

State of Alaska FY2014 Governor's Operating Budget

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

Public Health Results Delivery Unit

Contribution to Department's Mission

Protect and promote the health of Alaskans

Major RDU Accomplishments in 2012

- Provided 1,050 technical assistance encounters on health care services and funding to over 263 different community-based organizations and health care organizations.
- Alaska's public health nurses provided approximately 75,000 health care visits in FY2012; more than 45,000 of these were to children and youth ages birth to 19 years.
- Of all newborns, 99.9% were screened for metabolic conditions and over 98% of all newborns born in the hospital were screened for newborn hearing loss in calendar year 2011.
- Successfully utilized the Alaska Respond program for electronic registration of volunteer health professionals for disaster assignments in Alaska Shield 2012. A total of 26 trainings were conducted and over 75% of healthcare facilities participated in the Alaska Respond Conference.
- The Obesity Prevention and Control Program launched a social marketing campaign - "Play Every Day". Nearly 7,000 students in 110 schools completed a physical activity challenge that was launched in partnership with Healthy Futures.
- Recommended vaccine series coverage rated increased among 19-35 month-olds from 66.1% in 2010 to 69.0% in 2011, which raised Alaska from 42nd to 39th in the national ranking.
- 11,051 Registered Births, 3839 Registered Deaths, and 5,394 Registered Marriages.
- In collaboration with the King County Medical Examiner's Office, conducted the first outdoor body recovery/buried body recovery and evidence collection training for multiple State of Alaska agencies.
- Provided radiation health support during the Fukushima Daiichi nuclear disaster. The Laboratory Radiation Specialist and laboratory response staff provided factual, scientific information for public reporting and real-time monitoring of radiation data.

Key RDU Challenges

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

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

Other challenges for the Division of Public Health include:

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

Significant Changes in Results to be Delivered in FY2014

- Healthy Alaskans 2020
- Electronic Vital Registration System (EVRS) calls for the death module to be completed in FY2014.
- Tobacco Prevention and Control Grants will consolidate funding of grants and contracts to better serve Alaskans.
- Continue with Phase II of expanding the State Medical Examiner’s Office function to serve statewide needs more adequately.

New Performance Measures for FY2014

In FY2013, the department implemented a results-based management framework which led to:

- a refinement of overarching priorities
- the development of core service areas and agency performance measures
- the alignment of division-level performance measures

This process set in motion an agency-wide shift in how we measure our impact on the health and well-being of Alaskan individuals, families and communities and how we align our budget. With this shift, it is the intent of the department to deliver quality service (effectiveness) while making the best use of public resources (efficiency). At an agency glance, this framework allows department level measures to cascade to divisions and division measures to more strategically align upward towards meaningful outcomes.

To that end, the following measures reflect this division’s contribution to the department performance measure structure for FY2014.

PRIORITY I. HEALTH & WELLNESS ACROSS THE LIFESPAN

CORE SERVICE A. PROTECT AND PROMOTE THE HEALTH OF ALASKANS.

OUTCOME 1. Alaskans are healthy

EFFECTIVENESS MEASURE	Percent of Alaskans who demonstrate improved health status.*	
EFFICIENCY MEASURE	Cost per percentage of improved health.*	
	*AGGREGATE DIVISION MEASURES - (Percent of Alaskans who demonstrate improved health status).	
EFFECTIVENESS MEASURE	Percent of Alaskans who are immunized.	
EFFICIENCY MEASURE	Cost per immunization.	
EFFECTIVENESS MEASURE	Percent of Alaskans who are overweight/obese.	
EFFICIENCY MEASURE	Cost per child of physical education campaign.	
EFFICIENCY MEASURE	Total Women, Infant and Children grant cost per direct service FTE.	
EFFECTIVENESS MEASURE	Percent of Alaskans who receive preventative health screenings.	

	EFFICIENCY MEASURE	Savings realized due to early detection and treatment of childhood disease, disability and conditions (DPH)
	EFFICIENCY MEASURE	Cost per client for screening. (DPH)
	EFFICIENCY MEASURE	Cost per screening. (DBH)
	EFFICIENCY MEASURE	Cost for medical services per resident. (DJJ)
	EFFICIENCY MEASURE	Percent increase of screenings completed within mandatory 30 days from date of entry. (OCS)
	EFFECTIVENESS MEASURE	Rate of high-risk maternal (pre-natal) behaviors.
	EFFICIENCY MEASURE	Cost per client served. (DPH)
	EFFICIENCY MEASURE	Number of clients served by mini-grants. (DPA)
	EFFECTIVENESS MEASURE	Percent of communities that identify and address local health problems.
	EFFICIENCY MEASURE	Cost of MAPP training and support per community.
EFFECTIVENESS MEASURE	Percent of Alaskans reporting very good/good health.	
EFFICIENCY MEASURE	Treatment costs per capita.	

OUTCOME 2. Alaskans are free from unintentional injury

EFFECTIVENESS MEASURE	Number of Alaskans experiencing unintentional injuries.	
EFFICIENCY MEASURE	Cost of injury prevention program per capita.	
	ALIGNING DIVISION LEVEL MEASURES	
	EFFECTIVENESS MEASURE	Percent of non-fatal injuries requiring hospitalization.
	EFFICIENCY MEASURE	Cost of emergency medical services per capita.
	EFFICIENCY MEASURE	Cost of injury prevention program per unintended injuries/deaths.

OUTCOME 3. Alaskans are free from substance abuse and dependency

EFFECTIVENESS MEASURE	Rate of tobacco use by age group.	
EFFICIENCY MEASURE	Cost per capita of Tobacco Prevention & Control program.	

CORE SERVICE B. PROVIDE QUALITY OF LIFE IN A SAFE LIVING ENVIRONMENT FOR ALASKANS.

OUTCOME 2. Older Alaskans live safely in their communities.

	ALIGNING DIVISION LEVEL MEASURES	
	EFFECTIVENESS MEASURE	Number of falls requiring hospitalization among adults 65 and over.
	EFFICIENCY MEASURE	Cost per capita of senior falls campaign.

PRIORITY II. HEALTH CARE ACCESS, DELIVERY AND VALUE

CORE SERVICE A. MANAGE HEALTH CARE COVERAGE FOR ALASKANS IN NEED.

OUTCOME 1. Each Alaskan has a primary care provider.

EFFECTIVENESS MEASURE	Percent of individuals served by the department who have a primary care provider.*	
EFFICIENCY MEASURE	Cost per recipient served by the department who has a primary care provider.*	
	*AGGREGATE DIVISION MEASURES - (Percent of individuals served by the department who have a primary care provider).	
	EFFECTIVENESS	Percent of clients with access to a regular primary care provider.

	MEASURE EFFICIENCY MEASURE	Cost to provide health care services per client.
ALIGNING DIVISION LEVEL MEASURES		
	EFFECTIVENESS MEASURE	Percentage of Medicaid recipients served.
	EFFICIENCY MEASURE	Average cost per recipient. (APH, DBH, DPH, OCS, SDS)

OUTCOME 2. Alaskans with chronic or complex medical conditions receive integrated care.

ALIGNING DIVISION LEVEL MEASURES		
	EFFECTIVENESS MEASURE	Number of clinics providing telehealth services to veterans.
	EFFICIENCY MEASURE	Cost per capita of the veterans telehealth program.
	EFFECTIVENESS MEASURE	Number of women receiving services through the Maternal, Infant and Early Childhood Home Visiting and Healthy Starts programs.
	EFFICIENCY MEASURE	Cost per service recipient of the Maternal, Infant and Early Childhood Home Visiting and Healthy Starts programs.

PRIORITY III. SAFE & RESPONSIBLE INDIVIDUALS, FAMILIES AND COMMUNITIES

CORE SERVICE B. PROTECT VULNERABLE ALASKANS.

OUTCOME 3. Health and social service facilities in which Alaskans are served are safe.

EFFECTIVENESS MEASURE	Percent of licensed facilities that are free from reports of harm.*	
EFFICIENCY MEASURE	Cost for licensure functions and oversight.*	
EFFICIENCY MEASURE	Percent of time that enforcement action is taken within required timeframe. *	
* AGGREGATE DIVISION MEASURES - (Percent of licensed facilities that are free from reports of harm).		
	EFFECTIVENESS MEASURE	Percent of licensed facilities that are free from reports of harm.
	EFFICIENCY MEASURE	Cost for licensure functions/oversight.
	EFFICIENCY MEASURE	Percent of time that enforcement action is taken within required timeframe.

CORE SERVICE C. PROMOTE PERSONAL RESPONSIBILITY AND ACCOUNTABLE DECISIONS BY ALASKANS.

OUTCOME 1. Alaskan communities support tobacco enforcement.

ALIGNING DIVISION LEVEL MEASURES		
	EFFECTIVENESS MEASURE	Number of tobacco free policies adopted.
	EFFICIENCY MEASURE	Cost per capita of Tobacco Prevention & Control program.

OUTCOME 2. Juveniles develop and demonstrate skills in positive decision making.

ALIGNING DIVISION LEVEL MEASURES		
	EFFECTIVENESS MEASURE	Rate of teen births to women 15-17 years old.
	EFFICIENCY MEASURE	Cost per capital of Title X program.
	EFFECTIVENESS MEASURE	Percent of Alaskan children who are overweight/obese.
	EFFICIENCY MEASURE	Cost per child of physical education campaign.

OUTCOME 3. Alaskans with health conditions practice self-management.

EFFECTIVENESS	Percent of clients with chronic disease enrolled in self-management programs.	
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MEASURE EFFICIENCY MEASURE	Cost per client for self-management services.
	ALIGNING DIVISION LEVEL MEASURES
	EFFECTIVENESS MEASURE Rate of tobacco use by age group.
	EFFICIENCY MEASURE Cost per capita of Tobacco Prevention and Control program.

OUTCOME 4. Alaskans choose respect.

EFFECTIVENESS MEASURE	Rate of Domestic Violence/Interpersonal Violence referrals to community services.*
EFFICIENCY MEASURE	Number of clients screened for Domestic Violence/Interpersonal Violence.*
	* DIVISION AGGREGATE - (Rate of Domestic Violence/Interpersonal Violence referrals to community services).
	EFFECTIVENESS MEASURE Rate of Domestic Violence/Interpersonal Violence referrals to community services.*
	EFFICIENCY MEASURE Number of clients screened for Domestic Violence/Interpersonal Violence.*

OUTCOME 5. Alaskans prepare for disaster.

EFFECTIVENESS MEASURE	Percent of Alaskan communities that participated in at least one disaster preparedness activity during state fiscal year.
EFFICIENCY MEASURE	Cost for disaster preparedness training per participant.

Contact Information

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**Public Health
RDU Financial Summary by Component**

All dollars shown in thousands

	FY2012 Actuals				FY2013 Management Plan				FY2014 Governor			
	UGF+DGF Funds	Other Funds	Federal Funds	Total Funds	UGF+DGF Funds	Other Funds	Federal Funds	Total Funds	UGF+DGF Funds	Other Funds	Federal Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
Health Planning & Systems Develo	948.4	3,447.5	1,823.6	6,219.5	4,179.2	1,901.2	2,185.1	8,265.5	4,173.0	1,775.3	2,185.1	8,133.4
Nursing	24,885.0	860.6	3,862.8	29,608.4	27,812.8	906.5	4,838.5	33,557.8	27,813.5	906.5	4,838.5	33,558.5
Women, Children and Family Health	3,587.1	738.6	5,986.7	10,312.4	4,081.9	934.6	7,218.9	12,235.4	4,082.1	934.6	7,219.4	12,236.1
Public Health Admin Svcs	1,489.4	0.0	451.3	1,940.7	1,219.8	403.1	547.9	2,170.8	1,220.7	403.3	548.2	2,172.2
Emergency Programs	1,170.1	298.1	6,032.0	7,500.2	972.0	219.8	7,040.2	8,232.0	972.0	219.8	7,040.2	8,232.0
Chronic Disease Prev/Hlth Promo	2,757.4	458.0	5,333.6	8,549.0	3,526.1	672.2	6,703.2	10,901.5	3,526.1	672.2	6,703.2	10,901.5
Epidemiology	2,500.6	1,406.7	7,327.1	11,234.4	7,941.7	1,853.6	8,317.5	18,112.8	7,942.4	1,854.0	8,318.6	18,115.0
Bureau of Vital Statistics	2,226.0	280.6	185.7	2,692.3	2,452.8	372.9	529.7	3,355.4	2,527.8	372.9	529.7	3,430.4
Emergency Medical Svcs Grants	2,820.6	0.0	0.0	2,820.6	2,820.6	0.0	0.0	2,820.6	2,820.6	0.0	0.0	2,820.6
State Medical Examiner	2,925.4	74.7	0.0	3,000.1	3,102.8	75.0	0.0	3,177.8	3,104.9	75.0	0.0	3,179.9
Public Health Laboratories	4,727.9	1,206.3	892.0	6,826.2	4,669.5	393.0	1,536.0	6,598.5	4,672.5	393.0	1,536.0	6,601.5
Tobacco Prevention and Control	8,233.2	0.0	0.0	8,233.2	8,563.3	0.0	0.0	8,563.3	8,563.3	0.0	0.0	8,563.3
Totals	58,271.1	8,771.1	31,894.8	98,937.0	71,342.5	7,731.9	38,917.0	117,991.4	71,418.9	7,606.6	38,918.9	117,944.4

Public Health
Summary of RDU Budget Changes by Component
From FY2013 Management Plan to FY2014 Governor

All dollars shown in thousands

	<u>Unrestricted</u> <u>Gen (UGF)</u>	<u>Designated</u> <u>Gen (DGF)</u>	<u>Other Funds</u>	<u>Federal</u> <u>Funds</u>	<u>Total Funds</u>
FY2013 Management Plan	56,531.0	14,811.5	7,731.9	38,917.0	117,991.4
Adjustments which will continue current level of service:					
-Health Planning & Systems Develo	-6.2	0.0	-325.9	0.0	-332.1
-Nursing	0.7	0.0	0.0	0.0	0.7
-Women, Children and Family Healt	0.2	0.0	-75.0	0.5	-74.3
-Public Health Admin Svcs	0.9	0.0	0.2	0.3	1.4
-Epidemiology	-359.3	0.0	0.4	1.1	-357.8
-State Medical Examiner	2.1	0.0	0.0	0.0	2.1
-Public Health Laboratories	3.0	0.0	0.0	0.0	3.0
Proposed budget increases:					
-Health Planning & Systems Develo	0.0	0.0	200.0	0.0	200.0
-Women, Children and Family Healt	0.0	0.0	75.0	0.0	75.0
-Epidemiology	360.0	0.0	0.0	0.0	360.0
-Bureau of Vital Statistics	75.0	0.0	0.0	0.0	75.0
FY2014 Governor	56,607.4	14,811.5	7,606.6	38,918.9	117,944.4