

State of Alaska FY2018 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

To protect and promote the health of Alaskans.

Results

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

Core Services

- Diagnose and investigate health problems and health hazards in the community.
- Inform, educate and empower people about health issues.
- Mobilize partnerships and action to identify and solve health problems.
- Develop policies and plans that support individual and community health efforts.
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Assure adequate and competent public health infrastructure and enforcement of health and safety laws/regulations.
- Monitor, research and evaluate health status and service effectiveness, accessibility and quality to identify and solve community health problems.

Measures by Core Service

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

1. Diagnose and investigate health problems and health hazards in the community.
2. Inform, educate and empower people about health issues.
3. Mobilize partnerships and action to identify and solve health problems.
4. Develop policies and plans that support individual and community health efforts.
5. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
6. Assure adequate and competent public health infrastructure and enforcement of health and safety laws/regulations.
7. Monitor, research and evaluate health status and service effectiveness, accessibility and quality to identify and solve community health problems.

Major RDU Accomplishments in 2016

Serve as Alaska's chief strategists for existing and emerging public health issues:

- The Division of Public Health policies and programs continued to be informed by the Division of Public Health Strategic Plan, including work to accomplish six Alaska Winnable Battles – critical areas where we can make significant progress improving the health of Alaskans. Progress on the six Winnable Battles – decrease tobacco use and nicotine dependence; decrease colorectal and cervical cancer; increase access to health care; improve child and adolescent health; decrease infectious disease; and prevent poisoning and overdose – is highlighted throughout this document.
- The health effects of retail marijuana remain largely unknown. The Division of Public Health has played a lead role in mitigating potential negative health effects of legal marijuana sales through development and delivery of public messages. Epidemiology co-led the Alaska Substance Abuse Epidemiology Workgroup with the Alaska Division of Behavioral Health and participated in numerous workgroup activities and outputs pertaining to public health issues regarding marijuana. Last year, no long-term resources were available to support this effort; today, a combination of state and federal resources have been allocated in the section of Chronic Disease Prevention

and Health Promotion to support both marijuana and opioid education efforts, including a position dedicated to coordinating efforts across the department and with external partners as well as creating public information campaigns.

- Tobacco Prevention and Control community grantees continued to increase the number of tribal tobacco-free policies (56 percent of tribes now have comprehensive tobacco-free policies).

Protect life, health, and safety through core public health functions:

- Conducted more than 50 outbreak investigations and significant infectious disease health responses.
- Responded to Zika virus disease concerns among Alaskans returning from overseas travel.
- Collected data on over 240 overdose deaths, including abstraction of autopsy/police investigation reports.
- Environmental issues addressed included a report on mercury exposure due to eating pike and burbot from select Alaskan rivers; investigation of concerns regarding naturally-occurring arsenic in well water in interior Alaska; and groundwater contamination with perfluorinated chemicals (PFCs) in the Fairbanks area.
- Public health nurses provided 54,735 individual client visits and more than 23,600 immunizations against infectious diseases. They screened more than 14,240 individuals for tuberculosis and provided more than 445 individuals affected by tuberculosis with 1,928 nursing visits. Nurses completed Screening and Brief Intervention for Alcohol (SBIRT) in over 10,800 clients, finding that 27 percent of those screened were positive for risky alcohol use; however, treatment and referral options are insufficient to meet the identified need for services.
- The Alaska Public Health Laboratories performed 233,533 laboratory tests, an increase of 27 percent from the previous year. Increases resulted from federally funded Ebola and Zika testing, along with respiratory virus panel and sequencing enhancing diagnostic and epidemiological accuracy.
- The State Medical Examiner's Office investigated 1,867 cases, in which jurisdiction was assumed for 1073 cases. A total of 596 cases were autopsied, with inspections for 265 cases. The office consulted on 212 cases.
- Health Emergency Response Operations coordinated the Department of Health and Social Services response to the Southeast and Western Alaska aircraft incidents. The department provided medical and behavioral health support, essential medical supplies and equipment, and coordinated with support entities to provide essential wrap-around services for affected communities and entities.
- Health Emergency Response Operations deployed its Incident Management Team to the Kotzebue "Arctic Chinook" full-scale exercise, using its staff, mobile communications, emergency operations center equipment, and mobile medical surge facility to support the response to a cruise ship mass rescue/medical operation in the arctic.

Serve as the trusted source of health information

- Published over 26 Epidemiology Bulletins on a wide range of public health topics.
- Multiple sections within the division provided expertise on marijuana-related issues. Public education to promote safe marijuana use among adults and prevent use among youth included an updated website and a new TV public service announcement on the health concerns linked with driving and marijuana use and the potential dangers of consuming marijuana edibles. Epidemiology assembled and released online data and statistics pertaining to marijuana use and hospitalizations.
- Chronic Disease Prevention and Health Promotion provided public education to prevent and reduce opioid misuse and abuse by launching the state's first opioid public education website in partnership with the Department of Health and Social Services Public Information Team.
- Aligning with the Division of Public Health's priority to address issues affecting both public and behavioral health, the Division of Public Health Suicide Toxicology Project will assess substance use as a contributory factor to suicide.
- Responded to and completed 832 standing and 179 ad hoc data analysis requests to state, federal, and external agencies to expedite business processes, aid in reporting, and support program development.
- Health Analytics and Vital Records issued certified copies of certificates to 47,552 individual customers; registered Alaska's 11,153 births, 48 delayed births, 4,270 deaths, and 5,362 marriages; and issued 932 Medical Marijuana Registry cards. The section also completed 3,934 paternities, 1,280 amendments/corrections, and 667 adoptions.
- The Alaska Cancer Registry received national recognition for 16 of the last 17 years for meeting the highest standards for complete, timely and accurate Alaska cancer data. With an estimated 33,340 cancer survivors living in Alaska and approximately 3,000 additional residents diagnosed with cancer every year, high quality data is essential to understand the burden of cancer, find ways to protect Alaskans from getting cancer, and improve treatment for individuals with cancer.

- The Family Violence Prevention Project provided training to help schools across the state to understand the effects of trauma on children's capacity to learn and behavioral problems in the classroom. This effort has led to schools and school districts making modifications in classrooms to help traumatized children to self-regulate and learn, as well as to develop school policies sensitive to the impact of trauma.

Strengthen essential public health infrastructure, services, and partnerships:

- The Division of Public Health strategically reduced or eliminated certain services in order to preserve as many critical functions as possible in the face of reduced general fund support, while preserving essential functions for the Alaska Public Health Laboratory and Public Health Nursing.
- Through a systems integration grant for children with special health care needs, the Section of Women, Children, and Family Health has successfully partnered with a local pediatric practice and the Anchorage School District to pilot the use of a shared plan of care for children with complex medical conditions.
- The Breast and Cervical Health Check (BCHC) program identified two partners, Alaska Primary Care Association and Pinnacle Integrated Medicine, to increase cervical cancer screening rates using electronic health record reminder systems to impact low income patients who do not seek screening services without outreach.
- The Healthy Alaskans 2020 (HA2020) initiative focused efforts on pilot projects, with champions addressing one of four Leading Health Indicators: tobacco, domestic violence, suicide, and poverty. Each champion is a professional in the community reaching out to key partners identified in Healthy Alaskans 2020 as well as partners within their existing networks and coalitions. Groups convene to examine data and strategies statewide to address and advance implementation and outcomes related to each indicator.
- With Office of Healthcare Access oversight, 17 small hospitals received funding and training to improve quality of care to their patients, their operations, and their financial status.
- Alaska's SHARP Program has provided loan repayment and direct incentive payments for 194 healthcare practitioners to-date.
- Alaska Native Medical Center and Providence Alaska Medical Center were the first two healthcare facilities in Alaska to receive pediatric recognition for excellence in care through Emergency Medical Services for Children.
- The Play Every Day campaign established a successful partnership with the Alaska Native Tribal Health Consortium that funded filming and broadcasting the campaign's first two rural TV public service announcements (PSAs) in Bethel and Unalakleet showing how Alaska adults and parents are helping children get 60 minutes of physical activity every day to prevent and reduce childhood obesity.
- The Comprehensive Cancer Control Program collaborated with statewide partners to educate the public and providers, support patient navigation, and increase access to screenings for colorectal cancer. As a result, 60 percent of all Alaska adults now meet the colorectal cancer screening guidelines and 66.4 percent of Alaska Native adults meet those same guidelines, a five percent increase since 2008 for all Alaskan adults and nine percent increase for Alaska Native adults.
- Chronic Disease Prevention and Health Promotion worked to increase referrals to Diabetes Self-Management Programs in six Federally Qualified Health Centers (FQHCs) encompassing 676 Community Health Centers by providing quality improvement training and ongoing coaching to change policies and adopt evidenced-based protocols. The project included 3,635 patients with high blood pressure and 1,081 patients with diabetes.
- Fall-related hospitalizations in older adults are down 3.5 percent since 2012. The Kids Don't Float program is now implemented in 224 communities throughout the state with 600 active loaner boards throughout for water recreationists to borrow life-saving life jackets. A total of 6,866 individuals had their concerns about potential poisoning managed through the Alaska Poison Control Hotline.

Key RDU Challenges

- Deaths from opioid-related overdoses have increased 24 percent from FY2015 to FY2016 and opioid abuse and drug-related injuries and fatalities continue to be a significant concern for Alaska
- Promoting safe marijuana use and the prevention of youth initiation of marijuana are key goals of the Division of Public Health, but there currently is limited funding for this work.
- Substance use among the maternal and child population is an ongoing and increasing concern. Pregnancy Risk Assessment Monitoring System (PRAMS) data indicate that marijuana use during pregnancy has more than doubled in Alaska during the past decade, and nearly eight percent of women delivering in Alaska report use of marijuana during pregnancy. About five percent of established breastfeeding mothers also reported postpartum marijuana use. Neonatal abstinence syndrome due to prenatal maternal opioid use is rapidly increasing and is associated with increased hospitalization costs particularly affecting the Medicaid population.

- For the fourth consecutive year, over 100 individuals were tested for toxic alcohols and glycols. Nineteen individuals were positive for one or more toxic compounds, with more cases of toxic antifreeze ingestions recorded than in the previous eight years.
- Alaska lacks sufficient treatment options for clients found at risk during Alcohol Screening and Brief Interventions. The gap in service availability is even greater for opioid treatment.
- Alaska's immunization coverage rates for children less than 3 years of age are consistently among the lowest in the country, which puts children at increased risk for preventable diseases.
- Alaska's chlamydia and gonorrhea rates are among the highest in the country; both of these infections put women of childbearing age at risk for pelvic inflammatory disease and infertility.
- Alaska's tuberculosis rates are consistently among the highest in the country, which puts all Alaskans at risk for further disease transmission.
- Federal funds to prevent sexually transmitted diseases are declining while infection rates remain alarmingly high; Alaska has limited infrastructure to respond to the ongoing outbreaks.
- Out of hospital births are increasing and in some regions now account for nearly 20 percent of all births in the region. Lack of training among some providers delivering babies out of hospital could lead to an increase in adverse outcomes for mothers and infants of high risk pregnancies who may not receive timely and/or appropriate care.
- The complex reasons for overweight and obesity are challenging and pervasive. Public health addresses obesity by making it easier for Alaskans to engage in healthy behaviors where they live, learn, work, and play: schools, child care settings, health care, workplaces, and communities. Understanding why obesity impacts some Alaskans more than others and how to improve community-clinical linkages are essential for success, but proven interventions are few and guidance is still developing.
- Aging infrastructure is inefficient and perpetuates organizational silos that hamper service integration and effectiveness. Investments in replacement data systems and specialized equipment focus on the highest priority issues but are primarily contingent on available federal funding.

Significant Changes in Results to be Delivered in FY2018

Opioid overdose emerged last year as a significant public health issue because of misuse of prescription pain relievers and greatly increased availability of relatively low-cost heroin. In FY2017, the Division of Public Health successfully sought opioid-specific grants from the Centers for Disease Control and Prevention (CDC) and partnered with Behavioral Health to obtain Substance Abuse and Mental Health Services Administration (SAMHSA) funding to prevent prescription drug and opioid overdose-related deaths. Two Centers for Disease Control and Prevention grants will improve the response time for opioid-related fatal and non-fatal overdoses and the dissemination of findings. A multi-agency approach will be used to prevent opioid abuse, and the Alaska Prescription Drug Monitoring Program will be used by prescribers to identify possible substance abuse. Multi-year Substance Abuse and Mental Health Services Administration funding will enable distribution of naloxone to first responders and the general public, with accompanying education and outreach.

Contact Information
<p>Contact: Melissa M. Ordner, Budget Manager Phone: (907) 465-1629 Fax: (907) 465-8262 E-mail: melissa.ordner@alaska.gov</p>

**Public Health
RDU Financial Summary by Component**

All dollars shown in thousands

	FY2016 Actuals				FY2017 Management Plan				FY2018 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	3,965.5	328.9	2,158.5	6,452.9	2,064.4	511.1	2,419.6	4,995.1	0.0	0.0	0.0	0.0
Nursing	26,076.4	187.8	3,643.8	29,908.0	24,098.8	563.6	4,948.5	29,610.9	24,213.1	564.4	4,949.5	29,727.0
Women, Children and Family Health	3,757.6	421.6	7,511.1	11,690.3	3,721.6	907.6	9,055.2	13,684.4	3,737.6	758.3	9,077.4	13,573.3
Public Health Admin Svcs	1,334.7	0.0	378.2	1,712.9	1,019.8	283.7	582.8	1,886.3	1,024.9	285.0	586.1	1,896.0
Emergency Programs	5,008.8	0.0	4,186.9	9,195.7	1,044.2	219.8	6,884.6	8,148.6	3,044.3	1,531.0	8,353.5	12,928.8
Chronic Disease Prev/Hlth Promo	11,660.8	326.0	3,649.8	15,636.6	10,480.0	485.5	6,934.1	17,899.6	10,393.6	486.5	6,956.0	17,836.1
Epidemiology	10,304.4	676.6	9,395.0	20,376.0	24,819.3	2,159.4	9,291.6	36,270.3	12,751.6	2,085.0	9,332.5	24,169.1
Bureau of Vital Statistics	2,182.1	163.2	233.3	2,578.6	2,345.1	483.7	642.7	3,471.5	2,371.2	484.9	644.6	3,500.7
Emergency Medical Svcs Grants	0.0	0.0	0.0	0.0	3,193.7	0.0	0.0	3,193.7	3,033.7	0.0	0.0	3,033.7
State Medical Examiner	3,041.7	18.5	0.0	3,060.2	3,112.3	75.0	10.0	3,197.3	3,132.6	75.0	10.0	3,217.6
Public Health Laboratories	5,158.9	615.2	1,506.3	7,280.4	4,844.9	843.2	1,518.9	7,207.0	4,867.4	845.7	1,526.7	7,239.8
Community Health Grants	1,521.7	0.0	0.0	1,521.7	1,414.1	0.0	0.0	1,414.1	250.0	0.0	0.0	250.0
Totals	74,012.6	2,737.8	32,662.9	109,413.3	82,158.2	6,532.6	42,288.0	130,978.8	68,820.0	7,115.8	41,436.3	117,372.1

Public Health
Summary of RDU Budget Changes by Component
From FY2017 Management Plan to FY2018 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>
FY2017 Management Plan	44,401.3	37,756.9	6,532.6	42,288.0	130,978.8
One-time items:					
-Health Planning & Systems Develo	0.0	0.0	-240.4	0.0	-240.4
-Chronic Disease Prev/Hlth Promo	0.0	0.0	-10.0	0.0	-10.0
Adjustments which continue current level of service:					
-Health Planning & Systems Develo	-1,363.0	-678.7	-270.7	-2,419.6	-4,732.0
-Nursing	113.0	1.3	0.8	1.0	116.1
-Women, Children and Family Healt	12.6	3.4	0.7	22.2	38.9
-Public Health Admin Svcs	5.1	0.0	1.3	3.3	9.7
-Emergency Programs	1,370.4	679.7	1,311.2	1,637.5	4,998.8
-Chronic Disease Prev/Hlth Promo	13.4	4.0	11.0	21.9	50.3
-Epidemiology	12.4	0.0	0.6	40.9	53.9
-Bureau of Vital Statistics	0.4	25.7	1.2	1.9	29.2
-State Medical Examiner	20.3	0.0	0.0	0.0	20.3
-Public Health Laboratories	21.5	1.0	2.5	7.8	32.8
Proposed budget decreases:					
-Health Planning & Systems Develo	-22.7	0.0	0.0	0.0	-22.7
-Women, Children and Family Healt	0.0	0.0	-150.0	0.0	-150.0
-Emergency Programs	-50.0	0.0	0.0	-168.6	-218.6
-Chronic Disease Prev/Hlth Promo	-103.8	0.0	0.0	0.0	-103.8
-Epidemiology	-91.5	-11,988.6	-75.0	0.0	-12,155.1
-Emergency Medical Svcs Grants	-160.0	0.0	0.0	0.0	-160.0
-Community Health Grants	-1,164.1	0.0	0.0	0.0	-1,164.1
FY2018 Governor	43,015.3	25,804.7	7,115.8	41,436.3	117,372.1