

# **State of Alaska FY2013 Governor's Operating Budget**

## **Department of Health and Social Services AK Fetal Alcohol Syndrome Program Component Budget Summary**

## Component: AK Fetal Alcohol Syndrome Program

### Contribution to Department's Mission

To reduce alcoholism and substance use among pregnant women and women of child bearing age, thereby reducing the incidence of fetal alcohol spectrum disorders (FASD).

The expected outcomes of the Alaska Fetal Alcohol Syndrome (FAS) program are to prevent alcohol-related birth defects, to increase diagnostic services in Alaska, to improve and increase the delivery of community-based services to those individuals already affected by Fetal Alcohol Spectrum Disorders (FASD) and to evaluate the outcomes of our statewide project.

### Core Services

- Coordinate a statewide community-based FASD diagnostic team network to provide local diagnostic and case management services to families and individuals in their home or hub community.
- Raise public awareness and offer education to providers and families about Fetal Alcohol Spectrum Disorders (FASD).
- Provide community support through grants and contracts, and the ongoing development of partnerships with other divisions, departments, community agencies, Native health corporations and parents/caregivers to decrease the prevalence of FASD across Alaska.

### Key Component Challenges

- Limited diagnostic services available across Alaska to adequately meet the needs of those families requesting diagnostic services. While we currently have eight community-based diagnostic teams functioning in Alaska, most provide services once or twice a month; they are part-time and can only see a limited number of clients. Teams are working very hard with limited resources to increase their ability to serve more families.
- During FY2011, diagnostic services utilized all Alaska Provider Agreement funds available. During FY2012 we will need to monitor our Provider Agreement funds very carefully to guarantee we do not exceed our available funding. If we do expend our available funds all Diagnostic Teams will be notified to cease providing diagnostic services until the next fiscal year. Once notified, teams can continue providing services but will not be reimbursed through our Provider Agreement. During FY2012 we will analyze the trend data to see if we can anticipate what the growth rate will be and determine our next steps regarding adequate funding.
- The Alaska Pregnancy Risk Assessment Monitoring System (PRAMS) data indicates fewer women are drinking during pregnancy. While this is good news, data also indicates that many women are drinking heavily before they know they are pregnant, creating high-risk pregnancy situations. Overall we are also seeing an increase in women of childbearing age participating in binge drinking. Related to this is the concern that there are mixed messages coming from some members of our medical community about the dangers of alcohol during pregnancy. The stated belief is that there should be no alcohol consumed during pregnancy; this is the only guarantee that a fetus will not be born with a disability related to prenatal exposure to alcohol.
- Alaska has consistently lacked adequate treatment resources specifically focused on treating pregnant woman and helping them to maintain their sobriety after their pregnancy has concluded. During FY2010 and FY2011, funding became available to increase the number of treatment slots for pregnant women (intensive outpatient services). Within this funding, two programs are specifically targeting women who are involved with the Office of Children's Services, providing both treatment and increased case management to increase success of treatment. These additional funds will increase available treatment services, but many women who need and/or want treatment services continue to wait for available services.
- During the past 12 years, we have greatly increased our training and education about fetal alcohol spectrum disorder and how to best serve an individual with this disability. Even with this increased availability, we need to be vigilant in developing a sustainable, ongoing training program to guarantee all service providers (educators,

youth service agencies, child protective services, public safety, etc.) receive training on the basics of FASD, as well as more advanced training on how to develop appropriate interventions for individuals and families experiencing disabilities resulting from FASD. Available training for all levels of service providers will promote better long-term outcomes for families impacted by FASD, in both urban and rural Alaska.

- The Prevention section works in partnership with the FASD/SED Medicaid Waiver, provided through the DBH Medicaid Services program. There continues to be a lack of adequate intervention services available for individuals with a FASD. This is particularly true for individuals with a dual diagnosis of FASD and serious emotional disorder. Through the DBH FASD/SED Medicaid Waiver
  - our diagnostic teams are able to provide diagnostic services to help establish Waiver eligibility,
  - the Teams have a program to refer diagnosed individuals who meet the Waiver criteria, and
  - core FASD training, plus more advanced training around behavioral interventions, is available for service providers participating in the Waiver program.
- In 1997, the DHSS began a focused effort to improve the state's ability to deal with issues related to prenatal exposure to alcohol. Since that time a great deal of progress has been made. At this time we have over ten years of Alaska FASD diagnostic data that we will evaluate to document the progress we have made and to determine the specific outcomes related to available diagnostic services. In the near future, we will seek resources to conduct a three-part evaluation of this wealth of data to address: 1) how much service did we provide and to whom; 2) how well was the service offered (customer service such as did families feel valued, did the process work for families, was the information understandable, etc.); and 3) did having a FASD diagnosis improve the long-term outcomes for both the impacted individual and the family unit? We will be looking to identify evaluation funding in the next few years.

### **Significant Changes in Results to be Delivered in FY2013**

No significant changes in results to be delivered in FY2013.

### **Major Component Accomplishments in 2011**

In February 2010, new Alaska FAS prevalence rates were released showing an overall 32% decrease in FAS births prevalence from 19.9 to 13.5 per 10,000 live births and a 49% decline among Alaska Native births, from 63.1 to 32.4 per 10,000. A copy of the Epidemiology Bulletin is available at: [http://www.epi.hss.state.ak.us/bulletins/docs/b2010\\_03.pdf](http://www.epi.hss.state.ak.us/bulletins/docs/b2010_03.pdf).

While this is great news, we are now evaluating the "conditions" that prompted this significant decrease in Alaska's FAS prevalence rates. We are confident that the work that DHSS began in 1998, and continues today, has contributed to an overall increase in awareness of the dangers of drinking alcohol during pregnancy and the rate of births impacted by alcohol consumption.

In FY2011 specifically, we added two new FASD diagnostic teams: one in Anchorage, serving a broader Anchorage populations than served by Southcentral Foundation, and the second in Glennallen/Copper Center. Through the addition of these two teams, we were able to increase the number of diagnoses conducted in Alaska from 133 in FY2010 to 179 diagnoses in FY2011. Between 2000 and 2011 we completed a total of 1,683 diagnoses or an average of 153 diagnoses per year.

### **Statutory and Regulatory Authority**

AS 47.30.470-500	Mental Health
AS 47.37	Uniform Alcoholism & Intoxication Treatment Act
7 AAC 78 & 81	Grant Programs

**Contact Information**

**Contact:** Nancy Rolfzen, Asst. Commissioner

**Phone:** (907) 465-1630

**Fax:** (907) 465-2499

**E-mail:** nancy.rolfzen@alaska.gov

**AK Fetal Alcohol Syndrome Program  
Component Financial Summary**

*All dollars shown in thousands*

	<b>FY2011 Actuals</b>	<b>FY2012 Management Plan</b>	<b>FY2013 Governor</b>
<b>Non-Formula Program:</b>			
<b>Component Expenditures:</b>			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Services	89.0	21.6	21.6
74000 Commodities	0.0	0.0	0.0
75000 Capital Outlay	0.0	0.0	0.0
77000 Grants, Benefits	1,274.4	1,652.3	1,652.3
78000 Miscellaneous	0.0	0.0	0.0
<b>Expenditure Totals</b>	<b>1,363.4</b>	<b>1,673.9</b>	<b>1,673.9</b>
<b>Funding Sources:</b>			
1004 General Fund Receipts	1,363.4	1,314.4	1,314.4
1037 General Fund / Mental Health	0.0	359.5	359.5
<b>Funding Totals</b>	<b>1,363.4</b>	<b>1,673.9</b>	<b>1,673.9</b>

**Summary of Component Budget Changes  
From FY2012 Management Plan to FY2013 Governor**

*All dollars shown in thousands*

	<u>Unrestricted Gen (UGF)</u>	<u>Designated Gen (DGF)</u>	<u>Other Funds</u>	<u>Federal Funds</u>	<u>Total Funds</u>
<b>FY2012 Management Plan</b>	<b>1,673.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>1,673.9</b>
<b>FY2013 Governor</b>	<b>1,673.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>1,673.9</b>

**Component Detail All Funds**  
**Department of Health and Social Services**

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

	FY2011 Actuals	FY2012 Conference Committee	FY2012 Authorized	FY2012 Management Plan	FY2013 Governor	FY2012 Management Plan vs FY2013 Governor	
71000 Personal Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
72000 Travel	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
73000 Services	89.0	194.1	194.1	21.6	21.6	0.0	0.0%
74000 Commodities	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
75000 Capital Outlay	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
77000 Grants, Benefits	1,274.4	1,574.4	1,574.4	1,652.3	1,652.3	0.0	0.0%
78000 Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0	0.0%
<b>Totals</b>	<b>1,363.4</b>	<b>1,768.5</b>	<b>1,768.5</b>	<b>1,673.9</b>	<b>1,673.9</b>	<b>0.0</b>	<b>0.0%</b>
<b>Fund Sources:</b>							
1004 Gen Fund (UGF)	1,363.4	1,409.0	1,409.0	1,314.4	1,314.4	0.0	0.0%
1037 GF/MH (UGF)	0.0	359.5	359.5	359.5	359.5	0.0	0.0%
<b>Unrestricted General (UGF)</b>	<b>1,363.4</b>	<b>1,768.5</b>	<b>1,768.5</b>	<b>1,673.9</b>	<b>1,673.9</b>	<b>0.0</b>	<b>0.0%</b>
<b>Designated General (DGF)</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0%</b>
<b>Other Funds</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0%</b>
<b>Federal Funds</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0%</b>
<b>Positions:</b>							
Permanent Full Time	0	0	0	0	0	0	0.0%
Permanent Part Time	0	0	0	0	0	0	0.0%
Non Permanent	0	0	0	0	0	0	0.0%

**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 FY2012 Conference Committee To FY2012 Authorized *****												
<b>FY2012 Conference Committee</b>												
	ConfCom	1,768.5	0.0	0.0	194.1	0.0	0.0	1,574.4	0.0	0	0	0
1004 Gen Fund		1,409.0										
1037 GF/MH		359.5										
<b>Subtotal</b>		<b>1,768.5</b>	<b>0.0</b>	<b>0.0</b>	<b>194.1</b>	<b>0.0</b>	<b>0.0</b>	<b>1,574.4</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
***** Changes From FY2012 Authorized To FY2012 Management Plan *****												
<b>ADN 06-2-0041 Transfer authority to Rural Human Services and Suicide Prevention, approved 7/22/11</b>												
	Trout	-94.6	0.0	0.0	-94.6	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund		-94.6										
The division is transferring contract authorization from the Fetal Alcohol Syndrome (FAS – AR23105) component to the Rural Human Services and Suicide Prevention (RSSP) component. The funds were in the FAS component to allow for the update of the FASD training curriculums. The Manager of the Prevention & Early Intervention Services has determined that an update will not be needed for several years.												
<b>ADN 06-2-0232 Transfer from Contractual to Grants for Additional Fetal Alcohol Spectrum Disorder Diagnostic Services</b>												
	LIT	0.0	0.0	0.0	-77.9	0.0	0.0	77.9	0.0	0	0	0
Through a legislative appropriation, the Division received \$596.0 GF for Fetal Alcohol Spectrum Disorder (FASD) Diagnostic Services. Because the initial use of the FASD Diagnostic Teams was less than anticipated, some of the grant funds were diverted to RSAs with the University to 1) update the FASD 101 and 201 training curriculums for the diagnostic teams, 2) conduct trainings, and 3) collect and report on FASD data. Those contracts have been completed and the use of the provider agreements has grown to the extent that the funds are being transferred back to the grant line where they are needed.												
<b>Subtotal</b>		<b>1,673.9</b>	<b>0.0</b>	<b>0.0</b>	<b>21.6</b>	<b>0.0</b>	<b>0.0</b>	<b>1,652.3</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
***** Changes From FY2012 Management Plan To FY2013 Governor *****												
<b>Totals</b>		<b>1,673.9</b>	<b>0.0</b>	<b>0.0</b>	<b>21.6</b>	<b>0.0</b>	<b>0.0</b>	<b>1,652.3</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>



**Line Item Detail**  
**Department of Health and Social Services**  
**Services**

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

<b>Line Number</b>	<b>Line Name</b>			<b>FY2011 Actuals</b>	<b>FY2012 Management Plan</b>	<b>FY2013 Governor</b>
73000	Services			89.0	21.6	21.6
<b>Expenditure Account</b>				<b>FY2011 Actuals</b>	<b>FY2012 Management Plan</b>	<b>FY2013 Governor</b>
		<b>Servicing Agency</b>	<b>Explanation</b>			
<b>73000 Services Detail Totals</b>				<b>89.0</b>	<b>21.6</b>	<b>21.6</b>
73025	Education Services			42.8	0.0	0.0
73450	Advertising & Promos			2.0	0.0	0.0
73805	IT-Non-Telecommunication	H&SS	Spending authority for potential contract or RSA RSA: IT positions	0.0	21.6	21.6
73818	Training (Services-IA Svcs)			44.2	0.0	0.0

**Line Item Detail**  
**Department of Health and Social Services**  
**Grants, Benefits**

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

Line Number	Line Name		FY2011 Actuals	FY2012 Management Plan	FY2013 Governor
77000	Grants, Benefits		1,274.4	1,652.3	1,652.3
Expenditure Account	Servicing Agency	Explanation	FY2011 Actuals	FY2012 Management Plan	FY2013 Governor
<b>77000 Grants, Benefits Detail Totals</b>			<b>1,274.4</b>	<b>1,652.3</b>	<b>1,652.3</b>
77110	Grants	FAS grant funds were allocated to the following agencies: Association of Village Council Presidents Homer Children Services Petersburg Mental Health Services Safe and Fear-Free Environment, Inc. Stone Soup Group Tanana Chiefs Conference Volunteers of America - Alaska FAS grant funds were allocated to the following agencies: Association of Village Council Presidents Homer Children Services Petersburg Mental Health Services Safe and Fear-Free Environment, Inc. Stone Soup Group Tanana Chiefs Conference Volunteers of America - Alaska	1,274.4	756.3	756.3
77110	Grants	New FASD provider agreement for case management services New FASD provider agreement for case management services	0.0	300.0	300.0
77110	Grants	FAS Diagnostic Team provider agreements. FAS Diagnostic Team provider agreements.	0.0	596.0	596.0

**Inter-Agency Services**  
**Department of Health and Social Services**

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

Expenditure Account	Service Description	Service Type	Servicing Agency	FY2011 Actuals	FY2012	
					Management Plan	FY2013 Governor
73805	IT-Non-Telecommunication RSA: IT positions Spending authority for potential contract or RSA	Intra-dept	H&SS	0.0	21.6	21.6
<b>73805 IT-Non-Telecommunication subtotal:</b>				<b>0.0</b>	<b>21.6</b>	<b>21.6</b>
<b>AK Fetal Alcohol Syndrome Program total:</b>				<b>0.0</b>	<b>21.6</b>	<b>21.6</b>
<b>Grand Total:</b>				<b>0.0</b>	<b>21.6</b>	<b>21.6</b>