and length of life in Alaska due to tobacco use.

Contractual - \$428.0

These funds will go towards the successful Community-Based Tobacco Prevention Grant Program for additional technical assistance as follows;
 --the initiation of a statewide tobacco media library and mail-out center, to be housed on the web, and provide media created by the Alaska Tobacco Prevention and Control Program to Alaskans statewide
 --the programmatic phase of a joint program with the Heart Disease and Stroke Prevention Program to address hypertension and tobacco use
 --a new statewide youth prevention pilot project to provide training to adults and teens interested in starting youth action groups in their communities focused on tobacco prevention, as well as small grants to these groups to fund projects and activities
 --a training project to provide the most current tobacco cessation training and continuing education to healthcare providers in the state.

Grants - \$385.0

These funds will be used to enhance grant awards to the Community-Based Tobacco Prevention Grant Program to increase their work in coalition building, youth prevention, policy making and/or counter-marketing; and to provide new Community-Based Tobacco Prevention Grant awards to communities and regions that have not received funding before, including communities focusing on special populations. The Community-Based Tobacco Prevention Grant Program has a proven record of success, and these additional funds will continue using these nationally-recognized, evidence-based strategies.

Missions and Measures:

A: Result--Outcome Statement: Healthy People in Healthy Communities

A2: Strategy-Reduce Suffering, Death, and Disability Due to Chronic Disease

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Tobacco Prevention and Control (2384)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	6,858.3	0.0	0.0	3,237.2	0.0	0.0	3,621.1	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Health Planning and Infrastructure (2765)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Reverse FY08 Mental Health Trust Recommendation												
	OTI	-80.0	-80.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		-80.0										
Mental Health Trust: Cont - Comprehensive Integrated Mental Health Plan												
	Inc	80.0	70.0	10.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		80.0										
Grant 120.04												
The Comprehensive Integrated Mental Health Program Plan (Comprehensive Plan) is the outcome of a legislatively mandated planning process between the Department of Health and Social Services, The Trust and the four beneficiary advisory boards. The Mental Health Trust currently provides funding to DHSS for the development of the Comprehensive Plan - Moving Forward 2006-2011 and annual updates to the indicators in the plan. The plan is used to measure status of beneficiary-related indicators, guide program evolution and service delivery and contributes significantly to the establishment of funding priorities. The Comprehensive Plan is developed within a results-based framework that will assist policymakers in identifying beneficiary needs and determining service effectiveness.												
Transfer out Federal Authority to Sections, Replacing Prior Year Reimbursable Service Agreements												
	Trout	-130.0	0.0	0.0	-130.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-130.0										
The component Health Planning and Infrastructure (HPI) was realigned and added to the RDU Public Health in FY09. HPI had three Reimbursable Service Agreements (RSA) with the Division of Public Health, Sections of Chronic Disease Prevention and Health Promotion, and Injury Prevention and Emergency Medical Services. This record transfers the funding directly to these sections to continue the services previously covered under RSAs.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.4	0.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.4										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.4												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	77.5	77.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		68.5										
1003 G/F Match		0.8										
1004 Gen Fund		1.2										
1156 Rcpt Svcs		7.0										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$77.5

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Health Planning and Infrastructure (2765)
RDU: Public Health (502)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Subtotal	-52.1	67.9	10.0	-130.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	36.8	36.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
	1002 Fed Rcpts	36.8										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$36.8												
	Totals	-15.3	104.7	10.0	-130.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-8,349.5										
1003 G/F Match		8,349.5										
FY2008 Conference Committee												
	ConfCom	318,610.0	0.0	0.0	0.0	0.0	0.0	318,610.0	0.0	0	0	0
1002 Fed Rcpts		187,138.6										
1003 G/F Match		118,345.1										
1004 Gen Fund		10,551.3										
1007 I/A Rcpts		1,375.0										
1108 Stat Desig		1,200.0										
	Subtotal	318,610.0	0.0	0.0	0.0	0.0	0.0	318,610.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	318,610.0	0.0	0.0	0.0	0.0	0.0	318,610.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY09 Projected Medicaid Formula Growth												
	Inc	19,116.6	0.0	0.0	0.0	0.0	0.0	19,116.6	0.0	0	0	0
1002 Fed Rcpts		10,514.7										
1004 Gen Fund		8,601.9										

This increment funds increases in Medicaid service costs due to increases in enrollment and utilization. In FY09, services for seniors and the developmentally disabled are expected to grow 6% over the FY08 authorized amount. This increment request is necessary to maintain the current level of Medicaid long term health services. The Senior and Disabilities Medicaid Services component funds three types of services: nursing homes, personal care attendants, and home and community based services.

In FY07, total growth was affected by the Mentally Retarded and Developmentally Disabled Waiver which grew approximately 4% from FY06 and is expected to grow again in FY08 by approximately 9%. Personal Care Services is a large portion of Senior and Disabilities Services, but its growth has been slowing due to cost containment measures. The Older Alaskan Waiver, another major contributor to overall growth, is expected to grow by 9% in FY08 and 7% in FY09.

The fund source projection is based on the actual amount of federal revenue collected in SFY07 in this component, 59%, and assumes that the proportion of expenditures eligible for each type of federal reimbursement remains the same. It also assumes that the SFY09 average federal medical assistance percentage remains at 53.76% for regular Medicaid and 67.63% for enhanced Medicaid.

The additional funding supports the department's mission to manage health care for Alaskans in need. This increment will help the department improve the following performance measures:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Dept-A-1--Provide a safe environment for Alaska pioneers and veterans												
Dept-D-4--Provide quality management of health care coverage services providers and clients												
HCS-A-A2--Expand fund recovery efforts												
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
HCS-B--T1-Increase the number of providers												
DPH-A---Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
FFY09 Federal Medical Assistance Percentage (FMAP) Rate Change for Medicaid	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-9,004.9										
1003 G/F Match		9,004.9										

This request replaces lost federal revenues resulting from a 1.95% decrease in the rate the federal government reimburses the state for Medicaid benefits that will take effect on October 1, 2008.

The federal and state governments jointly fund Medicaid. The federal fund reimbursement rate is set by the Centers for Medicare and Medicaid Services and is outside the control of the state government. One in five Alaskans is enrolled in Medicaid at some time each year. Without the increment the state would be forced to reduce eligibility or services currently provided to low income children, pregnant women, persons with disabilities, and the elderly. By approving this fund source change, the department will be able to continue to meet its mission of purchasing health care for Alaskans in need.

The amount of federal funds the state receives for its Medicaid program depends on a complex array of reimbursement rates, some of which change each October 1st with the start of a new federal fiscal year. The bulk of the federal funding for Medicaid benefits comes from claims reimbursed at the federal medical assistance percentage or FMAP. The FMAP rate is based on the state's national rank of per capita personal income but can be no less than 50%. Also affected are the State Children's Health Insurance Program (SCHIP) and the Breast and Cervical Cancer program (BCC) which are part of Alaska's Medicaid program. Eligible claims for SCHIP and BCC are reimbursed at an enhanced FMAP rate which reduces the state share of costs by 30% over the regular FMAP.

The regular FMAP is projected to drop from 52.48% to 50.53% in FFY09 and the enhanced FMAP from 66.74% to 65.37%. The regular FMAP for SFY09 will average 51.02% across two federal fiscal years (52.48% from July-Sept. 2008 and 50.53% from Oct. 2008-June 2009). The enhanced FMAP for SFY09 will average 65.71% (66.74% from July-Sept. 2008 and 65.37% from Oct. 2008-June 2009).

Approximately 97% of the Senior and Disabilities Medicaid Services component's claims are reimbursed at the regular FMAP. The remaining 3% is Indian Health Service. Based on current estimated expenditures for Medicaid, the FFY09 change in FMAP will require an estimated \$9,004.9 increase in GF to replace the lost federal funds and maintain services at the current level.

The rates used here are estimates. The final FMAP rate for FFY 2009 will not be known until November/December.

Transfer Funding to Senior and Disability Services Administration for Additional Staff

	Trout	-965.0	0.0	0.0	0.0	0.0	0.0	-965.0	0.0	0	0	0
1002 Fed Rcpts		-482.5										
1003 G/F Match		-482.5										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

This change record reflects the transfer of funding for 10 new positions to the Senior and Disabilities Services Administration budget and funds support costs as follows:

2 Adult Protective Services Case Workers - Soc Svcs Spec III positions (Salary range 18) \$80,000 x 2 = \$160,000

6 Care Coordinators - Health Prog Assocs (Salary range 16) - \$70,000 x 6 = \$420,000

2 Admin Clerk III (Salary range 10) - \$50,000 x 2 = \$100,000

Support costs for the new positions include:

Travel costs \$50.0 - 8 of the 10 positions will need to travel frequently for Adult Protective Services investigations and care coordination for SDS beneficiaries. Travel will include airfare to rural communities which is expensive.

Contractual services costs \$165.0 - to fund office space, phone, computer and other supports for the newly established positions.

Commodities \$40.0 - to establish new work stations (\$2.0) and purchase computers (\$2.0) per person.

Equipment \$30.0 - for multi-function printers costing approximately \$15.0 each. One machine can support 5 people, depending on proximity. This equipment line will allow the purchase of 2 machines to support these 10 staff.

Decrement PCA cost containment

Dec	-3,000.0	0.0	0.0	0.0	0.0	0.0	0.0	-3,000.0	0.0	0	0	0
1003 G/F Match	-3,000.0											

Medicaid spending for personal care attendant (PCA) services grew by 42.2% per year between 1998 and 2004. The personal care cost containment initiatives for the program have been some of the most successful implemented by the department to date. Between FY00 and FY05, the PCA program grew from \$8 million to \$80 million. Since implementing regulation changes in FY06, the department succeeded in slowing the growth of the program and for FY07 spending actually decreased from the prior year by 7%. The department estimates that an additional \$3 million in cost containment can be realized in FY09.

Performance Measures Affected:

- Dept-Core Services--Manage health care coverage for Alaskans in need
- Dept-Core Services--Protect and promote the health of Alaskans
- Dept-Core Services--Promote independence of Alaska senior and people with physical or developmental disabilities
- Dept-A-1--Provide a safe environment for Alaska pioneers and veterans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-B--Provide affordable access to quality health care services to eligible Alaskans
- DPH-A--Healthy people in healthy communities
- DPH-A-A2--Reduce suffering, death and disability due to chronic disease
- DPH-A-A4--Assure access to early preventative services and quality health care
- SDS-A--Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Increase RSA From Pioneer Homes for Assisted Living Home Payments to Pioneer Home Residents												
1007 I/A Rcpts	Inc	304.8	0.0	0.0	0.0	0.0	0.0	304.8	0.0	0	0	0
		304.8										
Subtotal		334,066.4	0.0	0.0	0.0	0.0	0.0	334,066.4	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
AMD: Personal Care Attendant Medicaid Rate Increases - 6%												
1002 Fed Rcpts	Inc	2,535.1	0.0	0.0	0.0	0.0	0.0	4,968.9	0.0	0	0	0
1003 G/F Match		2,433.8										

This increment request matches anticipated increases to general fund match requirements associated with the RSA between AKPH and SDS. This increase reflects additional funding required as a result of changes to the FMAP rate, which will require greater GF match from AKPH.

This increment reflects an increase to the GF match portion paid by the Pioneer Homes to SDS Medicaid for Assisted Living Services provided to Medicaid-eligible Pioneer Home residents. The increase is due to both higher Medicaid receipts to the Homes and to increased GF match due to reduced FMAP.

Senior and Disabilities Medicaid Services is proposing to increase reimbursement for personal care attendant services in FY09 by 6%. Rates for most providers have been frozen since 1999. Rate adjustments are necessary to maintain the current level of services and prevent loss of provider participation.

Personal care attendant (PCA) services are typically provided in a consumer's home by health care paraprofessionals called personal care assistants. These services enable functionally disabled Alaskans of all ages, and frail elderly Alaskans, to live in their own homes instead of being placed in a more costly and restrictive long-term care setting. Recipients have a choice between two different options of PCA services:

The Agency-Based PCA model allows consumers to use one of the qualified agencies that oversee, manage and supervise their care.
 The Consumer-Directed PCA model allows consumers to select, train, supervise, and discharge their PCA.

In FY07, PCA services were provided to nearly 3,800 individuals.

This increment provides interim relief to personal care attendant reimbursements to promote and sustain access to services until a consistent rate methodology is developed and implemented. The increment requested here is to raise rates, frozen for nearly 10 years, by 6%, which is medical inflation for two years, as a starting point.

The additional cost to Medicaid from rate adjustments in SFY09 for care coordination services is estimated to be \$4,968.9.

Federal % = 51.02 SFY09 FMAP.

This increment will help the department improve the following performance measures:

- Dept-A-1--Provide a safe environment for Alaska pioneers and veterans
- Dept-D-4--Provide quality management of health care coverage services providers and clients

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
HCS-A--A1-Increase IHS participation												
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
HCS-B--T1-Increase the number of providers												
DPH-A---Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
AMD: Home & Community Based Waiver Rate Increases (Assisted Living Homes) - 4%												
Inc		1,292.5	0.0	0.0	0.0	0.0	0.0	1,292.5	0.0	0	0	0
1002 Fed Rcpts		659.4										
1003 G/F Match		633.1										

Senior and Disabilities Medicaid Services is proposing to increase reimbursement for home and community based (HCB) waiver assisted living homes in FY09 by 4%. Rates for most services provided to waiver clients have been frozen since 2004. Rate adjustments are necessary to maintain the current level of services and prevent loss of provider participation.

Last year (FY07) Alaska Medicaid processed waiver services claims for 3,792 individuals. The Adults with Physical Disabilities waiver program served 32% of waiver services recipients last year, the Mentally Retarded/Developmentally Disabled (MRDD) waiver served 24%, the Older Alaskan waiver served 39%, and the Children with Complex Medical Conditions waiver served almost 6% of all waiver clients.

These four waiver programs serve different populations of clients with different medical needs and, depending on the waiver program, may provide care coordination, residential supported living services, chore and respite services, supplies and medical equipment, environmental modifications, meal services, or transportation services. Average costs per client vary widely between waiver programs, with costs for mentally retarded clients under the MRDD Waiver being higher than costs for clients served by any of the other three waivers. Older Alaskan Waiver clients on average cost less than other clients served by other waivers.

Typically, residents of assisted living homes are not able to live without some form of daily assistance. They may require nursing and other physical and emotional support services offered in a licensed assisted living facility. Professional services range from assurance of a safe environment and occasional help with daily life skills, to assistance with health care, personal care and other support services including end of life care. Alaska Pioneer Homes are licensed as assisted living homes.

This increment provides interim relief to assisted living home reimbursements to promote and sustain access to services until a consistent rate methodology is developed and implemented. The increment requested here is to raise rates by 4%, which is medical inflation for one year, as a starting point.

The additional cost to Medicaid from rate adjustments in SFY09 for care coordination services is estimated to be \$1,292.5.

Federal % = 51.02 SFY09 FMAP.

This increment will help the department improve the following performance measures:

- Dept-A-1--Provide a safe environment for Alaska pioneers and veterans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--A1-Increase IHS participation

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
HCS-B--T1-Increase the number of providers												
DPH-A---Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
AMD: Home & Community Based Waiver Rate Increases (Care Coordination) - 6%												
Inc		534.7	0.0	0.0	0.0	0.0	0.0	534.7	0.0	0	0	0
1002 Fed Rcpts		272.8										
1003 G/F Match		261.9										

Senior and Disabilities Medicaid Services is proposing to increase reimbursement for home and community based (HCB) waiver care coordination services in FY09 by 6%. Rates for most services provided to waiver clients have been frozen since 1993. Rate adjustments are necessary to maintain the current level of services and prevent loss of provider participation.

Last year (FY07) Alaska Medicaid processed waiver services claims for 3,792 individuals. The Adults with Physical Disabilities waiver program served 32% of waiver services recipients last year, the Mentally Retarded/Developmentally Disabled (MRDD) waiver served 24%, the Older Alaskan waiver served 39%, and the Children with Complex Medical Conditions waiver served almost 6% of all waiver clients.

These four waiver programs serve different populations of clients with different medical needs and, depending on the waiver program, may provide care coordination, residential supported living services, chore and respite services, supplies and medical equipment, environmental modifications, meal services, or transportation services. Average costs per client vary widely between waiver programs, with costs for mentally retarded clients under the MRDD Waiver being higher than costs for clients served by any of the other three waivers. Older Alaskan Waiver clients on average cost less than other clients served by other waivers.

Care coordinators assist individuals enrolled on home and community based waivers to access waiver and other Medicaid services as well as needed medical, social, or other community services. Care coordination is ongoing - coordinators meet with each client at least twice a month to review existing services, monitor quality of care, and make revisions to the plan of care as needed. Care coordinators also initiate and oversee the annual plan of care renewal.

This increment provides interim relief to care coordination provider reimbursements to promote and sustain access to services until a consistent rate methodology is developed and implemented. The increment requested here is to raise rates, frozen for over 15 years, by 6%, which is less than medical inflation for two years, as a starting point.

The additional cost to Medicaid from rate adjustments in SFY09 for care coordination services is estimated to be \$534.7.

Federal % = 51.02 SFY09 FMAP.

This increment will help the department improve the following performance measures:

- Dept-A-1--Provide a safe environment for Alaska pioneers and veterans
- Dept-D-4--Provide quality management of health care coverage services providers and clients
- HCS-A--A1-Increase IHS participation

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
HCS-B--T1-Increase the number of providers												
DPH-A---Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
AMD: Home & Community Based Waiver Rate Increases (Residential Habilitation) - 4%												
	Inc	3,956.2	0.0	0.0	0.0	0.0	0.0	3,956.2	0.0	0	0	0
1002 Fed Rcpts		2,018.4										
1003 G/F Match		1,937.8										

Senior and Disabilities Medicaid Services is proposing to increase reimbursement for home and community based (HCB) waiver residential habilitation services in FY09 by 4%. Rates for most services provided to waiver clients have been frozen since 2005. Rate adjustments are necessary to maintain the current level of services and prevent loss of provider participation.

Last year (FY07) Alaska Medicaid processed waiver services claims for 3,792 individuals. The Adults with Physical Disabilities waiver program served 32% of waiver services recipients last year, the Mentally Retarded/Developmentally Disabled (MRDD) waiver served 24%, the Older Alaskan waiver served 39%, and the Children with Complex Medical Conditions waiver served almost 6% of all waiver clients.

These four waiver programs serve different populations of clients with different medical needs and, depending on the waiver program, may provide care coordination, residential supported living services, chore and respite services, supplies and medical equipment, environmental modifications, meal services, or transportation services. Average costs per client vary widely between waiver programs, with costs for mentally retarded clients under the MRDD Waiver being higher than costs for clients served by any of the other three waivers. Older Alaskan Waiver clients on average cost less than other clients served by other waivers.

Residential habilitation services provide assistance for activities of daily living, such as personal grooming and cleanliness, bed making and household chores, eating and preparing food, and social and adaptive skills. Without residential habilitation the individual would have to reside in an institutional setting. Payments are not for room and board, or facility costs. Payments can be for modifications or adaptations to assure the health and safety of residents or to meet life safety codes. Payments are not made directly or indirectly to members of the individual's immediate family nor for routine care and supervision which a family or group home provider is expected to provide.

This increment provides interim relief to residential habilitation provider reimbursements to promote and sustain access to services until a consistent rate methodology is developed and implemented. The increment requested here is to raise rates by 4%, which is the equivalent of medical inflation for one year, as a starting point.

The additional cost to Medicaid from rate adjustments in SFY09 for residential habilitation services is estimated to be \$3,956.2.

Federal % = 51.02 SFY09 FMAP.

This increment will help the department improve the following performance measures:

- Dept-A-1--Provide a safe environment for Alaska pioneers and veterans
- Dept-D-4--Provide quality management of health care coverage services providers and clients

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
HCS-A--A1-Increase IHS participation												
HCS-B---Provide affordable access to quality health care services to eligible Alaskans												
HCS-B--T1-Increase the number of providers												
DPH-A---Healthy people in healthy communities												
DPH-A--A2-Reduce suffering, death and disability due to chronic disease												
DPH-A--A4-Assure access to early preventative services and quality health care												
SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
AMD: Medicaid Facility Rates - Nursing Homes - 6.5%												
Inc		837.2	0.0	0.0	0.0	0.0	0.0	837.2	0.0	0	0	0
1002 Fed Rcpts		427.1										
1003 G/F Match		410.1										

This increment is necessary to maintain nursing home services at their current level and to prevent loss of provider participation.

By regulation, payment rates for most in-state facilities must be re-based at least every four years. In other years the facility gets a rate adjustment for inflation. The last rebasing year was FY04.

This is the second year of a two year process to phase in these required rate increases. Some nursing facilities were rebased during FY08. Facilities included in this budget request are the Quyanna Care Center associated with Norton Sound Regional Hospital in Nome, the Heritage Place facility associated with Central Peninsula Hospital in Soldotna, and nursing beds associated with Wrangell Medical Center, Ketchikan General Hospital, and Cordova Community Medical Center.

Alaska nursing home facilities currently serve about 1,400 Medicaid clients per year. About 65% are elderly and 35% are persons with disabilities.

Nursing home payment rates for FY09 will be based on review of FY07 operating expenses and the Medicaid billing activity for each facility. The new rate for a facility will become effective at the start of its 2009 fiscal cycle. The Department estimates that the rate adjustment will be an average of 6.5% above medical inflation.

The additional cost to Medicaid from re-basing in FY09 will be \$837.2.

Federal 5 = 51.01% SFY09 avg FMAP.

This increment will help the department improve the following performance measures:

- Dept-A-1--Provide a safe environment for Alaska pioneers and veterans
- HCS-B---Provide affordable access to quality health care services to eligible Alaskans
- HCS-B--T1-Increase the number of providers
- DPH-A---Healthy people in healthy communities
- DPH-A--A2-Reduce suffering, death and disability due to chronic disease
- DPH-A--A4-Assure access to early preventative services and quality health care
- SDS-A---Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Medicaid Services (2662)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	345,655.9	0.0	0.0	0.0	0.0	0.0	345,655.9	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Services Administration (2663)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		10,879.7	7,418.5	255.0	2,832.7	276.3	33.3	130.0	-66.1	91	2	2
1002 Fed Rcpts		6,414.3										
1003 G/F Match		1,836.3										
1004 Gen Fund		334.2										
1037 GF/MH		2,159.9										
1092 MHTAAR		135.0										
06-5-0008 Spread unallocated GF decrement due to sunset of Senior Care												
LIT		0.0	-43.1	-0.5	0.0	-15.0	-7.5	0.0	66.1	0	0	0
ETS Chargeback Transfer from Department of Administration												
Atrin		9.2	0.0	0.0	9.2	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		9.2										
Subtotal		10,888.9	7,375.4	254.5	2,841.9	261.3	25.8	130.0	0.0	91	2	2

***** Changes From FY2008 Authorized To FY2008 Management Plan *****

ADN 0680014 Position Adjustment												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7	0	1

This change records aligns position counts to staffing plan. Action taken in FY08 Management Plan includes:

06-#155 - New position replaces non-perm PCN 06-N07050. Position will manage the General Relief/Temporary Assisted Living Program managed by Adult Protective Services.

06-#156 - Reestablishes PCN 06-2020 which was deleted during FY08 Gov's Budget process; however management has determined this position is critical to carrying out division mission.

06-#157, 06-#158, 06-#159 - Admin Clerk III position in Personal Care Attendent Program - Replacing non-perm PCN's 06-N07064, 06-N07005 & 06-N07006.

06-#160 - Replaces existing non-perm PCN 06-N07060. (Senior Svcs Technician)

06-#161 Replaces existing non-perm PCN 06-N07039. This position will be a part-time position.

06-#162 Place-holder PCN for non-perm PCN 06-N07058 (Research Analyst III) which is scheduled to expire on 9/30/08 when federal grant funding for this position expires.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Services Administration (2663)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
06-#164 - Health Prog Mgr II - New position to manage TEFRA Level of Care Decisions for SDS.												
	Subtotal	10,888.9	7,375.4	254.5	2,841.9	261.3	25.8	130.0	0.0	98	2	3
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer from Senior and Disabilities Medicaid Services to Support Additional Staff												
	Trin	965.0	680.0	50.0	165.0	40.0	30.0	0.0	0.0	0	0	0
	1002 Fed Rcpts	482.5										
	1003 G/F Match	482.5										

Senior and Disabilities Services (SDS) has been steadily adding new staff positions over the last few years in order to more effectively manage programs. In FY07 and FY08, there has been legislative intent language in the budget bills that mandates Senior and Disabilities Services to control program costs and growth. This transfer will provide funding to appropriately staff the program to meet mandates.

This change record adds 10 new positions to the Senior and Disabilities Services budget and funds support costs as follows:

2 Adult Protective Services Case Workers = Social Services Specialist III's (Salary Range 18) \$80.0 each

These positions are required to ensure there are adequate numbers of staff to investigate reports of harm, abuse and neglect involving vulnerable adults. Recent additions to the Adult Protective Services staff have reduced the per-worker case load but their current case loads still exceed the national average. These positions will help to reduced excessive case loads and expand the Adult Protective Services staff's ability to investigate reports of harm, abuse or neglect. In addition, these positions help to administer the General Relief/Temporary Assisted Living program which provides temporary assisted living to vulnerable adults over the age of 18.

6 Care Coordinators = Health Program Associates (Salary Range 16) - \$70.0 each

Senior and Disabilities Services have been running a pilot project to take over care coordination as a function performed by state employees. Client response to having State employees acting as care coordinators has been very positive. Currently there are only two (2) care coordinators on staff. Senior and Disabilities Services has been legislatively mandated to eliminate the Developmental Disabilities Waitlist. This will potentially bring 800-1000 new clients into the Medicaid program. New care coordinator positions will be needed to provide care coordination services to these clients. Senior and Disabilities Services would like to respond to the positive public response to having State care coordinators by making more of them available so people can make the choice of who provides care coordination for their loved ones.

2 Admin Clerk III's (Salary Range 10) - \$50.0 each

These new clerical positions are needed to support the professional staff positions mentioned above.

Support for the new positions include:

Travel costs \$50.0 - 8 of the 10 positions will need to travel frequently for Adult Protective Services investigations and care coordination for SDS beneficiaries. Travel will include airfare to rural communities which is expensive.

Contractual services costs \$165.0 - to fund office space, phone, computer support, etc for the newly established positions.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Services Administration (2663)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Commodities \$40.0 - to establish new work stations (\$2.0) and purchase computers (\$2.0) per person.

Equipment \$30.0 - for multi-function printers costing approximately \$15.0 each. One machine can support 5 people, depending on proximity. This equipment line will allow the purchase of 2 machines to support these 10 staff.

Transfer to fund new Medicaid Assessment Positions

LIT	0.0	1,000.0	0.0	-1,000.0	0.0	0.0	0.0	0.0	0.0	10	0	0
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Performance of Medicaid assessments is a federally-mandated, state responsibility, driven by participation in the federal Medicaid program. Senior and Disabilities Services (SDS) currently contracts for these assessments and is in peril of non-conformance with federal participation requirements, because the contractor is behind on completion of assessments. SDS believes that having state employees perform these assessments will help them reduce the back-logged assessments and get services started sooner. SDS data also indicates that when the state completes the assessments, program costs are less once the beneficiary gets signed up to receive services. This also gives the State more ability to control the "uniformity" of the assessment process.

Senior and Disabilities Services has been contracting with a private agency to perform Medicaid assessments of applicants when they apply for Medicaid services. Senior and Disabilities Services would like to reduce this contract and hire 10 FTE's to perform these assessments. This will allow greater oversight and monitoring of the assessment process and allow Senior and Disabilities Services the opportunity to catch up on back-logged assessments.

These positions will be Health Program Manager II's and the duties may require the applicants be registered nurses, licensed to practice in the State of Alaska.

Reverse FY2008 MH Trust Recommendations

OTI	-135.0	-80.0	-18.2	-31.8	-5.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR	-135.0											

MH Trust: Housing - Rural long term care development

Inc	135.0	80.0	18.2	31.8	5.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR	135.0											

Grant 68.05

This project has been a technical assistance resource through DHSS Senior and Disabilities Services for several years. It has been very successful in working with rural communities to analyze long-term care needs and in locating resources to meet those needs. A staff person will continue to provide outreach, education and intensive community based work to assist in meeting the needs of people with Alzheimer's Disease and Related Dementias and other cognitive disability conditions. Activities will include participation in the 'Aging and Disability Resource Center' project and ongoing technical assistance about development and operational issues to ensure successful feasibility analysis of projects and will result in an increase in home- and community-based service delivery capacity in rural Alaska.

ETS Chargeback Redistribution

Atrin	5.7	0.0	0.0	5.7	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund	5.7											

Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Services Administration (2663)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Amounts transferred from state agencies are as follows:
Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).

Amounts transferred to state agencies are as follows:
Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.

Change in Time Status of Position

PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	-1	0
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PCN 06-?161 was originally budgeted as a permanent, part-time position. Due to an increase in the number of programmatic staff that need administrative support, this position needs to be full-time.

Positions Associated with Transfer from Senior and Disabilities Medicaid Services to Support Additional Staff

PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	10	0	0
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Senior and Disabilities Services (SDS) has been steadily adding new staff positions over the last few years in order to more effectively manage programs. In FY07 and FY08, there has been legislative intent language in the budget bills that mandates Senior and Disabilities Services to control program costs and growth. This transfer will provide funding to appropriately staff the program to meet mandates.

This change record adds 10 new positions to the Senior and Disabilities Services budget and funds support costs as follows:

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6 Care Coordinators = Health Program Associates (Salary Range 16) - \$70.0 each

Senior and Disabilities Services have been running a pilot project to take over care coordination as a function performed by state employees. Client response to having State employees acting as care coordinators has been very positive. Currently there are only two (2) care coordinators on staff. Senior and Disabilities Services has been legislatively mandated to eliminate the Developmental Disabilities Waitlist. This will potentially bring 800-1000 new clients into the Medicaid program. New care coordinator positions will be needed to provide care coordination services to these clients. Senior and Disabilities Services would like to respond to the positive public response to having State care coordinators by making more of them available so people can make the choice of who provides care coordination for their loved ones.

2 Admin Clerk III's (Salary Range 10) - \$50.0 each

These new clerical positions are needed to support the professional staff positions mentioned above.

Support for the new positions include:

Travel costs \$50.0 - 8 of the 10 positions will need to travel frequently for Adult Protective Services investigations and care coordination for SDS beneficiaries. Travel will include airfare to rural communities which is expensive.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Services Administration (2663)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Contractual services costs \$165.0 - to fund office space, phone, computer support, etc for the newly established positions.

Commodities \$40.0 - to establish new work stations (\$2.0) and purchase computers (\$2.0) per person.

Equipment \$30.0 - for multi-function printers costing approximately \$15.0 each. One machine can support 5 people, depending on proximity. This equipment line will allow the purchase of 2 machines to support these 10 staff.

FY 09 Health Insurance Increases for Exempt Employees

SalAdj	0.4	0.4		0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	0.1											
1037 GF/MH	0.3											

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.4

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	351.3	351.3		0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	176.1											
1003 G/F Match	70.4											
1004 Gen Fund	9.9											
1037 GF/MH	90.0											
1092 MHTAAR	4.9											

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$351.3

Subtotal	12,211.3	9,407.1		304.5	2,012.6	301.3	55.8	130.0	0.0	119	1	3
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj	204.8	204.8		0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	110.5											
1003 G/F Match	38.1											
1037 GF/MH	56.2											

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component
: \$204.8

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior and Disabilities Services Administration (2663)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	12,416.1	9,611.9	304.5	2,012.6	301.3	55.8	130.0	0.0	119	1	3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: General Relief/Temporary Assisted Living (2875)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Subtotal		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer Authorization to General Relief / Temporary Assisted Living												
	Trin	3,488.7	0.0	0.0	0.0	0.0	0.0	3,488.7	0.0	0	0	0
1004 Gen Fund		2,748.4										
1037 GF/MH		740.3										
This change record transfers authorization from the Protection and Community Services Component to a newly created component called General Relief/Temporary Assisted Living. The Protection and Community Services Component was originally created when the Division of Senior Services and the Department of Health and Social Services/Developmental Disabilities program merged to become the Division of Senior and Disabilities Services (SDS). As SDS evolved, all of the "administrative funding" and positions that were allocated to this component were transferred to the main administrative component for SDS called Senior and Disabilities Services Administration. At this point in time, the only funding left in the Protection and Community Services component funds the General Relief / Temporary Assisted Living program. SDS would like to transfer this funding to a new component with this name to better identify what these funds are used for.												
Subtotal		3,488.7	0.0	0.0	0.0	0.0	0.0	3,488.7	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		3,488.7	0.0	0.0	0.0	0.0	0.0	3,488.7	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Protection and Community Services (2673)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	3,488.7	0.0	0.0	0.0	0.0	0.0	3,488.7	0.0	0	0	0
1004 Gen Fund		2,748.4										
1037 GF/MH		740.3										
	Subtotal	3,488.7	0.0	0.0	0.0	0.0	0.0	3,488.7	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	3,488.7	0.0	0.0	0.0	0.0	0.0	3,488.7	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer Authorization to General Relief / Temporary Assisted Living												
	Trout	-3,488.7	0.0	0.0	0.0	0.0	0.0	-3,488.7	0.0	0	0	0
1004 Gen Fund		-2,748.4										
1037 GF/MH		-740.3										
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior Community Based Grants (2787)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	11,210.6	0.0	0.0	167.5	0.0	0.0	11,043.1	0.0	0	0	0
1002 Fed Rcpts		6,043.4										
1003 G/F Match		644.4										
1004 Gen Fund		1,578.4										
1037 GF/MH		2,559.1										
1092 MHTAAR		385.3										
	Subtotal	11,210.6	0.0	0.0	167.5	0.0	0.0	11,043.1	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	11,210.6	0.0	0.0	167.5	0.0	0.0	11,043.1	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Funding for Aging and Disability Resource Centers												
	Inc	250.0	0.0	0.0	0.0	0.0	0.0	250.0	0.0	0	0	0
1037 GF/MH		125.0										
1092 MHTAAR		125.0										
<p>Aging and Disability Resource Center's (ADRC's) will work with local senior and disability providers to create and maintain a comprehensive list of services (with eligibility requirements) available in that region and will distribute that information to all providers. Professional ADRC staff in each region will work with the state to develop and implement a general intake process and screening tool that will streamline access to appropriate and available assistance and will refer the individual to the next step of assessment and eligibility determination when appropriate. The Aging and Disability Resource Centers will be developed using the No-Wrong-Door concept in which consumers will be able to enter the system through multiple access points.</p> <p>The Aging and Disability Resource Center concept was developed and implemented through a joint venture between the federal Centers for Medicare and Medicaid Services and the Administration on Aging in order to streamline access to long term care. The State of Alaska implemented this model in 2004 through its Independent Living Centers and has made a commitment in the 2007-2011 State Plan on Aging to continue and expand this concept. Current funding for this program ends June 30, 2008.</p> <p>Funding for this project will be granted to private agencies that will establish and administer the ADRC's.</p>												
Reverse FY2008 MH Trust Recommendations												
	OTI	-385.3	0.0	0.0	-103.6	0.0	0.0	-281.7	0.0	0	0	0
1092 MHTAAR		-385.3										
<p>This base adjustments results in elimination of trust funding support of (\$125.0) for Geriatric Education and Training Project.</p>												
MH Trust: AB-ACoA - Primary Care Clinics												
	Inc	350.0	0.0	0.0	0.0	0.0	0.0	350.0	0.0	0	0	0
1037 GF/MH		350.0										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior Community Based Grants (2787)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Grant 1448 This project will provide funding to Alaska's Community Health Centers (CHCs) to augment the low rates of Medicare reimbursement for services and to provide access to care for Alaska's seniors. The funding will help alleviate the strain on the CHCs resulting from their providing a medical home to many seniors statewide who have been refused care by physicians in private practice due to low Medicare reimbursement rates. These individuals can be served at the CHCs in their area. Alaska is one of 36 states that do not currently provide direct funding for Community Health Centers. During the current primary care crisis for seniors who have Medicare as their primary insurer, a growing number are being refused care by physicians due to Medicare's low reimbursement rate. CHCs may be the only providers willing to see Medicare patients in some parts of the state. In 2005, the CHCs served 5,468 Alaskans age 65 and over - more than 13 percent of Alaskans in that age group enrolled in Medicare (and also a 12 percent increase over 2004). The Senior and Disabilities Services grants section will determine an allocation formula to distribute funds to Community Health Centers according to population.												
MH Trust: Benef Projects - Mini grants for ADRD beneficiaries												
	Inc	260.3	0.0	0.0	0.0	0.0	0.0	260.3	0.0	0	0	0
1092 MHTAAR		260.3										
Grant 74.04 The mini-grants for Alzheimer's Disease and Related Dementia (ADRD) beneficiaries program has been funded by the Alaska Mental Health Trust since FY99 and is administered through the DHSS Senior and Disabilities Services grantee, Alzheimer's Association of Alaska. Mini-grants provide Trust beneficiaries with a broad range of equipment and services that are essential to directly improving quality of life and increasing independent functioning. These can include, but should not be limited to, therapeutic devices, access to medical, vision, dental, special health-care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and become as self-sufficient as possible. Assistance with basic living needs not covered by current grants, such as transportation and clothing will also be considered. These services help Trust beneficiaries attain and maintain healthy and productive lifestyles. These items support beneficiaries to achieve and maintain a reasonable quality of life and are key supports to maintaining families' self-sufficiency and ability to care for a family member.												
Transfer authorization to use for direct services												
	LIT	0.0	0.0	0.0	-33.9	0.0	0.0	33.9	0.0	0	0	0
This authorization needs to be transferred to the grants line where it can be used for direct services.												
	Subtotal	11,685.6	0.0	0.0	30.0	0.0	0.0	11,655.6	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	11,685.6	0.0	0.0	30.0	0.0	0.0	11,655.6	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Senior Residential Services (2678)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		815.0	0.0	0.0	0.0	0.0	0.0	815.0	0.0	0	0	0
1004 Gen Fund		815.0										
	Subtotal	815.0	0.0	0.0	0.0	0.0	0.0	815.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	815.0	0.0	0.0	0.0	0.0	0.0	815.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	815.0	0.0	0.0	0.0	0.0	0.0	815.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	815.0	0.0	0.0	0.0	0.0	0.0	815.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Developmental Disabilities Grants (309)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	8,562.2	0.0	0.0	0.0	0.0	0.0	8,562.2	0.0	0	0	0
1007 I/A Rcpts		637.4										
1037 GF/MH		7,697.3										
1092 MHTAAR		227.5										
	Subtotal	8,562.2	0.0	0.0	0.0	0.0	0.0	8,562.2	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	8,562.2	0.0	0.0	0.0	0.0	0.0	8,562.2	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Discontinue Private ProShare Refinancing												
	Inc	4,815.7	0.0	0.0	0.0	0.0	0.0	4,815.7	0.0	0	0	0
1004 Gen Fund		4,815.7										

This increment replaces federal funding with general funds due to the discontinuation of the Private ProShare Medicaid program by the federal Medicaid agency.

The department has made payments to hospitals and community health care providers for several years under the ProShare program as an important part of the department's strategy to provide access to quality health care services. ProShare funds have supported rural health care, mental health care, and children's health care programs that benefit many Alaskans. Without ProShare the same services would have to be funded through grant programs that are funded entirely with general funds.

ProShare came about in SFY 2004 when the Division of Medical Assistance (now Health Care Services) proposed an innovative strategy to optimize Medicaid funding through the Private Hospital Proportionate Share Program. ProShare made payments for certain medical assistance services to qualified private hospitals. The hospital in turn granted funds to qualified community service providers to secure services in rural, remote areas. ProShare funds also were used to refinance medical care for children in juvenile justice facilities. Health Care Services paid the hospitals the ProShare payments and the divisions that would otherwise have issued general fund grants for these services provided Health Care Services with the matching GF through reimbursable services agreements. The general funds saved through refinancing these grants/services were removed from the divisions' budgets and replaced with federal funds in Health Care Services' budget. The Legislature supported this cost containment effort and about \$16 million in general funds was replaced with federal funds in that first year. Since 2004, the state has saved approximately \$36 million in GF through ProShare refinancing.

In 2006 the Centers for Medicare & Medicaid Services (CMS) decided that Alaska's ProShare program was not allowed under federal law and denied reimbursement for these payments. The department appealed this decision, and with the agreement of the Legislature, decided to continue the program until the case was resolved. CMS again disallowed the ProShare claim for 2007. On July 31, 2007 the department learned that it had lost its appeal with the U.S. Department of Health and Human Services Department Appeals Board.

The department is committed to continue funding these services at the current level to support its mission to provide health care for Alaskans in need. In order to maintain current service levels, the department is requesting additional GF in the divisions that refinanced grants/services to replace this lost federal money.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Developmental Disabilities Grants (309)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Performance Measures Affected:												
Dept-Core Services--Manage health care coverage for Alaskans in need												
Dept-Core Services--Protect and promote the health of Alaskans												
Dept-Core Services--Promote independence of Alaska senior and people with physical or developmental disabilities												
Dept-D-4--Provide quality management of health care coverage services providers and clients												
HCS-A--Mitigate service reductions by replacing general funds with alternate funds												
HCS-B--Provide affordable access to quality health care services to eligible Alaskans												
DPH-A--Healthy people in healthy communities												
DPH-A-A4--Assure access to early preventative services and quality health care												
SDS-A--Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services												
Transfer in General Funds from Medicaid Services due to Elimination of Proshare Financing												
	Trin	1,148.1	0.0	0.0	0.0	0.0	0.0	1,148.1	0.0	0	0	0
1004 Gen Fund		1,148.1										
In SFY 08 a GF increment of \$4,044.0 was authorized to replace a federal funding reduction in the Medicaid ProShare program. The ProShare program allows the state to make payments to qualifying hospitals for the difference between Medicare and Medicaid rates. This difference is called the Upper Payment Limit or UPL. That entire increment was placed in Health Care Services / Medicaid Services; however, these services are provided by other divisions. Senior and Disabilities Services/Community Developmental Grants used the ProShare program to provide services which include but are not limited to: Care Coordination, Chore Services, Day Habilitation, Independent Living Support, Behavioral Training, Intensive Active Treatment, Residential Services, Respite Care, Specialized Adaptive Equipment and Vocational Services. This transfer is necessary to give the division the funding needed to continue these services.												
Reverse FY2008 MH Trust Recommendation												
	OTI	-227.5	0.0	0.0	0.0	0.0	0.0	-227.5	0.0	0	0	0
1092 MHTAAR		-227.5										
MH Trust: Benef Projects - Mini grants for beneficiaries with disabilities												
	Inc	227.5	0.0	0.0	0.0	0.0	0.0	227.5	0.0	0	0	0
1092 MHTAAR		227.5										
Grant 124.04												
The mini-grants for beneficiaries with disabilities program has been funded by the Alaska Mental Health Trust since FY99 and is administered through Senior and Disabilities Services grantees under the Short Term Assistance and Referral Project. Mini-grants provide Trust beneficiaries with a broad range of equipment and services that are essential to directly improving quality of life and increasing independent functioning. These can include, but should not be limited to, therapeutic devices, access to medical, vision, dental, special health-care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and become as self-sufficient as possible.												
	Subtotal	14,526.0	0.0	0.0	0.0	0.0	0.0	14,526.0	0.0	0	0	0

***** Changes From FY2009 Governor To FY2009 Governor Amended *****

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Community Developmental Disabilities Grants (309)
RDU: Senior and Disabilities Services (487)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	14,526.0	0.0	0.0	0.0	0.0	0.0	14,526.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Commissioner's Office (317)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	980.5	893.9	24.3	53.9	8.4	0.0	0.0	0.0	7	0	1
1002 Fed Rcpts		371.5										
1003 G/F Match		130.5										
1004 Gen Fund		82.8										
1007 I/A Rcpts		389.4										
1061 CIP Rcpts		6.3										
ADN 06-7-0446 Ch. 10, SLA 2007 (SB 61) Legislative Medicaid Review Report Implementation												
	ReAprop	2,315.0	0.0	0.0	963.0	0.0	0.0	1,352.0	0.0	0	0	0
1002 Fed Rcpts		1,182.5										
1004 Gen Fund		1,132.5										
Legislative Medicaid Report Implementation, ADN 06-7-0446 Ch. 10, SLA 2007 (SB61); Effective 2007/Term 2009												
Subtotal		3,295.5	893.9	24.3	1,016.9	8.4	0.0	1,352.0	0.0	7	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Transfer Deputy Commissioner Position from Children's Services Management												
	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
PCN 06-3001 transfer in Deputy Commissioner position from the Children's Services Management component to the Commissioner's Office. The new Deputy Commissioner will oversee the Health Care Services and MMIS functions of the department. The funds for FY08 will come from an unbudgeted RSA and will be transferred in FY09. The Office of Children's Services now has a Division Director.												
ADN 0680016 Transfer Chief Medical Officer from Public Health Administration												
	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
PCN 06-1868 The Chief Medical Officer is being transferred from Public Health Administration component. The incumbent is a federal employee on Interagency Personnel Agreement (IPA). This record shows his actual contractual amount, \$254.0. He does not draw retirement or receive health benefits from the State of Alaska. Funds will be RSA'ed to the Commissioner's Office in FY08 to fund the salary.												
Subtotal		3,295.5	893.9	24.3	1,016.9	8.4	0.0	1,352.0	0.0	9	0	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Increase Interagency funds for 3 positions												
	Inc	456.5	456.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		456.5										

This is to increase interagency receipts for PCN's 06-1868, 06-3001 and 06-2002. These positions were transferred into this component without funds in FY08 as part of the DHSS realignment. Interagency funds for these positions will come from Health Care Services, Public Health and the department's divisions.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Commissioner's Office (317)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Transfer in Positions and Funding from Office of Program Review for Realignment to Commissioner's Office												
	Trin	550.5	363.5	53.4	129.0	3.8	0.8	0.0	0.0	4	0	0
1002 Fed Rcpts		181.2										
1003 G/F Match		64.7										
1004 Gen Fund		199.6										
1037 GF/MH		105.0										

This is to transfer PCNs 06-0271, 06-0492, 06-0633, and 06-0644 from Office of Program Review to the Office of the Commissioner. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions within the component.

Transfer out PCN 06-0400 to Public Affairs

	Trout	-135.5	-135.5	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
1002 Fed Rcpts		-135.5										

This is to transfer PCN 06-0400 from the Office of the Commissioner to the Public Affairs component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development within the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.

Transfer In PCN 06-2002 from Behavioral Health Administration

	Trin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
Transfer PCN 06-2002 to Commissioner's Office from Behavioral Health Administration.												

Comprehensive Rate Increase Across All Programs

	Inc	49,852.0	0.0	0.0	0.0	0.0	0.0	49,852.0	0.0	0	0	0
1002 Fed Rcpts		25,434.5										
1003 G/F Match		24,417.5										

The Department of Health and Social Servies has contracted with Meyers and Stauffer to review rates for various programs including several components of the Medicaid program. Results of the rate study will provide department decision makers data on a variety of subjects including:

1. How long has it been since a particular rate has been adjusted?
2. What is a reasonable rate?
3. How will the department best equalize rates across all programs?

Programs identified for possible inclusion in a rate adjustment are:

Medicaid Facility Rates - Inpatient Pysch Hospitals
 Increase Outpatient Behavioral Health Rates
 Increase Child Care Program Rates
 Foster Care Base Rate Increase
 Therapeutic Foster Care
 Medicaid Facility Rates - Hospitals
 Increase Rates for Emergency Transportation
 Change Primary Dispensing Rate

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Commissioner's Office (317)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Increase Medicaid Indian Health Service Dental Services Rates Increase Dental Rates to non-IHS Providers Medicaid Facility Rates - Nursing Homes Assisted Living Home Rate Increases Home & Community Based Waiver Rate Increases PCA Rate Increases												
Fed % = 51.02% SFY09 avg. FMAP												
Back out FY08 funding for Legislative Medicaid Review Report Implementation												
	OTI	-2,315.0	0.0	0.0	-963.0	0.0	0.0	-1,352.0	0.0	0	0	0
1002 Fed Rcpts		-1,182.5										
1004 Gen Fund		-1,132.5										
Legislative Medicaid Report Implementation, ADN 0670446 Ch. 10, SLA 2007 (SB61); Effective 2007/Term 2009												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	1.1	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.4										
1003 G/F Match		0.1										
1007 I/A Rcpts		0.6										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$1.1												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	3.4	3.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		2.6										
1007 I/A Rcpts		0.7										
1061 CIP Rcpts		0.1										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$3.4												
	Subtotal	51,708.5	1,582.9	77.7	182.9	12.2	0.8	49,852.0	0.0	13	0	1
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
AMD: Comprehensive Rate Increase Across All Programs - Delete Placeholder												
	Dec	-49,852.0	0.0	0.0	0.0	0.0	0.0	-49,852.0	0.0	0	0	0
1002 Fed Rcpts		-25,434.5										
1003 G/F Match		-24,417.5										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Commissioner's Office (317)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions			
										PFT	PPT	NP	
The department has refined the Comprehensive Rate Package and each proposal is listed in the individual components in the Governor's Amended Scenario. This change record reverses the placeholder that was included in the FY2009 Governor's budget.													
Totals		1,856.5	1,582.9	77.7	182.9	12.2	0.8	0.0	0.0	13	0	1	

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Affairs (2874)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Subtotal		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in Positions and Funding from Information Technology												
Trin		1,776.2	1,562.2	65.0	104.0	40.0	5.0	0.0	0.0	18	0	0
1002 Fed Rcpts		888.1										
1004 Gen Fund		888.1										
The Public Affairs Unit has been functioning as a team since the department organized IT functions in FY2005, consolidating department communication functions to achieve consistency in communication efforts and to better serve the department in a unit that serves all programs. The Public Affairs Unit includes the functions of public information, publications and web-based communication, legislative management and regulatory development.												
The Public Affairs Unit ensures consistency and continuity in communication with stakeholders, helps promote health communications, ensures transparency to the public regarding department activities, as well as ensures responsiveness to media, legislative and constituent inquiries. This group has set the standard for state government communications.												
Public Information Team members help programs communicate to external and internal stakeholders about department issues, activities, decisions, services, and health promotion efforts. Legislative management staff coordinate and facilitate legislative activities, and regulatory staff ensure coordinated development of regulations needed to carry out the department's mission.												
Transfer in PCN 06-5136 and Funding from Office of Program Review												
Trin		108.0	108.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1002 Fed Rcpts		5.0										
1003 G/F Match		39.8										
1004 Gen Fund		5.0										
1007 I/A Rcpts		58.2										
This is to transfer PCN 06-5136 from the Office of Program Review to the Public Affairs component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development within the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.												
Transfer in PCNs 06-X101 and 06-0500 from Administrative Support Services												
Trin		263.5	229.2	10.0	20.0	4.3	0.0	0.0	0.0	2	0	0
1007 I/A Rcpts		263.5										
This is to transfer in PCN's 06-X101 and 06-0500 to the Public Affairs component from Administrative Support Services. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development within the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.												
Transfer in PCN 06-0400 from Commissioner's Office												
Trin		135.5	135.5	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1002 Fed Rcpts		135.5										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Public Affairs (2874)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
This is to transfer PCN 06-0400 from the Office of the Commissioner to the Public Affairs component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development within the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.												
Position Adjustment for Public Affairs												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
This position adjustment adds the new position 06-#386, Data Processing Manager I. This position is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development within the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.												
Subtotal		2,283.2	2,034.9	75.0	124.0	44.3	5.0	0.0	0.0	23	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
SalAdj		31.5	31.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		19.6										
1003 G/F Match		2.9										
1004 Gen Fund		5.2										
1007 I/A Rcpts		3.8										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$31.5												
Totals		2,314.7	2,066.4	75.0	124.0	44.3	5.0	0.0	0.0	23	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Office of Program Review (2664)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,536.3	1,768.9	183.4	468.1	24.1	91.8	0.0	0.0	19	0	1
1002 Fed Rcpts		1,126.8										
1003 G/F Match		1,048.4										
1004 Gen Fund		204.6										
1007 I/A Rcpts		58.1										
1037 GF/MH		98.4										
Subtotal		2,536.3	1,768.9	183.4	468.1	24.1	91.8	0.0	0.0	19	0	1
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Transfer PCN 06-4100 to Public Assistance Quality Control												
	Trout	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0
PCN 06-4100 Investigator II position is being transferred to Public Assistance, Quality Control component.												
Subtotal		2,536.3	1,768.9	183.4	468.1	24.1	91.8	0.0	0.0	18	0	1
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer out Positions and Funding to Medical Assistance Administration												
	Trout	-768.8	-668.5	-30.0	-60.0	-10.3	0.0	0.0	0.0	-5	0	-1
1002 Fed Rcpts		-384.4										
1003 G/F Match		-384.4										
This transfers PCN's and funding for 06-0605; 06-0606; 06-0615; 06-4041; 06-4077; and 06-N036 to Health Care Services. This transfer is part of the realignment plan for the Department of Health and Social Services (DHSS) which coordinates the functions of Office of Program Review with the Medicaid and Health Care Policy Component. The Medicaid and Health Care Policy component includes Medicaid health care policy and operations within DHSS, which encompasses Medicaid policy and financing, Health Care Services, tribal health agreements, rate review; and design, development, and implementation of the new Medicaid Management Information System (MMIS).												
Transfer out Positions and Funding to Commissioner's Office												
	Trout	-550.5	-363.5	-53.4	-129.0	-3.8	-0.8	0.0	0.0	-4	0	0
1002 Fed Rcpts		-181.2										
1003 G/F Match		-64.7										
1004 Gen Fund		-199.6										
1037 GF/MH		-105.0										
This is to transfer PCNs 06-0271, 06-0492, 06-0633, and 06-0644 from Office of Program Review to the Office of the Commissioner. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions with the component.												
Transfer out PCN 06-5136 and Funding to Public Affairs												
	Trout	-108.0	-108.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Office of Program Review (2664)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
1002 Fed Rcpts		-5.0										
1003 G/F Match		-39.8										
1004 Gen Fund		-5.0										
1007 I/A Rcpts		-58.2										

This is to transfer PCN 06-5136 from the Office of Program Review to the Public Affairs component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development with the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.

Transfer out Positions and Funding to Quality Assurance and Audit

Trout	-1,087.7	-685.7	-70.0	-231.0	-10.0	-91.0	0.0	0.0	-8	0	0
1002 Fed Rcpts	-542.8										
1003 G/F Match	-544.9										

This is to transfer PCNs 06-1050, 06-4094, 06-4095, 06-4096, 06-4097, 06-4098, 06-4099, and 06-X107 from Office of Program Review to the Quality Assurance and Audit component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of program integrity and audit into the Quality Assurance and Audit component. The Quality Assurance and Audit unit will improve coordination and reporting of department-wide efforts related to program integrity and quality assurance and provide quality auditing, review, and program analysis services that support the department's programs.

Transfer Funds to Quality Control for PCN 06-4100

Trout	-78.1	0.0	-30.0	-48.1	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-39.1										
1003 G/F Match	-39.0										

This transfers funds for PCN 06-4100 moved in FY08 Management Plan from OPR PERM to Public Assistance Quality Control for PERM.

FY 09 Health Insurance Increases for Exempt Employees

SalAdj	1.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	0.5										
1003 G/F Match	0.4										
1007 I/A Rcpts	0.1										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$1.0

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj	55.8	55.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	25.2										
1003 G/F Match	24.0										
1037 GF/MH	6.6										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Office of Program Review (2664)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
: \$55.8												
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Quality Assurance and Audit (2880)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
Subtotal		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in Positions and Funding from Office of Program Review												
	Trin	1,087.7	685.7	70.0	231.0	10.0	91.0	0.0	0.0	8	0	0
1002 Fed Rcpts		542.8										
1003 G/F Match		544.9										
<p>This is to transfer in PCNs 06-1050, 06-4094, 06-4095, 06-4096, 06-4097, 06-4098, 06-4099, and 06-X107 from Office of Program Review to the Quality Assurance and Audit component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of program integrity and audit into the Quality Assurance and Audit component. The Quality Assurance and Audit unit will improve coordination and reporting of department wide efforts related to program integrity and quality assurance and provide quality auditing, review, and program analysis services that support the department's programs.</p>												
Subtotal		1,087.7	685.7	70.0	231.0	10.0	91.0	0.0	0.0	8	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Position Exchange from HCS MAA to FMS Q&A Audit												
	Trin	314.8	273.8	0.0	41.0	0.0	0.0	0.0	0.0	3	0	0
1002 Fed Rcpts		157.4										
1003 G/F Match		157.4										
<p>This is to transfer PCNs 06-0456, 06-7000, and 06-7010 from Medical Assistance Administration component to the Quality Assurance and Audit component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of program integrity and audit into the Quality Assurance and Audit component. The Quality Assurance and Audit unit will improve coordination and reporting of department wide efforts related to program integrity and quality assurance and provide quality auditing, review, and program analysis services that support the department's programs. The realignment of these positions will separate out the technical assistance from the audit component.</p>												
Position Exchange from FMS Q&A Audit to HCS MAA												
	Trout	-289.1	-251.4	0.0	-37.7	0.0	0.0	0.0	0.0	-3	0	0
1002 Fed Rcpts		-144.6										
1003 G/F Match		-144.5										
<p>This is to transfer PCNs 06-4094, 06-4096, and 06-4098 from Office of Quality Assurance and Audit component to the Medical Assistance Administration component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates and realigns the functions across program integrity. The realignment of these positions will separate out the technical assistance from the audit component.</p>												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	16.6	16.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		8.3										
1003 G/F Match		8.3										

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Quality Assurance and Audit (2880)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$16.6												
Totals		1,130.0	724.7	70.0	234.3	10.0	91.0	0.0	0.0	8	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Rate Review (2696)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,414.1	1,133.5	55.1	210.9	9.2	5.4	0.0	0.0	11	0	0
1002 Fed Rcpts		743.8										
1003 G/F Match		514.3										
1004 Gen Fund		156.0										
	Subtotal	1,414.1	1,133.5	55.1	210.9	9.2	5.4	0.0	0.0	11	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Three New Positions for Legislative Medicaid Program Review Recommendations												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3	0	0
This is to create three new positions for Legislative Medicaid Program Review Recommendations implementation.												
06-#167 Internal Auditor IV 06-#168 Internal Auditor III 06-#169 Internal Auditor III												
Totals		1,414.1	1,133.5	55.1	210.9	9.2	5.4	0.0	0.0	14	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Office of Faith Based & Community Initiatives (2849)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,212.1	277.5	39.0	158.0	34.6	3.0	700.0	0.0	6	0	0
1002 Fed Rcpts		500.0										
1003 G/F Match		212.1										
1004 Gen Fund		500.0										
ADN 06-8-0004 Tuition for Certain Children CH 58 SLA07 (SB76) CH 28 SLA07 (HB95) Sec2 P45 L17-19												
	FisNot	41.4	21.4	0.0	20.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		41.4										
Establishes a higher education savings program for eligible children who were placed in out-of-home care by the state.												
	Subtotal	1,253.5	298.9	39.0	178.0	34.6	3.0	700.0	0.0	6	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Line Item Transfer to Cover Personal Services												
	LIT	0.0	28.7	0.0	-28.7	0.0	0.0	0.0	0.0	0	0	0
This transfer from contractual to personal services will cover the costs of positions.												
Correct Position Count												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-2	0	0
The Conference Committee position count was overstated.												
	Subtotal	1,253.5	327.6	39.0	149.3	34.6	3.0	700.0	0.0	4	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.6	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.4										
1004 Gen Fund		0.2										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.6												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	5.2	5.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		2.6										
1004 Gen Fund		2.6										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Office of Faith Based & Community Initiatives (2849)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
: \$5.2												
	Subtotal	1,259.3	333.4	39.0	149.3	34.6	3.0	700.0	0.0	4	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	1,259.3	333.4	39.0	149.3	34.6	3.0	700.0	0.0	4	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Health Strategies Planning Council (2878)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Review/Implement Health Care Strategies Council recommendations												
	Inc	200.0	0.0	0.0	200.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		100.0										
1003 G/F Match		100.0										
In Administrative Order Number 232, Governor Palin established the Alaska Health Plan Strategies Council. The Council is comprised of 14 voting members, 2 ex-officio and 1 chair. The Council has had four meetings thus far and is expected to make recommendations that would be available on January 15, 2008.												
This change record is a placeholder in the FY09 budget to implement recommendations made by the council.												
	Subtotal	200.0	0.0	0.0	200.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	200.0	0.0	0.0	200.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Assessment and Planning (2767)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		125.0										
1003 G/F Match		125.0										
	Subtotal	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Administrative Support Services (320)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	14,688.7	11,867.7	31.9	2,696.1	52.0	41.0	0.0	0.0	165	0	0
1002 Fed Rcpts		6,642.8										
1003 G/F Match		1,744.8										
1004 Gen Fund		4,051.9										
1007 I/A Rcpts		1,585.6										
1037 GF/MH		393.1										
1061 CIP Rcpts		54.5										
1108 Stat Desig		163.4										
1156 Rcpt Svcs		52.6										
FY 08 Bargaining Unit Contract Terms: Confidential Unit												
	SalAdj	5.4	5.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		1.4										
1004 Gen Fund		0.5										
1007 I/A Rcpts		2.1										
1037 GF/MH		0.8										
1108 Stat Desig		0.6										
Costs associated with the bargaining unit contract terms applicable to this component.: \$5.4												
ETS Chargeback Transfer from Department of Administration												
	Atrin	37.0	0.0	0.0	37.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		37.0										
Pursuant to Section 12(b) and (c), Chapter 28, SLA 2007, page 67, lines 16 - 21, \$1,267,600 is distributed to state agencies to offset a portion of the increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Commerce, \$52.3; Corrections, \$103.3; DEC, \$73.1; Fish and Game, \$124.9; Office of the Governor, \$40.5; HSS, \$308.0; Law, \$78.8; DMVA, \$21.9; DNR, \$108.8; Public Safety, \$121.8; Transportation, \$190.1; and Legislature, \$44.1.												
	Subtotal	14,731.1	11,873.1	31.9	2,733.1	52.0	41.0	0.0	0.0	165	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Transfer from Information Technology Services												
	Trin	446.4	446.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		446.4										

This is to transfer funds to Administrative Support Services component to cover expenses paid from that component.

ADN 0680016 Line Item Transfer to Cover PS

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Administrative Support Services (320)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
	LIT	0.0	143.5	0.0	-143.5	0.0	0.0	0.0	0.0	0	0	0
This is a line item transfer to cover the cost of personal services.												
ADN 0680016 Position Adjustments Administrative Support												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	9	0	4
This adjusts for the positions that were created in FY07.												
<p>06-#255- Project Asst.- This is for Office of Children's Services (OCS), Finance and Management Services (FMS) Quality Assurance Unit for Provider payments. This will be paid for an RSA in FY08 and the funds transferred in FY09. This is position New40335 and was created in June 2007.</p> <p>06-#256- Eligibility Technician II- New position number 38450 was created in June 2007. This is for Office of Children's Services (OCS) FMS Quality Assurance Unit for Provider payments. This will be paid for by an RSA in FY08 and the funds transferred in FY09.</p> <p>06-#257- Eligibility Technician II- New position number 40928 was created in June 2007. This is for OCS FMS Quality Assurance Unit for Provider payments. This will be paid for an RSA in FY08 and the funds transferred in FY09.</p> <p>06-#269- College Intern III- This College Intern position was created in FY07 to help work in the Division Support Unit. This position trains new college students in government functions.</p> <p>06-#270- Administrative Officer II- (New PCN- 06-N07096) This position was created for a special administrative project to complete and update the department policies and procedures.</p> <p>06-#271- Admin Clerk III- This is position New40295 created for the Division Support Main Unit. This position will help with travel, payroll and other administrative duties.</p> <p>06-#272- Administrative Officer I- This position is created for the FMS Alaska Pioneer Homes Division Support Unit. This position will work in conjunction with the Accountant V in doing administrative work and support the homes. This position is New41757.</p> <p>06-#273- Accounting Tech I- This position (PCN- 06-N07111) was created to help with FMS-DBH-API alleviate positions that are out on emergency leave or have left state service.</p> <p>06-#274- Administrative Officer II- This position is created for the FMS DPH Division Support Unit in Anchorage. This position will support the Division of Public Health's (DPH) Director's Office.</p> <p>06-#275- Procurement Spec V- PCN 06-0649 was created for the Grants and contracts unit. This position supports the contracts and professional services.</p> <p>06-#276- Procurement Spec III- PCN 06-0653 was created for the Grants and contracts unit. This position supports the contracts and professional services.</p> <p>06-#277- Grants Administrative Manager- PCN 06-0655 was created for the Grants and contracts unit. This position supports the grants administration.</p> <p>06-#278- Accounting Tech III- PCN- 06-0650 is for the Revenue Unit. It will maintain structures for the whole department.</p> <p>06-#279- Accountant II- PCN-06-0645 is for the Revenue Unit. It was created to assist with the new revenue system.</p> <p>06-#288- Grant Administrator I- This is PCN 06-0652 in Grants and Contracts Unit and supports grants administration.</p> <p>06-#289- Administrative Officer II- This is PCN 06-N07066 for FMS OCS Division Support. This non-perm was created to support FMS-OCS administrative needs temporarily. Some positions have been out on emergency leave and others are not filled.</p>												
	Subtotal	15,177.5	12,463.0	31.9	2,589.6	52.0	41.0	0.0	0.0	174	0	4

***** Changes From FY2008 Management Plan To FY2009 Governor *****

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Administrative Support Services (320)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Transfer out PCNs 06-X101 and 06-0500 to Public Affairs												
	Trout	-263.5	-229.2	-10.0	-20.0	-4.3	0.0	0.0	0.0	-2	0	0
1007 I/A Rcpts		-263.5										
This is to transfer out PCNs 06-X101 and 06-0500 to the Public Affairs component. This transfer is part of the realignment plan for the Department of Health and Social Services which coordinates the functions of regulation development with the Public Affairs component. The Public Affairs component includes combining the functions of department communications, legislative relations, and oversight and development of department regulations.												
ETS Chargeback Redistribution												
	Atrin	22.9	0.0	0.0	22.9	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		22.9										
Funds previously distributed to state agencies to offset increased chargeback rates for enterprise technology services as identified in the statewide federal cost allocation plan are redistributed to more closely align with costs.												
Amounts transferred from state agencies are as follows: Administration, (\$406.2); Labor, (\$216.5); and Revenue (\$161.3).												
Amounts transferred to state agencies are as follows: Commerce, \$32.3; Corrections, \$63.9; DEC, \$45.2; Fish and Game, \$77.2; Office of the Governor, \$25.0; HSS, \$190.5; Law, \$48.7; DMVA, \$13.6; DNR, \$67.3; Public Safety, \$75.4; Transportation, \$117.6; and Legislature, \$27.3.												
Correct Unrealizable Fund Sources for Salary Adjustments: GGU												
	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-112.0										
1004 Gen Fund		112.0										
Increment for Interagency Receipts from Public Health												
	Inc	79.7	79.7	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1007 I/A Rcpts		79.7										
This increment funds one new position for the Division Support Unit - Division of Public Health. Current levels of accounting support need to be increased by one full-time position. Increasing the RSA will provide one Accountant III position (PCN 06-#423) dedicated to the revenue and expenditure tracking for C&L, as well as preparation of the required Centers for Medicaid and Medicare reports.												
Transfer In Statutory Designated Program Receipts from Alaska Psychiatric Institute												
	Trin	70.6	70.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1108 Stat Desig		70.6										

This is a transfer of Statutory Designated Program Receipts (SDPR) funds for a new position with the Finance and Management Support Section (FMS) to support the business office of the Alaska Psychiatric Institute (API).

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Administrative Support Services (320)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Line Item Transfer to Cover Personal Services												
LIT		0.0	264.3	0.0	-264.3	0.0	0.0	0.0	0.0	0	0	0
This line item transfer is to cover increased costs in personal services. The reduction of the services line will result in not being able to do full contracts for continuation of some projects. They will rather be done in phases.												
Correct Position Types for Administrative Support Services												
PosAdj		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3	0	-1
Full-time PCNs 06-#424 (Accounting Tech III) and 06-#426 (Grants Administrator II) were added. In addition, one non-perm position (06-#425) was added, one non-perm position was moved to full-time (06-0662) and one non-perm (06-?270) was deleted, for a net gain of 3 full-time positions and the net loss of one non-perm.												
Transfer in PCN 06-2335 from Alaska Psychiatric Institute												
Trin		75.7	75.7	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1007 I/A Rcpts		75.7										
This is to transfer PCN 06-2335 from Alaska Psychiatric Institute (API) to Administrative Support Services for the Division Support Services for API. This position was missed in the original transfer.												
Transfer In PCN 06-0507 from Behavioral Health Administration												
Trin		70.1	70.1	0.0	0.0	0.0	0.0	0.0	0.0	1	0	0
1037 GF/MH		70.1										
Transfer PCN 06-0507 from Behavioral Health Administration to Administrative Support Services.												
FY 09 Health Insurance Increases for Exempt Employees												
SalAdj		0.9	0.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.1										
1003 G/F Match		0.1										
1004 Gen Fund		0.2										
1007 I/A Rcpts		0.5										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.9												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
SalAdj		503.6	503.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		223.1										
1003 G/F Match		76.8										
1004 Gen Fund		120.6										
1007 I/A Rcpts		60.3										
1037 GF/MH		11.7										
1061 CIP Rcpts		1.6										
1108 Stat Desig		6.8										
1156 Rcpt Svcs		2.7										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Administrative Support Services (320)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$503.6												
FY 09 Bargaining Unit Contract Terms: Confidential Unit												
	SalAdj	3.1	3.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.5										
1004 Gen Fund		0.3										
1007 I/A Rcpts		1.4										
1037 GF/MH		0.4										
1108 Stat Desig		0.5										
The FY09 health insurance increase of \$17.02 from \$854.00 per month to \$868.02 per month and the FY09 3% wage increase applicable to this component. : \$3.1												
Subtotal		15,740.6	13,301.8	21.9	2,328.2	47.7	41.0	0.0	0.0	178	0	3
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	386.3	386.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		187.8										
1003 G/F Match		48.6										
1004 Gen Fund		103.0										
1007 I/A Rcpts		24.7										
1037 GF/MH		18.3										
1061 CIP Rcpts		1.6										
1108 Stat Desig		2.3										
This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$386.3												
Totals		16,126.9	13,688.1	21.9	2,328.2	47.7	41.0	0.0	0.0	178	0	3

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Hearings and Appeals (1434)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	777.0	492.2	10.7	264.7	9.4	0.0	0.0	0.0	4	1	0
1002 Fed Rcpts		174.7										
1003 G/F Match		561.8										
1004 Gen Fund		40.5										
Subtotal		777.0	492.2	10.7	264.7	9.4	0.0	0.0	0.0	4	1	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		777.0	492.2	10.7	264.7	9.4	0.0	0.0	0.0	4	1	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1003 G/F Match		0.1										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.1												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	27.0	27.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		9.0										
1003 G/F Match		18.0										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$27.0												
Subtotal		804.1	519.3	10.7	264.7	9.4	0.0	0.0	0.0	4	1	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		804.1	519.3	10.7	264.7	9.4	0.0	0.0	0.0	4	1	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Medicaid School Based Admin Claims (2748)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		6,243.8	0.0	0.0	6,243.8	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		6,243.8										
Subtotal		6,243.8	0.0	0.0	6,243.8	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		6,243.8	0.0	0.0	6,243.8	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		6,243.8	0.0	0.0	6,243.8	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		6,243.8	0.0	0.0	6,243.8	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Facilities Management (2020)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	1,008.7	859.5	35.2	69.6	14.3	30.1	0.0	0.0	10	0	0
1002 Fed Rcpts		117.3										
1007 I/A Rcpts		13.5										
1061 CIP Rcpts		877.9										
Subtotal		1,008.7	859.5	35.2	69.6	14.3	30.1	0.0	0.0	10	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		1,008.7	859.5	35.2	69.6	14.3	30.1	0.0	0.0	10	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer in Interagency Receipt Authority from Facilities Maintenance												
	Trin	130.0	0.0	25.0	100.2	4.8	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		130.0										
This is to transfer interagency receipts for the department's safety officer position. The position is currently funded with an unbudgeted RSA and is paid for by the department's divisions. The position is responsible for actively managing the department's safety operations for facilities and division offices.												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	32.8	32.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		5.9										
1061 CIP Rcpts		26.9										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$32.8												
Subtotal		1,171.5	892.3	60.2	169.8	19.1	30.1	0.0	0.0	10	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	23.9	23.9	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		2.1										
1061 CIP Rcpts		21.8										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Facilities Management (2020)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
: \$23.9												
Totals		1,195.4	916.2	60.2	169.8	19.1	30.1	0.0	0.0	10	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Information Technology Services (2754)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	16,655.4	12,474.2	205.4	3,546.7	138.3	298.3	0.0	-7.5	133	0	11
1002 Fed Rcpts		8,540.6										
1003 G/F Match		2,368.4										
1004 Gen Fund		3,584.8										
1007 I/A Rcpts		920.4										
1037 GF/MH		817.5										
1061 CIP Rcpts		182.8										
1108 Stat Desig		128.0										
1156 Rcpt Svcs		112.9										
06-8-0005 Spread unallocated reduction related to sunset of Senior Care												
	LIT	0.0	-7.5	0.0	0.0	0.0	0.0	0.0	7.5	0	0	0
Spread unallocated reduction related to Senior Care program costs no longer required due to sunset of program.												
Subtotal		16,655.4	12,466.7	205.4	3,546.7	138.3	298.3	0.0	0.0	133	0	11
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Transfer to Administrative Support Services												
	Trout	-446.4	-446.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		-446.4										
This is to transfer funds to Administrative Support Services component to cover expenses paid from that component.												
ADN 0680016 Position Changes and Deletions												
	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	7	0	1
This adjusts for the positions that were created in FY07 and not in ABS.												
06-#280- Analyst/Programmer IV-This is PCN 06-0651 for IT Business Applications needs												
06-#281- Internet Specialist II -This is 06-N07090 for the IT-Project Management Unit. this position will assist in the management of the department's projects.												
06-#282- Information Officer II- This is PCN 06-0646 for IT-PIT Unit. This position will assist in management of the department's publications.												
06-#283-Data processing Manager I- This is for IT Customer Services Anchorage - this is PCN 06-0658. This position will oversee all the department's customer service activities in Anchorage.												
06-#284- Data processing Manager I- This is for IT Customer Services Juneau - this is PCN 06-0657. This position will oversee all the department's customer service activities in Juneau.												
06-#285- Micro/Network Spec I- This is for IT Customer Services Juneau - this is PCN 06-0656. This position will lead a group of customer service technicians.												
06-#286- Student Intern II- This is for IT Customer Services Juneau, this is PCN 06-N07068. This non-perm is created to help new students get familiar with state government.												
06-#294- Analyst/Programmer IV- This is PCN 06-0648 for IT Business Applications Juneau and will service software applications.												
06-#297- Project Coordinator- This is PCN 06-T007 for IT Management and assists management in IT functions and applications.												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Information Technology Services (2754)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

Due to conflict in FY07 Leg. Finance and Administration numbers in position counts we are increasing our count by 1 PFT for the Analyst Programmer V that went missing in FY07 Mgt Plan.

Delete positions:
Delete PCN 06-N06069 and 06-N07027 non-perms that expired. It also makes an adjustment for one full time PCN 06-1675 that was missed in Governor's FY08 Budget.

Subtotal	16,209.0	12,020.3	205.4	3,546.7	138.3	298.3	0.0	0.0	140	0	12
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***** **Changes From FY2008 Management Plan To FY2009 Governor** *****

Transfer out Positions and Funding to Public Affairs

Trout	-1,776.2	-1,562.2	-65.0	-104.0	-40.0	-5.0	0.0	0.0	-18	0	0
1002 Fed Rcpts	-888.1										
1004 Gen Fund	-888.1										

The Public Affairs unit has been functioning as a team since the department organized IT functions in FY2005, consolidating department communication functions to achieve consistency in communication efforts and to better serve the department in a unit that serves all programs. The Public Affairs Unit includes the functions of public information, publications and web-based communication, legislative management and regulatory development.

The Public Affairs group ensures consistency and continuity in communication with stakeholders, helps promote health communications; and ensures transparency to the public regarding department activities, as well as ensures responsiveness to media, legislative and constituent inquiries. This group has set the standard for state government communications.

Public Information Team members help programs communicate to external and internal stakeholders about department issues, activities, decisions, services, and health promotion efforts. Legislative staff coordinate and facilitate legislative activities, and regulatory staff ensure coordinated development of regulations needed to carry out department services.

Correct Unrealizable Fund Sources for Salary Adjustments: GGU

FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts	-171.5											
1004 Gen Fund	171.5											

Realign staffing

PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-1	0	1
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Full-time PCN 06-X100 was deleted. This position was replaced by a new full-time position in Public Affairs.

In addition two non-perm positions (06-#418 and #419) were added and one non-perm position (06-08011) was deleted for a net gain of one NP.

Line Item Transfer to cover personal services

LIT	0.0	283.6	0.0	-283.6	0.0	0.0	0.0	0.0	0.0	0	0	0
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This is a line item transfer to cover increased personal services. The reduction of contractual will result in not being able to do ad hoc IT contracts that may

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Information Technology Services (2754)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

come up during the year.

FY 09 Health Insurance Increases for Exempt Employees

SalAdj		0.3	0.3	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		0.1										
1007 I/A Rcpts		0.2										

Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.3

FY 09 Bargaining Unit Contract Terms: General Government Unit

SalAdj		622.6	622.6	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		343.0										
1003 G/F Match		88.4										
1004 Gen Fund		134.8										
1007 I/A Rcpts		37.6										
1037 GF/MH		9.8										
1061 CIP Rcpts		2.9										
1156 Rcpt Svcs		6.1										

This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component.
: \$622.6

Subtotal		15,055.7	11,364.6	140.4	3,159.1	98.3	293.3	0.0	0.0	121	0	13
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***** **Changes From FY2009 Governor To FY2009 Governor Amended** *****

FY09 Bargaining Unit Contract Terms: Supervisory Unit

SalAdj		195.1	195.1	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		88.6										
1003 G/F Match		22.3										
1004 Gen Fund		45.1										
1007 I/A Rcpts		5.4										
1037 GF/MH		16.2										
1061 CIP Rcpts		9.2										
1108 Stat Desig		8.3										

This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component
: \$195.1

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Information Technology Services (2754)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Totals	15,250.8	11,559.7	140.4	3,159.1	98.3	293.3	0.0	0.0	121	0	13

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Facilities Maintenance (2371)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,584.9	0.0	0.0	2,584.9	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		2,584.9										
	Subtotal	2,584.9	0.0	0.0	2,584.9	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	2,584.9	0.0	0.0	2,584.9	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Transfer out Interagency Receipt Authority to Facilities Management												
	Trout	-130.0	0.0	0.0	-130.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		-130.0										
	Subtotal	2,454.9	0.0	0.0	2,454.9	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	2,454.9	0.0	0.0	2,454.9	0.0	0.0	0.0	0.0	0	0	0

This is to transfer out interagency receipts for the department's safety officer position. The position is currently funded with an unbudgeted RSA and is paid for by the department's divisions. The position is responsible for actively managing the department's safety operations for facilities and division offices.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Pioneers' Homes Facilities Maintenance (2350)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		2,125.0	0.0	0.0	1,938.5	186.5	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		2,125.0										
Subtotal		2,125.0	0.0	0.0	1,938.5	186.5	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
LIT for PH Facilities Maintenance ADN 0680016												
LIT		0.0	0.0	0.0	186.5	-186.5	0.0	0.0	0.0	0	0	0
All costs for this component are recorded in contractual services and are being moved there accordingly.												
Subtotal		2,125.0	0.0	0.0	2,125.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		2,125.0	0.0	0.0	2,125.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		2,125.0	0.0	0.0	2,125.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: HSS State Facilities Rent (2478)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	4,728.4	0.0	0.0	4,728.4	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		425.6										
1004 Gen Fund		3,873.5										
1007 I/A Rcpts		79.3										
1037 GF/MH		350.0										
First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	Atrin	96.0	0.0	0.0	96.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		96.0										
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
Public Building Fund (PBF) Chargeback Transfer from Department of Administration												
	Atrin	91.8	0.0	0.0	91.8	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		91.8										
Pursuant to Section 12(d) and (e), Chapter 28, SLA 2007, page 67, lines 22 - 29, \$740,100 is distributed to state agencies to offset a portion of the increased rates for facilities covered by the Alaska public building fund as required by the statewide federal cost allocation plan.												
The amounts transferred to state agencies are as follows: Administration, \$119.4; Commerce, \$90.4; Corrections, \$16.5; Education, \$31.9; Fish and Game, \$40.5; Office of the Governor, \$19.0; HSS, \$91.8; Labor, \$24.2; DNR, \$165.7; Public Safety, \$2.6; Revenue, \$119.0; Transportation, \$3.9; and Legislature, \$15.2.												
	Subtotal	4,916.2	0.0	0.0	4,916.2	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	4,916.2	0.0	0.0	4,916.2	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Delete one-time authorization for First FY2008 Fuel/Utility Cost Increase Funding Distribution												
	OTI	-96.0	0.0	0.0	-96.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-96.0										

One-time funding deleted for fuel/utility increases which were added in the FY08 budget as follows:

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: HSS State Facilities Rent (2478)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
Pursuant to sec. 22(a) and (c), ch. 28, SLA 2007, pages 71 - 73, \$12,000,000 is distributed to state agencies from the Office of the Governor to offset the increased costs for fuel and utilities. The fiscal year-to-date average price of Alaska North Slope crude as of August 1, 2007, was \$72.52 per barrel per the Department of Revenue, which is \$17.80 (32.5%) above DOR's Spring 2007 FY08 forecast amount of \$54.72.												
The amounts transferred to state agencies are as follows: Administration, \$22.2; Corrections, \$202.5; DEED, \$82.2; DEC, \$54.4; Fish and Game, \$111.6; HSS, \$480.0; Labor, \$61.4; DMVA, \$470.4; DNR, \$88.2; DPS, \$107.1; Transportation, \$9,000.0; University, \$1,320.0.												
	Subtotal	4,820.2	0.0	0.0	4,820.2	0.0	0.0	0.0	0.0	0	0	0
	***** Changes From FY2009 Governor To FY2009 Governor Amended *****											
	Totals	4,820.2	0.0	0.0	4,820.2	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Health Planning and Infrastructure (2765)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	3,717.3	1,845.7	210.0	1,058.6	22.0	51.0	500.0	30.0	17	0	2
1002 Fed Rcpts		3,368.1										
1003 G/F Match		122.5										
1004 Gen Fund		28.2										
1092 MHTAAR		80.0										
1156 Rcpt Svcs		118.5										
06-5-0008 Spread Unallocated MHTAAR for Comprehensive MH Plan												
	LIT	0.0	30.0	0.0	0.0	0.0	0.0	0.0	-30.0	0	0	0
Spread unallocated MHTAAR increment.												
Subtotal		3,717.3	1,875.7	210.0	1,058.6	22.0	51.0	500.0	0.0	17	0	2
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
ADN 0680016 Line Item Transfer for FY08 Plan												
	LIT	0.0	-205.6	0.0	-237.2	0.0	0.0	442.8	0.0	0	0	0
This is a line item transfer to coordinate with spending plan for FY08.												
Health Planning Infrastructure had some long terms employees retire which freed up some personal services funding to move to the grants line. Also, the unit did not receive one large federal grant that was going to contract out some of the work. Instead they received another federal grant that grants the funds to recipients.												
Totals		3,717.3	1,670.1	210.0	821.4	22.0	51.0	942.8	0.0	17	0	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Health Care Information Office (2899)
RDU: Departmental Support Services (106)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: AK Mental Health & Alcohol & Drug Abuse Boards (2801)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	951.2	610.0	66.0	236.3	31.9	7.0	0.0	0.0	7	0	0
1002 Fed Rcpts		86.8										
1007 I/A Rcpts		45.0										
1037 GF/MH		413.3										
1092 MHTAAR		406.1										
	Subtotal	951.2	610.0	66.0	236.3	31.9	7.0	0.0	0.0	7	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	951.2	610.0	66.0	236.3	31.9	7.0	0.0	0.0	7	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Reverse FY2008 MH Trust Recommendation												
	OTI	-406.1	-236.3	-62.0	-87.8	-20.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		-406.1										
MH Trust: Cont - ABADA/AMHB joint staffing												
	Inc	381.1	236.3	62.0	62.8	20.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		381.1										
Grant 605.03 Alaska Mental Health Trust Authority funding provides a supplement to the basic operations of the merged staff of Advisory Board of Alcoholism and Drug Abuse (ABADA) and Alaska Mental Health Board (AMHB) and requires the boards to meet the data, planning and advocacy performance measures negotiated with the Trust. \$15.0 of this amount is intended for travel costs related to the advocacy coordinator position.												
MH Trust: BTKH - Strong family voice: parent and youth involved via AMHB												
	Inc	25.0	0.0	0.0	25.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		25.0										
Grant 606.03 Managed by the Alaska Mental Health Board (AMHB), this project expands funding that brings a significant number of parents and youth, including rural families, to the Bring the Kids Home (BTKH) quarterly meetings and other advocacy and policy setting meetings. It also provides a regularly scheduled teleconference that supports parents who have sons or daughters experiencing serious emotional disturbance (SED). Funded at \$25.0 MHTAAR in FY08, this request is for continuation funding of \$25.0 MHTAAR in FY09.												
Decrease Interagency Receipts												
	Dec	-2.5	-2.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		-2.5										

This is to delete \$2.5 in Interagency Receipts that are not realizable.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: AK Mental Health & Alcohol & Drug Abuse Boards (2801)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		0.1										
1037 GF/MH		0.1										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	33.4	33.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		1.4										
1007 I/A Rcpts		2.5										
1037 GF/MH		21.9										
1092 MHTAAR		7.6										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$33.4												
	Subtotal	982.3	641.1	66.0	236.3	31.9	7.0	0.0	0.0	7	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	982.3	641.1	66.0	236.3	31.9	7.0	0.0	0.0	7	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Commission on Aging (2674)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	466.9	331.3	49.2	53.1	8.3	0.0	0.0	25.0	4	0	0
1004 Gen Fund		48.9										
1007 I/A Rcpts		287.4										
1037 GF/MH		30.1										
1092 MHTAAR		100.5										
06-8-0005 Spread unallocated MHTAAR increment Health Body & Brain												
	LIT	0.0	0.0	0.0	25.0	0.0	0.0	0.0	-25.0	0	0	0
Spread unallocated increment												
Subtotal		466.9	331.3	49.2	78.1	8.3	0.0	0.0	0.0	4	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		466.9	331.3	49.2	78.1	8.3	0.0	0.0	0.0	4	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Reverse FY2008 MH Trust Recommendation												
	OTI	-100.5	-70.0	-5.5	-25.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		-100.5										
MH Trust: AB-ACoA - Healthy Body/Brain Campaign												
	Inc	25.0	0.0	0.0	25.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		25.0										
Grant 1447 The Healthy Body, Healthy Brain Campaign is an ongoing project that began in FY08 with the goal of reaching baby boomers and seniors with the message that they can help prevent Alzheimer's Disease and Related Dementias through lifestyle choices such as physical activity, healthy eating, mental challenges, and fun with others. This additional funding will help directly promote a lifestyle that helps prevent chronic diseases like diabetes and heart disease. This project is critical to educating our growing senior population on one of the few prevention methods for Alzheimer's Disease and is a partnership of Trust funding and state funding.												
MH Trust: Cont - ACOA Planner												
	Inc	75.5	70.0	5.5	0.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		75.5										
Grant 151.04 This project funds one of the two Alaska Commission on Aging (ACOA) planner positions (one GF/MH and one MHTAAR funded). The planner is responsible for supporting the Executive Director coordinate between the ACOA and the Trust, including gathering data for reporting, coordination of advocacy and planning, and preparing on-going grant progress reports to the ACOA and AMHTA. The planner also works with staff to maximize other state and federal funding opportunities for MHTAAR projects and to ensure effective use of available dollars. In addition, the planner position acts as liaison with the other												

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Commission on Aging (2674)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
beneficiary boards. Outcomes and reporting requirements are negotiated with the Trust annually.												
FY 09 Health Insurance Increases for Exempt Employees												
	SalAdj	0.2	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		0.2										
Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.2												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
	SalAdj	15.7	15.7	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		11.2										
1092 MHTAAR		4.5										
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$15.7												
	Subtotal	482.8	347.2	49.2	78.1	8.3	0.0	0.0	0.0	4	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Mental Health Trust Proposal - Outreach, Staff Development, and Strategic Planning												
	Inc	58.5	0.0	23.5	35.0	0.0	0.0	0.0	0.0	0	0	0
1092 MHTAAR		58.5										
Travel Dillingham Outreach Travel Meeting - Estimated cost for hotel, charter flights, car rental, per diem, & incidentals \$11,500												
Board/Staff Development Send 3 Commissioners and 2 staff to the National Council on Aging/American Society on Aging Conference in Las Vegas, Nevada Estimated Cost (@\$2,400 per person) \$12,000												
Services Partner with the Rasmuson Foundation, Alaska State Hospital and Nursing Association, and the Trust in their long-term care strategic planning efforts or to examine factors affecting the health and well-being of older Alaskans that relate to planning for services along the long-term care continuum \$35,000												
Total FY09 \$58,500												
	Totals	541.3	347.2	72.7	113.1	8.3	0.0	0.0	0.0	4	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Governor's Council on Disabilities and Special Education (2023)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
	ConfCom	2,330.4	720.8	196.5	1,275.1	33.0	5.0	100.0	0.0	8	0	2
1002 Fed Rcpts		1,560.5										
1007 I/A Rcpts		233.9										
1092 MHTAAR		536.0										
	Subtotal	2,330.4	720.8	196.5	1,275.1	33.0	5.0	100.0	0.0	8	0	2
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
0680019 Realign funding to meet operational needs												
	LIT	0.0	-29.9	29.9	100.0	0.0	0.0	-100.0	0.0	0	0	0
This is a line item transfer from Personal Services to Travel \$29.9 and to move from grants to contractual \$100.0 to better align with management FY08 spending plan and to correct for MHTAAR project that will be a contract rather than grant.												
	Subtotal	2,330.4	690.9	226.4	1,375.1	33.0	5.0	0.0	0.0	8	0	2
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Alaskans With Disabilities Who Are Victims of Violence Federal Grant												
	Inc	89.5	0.0	0.0	89.5	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		89.5										

The Governor's Council on Disabilities and Special Education (Council) successfully reapplied for funding from the Department of Justice, Office on Violence against Women, to build upon past activities to meet the needs of women with disabilities who are the victims of physical or sexual assault or stalking. This project focuses on building regional collaboration in Southcentral Alaska where the majority of Alaskans with disabilities who are victims of violence live and where the most complete and complex service systems exist.

Alaska's FY 2004 project, Alaskans Speak Up (ASU), developed valuable tools and resources enabling disability providers and victim advocates to better respond to individual victims' needs and to collaborate agency to agency. It did not, however, fundamentally alter the relationship between two systems serving a shared population. The 3 year project initiated in FY 2008 (10/1/07 - 9/30/10) will promote regional service collaboration and capacity-building, creating a more effective and sustainable service paradigm.

During the first year, a regional needs assessment will be conducted. The assessment will inventory disability and victim advocacy system resources and relationships, detecting training and technical assistance needs. It will assess capacity to collect and share data across systems. Collaboration, capacity and skill building will be the first year focus, continuing through the project's life. The team will use its expertise and experience to promote cross-training to increase accessibility, expand staff knowledge and skills, and improve referral policies and systems. This has been initiated on a limited scale, via local Disability Advocacy Response Team (DART) seminars and training people with disabilities as ASU trainers.

Once the regional assessment is completed, a regional strategic plan focusing on collaboration, training, resource, and technical assistance needs identified through the assessment will be developed. By the end of year one, the assessment and strategic plan will be complete; the team will ensure women with disabilities are involved in assessment and planning. The assessment will identify cross-system challenges, as well as unique system and cultural needs. Strategic planning will address these policy issues as well as guide enhanced and improved service delivery.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Governor's Council on Disabilities and Special Education (2023)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP

During year two, the team will provide advocacy, outreach, training, and technical assistance to enhance regional collaboration and to promote delivery of and access to appropriate services to individuals with disabilities, which is often impeded by policy and procedure that is inadequately responsive to individual circumstances. Year three will see systematic building of capacity around the implementation of a DART model adapted to the region and work on sustaining project activities over time. The team will ensure this model will continue to function beyond 2009 and promote replication in other communities.

The Council did not receive notification that it was awarded funding until September 12, 2007. In order to fully receive the award, the Council will need an additional \$89.5 of budget authority.

Violence against women in Alaska far exceeds the national average and women with disabilities are far more likely to experience violence than women without disabilities. Without the additional authority, the Council will not be able to address one of the most pressing issues affecting women with disabilities.

Reverse FY2008 MH Trust Recommendation

1092 MHTAAR	OTI	-536.0	-80.0	-2.0	-452.0	-2.0	0.0	0.0	0.0	0	0	0
		-536.0										

MH Trust: Benef Projects - Microenterprise capital

1092 MHTAAR	Inc	100.0	0.0	0.0	100.0	0.0	0.0	0.0	0.0	0	0	0
		100.0										

Grant 200.05

This project provides resources for small business technical assistance and development of an 'incubator' to provide ongoing support to individuals with a disability to establish small businesses. The Governor's Council on Disabilities and Special Education will administer this grant in collaboration with their federal grant for employment/training. This project is an ongoing part of the Alaska Mental Health Trust Authority's asset building projects emphasizing increases in opportunities for home ownership, small business ventures and higher education. Microenterprise is a component of services being developed under the Trust's Beneficiary Projects Initiative that will provide alternative and innovative resources and greater options for consumer input and direction in the services they receive.

MH Trust: Workforce Dev - AK Alliance for Direct Service website, training, conference

1092 MHTAAR	Inc	100.0	0.0	10.0	80.0	10.0	0.0	0.0	0.0	0	0	0
		100.0										

Alaska Alliance for Direct Service Workers (AADSC): The Trust Workforce Development Focus Area is supporting the Alaska Alliance for Direct Service Workers in their work on recruitment and retention strategies. The work will include continued maintenance of the AADSC website for recruitment of direct service workers, training for supervisors, and support for the Full Lives Conference for direct service workers. The AADSC will also continue to provide leadership for the recruitment and the retention subcommittees throughout the implementation of the workforce development strategies.

MH Trust: Cont - Research Analyst III

1092 MHTAAR	Inc	90.0	80.0	4.0	4.0	2.0	0.0	0.0	0.0	0	0	0
		90.0										

Grant 105.04

The Mental Health Trust Authority: Continuing project for the Governor's Council on Disabilities and Special Education: Research Analyst III is a continuing project to provide the Governor's Council on Disabilities and Special Education with information about the needs of individuals with developmental disabilities.

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Governor's Council on Disabilities and Special Education (2023)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
<p>The position and associated travel and operating funds help ensure Council activities are conducted within the framework of the Mental Health Trust Authority's guiding principles while still meeting Congressional requirements. The Research Analyst is a staff member of the Governor's Council and funds go directly to the Council.</p> <p>The Council is federally funded to fulfill specific roles mandated by Congress. It is an expectation of the Trust that the Council will participate in planning, implementing and funding a comprehensive integrated mental health program that serves people with developmental disabilities and their families. The position enables the Council to provide up-to-date, valid information to the Trust on consumer issues, identify trends, participate in Trust activities, enhance public awareness, and engage in ongoing collaboration with the Trust and partner boards.</p> <p>This position was funded in FY08 with \$86.0 MHTAAR and has been increased in FY09 to \$90.0 MHTAAR.</p>												
MH Trust: Workforce Dev - Marketing Strategies for beneficiary area service careers												
1092 MHTAAR	Inc	175.0	0.0	0.0	175.0	0.0	0.0	0.0	0.0	0	0	0
<p>Grant 1382.01 The Workforce Development Focus Area Retention Subcommittee will develop marketing strategies in collaboration with the Trust's Strategic Communication Committee that promotes the Trust beneficiary-related service careers to the general population by highlighting the importance of the work and the variety of work available within the industry. The marketing strategies will also target non-traditional job seekers into the industry and provide an action step for job seekers interested in starting a career working with Trust beneficiaries. The work will be led by the Alaska Alliance for Direct Service Workers.</p>												
MH Trust: Workforce Dev - "Grow your own" recruitment strategy for youth												
1092 MHTAAR	Inc	175.0	0.0	0.0	175.0	0.0	0.0	0.0	0.0	0	0	0
<p>Grant 1381.01 The Trust Workforce Development Focus Area Recruitment Strategy "Grow Your Own" will encourage youth (14-29 years) to participate in career exploratory activities, including career awareness and exploration that are tied to classroom learning and work-based experiences, to increase the long-term availability of direct service professionals in Alaska. Additionally, work will be done with organizations with specific expertise in youth development to further career exploratory experiences and career preparatory activities. The Alaska Alliance for Direct Service Workers and the Alaska Health Education Center will be responsible for leadership on this strategy, working with the appropriate organizations and school districts to achieve outcomes in this strategy.</p>												
FY 09 Health Insurance Increases for Exempt Employees												
1002 Fed Rcpts	SalAdj	0.4	0.4	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<p>Health insurance increase of \$17.02 from \$851 per month to \$868.02 per month applicable to this component.: \$0.4</p>												
FY 09 Bargaining Unit Contract Terms: General Government Unit												
1002 Fed Rcpts	SalAdj	14.1	29.8	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts		11.0										
1092 MHTAAR		4.7										

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Governor's Council on Disabilities and Special Education (2023)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
This change records adds the FY08 health insurance increase of \$16.58 from \$863.20 per month to \$879.78 per month and the FY08 4% wage increase, both of which are not currently in the base budget, along with the FY09 health insurance increase of \$17.60 from \$879.78 per month to \$897.38 per month and the FY09 3% wage increase applicable to this component. : \$29.8												
Subtotal		2,554.1	721.1	238.4	1,546.6	43.0	5.0	0.0	0.0	8	0	2
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Mental Health Trust Proposal - Research, Analysis, and Replacement Copier												
Inc		100.0	0.0	0.0	84.0	0.0	16.0	0.0	0.0	0	0	0
1092 MHTAAR		100.0										

The Governor's Council on Disabilities & Special Education proposes three items for funding for FY09. First, the Council is requesting funds to hire a contractor to research Nebraska's developmental disability provider profiles as well as models from other states, and to gather similar information in Alaska. The Nebraska example describes outcomes for individuals served and profiles agency characteristics, such as the length of employment of staff, training staff receive, and reasons individuals have left the agency. A quality of life questionnaire is used to determine client outcomes such as social belonging, economic security, growth and development and perception of well being. The contractor will establish a system for collecting similar data and conducting a quality of life questionnaire that can be implemented in future years by existing state and provider staff.

A second activity will involve a third-party analysis of residential services in Alaska. This analysis is timely, as community-based residential services have grown tremendously since Harborview was closed, and as the number of individuals served through waivers has increased. This analysis will utilize the quality of life survey and provider profiles, as well as focus groups to describe common elements of community-based residential services that lead to success. Focus groups will consist of residential staff, individuals supported in residential environments, as well as family members (both those with sons or daughters who receive residential supports as well as those with adult sons or daughters who live at home). The state council on developmental disabilities in North Carolina convened a group of innovative programs from across the country to describe and document best practices. The common features of these innovative and best practices with demonstrated outcomes will be incorporated into the third-party analysis and recommendations. A paper and presentation of the highlights from the analysis will be disseminated widely to disability provider organizations, direct care staff and families.

The last request is for funding to replace an aging copier that frequently requires repair. Because of the large volume of copying required to conduct Council business, it is necessary to obtain equipment that maximizes staff efficiency and which can handle a very high load. A state procurement official was contacted to estimate the cost of replacing the copier, which is expected to be about \$16,000 with a trade-in.

Contractual

Contractor to replicate Nebraska's Developmental Disabilities Provider Profile \$40,000
 Purchase of Quality of Life Questionnaire Manual, Survey Forms and Conversion Table \$4,000
 Third-party analysis of residential services \$40,000
 Subtotal Contractual \$84,000

Equipment

Purchase of a new copier for the Governor's Council \$16,000

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Governor's Council on Disabilities and Special Education (2023)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
FY09 TOTAL \$100,000												
FY09 Bargaining Unit Contract Terms: Supervisory Unit												
	SalAdj	8.5	8.5	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1002 Fed Rcpts		8.5										
<p>This change record adds the FY08 health insurance increase of \$16 from \$835 per month to \$851 per month and the FY08 5.5% wage increase since they are not in the base budget, along with the FY09 health insurance increase of \$17.02 to \$868.02 per month and the FY09 3% wage increase applicable to this component : \$8.5</p>												
Totals		2,662.6	729.6	238.4	1,630.6	43.0	21.0	0.0	0.0	8	0	2

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Pioneers Homes Advisory Board (2691)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants Benefits	Miscellaneous	Positions		NP
										PFT	PPT	
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee	ConfCom	13.7	0.0	11.2	2.5	0.0	0.0	0.0	0.0	0	0	0
1156 Rcpt Svcs		13.7										
Subtotal		13.7	0.0	11.2	2.5	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
Subtotal		13.7	0.0	11.2	2.5	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
Subtotal		13.7	0.0	11.2	2.5	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
Totals		13.7	0.0	11.2	2.5	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Alaska Health Care Commission (2900)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Suicide Prevention Council (2651)
RDU: Boards and Commissions (488)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
1037 GF/MH	ConfCom	125.5	42.7	35.0	30.6	17.2	0.0	0.0	0.0	0	1	0
		125.5										
	Subtotal	125.5	42.7	35.0	30.6	17.2	0.0	0.0	0.0	0	1	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Totals	125.5	42.7	35.0	30.6	17.2	0.0	0.0	0.0	0	1	0

Change Record Detail - Multiple Scenarios With Descriptions
Department of Health and Social Services

Component: Human Services Community Matching Grant (1821)
RDU: Human Services Community Matching Grant (82)

Scenario/Change Record Title	Trans Type	Totals	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants, Benefits	Miscellaneous	Positions		
										PFT	PPT	NP
***** Changes From FY2008 Conference Committee To FY2008 Authorized *****												
FY2008 Conference Committee												
ConfCom		1,485.3	0.0	0.0	0.0	0.0	0.0	1,485.3	0.0	0	0	0
1004 Gen Fund		1,485.3										
	Subtotal	1,485.3	0.0	0.0	0.0	0.0	0.0	1,485.3	0.0	0	0	0
***** Changes From FY2008 Authorized To FY2008 Management Plan *****												
	Subtotal	1,485.3	0.0	0.0	0.0	0.0	0.0	1,485.3	0.0	0	0	0
***** Changes From FY2008 Management Plan To FY2009 Governor *****												
	Subtotal	1,485.3	0.0	0.0	0.0	0.0	0.0	1,485.3	0.0	0	0	0
***** Changes From FY2009 Governor To FY2009 Governor Amended *****												
	Totals	1,485.3	0.0	0.0	0.0	0.0	0.0	1,485.3	0.0	0	0	0