

State of Alaska FY2002 Governor's Operating Budget

Department of Health and Social Services

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Department Mission

To promote and protect the health and well being of Alaskans.

Department Goals and Strategies

HELP CHILDREN STAY HEALTHY AND SAFE

- Improve the state's response to child abuse and neglect by responding to more reports of harm, ensuring that children in state care are placed in safe, quality homes, and moving children in foster care to permanent homes more quickly through continuation of the Balloon Project.
- Develop a system to improve surveillance, treatment and prevention of alcohol-related birth defects.
- Improve the system of sanctions and treatment for underage drinkers.
- Implement strategies to reach the statewide immunization target of 90 percent of all 2-year-old children.
- Improve juvenile justice systems using restorative justice principles.

HELP ALASKANS LIVE HEALTHIER LIVES AND HAVE ACCESS TO BASIC HEALTH CARE TO REDUCE CHRONIC AND PREVENTABLE DISEASE

- Improve access to primary health care for Alaskans in rural areas.
- Develop a State Health Plan.
- Expand capacity to address emerging public health disease issues and the effects of environmental contaminants.
- Ensure the Medicaid program operates humanely and efficiently while providing health care to approximately 100,000 eligible Alaskans.

ASSIST ALASKANS WHO EXPERIENCE DEVELOPMENTAL DISABILITIES, SUBSTANCE ABUSE AND/OR MENTAL ILLNESS TO LIVE INDEPENDENTLY AND REMAIN ECONOMICALLY SECURE

- Refine the Comprehensive Integrated Mental Health Plan in conjunction with consumers, policy boards and the Alaska Mental Health Trust Authority.
- Promote self-sufficiency for adults with disabilities through work incentives.
- Replace the aging Alaska Psychiatric Institute (API) facility, provide improved treatment services at a new API facility, and prevent inappropriate hospitalization by strengthening community-based services for clients.
- Develop and implement a plan for improving services for special needs children.
- Continue mental health program improvements.
- Eliminate the waiting list for infants needing diagnosis and treatment of developmental disabilities.
- Expand treatment options for Alaskans in need of substance abuse treatment.

INCREASE INCENTIVES AND OPPORTUNITIES FOR COMMUNITIES TO COLLABORATE WITH THE DEPARTMENT TO IMPROVE RESULTS FOR CHILDREN AND FAMILIES

- Promote self-sufficiency for families on public assistance, with specific emphasis on families whose 60-month time limit is approaching.
- Continue collaboration with communities and private organizations on service integration projects.
- Improve the regulatory framework and processes for awarding, monitoring and implementing grants for services to assist Alaskans.

ESTABLISH AN INTEGRATED STATEWIDE SYSTEM FOR DATA COLLECTION, ANALYSIS AND REPORTING THAT IMPROVES SERVICES TO ALASKANS

- Continue to link and integrate data from a variety of existing systems, including state and grantee client and management information systems.

- Implement new data systems to improve Juvenile Justice, Developmental Disabilities, Child Protection and Medicaid Services.

PROMOTE EFFICIENT STREAMLINED SYSTEMS IN WHICH EMPLOYEES VALUE THEIR WORK AND MEET CUSTOMER NEEDS

- Continue effort to integrate systematic performance measurement into the department's program planning, budgeting and ongoing operations.
- Improve processes for internal and external communications.

Key Department Issues for FY2001 – 2002

The Federal Medicaid Authorized Percentage (FMAP) statutory formula match rate for Alaska is in flux which could mean the loss of millions in federal dollars and in turn increase state general fund expenditures for Medicaid services to needy Alaskans.

A Prescription Drug program for the elderly through the Medicare program will impact 8,000 Alaskans and could influence funding in the Medicaid program.

Sustaining and building on the successes of Alaska's welfare reform efforts is a pivotal issue. Meeting the demands of federal and state welfare reform mandates and providing opportunities for families to achieve lasting self-sufficiency while maintaining basic safety net services will remain a challenge in fiscal years 2001 and 2002. The 5-year limit on Temporary Assistance is a key element of Welfare Reform and July 2002 marks the first month families in Alaska will face the 60-month limit. Alaska must be prepared and have programs in place to transition these families during this critical period.

The Food Stamp Program quality control payment error rate requires improvement. Nationwide, increased error rates in food stamp payments have been blamed partly on the rapid changes brought about by welfare reform. In Alaska, public assistance agencies have placed greater attention on putting people to work which has resulted in more than forty percent of food stamp recipients reporting some amount of earned income. However, while succeeding in putting people to work, the agencies have had less time to focus on food stamp casework and payment accuracy.

Many Alaskans are needy because diabetes or chronic illnesses keep them from working and many others are elderly and have low incomes. These Alaskans deserve to live with dignity and adequate food, shelter and medical care. Adequate "basic supports" are necessary to avoid dependency, hospitalization or institutionalization. If reductions are made to these "basic supports," there will be an increased demand or dependence on other, more costly services.

Low-income working families need help in finding and paying for affordable, quality childcare. Currently, thousands of Alaska families are on waiting lists for childcare assistance. Without help, many of these families are in danger of losing jobs and reverting to welfare to support their families.

Increased disease investigation by public health professionals to identify contacts and improve follow-up diagnosis, treatment, and education for tuberculosis, HIV, and STDs, as well as improved response to major TB outbreaks are necessary to prevent epidemics and the spread of disease. Due to a major tuberculosis outbreak involving many villages in SouthWest Alaska during FY2000, public health nurses had to find, test and manage treatment for 2,965 exposed, infected or ill individuals. This number compares to 645 people requiring the same services in this area during FY1999. The required diversion of nursing staff and other resources to deal with this outbreak meant immunizations, well-child care and other preventive health services were not as readily available. Also, in Alaska in FY1997, 388 original patients were identified with sexually transmitted diseases with approximately one partner each identified. Based on first quarter numbers for FY2000, it is estimated the number will increase by about 300% to nearly 1,200 original patients with nearly 2,200 partners.

As part of an aggressive immunization campaign at the state and local level, a new vaccine schedule will be implemented to assure that Alaska's children are immunized against preventable childhood diseases. For instance, in 1980, every Alaskan child birth through 19 years of age needed 8 doses of vaccine to be fully immunized and in 2000 every child in the same age group will need 21 doses of vaccine to be fully immunized. This schedule will increase the demands on the public health nursing system and will require an increased level of effort over time to maintain full immunization.

Environmental contaminants in subsistence foods has emerged as a major issue for Alaska subsistence consumers. Because the science base that underlies risk assessment methodology is controversial and unsettled, considerable public health expertise is required to answer the question, "Is this food safe to eat?"

The level and extent of substance abuse - which contributes to child abuse, adult and juvenile crime, health problems and dependence - fuels the need for maintaining or increasing substance abuse prevention, intervention and treatment services. Substance abuse is a factor in more than 75 percent of all cases of child abuse and neglect and more than 80 percent of all adult crimes. Increased opportunities for alcohol treatment are necessary to reduce the level of abuse and to protect the public.

As custodian to more than 2,700 Alaskan children, the state must take every reasonable action to assure the safety of these children. Increased resources for Foster Care and Subsidized Adoption are required to provide sufficient safe placements for these children.

Improvements in both the level and quality of child protection workers' response to reports of child abuse and neglect has inevitably increased the number of children placed in foster or residential care for protection. The number of children in state custody increased by more than 300 in the past year and more than 500 in the past two years. As the response to child abuse continues to improve, there is an increased need to provide safe care for children in custody through foster and residential care placements. Additionally, services to safely re-unite children with their families must also increase to prevent unnecessary out-of-home care. An adequate number of child protection workers is needed to monitor the safety of children in custody.

Aggressive efforts are needed to address the backlog of children in state care. Additional adoptive homes or other permanent placements are needed for children who cannot be safely returned to their own homes. Under the state's new child protection law, the state has reduced timeframes for moving children into permanent placements. Continuation of special project resources, i.e. Balloon Project and Project SUCCEED, targeted toward achieving speedy legal resolution of child protection cases, increasing the number of adoptive homes available, and implementing permanent placements for the children who have been in foster care the longest are crucial.

An insufficient number of juvenile probation officers delays and reduces effective response to juvenile crime and efforts to increase offender accountability. The lack of available staff to provide early intervention is particularly felt in rural areas where the rate and severity of offenses has increased. Caseloads are more than twice the nationally recommended level, 31 vs. 12.

The Division of Juvenile Justice has recently published a report documenting the extent of the problem of underage drinking. The department seeks to expand outpatient and inpatient treatment for youth so that treatment is available when recommended.

In providing for sustained community-based, individualized services for developmentally disabled consumers, it is necessary to insure that payment for Medicaid services is accurate and timely so that quality services are provided to all eligible consumers. The Waiver Task Force is currently addressing this issue by working more closely with service providers and claims processors.

The State of Alaska needs to resolve the API 2000 project to find a replacement facility solution for the old facility. Full implementation of the community based services plan will provide for enhanced services in Anchorage. Adequate funding is necessary for the overall API plan to be carried out.

The state has been found to be non-compliant with federal law relating to the sale of tobacco to minors. Funding is requested to replace the anticipated loss of federal substance abuse treatment block grant funds that will be withheld as a result of non-compliance. In order to minimize the likelihood of the loss of additional federal funds, the department will work to streamline and make more effective the state law prohibiting the sale of tobacco to minors.

Major Department Accomplishments in 2000

- Implementation of Medicaid Pro-Share in which states like Alaska are allowed to receive intergovernmental transfers of funds to use within the Medicaid program. These funds can be used as match for federal funds, thus

reducing the need for state general fund match. This funding mechanism enabled the department to continue to provide Medicaid services to an average of 76,664 clients each month during FY2000. There are an estimated 2,400 providers participating in the medical assistance program out of approximately 8,000 enrolled in the program.

- The Denali KidCare program has expanded health care coverage to approximately 15,000 children since inception. Alaska is one of the most successful states in signing up uninsured children according to national rankings.
- Reduced Temporary Assistance total caseload to 7,987 families, the lowest point since 1991, when two-parent families were added to the old AFDC program, 40% below the historical peak in 1994.
- Reduced expenditures for Temporary Assistance payments from \$75.0 million in FY1999 to \$63.9 million in FY2000. This 15% savings contributes to a 44% savings over the past two years. These savings are from reduced payments due to client earnings and case closures.
- Improved social worker response to reports of child abuse and neglect. In FY1995 77% of legitimate reports of harm were assigned to social workers. By FY2000, 89% of these reports were assigned.
- Foster Care caseload growth had averaged an annual growth rate of 16.6% for FY1998 and FY1999. In FY2000 the growth rate was 5.8%, a significant decline. This reduction is, in part, a reflection of the success of State permanency planning initiatives like the Balloon Project and Project SUCCEED. Children that have been in custody the longest are moving from the Foster Care system into permanent homes. From FY1992 to FY2000 the number of children removed from the foster care system and placed in permanent homes increased from 338 to 1332.
- New facilities to meet critical program needs (a new public health laboratory and youth detention facilities in Anchorage and Mat-Su) are on schedule and within budget and will require operating support to become functional.
- Provided services to 304 additional consumers who had been on the developmental disabilities waitlist, increasing the total number of clients served to 2,460 persons.
- Public Health managed and responded to major tuberculosis (TB) outbreaks in several areas of the state. These increased efforts came at the expense of reducing other public health services.
- Implemented an aggressive immunization campaign at the state and local level. This significantly increased the immunization levels for young children against Hepatitis A and B; ensured that all Alaskan school age children are adequately immunized against measles to prevent another measles outbreak; and simultaneously increased the number of two year olds who are adequately immunized.
- Continued state's response to fetal alcohol syndrome (FAS) by conducting more than 200 medical chart reviews as part of the FAS Surveillance Project and by establishing and training FAS Multidisciplinary Community Teams in Bethel, Dillingham and Copper Center.
- On a department-wide level, completed a successful program that assured that all "mission-critical" systems were Y2K compliant.
- Initiated Grant Reform process to streamline services to grantees and clients.

Key Performance Measures for FY2002

Measure: The percent of ordered restitution and community work service that is paid or performed by the Juvenile Offender.

(Developed jointly with Legislature in FY2001.)

Current Status:

Development of the community work service component is on track. The DJJ hopes to have FY2000 data by December 2000.

Benchmark:

For the restitution measure the benchmark is 79%

For the community work service measure the benchmark is 83%

Background and Strategies:

This performance measure consists of two aspects that provide a gauge of DJJ's effectiveness in assisting delinquent youth in being accountable to their victim and communities for their delinquent behavior, and in encouraging youth providing restoration to victims and communities for the damage resulting from their delinquent behavior.

Definition: This measure consists of:

- The percentage of restitution paid for cases where there was a restitution order (either by the court or the Probation Officer). This measure is determined at case closure.
- The percentage of community work service performed for cases where there was a community work service order (either by the court or the Probation Officer). This measure is determined at case closure.

Case closures occur when a court order has been given to close a case, a court order has expired, or informal adjustment has been made by the Probation Officer.

Measure: The percentage of child protective services legitimate reports of harm assigned for an investigation will increase to 90% for FY2001.

(Developed jointly with Legislature in FY2001.)

Current Status:

Preliminary information for the first quarter of FY2001 shows the total number of legitimate reports of harm assigned for investigation was 92%. Historically, first quarter caseloads are lower than the last three quarters of a fiscal year and the percent of assigned cases is expected to go down slightly.

Note: Due to the seasonality involved in Reports of Harm, data for a full fiscal year will be used for comparison purposes.

Benchmark:

In FY1997, 73.6% of legitimate reports of harm were assigned for investigation in Alaska.

Background and Strategies:

Increased number of child protection workers to respond to more reports; better training and less turnover among these workers.

Percent of legitimate reports of harm assigned for investigation:

FY1997: 73.6%

FY1998: 77.3%

FY1999: 78.1%

FY2000: 88.8%

FY2001 Preliminary: 92%

Measure: Child Health Improvements - Increase the number of 2-year olds fully immunized to 90% by the year 2001.

(Developed jointly with Legislature in FY2001.)

Current Status:

The percentage of fully immunized 2-year-olds for calendar year 1999 was 80.1%.

Benchmark:

69% were immunized by the end of 1996.

Background and Strategies:

In 1997, the Department launched a major initiative to increase the rate of fully immunized two-year-olds. In three years, we have jumped up 20 positions, going from 48th to 28th in national rankings. Now, over 80% of our two-year-old children have received their recommended vaccines. Alaska's comprehensive public-private initiative to increase childhood immunization rates will be extended through 2002 to achieve the highest possible immunization rates and to assure that Alaska children in school and daycare will have all required immunizations by the fall of 2001.

Measure: Child Health Improvements - Decrease rates of smoking by middle school students.

(Not yet addressed by Legislature.)

Current Status:

The Youth Risk Behavior Survey (YRBS) is a survey tool given in schools to a random sample of students in various grades. In 1999, according to the YRBS data, 21% of middle school students reported smoking within the last 30 days. (Sample did not include Anchorage students.)

Benchmark:

In 1995, according to the YRBS data, 25% of middle school students reported smoking within the last 30 days. (Statewide sample.)

Background and Strategies:

According to information gleaned from the YRBS, between early 1995 and early 1999 there was a 7% decrease in overall current smoking for high school youth in Alaska. During this same period of time there was a 1% decrease in smokeless tobacco use. Plans are underway for the YRBS to be administered statewide in the spring of 2001. The new parental consent law for surveys has significantly increased the burden on local school districts. The value of the YRBS data may be compromised as a result of the constraints that the new law imposes on districts.

During the 1999 survey, the Anchorage School district did not participate, so the state 1995 to state 1999 comparisons listed above do not include Anchorage for 1999. We are continuing to do analysis to determine changes for the various age groups and will have additional data within the next six months. However, preliminary analysis indicates much larger increases for the younger children (i.e. 9th grade vs. 12th grade). Utilizing tobacco settlement dollars and other funds in an on-going public-private partnership, the Department intends to intensify the effort to decrease smoking and use of smokeless tobacco by youth for the next several years. These efforts will include counter-marketing efforts, enforcement of laws prohibiting sales to minors, etc. An increased focus will be related to the use of smokeless tobacco since the decline in that area has been so minimal.

Measure: API 2000 Community Implementation Plan - Decrease the average number of publicly funded psychiatric hospital days used per hospitalized person. (SB 281, modified)

(Developed jointly with Legislature in FY2001.)

Current Status:

In FY00 the average was 10 days.

Benchmark:

In FY98 the average stay was 14 days. (excludes data on consumers in residence at API longer than 6 months)

Background and Strategies:

The purpose of the Community Mental Health/API 2000 Project (CMHP) is to replace the aging API with a new facility, make it possible to safely operate with reduced inpatient capacity by increasing and enhancing community-based

mental health and substance abuse services in Anchorage, and further improve inpatient hospital care provided within API.

The new and enhanced services that are a part of the CMHP were designed to specifically impact the number of admissions to API from the Anchorage area and reduce the number of patient days. These new and enhanced Anchorage community services either are -- or are coming -- on line at this time. The first new service started in October of 1999, providing intensive, extended care services for 6 long-term API patients. Enhanced and expanded crisis respite care started in September of 2000, and enhanced detoxification and residential dual diagnosis services began in October of 2000.

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001.

(Not yet addressed by Legislature.)

Current Status:

There was a small increase to 2.67 gallons per capita for FY99.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free. The twenty year old excise tax has not recently been adjusted for inflation and cost may no longer be a deterrent.

The data indicates Alaska's consumption rate may not continue the decrease experienced in prior years. (From FY90 to FY98 Alaska experienced an overall decline). The rate (gallons per capita) decreased from 2.64 in FY97 to 2.51 in FY98.

Measure: Percent of ATAP families meeting Federal Work Participation rates.

(Added by Legislature in FY2001 version.)

Current Status:

In March 2000, 38% of all Temporary Assistance families were in countable work activities and had sufficient hours to meet the federal participation rate requirements. At that time, almost 55% of Temporary Assistance families were in countable work activities but not all had enough hours of participation to count in the federal participation rate calculation.

According to the U.S. DHHS Third Annual Report to congress on the TANF program, Alaska ranked 8th in the nation for the percentage of adults in unsubsidized employment and in the average number of hours for adults in unsubsidized employment. Only one state ranked higher in both of these critical measures of success.

Benchmark:

Federal law requires that states meet work participation requirements:

FFY 1997 25% of all families

FFY 1998 30%

FFY 1999 35%

FFY 2000 40%

FFY 2001 45%

FFY 2002 50%

However, every state's federal work participation rate is adjusted by a caseload reduction credit that reflects the state's success in moving families off of assistance and into employment. In FFY 2000, Alaska caseload reduction credit was 29%. Based on the caseload reduction credit, Alaska's work participation target was 11%. Thus Alaska more than met the adjusted federal participation requirement.

Background and Strategies:

The Temporary Assistance program is a work-focused program to help Alaskans plan for self-sufficiency and to make a successful transition from welfare-to-work. Federal law requires the state to meet work participation requirements. Failure to meet federal participation rates results in fiscal penalties.

Measure: Percentage of Alaskan providers participating in the Medical Assistance program.
(Developed jointly with Legislature in FY2001.)

Current Status:

	Enrolled	Participating	Percent Participating
Physicians	3,806	802	21.07
Physicians(group)	115	96	83.48
Dentists	490	192	39.18
Dentists(group)	21	15	71.43
Pharmacies	198	115	58.08
Hospitals	25	25	100.00
Nursing Homes	15	15	100.00

Enrolled: 8,040
 Participating: 2,358
 All Other*: 5,682
 % Participating: 29.33%

* The all other category includes all enrolled providers who are not participating. A participating provider is defined as a provider that has billed Medicaid for services one or more times in the past calendar year. Please see benchmark narrative.

Benchmark:

The Division has measured participation by physicians, pharmacies, dentists, inpatient hospitals, and nursing homes during FY2000. Participation rates compare licensed Alaskan providers with Medicaid enrolled and participating providers (i.e. those providers reimbursed for services).

Background and Strategies:

This is a measure of Alaska's medical assistance clients' access to medical services through the same network of medical providers available to the balance of the State's population.

Status of FY2001 Performance Measures

	Achieved	On track	Too soon to tell	Not likely to achieve	Needs modification
<ul style="list-style-type: none"> The Percent of Ordered Restitution and Community Work Service That is Paid or Performed by the Juvenile Offender. The percentage of child protective services legitimate reports of harm assigned for an investigation will increase to 90% for FY2001. Child Health Improvements - Increase the number of 2-year olds fully immunized to 90% by the year 2001. Child Health Improvements - Decrease Rates of smoking by middle school students. 		X	X		

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • API 2000 Community Implementation Plan - Decrease the number of psychiatric hospital days used per person that are publicly funded. • Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001. • Percent of ATAP families meeting Federal Work Participation rates. • Percentage of Alaskan providers participating in the Medical Assistance program. 	X			X	
		X			
			X		

Department Budget Summary by BRU

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
Public Assistance	88,745.9	18,979.5	25,844.1	133,569.5	91,055.1	23,309.3	27,572.2	141,936.6	87,449.9	18,870.7	25,015.1	131,335.7
Medical Assistance	145,514.7	307,508.4	17,685.9	470,709.0	143,688.7	318,028.4	24,295.2	486,012.3	161,506.1	368,479.3	23,022.2	553,007.6
Catastrophic & Chronic Illness	3,653.5	0.0	0.0	3,653.5	4,304.4	0.0	0.0	4,304.4	0.0	0.0	0.0	0.0
Public Assistance Admin	6,102.1	33,051.9	0.0	39,154.0	3,000.0	28,852.0	0.0	31,852.0	3,000.0	30,102.0	0.0	33,102.0
Medical Assistance Admin	2,234.0	12,352.1	0.0	14,586.1	2,545.5	13,554.6	0.0	16,100.1	4,026.1	16,502.2	405.0	20,933.3
Purchased Services	20,313.7	5,734.2	443.9	26,491.8	20,733.5	7,010.9	2,619.8	30,364.2	24,415.6	8,025.1	1,129.4	33,570.1
Non-Formula Expenditures												
Public Assistance	0.0	6,638.2	0.0	6,638.2	0.0	5,516.1	0.0	5,516.1	0.0	6,931.8	0.0	6,931.8
Public Assistance Admin	19,078.7	25,201.3	3,243.1	47,523.1	19,644.1	29,667.4	2,223.4	51,534.9	19,741.3	32,659.3	2,619.2	55,019.8
Medical Assistance Admin	6,970.6	13,640.3	418.5	21,029.4	7,544.9	14,971.3	405.0	22,921.2	6,601.2	13,573.9	101.4	20,276.5
Children's Trust Programs	0.0	0.0	312.8	312.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Purchased Services	11,952.6	4,839.9	2,358.6	19,151.1	13,513.4	3,466.2	400.0	17,379.6	13,513.4	4,066.2	1,625.0	19,204.6
Front Line Social Workers	8,775.0	9,546.2	1,000.9	19,322.1	9,580.1	9,603.0	882.7	20,065.8	13,474.3	8,853.8	1,605.1	23,933.2
Family and Youth Services Mngmt	1,732.7	2,431.3	232.2	4,396.2	1,445.5	2,467.3	457.0	4,369.8	1,443.7	2,459.4	455.6	4,358.7
Family and Youth Services Staff	419.7	617.0	0.0	1,036.7	436.5	717.0	0.0	1,153.5	436.5	717.0	0.0	1,153.5
Child Protection	440.0	0.0	0.0	440.0	440.0	0.0	0.0	440.0	440.0	0.0	0.0	440.0

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Legal Assist.												
Juvenile Justice	24,193.8	311.1	943.4	25,448.3	27,858.2	3,782.9	692.4	32,333.5	30,558.9	3,782.8	899.7	35,241.4
Human Svcs	410.9	0.0	1,306.0	1,716.9	410.9	0.0	1,306.0	1,716.9	410.9	0.0	1,306.0	1,716.9
Comm Matching Grant												
Maniilaq	3,045.3	0.0	33.0	3,078.3	3,045.3	0.0	0.0	3,045.3	3,045.3	0.0	83.0	3,128.3
Norton Sound	2,453.5	0.0	17.6	2,471.1	2,453.5	0.0	0.0	2,453.5	2,453.5	0.0	67.6	2,521.1
SEARHC	565.7	0.0	11.0	576.7	565.7	0.0	0.0	565.7	565.7	0.0	11.0	576.7
Kawerak Social Services	372.7	0.0	0.0	372.7	372.7	0.0	0.0	372.7	372.7	0.0	0.0	372.7
Tanana Chiefs Conference	1,255.1	0.0	16.5	1,271.6	1,255.1	0.0	0.0	1,255.1	1,255.1	0.0	16.5	1,271.6
Tlingit-Haida	198.4	0.0	0.0	198.4	198.5	0.0	0.0	198.5	198.5	0.0	0.0	198.5
Yukon-Kuskokwim Health Corp	2,742.2	0.0	31.9	2,774.1	2,742.2	0.0	0.0	2,742.2	2,742.2	0.0	81.9	2,824.1
State Health Services	26,707.0	32,637.6	15,474.8	74,819.4	26,548.6	39,121.2	19,858.1	85,527.9	30,549.9	50,702.7	20,010.6	101,263.2
Alcohol & Drug Abuse Svcs	17,256.4	7,784.5	1,748.3	26,789.2	17,446.9	16,254.1	2,344.7	36,045.7	25,585.4	15,380.7	1,872.8	42,838.9
Community Mental Health Grants	24,586.7	1,215.6	1,814.7	27,617.0	24,758.7	3,228.7	3,124.3	31,111.7	26,990.0	4,373.9	3,551.8	34,915.7
Community DD Grants	19,058.0	0.0	1,235.0	20,293.0	18,506.7	0.0	1,492.4	19,999.1	18,626.7	185.1	1,222.4	20,034.2
Institutions & Administration	4,593.4	1,875.2	16,058.1	22,526.7	7,163.8	3,230.2	14,018.0	24,412.0	9,036.2	1,612.4	12,700.4	23,349.0
Mental Health Trust Boards	621.4	863.9	734.0	2,219.3	649.0	1,085.8	871.3	2,606.1	705.1	1,635.3	789.2	3,129.6
Administrative Services	3,242.5	1,668.8	1,682.2	6,593.5	3,369.4	1,862.7	1,715.7	6,947.8	3,363.1	2,031.4	1,838.7	7,233.2
Facilities Maintenance	0.0	0.0	0.0	0.0	449.3	175.7	2,584.9	3,209.9	452.2	237.2	2,584.9	3,274.3
Y2K approp	600.0	1,800.0	38.7	2,438.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Totals	447,836.2	488,697.0	92,685.2	1,029,218.4	455,726.2	525,904.8	106,863.1	1,088,494.1	492,959.5	591,182.2	103,014.5	1,187,156.2

Funding Source Summary

All dollars in thousands

Funding Sources	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
1001 Constitutional Budget Reserve Fund	600.0		
1002 Federal Receipts	484,599.1	521,428.3	591,180.2
1003 General Fund Match	167,726.0	160,276.8	180,555.6
1004 General Fund Receipts	142,393.2	164,774.7	186,046.7
1005 General Fund/Program Receipts	4,314.8	2,012.0	2,021.7
1007 Inter-Agency Receipts	53,377.4	50,438.6	49,912.6
1013 Alcoholism & Drug Abuse Revolving Loan	2.0	2.0	2.0
1037 General Fund / Mental Health	103,472.5	107,035.8	113,465.5
1047 Title XX	4,095.9	4,474.5	
1050 Permanent Fund Dividend Fund	17,222.0	17,518.1	16,147.3
1053 Investment Loss Trust Fund		703.8	
1061 Capital Improvement Project Receipts	598.3	986.3	1,079.5
1092 Mental Health Trust Authority Authorized Receipts	3,665.9	8,102.1	6,026.1
1098 Children's Trust Fund Earnings	312.8		
1108 Statutory Designated Program Receipts	17,508.8	28,892.9	28,763.9
1119 Tobacco Settlement	29,329.7	20,923.1	10,870.0
1156 Receipt Supported Services		925.1	1,085.1
Totals	1,029,218.4	1,088,494.1	1,187,156.2

Position Summary

Funding Sources	FY2001 Authorized	FY2002 Governor
Permanent Full Time	2,243	2,381
Permanent Part Time	60	59
Non Permanent	13	26
Totals	2,316	2,466

FY2002 Capital Budget Request

Project Title	General Funds	Federal Funds	Other Funds	Total Funds
Deferred Maintenance, Renewal, Replacement, and Equipment	1,000,000	352,000	0	1,352,000
Public Health Nurse, Probation Officer, Social Worker Safety and Support Equipment	500,000	2,331,000	0	2,831,000
Juneau Public Health Center Heating and Ventilation Upgrades	480,000	105,400	0	585,400
Residential Child Care Facility Capital Needs Assessment and Grant Program	150,200	0	349,800	500,000
Emergency Communications: Emergency Medical Services	341,600	0	0	341,600
Emergency Medical Services Equipment Grants - Match for Code Blue Project	533,400	0	0	533,400
Alaska Psychiatric Institute Stop-Gap Repairs	379,500	0	0	379,500
Housing Modifications for Trust Beneficiaries and People with Disabilities	0	0	250,000	250,000
Substance Abuse Treatment for Rural Women with Children	250,000	0	250,000	500,000
Deferred Maintenance, Americans with Disabilities Improvements to Service Providers for Beneficiaries, People with Disabilities	400,000	0	500,000	900,000
Program Equipment Grants to Service Providers for Trust Beneficiaries and People with Disabilities	0	0	250,000	250,000
Recovery Camps	0	0	100,000	100,000
Hearing Screening Assistive Technology	0	0	100,000	100,000
Consumer Designed and Managed Projects	0	0	175,000	175,000
Micro Enterprise Funds	0	0	150,000	150,000
Provider Resource Sharing and Coordination	0	0	150,000	150,000
Department Total	4,034,700	2,788,400	2,274,800	9,097,900

This is an appropriation level summary only. For allocations and the full project details see the capital budget.

Overview of Departmental Budget Changes

The FY2002 Operating Budget for the Department of Health and Social Services is based on the following themes:

First, Finish what the Knowles' Administration Started; second, Protect the Public; and third, Maintain the Safety Net. These themes are consistent with the department's goals and strategies for the FY2002 budget.

The first theme, to finish what we have started, continues efforts currently underway or completes projects begun during the Knowles' Administration. While many efforts fall into this category the following summarizes the key areas.

- Continue SMART START efforts, particularly in Child Protection. The FY2002 budget for the Division of Family and Youth Services (DFYS) will increase by \$7.6 million GF in the Governor's budget proposal. Foster Care increases are supported at a 6% growth rate, which is the lowest rate in five years. The Department believes that efforts like the Balloon project have been instrumental in reducing the Foster Care rate and recommends continuation of the Balloon Project as an on-going activity with a transfer of savings from Welfare Reform. Subsidized Adoption and Guardianships are funded and expected to increase by 14% in FY2002. Due to changes at the federal level, federal TANF funds are capped and can no longer be used for many programs within DFYS, so \$2.5 million in general funds must be used to replace the loss of federal resources. Finally, the budget proposal continues to fund innovative ideas such as case note transcription services, implementation of new risk and safety tool techniques, and continuation of the Psychiatric Nurse Program, to assist in streamlining functions to assist social workers in performing their difficult job.
- Annualize funding (\$1.8 million GF) for projects partially funded in the FY2001 budget. Projects which require additional funding are: the 30 detention beds at McLaughlin Youth Center, the 15 beds at Mat-Su Youth Facility, the 10 beds at Ketchikan Youth Facility, the Kenai Public Health Nursing Center, and the State Medical Examiner and Public Health Laboratory.
- In 1995 Governor Knowles initiated a Conference on Youth and Justice. The conference recommended a number of improvements to the Juvenile Justice system. The FY2002 budget continues the effort started years earlier by recommending funding in the Youth Probation system to reduce caseloads of Juvenile Probation Officers. Currently Youth Probation has caseloads that are two and half times the national recommended caseload (31 Alaska vs. 12). The FY2002 effort would add 9 Juvenile Probation Officers (Anchorage, Bethel, Dillingham, Kenai, Ketchikan, Kodiak, and Valdez) and reduce the per worker overall caseload from 31 to 28.
- One project that has a long history and that the Department is committed to finishing is API 2000. The proposed budget includes funds for community mental health services and API to make progress toward completion.

The second theme is to Protect the Public. The Department of Health and Social Services routinely provides basic public protection functions in a variety of programs. In particular, the Division of Public Health has a responsibility to ensure the Alaskan public is protected from infectious diseases and environmental concerns that could impact the public health. The initiative contained in the FY2002 budget would provide \$2.7 million GF to focus on these five efforts:

- Improve efforts to fight the re-emergence of Tuberculosis (TB) in Alaska. Active TB outbreaks have recently occurred in Anchorage and Western Alaska and resources are needed to improve response, testing, direct observed therapy, laboratory analysis, and epidemiological follow-up.
- Increase the capacity to manage increased caseload for sexually transmitted diseases (STD).
- A new vaccine schedule for children and demands for service will greatly affect the public health system throughout Alaska and will require an increased level of effort.
- Bacterial and viral outbreaks continue to occur in Alaska. The frequency and complexity of cases have affected the public health system in Alaska beyond its capacity.
- Environmental contaminants are causing increasing concern in Alaska. In particular the Division of Public Health must have the capability to assess the effect on subsistence foods.

In addition, the FY2002 budget contains significant resources to combat the disease of Alcoholism, to protect the public and provide resources for treatment.

- In response to recommendations from the Criminal Justice Assessment Commission and the Anchorage Driving Under the Influence Prevention Task Force, the FY2002 budget includes increased funding to stabilize and restore Alcohol Safety Action Program (ASAP) services.
- Expand the rural human services program to provide assessment and referral services at the local level for alcohol and mental health services.
- Continues alcohol treatment for women with children.
- Provides funding for grants to provide transitional housing in smaller communities for individuals leaving out-of-town treatment programs.
- Expands the rural family recovery camps program which have proven to be particularly effective for the Alaskan Native population.
- Increases alcohol treatment capacity for both adult and juvenile clients.

The third theme is to maintain the safety net. The Department of Health and Social Services is required to provide safety net services to the poor and disadvantaged. Services and supports are provided through a variety of statutory programs.

- Use savings from reduced ATAP payments due to Welfare Reform to fund other department priorities as well as decreasing general funds in the budget.
- Fund Adult Public Assistance at expected 4.7% increased need.
- Continue Medicaid program which funds health care for low-income adults, children, elderly and disabled individuals. The current request for Medicaid is based on a low-case scenario.
- Increase funding for Mental Health beneficiary programs including the Infant Learning programs, developmental disabilities, community mental health programs, and API.

Many of the Alaska Mental Health Trust Authority recommendations are included in this section of the FY2002 budget.

Summary of Department Budget Changes by BRU

From FY2001 Authorized to FY2002 Governor

All dollars shown in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	455,726.2	525,904.8	106,863.1	1,088,494.1
Adjustments which will continue current level of service:				
-Public Assistance	-4,171.7	-4,237.9	0.0	-8,409.6
-Medical Assistance	-24.5	0.0	-1,273.0	-1,297.5
-Public Assistance Admin	-2.8	4,241.9	6.1	4,245.2
-Medical Assistance Admin	-2.1	-6.2	1.0	-7.3
-Purchased Services	1,000.0	0.0	0.0	1,000.0
-Front Line Social Workers	3,244.2	34.1	-127.6	3,150.7
-Family and Youth Services Mngmt	-1.8	-7.9	-1.4	-11.1
-Juvenile Justice	20.8	-0.1	0.2	20.9
-State Health Services	987.3	-170.5	-818.9	-2.1
-Alcohol & Drug Abuse Svcs	2,165.4	-1,453.4	-711.9	0.1
-Community Mental Health Grants	1,159.5	1,145.2	0.0	2,304.7
-Community DD Grants	120.0	185.1	-120.0	185.1
-Institutions & Administration	554.2	-1,728.0	-18.9	-1,192.7
-Mental Health Trust Boards	56.1	-0.5	-57.1	-1.5
-Administrative Services	-6.3	-3.5	-1.9	-11.7
-Facilities Maintenance	2.9	0.0	0.0	2.9
Proposed budget decreases:				
-Public Assistance	-1,028.3	-200.0	-2,642.1	-3,870.4
-Public Assistance Admin	0.0	0.0	-62.0	-62.0
-Purchased Services	0.0	0.0	-1,590.4	-1,590.4
-Front Line Social Workers	0.0	-943.3	0.0	-943.3
-Community Mental Health Grants	0.0	0.0	-200.0	-200.0
-Community DD Grants	0.0	0.0	-150.0	-150.0
-Institutions & Administration	0.0	0.0	-767.8	-767.8
-Mental Health Trust Boards	0.0	0.0	-40.0	-40.0
Proposed budget increases:				
-Public Assistance	1,594.8	1,415.0	85.0	3,094.8
-Medical Assistance	13,537.5	50,450.9	0.0	63,988.4
-Public Assistance Admin	100.0	0.0	451.7	551.7
-Medical Assistance Admin	539.0	1,556.4	100.4	2,195.8
-Purchased Services	2,682.1	1,614.2	1,325.0	5,621.3
-Front Line Social Workers	650.0	160.0	850.0	1,660.0
-Juvenile Justice	2,679.9	0.0	207.1	2,887.0
-Manilaq	0.0	0.0	83.0	83.0
-Norton Sound	0.0	0.0	67.6	67.6
-SEARHC	0.0	0.0	11.0	11.0
-Tanana Chiefs Conference	0.0	0.0	16.5	16.5
-Yukon-Kuskokwim Health Corp	0.0	0.0	81.9	81.9
-State Health Services	3,014.0	11,752.0	971.4	15,737.4
-Alcohol & Drug Abuse Svcs	5,973.1	580.0	240.0	6,793.1
-Community Mental Health Grants	1,071.8	0.0	627.5	1,699.3
-Institutions & Administration	1,318.2	110.2	-530.9	897.5
-Mental Health Trust Boards	0.0	550.0	15.0	565.0
-Administrative Services	0.0	172.2	124.9	297.1

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
-Facilities Maintenance	0.0	61.5	0.0	61.5
FY2002 Governor	492,959.5	591,182.2	103,014.5	1,187,156.2

Public Assistance Budget Request Unit

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BRU Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

To meet this mission, the Division administers programs that provide temporary economic support to needy families and individuals, financial assistance to the elderly, blind and disabled, benefits to supplement nutrition, medical benefits, and supportive services that enable and encourage welfare recipients to pursue economic independence and self-sufficiency.

BRU Services Provided

The Public Assistance BRU provides cash, food and heating assistance to needy Alaskans. The major programs are Alaska Temporary Assistance (ATAP), Food Stamps, Adult Public Assistance (APA), General Relief Assistance, Heating Assistance, and Native Family Assistance. These programs provide an economic safety net for individuals and families that need help to support themselves and their children. Preventing dependency, promoting self-sufficiency and supporting clients toward obtaining employment and jobs capable of supporting a family is a major responsibility of the Division.

BRU Goals and Strategies

PROVIDE SAFETY NET AND SELF-SUFFICIENCY SERVICES FOR NEEDY FAMILIES AND PROVIDE BASIC NEEDS FOR POOR ELDERLY, BLIND AND DISABLED INDIVIDUALS.

- Provide assistance to needy families so they can care for their children in their own homes, providing the basic needs of shelter, home heating, clothing, transportation and food.
- Encourage family self-sufficiency and stability by planning for self-support through employment, receipt of child support and prevention of unplanned and out-of-wedlock pregnancies.
- Provide financial assistance to needy aged, blind, or disabled Alaskans to help them meet their basic needs, stay in their own homes and avoid costly institutional placements.
- Reduce the disproportionate burden of home heating costs on the poor.
- Provide access to food support and decrease the incidence of food insecurity among Alaskans.

Key BRU Issues for FY2001 – 2002

- Sustaining and building on the successes of Alaska's welfare reform efforts is a pivotal issue. Meeting the demands of federal and state welfare reform mandates and providing opportunities for families to achieve lasting self-sufficiency while maintaining basic safety net services will remain a challenge in FY2002.
- Sustaining caseload reductions and program savings while protecting the well-being of children in needy families.
- The APA population is expected to follow the national trend and continue to grow. Continued APA funding will provide critical financial assistance and enable needy elderly, blind and disabled individuals to live with dignity within the community.
- July 2002 marks the first month families in Alaska will face the 60-month limit for receiving Temporary Assistance.

Major BRU Accomplishments for FY2000

- TANF caseload declined to 7,987 families. The average TA caseload was 34% below FY1997, the year before welfare reform was implemented.
- Expenditures for Temporary Assistance payments fell from \$75.0 million in FY1999 to \$63.9 million in FY2000. This 15% savings contributes to a 44% savings over the past three years. These savings are from reduced payments due to earnings and from case closures.
- 55% of Temporary Assistance adults are participating in work activities; 32% of the families have adults working in paying jobs.
- Alaska ranked 8th in the nation for the percentage of adults in unsubsidized employment and in the average number of hours for adults in unsubsidized employment. Only one state ranked higher in both of these critical measures of success.
- In FY2000, around \$4.7 million was provided to approximately 7,300 households under the Department of Health and Social Services' Heating Assistance Program (HAP). This included \$2.3 million in emergency Low Income Home Energy Energy Assistance (LIHEAP) funds for high home heating costs.
- Improved service delivery to Adult Public Assistance recipients who are working or seeking employment.
- Provided funding and operational support for Tanana Chiefs Conference Native Family Assistance Program.

Key Performance Measures for FY2002

Measure: Welfare to Work - Welfare Caseload (Governor's Indicator)

(Not yet addressed by Legislature.)

Current Status:

Temporary Assistance for Needy Families (TANF) Caseload

The Average Monthly AFDC/TANF Caseloads by Fiscal Year FY1997 through FY2000 are as follows:

FY1997	12,096 AFDC families
FY1998	10,514 TANF
FY1999	9,191 TANF
FY2000	7,987 TANF

Three years of welfare reform in Alaska have brought some remarkable achievements. The average caseload for FY2000 was 34% below FY1997, the year before welfare reform was implemented. In FY2000 the average monthly number of TANF cases receiving cash assistance was 7,987 or 4,109 fewer cases than the FY1997 AFDC caseload level of 12,096.

Background and Strategies:

This indicator measures changes in the size of the AFDC caseload prior to July, 1997 and the Temporary Assistance for Needy Families (TANF) caseload after that date. The TANF caseload includes the Alaska Temporary Assistance Program and the Native Family Assistance Program begun by Tanana Chiefs Conference in October, 1998. Due to differences in reporting methods between the AFDC and the TANF programs, consistent and comparable numbers are not available for any levels lower than the division region level. Caseload data is available at the community and census area level for the Alaska Temporary Assistance Program beginning in October, 1997

Measure: Welfare - Savings to State (Governor's Indicator)*(Not yet addressed by Legislature.)***Current Status:**

Temporary Assistance for Needy Families (TANF) Cash Benefit Expenditures:

The Total AFDC/TANF Cash Benefit Expenditures by Fiscal Year FY1997 through FY2000 are as follows:

FY1997	\$115,204.5	AFDC
FY1998	\$ 90,903.0	TANF
FY1999	\$ 75,014.5	TANF
FY2000	\$ 63,948.8	TANF

Spending on welfare payments to recipients continues to decline. In FY2000 cash benefits expenditures declined to \$63.9 million, a 44% decline from the \$115.2 million spent in FY1997, the year before welfare reform took effect.

Background and Strategies:

This indicator measures the decline over recent years in the total cash benefit amount paid to families under the prior AFDC program and the TANF programs. It includes benefit expenditures paid by the Native Family Assistance Program. The measure reflects both caseload decline and the reduced monthly benefit amounts received by families due to increased earnings and other changes in policy. The difference in benefit expenditures between FY 1994 (AFDC) and FY 2000 (TANF) was \$58.6 million.

Some of the savings from reduced monthly benefit expenditures have allowed federal TANF dollars to be used for a variety of purposes which save state general fund dollars: Child Care, Head Start programs, and child protection services. Saved state and federal funds have also been reinvested into efforts to prepare more recipients for work.

Measure: Adult Public Assistance (APA) Caseload (Governor's Indicator)*(Not yet addressed by Legislature.)***Current Status:**

The Average Monthly APA Caseloads by Fiscal Year FY1996 through FY2000 are as follows:

FY1996	10,884 APA cases
FY1997	11,487
FY1998	11,990
FY1999	12,655
FY2000	13,312

The number of elderly and disabled Alaskans who rely on the APA program to meet basic needs has steadily increased, a trend that is expected to continue. The FY2000 average monthly APA caseload was 13,312 up 5.2% compared to FY1999.

Background and Strategies:

This indicator measures the growth in the Adult Public Assistance program which serves very needy elderly, blind and disabled Alaskans. The growth in this program mirrors conditions nationwide and can be attributed to a combination of earlier identification and treatment of disabilities, and increased longevity. The caseload size of the program is sustained by the long-term nature of the needs of these recipients.

Public Assistance

BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
ATAP	37,414.4	18,288.7	5,111.2	60,814.3	37,417.2	22,375.3	6,320.3	66,112.8	27,542.0	18,136.7	4,437.7	50,116.4
Adult Public Assistance	46,153.0	690.8	3,214.4	50,058.2	48,599.6	934.0	3,437.3	52,970.9	50,434.7	734.0	3,522.3	54,691.0
General Relief Assistance	871.6	0.0	0.0	871.6	829.3	0.0	0.0	829.3	829.3	0.0	0.0	829.3
OAA-ALB Hold Harmless	2,198.2	0.0	0.0	2,198.2	2,100.3	0.0	0.0	2,100.3	1,860.0	0.0	0.0	1,860.0
PFD Hold Harmless	0.0	0.0	17,222.0	17,222.0	0.0	0.0	17,518.1	17,518.1	0.0	0.0	16,147.3	16,147.3
Tribal Assistance	2,108.7	0.0	296.5	2,405.2	2,108.7	0.0	296.5	2,405.2	6,783.9	0.0	907.8	7,691.7
Non-Formula Expenditures												
Energy Assistance Program	0.0	6,638.2	0.0	6,638.2	0.0	5,516.1	0.0	5,516.1	0.0	6,931.8	0.0	6,931.8
Totals	88,745.9	25,617.7	25,844.1	140,207.7	91,055.1	28,825.4	27,572.2	147,452.7	87,449.9	25,802.5	25,015.1	138,267.5

Public Assistance

Proposed Changes in Levels of Service for FY2002

The BRU changes are the net adjustment in formula funding reflecting the changes in projected public assistance program caseloads.

Spending on welfare payments is down over \$50 million compared to FY1997. Some of the savings from reduced ATAP monthly benefit expenditures have allowed federal TANF dollars to be used for a variety of purposes which save state general fund dollars in Child Care, Head Start programs, Domestic Violence and Child Protection services. Saved state and federal TANF funds have also been reinvested into efforts to prepare more recipients for work.

- ATAP caseloads continue to decline reducing ATAP projected formula need by over \$16.0 million.

In FY2002, a portion of the ATAP savings that would otherwise be needed for ATAP benefit payments will be reinvested to provide additional child care assistance services to families who will be better able to start work and stay working. The budget request also reinvests some of ATAP payments savings to further assist temporary assistance families to achieve self-sufficiency and implement new services that promote job retention and wage progression to help families stay working.

Funding for Native TANF program operation comes from the federal TANF block grant and is supplemented by state funds that would otherwise be spent to serve the same Native welfare recipients. The FY2002 budget request transfers an allocation of state funding for TANF to supplement the federal TANF funding for the operation of Native TANF in Alaska. The three organizations currently running program are Tanana Chiefs Conference (TCC) in the interior Doyon region, Central Council of Tlingit & Haida Indian Tribes of Alaska (T&H) in SE Alaska and the Association of Village Council Presidents in the YK Delta.

The FY2002 ATAP budget transfers \$4,171.7 state general fund to Division of Family and Youth Services components to sustain Child Protection Services that have been funded with federal TANF and TANF transfers to the Social Services Block Grant (SSBG). In FY2002, this transfer will refinance services supporting Adoption Assistance, Frontline Social Workers and the "Balloon Project" that were formerly funded by federal TANF.

- The number of elderly and disabled Alaskans who rely on the Adult Public Assistance (APA) program to meet basic needs has steadily increased - a trend that is expected to continue. The APA population is expected to grow at 4.7% resulting in a formula increase of \$1,835.1 general fund.
- PFD Hold Harmless formula need is reduced by \$1.4 million for the projected net decrease in public assistance caseloads

Public Assistance

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	91,055.1	28,825.4	27,572.2	147,452.7
Adjustments which will continue current level of service:				
-ATAP	-8,846.9	-4,238.6	-611.3	-13,696.8
-Adult Public Assistance	240.3	0.0	0.0	240.3
-OAA-ALB Hold Harmless	-240.3	0.0	0.0	-240.3
-Energy Assistance Program	0.0	0.7	0.0	0.7

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
-Tribal Assistance	4,675.2	0.0	611.3	5,286.5
Proposed budget decreases:				
-ATAP	-1,028.3	0.0	-1,271.3	-2,299.6
-Adult Public Assistance	0.0	-200.0	0.0	-200.0
-PFD Hold Harmless	0.0	0.0	-1,370.8	-1,370.8
Proposed budget increases:				
-Adult Public Assistance	1,594.8	0.0	85.0	1,679.8
-Energy Assistance Program	0.0	1,415.0	0.0	1,415.0
FY2002 Governor	87,449.9	25,802.5	25,015.1	138,267.5

Component: Alaska Temporary Assistance Program

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

Funding for the Alaska Temporary Assistance Program (ATAP) comes in a fixed amount from the federal Temporary Assistance for Needy Families (TANF) block grant. The amount of the TANF block grant is based on FFY94 federal expenditures for the AFDC program in Alaska. The state is required to maintain a level of expenditures at a minimum of the 80% of the state's FFY 94 spending on AFDC.

Services provided by ATAP include:

- Temporary assistance to needy families so they can care for their children in their own homes, providing the basic needs of shelter, clothing, transportation and food
- Supports for adults to seek, secure, and retain employment
- Case management and employment related services under a "work first" approach emphasizing quick entry into the work force and promoting family self-sufficiency through employment
- Safety net services for families with profound barriers to employment or other hardships hindering self-sufficiency

Component Goals and Strategies

EMPHASIZE WORK, PROMOTE PERSONAL RESPONSIBILITY AND MAINTAIN SAFETY NET SERVICES FOR NEEDY FAMILIES

- Continue to promote a work first philosophy that places a strong emphasis on work and job readiness
- Enhance program policies and services that support the work first philosophy and provide incentives for employment and job retention
- Increase number of working clients
- Assist working clients with job and wage advancement opportunities
- Encourage family self-sufficiency and stability by planning for self-support, through employment, receipt of child support, and prevention of unplanned and out-of-wedlock pregnancies
- Provide enhanced services to families who lack skills, have little work history, or face other barriers to employment
- Conduct program research and evaluation to assess effectiveness of program policies and improve services

Key Component Issues for FY2001 – 2002

Sustaining and building on the successes of Alaska's welfare reform efforts is a pivotal issue. Meeting the demands of federal and state welfare reform mandates and providing opportunities for families to achieve lasting self-sufficiency while maintaining basic safety net services will remain a challenge in FY2002.

- Investing in working families by expanding and enhancing services to improve job retention and advancement
- Moving families with serious challenges to self-sufficiency off welfare prior to reaching time limits
- Supporting the development and implementation of Native family assistance programs
- Serving families living in communities with limited employment opportunities
- Sustaining caseload reductions and program savings while protecting the well-being of children in needy families

Major Component Accomplishments for FY2000

- Annual savings in welfare cash benefits reached over \$50 million. In FY00 cash benefit expenditures (including Native TANF) declined to \$63.9 million, a 44% decline from the \$115.2 million spent in FY97, the year before welfare reform took effect.
- ATAP benefit savings provided reinvestment funding to local organizations for community-based work services and increases in child care
- Temporary Assistance caseload declined to 7,596 families, 37% reduction compared to FY97
- Increase in number of working recipients from 18% in FY 97 to 32% in FY00

Statutory and Regulatory Authority

AS 47.27.005 Alaska Temporary Assistance Program
7 AAC 45

Key Performance Measures for FY2002

Measure: Please see the performance measures under the Public Assistance Administration BRU.
(Developed jointly with Legislature in FY2001.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Please see the performance measures under the Public Assistance Administration BRU.		X			

Alaska Temporary Assistance Program
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	60,814.3	66,112.8	50,116.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	60,814.3	66,112.8	50,116.4
Funding Sources:			
1002 Federal Receipts	18,288.7	22,375.3	18,136.7
1003 General Fund Match	37,414.4	37,417.2	27,542.0
1007 Inter-Agency Receipts	5,111.2	6,320.3	4,437.7
Funding Totals	60,814.3	66,112.8	50,116.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	18,288.7	22,375.3	22,375.3	18,136.7	17,698.0
Interagency Receipts	51015	5,111.2	6,320.3	6,320.3	4,437.7	4,437.7
Restricted Total		23,399.9	28,695.6	28,695.6	22,574.4	22,135.7
Total Estimated Revenues		23,399.9	28,695.6	28,695.6	22,574.4	22,135.7

Alaska Temporary Assistance Program

Proposed Changes in Levels of Service for FY2002

Due to declining caseloads and the reduced demand for cash benefit payments, millions of dollars have been made available to provide child care and work services for recipients and working families and to save state funds for other services which has helped to reduce the state's budget deficit. In FY2002, the ATAP formula budget is reduced further by \$15,996.4.

The ATAP benefit savings allow the transfer of \$4,171.7 state general fund to Division of Family and Youth Services components to refinance Child Protection Services that have been funded with federal TANF and TANF transfers to the SSBG. In FY2002, this transfer will refinance existing services supporting Adoption Assistance, Frontline Social Workers, and the "Balloon Project" that were formerly funded by federal TANF. This change is needed due to a shortfall in SSBG transfers from TANF and our inability to spend TANF funds for subsidized adoptions.

The federal welfare reform law authorized Alaska's twelve regional non-profit Native organizations and the Metlakatla Indian Community to administer TANF programs within their regions. Recently, the Association of Village Council Presidents, Inc. (AVCP) and Central Council of Tlingit & Haida Indian Tribes (T&H) have taken advantage of this opportunity to design their own culturally relevant and regionally focused welfare programs, apart from the State. Funding for Native TANF program operation comes from the federal TANF block grant and is supplemented by state fund transfers from ATAP that would otherwise be spent to serve the same Native welfare recipients.

In FY2002, a portion of the ATAP savings that would otherwise be needed for ATAP benefit payments will be reinvested in work services to further assist temporary assistance families achieve self-sufficiency. These services will be focused on employment-related initiatives to reduce the chances of families returning to ATAP and will provide more intensive services to families who will begin to reach their 60-month limit in July 2002. Reinvestments are also used to increase funding for low-income child care to continue the success of welfare reform.

As previously discussed, AVCP and T&H received federal approval to operate Native Temporary Assistance for Needy Families (TANF) Programs in their respective regions. The federal grants for Native TANF reduce the state block grant amount dollar for dollar. In addition, the required state maintenance of effort (MOE) is reduced. By the ATAP decrement that deletes \$1,028.3 GF and the transfer of \$4,171.7 GF to refinance Child Protection services, the Department has reduced the amount of MOE for TANF by \$5.2 million. With these changes the total state general fund request for TANF services has been reduced to the revised state maintenance of effort (MOE) floor. Any future, potential ATAP component surplus balance will be entirely federal.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	37,417.2	22,375.3	6,320.3	66,112.8
Adjustments which will continue current level of service:				
-Transfer \$2,043.5 for Native TANF programs RP 6-1-0002	-1,825.0	0.0	-218.5	-2,043.5
-Refinance Child Protection Services - Subsidized Adoptions & Frontline Social Workers	-4,171.7	0.0	0.0	-4,171.7
-Reinvestments for Work Services and Families Work (P.A. Admin)	0.0	-2,738.6	0.0	-2,738.6
-Reinvestments for Child Care	0.0	-1,500.0	0.0	-1,500.0
-Transfer for Native TANF programs	-2,850.2	0.0	-392.8	-3,243.0

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
Proposed budget decreases:				
-ATAP Formula Reduction for Caseloads	-1,028.3	0.0	-1,271.3	-2,299.6
FY2002 Governor	27,542.0	18,136.7	4,437.7	50,116.4

Component: Adult Public Assistance

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

The Adult Public Assistance Program (APA) provides financial assistance and access to medical care for 4,890 elderly and 9,727 disabled Alaskans. The program was created to supplement Social Security disability benefits and provides the recipient with the income support needed to remain as independent as possible in the community. To be eligible for APA, a low-income individual must be over 64 or at least 18 years of age, blind, or diagnosed by a physician as permanently disabled, chronically ill, or terminally ill. Applicants must also undergo a rigorous process to determine that their mental or physical limitations make them temporarily or permanently incapable of self-support through gainful employment. Each month benefits are issued to APA clients in an amount equal to the maximum supplemental payment scheduled less adjustment for any income the individual reports.

Component Goals and Strategies

PROVIDE FINANCIAL ASSISTANCE TO NEEDY AGED, BLIND, OR DISABLED ALASKANS.

- Supplement federal Social Security benefits to provide income adequate to meet basic needs.
- Promote independence for aged and disabled Alaskans by offering the income support needed to avoid costly institutional placements.
- Assist individuals to access services that promote independence.

Key Component Issues for FY2001 – 2002

The APA population is expected to continue to grow at 4.7% from 13,962 in FY2001 to 14,617 in FY2002. The reasons for this growth appear to be a combination of increased state population, improved medical technology and an aging "baby boom" cohort. Because some recipients experience permanent disabilities, they are likely to rely on the APA program for their entire adult lives. For this portion of the population, continued APA funding provides critical financial assistance enabling them to live with dignity in the community.

Within the APA population there are also individuals who, despite their disability, would like to work. However, lack of workplace accommodations, financial disincentives, and most notably, fear of the loss of Medicaid act as barriers to the goal of employment. Alaska has begun to address this problem by implementing the Working Disabled Medicaid option, which allows individuals whose earnings make them ineligible for traditional Medicaid to "buy-in" to the program by paying a premium. With this option many APA recipients can work, continue to receive critical health care, and contribute to their self-support.

The federal government has also addressed these issues with passage of the Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA). The Act establishes three grant programs with the purpose of supporting State efforts to assist people with disabilities in securing and sustaining competitive employment. Alaska is the recipient of one of these grants, a portion of which will be used to provide training and technical assistance to APA staff so that they may better support employment for appropriate APA recipients. This grant funding, coupled with ongoing efforts to improve service delivery to working clients, will help the APA program to more effectively promote employment and self-sufficiency.

DPA also continues to participate in the federally-funded Alaska Works Project, a five-year initiative designed to address the major barriers that keep people with disabilities from success in the workplace. Working collaboratively with the Governor's Council on Disabilities and Special Education and a consortium of state service providers, the project has begun to establish a coordinated and innovative service delivery system, and to eliminate barriers that prevent Alaskans with physical and mental disabilities from becoming competitively employed.

Major Component Accomplishments for FY2000

- Utilization of enhanced gathering and analysis of data about APA recipients and their service needs.
- Improved service delivery to recipients who are working or seeking employment.
- Securing federal funding to further the state's efforts to promote self-sufficiency through work for APA recipients.
- Ongoing participation in the Alaska Works Project

Statutory and Regulatory Authority

AS 47.25.430 - 615 Adult Public Assistance

Adult Public Assistance
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	50,058.2	52,970.9	54,691.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	50,058.2	52,970.9	54,691.0
Funding Sources:			
1002 Federal Receipts	690.8	934.0	734.0
1004 General Fund Receipts	46,153.0	48,599.6	50,434.7
1007 Inter-Agency Receipts	3,214.4	3,437.3	3,522.3
Funding Totals	50,058.2	52,970.9	54,691.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	690.8	934.0	734.0	734.0	734.0
Interagency Receipts	51015	3,214.4	3,437.3	3,437.3	3,522.3	3,522.3
Restricted Total		3,905.2	4,371.3	4,171.3	4,256.3	4,256.3
Total Estimated Revenues		3,905.2	4,371.3	4,171.3	4,256.3	4,256.3

Adult Public Assistance**Proposed Changes in Levels of Service for FY2002**

The number of elderly and disabled Alaskans who rely on the Adult Public Assistance (APA) program to meet basic needs has steadily increased - a trend that is expected to continue. The APA population is expected to grow at 4.7% resulting in a formula increase of \$1,835.1 general fund.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	48,599.6	934.0	3,437.3	52,970.9
Adjustments which will continue current level of service:				
-Transfer GF for APA Caseload Growth	240.3	0.0	0.0	240.3
Proposed budget decreases:				
-Delete excess federal authority	0.0	-200.0	0.0	-200.0
Proposed budget increases:				
-APA Formula Growth	1,594.8	0.0	85.0	1,679.8
FY2002 Governor	50,434.7	734.0	3,522.3	54,691.0

Component: General Relief Assistance

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

General Relief Assistance is the bottom tier in Alaska's welfare system. It provides a small amount of aid on behalf of persons who are extremely poor and facing an emergency need. To qualify, a person must have an immediate and specific need for food, clothing, shelter, or burial, and lack the financial means to meet the need(s). If eligible, a maximum monthly payment of \$120.00 per person is allowed by State statute for meeting subsistence needs. The General Relief Assistance program pays vendors directly on behalf of eligible persons to ensure that emergency needs for food, clothing, or shelter are met. General Relief Assistance also funds indigent burials. Without this basic state service, the cost of some 350 burials per year would fall on the communities and funeral homes of the State.

Component Goals and Strategies

PROVIDE EMERGENCY ASSISTANCE TO LOW-INCOME INDIVIDUALS AND FAMILIES.

- Reimburse vendors for rent, food, clothing, and necessary utilities on behalf of indigent Alaskans experiencing an extreme financial crisis.
- Reimburse vendors for funeral and burial services provided on behalf of indigent deceased persons.

Key Component Issues for FY2001 – 2002

Alaska's General Relief Assistance (GRA) program was developed as a safety net program for very low income individuals who are not eligible for other state or federal assistance. It is used as a last resort program to meet the emergency needs of low income Alaskans who have no other resources available to meet those needs. Currently, about 75 percent of GRA program expenditures are used to pay for funeral and burial expenses of indigent deceased persons. The remainder is used primarily to assist low income individuals and families who are facing eviction.

Individuals and families that access the program continue to represent one of Alaska's most needy and vulnerable populations. They are often marginal members of the community and may have a variety of significant barriers that preclude successful participation in mainstream society. The Division of Public Assistance wishes to maintain funding for the GRA program at existing levels to continue to provide emergency services to individuals and families who lack other resources.

Major Component Accomplishments for FY2000

- Provided GRA program vendor payments for funeral and burial expenses for approximately 350 deceased indigents.
- Prevented the eviction of approximately 100 individual and families each month.

Statutory and Regulatory Authority

AS 47.25.120-300 General Relief Assistance
7 AAC 47.020-290

General Relief Assistance
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	871.6	829.3	829.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	871.6	829.3	829.3
Funding Sources:			
1004 General Fund Receipts	871.6	829.3	829.3
Funding Totals	871.6	829.3	829.3

General Relief Assistance

Proposed Changes in Levels of Service for FY2002

None

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	829.3	0.0	0.0	829.3
FY2002 Governor	829.3	0.0	0.0	829.3

Component: Old Age Assistance-Alaska Longevity Bonus (ALB) Hold Harmless

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

The OAA-ALB Hold Harmless program replaces federal SSI benefits that are lost because of the receipt of Alaska Longevity Bonus payments.

Several years after the Alaska Longevity Bonus (ALB) program was first created, Congress agreed to exempt the bonus payments from countable income for federal Supplementary Security Income (SSI) purposes. When Alaska changed the Bonus program residency requirement from 25 years to one year, Congress refused to extend the same protection to the newer recipients, allowing the exemption only for the pre-1985 "grandfathered" participants. The Legislature decided that older Alaskans who reached eligibility after October 1, 1985 should receive public assistance benefits equal to those who qualified for the Longevity Bonus prior to that date. This resulted in the OAA-ALB Hold Harmless program. The OAA-ALB Hold Harmless component funding replaces the amount of SSI lost to an aged recipient when the ALB is counted as available.

Component Goals and Strategies

ALLOW PUBLIC ASSISTANCE RECIPIENTS TO RECEIVE LONGEVITY BONUS BENEFITS WITHOUT LOSING FEDERAL SSI BENEFITS.

- Replace the amount of cash lost to countable ALB recipients when their federal SSI payments are decreased or ended.

Key Component Issues for FY2001 – 2002

The ALB program is closed to new applicants and we are now seeing OAA-ALB Hold Harmless expenditures begin a sustained decrease as the number of APA and SSI recipients - who also receive the ALB - drops off.

Major Component Accomplishments for FY2000

- Replaced lost SSI for approximately 1,400 public assistance recipients each month, helping financially needy aged Alaskans with basic living expenses.

Statutory and Regulatory Authority

AS 47.45.122 Eligibility for Public Assistance

Old Age Assistance-Alaska Longevity Bonus (ALB) Hold Harmless

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	2,198.2	2,100.3	1,860.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,198.2	2,100.3	1,860.0
Funding Sources:			
1004 General Fund Receipts	2,198.2	2,100.3	1,860.0
Funding Totals	2,198.2	2,100.3	1,860.0

Old Age Assistance-Alaska Longevity Bonus (ALB) Hold Harmless

Proposed Changes in Levels of Service for FY2002

The ALB program is closed to new applicants and we are now seeing OAA-ALB Hold Harmless expenditures begin a sustained decrease as the number of APA and SSI recipients, who also receive the ALB, drops off.

The OAA-ALB HH program caseload decline savings of \$240.3 are transferred to the APA component to help fund the formula caseload increase in the APA program.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,100.3	0.0	0.0	2,100.3
Adjustments which will continue current level of service:				
-Transfer GF for APA Caseload Growth	-240.3	0.0	0.0	-240.3
FY2002 Governor	1,860.0	0.0	0.0	1,860.0

Component: Permanent Fund Dividend Hold Harmless

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

PFD Hold Harmless payments replace public assistance program benefits when receiving the Permanent Fund Dividend causes individuals to lose eligibility or to have benefits reduced.

Component Goals and Strategies

PROTECT NEEDY ELDERLY, DISABLED AND LOW-INCOME ALASKAN FAMILIES FROM LOSING PUBLIC ASSISTANCE AND MEDICAL BENEFITS DUE TO RECEIPT OF A PERMANENT FUND DIVIDEND.

- Allow public assistance recipients to receive and utilize their PFD to promote self-sufficiency without risking the loss of assistance with basic living expenses and medical needs.
- Replace the amount of cash and medical benefits Adult Public Assistance, Temporary Assistance, Food Stamp and Medicaid recipients would otherwise lose when their benefits decrease or end because of counting the Permanent Fund Dividend as income.

Key Component Issues for FY2001 – 2002

None

Major Component Accomplishments for FY2000

Over \$1.5 million savings in PFD-HH expenditures due to Temporary Assistance and Food Stamp program caseload reductions.

Statutory and Regulatory Authority

AS 43.23.075 and AS 43.23.085
7 AAC 38

Permanent Fund Dividend Hold Harmless**Component Financial Summary***All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	481.7	481.7	481.7
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	16,740.3	17,036.4	15,665.6
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	17,222.0	17,518.1	16,147.3
Funding Sources:			
1050 Permanent Fund Dividend Fund	17,222.0	17,518.1	16,147.3
Funding Totals	17,222.0	17,518.1	16,147.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Permanent Fund Dividend Fund	51160	17,222.0	17,518.1	17,518.1	16,147.3	15,900.0
Restricted Total		17,222.0	17,518.1	17,518.1	16,147.3	15,900.0
Total Estimated Revenues		17,222.0	17,518.1	17,518.1	16,147.3	15,900.0

Permanent Fund Dividend Hold Harmless

Proposed Changes in Levels of Service for FY2002

The PFD Hold Harmless request includes a reduction of \$1.4 million for the projected decrease in public assistance caseloads in FY2002.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	0.0	17,518.1	17,518.1
Proposed budget decreases:				
-Caseload Reduction	0.0	0.0	-1,370.8	-1,370.8
FY2002 Governor	0.0	0.0	16,147.3	16,147.3

Component: Energy Assistance Program

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

The Heating Assistance Program (HAP) is 100% federally funded through the Low Income Home Energy Assistance Program (LIHEAP) Block Grant. The program aids low-income households with their home heating expenses. Eligibility for heating assistance and benefit amounts are based on a point system which considers household size and income, fuel costs in the area and type of housing. Applicant households apply once a year to receive a single heating assistance grant. Assistance is normally provided in the form of credit with the client's home energy vendor.

Component Goals and Strategies

REDUCE THE DISPROPORTIONATE BURDEN OF HOME HEATING COSTS ON THE POOR

- To prevent or remedy heating emergency situations in at least 8,000 Alaskan households.
- To prevent or remedy home heating emergency situations in at least 1,400 Alaskan households with elderly members.
- To prevent or remedy home heating emergency situations in at least 1,800 Alaskan households with children under age 6.

2) MINIMIZE THE ECONOMIC IMPACT OF CUSTOMER BAD DEBT ON ALASKA HOME ENERGY SUPPLIERS.

Key Component Issues for FY2001 – 2002

In FY2000 and FY2001 the Heating Assistance Program (HAP), formerly called the Energy Assistance Program, received additional LIHEAP funds in response to high fuel oil prices. HAP regulation changes in FY2000 helped the program better target these program benefits to households with the lowest incomes and highest heating costs. In addition, the percent of households with members that are elderly, disabled or under age six increased.

In FY2001 the program's eligibility limits increased from 140% to 150% of the Alaska Poverty Level (\$26,532 annually for a family of three). This higher limit allows more working families and those on fixed incomes to qualify for help with their fuel bills.

The uncertainty of LIHEAP block grant funding causes difficulty in planning and administering the program. The funding allocation is frequently determined after the beginning of the federal fiscal year. This means the State must set income guidelines, set heating benefit levels, hire eligibility staff, and issue requests for proposals for low-income weatherization in the absence of a funding allocation. FY2002 funding is projected at the FY2000 level.

Major Component Accomplishments for FY2000

The program provided low-income households with seasonal help for home heating costs. Tribal organizations also receive federal LIHEAP block grant funds and administer heating assistance programs in several areas of Alaska. In FY2000, around \$4.7 million was provided to approximately 7,300 households under the Department of Health of Social Services' HAP.

Approximately 26 percent of HAP households contain one or more children under 6 years of age, 22 percent have at least one disabled member, and 19 percent contain at least one member over the age of 60. The primary sources of income for Alaska HAP households are: Alaska Temporary Assistance Program (21 percent), and Adult Public Assistance (23 percent). The remaining 56 percent of the HAP caseload relies on non-public assistance sources of income (e.g., wages, Social Security, Unemployment Insurance Benefits, and self-employment).

Statutory and Regulatory Authority

PL 97-35
 L. I.H.E.A.P. Act of 1981
 7 AAC 44

Key Performance Measures for FY2002

Measure: Benefits paid are accurate.
(Developed jointly with Legislature in FY2000.)

Current Status:

The Home Heating Assistance payment accuracy rate was 94.5% in FFY2000.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Benefits paid are accurate.		X			

Energy Assistance Program
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	322.3	407.6	408.3
72000 Travel	5.2	10.5	13.5
73000 Contractual	123.5	103.0	140.0
74000 Supplies	7.0	6.0	12.0
75000 Equipment	39.2	4.0	19.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	6,141.0	4,985.0	6,339.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	6,638.2	5,516.1	6,931.8
Funding Sources:			
1002 Federal Receipts	6,638.2	5,516.1	6,931.8
Funding Totals	6,638.2	5,516.1	6,931.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	6,638.2	5,516.1	7,800.0	6,931.8	6,000.0
Restricted Total		6,638.2	5,516.1	7,800.0	6,931.8	6,000.0
Total Estimated Revenues		6,638.2	5,516.1	7,800.0	6,931.8	6,000.0

Energy Assistance Program

Proposed Changes in Levels of Service for FY2002

The budget request adds \$1.4 million federal authority for the Heating Assistance Program. In recent years, Alaska has received emergency federal heating assistance grant increases to help low-income Alaskans with increased costs for home heating. In FFY2000, Alaska was one of 11 states receiving these supplemental LIHEAP block grant funds.

The FY2002 budget increment adds federal authority in order to immediately receive any federal supplemental increases. This federal authority will enable timely service to Heating Assistance Program recipients but is contingent on supplemental grant awards for Alaska.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	5,516.1	0.0	5,516.1
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	0.0	0.7	0.0	0.7
Proposed budget increases:				
-Increase Federal Authority for Potential Supplemental Grants	0.0	1,415.0	0.0	1,415.0
FY2002 Governor	0.0	6,931.8	0.0	6,931.8

Energy Assistance Program

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	3	3	Annual Salaries	296,441
Part-time	10	10	COLA	2,927
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	118,301
			<i>Less 2.24% Vacancy Factor</i>	(9,369)
			Lump Sum Premium Pay	0
Totals	13	13	Total Personal Services	408,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Tech I	0	0	1	0	1
Administrative Clerk III	0	1	8	1	10
Administrative Supervisor	0	0	1	0	1
Prog Coordinator	0	0	1	0	1
Totals	0	1	11	1	13

Component: Tribal Assistance Programs

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

This component provides supplemental state funding for benefit payments to recipients of a federally-approved Native Family Assistance Program. These funds would otherwise be spent to serve eligible Native families through ATAP.

Component Goals and Strategies

HELP NATIVE FAMILY ASSISTANCE PROGRAMS TO EMPHASIZE WORK, PROMOTE PERSONAL RESPONSIBILITY AND MAINTAIN SAFETY NET SERVICES FOR NEEDY ALASKA NATIVE FAMILIES.

- Provide funding and technical assistance to support of Native family assistance programs.

Key Component Issues for FY2001 – 2002

Maintaining the capacity to provide ongoing technical assistance and funding to support Native family assistance programs. Tlingit and Haida Tribes of Alaska (T&H) and the Association of Village Council Presidents (AVCP) each implemented a Native Family Assistance program in FY2001. T&H serves approximately 400 families in Southeast Alaska and AVCP serves approximately 800 families in Western Alaska.

Major Component Accomplishments for FY2000

In FY2000, legislation was passed that authorizes three Native non-profit regional corporations and the Metlakatla Indian Community to run Native Family Assistance programs and receive supplemental State funding. Currently, three Native organizations have taken advantage of this opportunity to design their own culturally relevant and regionally focused welfare programs, apart from the State.

Statutory and Regulatory Authority

AS 47.27.050 and AS 47.27.070 Alaska Temporary Assistance Program
2000 SLA Chapter 96

**Tribal Assistance Programs
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	2,405.2	2,405.2	7,691.7
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,405.2	2,405.2	7,691.7
Funding Sources:			
1003 General Fund Match	2,108.7	2,108.7	6,783.9
1007 Inter-Agency Receipts	296.5	296.5	907.8
Funding Totals	2,405.2	2,405.2	7,691.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	296.5	296.5	515.0	907.8	907.8
Restricted Total		296.5	296.5	515.0	907.8	907.8
Total Estimated Revenues		296.5	296.5	515.0	907.8	907.8

Tribal Assistance Programs

Proposed Changes in Levels of Service for FY2002

The FY2002 budget request transfers from the ATAP component an allocation of state funding to supplement the federal TANF funding for the operation of Native Family Assistance Programs in Alaska.

In FY2001, the Association of Village Council Presidents, Inc. (AVCP) and Central Council of Tlingit & Haida Indian Tribes (T&H) have taken advantage of this opportunity to design their own culturally relevant and regionally focused welfare programs, apart from the State. The three organizations now running Native TANF programs are Tanana Chiefs Conference (TCC) in the interior Doyon region, T&H in SE Alaska and AVCP in the YK Delta.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,108.7	0.0	296.5	2,405.2
Adjustments which will continue current level of service:				
-Transfer 2,043.5 for Native TANF programs RP 6-1-0002	1,825.0	0.0	218.5	2,043.5
-Native TANF program Transfer	2,850.2	0.0	392.8	3,243.0
FY2002 Governor	6,783.9	0.0	907.8	7,691.7

Medical Assistance Budget Request Unit

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BRU Mission

To maintain access to health care and to provide health coverage for Alaskans in need.

BRU Services Provided

The Medical Services BRU provides access to a broad range of health services for Alaska's low-income citizens through the Medicaid and Chronic and Acute Medical Assistance (CAMA) programs.

- Medicaid is an "entitlement program" created by the federal government to provide medical services for low-income citizens. Medicaid is funded jointly by a state and federal match formula. The program is geared toward children, adults with dependent children, the elderly and the disabled.
- The ALB Hold Harmless program was created by the Legislature to protect those Alaskans who are eligible for Medicaid but would otherwise lose that eligibility as a result of receipt of the Alaska Longevity Bonus.
- The PFD Hold Harmless Program was created by the Legislature to protect those Medicaid clients who lose Medicaid eligibility as a result of the receipt of the permanent fund dividend.
- CAMA is a State of Alaska program that provides medical care services to extremely needy persons who cannot qualify for Medicaid coverage.

The Division of Medical Assistance (DMA) is responsible for the administration of the Medicaid and Chronic and Acute Medical Assistance (CAMA) programs. The Division is organized into two offices, one in Anchorage and the other in Juneau. The Anchorage office is responsible for medical claims processing, third-party billing and collections, medical policy development, medical review, prior authorization, operational contract monitoring and administration, Eligibility Information System (EIS) interface, surveillance and utilization review, medical facility certification and licensing, patient assessment and provider enrollment relations, health facility rate setting, recipient and provider hearings and appeals, and authorization of waiver services and clients. The Juneau office is responsible for defining Medicaid and CAMA eligibility rules in program manuals, state regulations, and the Medicaid State Plan; defining covered medical services, payment rules and methodologies through State regulations and the Medicaid State Plan; interfacing and negotiating with the federal government; budget/financial allocation and control; legislative interface; personnel administration; contract approval and financial administration; Medicaid Rate Advisory Commission interface and support services; program and administrative planning; special projects coordination; and program planning, coordination, and financing with numerous State divisions and agencies.

The Chronic Acute Medical Assistance (CAMA) program provides a limited package of health services to those individuals with chronic medical conditions who do not qualify for the Medicaid program. The CAMA program served 1,153 individuals in FY2000, providing benefits that include prescription drugs, limited physician visits and hospital care. To receive benefits under the CAMA program, low-income persons must have an immediate need for medical care and be unable to secure other private or public assistance. The program has certain income and asset limits that must be met in order to be eligible. Income is limited to less than \$300 per month while total resources must be under \$500, with the exception of a home and vehicle. CAMA is the successor to the General Relief Medical (GRM) program.

BRU Goals and Strategies

To provide Alaskans in need with access to the same broad range of medical care through the same network of medical care providers who provide services to the general population, and to conduct medical surveillance that assures medical services provided are appropriate and of the proper amount, duration, and scope.

Key BRU Issues for FY2001 – 2002

MEDICAID SERVICES

FY01 Title XIX Base Program General Fund Shortfall

The Department's recent projections of the number of beneficiaries expected to need medical services and the projected costs related to those services indicate that the program is underfunded in the current fiscal year.

FY02 Medicaid Services Base Program Projected Formula Increment

This request will provide the Division of Medical Assistance the funding necessary to maintain Title XIX "base" Medicaid program services at projected levels of need for FY02. The base Medicaid program is defined as the Medicaid program with related services and eligible populations as it is presently configured.

For the past four years, the Division of Medical Assistance has moved from a budget projection method based on a model of annual expenses to one that uses the change in the number of eligible members by groups and the medical services purchased for each group per month as the primary determinant of program expenditure levels.

The method used to calculate the funding need begins with a basic formula to determine the cost per member per month:

$$\text{Total Cost for Services Per Month} / \text{Total Number of Members Enrolled Per Month} \\ = \text{Total Cost Per Member Per Month}$$

This formula is applied to each individual Medicaid beneficiary group: Children, Adults, the Elderly, and the Disabled. The use of these four member groups helps the Department better realize who our Medicaid beneficiaries are and the cost to the program of the services purchased by each group. An average of each group's historical number of members per month and the average cost of services provided to each member per month is determined, and the totals provide the means by which the Division can objectively extrapolate the line of "best fit" for the base program's future need.

This line of "best fit" has been projected for the remainder of the current fiscal year through the upcoming fiscal year. The result is an objective projection of the total number of members and the total cost per member needed to maintain the State's base Medicaid program for the remainder of FY01 and FY02, which is supported by the historical trend in the changes in monthly enrollment and spending.

Fiscal year "best fit" projections are further developed by a separate analysis of varying factors that affect Medicaid program enrollment and costs. The Division takes into consideration anticipated changes in State and federal policy and in the related environment that will likely influence the number of eligible members enrolled and/or the cost of services provided to each individual member group.

The following tables summarize the Division's retrospective fiscal year analysis of the base program since July 1996 through the projected program needs for FY 2002.

Average Number Eligible Monthly

	Children	Adults	Elderly	Disabled	Totals
FY97	37,665	14,332	4,843	7,949	64,790
FY98	36,114	13,196	4,923	8,159	62,391
FY99	38,001	13,333	5,062	8,755	65,151
FY00	49,155	12,990	5,268	9,251	76,664
FY01 Projected	53,830	12,812	5,456	9,670	81,769
FY02 Projected	53,900	12,633	5,651	10,124	82,309

Average Cost Per Member Per Month

	Children	Adults	Elderly	Disabled	Totals
FY97	\$207.55	\$282.47	\$876.94	\$1,059.60	\$378.70

FY98	\$234.52	\$329.75	\$947.75	\$1,181.30	\$434.75
FY99	\$272.65	\$372.87	\$1,041.52	\$1,285.83	\$489.04
FY00	\$262.14	\$424.81	\$1,129.36	\$1,417.49	\$488.71
FY01 Projected	\$275.58	\$446.67	\$1,158.81	\$1,472.50	\$502.88
FY02 Projected	\$278.74	\$451.68	\$1,200.99	\$1,467.22	\$514.79

Change in Average Number Eligible Monthly

.....Children	Adults	Elderly	Disabled	Totals	
FY97					
FY98	(1,552)	(1,136)	80	209	(2,398)
FY99	1,887	137	139	596	2,760
FY00	11,154	(343)	206	496	11,513
FY01 Projected	4,675	(178)	189	420	5,105
FY02 Projected	71	(179)	195	454	540

Change in Average Cost Per Member Per Month

.....Children	Adults	Elderly	Disabled	Totals	
FY97					
FY98	\$26.97	\$47.28	\$70.80	\$121.70	\$ 56.05
FY99	\$38.12	\$43.12	\$93.77	\$104.52	\$489.04
FY00	(\$10.50)	\$51.94	\$87.93	\$131.67	(\$0.33)
FY01 Projected	\$13.44	\$21.86	\$29.46	\$55.00	\$14.17
FY02 Projected	\$3.15	\$5.00	\$42.17	(\$5.28)	\$11.90

- On average, 76,664 Alaskans received Medicaid services each month during FY00.
- In FY01, an average of 81,178 Alaskans are receiving Medicaid services each month.
- Medicaid eligible members per month grew by 18 percent in FY00 from FY99. Children enrolled in Title XIX and Title XXI accounted for 97 percent of the 18 percent increase in total Medicaid eligible members from FY99 to FY00. The enrollment of eligible children is expected to level out during the last of FY01 through FY02.
- The average number of adults receiving Medicaid assistance each month decreased by 3 percent in FY00 from FY99. This is consistent with the trend of very slight decreases in the number of eligible adults each year since FY96.
- The average number of elderly Medicaid members per month has grown by 4 percent from FY99 to FY00. This is consistent with previous years and is expected to remain close to the same in FY02.
- The number of Alaska's Medicaid members in the Disabled category increased by 6 percent in FY00 over FY99. The Department expects the number of disabled members to continue to grow at approximately that same rate.

Based on available information and the analyses performed, there will be a projected increase in base program need of \$12.8 million in State general fund match for FY02. This amount drives \$50.5 million in federal funds.

Federal Medical Assistance Percentage (FMAP)

The Balanced Budget Act of 1997 changed the percentage rate at which the federal government participates in Alaska's Medicaid program from 50 percent to 59.8 percent for federal fiscal years 98, 99, and 00. This allowed the State to use funds already committed to the Medicaid program to expand coverage for uninsured children and pregnant women. Alaska's enhanced rate reverted to the statutorily calculated FMAP beginning federal FY01.

The Balanced Budget Refinement Act of 2000 may authorize a five-year (federal FY01-05), five percent adjustment to the FMAP statutory formula applicable only to Medicaid and the Children's Health Insurance Program, but the methodology change to the per capita income calculation implemented by the Bureau of Economic Analysis (BEA)

may actually reduce Alaska's FMAP for federal FY02 by 3 percent. As of this writing, the Act remains in conference committee until the outcome of the Presidential election is determined.

API DSH Match Return

Under the "base" Medicaid program, the Alaska Psychiatric Institute (API) is only allowed to collect Medicaid for children ages 21 or under and the elderly over the age of 65. In FY94 the Administration and the Legislature agreed to have API participate in the federal Medicaid Disproportionate Share Hospital program (DSH). DSH allowed for additional federal Medicaid payments to API because they served a disproportionate share of low-income patients. The DSH program has allowed the Legislature to save \$7 million per year for a total of \$49 million in API general fund need from FY94 through FY00.

In 1998, Congress passed legislation that changed the DSH program by reducing the federal government's participation. Beginning with federal FY01, the amount the State can claim as DSH will be reduced over a three year period to 30 percent of what was claimed in federal FY95. In FY01, the federal DSH payment to API was reduced by \$4,253,975. Federal payments will drop \$900,000 in FY02 and \$630,000 in FY03. The Department of Health and Social Services worked with the Alaska Mental Health Authority and developed a plan to minimize the impact on API and the State general fund as the DSH federal payments drop.

In order to replace DSH revenue lost to API, portions of the GF/MH originally provided to Medical Assistance were returned to the Division of Mental Health and Developmental Disabilities in FY00 and FY01. A third transfer to API is included in the FY02 request, continuing the replacement of the lost DSH revenue with GF/MH.

Denali KidCare (Children's Health Insurance Program)

Under Title XXI, the Children's Health Insurance Program (CHIP), Alaska opted to expand the Medicaid program to assure adequate health care coverage for children and pregnant women with annual incomes below 200 percent of the federal poverty level. Denali KidCare, implemented in March of 1999, was expected to reach 11,600 uninsured children. Approximately 15,000 children have been enrolled in the program. The Division anticipates enrollment numbers to level out during the remainder of FY01 and throughout FY02.

State Children's Health Insurance Program (SCHIP) Reallocation

The Balanced Budget Refinement Act of 2000 authorizes reallocated funding to Alaska and eight other states that exhausted individual federal FY98 and FY99 SCHIP allotments. Each state receiving a reallocation will be allowed two years in which to spend these dedicated funds. Alaska's share is likely to be about \$20 million although final numbers will not be available until mid-to-late January 2001. During FY00, Alaska's federal allotment for SCHIP was \$7.7 million; expenditures on Title XXI children exceeded \$27 million in federal funds. As of this writing, the Act is being considered by the President.

Mental Health Stabilization Homes

Mental Health Stabilization Homes will provide a short-term option as a step down from restrictive care or as an interim setting for children with emotional disturbances that are difficult to place. This interim care will allow families and providers the opportunity to develop a safe and appropriate community placement. This project will be funded with federal funds only from this Division.

CHRONIC AND ACUTE MEDICAL ASSISTANCE (CAMA)

CAMA provides a limited package of health services to those individuals with chronic medical conditions who do not qualify for the Medicaid program. The program provides benefits, including necessary prescription drugs, limited physician visits, and required hospital care, to individuals in need with incomes of less than \$300 per month and total resources that do not exceed \$500 in value with the exception of a home and a vehicle.

The FY01 Authorized funding for the CAMA program is \$4,304.4 in general funds. The CAMA program was underfunded in FY00, and payments for medical services claims were deferred for payment until July 1, 2000. Three months into the current fiscal year, one half of the FY01 projected number of Alaskans who qualify for CAMA benefits were enrolled. Expenditures, excluding the deferred payments amount, exceeded one-third of FY01 authorized funds.

The Department is closely monitoring the combined effects of the FY00 shortfall, enrollment numbers, and the cost of care provided on FY01 expenditure levels.

The CAMA program beneficiary caseload is anticipated to grow at an annual rate of 10 percent for the period FY01-02. This rate of growth can be attributed, in part, to a continued increase in the number of adults who lose Medicaid eligibility and subsequently enter the CAMA program. The cost of providing the basic services under CAMA to eligible Alaskans is expected to increase consistent with the experience of the Medicaid program and other State-funded health programs. The Department is conservatively requesting an increment of \$430.0 to maintain the current level of services provided under the State's CAMA program in FY02.

Major BRU Accomplishments for FY2000

Denali KidCare Program

The success of Alaska's Denali KidCare program is well-known nationally and has received national praise in an article published by the New York Times in September 2000. "Experts did not expect a rural state (Alaska), with a large Native American population and broad swaths of hard-to-travel land, to set any records in enrollment. As it turned out, Alaska was among the top six states in signing up uninsured children, according to figures from the Children's Defense Fund, which has closely monitored enrollment. And U.S. Secretary of Health and Human Services Donna Shalala praised the program started by the Knowles-Ulmer administration in a letter to the governor. 'On the occasion of your State of the Child address... I would like to congratulate the State of Alaska on its efforts to make sure that every child gets a healthy start in life.'"

Hospital Pro Share

Alaska, along with several other states, gained approval by the federal government to initiate supplemental Medicaid payments to government owned hospitals. Separately, under section 1903(w)(6)(A) of the Social Security Act, states are allowed to receive intergovernmental transfers of funds for use within their Medicaid program as match for federal expenditures in return. States have combined these two provisions to simultaneously provide support to public hospitals and other health needs within the state.

Last year the State of Alaska paid out \$20 million dollars and received \$18 million in intergovernmental transfers. This FY02 budget anticipates the same experience although calculations will not occur until after this writing. It should be noted that there is movement on the federal level to discontinue hospital pro-share.

Chronic Acute Medical Assistance

The CAMA program has continued to meet the acute medical needs of a growing caseload of extremely needy persons while the program remains under-funded.

Key Performance Measures for FY2002

Measure: The average time the division takes from receiving a claim to paying it. (SB)

(Developed jointly with Legislature in FY2000.)

Current Status:

Six month average: 11.03 days.

Benchmark:

We have reviewed historical data and the average time to pay a claim has remained around 11 days. We believe that is the benchmark to maintain.

Background and Strategies:

The assumption is that the timely payment of medical claims gives providers incentive to participate in the Medicaid Program. Therefore, the legislature and the division are interested in a measure of how timely the division responds to or pays claims.

Measure: The number of errors per claim processed categorized by the type of provider. (SB)
(Developed jointly with Legislature in FY2000.)

Current Status:

	Percent of Claims Paid with		Average # of errors per claims paid
	No errors	2 or more errors	
All Providers	73.54	4.54	.47
Inpatient Hosp.	63.24	4.53	.95
IHS Clinic	77.15	2.60	.46
Physician(individual)	71.49	6.22	.52
Physician(group)	68.80	4.80	.69
Dentist(individual)	71.44	11.79	.44
Dentist(group)	76.55	10.53	.42
Home & Community Based Care	74.55	5.44	.55
Pharmacy	82.98	1.11	.23
Mental Health Agcy	69.41	7.65	.56

Background and Strategies:

This is a measure of the providers ability to file error-free claims which reduces the work necessary to process claims. Those provider types experiencing more problems filing error-free claims are targeted for additional training. We assume that providers who do not experience problems in getting claims paid are much more likely to continue participating in the Medicaid Program.

Measure: The percentage of total funds that are used to pay claims compared to the percent used for administration of the division. (SB)
(Developed jointly with Legislature in FY2000.)

Current Status:

97.3 percent of total funds are used to pay claims.
 3.7 percent of total funds are used to administer the Division.

Background and Strategies:

This is a fiscal measure of the State's administrative overhead necessary to support the medical assistance programs.

Measure: The percentage of the providers who are participating in the medical assistance program. (SB)
(Developed jointly with Legislature in FY2001.)

Current Status:

	Enrolled	Participating	Percent Participating
Physicians	3,806	802	21.07
Physicians(group)	115	96	83.48
Dentists	490	192	39.18
Dentists(group)	21	15	71.43
Pharmacies	198	115	58.08
Hospitals	25	25	100.00
Nursing Homes	15	15	100.00

Enrolled: 8,040
 Participating: 2,358
 All Other: 3,370
 % Participating: 29.33%

* The all other category includes all enrolled providers who are not participating. A participating provider is defined as a provider that has billed Medicaid for services one or more times in the past calendar year.

Please see benchmark narrative.

Benchmark:

The Division has measured providers enrolled and providers participating in the Medicaid Program during FY2000. An enrolled provider is any provider that has been enrolled in the Medicaid claims payment system as a provider of a service covered under Medicaid. A participating provider is defined as a provider that has billed Medicaid for services one or more times in the past calendar year. The "all other" category listed in this performance measure includes all enrolled providers who are not participating. Non-participating providers may include, but are not limited to, providers that have switched services (for example, a generalist now providing EMT services), providers that are no longer in business, or providers that are eligible to provide more than one services, but have not billed for any one of those services (for example, a large hospital may bill for many different services, but not all in the past calendar year).

Background and Strategies:

This is a measure of Alaska's medical assistance clients' access to medical services through the same network of medical providers available to the balance of the State's population.

Measure: Health care coverage, children-Medicaid & Denali KidCare enrolled children. (GI)
(Not yet addressed by Legislature.)

Current Status:

Monthly number of Medicaid & Denali KidCare enrolled children:

September, 2000	52,409
August, 2000	54,869
July, 2000	53,893
June, 2000	54,597
May, 2000	54,310
April, 2000	52,663

Six month average: 53,790

Background and Strategies:

As part of Governor Tony Knowles' Smart Start for Alaska's Children initiative, the Medicaid program was expanded to incorporate the new federal Children's Health Insurance Program (CHIP). Under this expansion, children through age 18 and pregnant women are eligible for health care coverage if their family income is below 200 percent of the federal poverty level. The expanded coverage of children and pregnant women is called Denali KidCare to reflect the new emphasis on outreach and improved access to simplified eligibility processes. The expanded coverage began March 1, 1999.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• The average time the division takes from receiving a claim to paying it. (SB)		X			
• The number of errors per claim processed categorized by the type of provider. (SB)		X			
• The percentage of total funds that are used to pay claims compared to the percent used for administration of the division. (SB)		X			
• The percentage of the providers who are participating in the medical assistance program. (SB)		X			
• Health care coverage, children-Medicaid & Denali KidCare enrolled children. (GI)		X			

**Medical Assistance
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
Medicaid Services	145,514.7	307,508.4	17,685.9	470,709.0	143,688.7	318,028.4	24,295.2	486,012.3	156,771.7	368,479.3	23,022.2	548,273.2
Catastrophic & Chronic Illness	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	4,734.4	0.0	0.0	4,734.4
Non-Formula Expenditures												
None.												
Totals	145,514.7	307,508.4	17,685.9	470,709.0	143,688.7	318,028.4	24,295.2	486,012.3	161,506.1	368,479.3	23,022.2	553,007.6

Medical Assistance**Proposed Changes in Levels of Service for FY2002**

Mental Health Stabilization Homes

Mental Health Stabilization Homes will provide a short-term option as a step down from restrictive care or as an interim setting for children with emotional disturbances that are difficult to place. This interim care will allow families and providers the opportunity to develop a safe and appropriate community placement. This project will be funded with federal funds only from this Division.

Medical Assistance**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	143,688.7	318,028.4	24,295.2	486,012.3
Adjustments which will continue current level of service:				
-Medicaid Services	-24.5	0.0	-1,273.0	-1,297.5
Proposed budget increases:				
-Medicaid Services	13,107.5	50,450.9	0.0	63,558.4
-Catastrophic & Chronic Illness	430.0	0.0	0.0	430.0
FY2002 Governor	161,506.1	368,479.3	23,022.2	553,007.6

Component: Medicaid Services

Contact: Janet Clarke, Director, Administrative Services

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To enable Alaskans in need access to the same broad range of medical care through the same network of medical care providers who provide services to the general population, and to conduct medical surveillance that assures provided medical services are appropriate and of the proper amount, duration, and scope.

Key Component Issues for FY2001 – 2002

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FY02 Medicaid Services Base Program Projected Formula Increment

This request will provide the Division of Medical Assistance the funding necessary to maintain Title XIX "base" Medicaid program services at projected levels of need for fiscal FY02. The base Medicaid program is defined as the Medicaid program with related services and eligible populations as it is presently configured.

For the past four years, the Division of Medical Assistance has moved from a budget projection method based on a model of annual expenses to one that uses the change in the number of eligible members by groups and the medical services purchased for each group per month as the primary determinant of program expenditure levels.

The method used to calculate the funding need begins with a basic formula to determine the cost per member per month:

$$\text{Total Cost for Services Per Month} / \text{Total Number of Members Enrolled Per Month} = \text{Total Cost Per Member Per Month}$$

This formula is applied to each individual Medicaid beneficiary group: Children, Adults, the Elderly, and the Disabled. The use of these four member groups helps the Department better realize who our Medicaid beneficiaries are and the cost to the program of the services purchased by each group. An average of each group's historical number of members per month and the average cost of services provided to each member per month is determined, and the totals provide the means by which the Division can objectively extrapolate the line of "best fit" for the base program's future need.

This line of "best fit" has been projected for the remainder of the current fiscal year through the upcoming fiscal year. The result is an objective projection of the total number of members and the total cost per member needed to maintain the State's base Medicaid program for the remainder of FY01 and FY02, which is supported by the historical trend in the changes in monthly enrollment and spending.

Fiscal year "best fit" projections are further developed by a separate analysis of varying factors that effect Medicaid program enrollment and costs. The Division takes into consideration anticipated changes in State and federal policy and in the related environment that will likely influence the number of eligible members enrolled and/or the cost of services provided to each individual member group.

The following tables summarize the Division's retrospective fiscal year analysis of the base program since July 1996 through the projected program needs for FY 2002.

Average Number Eligible Monthly

.....Children	Adults	Elderly	Disabled	Totals	
FY97	37,665	14,332	4,843	7,949	64,790
FY98	36,114	13,196	4,923	8,159	62,391
FY99	38,001	13,333	5,062	8,755	65,151
FY00	49,155	12,990	5,268	9,251	76,664
FY01 Projected	53,830	12,812	5,456	9,670	81,769
FY02 Projected	53,900	12,633	5,651	10,124	82,309

Average Cost Per Member Per Month

.....Children	Adults	Elderly	Disabled	Totals	
FY97	\$207.55	\$282.47	\$876.94	\$1,059.60	\$378.70
FY98	\$234.52	\$329.75	\$947.75	\$1,181.30	\$434.75
FY99	\$272.65	\$372.87	\$1,041.52	\$1,285.83	\$489.04
FY00	\$262.14	\$424.81	\$1,129.36	\$1,417.49	\$488.71
FY01 Projected	\$275.58	\$446.67	\$1,158.81	\$1,472.50	\$502.88
FY02 Projected	\$278.74	\$451.68	\$1,200.99	\$1,467.22	\$514.79

Change in Average Number Eligible Monthly

.....Children	Adults	Elderly	Disabled	Totals	
FY97					
FY98	(1,552)	(1,136)	80	209	(2,398)
FY99	1,887	137	139	596	2,760
FY00	11,154	(343)	206	496	11,513
FY01 Projected	4,675	(178)	189	420	5,105
FY02 Projected	71	(179)	195	454	540

Change in Average Cost Per Member Per Month					
.....Children	Adults	Elderly	Disabled	Totals	
FY97					
FY98	\$26.97	\$47.28	\$70.80	\$121.70	\$ 56.05
FY99	\$38.12	\$43.12	\$93.77	\$104.52	\$489.04
FY00	(\$10.50)	\$51.94	\$87.93	\$131.67	(\$0.33)
FY01 Projected	\$13.44	\$21.86	\$29.46	\$55.00	\$14.17
FY02 Projected	\$3.15	\$5.00	\$42.17	(\$5.28)	\$11.90

- On average, 76,664 Alaskans received Medicaid services each month during FY00.
- In FY01, an average of 81,178 Alaskans are receiving Medicaid services each month.
- Medicaid eligible members per month grew by 18 percent from FY99 to FY00. Children enrolled in Title XIX and Title XXI accounted for 97 percent of the 18 percent increase in total Medicaid eligible members from FY99 to FY00. The enrollment of eligible children is expected to level out during the last of FY01 through FY02.
- The average number of adults receiving Medicaid assistance each month decreased by 3 percent in FY00 from FY99. This is consistent with the trend of very slight decreases in the number of eligible adults each year since FY96.
- The average number of elderly Medicaid members per month has grown by 4 percent from FY99 to FY00. This is consistent with previous years and is expected to remain close to the same in FY02.
- The number of Alaska's Medicaid members in the Disabled category increased by 6 percent in FY00 over FY99. The Department expects the number of disabled members to continue to grow at approximately that same rate.

Based on the information available and the analyses performed, there will be a projected increase in base program need of \$12.8 million in State general fund match for FY02. This amount drives \$50.5 million in federal funds.

Federal Medical Assistance Percentage (FMAP)

The Balanced Budget Act of 1997 changed the percentage rate at which the federal government participates in Alaska's Medicaid program from 50 percent to 59.8 percent for federal fiscal years 98, 99, and 00. This allowed the State to use funds already committed to the Medicaid program to expand coverage for uninsured children and pregnant women. Alaska's enhanced rate reverted to the statutorily calculated FMAP beginning federal FY01.

The Balanced Budget Refinement Act of 2000 (before the President as of this writing) authorizes a five-year (federal FY01-05) five percent adjustment to the FMAP statutory formula applicable only to Medicaid and the Children's Health Insurance Program, but the methodology change to the per capita income calculation implemented by the Bureau of Economic Analysis (BEA) may actually reduce Alaska's FMAP for federal FY02 by 3 percent.

API DSH Match Return

Under the "base" Medicaid program, the Alaska Psychiatric Institute (API) is only allowed to collect Medicaid for children ages 21 or under and the elderly over the age of 65. In FY94 the Administration and the Legislature agreed to have API participate in the federal Medicaid Disproportionate Share Hospital program (DSH). DSH allowed for additional federal Medicaid payments to API because they served a disproportionate share of low-income patients. The DSH program has allowed the Legislature to cut \$7 million per year for a total of \$49 million in API general fund need from FY94 through FY00.

In 1998, Congress passed legislation that changed the DSH program by reducing the federal government's participation. Beginning with federal FY01, the amount the State can claim as DSH will be reduced over a three year period to 30 percent of what was claimed in federal FY95. In FY01, the federal DSH payment to API was reduced by \$4,253,975. Federal payments will drop \$900,000 in FY02 and \$630,000 in FY03. The Department of Health and Social Services worked with the Alaska Mental Health Authority and developed a plan to minimize the impact on API and the State general fund as the DSH federal payments drop.

In order to replace DSH revenue lost to API, portions of the GF/MH originally provided to Medical Assistance were returned to the Division of Mental Health and Developmental Disabilities in FY00 and FY01. A third transfer to API is included in the FY02 request, continuing the replacement of the lost DSH revenue with GF/MH.

Denali KidCare (Children's Health Insurance Program)

Under Title XXI, the Children's Health Insurance Program (CHIP), Alaska opted to expand the Medicaid program to assure adequate health care coverage for children and pregnant women with annual incomes below 200 percent of the federal poverty level. Denali KidCare, implemented in March of 1999, was expected to reach 11,600 uninsured children. Approximately 12,980 eligible children have been enrolled in the program. The Division anticipates enrollment numbers to level out during the remainder of FY01 and throughout FY02.

State Children's Health Insurance Program (SCHIP) Reallocation

The Balanced Budget Refinement Act of 2000 authorizes reallocated funding to Alaska and eight other states that exhausted individual federal FY98 and FY99 SCHIP allotments. Each state receiving a reallocation will be allowed two years in which to spend these dedicated funds. Alaska's share is likely to be about \$20 million although final numbers will not be available until mid to late January 2001. During FY00, Alaska's federal allotment for SCHIP was \$7.7 million; expenditures on Title XXI children exceeded \$27 million in federal funds. As of this writing, the Act is being considered by the President.

Major Component Accomplishments for FY2000

Please see Medical Assistance BRU accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

- AS 47.07 Medical Assistance for Needy Persons
- AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions
- AS 47.25 Public Assistance

Social Security Act:

- Title XVIII Medicare
- Title XIX Medicaid
- Title XXI Children's Health Insurance Program

Administrative Code:

- 7 AAC 43 Medicaid
- 7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:

- Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please see Medical Assistance BRU performance measures.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
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Component — Medicaid Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Please see Medical Assistance BRU performance measures.		X			

Medicaid Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.2	0.0	0.0
73000 Contractual	2,092.9	7,665.6	4,815.0
74000 Supplies	0.6	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	468,615.3	478,346.7	543,458.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	470,709.0	486,012.3	548,273.2
Funding Sources:			
1002 Federal Receipts	307,508.4	318,028.4	368,479.3
1003 General Fund Match	88,179.5	78,907.4	103,041.0
1004 General Fund Receipts	45.7	14,075.0	14,375.0
1005 General Fund/Program Receipts	265.0	364.0	364.0
1007 Inter-Agency Receipts	3,834.5	1,588.5	1,588.5
1037 General Fund / Mental Health	31,576.8	30,630.6	29,333.1
1092 Mental Health Trust Authority Authorized Receipts	0.0	1,273.0	0.0
1108 Statutory Designated Program Receipts	13,851.4	21,433.7	21,433.7
1119 Tobacco Settlement	25,447.7	19,711.7	9,658.6
Funding Totals	470,709.0	486,012.3	548,273.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	307,508.4	318,028.4	318,028.4	368,479.3	372,489.2
Interagency Receipts	51015	3,834.5	1,588.5	1,588.5	1,588.5	1,588.5
General Fund Program Receipts	51060	265.0	364.0	364.0	364.0	364.0
Statutory Designated Program Receipts	51063	13,851.4	21,433.7	21,433.7	21,433.7	21,433.7
Restricted Total		325,459.3	341,414.6	341,414.6	391,865.5	395,875.4
Total Estimated Revenues		325,459.3	341,414.6	341,414.6	391,865.5	395,875.4

Medicaid Services**Proposed Changes in Levels of Service for FY2002**

Please see Medical Assistance BRU service changes.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	143,688.7	318,028.4	24,295.2	486,012.3
Adjustments which will continue current level of service:				
-Transfer DET Medicaid Match to DMHDD	-765.0	0.0	0.0	-765.0
-Transfer 2001 DSH Match Return to API	-532.5	0.0	0.0	-532.5
-Replace MHTAAR Funding Appropriated by Legislature	1,273.0	0.0	-1,273.0	0.0
Proposed budget increases:				
-Court Ordered Abortion Coverage	300.0	0.0	0.0	300.0
-Formula Program Increment	12,807.5	50,450.9	0.0	63,258.4
FY2002 Governor	156,771.7	368,479.3	23,022.2	548,273.2

Component: Catastrophic and Chronic Illness Assistance (AS 47.08)

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

To maintain access to health care and to provide health coverage for Alaskans in need.

Component Services Provided

The Chronic Acute Medical Assistance (CAMA) program provides a limited package of health services to those individuals with chronic medical conditions who do not qualify for the Medicaid program. To receive benefits under the CAMA program, low-income persons must have an immediate need for medical care and be unable to secure other private or public assistance. Income is limited to less than \$300 per month while total resources must be under \$500, with the exception of a home and vehicle. The CAMA program provided benefits that included necessary prescription drugs, limited physician visits, and required hospital care to 1,153 individuals in FY2000.

Component Goals and Strategies

To provide Alaskans in need with access to the same broad range of medical care through the same network of medical providers who provide services to the general population, and to conduct medical surveillance that assures provided medical services are appropriate and of the proper amount, duration, and scope.

Key Component Issues for FY2001 – 2002

The CAMA program beneficiary caseload is anticipated to grow at an annual rate of 10 percent for the period FY01-02. This rate of growth can be attributed in part to a continued increase in the number of adults who lose Medicaid eligibility and subsequently enter the CAMA program. The cost of the basic services provided under CAMA is expected to remain consistent with the experience of the Medicaid program and other State-funded health programs.

The FY01 Authorized funding for the CAMA program is \$4,304.4 in general funds. The CAMA program was under-funded in FY00 and medical services claims had to be deferred for payment until July 1, 2000. Three months into the current fiscal year, one-half of the FY01 projected number of Alaskans who qualify for CAMA benefits were enrolled. Expenditures, excluding the deferred claims, exceeded one-third of FY01 authorized funds. The Department is closely monitoring the combined effects of the FY00 shortfall, CAMA enrollment numbers, and the cost of health care provided on FY01 expenditure levels.

Major Component Accomplishments for FY2000

The CAMA program has continued to meet the acute medical needs of a growing caseload of extremely needy persons while the program remains under-funded.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Title XIX Medicaid

Title XXI Children's Health Insurance Program

Administrative Code:

7 AAC 43 Medicaid

7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:

Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please see Medical Assistance BRU performance measures.

(Developed jointly with Legislature in FY1999.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">Please see Medical Assistance BRU performance measures.			X		

Catastrophic and Chronic Illness Assistance (AS 47.08)

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	3.9	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	3,649.6	4,304.4	4,734.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	3,653.5	4,304.4	4,734.4
Funding Sources:			
1004 General Fund Receipts	2,508.5	4,304.4	4,734.4
1119 Tobacco Settlement	1,145.0	0.0	0.0
Funding Totals	3,653.5	4,304.4	4,734.4

Catastrophic and Chronic Illness Assistance (AS 47.08)

Proposed Changes in Levels of Service for FY2002

There are no changes to levels of service provided by the CAMA program.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	4,304.4	0.0	0.0	4,304.4
Proposed budget increases:				
-Increment for Catastrophic & Chronic Illness Utilization Growth	430.0	0.0	0.0	430.0
FY2002 Governor	4,734.4	0.0	0.0	4,734.4

Public Assistance Administration Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

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BRU Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

To meet this mission, the Division administers programs that provide temporary economic support to needy families and individuals, financial assistance to the elderly, blind and disabled, benefits to supplement nutrition, medical benefits, and supportive services that enable and encourage welfare recipients to pursue economic independence and self-sufficiency.

BRU Services Provided

This BRU is responsible for determining applicant eligibility for the administration of the Alaska Temporary Assistance Program (ATAP), Food Stamps, Old Age Assistance, Aid to the Blind, Aid to the Disabled, General Relief, Heating Assistance, Permanent Fund Dividend and Alaska Longevity Bonus - Old Age Assistance Hold harmless, and Child Care. The BRU also determines eligibility for CAMA, Medicaid, and Denali KidCare in support of the Division of Medical Assistance.

The Division completes the enormous workload by the exceptional dedication and productivity of our employees. Contract Fee Agents are paid to take assistance applications in about 200 villages. To qualify for public assistance, individuals must have income near or below poverty level and also meet a number of specific eligibility requirements which vary by program. The programs the Division administers predominately serve children, the aged or disabled and individuals with specific medical needs. The Division must meet payment accuracy requirements, work participation standards and timeliness guidelines or be subject to federal sanction or penalty.

BRU Goals and Strategies

It is the goal of the Department to promote and protect the well-being of Alaskans. Public Assistance aims to help children and families remain safe and healthy, to assist the elderly and disabled to live independently and in economic security, and to provide those in need with the opportunity to become self-supporting. Preventing dependency, promoting self-sufficiency and supporting clients toward obtaining employment in jobs capable of supporting a family are major Division goals.

- Continue to promote a work first philosophy that places a strong emphasis on work and job readiness.
- Provide services that help recipients retain jobs and attain better jobs.
- Increase number of working clients.
- Fund grants and contracts to local service providers for case management and job readiness services.
- Support and promote local initiatives that address employment barriers and family challenges.
- Provide child care subsidies to allow parents to obtain and retain employment.
- Achieve a balance in meeting the full range of division goals, objectives and performance measures.
- Respond to Federal and State mandates timely with automated solutions which lessen the impacts of the changes on system users.
- Reduce Food Stamp error rate.
- Increase work participation rates of Temporary Assistance adults.

Key BRU Issues for FY2001 – 2002

- The 5-year limit on Temporary Assistance is a key element of welfare reform. July 2002, marks the first month families in Alaska will face the 60-month time limit for receiving Temporary Assistance and some families will run out of time. Our goal remains to move Alaskans from welfare to jobs so they can support their families while maintaining a safety net for those truly in need.
- Ensuring continued reinvestment of program savings in work services.
- Providing sufficient funding of the child care subsidy programs is necessary to allow parents to enter and stay in the workforce.
- Need to improve Food Stamp Program quality control payment error rate. Alaska was penalized for making too many mistakes when figuring client benefits. Progressively larger penalties received in FY1997, FY1998 and projected for FY1999.
- Need to improve the two-parent work activity participation rate. Alaska was penalized for failing to meet the federally mandated participation rate for two-parent Temporary Assistance families in FFY1998.

Major BRU Accomplishments for FY2000

- Successful statewide use of Alaska Quest, the electronic benefit transfer system for Food Stamp and Temporary Assistance programs, and Adult Public Assistance direct deposit of cash benefits.
- Statewide welfare fraud deterrent effort totaled nearly \$3 million in cost avoidance, direct savings claims established and claims recovered.
- Increased Community Grants and Contracts for community-based work services (case management and work search) to help even more recipients off welfare
- Provided child care subsidies for an average of 2,722 ATAP children each month
- 55% of Temporary Assistance adults participated in work activities; 32% of the families had adults working in paying jobs.
- Successfully operated the Denali KidCare Office, expanding health care coverage to uninsured children and pregnant women.
- Opened one stop Job Centers in Fairbanks and Anchorage
- Provided technical assistance to support the successful implementation of Native TANF programs.

Key Performance Measures for FY2002

Measure: Percentage of adults receiving temporary assistance who have earned income. (SB 281)

(Developed jointly with Legislature in FY2001.)

Current Status:

1. The percentage of Temporary Assistance adults with earned income was 32% in March 2000.
2. The percentage of closed Temporary Assistance cases with earned income was 40% in March 2000.

Background and Strategies:

Ultimate goal is case closure with earnings. Goal for 2002 is 40% of Temporary Assistance (TA) adults have earned income, and 50% of case closures have earned income. One strategy is the "Work First" program, including use of contracted case management and supportive services. Another is using employment service specialists and counselors to aid in job search. The method used to measure job entry (obtained employment) mirrors that required by the federal government for the TANF High Performance Bonus, using data from the Alaska Department of Labor.

Measure: Rate of payment accuracy for ATAP payments & Food Stamps. (SB 281)

(Developed jointly with Legislature in FY2001.)

Current Status:

1. Temporary Assistance payment accuracy rate was 97% in SFY00.

2. Food Stamp payment accuracy rate was 93% in SFY00.

Background and Strategies:

Accurate benefits ensure clients have the amount of benefits to which they are entitled. Fluctuating benefits cause budget issues for clients and impact their ability to gain self-sufficiency. The Quality Assessment Reviews evaluate payment accuracy using statistically valid desk reviews. The goal for 2002 is 94% accuracy in Food Stamps and 98% accuracy in Temporary Assistance.

Measure: Rate of job retention among adults receiving temporary assistance. (SB 281)

(Developed jointly with Legislature in FY2001.)

Current Status:

The rate of job retention of Temporary Assistance adults was 80% in FFY2000.

Background and Strategies:

Job retention enables families to reduce or eliminate dependency on welfare. Our goal in FY2002 is 85% rate of job retention. Case management, supportive services and child care payments are strategies to enable job retention. The method used to measure job retention mirrors that required by the federal government for the TANF High Performance Bonus, using quarterly data from the Alaska Department of Labor.

Measure: Percent of ATAP families meeting Federal Work Participation rates. (SB 281)

(Developed jointly with Legislature in FY2001.)

Current Status:

In March 2000, 38% of all Temporary Assistance families were in countable work activities and had sufficient hours to meet the federal participation rate requirements.

In March 2000, almost 55% of Temporary Assistance families were in countable work activities but did not have enough hours of participation to count in the federal participation rate calculation.

According to the US DHHS Third Annual Report to Congress on the TANF program, Alaska ranked 8th in the nation for the percentage of adults in unsubsidized employment and in the average number of hours for adults in unsubsidized employment. Only one state ranked higher in both of these critical measures of success.

Benchmark:

Federal law requires that states meet work participation requirements:

FFY 1997 25% of all families
FFY 1998 30%
FFY 1999 35%
FFY 2000 40%
FFY 2001 45%
FFY 2002 50%

However, every state's federal work participation rate is adjusted by a caseload reduction credit that reflects the state's success in moving families off of assistance and into employment. In FFY 00 Alaska's caseload reduction credit was 29%. Based on the caseload reduction credit, Alaska's work participation target was 11%. Thus, Alaska more than met the adjusted federal participation rate requirement.

Background and Strategies:

Temporary Assistance is a work-focused program designed to help Alaskans plan for self-sufficiency and to make a successful transition from welfare to work. Federal law requires the state to meet work participation requirements. Failure to meet federal participation rates results in fiscal penalties.

As Alaska's TA caseload declines, a growing portion of the families require more intensive services just to meet minimal participation requirements. Enhancement of TA Work Services will serve to identify and address client challenges to participation.

Measure: Percentage of ATAP adults who left assistance because they become employed, who receive day care assistance. (SB 281)

(Developed jointly with Legislature in FY2001.)

Current Status:

Moving forward on developing proposed targets and gathering baseline data.

Background and Strategies:

Child care from the Department of Education is critical to families newly independent of Temporary Assistance. This measure indicates usage of child care assistance by Temporary Assistance clients who have worked their way off welfare. Some Temporary Assistance families will leave the program with employment without requiring child care, however, those that do need it must have ready access to the Child Care Assistance program.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Percentage of adults receiving temporary assistance who have earned income.		X			
• Rate of payment accuracy for ATAP payments and Food Stamps.		X			
• Rate of job retention among adults receiving temporary assistance.		X			
• Percent of ATAP families meeting Federal Work Participation rates.		X			
• Percentage of ATAP adults who left assistance because they become employed, who receive day care assistance.		X			

Public Assistance Administration
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
Child Care Benefits	6,102.1	33,051.9	0.0	39,154.0	3,000.0	28,852.0	0.0	31,852.0	3,000.0	30,102.0	0.0	33,102.0
Non-Formula Expenditures												
Public Assistance Admin	796.8	3,736.2	0.0	4,533.0	839.7	4,638.3	0.0	5,478.0	838.2	6,028.4	0.0	6,866.6
Quality Control Public Assistance Field Svcs	469.5	400.4	0.0	869.9	481.6	487.2	0.0	968.8	580.8	486.8	0.0	1,067.6
Public Assistance Field Svcs	10,999.7	10,978.0	1,938.1	23,915.8	11,449.2	11,486.7	1,800.5	24,736.4	11,558.4	11,665.5	2,259.2	25,483.1
Fraud Investigation	524.2	604.1	0.0	1,128.3	547.0	615.1	0.0	1,162.1	548.5	617.1	0.0	1,165.6
Public Assist Data Processing	2,472.0	2,004.2	0.0	4,476.2	2,503.4	2,322.1	62.9	4,888.4	2,501.0	2,317.8	0.0	4,818.8
Work Services	3,816.5	7,478.4	1,305.0	12,599.9	3,823.2	10,118.0	360.0	14,301.2	3,714.4	11,543.7	360.0	15,618.1
Totals	25,180.8	58,253.2	3,243.1	86,677.1	22,644.1	58,519.4	2,223.4	83,386.9	22,741.3	62,761.3	2,619.2	88,121.8

Public Assistance Administration

Proposed Changes in Levels of Service for FY2002

For the past few years, the Division's reinvestment strategy has been critical to the early success of welfare reform. As recipients left the caseload, savings in ATAP benefit dollars have been generated. While a significant share of the total savings are used to help reduce the state's general fund deficit and to provide other state services, a portion of the savings are reinvested in services to help even more recipients off welfare, which in turn, results in more savings.

- The Families Work! Initiative will reinvest ATAP payments savings to add new services for families who will begin to reach the 60 month limit in July 2002. These families require more intensive services than currently available. Services funded by this increase will be provided intensive case management through an interdisciplinary team approach.
- In FY2002 we need to expand our Work First model by improving the employability of clients, enhancing retention and advancement, and addressing the more complex challenges that impede success in the work place.
- The federal Ticket to Work and Work incentives Improvement Act of 1999 (TWWIIA) establishes three grant programs with the purpose of supporting State efforts to assist people with disabilities in securing and sustaining competitive employment. Alaska has been awarded a grant, a portion of which will be used to train Public Assistance staff in methods of encouraging employment for appropriate Adult Public Assistance (APA) recipients. This grant funding, coupled with ongoing efforts to improve service delivery to working clients, will help the APA program to more effectively promote employment and self-sufficiency.

Public Assistance Administration

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	22,644.1	58,519.4	2,223.4	83,386.9
Adjustments which will continue current level of service:				
-Public Assistance Admin	-1.5	1,390.1	0.0	1,388.6
-Quality Control	-0.8	-0.4	0.0	-1.2
-Public Assistance Field Svcs	109.2	178.8	7.0	295.0
-Fraud Investigation	1.5	2.0	0.0	3.5
-Public Assist Data Processing	-2.4	-4.3	-0.9	-7.6
-Work Services	-108.8	1,425.7	0.0	1,316.9
-Child Care Benefits	0.0	1,250.0	0.0	1,250.0
Proposed budget decreases:				
-Public Assist Data Processing	0.0	0.0	-62.0	-62.0
Proposed budget increases:				
-Quality Control	100.0	0.0	0.0	100.0
-Public Assistance Field Svcs	0.0	0.0	451.7	451.7
FY2002 Governor	22,741.3	62,761.3	2,619.2	88,121.8

Component: Public Assistance Administration

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

Directs, supervises and coordinates the activities of the Division in planning and directing welfare administration.

- Develop and maintain public assistance program policy, procedure and State plans necessary for the operation of Temporary Assistance (ATAP), Food Stamps, Adult Public Assistance, Child Care, General Relief and related programs.
- Provide guidance in procurement, welfare services grants and contracts development and management, accounting, payroll and personnel supporting Division activity.
- Research, interpret and transmit public assistance program information for use by PA field offices, state and federal government and the public.
- Develop the Division's annual budget, legislative position papers, fiscal notes, briefing documents and budget materials on public assistance issues.
- Maintain the PA claims unit for the recovery of overpayments received by public assistance recipients due to fraud, agency or client caused payment errors.
- Provide contract and grant funding for the "Families Work!" initiative, teen parent services, the state's Food Bank program, and TANF funded services helping families that are victims of domestic violence.

Component Goals and Strategies

ADMINISTER PUBLIC ASSISTANCE PROGRAMS RESPONSIBLY, ACCURATELY, AND IN COMPLIANCE WITH LAW.

- Analyze problems, implement solutions and set Division priorities.
- Promote coordination and collaboration by DPA at every level to improve the quality of public assistance services statewide
- Continually strive to improve Division operation and business practices.

Key Component Issues for FY2001 – 2002

The recipients of public assistance, by definition, are living in poverty. With the advent of welfare reform, the Division has made a concerted effort to assist individuals and families toward self-sufficiency; to plan for the future, move off public assistance and leave poverty through employment. The Division's budget in recent years reflects a shift from direct financial assistance to child care and work services which help recipients find and retain employment. The early success of this approach has also yielded significant general fund savings.

While the ATAP caseload and expenditure have declined significantly, DPA continues to serve these working families by providing Food Stamps, Medicaid, and other employment related support services. Caseloads have grown in programs serving individuals for whom work is less likely. As Alaska's population has grown, so has the number of elderly and disabled persons needing safety net services, Adult Public Assistance (APA) and Medicaid.

Major Component Accomplishments for FY2000

- Successful first year of full statewide use of Alaska Quest (EBT) and addition of Adult Public Assistance direct deposit feature.

- Negotiated and implemented Community Grants and Contracts for community-based work services.
- Directed Division component activity that resulted in continued success in welfare reform.
- Successful development and implementation of CCTHITA's Native Family Assistance program. This program serves approximately 400 families in Southeast Alaska and is Alaska's 2nd Native Family Assistance program (NFAP) in operation.

Statutory and Regulatory Authority

AS 47.25.975-990 Food Stamps
 AS 47.25.310-420 Alaska Temporary Assistance Program
 AS 47.25.430-615 Adult Public Assistance
 AS 47.25.120-300 General Relief Assistance

Key Performance Measures for FY2002

Measure: Please see the performance measures under the Public Assistance Administration BRU.
(Developed jointly with Legislature in FY2001.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Please see the performance measures under the Public Assistance Administration BRU.		X			

Public Assistance Administration
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,010.5	1,202.4	1,225.0
72000 Travel	53.7	40.3	40.3
73000 Contractual	3,102.8	1,646.1	5,231.4
74000 Supplies	12.8	10.9	10.9
75000 Equipment	4.4	9.0	9.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	348.8	2,569.3	350.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	4,533.0	5,478.0	6,866.6
Funding Sources:			
1002 Federal Receipts	3,736.2	4,638.3	6,028.4
1003 General Fund Match	568.4	571.6	581.1
1004 General Fund Receipts	213.3	215.6	216.3
1005 General Fund/Program Receipts	15.1	39.8	40.8
1053 Investment Loss Trust Fund	0.0	12.7	0.0
Funding Totals	4,533.0	5,478.0	6,866.6

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	3,736.2	4,638.3	3,638.3	6,028.4	6,028.4
General Fund Program Receipts	51060	15.1	39.8	39.8	40.8	39.8
Restricted Total		3,751.3	4,678.1	3,678.1	6,069.2	6,068.2
Total Estimated Revenues		3,751.3	4,678.1	3,678.1	6,069.2	6,068.2

Public Assistance Administration**Proposed Changes in Levels of Service for FY2002**

Some of the savings from the reduction in ATAP expenditures are reinvested and combined with other available federal TANF authority available in the PA Administration component to fund the new initiative called "Families Work!".

A substantial number of families in Alaska live in highly stressful environments and are at risk of poor family outcomes. These families face continued reliance on public assistance and the potential loss of services if they are not self-sufficient before they reach their 60-month lifetime limit on assistance.

The Families Work! Initiative will reinvest ATAP payments savings to add new services for families who will begin to reach the 60 month limit in July 2002. These families require more intensive services than currently available. Services funded by this increase will provide intensive case management through a team approach. In addition to coordinating service delivery, the team will assist in determining a family's eligibility for an exemption from the 60-month time limit, or for recommending an extension or provision of safety net services.

With focused, coordinated and intensified services, a portion of these families will gain the skills, self-esteem, work place experience, and connections to community resources that will enable them to successfully transition to employment.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	839.7	4,638.3	0.0	5,478.0
Adjustments which will continue current level of service:				
-Transfer 516.0 federal authority for TANF services RP 6-1-0002	0.0	516.0	0.0	516.0
-Reinvestment for Families Work! from ATAP	0.0	875.0	0.0	875.0
-Year 2 Labor Costs - Net Change from FY2001	-1.5	-0.9	0.0	-2.4
FY2002 Governor	838.2	6,028.4	0.0	6,866.6

Public Assistance Administration**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	18	18	Annual Salaries	946,019
Part-time	1	1	COLA	15,039
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	310,491
			<i>Less 3.66% Vacancy Factor</i>	(46,549)
			Lump Sum Premium Pay	0
Totals	19	19	Total Personal Services	1,225,000

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	0	0	2	0	2
Administrative Manager IV	0	0	1	0	1
Coordinator	0	0	1	0	1
Division Director	0	0	1	0	1
Elig Technician I	0	0	1	0	1
Elig Technician II	0	0	1	0	1
Grants Administrator II	0	0	1	0	1
Information Officer	1	0	0	0	1
Prog Coordinator	0	0	1	0	1
Project Coord	0	0	1	0	1
Public Assist Analyst II	0	0	2	0	2
Public Asst Prog Administrator	0	0	1	0	1
Public Asst Prog Off	0	0	2	0	2
Research Analyst III	0	0	2	0	2
Secretary	0	0	1	0	1
Totals	1	0	18	0	19

Component: Quality Control

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

Quality Assessment is a federally mandated activity for the Food Stamp and Medicaid programs. The purpose is to gather information designed to measure the extent to which the state meets accountability outcomes, such as the accuracy rate in Food Stamps and in Medicaid. In addition, the unit samples Temporary Assistance benefits to assess the effectiveness of state policies, payment accuracy, and data not available from the automated system.

Each month, Quality Assessment staff randomly sample and review cases for each federal program. Staff analyze results of these reviews to determine the agency's success in meeting the agency's mission and desired outcomes. In addition, the Temporary Assistance (ATAP) sample gathers detailed disaggregated information on applicants, recipients and those terminated from the program.

Component Goals and Strategies

- 1) ORGANIZE AND CHAIR THE DIVISION'S PERFORMANCE MEASUREMENT EFFORTS.
 - Establish and monitor measurements for agency's program outcomes.
 - Connect measurements to agency performance goals and budget.
 - Publish accomplishments on a regular basis.
- 2) ACCURATEY AND TIMELY COMPLETE AND TRANSMIT RESULTS FROM THE FOOD STAMP REVIEWS FOLLOWING FEDERAL REQUIREMENTS.
 - Target reviews to evaluate payment accuracy in Food Stamps.
 - Electronically transmit to USDA, Food Nutrition Service data collected.
 - Supervisory review of QC documents.
 - Provide data to the Corrective Action Committee.
- 3) REDUCE FOOD STAMP ERROR RATE.
 - Prepare and monitor Corrective Action Plans.
 - Conduct QC reviews in each office/caseload.
 - Facilitate regular meetings with field staff to discuss error trends and causal factors.
 - Develop and monitor a Food Stamp Reinvestment Plan for FFY98 and FFY99, as federally required.
 - Submit quarterly status reports on the Plans.
- 4) ACCURATELY AND TIMELY COMPLETE MEDICAID REVIEWS.
 - Conduct targeted reviews that evaluate performance of specific service groups or policies.
- 5) ACCURATELY AND TIMELY COMPLETE TEMPORARY ASSISTANCE REVIEWS.
 - Targeted reviews that evaluate performance of specific service groups or policies.
 - Electronically transmit QC feedback forms.
- 6) ORGANIZE AND CHAIR THE DIVISION'S CORRECTIVE ACTION COMMITTEE
 - Chair monthly meetings with the agency's managers and policy specialists.
 - Identify causal factors and develop action plans to improve performance.
 - Semi-annual update and distribution of the Food Stamp Corrective Action (CAP) and Temporary Assistance Corrective Compliance Plan (CCP).

Key Component Issues for FY2001 – 2002

- High Food Stamp Program payment error rates caused the USDA to levy penalties for federal Fiscal Years 1997-1999. One method of paying penalties is through a state funded Reinvestment Plan.
- Unacceptable participation in Temporary Assistance's federally countable work activities can cause TANF penalties and the need to submit a Corrective Compliance Plan (CCP). For FFY98, participation for 2 parent families was not met. The federal agency reviewed Alaska's claim for good cause; however, the Division received notification that a formal CCP will be required and a penalty levied. The payment or reinvestment of penalties must come from general funds. Quality Assessment has an active role in the corrective action process.

Major Component Accomplishments for FY2000

- QA reviewers completed 614 Food Stamp reviews for the October 1999 through September 2000 review period.
- QA reviewers completed 88 Temporary Assistance reviews for July 1999 through June 2000.
- QA reviewers completed 414 Medicaid reviews for FFY2000.
- 360 (14%) customer surveys processed in SFY00.
- QA error rate is 12% of reviews audited by the federal agency.
- QA Lite reviews completed 1,218 reviews statewide for the Food Stamp Reinvestment Plan during FFY00. All reporting was completed in advance of federal deadlines during FFY00.

Statutory and Regulatory Authority

7 CFR 275.10 Food Stamp Quality Control
45 CFR 431.800 MED Quality Control

Quality Control
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	697.2	869.5	893.3
72000 Travel	36.6	31.2	31.2
73000 Contractual	76.3	61.7	136.7
74000 Supplies	8.4	5.6	5.6
75000 Equipment	51.4	0.8	0.8
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	869.9	968.8	1,067.6
Funding Sources:			
1002 Federal Receipts	400.4	487.2	486.8
1003 General Fund Match	469.5	472.4	480.8
1004 General Fund Receipts	0.0	0.0	100.0
1053 Investment Loss Trust Fund	0.0	9.2	0.0
Funding Totals	869.9	968.8	1,067.6

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	400.4	476.3	476.3	486.8	487.2
Restricted Total		400.4	476.3	476.3	486.8	487.2
Total Estimated Revenues		400.4	476.3	476.3	486.8	487.2

Quality Control

Proposed Changes in Levels of Service for FY2002

The department has entered into a settlement agreement with the USDA, Food and Nutrition Service to repay the FFY1999 Food Stamp error rate penalty by investing unmatched state dollars in activities aimed to improve our payment accuracy.

The FY2002 budget adds state GF for a portion of the installment funding DPA needs to invest over a three-year period to reduce the Food Stamp benefits error rate in accordance with the \$987.0 penalty settlement with USDA.

The settlement agreement gives the State until September 30, 2003, to reinvest the full value of the penalty. The Quality Control budget increment of \$100.0 will initiate more activities to sustain our progress, spreading that effort over the next three years. When this increment is combined with existing allocations for the FS reinvestment project the total funding will be about \$350.0 annually.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	481.6	487.2	0.0	968.8
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-0.8	-0.4	0.0	-1.2
Proposed budget increases:				
-FS Penalty Settlement with the USDA	100.0	0.0	0.0	100.0
FY2002 Governor	580.8	486.8	0.0	1,067.6

Quality Control

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	15	15	Annual Salaries	670,528
Part-time	0	0	COLA	9,479
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	236,614
			<i>Less 2.54% Vacancy Factor</i>	(23,321)
			Lump Sum Premium Pay	0
Totals	15	15	Total Personal Services	893,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	1	0	1	0	2
Elig Qual Cntrl Tech I	6	2	1	0	9
Elig Qual Cntrl Tech II	1	0	0	0	1
Public Asst Prog Off	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Statistical Technician I	0	0	1	0	1
Totals	8	2	5	0	15

Component: Public Assistance Field Services

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

- Provides direct customer services in 17 offices statewide.
- Conducts intake, determines eligibility, authorizes benefits, and maintains cases for Food Stamps, Temporary Assistance, Medicaid, Adult Public Assistance, General Relief and Chronic and Acute Medical Assistance programs.
- Initiates and monitors self-sufficiency planning, assesses job readiness, coaches, links with resources, provides child care assistance and support services for recipients of the Alaska Temporary Assistance Program and the Food Stamp Employment and Training program.
- Makes referrals and links PA recipients to employers, employment services, and social, health, education, and training programs/organizations.
- Manages the Department's Work Services contracts, grants and RSAs to community service providers to furnish case management, job readiness and support services to Temporary Assistance recipients.
- Partners in the Alaska Job Center Network.
- Develops local initiatives designed to achieve the full range of Division goals and to promote the Division's guiding principles.

Component Goals and Strategies

The challenge:

The Adult Public Assistance Program's sustained growth requires additional program development and resources. The decline in Food Stamp payment accuracy requires additional program development and resources. The Division must take a close look at our business processes to determine if we can improve efficiencies and shift resources. At the same time, we must take care to avoid depleting essential resources from the declining Temporary Assistance caseload. Strategies employed over the past three years successfully moved recipients with minimal barriers into employment. The challenge now is to serve recipients who have significant and long-term barriers to employment. Most continue to be subject to the 60 month time limit. These recipients require intensive, and often expensive services to achieve self-sufficiency.

Goals and Strategies:

- 1) **ACHIEVE A BALANCE IN MEETING THE FULL RANGE OF DIVISION GOALS, OBJECTIVES AND PERFORMANCE MEASURES**
 - Provide effective management and leadership
 - Develop additional data sources and reports
 - Conduct quarterly Continuous Improvement Reviews in District Offices
 - Implement Annual Action Plans
 - Closely monitor grants and contracts for compliance
 - Modify the role of the Eligibility Technician in the work services delivery process to allow them to focus on quality eligibility work
- 2) **IMPROVE EFFICIENCY, OUTCOMES, AND CUSTOMER SERVICE**
 - Implement business process improvements to gain maximum efficiency from available resources

- Conduct a study of job classes to improve operations by clarifying roles that reflect our post-welfare reform business, balance the workload and establish more defined career ladder opportunities
 - Conduct customer surveys to refine and improve our service delivery structure
 - Enhance partnerships within Job Centers and with community organizations to avoid duplication of services and maximize community resources
3. DEVELOP STAFF
- Enhance the Staff Development and Training Unit
 - Encourage local staff development initiatives
 - Provide learning opportunities for staff with leadership potential
 - Develop a staff mentorship program
 - Implement a recognition and reward system for exceptional staff

Key Component Issues for FY2001 – 2002

- Maintain federally mandated Food Stamp Accuracy Rate: approximately 91%
- Achieve federally mandated work participation rates for 2 parent families
- Develop and initiate new strategies for working with Temporary Assistance recipients who have significant and substantial barriers to employment
- Respond to Denali KidCare enrollment levels far in excess of expectation
- Respond to the steady caseload growth of the Adult Public Assistance Program
- Move from implementation to maintenance and continuous improvement in the "One Stop" Job Centers
- Provide technical assistance for implementation of Native TANF programs
- Increase partnership role in helping disabled APA recipients move into the workforce

Major Component Accomplishments for FY2000

- Exceeded federally mandated TANF all-families participation rate
- The Denali KidCare Office brought applications processing time frames to same day despite enrollment in excess of expectations
- Opened One Stop Job Centers in Fairbanks and the Anchorage Gambell
- Implemented system to monitor grants and contracts, and support work service providers
- Completed quarterly Continuous Improvement Reviews of local offices
- Updated Eligibility Technician and Workforce Development Specialist Performance Standards and developed standard performance evaluation forms
- Supported implementation of Native TANF programs
- Developed case review manual and training

Statutory and Regulatory Authority

AS 47.27.005 - Alaska Temporary Assistance Program
AS 47.25.-430-615 - Adult Public Assistance
AS 47.25.975-990 - Food Stamps
AS 47.07.010-900 - Medicaid
AS 47.25.120-300 - General Relief Assistance
AS 47.23.075 - Permanent Fund Dividend Hold Harmless
AS 47.25.122 - Alaska Longevity Bonus Hold Harmless
AS 47.10.230-260 - Title IV-E
AS 47.04.010-080 - Public Assistance

Key Performance Measures for FY2002

Measure: Please see the performance measures under the Public Assistance Administration BRU.
(Developed jointly with Legislature in FY2001.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">• Please see the performance measures under the Public Assistance Administration BRU.		X			

Public Assistance Field Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	19,161.2	20,531.5	20,969.9
72000 Travel	322.3	264.1	272.1
73000 Contractual	3,998.3	3,665.1	3,962.4
74000 Supplies	231.2	157.7	160.7
75000 Equipment	202.8	118.0	118.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	23,915.8	24,736.4	25,483.1
Funding Sources:			
1002 Federal Receipts	10,978.0	11,486.7	11,665.5
1003 General Fund Match	8,782.3	8,832.3	9,099.3
1004 General Fund Receipts	2,217.4	2,445.3	2,459.1
1007 Inter-Agency Receipts	1,938.1	1,800.5	2,259.2
1053 Investment Loss Trust Fund	0.0	171.6	0.0
Funding Totals	23,915.8	24,736.4	25,483.1

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	10,978.0	11,486.7	11,656.7	11,665.5	11,656.7
Interagency Receipts	51015	1,938.1	1,800.5	1,800.5	2,259.2	2,259.2
Restricted Total		12,916.1	13,287.2	13,457.2	13,924.7	13,915.9
Total Estimated Revenues		12,916.1	13,287.2	13,457.2	13,924.7	13,915.9

Public Assistance Field Services

Proposed Changes in Levels of Service for FY2002

- Field trainers and case managers will develop and train/use new skills and strategies to assist recipients with significant and long-term barriers to achieving self-sufficiency.
- The Federal Medicaid Infrastructure Grant program was established to support people with disabilities in securing and sustaining competitive employment. This FY2002 increment adds \$299.4 inter-agency receipts for RSA services to be funded by the Governor's Council on Disabilities and Special Education (GCDSE), recipient of the federal grant. The RSA funding will provide training and technical assistance supporting DPA eligibility determination workers to help them encourage and support Adult Public Assistance (APA) recipients to work.
- Denali KidCare has contributed to the success of welfare reform because parents were reluctant to leave welfare for work for fear of losing health coverage for their children. Parents are now able to take a job which does not provide dependent health coverage. The Division of Public Assistance provides staff who determine eligibility, and authorize benefits for the Denali KidCare Medicaid program. The FY2002 budget adds RSA funding for eligibility staff and support needed for caseload work that reached 17,390 in October 2000.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	11,449.2	11,486.7	1,800.5	24,736.4
Adjustments which will continue current level of service:				
-Transfer 278.0 for DPA Training Services RP 6-1-0002	108.0	170.0	0.0	278.0
-Year 2 Labor Costs - Net Change from FY2001	1.2	8.8	7.0	17.0
Proposed budget increases:				
-Enhance Employment Options for People with Disabilities	0.0	0.0	299.4	299.4
-Denali KidCare Eligibility Unit	0.0	0.0	152.3	152.3
FY2002 Governor	11,558.4	11,665.5	2,259.2	25,483.1

Public Assistance Field Services

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	403	409	Annual Salaries	16,241,774
Part-time	5	5	COLA	222,091
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	6,062,753
			<i>Less 6.91% Vacancy Factor</i>	<i>(1,556,718)</i>
			Lump Sum Premium Pay	0
Totals	408	414	Total Personal Services	20,969,900

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Clerk I	1	0	0	0	1
Administrative Assistant	3	1	1	0	5
Administrative Clerk I	0	0	0	1	1
Administrative Clerk II	26	10	3	14	53
Administrative Clerk III	8	2	1	10	21
Administrative Supervisor	2	1	0	1	4
Chf Pub Asst Fld Op	1	0	0	0	1
Elig Office Manager	0	0	0	1	1
Elig Technician I	31	5	5	13	54
Elig Technician II	67	19	5	52	143
Elig Technician III	18	7	4	9	38
Elig Technician IV	11	4	2	5	22
Public Assist Analyst I	4	0	0	0	4
Public Assist Analyst II	2	0	1	0	3
Public Asst Fld Svcs Mgr I	4	1	1	0	6
Public Asst Fld Svcs Mgr II	2	1	1	0	4
Publications Spec II	1	0	0	0	1
Social Worker I	1	0	0	0	1
Social Worker II	6	4	1	4	15
Social Worker IV	0	0	1	0	1
Training Specialist	7	0	0	0	7
Work Force Dev Spec I	10	2	1	7	20
Work Force Dev Spec II	2	1	0	1	4
Work Force Dev Spec III	2	0	0	0	2
Work Force Dev Spec IV	0	0	0	2	2
Totals	209	58	27	120	414

Component: Fraud Investigation

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

The Fraud Control Unit investigates public assistance applicant and recipient fraud allegations received from the public and agency staff. Administrative disqualifications or criminal convictions prevent ongoing participation of persons caught committing welfare fraud. An automated system tracks progressively severe penalties for clients with a history of welfare fraud. The amount of benefits improperly received is determined for debt collection.

Component Goals and Strategies

THE COST-EFFECTIVE DETERRENCE OF PUBLIC ASSISTANCE APPLICANT AND RECIPIENT FRAUD.

- Disqualify dishonest recipients from participating in welfare program, and recover fraudulently obtained public assistance overpayments.
- Protect program integrity, ensure public support, and preserve the interests of honest, low-income Alaskans needing public assistance services.
- Increase Fraud Control Unit productivity by completing more applicant and recipient fraud investigations.
- Expand investigative efforts utilizing Electronic Benefit Transfer data for identifying food stamp fraud.

Key Component Issues for FY2001 – 2002

- Reducing the backlog of fraud referrals that have not yet been investigated. Staff screen incoming fraud allegations and set priorities to first work upon cases still receiving assistance. Still, referrals often exceed productive capacity of the investigators. Operating with full staff will help, coupled with development of procedural improvements to boost productivity.
- Work on procedure and authority to expand investigations to include child care and Electronic Benefit Transfer.

Major Component Accomplishments for FY2000

In FY2000 the Unit's fraud deterrent effort resulted in cost-avoidance, direct savings, new welfare fraud claims established and existing fraud debt collections totaling about \$3 million. The deterrent value of an active fraud control effort which prevents many from committing welfare fraud cannot be quantified, yet significantly adds to this value.

- Nearly 1,000 Food Stamp and Temporary Assistance applicant fraud investigations were conducted, and nearly 400 recipient fraud investigations completed.
- New manager and staff hired and fully trained.
- Developed and converted to new database system to track welfare fraud referrals and outcomes.

Statutory and Regulatory Authority

AS 47.27.015 Alaska Temporary Assistance Program (ATAP)
7 CFR 273.16 Food Stamp Program

Fraud Investigation
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	750.4	809.0	812.5
72000 Travel	3.5	21.7	10.7
73000 Contractual	318.2	321.4	332.4
74000 Supplies	5.7	5.0	5.0
75000 Equipment	50.5	5.0	5.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,128.3	1,162.1	1,165.6
Funding Sources:			
1002 Federal Receipts	604.1	615.1	617.1
1003 General Fund Match	524.2	539.1	548.5
1053 Investment Loss Trust Fund	0.0	7.9	0.0
Funding Totals	1,128.3	1,162.1	1,165.6

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	604.1	615.1	615.1	617.1	615.1
Restricted Total		604.1	615.1	615.1	617.1	615.1
Total Estimated Revenues		604.1	615.1	615.1	617.1	615.1

Fraud Investigation

Proposed Changes in Levels of Service for FY2002

Fraud deterrence is an essential element of public assistance program accountability. The FY2002 budget funds the ongoing effort to deter welfare fraud through investigation of allegations and the assignment of administrative and criminal penalties. Service levels will remain constant for applicant and recipient fraud. Reassigned staff resources may expand investigations in Southeast Alaska and research on suspicious electronic benefit transfer activity.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	547.0	615.1	0.0	1,162.1
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	1.5	2.0	0.0	3.5
FY2002 Governor	548.5	617.1	0.0	1,165.6

Fraud Investigation

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	13	13	Annual Salaries	623,852
Part-time	1	1	COLA	8,044
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	214,002
			<i>Less 3.95% Vacancy Factor</i>	(33,398)
			Lump Sum Premium Pay	0
Totals	14	14	Total Personal Services	812,500

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Elig Qual Cntrl Tech I	6	1	0	2	9
Elig Technician II	1	0	0	0	1
Elig Technician III	1	0	0	0	1
Investigator II	2	0	0	0	2
Public Assist Paymnt Mgr	1	0	0	0	1
Totals	11	1	0	2	14

Component: Public Assistance Data Processing

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

PA Data Processing is responsible for the Eligibility Information System (EIS), system programming changes, reports, and public assistance benefit processing.

The Public Assistance programs operate statewide through the Eligibility Information System (EIS). Public Assistance staff in 14 communities rely upon computers and network resources for welfare-to-work case management, determining program eligibility and updating information. Employees obtain and process client information on EIS. EIS supports the management and issuance of cash, food, medical benefits and ATAP childcare and work and supportive services.

This component provides the EIS system, the communications network, DOA chargeback, and support resources necessary to operate the Public Assistance data benefit issuance and reporting system. Generally 25% of each years budget funds the chargeback cost of computer mainframe and network services from DOA/ITG.

- Provide technological and infrastructure support for division information services needs.
- Process all EIS outputs including benefits, Electronic Benefit Transfer cards, notices and reports.
- Ensure federal and state mandates are implemented timely in the EIS.
- Provide automated efficiencies to enhance field staff productivity.
- Provide user support to field staff and partner agencies.
- Coordinate with Native organizations to help in their TANF automation.
- Maintain numerous interfaces to provide helpful information to system users who are determining eligibility and provide case management.
- Provide Intranet and Web Development Services.
- Manage and operate services for twenty-eight local area networks and associated desktop hardware and software.
- Collaborate with Alaska Job Center Network (AJCN) partner agencies to provide cost effective network services and support to staff, clients, and partners in job centers across the state.

Component Goals and Strategies

DATA PROCESSING SERVICES AND OPERATIONS GROUP IS TASKED WITH SUPPORTING THE MANY AUTOMATED SYSTEMS AND NETWORKS THAT PROVIDE LABOR SAVING PROCESSES AND EXCELLENT SUPPORT FOR ITS CUSTOMERS.

- Develop new system solutions to expedite welfare-to-work case management and data collection.
- Respond to federal and state mandates timely with automated solutions which lessen the impacts of the changes on system users.
- Streamline system processes to increase efficiency while decreasing system processing costs.
- Adapt new technology to better serve our customers.
- Provide technical support to Native TANF programs.
- Upgrade System Operations production equipment and capacity.
- Improve format and content of EIS notices sent to clients.
- Enhance system performance by purging aged data.

Key Component Issues for FY2001 – 2002

- Computer systems have to support management and field staff in identifying possible gaps or profiles of customers needing immediate attention.
- As Native TANF expands and contractors change and develop, automated systems remain the strongest link between each entity statewide. Interfaces and data input remain a critical challenge.
- Technology is changing - rapidly and constantly. Whether an executive, manager, supervisor, trainer, caseworker, or administrative support person our customer's needs are changing too.
- Statewide technology policy and directives require maintaining adequate resources for implementation.
- Backup and Recovery and Disaster Recovery Procedures for LAN's statewide will be developed.

Major Component Accomplishments for FY2000

- Beginning in June 1997 with the Ketchikan Job Center, DPA Network Services and the Departments of Labor and Workforce Development, Education and Early Development, and Community and Economic Development, partners in coordination with the Alaska Job Center Network (AJCN), actively participated in planning, designing and the installation of networks, public resource computer rooms, and Internet services throughout the state. In May 2000, the last and the largest of these Job Centers at the Anchorage DPA Gambell location was completed.
- Year 2000 testing and implementation for EIS and the Division's network and desktop infrastructure. Year 2000 Contingency Plan and coordination of services.
- Development and implementation of automation to support Denali Kid Care and Working Disabled Medicaid functions on EIS.
- Successful statewide use of Alaska Quest, the electronic benefit transfer system for the Food Stamp and Temporary Assistance programs, and Adult Public Assistance direct deposit of cash benefits.
- Development of new case management tools.

Statutory and Regulatory Authority

AS 47.05.010-080 Administration of Welfare, Social Services, and Institutions.

Public Assistance Data Processing
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	2,043.4	2,502.8	2,433.2
72000 Travel	39.7	29.5	29.5
73000 Contractual	2,254.4	2,223.8	2,263.8
74000 Supplies	41.5	30.2	30.2
75000 Equipment	97.2	102.1	62.1
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	4,476.2	4,888.4	4,818.8
Funding Sources:			
1002 Federal Receipts	2,004.2	2,322.1	2,317.8
1003 General Fund Match	1,872.6	1,878.0	1,894.6
1004 General Fund Receipts	599.4	605.3	606.4
1053 Investment Loss Trust Fund	0.0	20.1	0.0
1061 Capital Improvement Project Receipts	0.0	62.9	0.0
Funding Totals	4,476.2	4,888.4	4,818.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	2,004.2	2,322.1	2,322.1	2,317.8	2,322.1
Interagency Receipts	51015	0.0	62.9	0.0	0.0	0.0
Restricted Total		2,004.2	2,385.0	2,322.1	2,317.8	2,322.1
Total Estimated Revenues		2,004.2	2,385.0	2,322.1	2,317.8	2,322.1

Public Assistance Data Processing

Proposed Changes in Levels of Service for FY2002

The division's Eligibility Information System (EIS) operations will design and implement a new notice system, paperless reporting, and provide a more modern look to the EIS computer system. Some of the benefits to the changes include a more efficient way to produce and send notices to clients and quicker turnaround time for notice and/or stock changes.

Systems operations staff will continue to respond to mandatory system maintenance such as platform software upgrades dictated by ITG, interface changes required by our state, vendor and federal partners as well as policy changes mandated by state and federal agencies.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,503.4	2,322.1	62.9	4,888.4
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-2.4	-4.3	-0.9	-7.6
Proposed budget decreases:				
-Delete CIP Receipts	0.0	0.0	-62.0	-62.0
FY2002 Governor	2,501.0	2,317.8	0.0	4,818.8

Public Assistance Data Processing**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	42	42	Annual Salaries	1,900,512
Part-time	0	0	COLA	26,575
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	660,295
			<i>Less 5.96% Vacancy Factor</i>	<i>(154,182)</i>
			Lump Sum Premium Pay	0
Totals	42	42	Total Personal Services	2,433,200

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	1	0	0	0	1
Administrative Clerk II	3	0	0	0	3
Analyst/Programmer I	1	0	0	0	1
Analyst/Programmer II	2	0	0	0	2
Analyst/Programmer III	3	0	0	0	3
Analyst/Programmer IV	4	0	0	0	4
Analyst/Programmer V	2	0	0	0	2
Micro/Network Spec I	0	0	1	0	1
Micro/Network Spec II	2	0	0	0	2
Micro/Network Tech I	0	1	0	2	3
Micro/Network Tech II	3	0	0	0	3
Public Assist Analyst I	12	0	2	0	14
Public Assist Analyst II	1	0	0	0	1
Public Asst Prog Off	1	0	1	0	2
Totals	35	1	4	2	42

Component: Work Services

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

The Work Services component:

- Funds grants and contracts to community service providers to furnish welfare-to-work case management, job readiness and support services to Temporary Assistance recipients
- Provides for almost universal case management linking the network of contracted services, child care providers, and employers to work services participants assuring that participants move from welfare dependency toward employment
- Assists program participants in gaining paid employment at the earliest opportunity
- Supports local initiatives designed to promote and support family self-sufficiency
- Collaborates with partner agencies to help move families from welfare to work
- Provides employment and training services to Food Stamp recipients
- Supports job development
- Promotes employer and community involvement in welfare reform efforts
- Helps fund out-of-wedlock pregnancy prevention and teen parent services
- Supports independent evaluation of the Temporary Assistance program
- Supports partnership with DOL/WD for Welfare-to-Work case management services

Component Goals and Strategies

WORK SERVICES EMPOWERS PUBLIC ASSISTANCE RECIPIENTS TO ATTAIN ECONOMIC SELF-SUFFICIENCY THROUGH EMPLOYMENT.

Work Service strategies will:

- Fund grants and contracts to local service providers for case management and job readiness services
- Ensure all mandatory participants have access to welfare-to-work case management services
- Help build capacity of local service providers
- Prepare participants to be successful job seekers
- Maintain outreach and incentive programs with employers
- Implement employer-based, short-term training for demand occupations
- Provide supportive services necessary to enable families to pursue, secure, and retain employment
- Support and promote local initiatives that address employment barriers and family challenges
- Develop service delivery strategies that target families with profound barriers to self-sufficiency

Key Component Issues for FY2001 – 2002

The success of Alaska's welfare reform initiatives rest on the viability and diversity of the state's economy.

Challenges include:

- Ensuring continued re-investment of program savings in work services activities
- Providing meaningful employment opportunities and work activities to families living in economically depressed regions of the state
- Developing strategies that provide enhanced services to families with profound barriers to economic self-sufficiency

- Meeting federal work participation rates: in FY01, 45% of all families and 90% of all two parent families must participate in a defined "work activity".

Major Component Accomplishments for FY2000

- Met and exceeded FY00 federally mandated all-families participation rate
- 54% of Temporary Assistance families participated work activities
- A sustained increase in funding for community-based work services that has greatly expanded the delivery of welfare to work services statewide
- The caseload declined 33% from June 1997 to June 2000 and in these two years, Alaska has saved over \$50 million in welfare benefits
- Provided funding to sustain community-based job participation and job retention services in two communities.
- Ranked 8th in the nation for percentage of adults in unsubsidized employment
- Funded local transportation initiatives that put the "to" in welfare-to-work
- Increased two-parent work participation rate by 30% compared to FY99

Statutory and Regulatory Authority

AS 47.27.005 Alaska Temporary Assistance Program
7 AAC 45

Key Performance Measures for FY2002

Measure: Please see the performance measures under the Public Assistance Administration BRU.
(Developed jointly with Legislature in FY2001.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Please see the performance measures under the Public Assistance Administration BRU. 		X			

Work Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	343.8	426.1	433.4
72000 Travel	192.6	160.3	160.3
73000 Contractual	7,829.3	8,750.8	10,956.4
74000 Supplies	0.4	634.7	4.7
75000 Equipment	21.0	10.0	10.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	4,212.8	4,319.3	4,053.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	12,599.9	14,301.2	15,618.1
Funding Sources:			
1002 Federal Receipts	7,478.4	10,118.0	11,543.7
1003 General Fund Match	2,539.0	2,539.5	2,432.9
1004 General Fund Receipts	1,277.5	1,281.6	1,281.5
1007 Inter-Agency Receipts	1,305.0	360.0	360.0
1053 Investment Loss Trust Fund	0.0	2.1	0.0
Funding Totals	12,599.9	14,301.2	15,618.1

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	7,478.4	10,118.0	9,682.0	11,543.7	11,543.7
Interagency Receipts	51015	1,305.0	360.0	360.0	360.0	360.0
Restricted Total		8,783.4	10,478.0	10,042.0	11,903.7	11,903.7
Total Estimated Revenues		8,783.4	10,478.0	10,042.0	11,903.7	11,903.7

Work Services

Proposed Changes in Levels of Service for FY2002

For the past few years, the Division's reinvestment strategy has been critical to the early success of welfare reform. As recipients left the caseload, savings in ATAP benefit dollars have been generated. While a significant share of the total savings are used to help reduce the state's general fund deficit and to provide other state services, a portion of the savings are reinvested in services to help even more recipients off welfare, which in turn, results in more savings.

The FY2002 budget transfers \$1,863.6 federal ATAP component savings to the Work Services component to expand the division's Work First model by improving the employability of clients, enhancing job retention and advancement, and addressing the more complex challenges that impede success in the work place.

Summary of Component Budget Changes From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	3,823.2	10,118.0	360.0	14,301.2
Adjustments which will continue current level of service:				
-Transfer 266.0 federal authority for TANF services RP 6-1-0002	0.0	-266.0	0.0	-266.0
-Transfer 278.0 for DPA Training services RP 6-1-0002	-108.0	-170.0	0.0	-278.0
-Reinvestment for Work Services from ATAP	0.0	1,863.6	0.0	1,863.6
-Year 2 Labor Costs - Net Change from FY2001	-0.8	-1.9	0.0	-2.7
FY2002 Governor	3,714.4	11,543.7	360.0	15,618.1

Work Services**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	7	7	Annual Salaries	326,080
Part-time	0	0	COLA	4,588
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	113,000
			<i>Less 2.31% Vacancy Factor</i>	(10,268)
			Lump Sum Premium Pay	0
Totals	7	7	Total Personal Services	433,400

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	1	0	1
Prog Coordinator	0	0	2	0	2
Public Assist Analyst II	0	0	1	0	1
Public Asst Prog Off	0	0	1	0	1
Social Svcs Prog Coord	0	0	1	0	1
Totals	0	0	7	0	7

Component: Child Care Benefits

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Component Mission

The mission of the Division of Public Assistance is to provide basic living expenses and self-sufficiency services to Alaskans in need.

Component Services Provided

The Child Care Benefit component provides child care subsidies to families on Temporary Assistance who need child care to work or participate in approved work activities. Families on Temporary Assistance receive one-hundred percent of the state subsidy rate for authorized child care through a program called Parents Achieving Self Sufficiency (PASS) I.

The Child Care Benefit component also provides funding to the Department of Education and Early Development (EED) to support their child care programs, including child care subsidies and child care quality initiatives.

Component Goals and Strategies

- 1) ASSIST FAMILIES RECEIVING TEMPORARY ASSISTANCE MOVE TOWARDS SELF-SUFFICIENCY
 - Provide child care subsidies to allow parents to obtain and retain employment.
 - Continue to improve the DPA child care authorization and payment system.
- 2) IMPROVE THE QUALITY OF CHILD CARE AVAILABLE IN THE STATE
 - Work with EED on initiatives to improve the quality of child care, including those identified in the Building Blocks initiative.
 - Provide quality child care information to all case managers working with families on Temporary Assistance.
 - Provide child care selection information to all Temporary Assistance participants.
- 3) IMPROVE ALIGNMENT OF PASS I, II, AND III PROGRAM POLICIES
 - Coordinate child care policies and procedures with EED.
 - Review authorization, payment, and data collection systems in conjunction with EED and develop plans to consolidate functions as appropriate.

Key Component Issues for FY2001 – 2002

The success of welfare reform depends on the existence of accessible, affordable, quality child care for all low wage workers. Parents on Temporary Assistance do not have the income to pay for child care to allow them to go to work. If a parent has more than two children, their child care costs can often be more than their monthly income. As parents on Temporary Assistance enter the workforce, child care subsidies must be provided to enable parents to stay employed and to move off Temporary Assistance.

Child care assistance for families transitioning from public assistance can often make the difference between unemployment and a return to public assistance, and employment leading to self-sufficiency. As the welfare caseloads have dropped, the demand for child care has risen dramatically. Spending for all state child care assistance programs has grown from \$19 million in FY97 to over \$32 million in FY00. Alaska has always been able to fully fund child care for ATAP families while they are on ATAP and for one year after they leave.

However, the child care subsidy program for low-income families has always maintained a wait list, and continues to maintain one in several communities. The continuing shortfall of Child Care Assistance prevents low-income families from obtaining and maintaining employment and places them at risk of requiring public assistance. Sufficient funding for all of the subsidy programs is necessary to allow parents to enter and stay in the work force.

Major Component Accomplishments for FY2000

- Provide child care subsidies for an average of 2,722 ATAP children each month.
- Improved the PASS I child care subsidy delivery system by more clearly defining policies and procedures for the program and publishing a child care policy manual; increased efficiency by revising forms and procedural protocols; and completed statewide training for all staff on child care P&P's.
- Financed a transfer of \$13.6 million to the Department of Education and Early Development (EED) with TANF program savings generated from the success of welfare reform. This funding was used for child care subsidy and other EED child care initiatives.

Statutory and Regulatory Authority

AS 47.27.005 Alaska Temporary Assistance Program

Key Performance Measures for FY2002

Measure: Please see the performance measures under the Public Assistance Administration BRU.
(Developed jointly with Legislature in FY2001.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Please see the performance measures under the Public Assistance Administration BRU.		X			

Child Care Benefits
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	6,653.3	17,836.7	20,931.7
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	32,500.7	14,015.3	12,170.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	39,154.0	31,852.0	33,102.0
Funding Sources:			
1002 Federal Receipts	33,051.9	28,852.0	30,102.0
1003 General Fund Match	6,102.1	3,000.0	3,000.0
Funding Totals	39,154.0	31,852.0	33,102.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	33,051.9	28,852.0	28,852.0	30,102.0	20,000.0
Restricted Total		33,051.9	28,852.0	28,852.0	30,102.0	20,000.0
Total Estimated Revenues		33,051.9	28,852.0	28,852.0	30,102.0	20,000.0

Child Care Benefits

Proposed Changes in Levels of Service for FY2002

As hundreds of families move from welfare to work, it is critical that affordable, quality child care is available to them. An increase in funding for low-income child care assistance is necessary to continue the success of welfare reform, moving families off of ATAP and into employment and providing supports that will reduce their chances of needing to return to welfare. During the past two years, there have been waiting lists for Child Care Assistance because not enough funding was available to serve all families that needed help.

The FY2002 budget request provides TANF funded increases in the DHSS RSA with the Department of Education and Early Development for child care subsidy. These funds will provide additional child care subsidy and related services to income eligible families. Low-income working families need access to subsidized child care in order to retain their current employment and stay off welfare.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	3,000.0	28,852.0	0.0	31,852.0
Adjustments which will continue current level of service:				
-Transfer 250.0 federal authority for TANF services RP 6-1-0002	0.0	-250.0	0.0	-250.0
-Reinvestments for Child Care Subsidy	0.0	1,500.0	0.0	1,500.0
FY2002 Governor	3,000.0	30,102.0	0.0	33,102.0

Medical Assistance Administration Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

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BRU Mission

To maintain access to health care and provide health coverage for Alaskans in need.

BRU Services Provided

The Division of Medical Assistance (DMA) is responsible for the administration of the Medicaid and Chronic and Acute Medical Assistance (CAMA) programs. CAMA is the successor to the General Relief Medical (GRM) program.

The Division is organized into two offices, one in Anchorage and the other in Juneau. The Anchorage office is responsible for medical claims processing, third-party billing and collections, medical policy development, medical review, prior authorization, operational contract monitoring and administration, Eligibility Information System (EIS) interface, surveillance and utilization review, medical facility certification and licensing, patient assessment and provider enrollment relations, health facility rate setting, recipient and provider hearings and appeals, and authorization of waiver services and clients.

The Juneau office is responsible for defining Medicaid and CAMA eligibility rules in program manuals, State regulations, and the Medicaid State Plan; defining covered medical services, payment rules and methodologies through State regulations and the Medicaid State Plan; interfacing and negotiating with the federal government; budget/financial allocation and control; legislative interface; personnel administration; contract approval and financial administration; Medicaid Rate Advisory Commission interface and support services; program and administrative planning; special projects coordination; and program planning, coordination, and financing with numerous State divisions and agencies.

BRU Goals and Strategies

- Establish program policy and overall program management to ensure that the Division of Medical Assistance works cooperatively with medical providers, clients, and governmental agencies to achieve the mission.
- Provide structural organization emphasizing customer service.
- Anticipate needs and provide timely and responsive support for Medical Assistance programs and personnel.

Key BRU Issues for FY2001 – 2002

Medicaid Management Information System Procurement Project

Federal law requires that all states participating in the Medicaid program operate an automated claims processing system which must be certified by the federal government as a Medicaid Management Information System (MMIS). Federal rules also require that fiscal agent contracts like Alaska's be competitively bid periodically. In addition, new federal rules under the recently adopted Health Insurance Portability and Accountability Act (HIPAA) have mandated significant changes in electronic transaction standards, confidentiality, and system security. In FY88 the Division contracted with First Health Services Corporation through a competitive bid to develop and operate an MMIS in Alaska. In FY89 the federal government certified Alaska's MMIS.

During FY96/97 the Division released an RFP soliciting proposals for the design, development, implementation and operation of a new MMIS in Alaska. The Division received one proposal from an interested vendor. The Division rejected the proposal as not in the best interest of the State pursuant to 2 AAC 12.270. The Health Care Financing Administration concurred with the State's action and extended Alaska's procurement implementation date. Given

the remaining reprocurement timeframe and the still maturing claims processing technology the Division upgraded the current MMIS to Year 2000 Compliant and extended the current contract and will reprocure.

The State of Alaska has decided to take advantage of recent technological advancements and replace or enhance the current MMIS. This three-year project is called the "MMIS Procurement Project" and is divided into three primary phases: Planning, Development, and Implementation. The project, when successfully completed, will result in an eight-year fiscal agent contract.

One of the priority goals for the Department is that the transition to the new system and fiscal agent is accomplished with a minimum of disruption to the provider, user, and beneficiary. It is the Division's goal to involve these communities in the Planning Phase so that a more useful and user friendly system is developed. The new system and contract for fiscal agent services will not only satisfy the needs of the State but the community of clients and medical providers which it is intended to serve.

Medicaid Refinancing

Medicaid is a joint state-federal funded program operated by the Division to pay for primary, acute and long term care services for eligible low-income Alaskans. Most states have taken advantage of the additional federal funding available by modifying their programs to accommodate Medicaid's requirements. Although Alaska has also taken advantage of some important opportunities under Medicaid, many still remain. The Division continues to pursue opportunities for refinancing existing programs that could qualify for Medicaid match participation for allowable services and administrative functions provided for Medicaid eligible clients.

Major BRU Accomplishments for FY2000

Denali KidCare

Under Title XXI -- the Children's Health Insurance Program, Alaska opted to expand the Medicaid program to assure adequate health care coverage for children and pregnant women with annual incomes below 200 percent of the federal poverty level. Based on federal census numbers, it was expected that the program could reach 11,600 uninsured children. The Division contracted with the Divisions of Public Health and Public Assistance for the outreach and eligibility determination activities necessary to implement the program, and the Robert Wood Johnson Foundation and the Crossett Fund granted funds to Alaska to augment the State's outreach efforts. As a result, Denali KidCare has exceeded all expectations by reaching approximately 15,000 uninsured children.

Hospital Pro Share

Alaska, along with several other states, gained approval by the federal government to initiate supplemental Medicaid payments to government owned hospitals. Separately, under section 1903(w)(6)(A) of the Social Security Act, states are allowed to receive intergovernmental transfers of funds for use within their Medicaid programs as match for federal expenditures in return. States have combined these two provisions to simultaneously provide support to public hospitals and other health needs within the state.

Last year the State paid out \$20 million dollars and received \$18 million in intergovernmental transfers. This FY02 budget anticipates the same experience although calculations will not occur until after this writing. It should be noted that there is movement on the federal level to discontinue hospital pro-share.

Operating the Medicaid Program Efficiently and Humanely

During FY00, 111,083 eligible members were enrolled in the Medicaid Program. Of these, 92,103, or 83 percent, used the health care coverage available to them. The total expenditure for Medicaid related services provided to these beneficiaries was \$467 million, and 1,960,000 bills were generated to First Health Services Corporation, Medicaid's fiduciary contractor.

The Medicaid Hotline, established in 1996, responded to 17,545 inquiries from Alaskans with questions or concerns about eligibility requirements, services, billings, or other aspects of the program. These issues were handled in an expedient manner with accuracy and concern for the issue at hand.

Two units within the Division are in place to meet the responsibility of ensuring the Medicaid Program is as efficient as possible. The Third Party Liability Unit pursues monies owed the State by insurance companies and court settlements, among others. During FY00, the unit collected over \$1,500,000 in recoveries.

The Surveillance and Utilization Review Subsystem, or SURS Unit, is designed to determine whether or not program services are being misused by clients or providers. This review process establishes norms for services provided and received and then monitors the services used by Medicaid clients to detect improper, inappropriate, or illegal use of the program. During FY00, the SURS Unit collected over \$390,000.

Key Performance Measures for FY2002

Measure: The average time the division takes from receiving a claim to paying it. (SB)

(Developed jointly with Legislature in FY2000.)

Current Status:

Six month average: 11.03 days.

Benchmark:

We have reviewed historical data and the average time to pay a claim has remained around 11 days. We believe that is the benchmark to maintain.

Background and Strategies:

The assumption is that the timely payment of medical claims gives providers incentive to participate in the Medicaid Program. Therefore, the legislature and the division are interested in a measure of how timely the division responds to or pays claims.

Measure: The number of errors per claim processed categorized by the type of provider. (SB)

(Developed jointly with Legislature in FY2000.)

Current Status:

	Percent of Claims Paid with		Average # of errors per claims paid
	No errors	2 or more errors	
All Providers	73.54	4.54	.47
Inpatient Hosp.	63.24	4.53	.95
IHS Clinic	77.15	2.60	.46
Physician(individual)	71.49	6.22	.52
Physician(group)	68.80	4.80	.69
Dentist(individual)	71.44	11.79	.44
Dentist(group)	76.55	10.53	.42
Home & Community Based Care	74.55	5.44	.55
Pharmacy	82.98	1.11	.23
Mental Health Agcy	69.41	7.65	.56

Background and Strategies:

This is a measure of the providers ability to file error-free claims which reduce the work necessary to process claims. Those provider types experiencing more problems filing error-free claims are targeted for additional training. We assume that providers who do not experience problems in getting claims paid are much more likely to continue participating in the Medicaid Program.

Measure: The percentage of total funds that are used to pay claims compared to the percent used for administration of the division. (SB)

(Developed jointly with Legislature in FY2000.)

Current Status:

96.3 percent of total funds are used to pay claims.
3.7 percent of total funds are used to administer the Division.

Background and Strategies:

This is a fiscal measure of the State's administrative overhead necessary to support the medical assistance programs.

Measure: The percentage of the providers who are participating in the medical assistance program. (SB)

(Developed jointly with Legislature in FY2000.)

Current Status:

	Enrolled	Participating	Percent Participating
Physicians	3,806	802	21.07
Physicians(group)	115	96	83.48
Dentists	490	192	39.18
Dentists(group)	21	15	71.43
Pharmacies	198	115	58.08
Hospitals	25	25	100.00
Nursing Homes	15	15	100.00

Enrolled: 8,040
Participating: 2,358
All Other: 3,370
% Participating: 29.33%

* The all other category includes all enrolled providers who are not participating. A participating provider is defined as a provider that has billed Medicaid for services one or more times in the past calendar year. Please see benchmark narrative.

Benchmark:

The Division has measured providers enrolled and providers participating in the Medicaid Program during FY2000. An enrolled provider is any provider that has been enrolled in the Medicaid claims payment system as a provider of a service covered under Medicaid. A participating provider is defined as a provider that has billed Medicaid for services one or more times in the past calendar year. The "all other" category listed in this performance measure includes all enrolled providers who are not participating. Non-participating providers may include, but are not limited to, providers that have switched services (for example, a generalist now providing EMT services), providers that are no longer in business, or providers that are eligible to provide more than one services, but have not billed for any one of those services (for example, a large hospital may bill for many different services, but not all in the past calendar year).

Background and Strategies:

This is a measure of Alaska's medical assistance clients' access to medical services through the same network of medical providers available to the balance of the State's population.

Measure: Health care coverage, children-Medicaid & Denali KidCare enrolled children. (GI)

(Not yet addressed by Legislature.)

Current Status:

Monthly number of Medicaid & Denali KidCare enrolled children:
September, 2000 52,409
August, 2000 54,869
July, 2000 53,893
June, 2000 54,597

May, 2000 54,310
 April, 2000 52,663

Six month average: 53,790

Background and Strategies:

As part of Governor Tony Knowles' Smart Start for Alaska's Children initiative, the Medicaid program was expanded to incorporate the new federal Children's Health Insurance Program (CHIP). Under this expansion, children through age 18 and pregnant women are eligible for health care coverage if their family income is below 200 percent of the federal poverty level. The expanded coverage of children and pregnant women is called Denali KidCare to reflect the new emphasis on outreach and improved access to simplified eligibility processes. The expanded coverage began March 1, 1999.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• The average time the division takes from receiving a claim to paying it. (SB)		X			
• The number of errors per claim processed categorized by the type of provider. (SB)		X			
• The percentage of total funds that are used to pay claims compared to the percent used for administration of the division. (SB)		X			
• The percentage of the providers who are participating in the medical assistance program. (SB)		X			
• Health care coverage, children-Medicaid & Denali KidCare enrolled children. (GI)		X			

**Medical Assistance Administration
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
Medicaid State Programs	2,234.0	12,352.1	0.0	14,586.1	2,545.5	13,554.6	0.0	16,100.1	4,026.1	16,502.2	405.0	20,933.3
Non-Formula Expenditures												
Medical Assistance Admin.	639.1	655.3	0.0	1,294.4	816.8	875.1	0.0	1,691.9	879.8	938.7	101.4	1,919.9
Health Purchasing Group	4,707.5	10,774.4	0.0	15,481.9	5,281.5	11,804.2	0.0	17,085.7	5,138.1	11,658.9	0.0	16,797.0
Certification and Licensing	336.1	659.9	0.0	996.0	353.6	748.8	0.0	1,102.4	379.4	773.3	0.0	1,152.7
Hearings and Appeals	192.2	185.4	0.0	377.6	203.9	204.5	0.0	408.4	203.9	203.0	0.0	406.9
Audit	279.5	148.0	88.6	516.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Children's Health Eligibility	816.2	1,217.3	329.9	2,363.4	889.1	1,338.7	405.0	2,632.8	0.0	0.0	0.0	0.0
Totals	9,204.6	25,992.4	418.5	35,615.5	10,090.4	28,525.9	405.0	39,021.3	10,627.3	30,076.1	506.4	41,209.8

Medical Assistance Administration**Proposed Changes in Levels of Service for FY2002**

There are no changes to the level of services provided by Medical Assistance Administration.

Medical Assistance Administration**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	10,090.4	28,525.9	405.0	39,021.3
Adjustments which will continue current level of service:				
-Medical Assistance Admin.	63.0	63.6	1.0	127.6
-Medicaid State Programs	941.6	1,391.2	405.0	2,737.8
-Health Purchasing Group	-143.4	-145.3	0.0	-288.7
-Certification and Licensing	25.8	24.5	0.0	50.3
-Hearings and Appeals	0.0	-1.5	0.0	-1.5
-Children's Health Eligibility	-889.1	-1,338.7	-405.0	-2,632.8
Proposed budget increases:				
-Medical Assistance Admin.	0.0	0.0	100.4	100.4
-Medicaid State Programs	539.0	1,556.4	0.0	2,095.4
FY2002 Governor	10,627.3	30,076.1	506.4	41,209.8

Component: Medical Assistance Administration

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Component Mission

To maintain access to health care and to provide health coverage for Alaskans in need.

Component Services Provided

Central Administration and the Director of Medical Assistance are responsible for a variety of functions including overall program management, direction, and support. Program Policy provides support to the Department on current State policy and procedures for the administration of Medical Assistance programs within applicable State and federal statutes and regulations. The Administration/Budget section is responsible for monitoring, coordinating, and facilitating the Division's effort to operate economical and cost effective medical assistance programs. Medical Assistance Administration is also responsible for providing information, as requested by the Director, Commissioner, Legislature, or the Medical Care Advisory Commission, regarding health care and/or the State's Medicaid program. The State's Medicaid Management Information System (MMIS) is key to providing policy makers with supporting data relative to Alaska's experience in providing health care coverage to those in need.

Medical Assistance Administration develops and maintains State administrative regulations regarding eligibility, covered services, and reimbursement of non-institutional services for the Medicaid and CAMA programs. It is charged with maintenance of the Medicaid State Plan, a contractual document upon which federal reimbursement is based. It develops and implements policy and procedure, designs and distributes public information materials, and serves as the primary resource for information provided to recipients, providers, other agencies, the Legislature, and the public. Medical Assistance Administration is tasked with monitoring federal Medicaid law, regulations, and policy to effectively implement compliance in a manner that best meets Alaska's recipient, provider and fiscal needs.

Alaska's Medical Care Advisory Commission (MCAC) is a unique combination of citizens, health care providers, and Medicaid consumers who actively provide advice and support to the State's Medicaid program. The MCAC, through its combined knowledge of Alaska's communities and specific population needs, offers recommendations to ensure quality services, equitable access, and reasonable and adequate health care benefits to Alaskans. MCAC members are appointed by the Commissioner of the Department of Health and Social Services and serve 3-year terms, with one possible reappointment. The Commission consists of at least 7 but not more than 13 members. Up to 6 members of the Commission represent medical providers or members of the health profession who provide services. A corresponding number of members represent consumers of Medicaid services and include one program recipient. The final member of the Commission is the Director of either the Division of Public Health or the Division of Public Assistance. The MCAC meets quarterly -- February, May, August and October. All meetings are announced to the public and opportunity for public testimony is provided/encouraged.

Component Goals and Strategies

To manage, direct, monitor, coordinate, and support the medical assistance programs in a cost effective and efficient manner within applicable State and federal laws and regulations.

To administer and support the Medical Care Advisory Commission. Federal regulations require each state to have a MCAC under Title XIX, Section (a) (22) and 42 CFR 431.12 in order to obtain federal Medicaid matching funds. The mission of the MCAC, as defined by the Commissioner of the Department of Health & Social Services and supported by the by-laws of the Commission is: to be familiar with federal Medicaid law changes; to review and comment on proposed statutory changes to state law; to review and comment on Medicaid regulations; to represent the perspective of Medicaid regarding legislative and regulatory changes, as well as changes to policy or procedures for its constituent group; and to be an advocate for the Medicaid program and its recipients.

Key Component Issues for FY2001 – 2002

Please see Medical Assistance Administration BRU key issues.

Major Component Accomplishments for FY2000

Please see Medical Assistance Administration BRU accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Title XIX Medicaid

Title XXI Children's Health Insurance Program

Administrative Code:

7 AAC 43 Medicaid

7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:

Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please refer to Medical Assistance Administration BRU performance measures.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Please refer to Medical Assistance Administration BRU performance measures. 		X			

Medical Assistance Administration
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	940.5	1,281.6	1,622.4
72000 Travel	89.1	69.8	74.8
73000 Contractual	241.6	312.8	192.5
74000 Supplies	23.2	17.7	20.2
75000 Equipment	0.0	10.0	10.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,294.4	1,691.9	1,919.9
Funding Sources:			
1002 Federal Receipts	655.3	875.1	938.7
1003 General Fund Match	576.1	778.5	854.0
1004 General Fund Receipts	63.0	25.7	25.8
1007 Inter-Agency Receipts	0.0	0.0	101.4
1053 Investment Loss Trust Fund	0.0	12.6	0.0
Funding Totals	1,294.4	1,691.9	1,919.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	655.3	875.1	875.1	938.7	938.7
Interagency Receipts	51015	0.0	0.0	0.0	101.4	101.4
Restricted Total		655.3	875.1	875.1	1,040.1	1,040.1
Total Estimated Revenues		655.3	875.1	875.1	1,040.1	1,040.1

Medical Assistance Administration**Proposed Changes in Levels of Service for FY2002**

There are no changes to the level of services provided.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	816.8	875.1	0.0	1,691.9
Adjustments which will continue current level of service:				
-Transfer from HPG for increased cost of FY01 partial year position changes to full year in FY02.	63.0	63.0	0.0	126.0
-Year 2 Labor Costs - Net Change from FY2001	0.0	0.6	1.0	1.6
Proposed budget increases:				
-Grant from HCFA through Governor's Council to Support Working Disabled	0.0	0.0	100.4	100.4
FY2002 Governor	879.8	938.7	101.4	1,919.9

Medical Assistance Administration**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	19	25	Annual Salaries	1,259,908
Part-time	0	0	COLA	19,881
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	418,795
			<i>Less 4.49% Vacancy Factor</i>	<i>(76,184)</i>
			Lump Sum Premium Pay	0
Totals	19	25	Total Personal Services	1,622,400

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	1	0	1
Administrative Manager I	0	0	1	0	1
Administrative Manager II	0	0	1	0	1
Administrative Manager III	0	0	1	0	1
Administrative Svcs Mgr	0	0	1	0	1
Division Director	0	0	1	0	1
Information Officer II	0	0	1	0	1
Medical Assist Admin II	0	0	4	0	4
Medical Assist Admin III	1	0	3	0	4
Medical Assist Admin IV	1	0	3	0	4
Public Assist Analyst II	0	0	1	0	1
Research Analyst II	0	0	1	0	1
Research Analyst III	0	0	2	0	2
Secretary	0	0	1	0	1
Totals	2	0	23	0	25

Component: Medicaid State Programs

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Component Mission

To maintain access to health care and to provide health coverage to Alaskans in need.

Component Services Provided

Consolidation into one budgetary entity of the purchase of assistance in the administration of Alaska's Medicaid State Plan through contracts with other State agencies. Examples of services purchased include legal support from the Department of Law, and Early Periodic Screening, Diagnosis and Treatment for Alaska's children.

Component Goals and Strategies

To consolidate into one budgetary entity the purchase of assistance in the administration of Alaska's Medicaid State Plan through reimbursable services agreements with other State agencies.

Key Component Issues for FY2001 – 2002

Please see Medical Assistance Administration BRU key issues.

Major Component Accomplishments for FY2000

Please see Medical Assistance Administration BRU accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Title XIX Medicaid

Title XXI Children's Health Insurance Program

Administrative Code:

7 AAC 43 Medicaid

7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:

Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please refer to Medical Assistance Administration BRU performance measures.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">• Please refer to Medical Assistance Administration BRU performance measures.		X			

Medicaid State Programs
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	14,586.1	15,838.1	20,671.3
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	262.0	262.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	14,586.1	16,100.1	20,933.3
Funding Sources:			
1002 Federal Receipts	12,352.1	13,554.6	16,502.2
1003 General Fund Match	2,234.0	2,283.5	3,764.1
1004 General Fund Receipts	0.0	262.0	262.0
1108 Statutory Designated Program Receipts	0.0	0.0	405.0
Funding Totals	14,586.1	16,100.1	20,933.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	12,352.1	13,554.6	13,554.6	16,502.2	16,502.2
Statutory Designated Program Receipts	51063	0.0	0.0	0.0	405.0	405.0
Restricted Total		12,352.1	13,554.6	13,554.6	16,907.2	16,907.2
Total Estimated Revenues		12,352.1	13,554.6	13,554.6	16,907.2	16,907.2

Medicaid State Programs**Proposed Changes in Levels of Service for FY2002**

The Children's Health Eligibility component has been consolidated into this component for FY2002.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,545.5	13,554.6	0.0	16,100.1
Adjustments which will continue current level of service:				
-Transfer Disability Determination RSA from Hlth Purchasing (06-1-0002)	52.5	52.5	0.0	105.0
-Transfer Children's Health Eligibility to Medicaid State Programs Component	889.1	1,338.7	405.0	2,632.8
Proposed budget increases:				
-State Programs Formula Increases	539.0	1,556.4	0.0	2,095.4
FY2002 Governor	4,026.1	16,502.2	405.0	20,933.3

Component: Health Purchasing Group

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Component Mission

To maintain access to health care and to provide health coverage for Alaskans in need.

Component Services Provided

The Health Purchasing Group (HPG) is responsible for medical claims processing; third-party billing and collections; medical policy development; prior authorization of certain medical services; operational contracts monitoring and administration (i.e., Medicaid Management Information System, Professional Review Organization, and Dental Consultant); provider enrollment relations; and surveillance and utilization review of medical care in terms of appropriateness of amount, duration, and scope. The HPG works with the Medicaid Rate Advisory Commission to establish appropriate rates of payment for Medicaid services and maintain the facility rate setting system in accordance with State and federal laws and regulations.

Component Goals and Strategies

The Health Purchasing Group component is responsible for paying medical claims accurately and promptly, ensuring that providers are informed of procedures and policies, ensuring client access to medical services by setting fair and equitable rates for the various medical services the program purchases, and ensuring medical necessity and quality assurance through medical utilization reviews.

Key Component Issues for FY2001 – 2002

Please see Medical Assistance Administration BRU key issues.

Major Component Accomplishments for FY2000

Please see Medical Assistance Administration BRU accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Title XIX Medicaid

Title XXI Children's Health Insurance Program

Administrative Code:

7 AAC 43 Medicaid

7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:

Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please refer to Medical Assistance Administration BRU performance measures.
(Developed jointly with Legislature in FY2000.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">• Please refer to Medical Assistance Administration BRU performance measures.		X			

Health Purchasing Group
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	2,537.4	3,392.9	3,917.5
72000 Travel	64.6	90.3	90.3
73000 Contractual	12,613.1	13,433.9	12,620.6
74000 Supplies	44.4	42.7	42.7
75000 Equipment	222.4	125.9	125.9
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	15,481.9	17,085.7	16,797.0
Funding Sources:			
1002 Federal Receipts	10,774.4	11,804.2	11,658.9
1003 General Fund Match	4,576.9	5,121.3	5,006.2
1004 General Fund Receipts	130.6	131.8	131.9
1053 Investment Loss Trust Fund	0.0	28.4	0.0
Funding Totals	15,481.9	17,085.7	16,797.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	10,774.4	11,804.2	11,804.2	11,658.9	11,658.9
Restricted Total		10,774.4	11,804.2	11,804.2	11,658.9	11,658.9
Total Estimated Revenues		10,774.4	11,804.2	11,804.2	11,658.9	11,658.9

Health Purchasing Group

Proposed Changes in Levels of Service for FY2002

There are no changes to the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	5,281.5	11,804.2	0.0	17,085.7
Adjustments which will continue current level of service:				
-Transfer to MA Admin to increase FY01 partial year cost of position changes to full year in FY02	-63.0	-63.0	0.0	-126.0
-Transfer to Cert & Lic funding for facility surveyor & network specialist vacant part of FY01	-27.2	-27.2	0.0	-54.4
-Transfer Disability Determination RSA funding to Medicaid State Programs (RP 06-1-0002)	-52.5	-52.5	0.0	-105.0
-Year 2 Labor Costs - Net Change from FY2001	-0.7	-2.6	0.0	-3.3
FY2002 Governor	5,138.1	11,658.9	0.0	16,797.0

Health Purchasing Group
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	53	62	Annual Salaries	3,116,391
Part-time	0	0	COLA	44,102
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	1,043,890
			<i>Less 6.82% Vacancy Factor</i>	<i>(286,865)</i>
			Lump Sum Premium Pay	0
Totals	53	62	Total Personal Services	3,917,518

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant III	1	0	0	0	1
Accountant IV	1	0	0	0	1
Accounting Tech I	1	0	0	0	1
Accounting Tech II	1	0	0	0	1
Accounting Tech III	1	0	0	0	1
Administrative Assistant	2	0	0	0	2
Administrative Clerk II	3	0	0	0	3
Analyst/Programmer V	1	0	0	0	1
Database Specialist II	1	0	0	0	1
Executive Director	1	0	0	0	1
Internal Auditor I	1	0	0	0	1
Internal Auditor III	5	0	0	0	5
Internal Auditor IV	1	0	0	0	1
Medicaid Pharm Program Manager	1	0	0	0	1
Medical Assist Admin I	7	0	0	0	7
Medical Assist Admin II	11	0	0	0	11
Medical Assist Admin III	5	0	0	0	5
Medical Assist Admin IV	9	0	0	0	9
Medical Officer	1	0	0	0	1
Micro/Network Spec II	1	0	1	0	2
Research Analyst I	1	0	0	0	1
Research Analyst II	1	0	0	0	1
Research Analyst III	2	0	0	0	2
Secretary	1	0	0	0	1
Social Svcs Assoc III	1	0	0	0	1
Totals	61	0	1	0	62

Component: Certification and Licensing

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To maintain access to health care and to provide health coverage for Alaskans in need.

Component Services Provided

The federal government has established minimum standards for providers who wish to participate in the Medicare or Medicaid programs. The Social Security Act, Section 1864, establishes the framework within which State health facilities licensure agencies carry out the Medicare certification process under agreements between the State and the Secretary of Health and Human Services. The Social Security Act stipulates that these same agencies are authorized to set and enforce standards for Medicaid. The Code of Federal Regulations requires the state agency to perform surveys (inspections) in order to support its certifications, both for Medicare and Medicaid. In Alaska, this is done by Health Facilities Licensing and Certification (HFL&C).

Component Goals and Strategies

State and federal governments have long been charged with monitoring health care in the public interest. To promote and maintain quality health care in the State of Alaska, legislation was first enacted in 1949 to provide for development, establishment, and enforcement of standards for the care and treatment of persons in health facilities. Since that time, the Department has been given authority to adopt, amend, and enforce regulations and standards to promote safe and adequate treatment for individuals in health facilities in the interest of public health, safety, and welfare. The Department was also given the responsibility to conduct annual inspections and investigations, to issue and renew licenses, and to deny, suspend, or revoke licenses when there is substantial failure to comply with requirements.

Key Component Issues for FY2001 – 2002

Please see Medical Assistance Administration BRU key issues.

Major Component Accomplishments for FY2000

Please see Medical Assistance Administration BRU accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Title XIX Medicaid

Title XXI Children's Health Insurance Program

Administrative Code:

7 AAC 43 Medicaid

7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:
Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please refer to Medical Assistance Administration BRU performance measures.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Please refer to Medical Assistance Administration BRU Performance Measures. 		X			

Certification and Licensing
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	686.2	742.6	792.9
72000 Travel	98.3	87.6	87.6
73000 Contractual	206.9	267.2	267.2
74000 Supplies	4.6	5.0	5.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	996.0	1,102.4	1,152.7
Funding Sources:			
1002 Federal Receipts	659.9	748.8	773.3
1003 General Fund Match	176.4	186.8	215.6
1004 General Fund Receipts	159.7	163.5	163.8
1053 Investment Loss Trust Fund	0.0	3.3	0.0
Funding Totals	996.0	1,102.4	1,152.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	659.9	748.8	748.8	773.3	805.8
Restricted Total		659.9	748.8	748.8	773.3	805.8
Total Estimated Revenues		659.9	748.8	748.8	773.3	805.8

Certification and Licensing

Proposed Changes in Levels of Service for FY2002

There are no changes to the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	353.6	748.8	0.0	1,102.4
Adjustments which will continue current level of service:				
-Transfer from HPG FY02 funding for facility surveyor & network specialist vacant for part of FY01	27.2	27.2	0.0	54.4
-Year 2 Labor Costs - Net Change from FY2001	-1.4	-2.7	0.0	-4.1
FY2002 Governor	379.4	773.3	0.0	1,152.7

Certification and Licensing

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	12	12	Annual Salaries	591,485
Part-time	0	0	COLA	9,310
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	200,112
			<i>Less 1.00% Vacancy Factor</i>	(8,009)
			Lump Sum Premium Pay	0
Totals	12	12	Total Personal Services	792,898

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	1	0	0	0	1
Administrative Clerk III	1	0	0	0	1
Hlth Facil Cert Lic Adm	1	0	0	0	1
Hlth Facil Surv I	6	0	0	0	6
Hlth Facil Surv II	2	0	0	0	2
Micro/Network Spec II	1	0	0	0	1
Totals	12	0	0	0	12

Component: Hearings and Appeals

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To maintain access to health care and to provide health coverage for Alaskans in need.

Component Services Provided

Health care facility appeals of Medicaid payment rates and audit findings are formal hearings governed by the Administrative Procedure Act, AS 44.62.330 et seq. These hearings are conducted by a hearing examiner with the qualifications required by AS 44.62.350, which requires that a hearing officer be unbiased, impartial, experienced in the general practice of law, and admitted to practice law for at least two years immediately preceding appointment. After receiving the evidence and arguments, the hearing examiner prepares a proposed decision for submission to the Commissioner. The Commissioner's decision is the final administrative action and may be appealed to Superior Court.

Client appeals of actions by the Division of Public Assistance and the Division of Medical Assistance are adjudicated in fair hearings mandated by a number of federal and State regulations. A fair hearing may be requested concerning one or more of the following programs: Adult Public Assistance, Aid to Families with Dependent Children, Food Stamps, Medicaid, General Relief, Energy Assistance, Job Opportunities and Basic Skills Training Program, and Employment and Training Program. The fair hearing is an informal proceeding adjudicated by a hearing officer classified as a Public Assistance Program Officer. The hearing officer's decision may be appealed by the client to the Division Director. The Director's decision is the final administrative action and is subject to appeal to the Superior Court.

Component Goals and Strategies

The Office of Hearings and Appeals (OHA) is responsible for conducting impartial administrative hearings on appeals from actions by four agencies of the Department of Health and Social Services: the Medicaid Rate Advisory Commission, the Audit Unit, the Division of Public Assistance, and the Division of Medical Assistance. OHA conducts two distinctly different types of hearings: informal fair hearings on client public assistance and medical assistance appeals.

Key Component Issues for FY2001 – 2002

Please see Medical Assistance Administration BRU key issues.

Major Component Accomplishments for FY2000

Please see Medical Assistance Administration BRU accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Released December 15th

FY2002 Governor

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Title XIX Medicaid
 Title XXI Children's Health Insurance Program

Administrative Code:
 7 AAC 43 Medicaid
 7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:
 Title 42 CFR Part 400 to End

Key Performance Measures for FY2002

Measure: Please refer to Medical Assistance Administration BRU performance measures.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Please refer to Medical Assistance Administration BRU performance measures. 		X			

Hearings and Appeals

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	322.9	344.5	343.0
72000 Travel	0.9	8.3	8.3
73000 Contractual	53.2	51.7	51.7
74000 Supplies	0.6	3.9	3.9
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	377.6	408.4	406.9
Funding Sources:			
1002 Federal Receipts	185.4	204.5	203.0
1003 General Fund Match	192.2	200.3	202.3
1004 General Fund Receipts	0.0	0.0	1.6
1053 Investment Loss Trust Fund	0.0	3.6	0.0
Funding Totals	377.6	408.4	406.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	185.4	204.5	204.5	203.0	203.0
Restricted Total		185.4	204.5	204.5	203.0	203.0
Total Estimated Revenues		185.4	204.5	204.5	203.0	203.0

Hearings and Appeals**Proposed Changes in Levels of Service for FY2002**

There are no changes to the level of services provided.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	203.9	204.5	0.0	408.4
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	0.0	-1.5	0.0	-1.5
FY2002 Governor	203.9	203.0	0.0	406.9

Hearings and Appeals

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	5	5	Annual Salaries	269,135
Part-time	0	0	COLA	4,493
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	80,684
			<i>Less 3.19% Vacancy Factor</i>	(11,303)
			Lump Sum Premium Pay	0
Totals	5	5	Total Personal Services	343,009

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Hearing Examiner	2	0	0	0	2
Legal Secretary I	1	0	0	0	1
Public Asst Prog Off	2	0	0	0	2
Totals	5	0	0	0	5

Component: Children's Health Eligibility

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

COMPONENT HAS BEEN JOINED WITH MEDICAID SERVICES COMPONENT UNDER MEDICAL ASSISTANCE BRU

Component Services Provided

No services provided.

Component Goals and Strategies

No goals and strategies.

Key Component Issues for FY2001 – 2002

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

Alaska Statutes:

AS 47.07 Medical Assistance for Needy Persons

AS 47.08 Assistance for Catastrophic Illness and Chronic or Acute Medical Conditions

AS 47.25 Public Assistance

Social Security Act:

Title XVIII Medicare

Title XIX Medicaid

Title XXI Children's Health Insurance Program

Administrative Code:

7 AAC 43 Medicaid

7 AAC 48 Chronic and Acute Medical Assistance

Code of Federal Regulations:

Title 42 CFR Part 400 to End

Children's Health Eligibility
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	2,363.2	2,632.8	0.0
74000 Supplies	0.2	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,363.4	2,632.8	0.0
Funding Sources:			
1002 Federal Receipts	1,217.3	1,338.7	0.0
1003 General Fund Match	816.2	889.1	0.0
1108 Statutory Designated Program Receipts	329.9	405.0	0.0
Funding Totals	2,363.4	2,632.8	0.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,217.3	1,338.7	0.0	0.0	0.0
Statutory Designated Program Receipts	51063	329.9	405.0	0.0	0.0	0.0
Restricted Total		1,547.2	1,743.7	0.0	0.0	0.0
Total Estimated Revenues		1,547.2	1,743.7	0.0	0.0	0.0

Children's Health Eligibility**Proposed Changes in Levels of Service for FY2002**

This component has been consolidated with the Medicaid State Programs component for FY2002.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	889.1	1,338.7	405.0	2,632.8
Adjustments which will continue current level of service:				
-Transfer Children's Health Eligibility to Medicaid State Programs Component	-889.1	-1,338.7	-405.0	-2,632.8
FY2002 Governor	0.0	0.0	0.0	0.0

Purchased Services Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

BRU Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

BRU Services Provided

The Department, through the Purchased Services BRU, provides a continuum of services from prevention of out-of-home placement to permanency planning including adoptions and guardianships. The Purchased Services BRU is composed of eight integral components including Family Preservation, Foster Care Base Rate, Foster Care Augmented, Foster Care Special Needs, Foster Care AYI, Subsidized Adoption & Guardianship, Residential Child Care, and Court Ordered and Reunification Efforts. (Note: in FY2001, the Department transferred the Delinquency Prevention Component to the newly formed Division of Juvenile Justice which formerly existed as the Youth Corrections arm of DFYS).

The Family Preservation component provides grants to non-profit agencies located across the State to provide family support services; family preservation services; and time limited family reunification services. This component also provides grant funding to pay for child protective services day care and provide grants to non-profit community services agencies so they can provide support services. Through these grants and contracted services, the Division delineates the types of services to be provided, the number and types of clients to be served, the referral process, and the process for insuring that quality programs are provided. DFYS social workers utilize these grantees and refer clients for crisis intervention; parenting skills; prevention of out-of-home placement; and other services to support children in DFYS custody and their families (including foster and adoptive families).

The Department, through the Residential Child Care Component, issues Residential Care grants to non-profit agencies on a competitive basis to provide high quality, time limited residential treatment services for abused, neglected, and delinquent children. Services in this component are directed at providing 24-hour care for children in the custody of the Department who are not able to remain in their own home or who need more structure and treatment than can be provided in foster care. The Department provides a continuum of six levels of residential treatment ranging from day treatment to intensive residential diagnostic treatment center services. Children and youth placed in residential care often present severe and complex treatment problems such as sexual abuse, sexually aggressive behavior, substance abuse, severe emotional disorders, delinquent behavior, and other dysfunctional behavior. When the necessary level of care is not available within the state, services are purchased from out-of-state providers. Out of state providers are approved Alaska Medicaid providers of residential psychiatric treatment in both secure and non-secure settings.

The Subsidized Adoption & Guardianship Component provides permanent homes for children that have been placed in permanent custody of the State. Without this program, many of these children would otherwise be subjected to long-term placement in foster care. The Subsidized Adoption & Guardianship program relieves these children from the prospect of being in foster care for many years and provides them with a permanent home thereby reducing the possibility of further trauma caused by multiple foster care placements. This program has been very successful due to increased emphasis on permanency planning and State initiatives such as Project SUCCEED and the Balloon Project. From FY1992 to FY2000 the number of children removed from the Foster Care system and placed in a permanent home increased from 338 to 1,332. Meeting the continuing caseload growth continues to be the most significant accomplishment of this program. At the close of FY2000, there were 1,332 children in the Subsidized Adoption & Guardianship program. The Department anticipates the number of children in the Subsidized Adoption & Guardianship program to increase by 14% to 1,518 in FY2001 with an additional 14% growth to 1,730 in FY2002.

BRU Goals and Strategies

1) PROVIDE A CONTINUUM OF CARE OPTIONS TO PROTECT CHILDREN IN THE STATE FROM CHILD ABUSE, NEGLECT AND EXPLOITATION:

· AS 47.14.020 mandates the Department to "accept all minors committed to the custody of the department...and provide for the welfare, control, care, custody, and placement of these minors..." To accomplish this mandate, the Division maintains approximately 369 positions, including 240 social workers and social services associates, located in the DFYS Central Office, four Regional Offices and 29 Field Offices spanning from Ketchikan to Barrow.

· The Department, through the Purchased Services BRU, provides funding for a continuum of services from prevention of out-of-home placement to permanency planning including adoptions and guardianships. The Purchased Services BRU is composed of the following eight components: Family Preservation, Foster Care Base Rate, Foster Care Augmented, Foster Care Special Needs, Foster Care AYI, Subsidized Adoption & Guardianship, Residential Child Care, and Court Ordered and Reunification Efforts.

Key BRU Issues for FY2001 – 2002

Family Preservation: Children and families referred or mandated to receive services are presenting more severe behaviors and experiences which require much more intensive intervention in order to preserve or support the family unit. Alaska's child welfare law, along with new Federal laws requires that services be delivered in a manner that is time-limited. This increases the intensity of services required and minimizes the amount of time parents can take to ameliorate the issues placing their children at risk. Parental substance abuse also greatly impacts the success of intervention. With the increase in the use of drugs and/or alcohol by parents, intervention and support services are not as effective which results in the removal of children or failed efforts at family reunification. The Department is requesting MHTAAR funding to provide additional family support services to parents with disabilities, mental health illness or severe alcohol problems.

Family Preservation Federal Initiative: The Department has experienced a 51% reduction in the Federal Title IV-B Subpart 1 grant program over the past five years. This reduction is largely a result of federal legislative and policy changes affecting tribal allotments. The Department is requesting approval for a federal initiative to request Congress to apply a tribal set-aside to Title IV-B, Subpart 1, and is requesting federal authority to receive the full state allotment. This will increase family support, preservation and reunification services available throughout the state, as the number of children coming to the attention of child protection offices remains high.

Family Preservation Dual Track: During FY 2001, the Department was able to implement a pilot program in the Mat-Su Valley designed to use a non-profit established community agency to be responsible, with DFYS support, for response services to low-risk reports of harm. This project has demonstrated a successful impact of community ownership and intervention in the abuse and neglect of children. It has led to a reduction of the need for more official, costly intervention by the Department, while also allowing for the prevention of future harm to the children involved.

Family Preservation Tribal Pass Through: The Department has been working with four tribal organizations including Kawerak, Tlingit-Haida Central Council, Tanana Chiefs Conference, and Cook Inlet Tribal Council to assist them in receiving Federal IV-E reimbursement for Indian child welfare services. The objective of this project is to increase the capacity of tribal organizations to provide case management services to Alaska Native children who are in foster care or at risk of foster care placement. To accomplish this objective, DFYS will claim IV-E reimbursement for a share of the tribal organization's administrative and training costs and pass this reimbursement through to the tribal organization. The reimbursement will be used by the tribal organizations to enhance services to children and families. The Department requests an increment of federal authority to implement this project.

Foster Care Base Rate: The Foster Care Base Rate program is designed to reimburse foster parents for the basic ongoing costs of raising a child including: food, clothing replacement, and shelter; daily supervision normally carried out by a parent; personal and grooming items; school supplies and regular school activities; age appropriate games, toys, books, and recreational equipment; general recreation such as picnics, community sports, and movies; usual transportation expense; allowance; babysitting and child care. The standard foster care base rate is based on the US poverty income guidelines for an Alaskan family of one. The current Foster Care Base Rate is based on 1993 Federal Poverty Guidelines and does not reflect overall cost of living increases that have occurred since that time period. The

Department projects that the foster care caseload will increase 6% per year for the next two years. The projected caseload growth is due to an overall increase in the State's population and general fluctuations in the foster care caseload. The Department has submitted an increment request to cover the cost of care for the additional caseload growth.

Foster Care Augmented Rate Caseload Growth: A key issue for the Department's foster care programs is caseload growth. The number of children placed in Foster Care has increased significantly over the past several years driving up the overall costs of maintaining the State's various foster care programs. The Department anticipates the foster care caseload to increase 6% per year in FY2001 and FY2002. The Augmented Foster Care, or difficulty of care program, reimburses foster care providers for extraordinary costs and for higher levels of supervision not otherwise covered by the Foster Care Base Rate Program. In FY 2000, 27.8% of the children in foster care received an augmentation to their base rate. The Department has requested an increment to cover the cost of caseload growth for the Foster Care Augmented program.

Foster Care Special Needs: The Foster Care Special Needs Program is designed to reimburse foster care providers for "one time" or "irregular" expenses authorized by statute that are not covered in the Foster Care Base Rate or that are being paid by the Foster Care Augmented program. Due to the anticipated 6% caseload growth over the next two years, the Department is requesting an increment to cover the Special Needs costs for additional children.

Shortly after a child is taken into Department custody, the social worker meets with the parents for the purpose of developing a case plan. The case plan documents what the goal for the child is and what needs to occur in order for the child to be safe in their home and when Department involvement with the family is no longer necessary. The case plan is reviewed at case conferences. For children in custody who are placed outside of their home, a case conference is held within 90 days of when custody was assumed, 6 months, and nine months, and each time the case plan goal is changed. In addition, subsequent conferences are held every six months while the child remains in custody and in out-of-home placement. Federal law requires the six-month case conference. States are encouraged to have members of the public participate in the conferences in the capacity of impartial and objective participants in the decision process. It is Department policy to include a community member in the conferences, but it is not always possible to find individuals who are interested or available. The Department is therefore working on increasing community member participation. The increment requested by the Department for this project will fund the cost of involving private citizens in six-month reviews of foster care placements. The cost includes recruiting and training public citizens and reimbursing their travel costs, telephone costs, and stipends.

Foster Care AYI: The Alaska Youth Initiative (AYI) program provides a unique support/placement option using local resources for severely emotionally disturbed (SED) youth whose other option would be institutionalization in either in-state or out-of-state residential care facilities. This program also focuses on transitioning children or youth back into their local communities from institutionalized care. The AYI program can only function if all its components within the Department are funded. The Division of Family and Youth Services and the Division of Mental Health and Developmental Disabilities jointly fund the individualized services provided to the severely disturbed children in the custody of the Department served by this specialized program. The Department of Education and Early Development provides funding for education related costs. In order for the program to be effective, all elements of programming and funding must be present.

Subsidized Adoption & Guardianship: The Department administers the Subsidized Adoption and Guardianship Program to meet the State and Federal mandates to increase the emphasis on permanency planning and to move quickly to find permanent homes for children in custody. A child must have special needs to qualify for the subsidy program. Special needs categories include physical or mental disease, age, membership in a sibling group, racial or ethnic factors, or any combination of these conditions. The program has been a huge success. From FY1992 to FY2000, the number of children removed from the foster care system and placed in a permanent home increased from 338 to 1,332. The Department anticipates the number of children in the Subsidized Adoption & Guardianship program to increase 14% for FY2001 and FY2002. An increment has been requested for FY 2002 to ensure the continuity of subsidy payments and the continued success of the program.

During the last legislative session, the Legislature moved funding in the amount of \$1,000.0 from General Fund to TANF, with the intention of using the TANF funds for the Subsidized Adoption and Guardianship program. In reviewing the program, the Department has determined that the use of TANF for the subsidy program jeopardizes Title IV-E funding. The TANF eligibility requirements violate IV-E reimbursement requirements. Therefore the Department is requesting the \$1,000.0 be returned to the General Fund.

Residential Child Care: The current foster care system has many foster care children that experience severe emotional and behavioral problems. These children often fail in foster home settings, resulting in multiple placements for children and often the loss of foster homes. For many of these children group care, a treatment environment with 24-hour professional staff, is a more appropriate placement. In FY 2001, the Department has purchased 256 in-state residential care facility beds providing for a range of supervision to children in DFYS custody.

The Department is currently in the process, through DFYS, of generating regulations for psychiatric residential care in both secure and semi-secure settings. The public comment period for the proposed regulations has ended and the department is in the process of reviewing those comments in light of potential revisions to the drafted regulations. It is anticipated that these regulations will be enacted sometime early in calendar year 2001. The potential of being able to provide secure residential care within the state may have future impact on the number of out of state placements that are currently occurring.

The Department has submitted a request for FY 2002 MHTAAR funding for the development of a Mental Health Stabilization Home. This will be a short-term residential option that will serve as a step-down program from acute hospital care or secure residential psychiatric treatment. It may also serve as an interim placement for severely disturbed children who are difficult to place. This home will expand available options to allow families and providers to develop a safe and appropriate community placement.

Major BRU Accomplishments for FY2000

1) THE DEPARTMENT PROVIDES FAMILY PRESERVATION/FAMILY SUPPORT, AND TIME-LIMITED REUNIFICATION SERVICES TO FAMILIES:

· For FY2001, the Department issued 31 grants to 26 non-profit service providers located across the State to provide Family Preservation/Family Support and Time-Limited Family Reunification services. The Department also provided funding for child protective services day care grants and community partnership grants including the continuation of the Dual Track program in the Mat-Su to provide a differential response to reports of harm that have been assessed by DFYS as being low risk.

· DFYS social workers utilize these grantees and refer clients for crisis intervention; parenting skills; prevention of out-of-home placement; and other services to support children in DFYS custody and their families (including foster and adoptive families).

2) IN FY2000 THE DIVISION PROVIDED FOSTER CARE SERVICES TO AN AVERAGE OF 1,216 CHILDREN EACH DAY:

Foster Care: The Department, through the Division of Family & Youth Services (DFYS), provided a continuum of foster care programs to meet the needs of children in State custody including the Foster Care Base Rate, Foster Care Augmented, Foster Care Special Needs, and Foster Care AYI programs. Foster care provided these children with an opportunity to enjoy a stable home life and provided them with basic essential needs such as food, shelter, and clothing. These programs provide care for children that have been removed from situations of abuse or neglect and that are at risk of further abuse and neglect. When these children cannot be safely maintained in their own home, it is much better for these children to be placed in a foster home.

Although the number of children in foster care continues to increase, the foster care caseload growth is beginning to level out. The Foster Care caseload increased 16.8% in FY1998 and 16.4% in FY1999 compared to 5.8% in FY2000. The reduction in the FY 2000 foster care caseload growth rate is, in part, a reflection of the success of State permanency planning initiatives Project SUCCEED and the Balloon Project to move children out of foster care and into permanent homes. The Department anticipates the foster care caseload to increase an additional 6% per year for the next two years to an average of 1,290 daily in FY2001 and 1,367 daily in FY 2002.

3) OVER 1,392 CHILDREN HAVE BEEN REMOVED FROM THE FOSTER CARE SYSTEM AND HAVE BEEN PLACED IN PERMANENT HOMES:

The Subsidized Adoption & Guardianship program provides permanent homes for children that have been placed in permanent custody of the State. This program has been very successful due to increased emphasis on permanency planning and the State initiatives Project SUCCEED and the Balloon Project. From FY1992 to FY2000 the number of children removed from the foster care system and placed in a permanent home increased 294% from 338 to 1,332

The Balloon Project provides funding for DFYS and partner legal agencies including the Department of Law, the Public Defender Agency and the Office of Public Advocacy to focus on moving children on the "transition list" that have been in custody the longest from the foster care system and into permanent homes. One measure of the Balloon Project's success can be seen in the reduction of the growth of the foster care caseload due to children transitioning to permanent homes. In FY1999 the foster care caseload increased by 16.4%. In FY2000, the foster care growth rate decreased to 5.8%. Long-term benefits of the Balloon Project will include: moving children that have lingered in the foster care system into permanent homes; savings from reduced foster care caseloads; increased compliance with Federal and State permanency planning laws; prevention of a backlog of cases from happening again; continued collaboration between DFYS and the State legal entities to process child protective services cases on a timely basis; more efficient operations; timely client case handling helps to prevent "problem" cases; and the child protection system works better overall because of the expertise developed during the Balloon Project trial.

Meeting the continuing caseload growth continues to be the most significant accomplishment of this program. At the close of FY2000, there were 1,332 children in the Subsidized Adoption & Guardianship program. The Department anticipates the number of children in the Subsidized Adoption & Guardianship program to increase by 14% to 1,518 in FY2001 with an additional 14% growth to 1,730 in FY2002.

4) THE RESIDENTIAL CHILD CARE COMPONENT PROVIDES SIX LEVELS OF TREATMENT TO MEET THE NEEDS OF CHILDREN IN STATE CUSTODY:

Residential Child Care: The Department, through the Residential Child Care Component, issues Residential Care grants to non-profit agencies on a competitive basis to provide high quality, time limited residential treatment services for abused, neglected, and delinquent children. Services in this component are directed at providing 24-hour care for children in the custody of the Department who are not able to remain in their own home or who need more structure and treatment than can be provided in foster care. For FY2001, the Department has purchased approximately 256 treatment beds providing a continuum of six levels of residential treatment ranging from day treatment to intensive residential diagnostic treatment center services. Children and youth placed in residential care often present severe and complex treatment problems such as sexual abuse, sexually aggressive behavior, substance abuse, severe emotional disorders, delinquent behavior, and other dysfunctional behavior. When the necessary level of care is not available within the state, services are purchased from out-of-state providers. Out of state providers are approved Alaska Medicaid providers of residential psychiatric treatment in both secure and non-secure settings.

Key Performance Measures for FY2002

Measure: Percentage of closed cases for children placed in alternative permanent homes in which a recurrence of substantiated abuse and neglect occurs 6 and 12 months after case closure. (SB 281).

(Developed jointly with Legislature in FY2001.)

Current Status:

The division continues to gather data for this measurement.

Benchmark:

The recommended baseline year is FY1997.

Background and Strategies:

- Homestudy Writers Grant funds made available for third party evaluation of future adoptive homes.
- Training for Adoptive Parents of Special Needs Children is a newly funded community grant program.
- Project SUCCEED is a community-based grant program to help recruit, study, prepare, and follow up with adoptive homes.

Measure: Percentage of permanent adoptive and guardianship homes that are disrupted 6, 12, and 24 months after placement.

(Developed jointly with Legislature in FY2001.)

Current Status:

The division continues to gather data for this measurement.

Benchmark:

The recommended baseline year is FY1997.

Background and Strategies:

- Homestudy Writers Grant funds made available for third party evaluation of future adoptive homes.
- Training for Adoptive Parents of Special Needs Children is a newly funded community grant program.
- Project SUCCEED is a community-based grant program to help recruit, study, prepare, and follow up with adoptive homes.

Measure: Number of children harmed while in custody. (SB 281).

(Developed jointly with Legislature in FY2001.)

Current Status:

The division continues to gather data for this measurement.

Benchmark:

The recommended baseline year is FY1997.

Background and Strategies:

- Developed APSIN Flag Project.
- Increased foster parent training.
- Developed new Foster Care Licensing Manual.
- Lowered caseloads for licensing workers when child care licensing was transferred to Department of Education.

Measure: Average length of time spent in out of home care for children who have been abused or neglected.

(Developed jointly with Legislature in FY2001.)

Current Status:

The division continues to gather data for this measurement.

Benchmark:

The recommended baseline year is FY1997.

Background and Strategies:

- Continue Project SUCCEED and Balloon Project to help move children towards permanency.
- Strengthen case review system at 3 month, 6 month, and 9 months that the child stays in custody.
- Monitor wait time for parents to receive treatment services.
- Increase services to parents and families, such as alcohol treatment and mental health counseling.
- Strengthen family support services.

Measure: Number of foster homes operating at greater than licensed capacity. (SB 281).
(Added by Legislature in FY2001 version.)

Current Status:

The division continues to gather data for this measurement.

Benchmark:

The recommended baseline year is FY1997.

Background and Strategies:

- Continue foster care recruitment campaign.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Percentage of closed cases for children placed in alternative permanent homes in which a recurrence of substantiated abuse and neglect occurs 6 and 12 months after case closure. (SB 281). • Percentage of permanent adoptive and guardianship homes that are disrupted 6, 12, and 24 months after placement. • Number of children harmed while in custody. (SB 281). • Average length of time spent in out of home care for children who have been abused or neglected. • Number of foster homes operating at greater than licensed capacity. (SB281). 			X		
			X		
			X		
			X		
			X		

Purchased Services
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
Foster Care Base Rate	8,017.1	1,854.2	0.0	9,871.3	8,194.4	2,709.3	0.0	10,903.7	8,422.3	2,782.0	0.0	11,204.3
Foster Care Augmented Rate	2,305.2	250.9	0.0	2,556.1	2,178.0	329.4	1,079.4	3,586.8	2,437.1	396.2	1,079.4	3,912.7
Foster Care Special Need	3,040.0	328.0	138.3	3,506.3	2,599.3	475.6	50.0	3,124.9	3,330.9	525.9	50.0	3,906.8
Foster Care AYI Subsidized	550.0	0.0	0.0	550.0	550.0	0.0	0.0	550.0	550.0	0.0	0.0	550.0
Adoptions/Guardians	6,401.4	3,301.1	305.6	10,008.1	6,711.8	3,496.6	1,490.4	11,698.8	9,175.3	4,321.0	0.0	13,496.3
Court Orders/Reunification Eff.	0.0	0.0	0.0	0.0	500.0	0.0	0.0	500.0	500.0	0.0	0.0	500.0
Non-Formula Expenditures												
Family Preservation	978.7	1,931.3	1,496.7	4,406.7	1,890.5	2,841.2	300.0	5,031.7	1,890.5	3,441.2	750.0	6,081.7
Residential Child Care	10,973.9	424.9	861.9	12,260.7	11,622.9	625.0	100.0	12,347.9	11,622.9	625.0	875.0	13,122.9
Delinquency Prevention	0.0	2,483.7	0.0	2,483.7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Totals	32,266.3	10,574.1	2,802.5	45,642.9	34,246.9	10,477.1	3,019.8	47,743.8	37,929.0	12,091.3	2,754.4	52,774.7

Purchased Services

Proposed Changes in Levels of Service for FY2002

Foster Care: The Department provides four highly interrelated foster care programs including Foster Care Base Rate, Foster Care Augmented, Foster Care Special Needs, and Foster Care AYI. These programs provide a continuum of foster care resources to children in State custody. The overall program goals and services provided by the Department's foster care programs have remained largely unchanged for the past several years. The Department anticipates the Foster Care Base Rate and Foster Care Special Needs caseloads to grow 6% per year in FY2001 and FY2002 to 15,474 FTE's (average 1,290 children daily) and 16,402 FTE's (average of 1,367 daily) respectively. The projected caseload growth is due to an overall increase in the State's population and general fluctuations in the foster care caseload.

Foster Care Special Needs: The Division's goal is to have at least one community member from each region who will participate in every 6-month review that is held. DFYS is planning to implement a statewide training program for individuals interested in serving as community members at case conferences. The Division will develop a statewide committee made up of one citizen from each region who participates in 6-month conferences to share experience and recommend overall system improvements.

Family Preservation: The Federal Adoptions and Safe Families Act requires that efforts be made to ameliorate issues which caused children to be removed from their homes or continue to interfere with reunification. These services, however, must now be done within a certain time period which speaks to the "child's sense of time". This greatly enhances the level of service provision required in a briefer amount of time. Beginning in FY2000, the Department provided grants to non-profit social services agencies to provide Time-Limited Family Reunification services. The grantees provide services to clients referred by DFYS that are designed to facilitate reunification of children with their families when the children have been placed in foster care.

Subsidized Adoption & Guardianship: Participation in the new projects such as Project SUCCEED and the Adoption Exchange requires additional work on the part of workers in the field and in the adoption and guardianship unit. Under Federal law - the acceleration of the permanency planning process (the Adoptions and Safe Families Act, 1997) and the institution of programmatic changes (the Multi-Ethnic Placement Act of 1994 and the Interethnic Adoption Provision modifications in 1996) - and under subsequent state law (AS 47.10.080 as modified by HB 375 in 1998), subsidies must be in place more quickly than ever before. State program activities, including Project SUCCEED and the Balloon Project, are also being developed in accordance with additional Federal programs such as the Adoption 2002 Initiative.

Residential Child Care: The Department, through the Division of Family and Youth Services and in coordination with current residential care providers, determined that the current categorical definitions of residential care needed to be reexamined. Through this collaborative effort, proposed changes to the levels of care are under review. It is anticipated these changes will go into effect in FY2002.

A residential care grant has been awarded to Family Centered Services of Alaska to provide Residential Diagnostic Treatment services to children and youth in Fairbanks. The program will begin in FY2002 upon completion of building modifications that must be made to the facility.

Court Ordered and Reunification Costs Component: In FY2001 the Division transferred \$500.0 from the Foster Care Special Needs component to this new component to cover the costs of court ordered and reasonable and active efforts requirements. This is a new budget component and we will report accomplishments after the program is in operation for at least one budget cycle. The Division expects this component will increase accountability in tracking the foster care services intended to preserve and reunite families.

Purchased Services
Summary of BRU Budget Changes by Component
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	34,246.9	10,477.1	3,019.8	47,743.8
Adjustments which will continue current level of service:				
-Subsidized Adoptions/Guardians	1,000.0	0.0	0.0	1,000.0
Proposed budget decreases:				
-Subsidized Adoptions/Guardians	0.0	0.0	-1,490.4	-1,490.4
-Residential Child Care	0.0	0.0	-100.0	-100.0
Proposed budget increases:				
-Family Preservation	0.0	600.0	450.0	1,050.0
-Foster Care Base Rate	227.9	72.7	0.0	300.6
-Foster Care Augmented Rate	259.1	66.8	0.0	325.9
-Foster Care Special Need	731.6	50.3	0.0	781.9
-Subsidized Adoptions/Guardians	1,463.5	824.4	0.0	2,287.9
-Residential Child Care	0.0	0.0	875.0	875.0
FY2002 Governor	37,929.0	12,091.3	2,754.4	52,774.7

Component: Family Preservation

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The Division provided funding for Family Support, Family Preservation, and Time-Limited Family Reunification grants. Family Support services are community-based preventive activities designed to increase the strength, stability and the well-being of children and families (including adoptive, foster and extended families) to increase parents' confidence and competence in their parenting abilities, to afford children a stable and supportive family environment, and to otherwise enhance child development. Family Preservation provides services for DFYS-referred clients designed to help children and families (including adoptive, foster, and extended families) at risk or in crisis. Support services include intensive pre-placement services designed to help children at risk of foster care placement remain safely with their families. Family Preservation services also include programs designed to provide follow-up care to families to whom a child has been returned after a foster care placement or after a child abuse and neglect investigation has been substantiated. Time-Limited Family Reunification services are provided in cases where a child has been removed from the parents and placed in foster care or in a child care institution in order to facilitate the reunification of the child safely and appropriately and in a timely fashion. Services provided include: in-home visits, parent support groups, other programs designed to improve parenting skills, and supervised visitation.

The Family Preservation component also provides funding for Child Protective Services child care services which enables parents at risk of abusing or neglecting their children to be provided relief from the stresses of child care responsibilities and/or to take part in medical and treatment programs and get help for their problems. The child receives child development opportunities and socialization skills in a licensed child care facility. Child care providers provide a secure, stable enriched environment, help in addressing developmental delays and acting out behaviors in children, and assist in monitoring for abuse and neglect signs for children in care.

DFYS implemented the Dual Track pilot program in the Mat-Su Valley area in FY1999 in response to an unacceptably high rate of "low priority" (Priority Three) reports of harm that went uninvestigated. The Dual Track program provides Family Preservation grant funding to a non-profit community partner agency to perform intervention and follow-up work for cases that DFYS has assessed as being low risk. This program has enabled the Division to focus more social worker staff resources on investigating higher priority reports of harm. The Dual Track pilot program provides a differential response to child protection. Without this program many of these cases would go uninvestigated, potentially resulting in further harm to children.

Component Goals and Strategies

- 1) **KEEP FAMILIES INTACT, STRENGTHEN FAMILIES, REDUCE THE NUMBER OF OUT-OF-HOME PLACEMENTS, REUNITE FAMILIES, AND REDUCE THE RISK TO CHILDREN IN OUT-OF-HOME CARE:**

- Although the safety of children is paramount to the Division of Family and Youth Services, the Division also focuses on offering support services to families in an effort to safely maintain children in their own home. If removal is necessary, the Division makes every effort to reunify the family by eliminating the issues which previously placed the child at risk of harm. To accomplish these efforts, the Division offers Family Preservation, Family Support, and Time-Limited Family Reunification services.

- The Family Preservation component purchases services that cannot be provided directly by DFYS staff. Services are purchased through grants and contracts in the following general areas: family support services, family preservation

services, time-limited family reunification services, child protective services day care, and development of partnership grants with community agencies for support services.

· Family Preservation, Family Support and Time-limited Family Reunification include 20 different services for families. These include therapeutic services for children and families, parenting classes, life skills training, anger management, and supervised visitation. Providers also access additional services for parents to include drug and alcohol treatment and other mental health intervention services. The services focus on "preserving" the family unit and offering support to families, while also speaking to the need to insure safety for the children in the home.

· Continue community grants including the Dual Track pilot grant program for the Mat-Su Valley area to assess and interview low-risk referrals made to the Division. This collaboration allows for earlier intervention that minimizes the risk to the children and often negates the need for out-of-home placement or further agency intervention.

· Under Federal Title IV-B, the Federal government provides funding to support non-profit grantees that provide preservation and support services. The Division provides matching funds to support the Federal funds designated for these programs.

Key Component Issues for FY2001 – 2002

· Children and families referred or mandated to receive services are presenting more severe behaviors and experiences. This requires more intensive intervention in order to preserve or support the family unit.

· The Adoptions and Safe Families Act requires that services be delivered in a manner that is time-limited. This increases the intensity of services required and minimizes the amount of time parents can take to ameliorate the issues placing their children at risk.

· Services to children and families are critical in attempting to remedy the situation and problems that brought them to the attention of DFYS. Parents often have to wait to access these services.

· Parental substance abuse greatly impacts the success of intervention. With the increase in the use of drugs and/or alcohol by parents, intervention and support services are not as effective, which results in the removal of children or failed efforts at family reunification. The Division still needs Family Support and substance abuse treatment services to provide reasonable efforts.

· Federal Title IVB funding for Family Support services has been declining. Federal Title IVB funds are allocated to the State as a whole, and Alaska Tribes and Tribal organizations are also eligible to apply directly for Title IVB funding. Title IVB funds allocated to the State through the Department of Health & Social Services are reduced by the funds granted directly to the Tribes and Tribal organizations. Currently the Department receives approximately 50% of the total allotment for Alaska.

Major Component Accomplishments for FY2000

1) FAMILY PRESERVATION, FAMILY SUPPORT AND TIME-LIMITED FAMILY REUNIFICATION GRANTS:

The Division of Family and Youth Services worked with twenty-six different non-profit service providers located across the state and provided funding for 31 Family Preservation, Family Support and Time-Limited Family Reunification grants. Through these contracted services, the Division delineated the types of services to be provided, the number and types of clients to be served, the referral process, and the process for insuring that quality programs were provided. DFYS social workers utilized these grantees and referred clients for crisis intervention; parenting skills; prevention of out-of-home placement; and other services to support children in DFYS custody and their families (including foster and adoptive families).

Beginning in FY2000, the Division, in compliance with the Adoptions and Safe Families Act, implemented "time-limited family reunification" as an approach for service providers. The Division provided Time-limited Family Reunification grants that were designed to facilitate reunification of children with their families when the children had

been placed in foster care. The services and activities provided by these grantees occur only during a 15-month period that begins on the date that the child enters foster care.

2) CHILD PROTECTIVE SERVICES DAYCARE:

During FY2000 the Department, through the Family Preservation component, provided over \$300.0 in grant funding for Child Protective Services day care. Child Protective Services day care enables parents at risk of abusing or neglecting their children to be provided relief from the stresses of child care responsibilities and/or to take part in medical and treatment programs and get help for their problems. The child receives child development opportunities and socialization skills in a licensed child care facility. Child care providers provide a secure, stable enriched environment, help in addressing developmental delays and acting out behaviors in children, and assist in monitoring for abuse and neglect signs for children in care.

3) DUAL TRACK:

The Dual Track program enables the Department to refer Priority 3 (low risk) reports of harm to a community-based non-profit social services agency. In FY2000 the Department initiated a grant to the non-profit agency The Children's Place to conduct a Dual Track pilot program in the Mat-Su Valley area. The grantee provided services to help families meet the health and safety needs of their children and provided referral services to a wide range of available support services. This collaboration allows for earlier intervention that minimizes the risk to the children and often negates the need for out-of-home placement or further agency intervention. This project continues with an evaluation component to check its progress.

In FY2000, the Division's Mat-Su Field Office received 346 Priority 3 reports of harm. DFYS social workers investigated 24 of these ROH, and 322 were referred to the Children's Place. The number of cases that were workload adjusted in FY2000 was ZERO. Thus far in FY2001 (through September 26, 2000), 89 priority three reports of harm have been referred to the Children's Place, and ZERO have been workload adjusted.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services, and Institutions.
- AS 47.10 Children in Need of Aid.
- AS 47.17 Child Protection.
- 7 AAC 50 Community Care Licensing.
- 7 AAC 51 Child Placement Agencies.
- 7 AAC 53 Social Services.

Titles IV-B and IV-E of the Social Security Act

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.
(Not yet addressed by Legislature.)

Benchmark:

The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.

Status of FY2001 Performance Measures

<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
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Component — Family Preservation

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.			X		

Family Preservation
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	5.0	124.3	124.3
73000 Contractual	721.7	786.0	786.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	3,680.0	4,121.4	5,171.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	4,406.7	5,031.7	6,081.7
Funding Sources:			
1002 Federal Receipts	1,931.3	2,841.2	3,441.2
1004 General Fund Receipts	978.7	1,890.5	1,890.5
1007 Inter-Agency Receipts	1,496.7	300.0	300.0
1092 Mental Health Trust Authority Authorized Receipts	0.0	0.0	450.0
Funding Totals	4,406.7	5,031.7	6,081.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,931.3	2,841.2	2,841.2	3,441.2	3,441.2
Interagency Receipts	51015	1,496.7	300.0	300.0	300.0	0.0
Mental Health Trust Authority Auth.Rec.	51410	0.0	0.0	0.0	450.0	0.0
Restricted Total		3,428.0	3,141.2	3,141.2	4,191.2	3,441.2
Total Estimated Revenues		3,428.0	3,141.2	3,141.2	4,191.2	3,441.2

Family Preservation

Proposed Changes in Levels of Service for FY2002

· The Federal Adoptions and Safe Families Act requires that efforts be made to ameliorate issues which caused children to be removed from their homes or continue to interfere with reunification. These services, however, must now be done within a certain time period which speaks to the "child's sense of time". This greatly enhances the level of service provision required in a briefer amount of time. Beginning in FY2000, the Department provides grants to non-profit social services agencies to provide Time-Limited Family Reunification services. The grantees provide services to clients referred by DFYS and are designed to facilitate reunification of children with their families when the children have been placed in foster care.

· The Federal Adoptions and Safe Families Act was renamed the Promoting Safe and Stable Families program, and funding was earmarked for four service areas: Adoption assistance, Reunification, family preservation and family support. A new grant cycle for Family Preservation, Family Support, and Time-Limited Family Reunification services will start in FY 2002. The expectations on delivery of services from grantees will be concentrated on Family Preservation and Time Limited Family Reunification.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,890.5	2,841.2	300.0	5,031.7
Proposed budget increases:				
-Federal Title IVE Tribal Pass Through Pilot Project - Federal Authority	0.0	600.0	0.0	600.0
-Family Support Services to Beneficiary Parent Groups (Year 1 of 5)	0.0	0.0	450.0	450.0
FY2002 Governor	1,890.5	3,441.2	750.0	6,081.7

Component: Foster Care Base Rate

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Program Summary: AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." (emphasis added). To meet this mandate, the Department, through the Division of Family & Youth Services (DFYS), provides various foster care programs to children placed in custody of the State. These are children who have been removed from situations of abuse and/or neglect and are at risk for further abuse and neglect.

Due to the severity of the abuse, removal is often emergent and not planned. When these children cannot be safely maintained in their own home they require out-of-home care until the conditions requiring their removal have been ameliorated or other permanency is established. Although every effort is made to place children with relatives, often non-relative foster care is required.

The Department provides a spectrum of foster care services including the Foster Care Base Rate, Foster Care Special Needs, Foster Care Augmented, and Foster Care AYI to meet the needs of children in State custody and to meet the Department's statutory mandate to provide for the care of children in State custody. These four foster care programs are complimentary, and without full funding for these programs the Department would not have been able to meet the basic needs of many children in foster care.

The Foster Care Base Rate program is designed to reimburse foster parents for the basic ongoing costs of raising a child including: food, clothing replacement, and shelter; daily supervision normally carried out by a parent; personal and grooming items; school supplies and regular school activities; age appropriate games, toys, books, and recreational equipment; general recreation such as picnics, community sports, and movies; usual transportation expense; allowance; babysitting and child care.

Foster Care providers are reimbursed at the Base Rate for the number of days the child is placed at the foster home. The daily Base Rate amount is established in regulations and varies depending on the age of the child and the geographical location where the child is placed. The current Base Rate, which is based on the 1993 Federal poverty guidelines, was approved by the Legislature and became effective July 1, 1998. The FY2002 Foster Care Base Rate will be maintained at this level.

During FY2000 the Department provided foster care benefits to an average of 1,216 children daily. The Department anticipates the caseload to increase an additional 6% per year to 1,290 and 1,367 in FY2001 and FY2002 respectively.

Component Goals and Strategies

- 1) PROVIDE SAFE AND APPROPRIATE FOSTER HOMES FOR ABUSED AND NEGLECTED CHILDREN IN STATE CUSTODY IN ACCORDANCE WITH STATE LAW:

- AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." AS 47.14.100(d)(1) further mandates the Department to "...pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment,

services and equipment, special clothing, and the indirect costs of medical care, including child care and transportation expenses."

- Foster care providers are reimbursed at the Base Rate for the number of days the child is placed at the foster home. The daily Base Rate amount is established in regulations and varies depending on the age of the child and the geographical location where the child is placed. The current Base Rate is based on the 1993 Federal poverty guidelines and will be maintained at the FY2000 level.

2) MAINTAIN CHILDREN REQUIRING OUT-OF-HOME CARE IN THE SAFE AND STABLE ENVIRONMENT THEY NEED:

- The Division contracts for finger printing as a criminal background check for foster parents and all persons age 16 years and older living in the foster home. The prints are forwarded to the Department of Public Safety, under agreement, and are checked against State and FBI criminal justice records for crimes that might pose a risk to children in care.

3) PROVIDE CASE MANAGEMENT FOR CHILDREN TRANSITIONING FROM IN-STATE OR OUT-OF-STATE RESIDENTIAL CARE FACILITIES OR YOUTH DETENTION FACILITIES BACK INTO THEIR LOCAL COMMUNITIES:

- Foster care will be used to provide placement resources in a less structured environment to children ensuring orderly transition back to their parent's home or another permanent placement resource.

Key Component Issues for FY2001 – 2002

The Foster Care Base Rate program is designed to reimburse foster parents for the basic on-going costs of raising a child. The current Foster Care Base Rate is based on 1993 Federal Poverty Guidelines and does not reflect overall cost of living increases that have occurred since that time period. The number of children placed in Foster Care has increased significantly over the past several years driving up the overall costs of maintaining the State's Foster Care programs. For the past few years, Foster Care has been short-funded, and the Department has had to ask the Legislature for supplemental appropriations. The Department received a \$1,951.9 supplemental (\$1,006.4 Fed and \$945.5 GF) for under-funded caseload growth in FY2000. The Department's FY2001 foster care budget included an increment request of \$3,429.7 to fund 12% projected caseload growth for the Foster Care Base Rate program. The Legislature provided funding of \$2,285.5 (a reduction of \$1,144.2). Although the Department has subsequently revised its FY2001 projected caseload growth estimate to 6%, this reduction may result in the need for an FY2001 supplemental to cover the cost of under-funded caseload growth.

The number of children placed in Foster Care has increased significantly over the past several years driving up the overall costs of maintaining the State's Foster Care programs. The foster care caseload increased by 16.8% in FY1998 and 16.4% in FY1999. In FY2000 the foster care caseload growth rate decreased to 5.8% (14,598 total FTE's for an average of 1,216 children daily). The reduction in the FY2000 foster care caseload growth rate is, in part, a reflection of the success of State permanency planning initiatives Project SUCCEED and the Balloon Project to move children out of foster care and into permanent homes.

The Department anticipates the foster care caseload to grow 6% per year in FY2001 and FY2002. If the current budget remains static, the Division anticipates a budget deficit for Foster Care Base Rate in excess of \$300.0 in FY2002. A budget deficit would mean that the Division would be unable to meet its statutory mandate to provide care for children in custody and will have insufficient funds to pay foster care benefits for approximately 444 FTE's (the equivalent of approximately 37 children receiving foster care each day of the year) in FY2002. The safety of children in DFYS custody will be diminished if the FY2002 foster care budget is maintained at the FY2001 funding level.

A shortage of foster parents already exists. An inability (whether real or perceived) to reimburse foster care providers for services rendered will seriously erode any success that the Department has made during the last two years to recruit more foster parents. Foster parents rely on the State being able to reimburse them for the costs of care for the children in their care. Any reduction in payments may disrupt these placements and result in the Department not having enough foster parents to care for the children committed to State custody. If the State is unable to reimburse

foster care providers for their costs of care, DFYS social workers will not be able to find many foster parents that are willing or able to place abused and neglected children who are unsafe in their own homes.

The State has an obligation to reimburse Foster Care Providers for the cost of care for children in their custody. If the State fails to meet its obligation, Foster Care providers will have no legal obligation to continue to provide care for the children. This could result in Foster Care Providers returning children to the Division of Family and Youth Services. This situation would seriously undermine the State's child welfare system and would negatively impact the children that the State is responsible for protecting.

Major Component Accomplishments for FY2000

1) IN FY2000 THE DIVISION PROVIDED FOSTER CARE SERVICES TO AN AVERAGE OF 1,216 CHILDREN EACH DAY:

· The foster care caseload increased by 16.8% in FY1998 and by another 16.4% in FY1999. In FY2000, through the efforts of Project Succeed and the Balloon Project, the Division was able to place many children that were in long-term foster care into permanent adoptive homes or guardianships which contributed to the a reduction of the foster care caseload growth rate to 5.8%. The Department anticipates the foster care caseload to increase 6% per year for the next two years to an average 1,290 children daily and average of 1,367 daily respectively in FY2001 and FY2002.

2) RECRUITMENT AND RETENTION OF FOSTER PARENTS WHO CAN PROVIDE THE SPECIALIZED CARE NECESSARY TO MEET THE NEEDS OF THIS POPULATION:

Provided foster parent training so that foster parents can acquire the skills they need to successfully deal with the individual behaviors and special needs of children in their care.

3) IMPROVED COLLABORATION AND COORDINATION OF SERVICES PROVIDED BY VARYING AGENCIES:

· The Division has entered into a number of projects in which various agencies provide service delivery to the client population. This allows for increased services for a greater number of clients and also minimizes duplication or gaps in service delivery.

4) CHILD CARE FOR WORKING FOSTER PARENTS:

· The Division has started to offer child care to working foster parents as a foster parent recruitment and retention effort.

Statutory and Regulatory Authority

AS 47.05	Administration of Welfare, Social Services, and Institutions.
AS 47.10	Children in Need of Aid.
AS 47.14.100	Care of Children.
AS 47.17	Child Protection.
AS 47.40	Purchase of Services.
7 AAC 53, Article 1	Child Care Foster Care Payments.
7 AAC 53, Article 3	Children in Custody or Under Supervision : Needs and Income.
Titles IV-B and IV-E of the Social Security Act	

Foster Care Base Rate
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	100.0	100.0
73000 Contractual	0.0	157.4	157.4
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	9,871.3	10,646.3	10,946.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	9,871.3	10,903.7	11,204.3
Funding Sources:			
1002 Federal Receipts	1,854.2	2,709.3	2,782.0
1003 General Fund Match	2,464.2	3,811.0	3,845.7
1004 General Fund Receipts	4,561.4	3,391.9	3,585.1
1005 General Fund/Program Receipts	991.5	991.5	991.5
Funding Totals	9,871.3	10,903.7	11,204.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,854.2	2,709.3	2,709.3	2,782.0	2,782.0
General Fund Program Receipts	51060	991.5	991.5	991.5	991.5	991.5
Restricted Total		2,845.7	3,700.8	3,700.8	3,773.5	3,773.5
Total Estimated Revenues		2,845.7	3,700.8	3,700.8	3,773.5	3,773.5

Foster Care Base Rate**Proposed Changes in Levels of Service for FY2002**

The Division anticipates an 6% annual increase in foster care caseload growth over the next two years.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	8,194.4	2,709.3	0.0	10,903.7
Proposed budget increases:				
-Foster Care Base Rate Caseload Growth	227.9	72.7	0.0	300.6
FY2002 Governor	8,422.3	2,782.0	0.0	11,204.3

Component: Foster Care Augmented Rate

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Program Summary: AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." (emphasis added). To meet this mandate, the Department, through the Division of Family & Youth Services (DFYS), provides various foster care programs to children placed in custody of the State. These are children who have been removed from situations of abuse and/or neglect and are at risk for further abuse and neglect.

Due to the severity of the abuse, removal is often emergent and not planned. When these children cannot be safely maintained in their own home they require out-of-home care until the conditions requiring their removal have been ameliorated or other permanency is established. Although every effort is made to place children with relatives, often non-relative foster care is required.

The Department provides a spectrum of foster care services including the Foster Care Base Rate, Foster Care Special Needs, Foster Care Augmented, and Foster Care AYI to meet the needs of children in State custody and to meet the Department's statutory mandate to provide for the care of children in State custody.

AS 47.14.100(d)(1) further mandates the Department to "...pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment, services and equipment, special clothing, and the indirect costs of medical care, including child care and transportation expenses." The Augmented Foster Care, or difficulty of care program, reimburses foster care providers for necessary costs that are on-going and not covered by the Foster Care Base Rate including: difficulty of care maintenance payment (Justified with Difficulty-of-Care Guidelines and Case Plan), teen parent/baby, sibling groups (3 or more children), and medically fragile children. Decisions on whether to pay Augmented Foster Care rates are made on a case-by-case basis in accordance with Division policy and State regulations.

Component Goals and Strategies

- 1) **PROVIDE SAFE AND APPROPRIATE FOSTER HOMES FOR ABUSED AND NEGLECTED CHILDREN IN STATE CUSTODY IN ACCORDANCE WITH STATE LAW:**
 - The Department provides Augmented Foster Care to meet the needs of children in State custody and to meet the Department's statutory mandate to provide for the care of children in State custody. The Department has implemented a managed care type of delivery system to ensure that children receive the level of services that they need and to ensure equity between foster care providers.
 - Augmented Foster Care/difficulty of care is available to children in foster care based on an assessment of the child's special needs. This foster care program reimburses foster care providers for extraordinary costs and for higher levels of supervision not otherwise covered under the Foster Care Base Rate program. The Department provides the Augmented Foster Care, or difficulty of care program, in accordance with State and Federal Foster Care regulations.
- 2) **RECRUITMENT AND RETENTION OF FOSTER PARENTS WHO CAN PROVIDE THE SPECIALIZED CARE NECESSARY TO MEET THE NEEDS OF THIS POPULATION:**

Provide foster parent training so that foster parents can acquire the skills they need to successfully deal with the individual behaviors and special needs of children in their care.

Key Component Issues for FY2001 – 2002

The Department anticipates the foster care caseload to increase 6% per year in FY2001 and FY2002 and requests an increment of \$325.9 (\$66.8 Federal and \$259.1 General Funds) to cover the cost of caseload growth for the Foster Care Augmented program. In FY2000, 27.8% of the children in foster care received an augmentation to their base rate. The Department anticipates that the percentage of augmented cases will remain constant in FY2001 and FY2002.

Decisions on whether to pay Augmented Foster Care rates are made on a case-by-case basis in accordance with Division policy and State and Federal foster care regulations. Augmented rates must be approved in advance by DFYS regional management based on documented assessed needs. Each case must be reassessed at least every six months to determine whether continuation of augmented foster care rates are necessary and in the best interest of the child.

When children enter foster care with a higher level of disturbance, foster parents are required to access a higher level of services to meet their needs (i.e., physical, and/or psychological therapy, supervised visits with family members, individual education plans, tutoring). With the increase of parental abuse of drugs and alcohol, children are often exposed to prenatal abuse as well as environmental abuse that affects their behavior and their special needs. Children who have been exposed to parental substance abuse often require special medical and therapeutic care. Child victims of sexual abuse often present unusual behaviors while in foster care as a result of their trauma. Many of these children require frequent appointments and collaboration with therapists, educators, medical providers, and agency personnel.

For the past few years, the Foster Care Augmented component has been short-funded, and the Department has requested a supplemental appropriation. In FY1999 DFYS received a \$1,460.4 supplemental for the Foster Care Base Rate and the Foster Care Augmented programs (\$860.4 Federal Receipts, \$350.0 General Fund, and \$250.0 I/A Receipts). In FY2000 the Department received a \$1,267.3 supplemental for the Foster Care Augmented program. The Governor's FY2001 budget request included a caseload growth increment of \$1,253.2 that was reduced by \$100.0. Based on projected caseload growth, the Department anticipates the potential need for an FY2001 supplemental to cover a projected budget deficit in the Foster Care Augmented program.

The safety of children in DFYS custody will be diminished if the FY2002 foster care budget is maintained at the FY2001 funding level. The Department anticipates the foster care caseload to grow 6% per year for FY2001 and FY2002. If the current budget remains static, the Division anticipates a budget deficit for Foster Care Augmented in excess of \$300.0 in FY2002. With a budget deficit, the Department will be unable to meet its statutory mandate to provide care for children in custody and will have insufficient funds to pay augmented foster care benefits for approximately 528 annualized FTE's (the equivalent of 44 children daily) in FY 2002.

Children placed with augmented foster care rates have special needs. Without additional funding for the foster parents, these children are more likely to move from placement to placement. There is already a shortage of foster parents. An inability (whether real or perceived) to reimburse foster care providers for services rendered will seriously erode any success that the Department has made during the last two years to recruit more foster parents. Foster parents rely on the State being able to reimbursement them for the costs of care for the children in their care. Any reduction in payments may disrupt these placements and result in the Department not having enough foster parents to care for the children committed to State custody. If the State is unable to reimburse foster care providers for their costs of care, DFYS social workers will not be able to find many foster parents who are willing or able to care for abused or neglected children that are unsafe in their own homes.

Major Component Accomplishments for FY2000

In FY2000 the Division redesigned and implemented a new assessment tool to standardize the needs assessment process and improve equity between foster care providers. The new assessment tool provides standardized criteria to determine the level of care and special needs of children. The Division uses a Foster Care Placement Level Checklist

which establishes guidelines to assist in determining a child's Augmented/Difficulty of Care rate. Examples of conditions that could result in a child aged 12 to 18 years old assessed as needing Structured Rates include: felony offense(s), six or more misdemeanors, and/or a history of physical violence; gang involvement; severe physical disabilities; severe genetic diseases; life threatening medical problems; moderate to severe mental disabilities; sexual perpetrator; and serious drug abuse. Although the foster care caseload grew by only 5.8% in FY2000 due in part to the success of the Project SUCCEED and Balloon Project. The percentage of children receiving a rate augmentation has increased due to children coming into foster care with increasing special needs. In FY1998 approximately 19.3% of the children in foster care received a rate augmentation. In FY1999 23.5% of children received augmented rates, and in FY2000 27.8% of children in foster care received an augmentation to the foster care base rate. In FY 2001 the division will provide augmented foster care services to an average of 358 children each day. In FY2002 the division will provide augmented foster care services to an average of 379 children each day.

Statutory and Regulatory Authority

AS 47.05		Administration of Welfare, Social Services, and Institutions.
AS 47.10		Children in Need of Aid.
AS 47.14.100	Care of Children.	
AS 47.17		Child Protection.
AS 47.40		Purchase of Services.
7 AAC 53	Article 1	Child Care Foster Care Payments.
7 AAC 53	Article 3	Children in Custody or Under Supervision : Needs and Income.
Titles IV-B and IV-E of the Social Security Act		

Foster Care Augmented Rate
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	2,556.1	3,586.8	3,912.7
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,556.1	3,586.8	3,912.7
Funding Sources:			
1002 Federal Receipts	250.9	329.4	396.2
1003 General Fund Match	284.0	1,199.2	1,231.1
1004 General Fund Receipts	1,521.2	478.8	706.0
1007 Inter-Agency Receipts	0.0	1,079.4	1,079.4
1037 General Fund / Mental Health	500.0	500.0	500.0
Funding Totals	2,556.1	3,586.8	3,912.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	250.9	329.4	329.4	396.2	396.2
Interagency Receipts	51015	0.0	1,079.4	1,079.4	1,079.4	1,079.4
Restricted Total		250.9	1,408.8	1,408.8	1,475.6	1,475.6
Total Estimated Revenues		250.9	1,408.8	1,408.8	1,475.6	1,475.6

Foster Care Augmented Rate

Proposed Changes in Levels of Service for FY2002

The Division anticipates continued annual caseload growth of 6% for the next two years.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,178.0	329.4	1,079.4	3,586.8
Proposed budget increases:				
-Foster Care Augmented Rate	259.1	66.8	0.0	325.9
Caseload Growth				
FY2002 Governor	2,437.1	396.2	1,079.4	3,912.7

Component: Foster Care Special Need

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Program Summary: AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." (emphasis added). To meet this mandate, the Department, through the Division of Family & Youth Services (DFYS), provides various foster care programs to children placed in custody of the State. These are children who have been removed from situations of abuse and/or neglect and are at risk for further abuse and neglect.

Due to the severity of the abuse, removal is often emergent and not planned. When these children cannot be safely maintained in their own home they require out-of-home care until the conditions requiring their removal have been ameliorated or other permanency is established. Although every effort is made to place children with relatives, often non-relative foster care is required.

The Department provides a spectrum of foster care services including Foster Care Base Rate, Foster Care Special Needs, Foster Care Augmented, and Foster Care AYI to meet the needs of children in State custody and to meet the Department's statutory mandate to provide for the care of children in State custody.

The Foster Care Special Needs program reimburses providers for pre-approved "one time" or "irregular" expenditures authorized by AS 47.14 that are not covered by the Foster Care Base Rate and that have been assessed on an as-needed basis. State regulations (Sections 7 AAC 53.050 and 7 AAC 53.310-350) outline the allowable uses of Special Needs payments to DFYS clients.

The assessment tool developed in FY2000 provides standardized criteria to determine the level of care and special needs of children. Some types of expenditures have resource equity criteria assigned, and all expenditures must be based on documented assessed need. Request for Special Needs Funds forms are used to request/receive approval for payment of ongoing direct costs, one time, or short term costs. These are services needed to meet the assessed needs of children in custody or under Division supervision so the provision of goods or services on an as-needed basis is consistent with the child's case plan. Goods or services may be used to support a case plan.

Examples of services provided include: licensed child care for children in foster care to enable their foster parent(s) to continue working; childcare for foster parents to attend court hearings, case conferences, or training events; extraordinary clothing for medically fragile children and for children experiencing a growth spurt; initial clothing for a new placement first coming into foster care; court costs including the cost or fee for an expert witness to testify for the state and the cost for a teleconference of a court hearing; damages and loss to foster parent in accordance with 7 AAC 53.110; food and dry goods considered essential to maintain a placement in an unlicensed relative's home; food for special diets for children that cannot eat a regular diet (must be recommended by a doctor); rent, utility or house payments to help maintain a child in a specific unlicensed relative placement; extraordinary laundry; medical, dental, diagnostic, assessment, treatment services, and medical equipment for foster children that are not covered under Medicaid or other third-party coverage; medical exams during CPS investigations; non-recurring adoption expenses; paternity testing for alleged biological parent; personal incidentals including activity fees for reasonable and occasional events (resource equity criteria based); search for and notices to missing parents; services to parent(s), legal guardians, and Indian custodians including homemaker services, counseling or therapy, parent training, substance abuse treatment services, sex offender treatment, and other mental health services; shipping and freight costs to bring child's personal belongings to a specific placement; special equipment, furniture, and services such as special cribs, beds, mattresses for persons with disabilities; stand-by foster homes; travel for children in foster care to visit with their families; travel for foster children other than visits with family (child in custody and placement travel over

50 miles from their placement for more than 24 hours); travel for parent visit with child; travel for staff or non-employee escort travel; and paid supervised visitation.

Other Services Provided: The Foster Care Special Needs components also provides funding for other services including contracts for drug testing; foster parent training (required by AS 47.14.115); foster parent fingerprinting and criminal history record checks (required by AS 47.35); and Social Security/SSI eligibility.

During FY2000 the Department provided foster care benefits to an average of 1,216 children daily. The Department anticipates the caseload to increase an additional 6% per year to 1,290 and 1,367 in FY2001 and FY2002 respectively. All children in foster care and other out-of-home placements as well as children that are at risk of out-of-home placements are eligible to receive services.

Component Goals and Strategies

1) **PROVIDE SAFE AND APPROPRIATE FOSTER HOMES FOR ABUSED AND NEGLECTED CHILDREN IN STATE CUSTODY IN ACCORDANCE WITH STATE LAW:**

· AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." AS 47.14.100(d)(1) further mandates the Department to "...pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment, services and equipment, special clothing, and the indirect costs of medical care, including child care and transportation expenses."

· Special needs children present unique challenges to families already experiencing deficits due to substance abuse, criminal activity, parental handicaps, domestic violence, and other conditions. The Department's foster care programs provide support services to reunite families. When family reunification is not possible, permanent homes must be located that can meet the needs of the child through guardianship or adoption.

2) **MAINTAIN CHILDREN REQUIRING OUT-OF-HOME CARE IN THE SAFE AND STABLE ENVIRONMENT THEY NEED:**

· Special Needs funds can be used to avoid frequent moves and changes in environment for children placed in foster care; the use of special funds can provide the support needed by providers to maintain a child in care.

3) **RECRUITMENT AND RETENTION OF FOSTER PARENTS WHO CAN PROVIDE THE SPECIALIZED CARE NECESSARY TO MEET THE NEEDS OF THIS POPULATION:**

· Provide foster parent training so that foster parents can acquire the skills they need to successfully deal with the individual behaviors and special needs of children in their care.

Key Component Issues for FY2001 – 2002

All special needs expenditures must be based on documented assessed need. A new assessment tool was developed to provide standardized criteria to determine the level of care and special needs of children.

The Foster Care Special Needs budget is calculated based on historical cost data and is driven by projected growth in the Foster Care Base Rate program. The Foster Care Base Rate caseload is utilized because all children in Foster Care are potential recipients of Foster Care Special Needs benefits, and growth in the Base Rate caseload directly increases the number of requests for Special Needs payments. The Department anticipates the Foster Care Base Rate and Foster Care Special Needs caseloads to grow 6% per year in FY2001 and FY2002 to 15,474 FTE's (average 1,290 children daily) and 16,402 FTE's (average of 1,367 daily) respectively. The projected caseload growth is due to an overall increase in the State's population and general fluctuations in the foster care caseload.

For the past few years, the Department's foster care programs have been short-funded and supplemental appropriations have been necessary to cover the cost of under-funded caseload growth. The Governor's FY2001

budget included a \$1,334.9 increment for foster care special needs caseload growth. Funding for this request was reduced by \$1,133.1 resulting in a net caseload growth increment of \$201.8. If the foster care caseload increases by 6% as anticipated, the Department sees the potential need for a supplemental. The safety of children in DFYS custody will be diminished if the FY2002 Foster Care Special Needs budget is maintained at the FY2001 funding level.

AS 47.14.100(d)(1) requires the Department to "... pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment, services and equipment, special clothing, and the indirect costs of medical care, including child care and transportation expenses." If this increment is not funded, the Department will have insufficient funds to pay Foster Care Special Needs benefits for approximately 3,828 FTE's (the equivalent of an average of 319 children receiving foster care each day of the year), and will be unable to meet this statutory mandate (this takes into account FY2001 short-funding for Foster Care Special Needs).

Meeting the Needs of Special Needs Children: When children enter foster care with a higher level of disturbance, foster parents are required to access a higher level of services to meet their needs (i.e., physical, and/or psychological therapy, supervised visits with family members, individual education plans, tutoring). With the increase of parental abuse of drugs and alcohol, children are often exposed to prenatal abuse as well as environmental abuse that affects their behavior and their special needs. Children who have been exposed to parental substance abuse often require special medical and therapeutic care. Child victims of sexual abuse often present unusual behaviors while in foster care as a result of their trauma. Many of these children require frequent appointments and collaboration with therapists, educators, medical providers, and agency personnel.

There is already a shortage of foster parents. An inability (whether real or perceived) to reimburse foster care providers for services rendered will seriously erode any success that the Department has made during the last two years to recruit more foster parents. Foster parents rely on the State being able to reimbursement them for the costs of care for the children in their care. Any reduction in payments may disrupt these placements and result in the Department not having enough foster parents to care for the children committed to State custody. If the State is unable to reimburse foster care providers for their costs of care, DFYS social workers will not be able to find many foster parents that are willing or able to place abused in neglected children that unsafe in their own homes.

Major Component Accomplishments for FY2000

1) THE DIVISION REDESIGNED AND IMPLEMENTED A NEW NEEDS ASSESSMENT TOOL:

- In FY2000 the Division redesigned and implemented a new assessment tool to standardize the needs assessment process and to improve equity between foster care providers.

2) FOSTER PARENT RECRUITMENT AND RETENTION:

- The Division has started to offer child care assistance to working foster parents as a foster parent recruitment and retention effort.

3) IN FY2000 THE DIVISION PROVIDED FOSTER CARE SERVICES TO AN AVERAGE OF 1,216 CHILDREN EACH DAY:

- The number of children placed in foster care has increased significantly over the past several years. The foster care caseload increased 16.8% in FY1998 and by another 16.4% in FY1999. Foster care provided these children an opportunity to enjoy a stable home life and provided them with basic essential needs such as food, shelter, clothing.
- In FY2000, through the efforts of Project Succeed and the Balloon Project, the Division was able to place many children that were in long-term foster care into permanent adoptive homes or guardianships which contributed to the reduction of the foster care caseload growth rate to 5.8% in FY2000. The Department anticipates the foster care caseload to increase 6% per year for the next two years to an average 1,290 children daily and average of 1,367 daily respectively in FY2001 and FY2002.

4) DEVELOPED APSIN DATA EXCHANGE PROJECT TO INCREASE SAFETY OF CHILDREN IN FOSTER CARE:

· DFYS developed the APSIN Data Exchange Project in cooperation with the Department of Public Safety (DPS), to increase the safety of children in foster care. The APSIN Data Exchange Project provides a computer interface between the DFYS client case management system Prober and the Alaska Public Safety Information Network (APSIN). DFYS foster care providers are identified or flagged in APSIN and DFYS is notified in the event a foster care provider has been arrested or has had any other interaction with the criminal justice system. DFYS reviews these notices and determines whether or not continued placement of a child in the providers home poses a risk to the child.

Statutory and Regulatory Authority

AS 47.05	Administration of Welfare, Social Services, and Institutions.
AS 47.10	Children in Need of Aid.
AS 47.14.100	Care of Children.
AS 47.17	Child Protection.
AS 47.40	Purchase of Services.
7 AAC 53, Article 1	Child Care Foster Care Payments.
7 AAC 53, Article 3	Children in Custody or Under Supervision : Needs and Income.
Titles IV-B and IV-E of the Social Security Act	

Foster Care Special Need
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	881.9	922.6	922.6
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	2,624.4	2,202.3	2,984.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	3,506.3	3,124.9	3,906.8
Funding Sources:			
1002 Federal Receipts	328.0	475.6	525.9
1003 General Fund Match	0.0	168.3	192.3
1004 General Fund Receipts	2,075.8	1,683.1	2,390.7
1007 Inter-Agency Receipts	50.0	50.0	50.0
1037 General Fund / Mental Health	747.9	747.9	747.9
1092 Mental Health Trust Authority Authorized Receipts	88.3	0.0	0.0
1119 Tobacco Settlement	216.3	0.0	0.0
Funding Totals	3,506.3	3,124.9	3,906.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	328.0	475.6	475.6	525.9	525.9
Interagency Receipts	51015	50.0	50.0	50.0	50.0	50.0
Mental Health Trust Authority Auth.Rec.	51410	88.3	0.0	0.0	0.0	0.0
Restricted Total		466.3	525.6	525.6	575.9	575.9
Total Estimated Revenues		466.3	525.6	525.6	575.9	575.9

Foster Care Special Need

Proposed Changes in Levels of Service for FY2002

Foster Care Caseload Growth: The Division anticipates continued caseload growth of 6% over the next two years.

Increase Public Participation in 6-Month Foster Care Case Conferences: The Department has submitted an increment to facilitate the participation of community members in the foster care review process. The Division's goal is to have at least one community member from each region who will participate in every 6-month review that is held. DFYS is planning to implement a statewide training program for individuals interested in serving as community members at case conferences. The Division will develop a statewide committee made up of one citizen from each region who participates in 6-month conferences to share experience and recommend overall system improvements.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,599.3	475.6	50.0	3,124.9
Proposed budget increases:				
-Citizen Review and Participation in 6-Month Case Conferences	150.0	0.0	0.0	150.0
-FY2002 Foster Care Special Needs caseload growth.	581.6	50.3	0.0	631.9
FY2002 Governor	3,330.9	525.9	50.0	3,906.8

Component: Foster Care Alaska Youth Initiative

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." (emphasis added). To meet this mandate, the Department, through the Division of Family & Youth Services (DFYS), provides various foster care programs to children placed in custody of the State. These are children who have been removed from situations of abuse and/or neglect and are at risk for further abuse and neglect.

The Department provides a spectrum of foster care services including the Foster Care Base Rate, Foster Care Special Needs, Foster Care Augmented, and Foster Care AYI to meet the needs of children in State custody and to meet the Department's statutory mandate to provide for the care of children in State custody.

The Foster Care Alaska Youth Initiative or AYI program is a collaborative effort between the Department of Health and Social Services and the Department of Education and Early Development. Within the Department of Health and Social Services, the Division of Family and Youth Services works closely with the Divisions of Mental Health and Developmental Disabilities and the Division of Juvenile Justice in the funding, providing and monitoring of services.

The AYI program provides individualized community-based wraparound support services to children who have such severe needs that a highly intensive program is necessary to maintain the child in their community, who are at risk of out-of-home placement away from their communities or who are returning to their home communities from out-of-home placements. Four regional Interdepartmental Teams, composed of personnel from the Department of Health and Social Services and the Department of Education and Early Development screen referrals, assign provider agencies, approve individualized budgets and monitor care. Wraparound services are designed to impact every aspect of a child and family's life. Examples include the provision of therapeutic foster care, respite care, in-school support services, comprehensive mental health services, travel for family visitations, and intensive case management.

Component Goals and Strategies

1) **PROVIDE SAFE AND APPROPRIATE FOSTER HOMES FOR ABUSED AND NEGLECTED CHILDREN IN STATE CUSTODY IN ACCORDANCE WITH STATE LAW:**

- AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." AS 47.14.100(d)(1) further mandates the Department to "...pay the costs of caring for physically or mentally handicapped foster children, including the additional costs of medical care, habilitative and rehabilitative treatment, services and equipment, special clothing, and the indirect costs of medical care, including child care and transportation expenses."

- The Foster Care Alaska Youth Initiative (AYI) will provide individualized services for severely emotionally disturbed children and youth. AYI creates another placement option for those children and youth requiring less structure than institutional care. The program helps prevent institutionalized care by providing local resources.

2) **PROVIDE CASE MANAGEMENT FOR CHILDREN TRANSITIONING FROM IN-STATE OR OUT-OF-STATE RESIDENTIAL CARE FACILITIES OR YOUTH DETENTION FACILITIES BACK INTO THEIR LOCAL COMMUNITIES:**

- Provide placement resources in a less structured environment to severely emotionally disturbed children, ensuring orderly transition back to their parent's home or another permanent placement resource.

Key Component Issues for FY2001 – 2002

The Alaska Youth Initiative (AYI) program provides a unique support/placement option using local resources for severely emotionally disturbed (SED) youth whose other option would be institutionalization in in-state or out-of-state residential care facilities. This program also focuses on transitioning children and youth back into their local communities from institutionalized care.

The AYI program can only function if all its components within the Department are funded. The Division of Family and Youth Services and the Division of Mental Health and Developmental Disabilities jointly fund the individualized services provided to the severely disturbed children in the custody of the Department served by this specialized program. The Department of Education and Early Development provides funding for education related costs. In order for the program to be effective, all elements of programming and funding must be present.

Major Component Accomplishments for FY2000

1. ALASKA YOUTH INITIATIVE (AYI) PROVIDES CRITICAL SERVICES TO SEVERELY EMOTIONALLY DISTURBED CHILDREN AND YOUTH:

- The AYI program provided individualized services for severely emotionally disturbed (SED) children and youth. During FY2000, AYI served approximately 61 children and youth in State custody. The program was able to pay for services to children and their families when no other source of payment was available.
- AYI created another placement option for SED children and youth who required less structure than institutional care. The program helped prevent institutionalized care by providing local resources. The Department anticipates that the percentage of children placed in institutionalized care either in-state or out-of-state will decrease and the rate of successful transition into community-based programs and family settings will increase. Transitional services focussed on providing programs and services to those children and youth that are returning to their home communities from institutionalized care.
- The AYI program began working with the Division's Psychiatric Nurses to develop intensive wrap-around services for children as an alternative to placement in an in-state or out-of-state residential care facility.

Statutory and Regulatory Authority

AS 47.05	Administration of Welfare, Social Services, and Institutions.
AS 47.10	Children in Need of Aid.
AS 47.14.100	Care of Children.
AS 47.17	Child Protection.
AS 47.40	Purchase of Services.
7 AAC 53, Article 1	Child Care Foster Care Payments.
7 AAC 53, Article 3	Children in Custody or Under Supervision : Needs and Income.
Titles IV-B and IV-E of the Social Security Act	

Foster Care Alaska Youth Initiative
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	550.0	550.0	550.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	550.0	550.0	550.0
Funding Sources:			
1004 General Fund Receipts	150.0	150.0	150.0
1037 General Fund / Mental Health	400.0	400.0	400.0
Funding Totals	550.0	550.0	550.0

Foster Care Alaska Youth Initiative

Proposed Changes in Levels of Service for FY2002

No changes are proposed for the AYI program in FY2002. However, the Department anticipates an 6% annual increase in the foster care caseload for the next two years.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	550.0	0.0	0.0	550.0
FY2002 Governor	550.0	0.0	0.0	550.0

Component: Subsidized Adoptions & Guardianship

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The Subsidized Adoptions & Guardianship component provides permanent homes through adoptions and guardianships for children that have been placed by the court in the permanent custody of the State. Subsidized adoption is a way to establish permanent homes through adoption for children who are hard to place, who are in the permanent custody of the Department, and are unlikely to be adopted without a subsidy. As of September, 2000, 1,392 children were living in permanent homes provided under the Subsidized Adoption & Guardianship program.

The Division has known for some time that children in our custody are becoming more difficult to care for, with increasing levels of disturbance and complexity of problems. These factors make it difficult to find permanent adoptive or guardianship homes without a subsidy. It is preferable that the State provide a means for children to be given a permanent home with State funding than for the State to continue to be completely responsible for the child. In other words, subsidized adoptive and guardianship cases are those that reach a successful resolution because children are given a permanent home.

AS 25.23.240 (7) mirrors Federal guidelines for Title IVE Federal Adoptions and defines "hard-to-place" as a "minor who is not likely to be adopted or to obtain a guardian by reason of physical or mental disability, emotional disturbance, recognized high risk of physical or mental disease, age, membership in a sibling group, racial or ethnic factors, or any combination of these conditions." The children that are placed in the Subsidized Adoption & Guardianship program generally face severe problems, and many meet more than one criteria qualifying them as "hard-to-place."

Additional individual program efforts include directing grant funding towards special projects to meet permanency process needs - obtaining home studies, recruiting and training families, matching families and children, and providing on-going support to adoptive parents and guardians.

Component Goals and Strategies

1) PROVIDE PERMANENT ADOPTIVE HOMES OR GUARDIANSHIPS FOR HARD-TO-PLACE SPECIAL NEEDS CHILDREN:

- The primary goal of the Subsidized Adoption & Guardianship BRU is to facilitate permanent placements in adoptive homes or stable guardianships for the increasing number of children in State custody whose special needs make them hard-to-place.

- AS 25.23.240 (7) mirrors Federal guidelines for Title IVE Federal Adoptions and defines a "hard-to-place" child as a "minor who is not likely to be adopted or to obtain a guardian by reason of physical or mental disability, emotional disturbance, recognized high risk of physical or mental disease, age, membership in a sibling group, racial or ethnic factors, or any combination of these conditions."

- This Component provides for adoptions in accordance with State law (AS 25.23.190-25.23.240). Adoption is viewed as the most permanent placement for a child and is therefore generally the preferable option.

- This component provides for guardianships in accordance with State law (AS 13.26.062). Guardianships are considered for children who cannot be freed for adoption, but for whom a reasonably permanent home can be provided through guardianship. This is often the best choice for children who cannot live with their parents but continue to have an important emotional tie with their families that should not be severed.
- DFYS utilizes the services of child placement agencies to help identify those children who have special needs, recruit and train adoptive families, match adoptive families with children, and support the post-adoption needs of those families and children.
- Recruitment and retention of adoptive/guardianship families is necessary to remove one of the major barriers to placing children in permanent homes. The President's Adoption Initiative Adoption 2002 provides incentives for States to double adoptions by the year 2002. The Division contracts for the services of the Alaska and Northwest Adoption Exchange Programs to assist in matching children with potential adoptive families.
- The Division provides training for adoptive parents of special needs children to provide them with the skills they need to successfully deal with the special needs of their adoptive children.

2) **REDUCE THE LENGTH OF TIME BETWEEN INITIAL OUT-OF-HOME PLACEMENT AND ALTERNATE PERMANENT PLACEMENT:**

- Placement must be accomplished within the shortened time frames mandated by State and Federal law, including Alaska's HB 375 (Chapter 99, SLA 98) and the Federal Adoption and Safe Families Act of 1998. Those changes were intended to encourage and enable the State to emphasize permanency planning and to place children who are in State custody into stable, safe, supportive, and permanent homes without unnecessary delay.
- The Child Protection Legal Assistance BRU, created within DFYS in FY1999, strengthens the State's ability to process Child in Need of Aid (CINA) cases through the legal system to increase the number of children legally eligible to be adopted. This new BRU provides funding for RSA's with the Public Defender Agency and the Office of Public Advocacy for processing Child in Need of Aide cases (CINA). The Public Defender Agency provides attorney resources to concentrate on CINA cases, and the Office of Public Advocacy provides Guardian Ad Litem for these new cases.
- DFYS maintains RSA's with the Department of Law and the Court System to address the problem of backlogged adoption court cases. The Division anticipates that the services provided by these agencies will continue to be a significant factor in Subsidized Adoption & Guardianship caseload growth in FY2002.

3) **REMOVE CHILDREN FROM STATE CUSTODY:**

Adoptive parents and guardians assume legal custody of the child(ren) in their care. The child achieves a sense of belonging, and the State is relieved of the legal responsibility for the care of the child. For many of these children the Subsidized Adoption & Guardianship program provides their only hope of finding a permanent home.

Key Component Issues for FY2001 – 2002

Beneficiaries to be Served: When children leave foster care, their special needs are re-assessed to determine whether they will continue to need assistance through the Subsidized Adoption & Guardianship program. Approximately 95 percent of children leaving custody have special needs and usually continue in the Subsidized Adoption & Guardianship program. Of these children, a large percent have a medical condition or a physical, mental, or emotional disability. A needs assessment is performed annually to determine the need for continuation of Adoption & Guardianship subsidy payments. The special needs of these children combined with budgetary constraints, make this a challenging task at best.

Caseload Growth: The Subsidized Adoption & Guardianship program has been very successful in finding permanent homes for children over the past few years. The FY1999 caseload grew by 14.9% and an additional 13.9% in FY2000. Due to continuing efforts of the State Initiative Project Succeed and the Balloon Project, the Department is anticipating a 14% growth rate in the Subsidized Adoption and Guardianship program in FY2002 and is requesting an increment to ensure continuity of subsidy payments and continued success of the program.

FY2001 Funding: The Department anticipates the need for an FY2001 supplemental. During the last legislative session, the Legislature moved funding in the amount of \$1,000.0 from General Fund to TANF, with the intention of using the TANF funds for the Subsidized Adoption and Guardianship program. In reviewing the program, the Department has determined that the use of TANF for the subsidy program jeopardizes Title IV-E funding. A supplemental may be necessary to avoid an FY2001 deficit. The Department has also submitted an FY2002 budget proposal which would switch from I/A (TANF) back to General Funds to permanently correct this situation.

Major Component Accomplishments for FY2000

1) OVER 1,392 CHILDREN HAVE BEEN REMOVED FROM THE FOSTER CARE SYSTEM AND HAVE BEEN PLACED IN PERMANENT HOMES:

The Subsidized Adoption & Guardianship program provides permanent homes for "hard-to-place" children that have been placed in permanent custody of the State. This program has been very successful due to increased emphasis on permanency planning and the State initiatives such as Project SUCCEED and the Balloon Project.

Meeting the continuing caseload growth continues to be the most significant accomplishment of this program. From FY1992 to FY2000 the number of children removed from the foster care system and placed in a permanent home increased 294% from 338 to 1,332 (a net increase of 163 children from FY1999). The Department anticipates the number of children in the Subsidized Adoption & Guardianship program to increase by 14% to 1,518 in FY2001 with an additional 14% growth to 1,730 in FY2002.

The majority of the children in the subsidy program meet the general criteria for multiple special needs. Specific special needs factors identified include: Fetal Alcohol Effected/Fetal Alcohol Syndrome; mental disabilities; neglect; Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder; cocaine positive at birth; developmental delays; sexual, physical, and emotional abuse; drug/alcohol abuse in home; domestic violence; Post-traumatic Stress Disorder; vision, hearing, and speech disabilities; children born to mothers with AIDS; inadequate prenatal care; psychosis/organic brain dysfunction; and Sickle Cell Anemia.

In addition, the Federal Government awarded Alaska an Adoption Bonus for 1999, due to the increase in completed adoptions. Under the Adoptions and Safe Families Act, the Federal Adoption Incentive bonus program provides financial incentive to states to increase adoptions of children waiting in the foster care system. In 1999 Alaska increased its adoptions by 26% from its baseline of 109 state adoptions increased to 137 finalized adoptions.

2) UTILIZATION OF TITLE IVE FEDERAL REVENUE:

As of September 2000, there were 1,392 children receiving Adoption & Guardianship subsidies. 939 (67.5%) of these children were eligible to receive Federal IVE adoption assistance, 161 (11.6%) were in State funded adoptions, and 292 (20.9%) were in State funded guardianships. The State is reimbursed 54.13% of the subsidy payments for Federal Title IVE adoptions.

3) PROJECT SUCCEED:

Project SUCCEED has been one of the driving forces contributing to the success of the Subsidized Adoption and Guardianship Program. As stated above, the net subsidy caseload increased by 163 children in FY2000 with many of these children receiving services from Project SUCCEED and the Balloon Project. Project SUCCEED targets funds to the Court System, Department of Law, Office of Public Advocacy and the Public Defender Agency to focus on legal proceedings needed for children who have been in custody the longest period of time. Project SUCCEED funds are also contracted out through community grants to help prepare the child and family for final adoption or guardianship and to follow the child and family for up to one year after the final adoption or guardianship court hearing.

Community Grants: Since the inception of Project Succeed in 1997 there have been 556 children referred to the two grantees. As of October 2000 there have been 147 adoptions, 56 permanent guardianships, 10 children aged out, 56 are inactive, 85 are waiting for finalization through the court process and 202 are in the process of having their home studies finalized. These children are in custody and both of their parents' rights have been terminated. They are waiting for their final adoption or guardianship to be completed. Two principal grantees, Bristol Bay Native

Association and Catholic Social Services, subcontract to eight tribal organizations and two adoption agencies throughout the state to coordinate efforts on this child-specific grant program. The community grants include four deliverables: recruitment of homes for children who do not already have permanent homes; home studies on potential adoptive families; pre-adoption services for the child and family; and post adoption services for up to one year after the final adoption or guardianship court hearing.

In FY2000, the State added a third component to Project SUCCEED, the Alaska Adoption Exchange. The Alaska Adoption Exchange promotes early identification of children in the system, who have been identified as needing a permanent placement and identifies potential families wanting them. The Alaska Adoption Exchange listed children in custody who are available now or soon to be available for adoption. The Exchange also lists potential adoptive families who are considered for placements of special needs children. The Exchange creates a mechanism for different DFYS workers to know about other children and potential adoptive families in the state. Children in custody are registered on the Exchange as soon as adoption has been identified as the permanent plan. This includes children who are not legally free but have termination of parental rights planned and the division has court approval to register.

4) Balloon Project:

State and Federal law requires children that have been in foster care for 15 of the past consecutive 22 months to be placed into permanent homes. To comply with this law and to help eliminate the backlog of children in long-term foster care, the 1999 Legislature approved a two-year special appropriation to implement the State's permanency planning initiative, the Balloon Project.

The Balloon Project is a collaborative effort of the Department of Health and Social Services, the Department of Law, the Alaska Court System, the Office of Public Advocacy and the Public Defenders Agency to move children who have lingered in the child protection system for more than three years into permanent placements. The original transition list (Phase I) was created from those children who, on 11/19/97 had been in custody 15 of the previous 22 months. Phase II were those children in custody more than 38 months as of 01/01/2000, and Phase III were those children in custody between 27-38 months as of 01/01/2000. All of these children were in out of home custody who had not had parental rights terminated.

Transition list	# of Children	# Adopted	# in permanent Guardianship
Phase 1	662	166	92
Phase II	45	9	2
Phase III	373	42	29

Statutory and Regulatory Authority

AS 25.23	Adoption
AS 25.23.190	Subsidy for hard-to-place child.
AS 47.10.080	Judgments and orders.
7 AAC 53 Article 2	Subsidized Adoption and Subsidized Guardianship Payments

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
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Component — Subsidized Adoptions & Guardianship

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.			X		

Subsidized Adoptions & Guardianship**Component Financial Summary***All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	362.6	550.0	450.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	9,645.5	11,148.8	13,046.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	10,008.1	11,698.8	13,496.3
Funding Sources:			
1002 Federal Receipts	3,301.1	3,496.6	4,321.0
1003 General Fund Match	1,969.3	2,758.4	3,152.0
1004 General Fund Receipts	4,432.1	3,953.4	6,023.3
1007 Inter-Agency Receipts	0.0	1,000.0	0.0
1092 Mental Health Trust Authority Authorized Receipts	305.6	490.4	0.0
Funding Totals	10,008.1	11,698.8	13,496.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
<u>Unrestricted Revenues</u>						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
<u>Restricted Revenues</u>						
Federal Receipts	51010	3,301.1	3,496.6	3,496.6	4,321.0	4,321.0
Interagency Receipts	51015	0.0	1,000.0	0.0	0.0	0.0
Mental Health Trust Authority Auth.Rec.	51410	305.6	490.4	490.4	0.0	0.0
Restricted Total		3,606.7	4,987.0	3,987.0	4,321.0	4,321.0
Total Estimated Revenues		3,606.7	4,987.0	3,987.0	4,321.0	4,321.0

Subsidized Adoptions & Guardianship**Proposed Changes in Levels of Service for FY2002**

Participation in new projects such as Project SUCCEED and the Adoption Exchange require additional work on the part of workers in the field and in the adoption and guardianship unit. Under Federal law - the acceleration of the permanency planning process (the Adoptions and Safe Families Act, 1997) and the institution of programmatic changes (the Multi-Ethnic Placement Act of 1994 and the Interethnic Adoption Provision modifications in 1996) - and under subsequent state law (AS 47.10.080 as modified by HB 375 in 1998), subsidies must be in place more quickly than ever before. State program activities are also being developed in accordance with additional Federal programs such as the Adoption 2002 Initiative. The Division is anticipating a 14% caseload increase in the Subsidized Adoption and Guardianship program in FY2002.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	6,711.8	3,496.6	1,490.4	11,698.8
Adjustments which will continue current level of service:				
-Refinance Child Protection Services-TANF with GF	1,000.0	0.0	0.0	1,000.0
Proposed budget decreases:				
- Reduce uncollectable I/A Receipts (TANF)	0.0	0.0	-1,000.0	-1,000.0
-Reduce MHTAAR to reflect end of project funding.	0.0	0.0	-490.4	-490.4
Proposed budget increases:				
-Subsidized Adoption & Guardianship Caseload Growth.	1,463.5	824.4	0.0	2,287.9
FY2002 Governor	9,175.3	4,321.0	0.0	13,496.3

Component: Residential Child Care

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Services in this component are directed at providing 24-hour care for children in the custody of the Department who are not able to remain in their own home or who need more structure and treatment than can be provided in foster care. The Department provides a continuum of six levels of residential treatment ranging from day treatment to intensive residential diagnostic treatment center services. Children and youth placed in residential care often present severe and complex treatment problems such as sexual abuse, sexually aggressive behavior, substance abuse, severe emotional disorders, delinquent behavior, and other dysfunctional behavior.

Residential care services are purchased from private providers throughout the state via a competitive grant process described in AS 47.40.011. Services include day treatment, emergency shelter, group home care, intensive residential treatment centers, residential psychiatric treatment centers and residential diagnostic treatment centers. Increments are also provided to residential centers that provide specialization such as sex offender treatment. Additional services, which are funded out of this component, include medical care, dental care, additional staffing, and client staffing.

When the necessary level of care is not available within the state, services are purchased from out-of-state providers. Out-of-state providers are approved Alaska Medicaid providers of residential psychiatric treatment in both secure and non-secure settings.

Component Goals and Strategies

1) **PROVIDE SAFE AND APPROPRIATE 24-HOUR RESIDENTIAL AND GROUP HOME CARE FOR ABUSED AND NEGLECTED CHILDREN IN STATE CUSTODY IN ACCORDANCE WITH STATE LAW:**

- The Department is mandated by State law (AS 47.14.100) to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state."
- The Department, through the Division of Family & Youth Services issues Residential Care grants to non-profit agencies on a competitive basis to provide high quality, time limited residential treatment services for abused, neglected, and delinquent children. These children have complex treatment issues which require specialized professional treatment and 24-hour adult supervision that cannot be provided by the child's parents, relatives, or through foster care.
- The goal for children in residential care is to develop the ability to cope with their abuse histories and develop social skills, which will enable them to succeed in either kinship care or some other less restrictive alternative such as foster care.
- Guide abused children through the use of various behavioral modification techniques, positive peer relationships, and trust development in order to reduce the level of anger that is indicated in most cases, and reduce the number of abused children who commit delinquent acts and consequently are transferred to the juvenile corrections system.
- For the population of children who are adjudicated delinquent, the residential child care goal is two-pronged. The first goal is to identify past abuse, which exists in many delinquent cases, and to develop an individualized plan of care to address those issues. The second goal is to hold the juvenile offender accountable for his/her conduct and equip the

juvenile with the skills needed to live responsibly within the community. The overall goal is to ensure success in this level of care in order to avoid further violations of criminal law and placement in a long-term correctional center.

- Residential care providers are located throughout the State, and the Department makes every effort possible to provide residential child care services as close to a child's home community as possible so that the child's parents and significant others can be involved in the treatment process.
- The Department contracts with out-of-state residential psychiatric treatment facilities to provide treatment for children in State custody when treatment is unavailable in Alaska.

Key Component Issues for FY2001 – 2002

The Department is currently in the process, through DFYS, of generating regulations for psychiatric residential care in both secure and semi-secure settings. The public comment period for the proposed regulations has ended and the Department is in the process of reviewing those comments in light of potential revisions to the drafted regulations. It is anticipated that these regulations will take effect sometime early in calendar year 2001. The potential of being able to provide secure residential care within the state may have future impact on the number of out-of-state placements that are currently occurring.

Residential Care Bed Capacity: For FY2001, the Department has purchased approximately 256 treatment beds providing a continuum of six levels of residential treatment ranging from day treatment to intensive residential diagnostic treatment center services. The current foster care system is overcrowded, with many foster care children that experience severe emotional and behavioral problems. These children often fail in foster home settings, resulting in multiple placements for children and often the loss of foster homes. For many of these children, group care, a treatment environment with 24-hour professional staff, is a more appropriate placement.

Major Component Accomplishments for FY2000

1) THE DEPARTMENT PROVIDED SIX LEVELS OF RESIDENTIAL CARE:

The Department's Residential Child Care programs provided a continuum of 6 levels of care based on the assessed need of the individual child and the availability of bed space.

Category I Day/Early Evening Treatment Programs: The Department purchased 23 Category I day/early evening treatment beds, located in Anchorage and Kodiak, for FY2001. Category I provides an intensive late afternoon and early evening program of structured, supervised, rehabilitative activities for children and youth with behavioral and emotional problems who, with coordinated services to them and their families, can be maintained in their own homes or in foster care, either as an alternative to out-of-home placement, or as part of an aftercare plan for children and youth currently in placement.

Category II Emergency Shelter: The Department purchased 91 Category II Emergency Shelter treatment beds, located throughout the state, for FY2000. Category II Emergency Shelter treatment provides temporary residential care for children who are in immediate danger in their present environment or for those children who are not committable to Alaska Psychiatric Institute or a detention facility and for whom no other satisfactory plan can be found immediately. Emergency shelter projects are generally for children ages 12 to 18 in crisis due to recent abuse, neglect, or delinquency and have recently been removed from their family home or other placement. The emergency shelter assists in resolving the crisis, stabilizes the child, and assists in the planning for the child's return home or placement in alternative care.

Category III Specialized Residential Care: The Department purchased 80 Category III Specialized Residential Care treatment beds, located throughout the state, for FY2000. Specialized residential care comprises a range of services from basic residential child care to residential child care for children with specialized service needs such as emotional disturbance, behavioral dysfunction, sexual offending, and preparation for emancipation. Category III provides children with a variety of treatment options and special services such as sex offender treatment, programs for emotionally disturbed children, and programs for children exhibiting dysfunctional behavior.

Category IV Intensive Residential Treatment: The Department purchased 20 Category IV Intensive Residential Treatment beds, located in Juneau and Anchorage, for FY2000. Category IV programs provide 24 hour treatment for children with emotional and behavioral disorders that cause them to be a danger to themselves or others. Children typically will have a clinical history of conduct disorder, oppositional defiant, Fetal Alcohol Syndrome, or Fetal Alcohol Effected. Services are provided in a facility which includes an on-ground certified school and a highly structured, staff intensive program. This level of service is provided for children who are in need of and are able to respond to psychotherapeutic intervention and who cannot be treated effectively in their own family, a foster home, or in a less restrictive and structured setting.

Category V Residential Psychiatric Treatment Center Services: The Department purchased 36 Category V Residential Psychiatric Treatment Center Services treatment beds, located in Anchorage, for FY2001. Residential Psychiatric Treatment Center Programs provide 24 hour interdisciplinary, psychotherapeutic treatment for children with severe emotional or behavioral disorders.

Category VI: Residential Diagnostic Treatment Center Services: The Department purchased 6 Category VI Residential Treatment Center Services beds, located in Anchorage, for FY2001. This program provides structured supervision 24-hours per day, seven days per week by professional staff. Treatment services include: crisis intervention; diagnosis (i.e. behavioral, health, mental health, substance abuse, etc.); identifying the child's risk level (i.e. chronic, episodic or manageable); behavioral stabilization and management; comprehensive treatment planning focused on aftercare and the child's long-term needs; and short term (3-6 months) residential care.

2) THE DEPARTMENT HAS ESTABLISHED A UNIFORM STATEWIDE PROTOCOL FOR OPERATION OF DEPARTMENTAL REGIONAL RESIDENTIAL PLACEMENT COMMITTEES:

The Department has established a uniform statewide protocol for operation of Departmental Regional Residential Placement Committees to assure necessary expertise and resources are devoted to planning and providing appropriate services for children in Department custody who require residential treatment. Establishment of these Residential Placement Committees assures the best utilization of available residential treatment resources to meet the needs of children in State custody. This process also establishes concrete steps for continued development of a seamless and integrated system of care for children in State custody, focusing especially on those who require residential treatment and on planning systematically to assure limited resources are focused to effectively meet the needs of those children.

3) PSYCHIATRIC NURSE PROGRAM:

The Division of Family and Youth Services has four Psychiatric Nurses, one assigned to each region. The Psychiatric Nurses serve as chair of the Regional Placement Committee in order to determine if medical necessity for psychiatric residential services is met. They receive and review referral packets from Social Workers and Juvenile Probation Officers for all referrals to the Regional Placement Committee. The nurses assist each child's worker in monitoring the progress of children from the region placed in out of state facilities and monitor these placements by conducting site reviews and reviewing children's treatment goals, discharge plans and medication management. They also assist the worker, child, and child's family with transition back to the community.

Statutory and Regulatory Authority

AS 47.05	Administration of Welfare, Social Services, and Institutions.
AS 47.10	Children in Need of Aid.
AS 47.17	Child Protection.
AS 47.30	Mental Health Trust Authority
AS 47.40	Purchase of Services.
7 AAC 53 Article 1	Child Care Foster Care Payments.
7 AAC 53 Article 3	Children in Custody or Under Supervision : Needs and Income.
7 AAC 43.500-43.599	Medical Transportation Services; Inpatient Psychiatric Services
7 AAC 50	Family and Youth Services
7 AAC 78	Grant Programs
Titles IV-E, IV-B, IV-D and XIX of the Social Security Act	

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">The performance measure for this component is set up at the BRU level. Please see the performance measures under the Purchased Services BRU.			X		

Residential Child Care
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	216.5	206.3	106.3
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	12,044.2	12,141.6	13,016.6
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	12,260.7	12,347.9	13,122.9
Funding Sources:			
1002 Federal Receipts	424.9	625.0	625.0
1003 General Fund Match	571.9	580.2	580.2
1004 General Fund Receipts	6,111.2	7,086.4	7,086.4
1007 Inter-Agency Receipts	625.0	0.0	775.0
1037 General Fund / Mental Health	3,800.9	3,956.3	3,956.3
1092 Mental Health Trust Authority Authorized Receipts	236.9	100.0	100.0
1119 Tobacco Settlement	489.9	0.0	0.0
Funding Totals	12,260.7	12,347.9	13,122.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	424.9	625.0	625.0	625.0	625.0
Interagency Receipts	51015	625.0	0.0	0.0	775.0	275.0
Mental Health Trust Authority Auth.Rec.	51410	236.9	100.0	100.0	100.0	100.0
Restricted Total		1,286.8	725.0	725.0	1,500.0	1,000.0
Total Estimated Revenues		1,286.8	725.0	725.0	1,500.0	1,000.0

Residential Child Care

Proposed Changes in Levels of Service for FY2002

The Department, through the Division of Family and Youth Services and in coordination with current residential care providers, determined that the current categorical definitions of residential care needed to be reexamined. Through this collaborative effort, proposed changes to the levels of care are under review. It is anticipated these changes will go into effect in FY2002.

A residential care grant has been awarded to Family Centered Services of Alaska to provide Residential Diagnostic Treatment services to children and youth in Fairbanks. The program will begin in FY2002 upon completion of building modifications that must be made to the facility.

No other significant service changes have occurred in this component.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	11,622.9	625.0	100.0	12,347.9
Proposed budget decreases:				
-MHTAAR reduction to reflect end of project funding for the Fairbanks RDT	0.0	0.0	-100.0	-100.0
Proposed budget increases:				
-Establish Five-Bed Mental Health Stabilization Home	0.0	0.0	375.0	375.0
-Increase I/A receipts for education costs for children in out-of-state residential treatment.	0.0	0.0	500.0	500.0
FY2002 Governor	11,622.9	625.0	875.0	13,122.9

Component: Court Orders and Reunification Efforts

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Program Summary: AS 47.14.100 mandates the Department to provide for the "...care of every child committed to its custody by placing the child in a foster home or in the care of an agency or institution providing care for children inside or outside the state." (emphasis added). To meet this mandate, the Department, through the Division of Family & Youth Services (DFYS), provides various foster care programs to children placed in custody of the State. These are children who have been removed from situations of abuse and/or neglect and are at risk for further abuse and neglect.

Due to the severity of the abuse, removal is often emergent and not planned. When these children cannot be safely maintained in their own home they require out-of-home care until the conditions requiring their removal have been ameliorated or other permanency is established. Although every effort is made to place children with relatives, often non-relative foster care is required.

The Department provides a spectrum of foster care services including the Foster Care Base Rate, Foster Care Special Needs, Foster Care Augmented, and Foster Care AYI to meet the needs of children in State custody and to meet the Department's statutory mandate to provide for the care of children in State custody.

The Court Ordered and Reunification Efforts (CORE) component captures the cost of court ordered services and related expenditures necessary to meet the Department's "Reasonable Reunification Efforts" legal requirements and "Active Efforts" on behalf of native children and families. Court ordered services include, but are not limited to: drug and alcohol assessment; counseling, substance abuse treatment, mental health services, assistance to address domestic violence, visitation with family members, parenting classes, in-home services, temporary child care services, transportation and other services or treatment for biological parents; room and board for parents while they attend treatment; witness fees; finding missing parents; court teleconference hearings; and travel costs for family visits. Reasonable or reunification services and active efforts include but are not limited to drug and alcohol assessment and treatment for biological parents; travel costs for biological parents, grandparents, and siblings to visit children in custody; travel costs for home visits; and other services to assist in maintaining children in their homes or to return them to their biological parents.

This component improves accountability and makes a clear distinction between the cost of foster care services and services with the specific intent to preserve and reunite families. Accountability is improved by providing clear documentation of "active effort" services provided to native children and families.

Component Goals and Strategies

1) FOSTER CARE FUNDS SUPPORT FAMILY REUNIFICATION:

· Every effort is made to maintain children in their own home. When, however, they cannot safely remain in their home and require out-of-home care, the Division places strong emphasis on reunification of the family. This reunification sometimes involves providing special education, training, or therapeutic intervention for the family members. Special funds can be accessed to support family reunification, ameliorating the issues and concerns which could place the child at continued risk when returned to the home.

· Special needs children present unique challenges to families already experiencing deficits due to substance abuse, criminal activity, parental handicaps, and other conditions. The Department's foster care programs provide support

services to reunite families. When family reunification is not possible, permanent homes must be located that can meet the needs of the child through guardianship or adoption.

2) PROVIDE FUNDING AND IDENTIFY COSTS ASSOCIATED WITH FAMILY REUNIFICATION EFFORTS, WHETHER ORDERED BY THE COURT OR UNDERTAKEN AS PART OF A DFYS CLIENT CASE PLAN:

· The Department provides a spectrum of foster care resources to meet its statutory mandate to provide for the care of children who have been taken into State custody. Typical services provided through the Department's foster care programs include: food, shelter, clothing, counseling, psychological and medical needs and other needs directly related to taking care of a child.

· In 1998 the Alaska Legislature passed new child protection legislation (Chapter 99, SLA 1998) which, in part, increases emphasis on prevention of out-of-home placement and reunification of families in the event of an out-of-home placement. This new law established AS 47.10.086 which mandates the Department to "...make timely, reasonable efforts to provide family support services to the child and to the parents or guardian of the child that are designed to prevent out-of-home placement of the child or to enable the safe return of the child to the family home, when appropriate, if the child is in an out-of-home placement..." (emphasis added). In the case of native children, the Federal Indian Child Welfare Act (ICWA) mandates the Department make active efforts towards the same goals. "Active efforts" denotes an even higher standard of service delivery to the child and to the parents or guardian of the child than the standard associated with "reasonable efforts".

· Family support services, as defined by AS 47.10.999 (9), include: counseling, substance abuse treatment, mental health services, assistance to address domestic violence, visitation with family members, parenting classes, in-home services, temporary child care services, and transportation.

· Federal requirements also demand reunification services be "time-limited" thereby stressing the importance of establishing permanency for children in State custody.

· In many instances, the Court System has ordered DFYS to provide to DFYS clients and their families services that fall outside of the realm of what is normally considered foster care. For example, the court may order DFYS to pay for drug and alcohol assessment and treatment for biological parents, room and board for parents while they attend treatment, and travel costs for family visits.

3) IDENTIFY COSTS INCURRED BY THE DIVISION DUE TO STATE AND FEDERAL "REASONABLE EFFORTS" AND "ACTIVE EFFORTS" REQUIREMENTS TO PREVENT OUT-OF-HOME PLACEMENT AND TO REUNIFY FAMILIES:

· Federal foster care regulations and State law require the Department to make "reasonable efforts" to prevent out-of-home placements and to reunify families in a time-limited manner in the event of an out-of-home placement for non-native children. Services are provided to prevent out-of-home placements or to reunify children who have been removed. Yet these services are provided in a time-limited manner to also focus on permanency or "a child's sense of time." The same regulations and State law require the Department to make "active efforts" for native children. The Department, in response to these requirements, provides a range of services to children in custody and their families.

· "Reasonable efforts" and "active efforts" expenditures often extend beyond standard foster care services. Common "reasonable and active efforts" expenditures include drug and alcohol assessment and treatment for biological parents; travel costs for biological parents, grandparents, and siblings to visit children in custody; travel costs for home visits; and other services to assist in maintaining children in their home or to return them to their biological parents. If a timely reunification is not possible, services are focused on establishing permanency for the child through guardianship or adoption.

Key Component Issues for FY2001 – 2002

During FY2000 the Department, in order to comply with AS 47.10.086, created a new Court Ordered and Reunification Efforts component for FY2001. This component is used to capture the cost of court ordered services and other expenditures necessary to meet the Department's "Reasonable Efforts" and "Active Efforts" legal requirements. These costs were previously paid from the Foster Care Special Needs component. The new

component was created to improve accountability and make a clear distinction between foster care services and services to preserve and reunite families. It also supplies the necessary documentation of "Active Effort" services being provided to a specific population mandated by the Indian Child Welfare Act (ICWA).

Major Component Accomplishments for FY2000

This is a new budget component for FY2001. The Division will report accomplishments after the program is in operation for at least one budget cycle. The Division expects this component will increase accountability in tracking the foster care services intended to preserve and reunite families.

Statutory and Regulatory Authority

AS 47.05 Administration of Welfare, Social Services, and Institutions.
 AS 47.10 Children in Need of Aid.
 AS 47.14.100 Care of Children.
 AS 47.17 Child Protection.
 AS 47.40 Purchase of Services.
 7 AAC 53, Article 1 Child Care Foster Care Payments.
 7 AAC 53, Article 3 Children in Custody or Under Supervision : Needs and Income.
 Titles IV-B and IV-E of the Social Security Act
 Indian Child Welfare Act

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance under the Purchased Services BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> The performance measure for this component is set up at the BRU level. Please see the performance under the Purchased Services BRU. 			X		

Court Orders and Reunification Efforts**Component Financial Summary***All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	500.0	500.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	0.0	500.0	500.0
Funding Sources:			
1004 General Fund Receipts	0.0	500.0	500.0
Funding Totals	0.0	500.0	500.0

Court Orders and Reunification Efforts

Proposed Changes in Levels of Service for FY2002

No changes are proposed for FY2002.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	500.0	0.0	0.0	500.0
FY2002 Governor	500.0	0.0	0.0	500.0

BRU/Component: Front Line Social Workers

(There is only one component in this BRU. To reduce duplicate information, we did not print a separate BRU section.)

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The Front Line Social Workers component provides services to carry out the legal mandates of the Department to prevent and remedy abuse, neglect, and the exploitation of children. For child protective services, primary service activities include the following elements: investigations of reports of harm; crisis intervention; assessment of risk of future harm in the absence of intervention; family strength and need assessment and case planning; assessment of progress toward the achievement of case plan goals; initiating legal action to protect clients, monitoring implementation of treatment plans, and coordination of services; arranging out-of-home care, when appropriate and necessary, in the least restrictive setting; and arranging alternative permanent placement for children when a return home is not possible.

Primary service activities include the following elements for child protection: family centered services that focus on the family rather than the individual and that assist client families in regaining or maintaining autonomy; arranging for family preservation and family reunification services by grant and contract agencies; and licensure of foster homes, residential care facilities and child care facilities.

Component Goals and Strategies

1) PROVIDE SERVICES TO ALASKA CHILDREN AND THEIR FAMILIES TO PREVENT AND ELIMINATE REPEATED ABUSE, NEGLECT, AND EXPLOITATION OF CHILDREN:

- For FY2001, the Division, through the Front Line Social Workers component, maintains approximately 313 permanent positions, including 228 social workers and social services associates, located in 4 regional offices and 29 field offices spanning from Ketchikan to Barrow to deliver direct services to abused and neglected children and their families.

- DFYS provides a range of resources to prevent and remedy child abuse and neglect including: child protective services, foster care, residential care, family support/family preservation services, permanency planning, and community care licensing.

- As of September 5, 2000, the Department had 2,409 children in custody and in out-of-home care (including 461 children in the custody of the Division of Juvenile Justice). There were approximately 1,147 licensed foster care providers and 1,805 children in foster care (including approximately 517 children that have been placed in unlicensed relative homes).

- The Subsidized Adoption & Guardianship program provides permanent homes for children that have been placed in permanent custody of the State. This program has been very successful due to increased emphasis on permanency planning and the State initiatives such as Project SUCCEED and the Balloon Project. From FY1992 to FY2000 the number of children removed from the foster care system and placed in a permanent home increased 294% from 338 to 1,332. Meeting the continuing caseload growth continues to be the most significant accomplishment of this program. At the close of FY2000, there were 1,332 children in the Subsidized Adoption & Guardianship program. The Department anticipates the number of children in the Subsidized Adoption & Guardianship program to increase by 14% to 1,518 in FY2001 with an additional 14% growth to 1,730 in FY2002.

· For FY2001, the Department has purchased approximately 256 residential treatment beds providing a continuum of six levels of residential treatment ranging from day treatment to intensive residential diagnostic treatment center services. The current foster care system is overcrowded, with many foster care children that experience severe emotional and behavioral problems. These children often fail in foster home settings, resulting in multiple placements for children and often the loss of foster homes. For many of these children, group care, a treatment environment with 24-hour professional staff, is a more appropriate placement.

· The Department provides 31 Family Support, Family Preservation, and Time Limited Family Reunification grants to 26 non-profit grantees located across the state. DFYS social workers utilize these grantees and refer clients for crisis intervention; parenting skills; prevention of out-of-home placement; and other services to support children in DFYS custody and their families (including foster and adoptive families).

2) PROVIDE TRAINING TO INCREASE PROFESSIONAL COMPETENCE AND REDUCE EMPLOYEE TURNOVER:

· The Division, through the Training Academy, will continue to provide new social workers with two weeks of training prior to assigning them a caseload and a third week of training within their first six months of work with DFYS. Training increases the workers' ability to recognize symptoms of abuse and neglect; increases their skill in working with abused and neglected children and their families to prevent further abuse and neglect; and strengthens their ability to assess when it is necessary to remove children from potentially harmful situations before physical or mental injury occurs or is repeated.

· Training is not limited to new social workers. On-going training is also provided to current DFYS social workers, social service aides, licensing workers, and managers. The on-going workers are provided with specialized and advanced training such as Advanced Indian Child Welfare Act training and Advanced Assessment of Risk.

· Training is provided to supervisors and managers in areas such as basic supervision, management, and program administration so that they can better manage and direct the field workers.

3) INCREASE THE DIVISION'S ABILITY TO RECRUIT AND RETAIN PROFESSIONAL LEVEL SOCIAL WORKERS:

· The Division will continue efforts to reduce employee turnover and to recruit new employees including training provided by the Family & Youth Services Training Academy, the Bachelors of Social Work stipend program, and the "back-to-school" Masters of Social Work program.

· The Department provides a stipend program, through the Family & Youth Services Staff Training component, for recruitment of Bachelor of Social Work students at the University of Alaska, Anchorage, and the University of Alaska, Fairbanks. The students spend their senior year practicum assigned to special DFYS field units in the Anchorage and Fairbanks Family Services offices. DFYS pays the student a monthly stipend while they are in school, doing the practicum. After graduation, they are legally obligated to accept employment as DFYS Social Workers. This provides new workers who are already trained and mentored to fill vacancies in the DFYS workforce.

· The Department, through the Training component, provides a "return to school" program for existing staff. The staff member may apply for a Masters of Social Work at UAA or a Bachelors of Social Work at UAA or UAF. Once accepted by the University program and attending the program, the Division will pay the employee an educational stipend. Upon completion of the degree, they are legally obligated to return to work within DFYS. This arrangement gives the staff professional enhancement and increased expertise to conduct the best child welfare/child protection practice to serve abused and neglected children and their families.

4) INCREASE THE DIVISION'S ABILITY TO RESPOND TO REPORTS OF HARM:

· The Report of Harm response is up all over. The Division will continue the Dual Track pilot grant program for the Mat-Su Valley area. DFYS implemented the Dual Track pilot program in the Mat-Su Valley area in FY1999 in response to an unacceptably high rate of "low priority" (Priority Three) reports of harm that went uninvestigated. The Dual Track program provides Family Preservation grant funding to a non-profit community partner agency to perform intervention and follow-up work for cases that DFYS has assessed as being low risk. This program has enabled the

Division to focus more social worker staff resources on investigating higher priority reports of harm. The Dual Track pilot program provides a differential response to child protection. Without this program many of these cases would go uninvestigated, potentially resulting in further harm to children.

5) CONTINUE THE PSYCHIATRIC NURSE PROGRAM:

The Department initiated the Psychiatric Nurse Program in FY1999 with three years funding from the Alaska Mental Health Trust Authority. The Department has submitted an FY2002 fund source change to provide for the continuation of this program. The establishment of the Psychiatric Nurse program has made a significant improvement on determining placement options for children in the Department's custody and has strengthened the existing Regional Placement Committee structure, the current process for determining the placement and treatment of children and youth who present complex psychiatric needs. The psychiatric nurses serve as the chairs for the Department's Regional Placement Committees and play an essential role in determining whether medical necessity for psychiatric residential services is met, for ensuring that all children recommended for residential placement are referred to the facility most appropriate to meet their treatment needs, and that out-of-state referrals are made only when a child's treatment needs cannot be met in state.

6) REDUCE THE LENGTH OF TIME BETWEEN INITIAL OUT-OF-HOME PLACEMENT AND ALTERNATE PERMANENT PLACEMENT:

· Permanent placements must be accomplished within the shortened time frames mandated by State and Federal law, including Alaska's HB 375 (Chapter 99, SLA 98) and the Federal Adoption and Safe Families Act of 1997. The Department has dedicated resources and has implemented initiatives including Project SUCCEED and the Balloon Project to comply with these new laws and to help move children waiting in the child welfare system to a permanent home. Project SUCCEED and the Balloon Project are multi-agency projects that target funds to the Court System, Department of Law, Office of Public Advocacy and the Public Defender Agency to focus on legal proceedings needed for children who have been in custody the longest period of time. Project SUCCEED also provides funds to two community grants to help prepare the child and family for final adoption and guardianship and to follow the child and family for up to one year after the final adoption or guardianship court hearing.

· Continue the Balloon Project as an ongoing program: Balloon Project funding enabled DFYS to hire 14 additional non-permanent social workers to focus on the "transition" list of children that have been in custody the longest. The Department's FY2002 budget submittal includes provisions for continued implementation of the system set in place by the Balloon Project. The continuation of this effort is critical to assure every child in state custody receives timely case plans and services, and exits custody within the statutory time limits. Implementation of this program will serve to further reduce backlogged cases and prevent future backlogs from occurring. The Balloon Project has been extremely successful in reducing the foster care caseload backlog. One measure of the Balloon Project's success can be seen in the reduction of the growth of the foster care caseload. In FY1999 the foster care caseload increased by 16.4%. In FY2000, the growth rate decreased to 5.8%. Long-term benefits of this program will include: savings from reduced foster care caseloads; increased compliance with Federal and State permanency planning laws; prevention of a backlog of cases from happening again; continued collaboration between DFYS and the State legal entities to process child protective services cases on a timely basis; more efficient operations; timely client case handling helps to prevent "problem" cases; and the child protection system works better overall because of the expertise developed during the Balloon Project trial.

· Continue Funding Child Protection Legal Assistance: The Child Protection Legal Assistance BRU, created within DFYS in FY1999, strengthens the State's ability to process Child in Need of Aid (CINA) cases through the legal system to increase the number of children legally eligible to be adopted. This BRU provides funding for RSA's with the Public Defender Agency and the Office of Public Advocacy for processing Child in Need of Aid Cases (CINA). The Public Defender Agency provides attorney resources to concentrate on CINA cases and the Office of Public Advocacy provides Guardian Ad Litem for these new cases. In addition, DFYS maintains RSA's with the Department of Law and the Court System to address the problem of backlogged adoption court cases. The Division anticipates that the services provided by these agencies will continue to be a significant factor in Subsidized Adoption & Guardianship caseload growth into FY2002.

Key Component Issues for FY2001 – 2002

Continuation of the Balloon Project: The Division's FY2002 budget includes provisions to provide continued funding for the Balloon Project. The Balloon Project provides funding for DFYS and partner legal agencies including the Department of Law, the Public Defender Agency and the Office of Public Advocacy to focus on moving children on the "transition list" that have been in custody the longest from the foster care system and into permanent homes. In FY2000, Balloon Project funding enabled DFYS to hire 14 additional non-permanent social workers to focus on the "transition" list of children that have been in custody the longest. One measure of the Balloon Project's success can be seen in the reduction of the growth of the foster care caseload due to children moving out of the foster care system and into permanent homes. In FY1999 the foster care caseload increased by 16.4% compared to only 5.8% growth in FY2000. Long-term benefits of the Balloon Project will include: moving children that have lingered in the foster care system into permanent homes; savings from reduced foster care caseloads; increased compliance with Federal and State permanency planning laws; prevention of a backlog of cases from happening again; continued collaboration between DFYS and the State legal entities to process child protective services cases on a timely basis; more efficient operations; timely client case handling helps to prevent "problem" cases; and the child protection system works better overall because of the expertise developed during the Balloon Project trial.

Technology and Efficiency Improvements: DFYS initiated a Transcription Services pilot project in January, 2000, in which eight social workers in three DFYS offices participated. Transcription Services is a telephone dictation service which allows social workers to maintain current, accurate case files without increasing the need for internal clerical support. Preliminary review of the pilot project shows that workers using transcription services spend on average 7.5 hours, or one work day per week, less completing paperwork. Transcription Services allows DFYS social workers to spend more time with clients, accurately documents the case actions and activities, and improve communications with system partners. Based on the success of the pilot project, the Department has submitted an increment request to provide Transcription Services to all DFYS front line social workers.

Major Component Accomplishments for FY2000

1) PROVIDED TRAINING TO NEW AND ONGOING WORKERS:

In FY2000, the Family Services Training Academy delivered 73 training sessions, representing 191 days of in-service training to 310 DFYS workers. Approximately 98 new workers completed Training and Orientation for New Employees (TONE) and the Core 103/104 training. Training sessions have occurred at the Anchorage site, and throughout the state in Ketchikan, Juneau, Palmer, Fairbanks, Nome, Kenai, and Bethel. Two courses were distance delivered throughout the state. Curricula were developed in Advanced Related Topic: Legal Issues for CPS Workers, Advanced Related Topic: AOD/FAS/FAE, Advanced Specialized Intensive Sexual Abuse Interviewing Skills Training, Advanced Specialized Foster Care and Adoption, and Advanced Related Topic: Domestic Violence Issues for CPS Workers. The plan for FY01 includes a focus on delivering Advanced Intensive Sexual Abuse Interviewing Skills to nine sites throughout the state, with a target attendance of 80% of all DFYS CPS social workers who have six months or more experience.

2) RECRUITED AND RETAINED PROFESSIONAL LEVEL SOCIAL WORKERS:

DFYS and the University of Alaska have partnered to provide the three primary programs of this component, the Family Services Training Academy, the "return to school" program and the student recruitment program. The "return to school" program gives DFYS staff the opportunity to complete either a Bachelor of Social Work or Master of Social Work at UAA or UAF while on educational leave. The staff member is obligated to return to DFYS to work upon completion of the degree. Five persons have completed their MSW's under this program to date.

The student recruitment program supports individuals who are completing their BSW degree program at UAA or UAF. These individuals are placed in the Anchorage or Fairbanks DFYS offices in special units with a practicum instructor. In an effort to attract new workers to rural areas of the state, the program for FY2001 continues to include an enhanced stipend for any student who will agree to fulfill their work commitment with DFYS anywhere in the state. Three of the nine students have taken advantage of this opportunity for FY2001. Two BSW graduates have gone to work for DFYS under this program to date.

3) CHILDREN THAT HAVE BEEN IN CUSTODY THE LONGEST ARE MOVING FROM THE FOSTER CARE SYSTEM INTO PERMANENT HOMES:

Implementation of the Alaska Adoption Exchange: In FY2000 the Division implemented a third component to Project SUCCEED, the Alaska Adoption Exchange, which promotes earlier identification of children in the system waiting and potential families wanting them. The Alaska Adoption Exchange lists children in custody who are available now or soon to be available for adoption. The Exchange also lists potential adoptive families who are considered for placements of special needs children. The Exchange creates a mechanism for different DFYS workers to know about other children and potential adoptive families in the state. Children in custody are registered on the Exchange as soon as adoption has been identified as the permanent plan. This includes children who are not legally free but have termination of parental rights planned and the division has court approval to register.

Balloon Project: The Balloon Project provides funding for DFYS and partner legal agencies including the Department of Law, the Public Defender Agency and the Office of Public Advocacy to focus on moving children on the "transition list" that have been in custody the longest from the foster care system and into permanent homes. One measure of the Balloon Project's success can be seen in the reduction of the growth of the foster care caseload due to children transitioning to permanent homes. In FY1999 the foster care caseload increased by 16.4%. In FY2000, the foster care growth rate decreased to 5.8%. Long-term benefits of the Balloon Project will include: moving children that have lingered in the foster care system into permanent homes; savings from reduced foster care caseloads; increased compliance with Federal and State permanency planning laws; prevention of a backlog of cases from happening again; continued collaboration between DFYS and the State legal entities to process child protective services cases on a timely basis; more efficient operations; timely client case handling helps to prevent "problem" cases; and the child protection system works better overall because of the expertise developed during the Balloon Project trial.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services, and Institutions.
- AS 47.10 Children in Need of Aid.
- AS 47.17 Child Protection.
- 7 AAC 50,51, and 53
- 7 AAC 50 Family and Youth Services
- 7 AAC 53 Social Services

Titles IV-B and IV-E of the Social Security Act

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance measures under the Family and Youth Services BRU.
(Developed jointly with Legislature in FY2001.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • The performance measure for this component is set up at the BRU level. Please see the performance measures under the Family and Youth Services BRU. 			X		

Front Line Social Workers
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	17,315.1	17,325.0	19,481.5
72000 Travel	230.1	171.5	171.5
73000 Contractual	1,577.6	2,371.0	4,081.9
74000 Supplies	159.9	163.3	163.3
75000 Equipment	39.4	35.0	35.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	19,322.1	20,065.8	23,933.2
Funding Sources:			
1002 Federal Receipts	5,596.2	5,274.4	8,853.8
1003 General Fund Match	2,474.0	2,991.1	3,033.0
1004 General Fund Receipts	5,524.6	6,318.8	10,292.8
1007 Inter-Agency Receipts	1,000.9	744.6	1,605.1
1037 General Fund / Mental Health	145.6	150.6	148.5
1047 Title XX	3,950.0	4,328.6	0.0
1053 Investment Loss Trust Fund	0.0	119.6	0.0
1092 Mental Health Trust Authority Authorized Receipts	0.0	138.1	0.0
1119 Tobacco Settlement	630.8	0.0	0.0
Funding Totals	19,322.1	20,065.8	23,933.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	5,596.2	5,274.4	5,334.4	8,853.8	8,819.7
Interagency Receipts	51015	1,000.9	744.6	744.6	1,605.1	1,594.6
Title 20	51145	3,950.0	4,328.6	3,950.0	0.0	0.0
Investment Loss Trust Fund	51393	0.0	119.6	119.6	0.0	0.0
Mental Health Trust Authority Auth.Rec.	51410	0.0	138.1	138.1	0.0	0.0
Restricted Total		10,547.1	10,605.3	10,286.7	10,458.9	10,414.3
Total Estimated Revenues		10,547.1	10,605.3	10,286.7	10,458.9	10,414.3

Front Line Social Workers

Proposed Changes in Levels of Service for FY2002

Continuation of the Balloon Project: The Department has submitted an FY2002 budget proposal that would provide for continued implementation of the system set in place by the Balloon Project. The continuation of this effort is critical to assure every child in state custody receives timely case plans and services, and exits custody within the statutory time limits. Implementation of this program will serve to further reduce backlogged cases and prevent future backlogs from occurring. The Balloon Project has been extremely successful in reducing the foster care caseload backlog. One measure of the Balloon Project's success can be seen in the reduction of the growth of the foster care caseload. In FY1999 the foster care caseload increased by 16.4%. In FY2000, the growth rate decreased to 5.8%. Long-term benefits of this program will include: savings from reduced foster care caseloads; increased compliance with Federal and State permanency planning laws; prevention of a backlog of cases from happening again; continued collaboration between DFYS and the State legal entities to process child protective services cases on a timely basis; more efficient operations; timely client case handling helps to prevent "problem" cases; and the child protection system works better overall because of the expertise developed during the Balloon Project trial.

Continuation of the Psychiatric Nurse Program: The Department has submitted a \$135.9 fund source change to provide for the continuation of the Psychiatric Nurse program, initiated in FY1999 and ending in FY2001, with three years funding from the Alaska Mental Health Trust Authority. This request will cover 25 percent of the psychiatric nurses and support staff for the Department's four Regional Placement Committees. The establishment of this program has made a significant improvement on determining placement options for children in the Department's custody and has strengthened the existing Regional Placement Committee structure, the current process for determining the placement and treatment of children and youth who present complex psychiatric needs.

Statewide Implementation of Transcription Services: DFYS implemented a Transcription Services pilot project in January, 2000, in which eight social workers in three DFYS offices participated. Transcription Services is a telephone dictation service which allows social workers to maintain current, accurate case files without increasing the need for internal clerical support. Based on the success of the Transcription Services pilot project, the Department has submitted an increment request to provide Transcription Services to all DFYS front line social workers. Preliminary review of the pilot project shows that workers using transcription services spend on average 7.5 hours, or one work day per week, less completing paperwork. Transcription Services allows DFYS social workers to spend more time with clients, accurately documents the case actions and activities, and improves communications with system partners.

Implementation of Risk and Safety Tool: The Division has submitted an increment to finalize development and provide training for the implementation of the Division's new Safety and Risk Assessment tool. This new Risk Assessment Tool will be utilized by DFYS social workers during the screening, investigation of Reports of Harm and on-going case management of DFYS cases. The Division is currently working with a contractor on developing a new Safety and Risk Assessment tool for use by DFYS social workers. In March, 1998, Legislative Audit issued a report based on an audit of DFYS. This audit identified the need to redesign the Risk Assessment Tool, to involve social workers in the project, and to provide adequate training to all field staff on the use of the new tool. This project will produce tools for use during the screening, investigation of Reports of Harm and on-going case management of DFYS cases. For these tools to be effective, all social workers will need to attend training on the development and implementation of the tools. This request is to fund the training and finalization of the new risk assessment tool.

Restore Funding Lost to Federal Title XX SSBG Federal Budget Cuts: The Department's FY2002 budget includes a proposal to switch \$595.5 in Federal Receipts to General Funds. This funding switch will restore a reduction in Federal Title XX Social Services Block Grant due to federal budget cuts. The Division's base budget includes \$4,328.6 million in Federal Title XX funding to pay for the salaries and wages of front line social workers. A reduction of \$595.5 in Title XX funding translates to approximately 15 positions statewide. The number of reports of harm and the number of children coming under the care of the Division of Family and Youth Services has continued to increase for a number of years. The Division has been successful in decreasing the growth of foster care placements from 16.4% in FY1999 to 5.8% in FY2000 and in achieving permanency for a large number of children that had been in foster care for an extended period of time through the Balloon Project.

Any reduction in the number of front line social workers may hamper any progress made during the last three years resulting in increased costs in foster care cost.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	9,580.1	9,603.0	882.7	20,065.8
Adjustments which will continue current level of service:				
-Refinance Child Protection Services-Continue Balloon Project	1,628.4	0.0	0.0	1,628.4
-Continuation of the Psychiatric Nurse Program.	135.9	0.0	-135.9	0.0
-Refinance Child Protection Services-Restore Funding Lost to Federal Title XX	595.5	0.0	0.0	595.5
-Refinance Child Protection Services-From TANF-SSBG to Title XX	947.8	0.0	0.0	947.8
-Year 2 Labor Costs - Net Change from FY2001	-63.4	34.1	8.3	-21.0
Proposed budget decreases:				
-Reduce Federal Receipts Authority due to 4.25% limit on transfer from TANF-SSGB to Title XX	0.0	-347.8	0.0	-347.8
-Title 20 reduction to Recognize Funding Lost Due to Federal Title XX SSBG Federal Budget Cuts	0.0	-595.5	0.0	-595.5
Proposed budget increases:				
-Case note transcription services for social workers	450.0	0.0	0.0	450.0
-Finalize and Implement the Division's new Safety and Risk Assessment Tool	200.0	0.0	0.0	200.0
-Increase Federal matching funds for Balloon Project continuation	0.0	160.0	0.0	160.0
-Continue client services funded through TANF transfer to the SSBG.	0.0	0.0	850.0	850.0
FY2002 Governor	13,474.3	8,853.8	1,605.1	23,933.2

Front Line Social Workers

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	306	324	Annual Salaries	14,054,948
Part-time	3	3	COLA	210,937
Nonpermanent	0	0	Premium Pay	909,419
			Annual Benefits	5,210,824
			<i>Less 4.44% Vacancy Factor</i>	<i>(904,628)</i>
			Lump Sum Premium Pay	0
Totals	309	327	Total Personal Services	19,481,500

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Clerk I	2	0	0	0	2
Accounting Clerk II	1	1	0	0	2
Administrative Assistant	0	1	0	0	1
Administrative Clerk I	2	1	0	1	4
Administrative Clerk II	11	7	2	13	33
Administrative Clerk III	4	1	1	2	8
Administrative Manager I	2	1	1	0	4
Administrative Supervisor	1	0	0	0	1
Childrens Services Manager	2	1	1	0	4
Community Care Lic Spec I	7	4	1	1	13
Community Care Lic Spec II	1	1	0	0	2
Mntl Hlth Clinician III	0	1	1	1	3
Nurse IV (Psych)	2	1	1	0	4
Project Asst	0	0	1	0	1
Social Svcs Assoc I	0	0	0	2	2
Social Svcs Assoc II	0	0	0	2	2
Social Svcs Assoc III	11	3	1	8	23
Social Worker I	3	4	0	10	17
Social Worker II	3	4	1	7	15
Social Worker III	63	18	11	52	144
Social Worker IV	11	6	3	15	35
Social Worker V	2	2	1	2	7
Totals	128	57	26	116	327

BRU/Component: Family and Youth Services Management

(There is only one component in this BRU. To reduce duplicate information, we did not print a separate BRU section.)

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The primary purpose of the Family and Youth Services Management component is to provide comprehensive technical, managerial and financial support to the front line social workers located in four regions in twenty-nine field offices located throughout the state. This component provides funding for the DFYS Central Office which is composed of six primary units including: the DFYS Director's Office; the Family Services Unit; the Administrative Support Unit; the Grants/Contracts/Purchase of Services Unit; the Federal Financing Unit; and the Data Processing Unit.

- The DFYS Director's Office provides oversight and guidance on program development and Division policy implementation.

- The Family Services Unit performs program development and field support in licensing of all non-medical child care facilities (community care licensing), which includes assistance in investigations, revocations, litigation and regulations development. This unit coordinates with the Division of Mental Health & Developmental Disabilities (DMHDD) and the Alaska Mental Health Board in planning for severely emotionally disturbed children in DFYS custody who need mental health services. The Family Service Unit also coordinates with other divisions and departments on significant issues such as citizen review panels and child support enforcement. This unit tracks State and Federal legislation related to these areas, ensures compliance, analyzes State legislation for conflicts with Federal laws and regulations and reviews Federal legislation and regulatory changes for impact on State programs. The Family Service Unit ensures statewide consistency in practice by providing support, including but not limited to: technical assistance to the field, analysis of proposed legislation, preparation of draft position papers and regulations, policies and procedures to carry out the Division's responsibilities. This unit writes and administers grants related to program improvements, coordinates with other divisions and departments on Family Services issues and prepares and publishes the Division's annual report that includes the analysis of data found in the management information/workload accounting system of Prober.

- The Fiscal Section is composed of the Administrative Support, Grants/Contracts, and Federal Financing Units. The Fiscal Section establishes and monitors the current status of all appropriations and revenue sources, monitors the fiscal policies for the Division, and ensures that expenditures are made in accordance with generally accepted accounting principles, the laws of the State of Alaska, the Administrative Manual and the policy and procedures of the Department. The Fiscal Section provides technical procurement assistance to other central office personnel and to the Regional and Field Office personnel. The unit manages the Division's responsibilities for the development of major portions of the Purchased Services BRU including the Division's foster care, subsidized adoption & guardianship program, family preservation, residential child care, and court ordered and reunification efforts components. This unit coordinates the fiscal and budget work of DFYS regions and works closely with the Department's Division of Administrative Services. The Federal Financing Unit was created in FY2000 to develop flexible funding mechanisms to maximize Federal funding resources to enable the Division to improve and increase service delivery to DFYS clients. The Division anticipates that work done by this new unit will enable the Department to increase Federal receipts by several million dollars.

- Data Processing Unit (DPU) maintains the Division's PC-based case management/workload accounting system (PROBER) and the Division's mainframe provider payment system. It is responsible for the planning, implementation, maintenance and administration of approximately 32 local area networks providing technical support to almost 400 end users. This includes the purchase, installation, and maintenance of the hardware and software for all DFYS

offices. Additionally, the unit is also assisting in the development and implementation of the Division's new client management information system referred to as ORCA (Online Resources for the Children of Alaska) which will integrate the case management workload accounting system and the provider payment system on a common platform.

Component Goals and Strategies

1) PROVIDE COMPREHENSIVE PROGRAM, MANAGERIAL AND FINANCIAL SUPPORT TO THE DIVISION'S FRONT LINE SOCIAL WORKERS:

· Utilize the six primary units within the DFYS Family and Youth Services Management component to provide comprehensive technical, managerial and financial support to the front line social workers located in four regions in twenty-nine field offices located throughout the state. The six primary units include: the DFYS Director's Office; the Family Services Unit; the Administrative Support Unit; the Grants/Contracts/Purchase of Services Unit; the Federal Financing Unit; and the Data Processing Unit.

2) DEVELOP FLEXIBLE FUNDING MECHANISMS TO IMPROVE AND EXPAND SERVICE DELIVERY:

· The Federal Financing Unit, created in FY2000, will develop flexible funding mechanisms to maximize Federal funding resources to enable the Division to improve and increase service delivery to DFYS clients. The Division anticipates that work done by this new unit will enable the Department to increase Federal receipts by several million dollars.

3) DEDICATED STAFF RESOURCES FOR SUCCESSFUL DEVELOPMENT AND IMPLEMENTATION OF THE NEW ORCA MANAGEMENT INFORMATION SYSTEM:

· The Division has dedicated three DFYS Central Office positions including a Project Manager a Data Processing Manager, and an Analyst Programmer position to ensure the successful design and implementation of the State's federally mandated client information system referred to as ORCA (On-line Resources for the Children of Alaska). The ORCA system will be a combined client case management information system and provider payment system. ORCA will replace the Division's current case management system and the DFYS Provider Payment System. ORCA will improve the Division's ability to protect children by providing "real time" case management information including status of cases, activities completed, outcomes reached, and services needed for children in custody. The ORCA system will be utilized by over 369 DFYS social workers and support staff located in 29 DFYS Field Offices and four Regional Offices spanning from Ketchikan to Barrow.

Key Component Issues for FY2001 – 2002

The Division of Family & Youth Services provides quality social services directed at child protection and promoting family stability throughout the State of Alaska. In order to continue to provide these services the agency has established and maintains a training academy to better prepare front line social workers. The Division is experiencing less employee turnover and is focusing on longer retention of qualified staff.

The Division is responding to federal and state mandates and legislation to move children into permanent placements and continues to direct its attention on this issue through the Balloon Project and Project SUCCEED. Other federal compliance issues affecting the Division and its operations is the Section 1918 Indian Child Welfare Act, Resumption of Exclusive Jurisdiction by the Native Villages of Barrow and Chevak. Tribal foster care licensing and payments are other related issues on which the Division is focusing.

Reorganization of the DFYS into two separate Divisions and the creation of a fourth region within DFYS has allowed more support and oversight in the field. The Division continues to focus on safety concerns through complete criminal background checks on everyone having contact with the children and increased travel for complaint investigations of licensed providers.

Major Component Accomplishments for FY2000

A. DFYS CENTRAL OFFICE PERSONNEL SUPPORTED THE DIRECTOR AND THE DIVISION'S FOUR REGIONS IN THE DELIVERY OF SERVICES.

- Provided professional reviews and analysis on changes in State and Federal requirements; assisted in implementation of decisions; analyzed and testified on proposed legislation; reviewed and revised necessary regulatory changes; and responded to inter-governmental and public inquiries.
- The Division improved its management information system by connecting many of the field offices electronically to the regional and central office via the wide area network (WAN).
- Created Federal Financing Unit: The Division's operating budget includes over \$23 million in Federal Receipts authority. Primary Federal funding sources include: Title IV-B and IV-E, Title XX Social Services Block Grant, Social Security/SSI, Title XIX Medicaid and TANF funds. The Federal Financing Unit was created in FY2000 to develop flexible funding mechanisms to maximize Federal funding resources to enable the Division to improve and increase service delivery to DFYS clients. The Division anticipates that work done by this new unit will enable the Department to increase Federal receipts by several million dollars.

B. DEVELOPED APSIN DATA EXCHANGE PROJECT TO INCREASE SAFETY OF CHILDREN IN FOSTER CARE:

- DFYS developed the APSIN Data Exchange Project in cooperation with the Department of Public Safety (DPS), to increase the safety of children in foster care. The APSIN Data Exchange Project provides a computer interface between the DFYS client case management system Prober and the Alaska Public Safety Information Network (APSIN). DFYS foster care providers are identified or flagged in APSIN and DFYS is notified in the event a foster care provider has been arrested or has had any other interaction with the criminal justice system. DFYS reviews these notices and determines whether or not continued placement of a child in the providers' home poses a risk to the child.

C. INDEPENDENT LIVING COORDINATOR ESTABLISHED:

- In FY2000 the Division established an Independent Living Coordinator position to implement and oversee DFYS Independent Living Programs. Funding of this position was made possible due to increased Federal funds for the Independent Living Program in the Family Preservation component. This position plays a critical role in overseeing programs which provide support to transition youths in DFYS custody who will be entering young adulthood and leaving Division custody.

Statutory and Regulatory Authority

AS 47.14.100 Powers and duties of department over care of child.

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance measures under the Family and Youth Services BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • The performance measure for this component is set up at the BRU level. Please see the performance measures under the Family and Youth Services BRU. 			X		

Family and Youth Services Management
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	3,237.5	3,465.1	3,454.0
72000 Travel	153.3	37.8	37.8
73000 Contractual	868.0	756.1	756.1
74000 Supplies	86.8	78.8	78.8
75000 Equipment	50.6	32.0	32.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	4,396.2	4,369.8	4,358.7
Funding Sources:			
1002 Federal Receipts	2,285.4	2,321.4	2,459.4
1003 General Fund Match	594.7	588.6	597.7
1004 General Fund Receipts	1,138.0	842.1	846.0
1007 Inter-Agency Receipts	232.2	297.2	296.5
1047 Title XX	145.9	145.9	0.0
1053 Investment Loss Trust Fund	0.0	14.8	0.0
1061 Capital Improvement Project Receipts	0.0	159.8	159.1
Funding Totals	4,396.2	4,369.8	4,358.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
<u>Unrestricted Revenues</u>						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
<u>Restricted Revenues</u>						
Federal Receipts	51010	2,285.4	2,321.4	0.0	2,459.4	2,467.3
Interagency Receipts	51015	232.2	297.2	290.1	296.5	297.2
Title 20	51145	145.9	145.9	145.9	0.0	0.0
Capital Improvement Project Receipts	51200	0.0	159.8	0.0	159.1	156.8
Investment Loss Trust Fund	51393	0.0	14.8	0.0	0.0	0.0
Restricted Total		2,663.5	2,939.1	436.0	2,915.0	2,921.3
Total Estimated Revenues		2,663.5	2,939.1	436.0	2,915.0	2,921.3

Family and Youth Services Management
Proposed Changes in Levels of Service for FY2002

No changes are proposed for FY2002.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,445.5	2,467.3	457.0	4,369.8
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-1.8	-7.9	-1.4	-11.1
FY2002 Governor	1,443.7	2,459.4	455.6	4,358.7

Family and Youth Services Management

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	55	60	Annual Salaries	2,728,338
Part-time	2	0	COLA	43,983
Nonpermanent	0	0	Premium Pay	334
			Annual Benefits	940,995
			<i>Less 6.99% Vacancy Factor</i>	<i>(259,650)</i>
			Lump Sum Premium Pay	0
Totals	57	60	Total Personal Services	3,454,000

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant II	0	0	1	0	1
Accountant III	0	0	3	0	3
Accounting Clerk I	0	0	1	0	1
Accounting Clerk II	0	0	3	0	3
Accounting Tech I	0	0	1	0	1
Accounting Tech II	0	0	1	0	1
Accounting Tech III	0	0	1	0	1
Administrative Clerk II	1	0	3	0	4
Administrative Manager I	0	0	1	0	1
Administrative Manager IV	0	0	1	0	1
Analyst/Programmer II	1	1	2	0	4
Analyst/Programmer III	0	0	1	0	1
Analyst/Programmer IV	0	0	1	0	1
Analyst/Programmer V	0	0	1	0	1
Data Processing Mgr I	0	0	1	0	1
Development Specialist II	0	0	1	0	1
Division Director	0	0	1	0	1
Grants Administrator II	0	0	1	0	1
Medical Assist Admin I	0	0	1	0	1
Micro/Network Spec I	0	0	1	0	1
Micro/Network Spec II	0	0	1	0	1
Micro/Network Tech II	1	0	0	0	1
Project Manager	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Research Analyst IV	0	0	1	0	1
Secretary	0	0	1	0	1
Social Services Prog. Admin.	0	0	2	0	2
Social Svcs Assoc III	0	0	2	0	2
Social Svcs Prog Coord	0	0	9	0	9
Social Svcs Prog Officer	0	0	4	0	4
Social Worker IV	2	0	4	1	7
Totals	5	1	53	1	60

BRU/Component: Family and Youth Services Staff Training

(There is only one component in this BRU. To reduce duplicate information, we did not print a separate BRU section.)

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The Family and Youth Services Staff Training component provides education and training for DFYS social workers, social services associates, licensing workers, supervisors and managers to enhance their ability to recognize abuse and neglect, to increase their skills in working with children and their families to prevent further abuse and neglect, and to strengthen their ability to assess when it is necessary to remove children from potentially harmful situations before physical or mental injury occurs or is repeated.

DFYS and the University of Alaska have partnered to provide the three primary programs of this component, the Family Services Training Academy, the "return to school" program and the student recruitment program. The Division, through the Family Services Training Academy, provides a two-week intensive Training and Orientation of New Employees (TONE) within the first month of hire. The Division also provides at least four days of advanced training for journey level workers, and advanced specialized training for experienced staff. Additionally, the Family Services Training Academy provided a minimum of four days managerial training for managers and supervisory staff. The Family Services Training Academy staff track the training of DFYS social workers and develop curriculum, materials, and technology to deliver current information for DFYS social work staff, as well as coordinate and facilitate presentation of training by other experts in the field of child welfare. The practicum instructors are provided under RSA's with DFYS. They are available on site for the students during their practicum time.

The "return to school" program gives DFYS staff the opportunity to complete either a Bachelor of Social Work or Master of Social Work at UAA or UAF while on educational leave. The staff member is obligated to return to DFYS to work upon completion of the degree. Five persons have completed their MSW's under this program to date.

The student recruitment program supports individuals who are completing their BSW degree program at UAA or UAF. These individuals are placed in the Anchorage or Fairbanks DFYS offices in special units with a practicum instructor. In an effort to attract new workers to rural areas of the state, the program for FY2001 continues to include an enhanced stipend for any student who will agree to fulfill their work commitment with DFYS anywhere in the state. Three of the nine students have taken advantage of this opportunity for FY2001. Two BSW graduates have gone to work for DFYS under this program to date.

Component Goals and Strategies

1) INCREASE WORKERS' KNOWLEDGE AND SKILLS IN CHILD PROTECTION TO ENHANCE THE DIVISION'S ABILITY TO PROTECT ALASKAN CHILDREN WHO ARE AT RISK OF MENTAL OR PHYSICAL ABUSE OR NEGLECT:

- Provide initial and on-going training to new and current DFYS social workers, social services aides, licensing workers, and managers through the Family Services Training Academy.

- The Family Services Training Academy is a joint venture of DFYS and the University of Alaska, Anchorage, School of Social Work, funded through Federal Title IV-E Foster Care program training funds, other federal grant funds, and general funds. The University provides part of the funding package in the form of non-reimbursed indirect costs.

2) INCREASE THE DIVISION'S ABILITY TO RECRUIT AND RETAIN PROFESSIONAL LEVEL SOCIAL WORKERS:

- Provide a stipend program for recruitment of Bachelor of Social Work students at the University of Alaska, Anchorage, and the University of Alaska, Fairbanks. The students spend their senior year practicum assigned to special DFYS field units in the Anchorage and Fairbanks Family Services offices. DFYS pays the student a monthly stipend while they are in school, doing the practicum. After graduation, they are legally obligated to accept employment as DFYS Social Workers. This provides new workers who are already trained and mentored to fill vacancies in the DFYS workforce.
- Provide a "return to school" program for existing staff. The staff member may apply for a Master of Social Work at UAA or a Bachelor of Social Work at UAA or UAF. Once accepted by the University program and attending the program, the Division will pay the employee an educational stipend. Upon completion of the degree, they are legally obligated to return to work within DFYS. This arrangement gives the staff professional enhancement and increased expertise to conduct the best child welfare/child protection practice to serve abused and neglected children and their families.

3) REDUCE EMPLOYEE TURNOVER BY INCREASING WORKER KNOWLEDGE AND OVERALL JOB SATISFACTION:

- The Family Services Training Academy is the centralized training center for DFYS social work staff and provides new workers with three weeks of nationally recognized core training within the first six months of their hire.
- On-going workers receive specialized and advanced training throughout the year, such as Advanced Indian Child Welfare Act training, Advanced Assessment of Risk, and Advanced Intensive Sexual Abuse Interviewing Skills Training.
- Supervisors and managers receive training in areas such as basic supervision, management, and program administration.
- National trainers are brought in to supplement the on-going efforts of Family Services Training Academy training staff, such as the Spaulding Institute for Special Needs Adoptions.
- The Family Services Training Academy tracks the training needs of social work staff, and develops and adapts new curriculum and course materials as needs are identified.

Key Component Issues for FY2001 – 2002

Financial constraints: FY2001-2002, the Division expects training efforts to be constrained due to insufficient funding to support staff travel to attend training, even with the economy of using UAA dorms for Anchorage based training. The dorms are no longer available during the academic year increasing travel costs, and decreasing the amount of training that DFYS workers can attend.

Major Component Accomplishments for FY2000

- 1) FAMILY SERVICES TRAINING ACADEMY continues new worker training and expands advanced trainings offered.

During FY2000, the Family Services Training Academy continued to refine and develop advanced and specialized curricula for child protection workers. The emphasis was on Risk Assessment training (2 ½ days) and Advanced Indian Child Welfare Act (2 days). Three quarters of child protective services workers on the job for over six months received these two trainings in FY2000. Materials acquisition, research and adoption of child welfare curriculum for training Alaskan child protective services social workers continued. The standard for new workers was established within DFYS policy: within the first month of hire, the new worker attends a two week intensive Training and Orientation of New Employees (TONE). TONE includes the best child welfare practices, an introduction to the Alaskan DFYS agency, policy and procedures and system requirements. There is also emphasis on the legal system,

Indian Child Welfare Act, and cultural competence. TONE training is followed within six months by a weeklong training on the effect of child abuse and neglect on normal child development and the effects of separation, grief and loss on the child. DFYS supervisors provide mentoring and follow up in these areas with the new worker.

A national trainer provided Training of Trainer instruction for 17 DFYS, Family Services Training Academy and Law Enforcement trainers for Advanced Intensive Sexual Abuse Interviewing Skills.

2) TRAINING PROVIDED IN FY2000:

In FY2000, the Family Services Training Academy delivered 73 training sessions, representing 191 days of in-service training to 310 DFYS workers. Approximately 98 new workers completed Training and Orientation for New Employees (TONE) and the Core 103/104 training.

Training sessions have occurred at the Anchorage site, and throughout the state in Ketchikan, Juneau, Palmer, Fairbanks, Nome, Kenai, and Bethel. Two courses were distance delivered throughout the state.

Curricula were developed in Advanced Related Topic: Legal Issues for CPS Workers, Advanced Related Topic: AOD/FAS/FAE, Advanced Specialized Intensive Sexual Abuse Interviewing Skills Training, Advanced Specialized Foster Care and Adoption, and Advanced Related Topic: Domestic Violence Issues for CPS Workers. The plan for FY01 includes a focus on delivering Advanced Intensive Sexual Abuse Interviewing Skills to nine sites throughout the state, with a target attendance of 80% of all DFYS CPS social workers who have six months or more experience.

3) COMMUNITY PARTNERS:

The Division's community partners provided invaluable assistance to the Family Services Training Academy and DFYS workers who attended training during FY2000. The Residential Care Providers Association hosted the monthly Training and Orientation of New Employees (TONE) providing valuable information about their place in the continuum of care for abused and neglected children. The Foster Parent Training Center and foster parents met with new workers to explain their roles in assisting children in DFYS custody. The Attorney General's staff, the Public Defender's office, the Guardian Ad Litem's office, the Children's Court in Anchorage, Chugachmiut Indian Corporation, Aleutian Pribilof Islands Corporation, Alaska Cares, the Division of Alcohol and Drug Abuse, Eklutna Child Advocacy Center, Cook Inlet Tribal Council, Department of Education and Early Development, and Bristol Bay Native Association all contributed time and staff to provide information about their organizations and services to the DFYS workers.

Family Services Training Academy and DFYS invited their community partners, such as the tribal Indian Child Welfare Act (ICWA) workers, to participate in the Family Services Training Academy. This has led to a greater understanding of one another's roles and responsibilities in keeping children safe. FSTA also hosted Training of Trainers for all community partners to enhance their skills.

Another aspect of the partnership between DFYS and UAA is the utilization of UAA dormitory space for trainees attending Family Services Training Academy sponsored training. In FY2000, 816 "bed nights" were used. This saved the Division well over \$28,000 in lodging costs, and provided space during the summer tourist season when accommodations are almost impossible to find.

4) RECRUITING AND RETAINING PROFESSIONAL LEVEL SOCIAL WORKERS:

Training plays an important role in reducing turnover by increasing staff competence and morale. The "return to school" and stipend programs continue to attract employees. Four more DFYS employees entered the UAA Master of Social Work program in the fall of 2000. Two are in the Advanced Placement program, and two are in the two-year Master of Social Work program. Nine Bachelor of Social Work students received stipends during FY2000, three in Fairbanks and six in Anchorage. Two have gone to work for DFYS. The partnership has been successful in garnering a mix of financial support. For FY2000, Federal dollars supported approximately 65% of the project, UAA 14%, and DFYS general funds 21%.

Statutory and Regulatory Authority

No statutes and regulations.

Key Performance Measures for FY2002

Measure: The performance measure for this component is set up at the BRU level. Please see the performance measures under the Family and Youth Services BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> The performance measure for this component is set up at the BRU level. Please see the performance measures under the Family and Youth Services BRU. 			X		

Family and Youth Services Staff Training
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	147.1	100.0	100.0
73000 Contractual	826.8	1,053.5	1,053.5
74000 Supplies	56.2	0.0	0.0
75000 Equipment	6.6	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,036.7	1,153.5	1,153.5
Funding Sources:			
1002 Federal Receipts	617.0	717.0	717.0
1003 General Fund Match	0.0	436.5	436.5
1004 General Fund Receipts	419.7	0.0	0.0
Funding Totals	1,036.7	1,153.5	1,153.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	617.0	717.0	717.0	717.0	717.0
Restricted Total		617.0	717.0	717.0	717.0	717.0
Total Estimated Revenues		617.0	717.0	717.0	717.0	717.0

Family and Youth Services Staff Training

Proposed Changes in Levels of Service for FY2002

Even with limited computer resources, the Family Services Training Academy has prepared more training for distance delivery: 103 - The Effects of Abuse and Neglect on Child Development and 364 - Licensing Issues for CPS Licensing Workers. This will save travel time and money. It cannot totally supplant on-site training, but can enhance it and provide a greater variety of topics for the experienced worker. The success of this endeavor will depend on the ability of DFYS to provide better computer support and Internet access to the workers throughout the state.

The use of an enhanced stipend to attract newly graduated Bachelor of Social Work students to work in rural areas is a new initiative for FY2000. This will help to reduce vacancy in the Division's rural field offices where positions are historically more difficult to fill and provide a trained workforce for those offices.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	436.5	717.0	0.0	1,153.5
FY2002 Governor	436.5	717.0	0.0	1,153.5

Child Protection Legal Assistance Budget Request Unit

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BRU Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

BRU Services Provided

The Guardian Ad Litem (GAL) is appointed by the court to act as an independent advocate for a child's best interests in a child protection proceeding. The GAL does not make decisions about a child's future, but makes recommendations to the court to enable the court to make the best possible decision. The GAL's recommendations are designed to ensure that the child is protected, that appropriate services are provided to the child and the family, and that a permanent plan is implemented for the child in a timely manner.

The GAL is responsible to independently gather information about a case, monitor and facilitate progress of the case through the system, insure all relevant information is available to the court, and seek cooperative solutions to the child's situation within the scope of the child's welfare.

The Public Defender Agency (PDA) provides attorney resources to concentrate on new child in need of aid cases (CINA) and to free up Senior Attorneys for termination trials.

BRU Goals and Strategies

- 1) TO INCREASE THE NUMBER OF CHILDREN ADOPTED OR PLACED IN PERMANENT HOMES.
 - Provide attorney resources to concentrate on new child in need of aid (CINA) cases
 - Provide Senior Attorneys for termination of parental rights trials
 - Provide Guardian Ad Litem for new cases

Key BRU Issues for FY2001 – 2002

Federal and State law, including Alaska's HB 375 (Chapter 99, SLA98) mandate shortened time frames for children to be placed into permanent placements. The changes were to encourage and enable the State to emphasize permanency planning and to place children who are in State custody into stable, safe, supportive, and permanent homes without unnecessary delay.

The Child Protection Legal Assistance BRU, created within DFYS in FY1999, strengthens the State's ability to process Child in Need of Aid (CINA) cases through the legal system to increase the number of children legally eligible to be adopted. This new BRU provides funding for RSA's with the Public Defender Agency and the Office of Public Advocacy for processing Child in Need of Aid cases. The Public Defender Agency provides attorney resources to concentrate on CINA cases and the Office of Public Advocacy provides Guardian Ad Litem for these new cases.

DFYS maintains RSA's with the Department of Law and the Court System to address the problem of backlogged adoption court cases. The Division anticipates that the services provided by these agencies will continue to be a significant factor in Subsidized Adoption and Guardianship caseload growth into FY2002.

Major BRU Accomplishments for FY2000

CHILDREN RELEASED FROM DFYS CUSTODY TO PERMANENT PLACEMENTS

A) FY1998 105 children were released to the custodianship of permanent placements

- B) FY1999 112 children were released to the custodianship of permanent placements
- C) FY2000 180 children were released to the custodianship of permanent placements

CHILDREN WHO HAD PARENTAL RIGHTS TERMINATED

- A) FY1998 48 children had parental rights terminated
- B) FY1999 145 children had parental rights terminated
- C) FY2000 351 children had parental rights terminated

Key Performance Measures for FY2002

Measure: This BRU is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU's.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • This BRU is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU's. 		X			

**Child Protection Legal Assistance
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
Office of Public Advocacy	185.0	0.0	0.0	185.0	185.0	0.0	0.0	185.0	185.0	0.0	0.0	185.0
Public Defender Agency	255.0	0.0	0.0	255.0	255.0	0.0	0.0	255.0	255.0	0.0	0.0	255.0
Totals	440.0	0.0	0.0	440.0	440.0	0.0	0.0	440.0	440.0	0.0	0.0	440.0

**Child Protection Legal Assistance
Proposed Changes in Levels of Service for FY2002**

None

**Child Protection Legal Assistance
Summary of BRU Budget Changes by Component
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	440.0	0.0	0.0	440.0
FY2002 Governor	440.0	0.0	0.0	440.0

Component: Office of Public Advocacy

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The Guardian Ad Litem (GAL) is appointed by the court to act as an independent advocate for a child's best interests in a child protection proceeding. The GAL does not make decisions about a child's future, but makes recommendations to the court to enable the court to make the best possible decision. The GAL's recommendations are designed to ensure that the child is protected, that appropriate services are provided to the child and the family, and that a permanent plan is implemented for the child in a timely manner.

The GAL is responsible to independently gather information about a case, monitor and facilitate progress of the case through the system, insure all relevant information is available to the court, and seek cooperative solutions to the child's situation within the scope of the child's welfare.

Component Goals and Strategies

- 1) TO PROVIDE GUARDIAN AD LITEMS FOR NEW CHILD IN NEED OF AID (CINA) CASES IN ORDER TO ASSIST IN INCREASING THE NUMBER OF CHILDREN ADOPTED OR PLACED IN PERMANENT HOMES.

Key Component Issues for FY2001 – 2002

Federal and State law, including Alaska's HB 375 (Chapter 99, SLA98) mandate shortened time frames for children to be placed into permanent placements. The changes were to encourage and enable the State to emphasize permanency planning and to place children who are in State custody into stable, safe, supportive, and permanent homes without unnecessary delay.

The Child Protection Legal Assistance BRU, created within DFYS in FY1999, strengthens the State's ability to process Child in Need of Aid (CINA) cases through the legal system to increase the number of children legally eligible to be adopted. This BRU provides funding for RSA's with the Public Defender Agency and the Office of Public Advocacy for processing Child in Need of Aide cases. The Public Defender Agency provides attorney resources to concentrate on CINA cases and the Office of Public Advocacy provides Guardian Ad Litem for these new cases.

DFYS maintains RSA's with the Department of Law and the Court System to address the problem of backlogged adoption court cases. The Division anticipates that the services provided by these agencies will continue to be a significant factor in Subsidized Adoption and Guardianship caseload growth into FY2002.

Major Component Accomplishments for FY2000

CHILDREN RELEASED FROM DFYS CUSTODY TO PERMANENT PLACEMENTS

- A) FY1998 105 children were released to the custodianship of permanent placements
- B) FY1999 112 children were released to the custodianship of permanent placements
- C) FY2000 180 children were released to the custodianship of permanent placements

CHILDREN WHO HAD PARENTAL RIGHTS TERMINATED

- A) FY1998 48 children had parental rights terminated

- B) FY1999 145 children had parental rights terminated
- C) FY2000 351 children had parental rights terminated

Statutory and Regulatory Authority

- AS 47.10.088 Termination of parental rights and responsibilities.
- AS 47.10.086 Reasonable efforts.
- AS47.10.050 Appointment of guardian ad litem or attorney.
- AS 25.24.310 Representation of minor.
- AS 47.10.080 Judgments and orders.

Key Performance Measures for FY2002

Measure: This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and Front Line Social Workers BRU.

(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • This component is for pass through funds and the performance measures for the Division of Family and Youth Services is set up under the Purchased Services and the Family and Youth Services BRU. 			X		

Office of Public Advocacy
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	185.0	185.0	185.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	185.0	185.0	185.0
Funding Sources:			
1004 General Fund Receipts	185.0	185.0	185.0
Funding Totals	185.0	185.0	185.0

Office of Public Advocacy
Proposed Changes in Levels of Service for FY2002

None

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	185.0	0.0	0.0	185.0
FY2002 Governor	185.0	0.0	0.0	185.0

Component: Public Defender Agency

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

The Public Defender Agency (PDA) provides attorney resources to concentrate on new Child in Need of Aid cases (CINA) and termination of parental rights trials.

Component Goals and Strategies

- 1) ASSIST IN MOVING CHILDREN THROUGH THE LEGAL SYSTEM IN ORDER TO ENSURE PERMANENT PLACEMENT OPPORTUNITIES IN A TIMELY MANNER.
 - Providing attorney resources to concentrate on new Child in Need of Aid (CINA) cases.
 - Providing senior attorneys for termination of parental rights trials.

Key Component Issues for FY2001 – 2002

Federal and State law, including Alaska's HB 375 (Chapter 99, SLA98) mandate shortened time frames for children to be placed into permanent homes. The changes were to encourage and enable the State to emphasize permanency planning and to place children who are in State custody into stable, safe, supportive, and permanent homes without unnecessary delay.

The Child Protection Legal Assistance BRU, created within DFYS in FY1999, strengthens the State's ability to process Child in Need of Aid (CINA) cases through the legal system to increase the number of children legally eligible to be adopted. This new BRU provides funding for RSA's with the Public Defender Agency and the Office of Public Advocacy for processing Child in Need of Aide Cases. The Public Defender Agency provides attorney resources to concentrate on CINA cases and the Office of Public Advocacy provides Guardian Ad Litem for these new cases.

DFYS maintains RSA's with the Department of Law and the Court System to address the problem of backlogged adoption court cases. The Division anticipates that the services provided by these agencies will continue to be a significant factor in Subsidized Adoption and Guardianship caseload growth into FY2002.

Major Component Accomplishments for FY2000

CHILDREN RELEASED FROM DFYS CUSTODY TO PERMANENT PLACEMENTS

- A) FY1998 105 children were released to the custodianship of permanent placements
- B) FY1999 112 children were released to the custodianship of permanent placements
- C) FY2000 180 children were released to the custodianship of permanent placements

CHILDREN WHO HAD PARENTAL RIGHTS TERMINATED

- A) FY1998 48 children had parental rights terminated
- B) FY1999 145 children had parental rights terminated
- C) FY2000 351 children had parental rights terminated

Statutory and Regulatory Authority

- AS 47.10.088 Termination of parental rights and responsibilities.
- AS 47.10.086 Reasonable efforts.

Key Performance Measures for FY2002

Measure: This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • This component is for pass through funds and the performance measures for the Division of Family and Youth Services is set up under the Purchased Services and the Family and Youth Services BRU. 			X		

Public Defender Agency
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	255.0	255.0	255.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	255.0	255.0	255.0
Funding Sources:			
1004 General Fund Receipts	255.0	255.0	255.0
Funding Totals	255.0	255.0	255.0

Public Defender Agency
Proposed Changes in Levels of Service for FY2002

None

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	255.0	0.0	0.0	255.0
FY2002 Governor	255.0	0.0	0.0	255.0

Juvenile Justice Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

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BRU Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

BRU Services Provided

The Division operates youth facilities in Anchorage (McLaughlin Youth Center), the Mat-Su Valley, Fairbanks, Juneau (Johnson Youth Center), Bethel, and Nome. Expansion in Ketchikan communities will occur in 2001. Probation offices are located in the same communities plus Sitka, Ketchikan, Petersburg, Kenai, Kodiak, Palmer, Dillingham, Homer, Valdez, Barrow, Delta Junction and Kotzebue.

BRU Goals and Strategies

The following are the goals for the Division of Juvenile Justice.

To provide serious, violent, and chronic juvenile offenders with secure sanctions to hold them accountable for their offenses, protect the public, and provide a structured treatment environment that is consistent with nationally recognized standards.

To provide detained youthful offenders with a safe, secure and intensively supervised living environment which is consistent with nationally recognized standards and which protects the public, provides for the safety of detained youth, and ensures appearance at scheduled court hearings.

To protect the community from delinquency, to hold offenders accountable to repair the harm committed against victims and communities, and to equip juvenile offenders with the competencies necessary to live productively and responsibly in the community.

To provide a continuum of community based services designed to impose effective interventions in response to juvenile crime and to prevent delinquency through a coordinated effort with schools, law enforcement, locally based accountability programs, and other juvenile justice partners in support of the mission of the Division.

To ensure that the Division meets the needs of juvenile offenders, victims and communities through the provision of a range of community-based programs serving both urban and rural Alaska. To promote offender accountability by strengthening the juvenile justice system through partnering with other juvenile justice agencies. To promote quality programs that effectively meet the stated need.

To increase community based programs and services to provide a pre and post facility continuum that reduces the need for secure detention and institutional treatment beds.

Key BRU Issues for FY2001 – 2002

The significant lack of juvenile probation resources in rural locations and the inability of the Division of Juvenile Justice to provide appropriate responses to juvenile crimes and to ensure offender accountability, particularly given the increase in the rate and severity of offenses in some rural sites.

The implementation of a Juvenile Offender Management Information System (JOMIS) to support both field probation and juvenile detention and treatment facilities. The system will provide law enforcement agencies, community schools

and DFYS with instant access to juvenile arrest and probation status information in support of DJJ's restorative justice mission.

Additional key issues are included in the component level narrative.

Major BRU Accomplishments for FY2000

The major accomplishments for the Division of Juvenile Justice in FY2000 were:

- 1) The opening of a new 15 bed detention unit in the Mat-Su Valley in the Fall of 2000.
- 2) The completion of construction of a 30 bed detention expansion and relocation of the Southcentral Juvenile Probation field staff at McLaughlin Youth Center in the Fall of 2000.
- 3) The completion of the design and receipt of construction funds for the Ketchikan Youth Facility.
- 4) The adoption of regulations related to the delivery of delinquency intervention and prevention services by the new Division of Juvenile Justice.
- 5) The development of probation officer restorative justice performance competencies.
- 6) Successful placement of university interns in probation offices in Nome, Bethel, and Sitka.

Additional information is included in the component level narrative.

Key Performance Measures for FY2002

Measure: The Percent of Ordered Restitution and Community Work Service That is Paid or Performed by the Juvenile Offender.

(Revised from Legislature's FY2001 version.)

Current Status:

Development of the community work service component is on track. The DJJ hopes to have FY2000 data by mid February 2001.

Benchmark:

For the restitution measure the benchmark is 79%.

For the community work service measure the benchmark is 83%.

Background and Strategies:

This performance measure consists of two aspects that provide a gauge of DJJ's effectiveness with assisting delinquent youth in being accountable to his or her victim and community for their delinquent behavior, as well as the youth providing restoration to his or her victim and community for their delinquent behavior.

Definition: This measure consists of:

- The percentage of restitution paid for cases where there was a restitution order (either by the court or the Probation Officer). This measure shall be determined at case closure. Case closures occur when a court order has been given to close a case, a court order has expired, or informal adjustment has been made by the Probation Officer.
- The percentage of community work service performed for cases where there was a community work service order (either by the court or the Probation Officer). This measure shall be determined at case closure. Case closures occur when a court order has been given to close a case, a court order has expired, or informal adjustment has been made by the Probation Officer.

Measure: The Percent of Offenders Released from Long Term Treatment Who Either Improved Their Grade Point Average, or Obtained Additional Educational Credits While in Long Term Treatment.

(Revised from Legislature's FY2001 version.)

Current Status:

Development of the educational credits measure continues and is on track. The DJJ hopes to have benchmark data as well as current data by mid February 2001.

Benchmark:

Under development.

Measure: Number of Escapes From Juvenile Institutions.

(Revised from Legislature's FY2001 version.)

Current Status:

Development of this measure is on track. The DJJ hopes to have FY2000 data by mid February 2001.

Benchmark:

The benchmark for this measure is the average number of escapes that occurred during FY1995 through FY1997: 9.

Measure: The percentage of residents leaving institutions receiving aftercare services will increase from the FY98 baseline of 47%.

(Developed jointly with Legislature in FY2001.)

Current Status:

Development of this measure is on track. The DJJ hopes to have FY2000 data by mid February 2001.

Benchmark:

The benchmark for this measure is 47%.

Measure: Percentage of Juvenile Offenders that Re-Offend.

(Revised from Legislature's FY2001 version.)

Current Status:

Development of the probation services component is on track. The DJJ hopes to have benchmark data as well as current data by March 2001.

Refinement of the facilities measure continues. The DJJ hopes to have benchmark data as well as current data by mid February 2001.

Benchmark:

Under development.

Measure: The percent of juvenile intakes completed in 30 days or less will increase over time.

(Revised from Legislature's FY2001 version.)

Current Status:

Development of this measure is on track. The DJJ hopes to have FY2000 data by mid February 2001.

Benchmark:

The benchmark for this measure is 69.9%

Measure: The percent of referrals receiving an active response will improve over time.
(Revised from Legislature's FY2001 version.)

Current Status:

Development of this measure is on track. The DJJ hopes to have FY2000 data by mid February 2001.

Benchmark:

The benchmark for this measure is 92%.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> The percentage of restitution paid will be at least 82% of the amount ordered. The number of community work service hours will be 92% of the amount ordered. 90% of youth in the long-term treatment will receive an educational assessment which meets all Alaska State Educational Standards and results in an educational plan. 90% of this cohort will attain an improved GPA and/or obtain additional educational credits during their stay at the facility. The number of escapes from institutions will be maintained or reduced as measured against the historical pattern averaged over the last three year period of nine per year. The percentage of residents leaving institutions receiving aftercare services will increase from the FY98 baseline of 47%. Re-offense rates for probation field services and juvenile facilities will be maintained or decreased from the established baseline. The percentage of juvenile intakes completed in 30 days or less will improve from the FY98 baseline of 55% in order to ensure swift action and promote accountability. The percentage of referrals receiving an active response, which includes a parent/juvenile conference, referral for service or informal supervision, will improve from the FY98 baseline of 92%. 			X		
			X		
			X		
			X		
			X		
		X			
		X			

Juvenile Justice
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures	None.											
Non-Formula Expenditures												
McLaughlin Youth Center	9,835.4	39.9	357.3	10,232.6	11,503.7	10.0	279.2	11,792.9	12,063.4	10.0	400.0	12,473.4
Fairbanks Youth Facility	2,819.1	0.0	108.9	2,928.0	2,750.2	45.8	69.0	2,865.0	2,752.3	46.2	76.8	2,875.3
Nome Youth Facility	549.7	0.0	0.0	549.7	687.7	0.0	0.0	687.7	684.9	0.0	0.0	684.9
Johnson Youth Center	2,267.6	0.0	65.1	2,332.7	2,466.5	5.1	24.0	2,495.6	2,462.5	5.1	76.6	2,544.2
Bethel Youth Facility	2,022.2	0.0	44.0	2,066.2	2,044.3	0.0	37.4	2,081.7	2,121.7	0.0	48.3	2,170.0
Mat-Su Youth Facility	14.8	0.0	0.0	14.8	1,226.7	0.0	0.0	1,226.7	1,410.3	0.0	15.0	1,425.3
Ketchikan Regional Yth Facility	0.0	0.0	0.0	0.0	95.6	0.0	0.0	95.6	1,301.5	0.0	0.0	1,301.5
Delinquency Prevention	0.0	0.0	0.0	0.0	89.0	3,203.0	0.0	3,292.0	89.0	3,203.0	0.0	3,292.0
Probation Services	6,685.0	271.2	368.1	7,324.3	6,994.5	519.0	282.8	7,796.3	7,673.3	518.5	283.0	8,474.8
Totals	24,193.8	311.1	943.4	25,448.3	27,858.2	3,782.9	692.4	32,333.5	30,558.9	3,782.8	899.7	35,241.4

Juvenile Justice

Proposed Changes in Levels of Service for FY2002

A new 10-bed facility is being constructed in Ketchikan. The regional 10 bed combined facility will provide for detention of youth who are awaiting court hearings or who are court ordered into this facility for a brief period of time, up to 30 days (4 beds with lock-down capabilities) and residential diagnostic and treatment services for emotionally disturbed youth (4 beds staff secure) and protective custody/observation beds (2 beds). Construction will be completed in the Spring of 2001 and the facility will be on-line in FY2002.

Probation services will be increasingly community centered through collaborative partnerships with a variety of locally based accountability programs.

Victim services will be increased through the creation of victim impact, mediation, and service coordination efforts.

Juvenile Justice

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	27,858.2	3,782.9	692.4	32,333.5
Adjustments which will continue current level of service:				
-McLaughlin Youth Center	3.4	0.0	0.0	3.4
-Fairbanks Youth Facility	2.1	0.4	0.0	2.5
-Nome Youth Facility	-2.8	0.0	0.0	-2.8
-Johnson Youth Center	-4.0	0.0	0.0	-4.0
-Bethel Youth Facility	-7.9	0.0	0.0	-7.9
-Mat-Su Youth Facility	-5.0	0.0	0.0	-5.0
-Ketchikan Regional Yth Facility	14.2	0.0	0.0	14.2
-Probation Services	20.8	-0.5	0.2	20.5
Proposed budget increases:				
-McLaughlin Youth Center	556.3	0.0	120.8	677.1
-Fairbanks Youth Facility	0.0	0.0	7.8	7.8
-Johnson Youth Center	0.0	0.0	52.6	52.6
-Bethel Youth Facility	85.3	0.0	10.9	96.2
-Mat-Su Youth Facility	188.6	0.0	15.0	203.6
-Ketchikan Regional Yth Facility	1,191.7	0.0	0.0	1,191.7
-Probation Services	658.0	0.0	0.0	658.0
FY2002 Governor	30,558.9	3,782.8	899.7	35,241.4

Component: McLaughlin Youth Center

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

McLaughlin Youth Center (MYC) provides confinement and rehabilitation of juvenile offenders who are in need of secure custody as determined by the court. Services are directed toward achieving short term community protection (Detention and Training School) and long-term rehabilitation (Training School). The Detention Units serve the Third Judicial District which includes the Municipality of Anchorage, Matanuska-Susitna Borough, Kenai Peninsula, Cordova, Valdez, Kodiak, Dillingham and Aleutian/Pribilof Islands. The Training School (four Cottage Programs, Classification Unit and Closed Treatment Unit) provide long-term residential services for institutionalized delinquent adolescents, primarily from the Third Judicial District. Currently the facility has 200 beds (85 detention and 115 training school programs).

Detention Programs (85 beds)

MYC provides secure confinement for male and female youth who have been arrested on criminal charges or probation violations, or are in need of protective custody. The Detention units are primarily responsible for detaining youth from the Third Judicial District until their cases are investigated and a disposition can be made by the court. Adolescents from other areas of the state may be held to complete diagnostic evaluations that are unavailable in their regions. In addition to maintaining a safe environment and providing secure escorts to and from court, Youth Counselors accomplish short-term goals through individual, group and family counseling. A comprehensive points system is designed to modify unacceptable behavior. Detained youth also receive academic evaluation as well as school and recreational programs. Contract psychiatrists and psychologists provide court ordered evaluations and guidance for the Detention staff in dealing with difficult youth. During FY 00, 1423 youth were admitted to MYC Detention units.

The Alternative to Detention Program provides intensive community supervision for youth who have been detained and have court approval to be released pending court disposition. Services provided by an institutional probation officer include electronic monitoring, home visits, substance abuse testing, community service and after school activities. This program is currently being expanded to provide a broader range of community supervision and competency development.

Training School Programs (115 beds)

Classification Unit - A 25 bed program for youth who are entering long term programs. Residents receive mental health screening, treatment needs assessment and development of the Initial Treatment Plan. This unit also provides secure confinement for youth who commit serious rule violations in the Cottage programs.

Cottage One (Juvenile Sex Offender Program) - A 20 bed program that focuses on thinking errors, assault cycles and relapse prevention for male sex offenders.

Cottage Three (Individualized Differential Treatment) - A 20 bed program that provides counseling (individual, group and family), skill building training and behavioral intervention for a diverse population of male offenders with a variety of mental health and behavioral disorders.

Cottage Four (Positive Peer Culture) - A 20 bed unit for males who will benefit from group oriented treatment intervention with a strong emphasis on helping others and community service.

Cottage Five (Girls Program) - A 10 bed unit within the 25 bed girls cottage that provides long term treatment program for girls. Emphasis is placed on gender specific issues for female juvenile offenders.

Closed Treatment Unit - A 20 bed maximum secure unit that provides long term treatment for male and female juveniles who are dangerous to themselves or others.

Intensive Community Supervision - Case managers (Youth Counselors assigned to living units) and a Recreational Therapist provide transitional and aftercare services to an average of 22 youth who are released to the Anchorage and Mat-Su communities. Services are provided to each youth released in the Anchorage area for an average of 4.5 months after their release from the training school program.

School Programs

All MYC residents are provided an education program which is funded through the Department of Education and administered by the Anchorage School District. Classroom space is provided by the facility. Since nearly two-thirds of the youth are two or more years behind academically, remedial education is emphasized.

Services in Support of Training School and Detention Programs

Various supporting functions necessary for the operation of the 24-hour institution include:

Food Service Operations - Youth in residence at the facility who are in job training work programs and kitchen staff serve more than 600 meals and 200 snacks daily.

Supply - Facility support of eight living units, Mat-Su Youth Facility and Southcentral Probation entails procurement and professional services contracting, property and supply control, and custodial services.

Plant Operations - Maintenance staff and youth in work programs maintain the 18-acre campus grounds; and staff maintain and repair more than 120,000 square feet of structural space (11 buildings, the oldest built 33 years ago) that houses all MYC operations and the MYC High School, the Anchorage District Office of Juvenile Probation, and the Anchorage Office of the Division of Juvenile Justice. Maintenance staff are also responsible for the Mat-Su Youth Facility.

Medical Services - Medical, dental, and nursing services meet the essential medical needs, physical assessments, and emergency dental treatment for up to 1,500 youth admitted annually. Services are provided by contract physicians services and MYC nursing staff.

Other Support Functions - Administrative and other functions in support of MYC programs include accounting for resident's funds (i.e., PFD's, restitution, and work program earnings) and state budget expenditures, orienting and training staff to deal with youth and respond in emergency situations, processing personnel actions and payroll, and assuring compliance with American Correction Association standards of accreditation.

Component Goals and Strategies

Assure that accused juvenile offenders remain in secure custody pending court disposition.

Protect the community by providing a safe and secure environment to juvenile offenders that encourages accountability to victims and the community while providing education and skill development.

Reduce the need for additional detention beds by providing alternative community supervision programs.

Facilitate appropriate involvement of families with detained juvenile offenders.

Provide intensive community supervision to facilitate successful transition back to the community.

Key Component Issues for FY2001 – 2002

Construction of 30 additional secure beds was completed in FY 00 and funding was provided in FY 01 to staff the expanded facility. This funding will allow the Division of Juvenile Justice to address several programmatic and operational issues challenging the McLaughlin Youth Center.

Overcrowding - Completion of the 30 bed expansion has alleviated overcrowding within the facility. Alternative detention programs which include community supervision are being developed to reduce the need for future expansion. Secure detention will continue to be used for youth who represent the greatest danger to the community. A day reporting program and a continuum of intensive community supervision will be provided for those youth who do not require secure confinement.

Programming for Girls - Historically, disproportionately fewer services have been provided to females than to males. The population of girls has consistently exceeded the bed capacity for girls by 20% to 50% for more than five years. Unlike the boys at MYC, girls were not afforded long-term treatment separate and distinct from the transient detention population. Five secure beds have been added to the girls cottage and additional staff have been assigned to supervise the long-term treatment component of this living unit. The Probation section has assigned one Probation Officer to an all-female caseload. This person will work closely with the girls unit to provide a better continuum of services between the community and the facility with a goal of reducing the number of girls who require long term institutional treatment.

Facility Maintenance - An aging facility, with an 18-acre campus and 11 buildings, is increasingly difficult to maintain with its core maintenance staff.

Mental Health Needs of Youth - All MYC residents require mental health assessment and many require specific treatment services. One third of MYC residents are currently prescribed psychotropic medications and 80% of that group is prescribed more than one medication. The increasing obligation to treat mental health needs requires staff who understand and can deal with these issues. The facility has developed a database which will quantify mental health issues of residents entering long term treatment. The information will be used to develop programs which meet the needs of this population.

Reintegrate Youth to Communities and Families - The chances for successful reintegration with families and communities can be increased with pre- and post- release services to youth. Vital services to prevent youth from reoffending include pre-release planning, linking with community resources, crisis counseling for youth and families, education, and post-release supervision.

Restoring Victims and Communities - Supervised work programs and coordination of volunteer activities allow offenders an opportunity to restore their victims and communities. An offender's accountability to his/her community, and involvement with the community, enhances awareness and develops skills that contribute to prevent future reoffenses. Community service projects have become an integral part of the eight living units. Future program development will focus on identifying and providing services to individual victims.

Major Component Accomplishments for FY2000

Successfully passed American Correctional Association accreditation audit for Detention and Training School programs.

Completed construction of 30 additional secure beds.

Implemented a mental health screening protocol for juveniles entering long term treatment. Developed a data collection system to identify the mental health needs of this population.

Evaluated the current MYC treatment programs and identified training needs for staff to more effectively work with residents who have mental illnesses. Based on this evaluation, training was provided for MYC staff on mental health topics.

Developed innovative detention programs for youth with severe mental health and developmental disabilities to integrate them into the community and avoid long term incarceration.

Provided 5,700 hours of documented community service by the long term treatment units. Many additional hours were provided by the detention units.

Collaborated with Big Brothers/Big Sisters to develop a mentor coordinator position, improve recruitment and training of mentors.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services and Institutions
- AS 47.10 Children in Need in Aid
- AS 47.12 Delinquent Minors
- AS 47.14 Juvenile Institutions
- AS 47.15 Uniform Interstate Compact on Juveniles
- AS 47.17 Child Protection
- AS 47.18 Programs and Services Related to Adolescents
- AS 47.21 Adventure Based Education
- AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
- 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
- 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Performance Measures are shown at the BRU level - Juvenile Justice. 			X		

McLaughlin Youth Center
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	8,388.5	9,835.1	10,215.8
72000 Travel	9.3	3.2	5.2
73000 Contractual	740.6	887.5	1,046.5
74000 Supplies	685.2	749.7	870.5
75000 Equipment	28.8	3.0	21.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	380.2	314.4	314.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	10,232.6	11,792.9	12,473.4
Funding Sources:			
1002 Federal Receipts	39.9	10.0	10.0
1004 General Fund Receipts	9,835.4	11,277.7	11,397.9
1007 Inter-Agency Receipts	357.3	279.2	400.0
1037 General Fund / Mental Health	0.0	159.5	665.5
1053 Investment Loss Trust Fund	0.0	66.5	0.0
Funding Totals	10,232.6	11,792.9	12,473.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	39.9	10.0	10.0	10.0	10.0
Interagency Receipts	51015	357.3	279.2	400.0	400.0	400.0
Restricted Total		397.2	289.2	410.0	410.0	410.0
Total Estimated Revenues		397.2	289.2	410.0	410.0	410.0

McLaughlin Youth Center

Proposed Changes in Levels of Service for FY2002

Expand alternative to detention program to include additional levels of community supervision, thereby reducing the need for additional secure detention facilities.

Maintain the current level of community service activities and expand the level of service offered to victims of youth who are incarcerated.

Identify mental health trends and modify programs to meet the needs of youth who require these services.

Summary of Component Budget Changes From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	11,503.7	10.0	279.2	11,792.9
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	3.4	0.0	0.0	3.4
Proposed budget increases:				
-Alternative to Institutionalization	213.5	0.0	0.0	213.5
-Annualize funding for the McLaughlin Youth Center	50.3	0.0	0.0	50.3
-Incr I/A for the School Lunch Program at MYC	0.0	0.0	120.8	120.8
-Youth Offender/Adolescent Treatment Bundle	292.5	0.0	0.0	292.5
FY2002 Governor	12,063.4	10.0	400.0	12,473.4

McLaughlin Youth Center
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	160	166	Annual Salaries	6,817,665
Part-time	3	3	COLA	107,510
Nonpermanent	0	0	Premium Pay	651,137
			Annual Benefits	2,639,509
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	163	169	Total Personal Services	10,215,821

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Clerk II	1	0	0	0	1
Accounting Tech I	1	0	0	0	1
Administrative Assistant	1	0	0	0	1
Administrative Clerk I	1	0	0	0	1
Administrative Clerk II	4	0	0	0	4
Administrative Clerk III	2	0	0	0	2
Administrative Manager III	1	0	0	0	1
Assoc Coordinator	1	0	0	0	1
Enviro Services Journey I	1	0	0	0	1
Enviro Services Journey II	1	0	0	0	1
Food Service Journey	4	0	0	0	4
Food Service Lead	3	0	0	0	3
Food Service Supervisor	1	0	0	0	1
Juvenile Prob Officer II	6	0	0	0	6
Maint Gen Journey	3	0	0	0	3
Maint Spec Bfc Jrny II/Lead	1	0	0	0	1
Maintenance Worker II	1	0	0	0	1
Nurse II	2	0	0	0	2
Nurse III	1	0	0	0	1
Nurse III (Psych)	1	0	0	0	1
Procurement Spec II	1	0	0	0	1
Recreational Therapist II	1	0	0	0	1
Storekeeper I	1	0	0	0	1
Supply Technician I	1	0	0	0	1
Unit Leader	9	0	0	0	9
Youth Center Supt I	2	0	0	0	2
Youth Center Supt II	1	0	0	0	1
Youth Counselor I	7	0	0	0	7
Youth Counselor II	82	0	0	0	82
Youth Counselor III	27	0	0	0	27
Totals	169	0	0	0	169

Component: Fairbanks Youth Facility

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

The Fairbanks Youth Facility consists of a twenty bed Detention Unit and a twenty bed Treatment Unit. The Detention Unit houses and offers services to alleged and adjudicated offenders who are either involved in the court process or awaiting other placement. The Treatment Unit houses and makes available rehabilitative services to adjudicated offenders who have been institutionalized by the Court. Since November, 1986 both components have been accredited by the American Correctional Association. The Fairbanks Youth Facility is the second largest of Alaska juvenile correctional facilities and serves the Northern Region of Alaska the largest geographical area in the State.

Detention Services: FYF's Detention Unit, with a design capacity of 20 residents, had an average population of 22.95 juveniles during FY00 (115% of capacity). The Detention Unit is staffed with a Unit Leader and fourteen Youth Counselor I/II/III positions. Unit staff are responsible for scheduling and monitoring all resident activity, ensuring compliance with court orders, maintaining the secure custody of residents and a safe environment for residents and staff, and providing programs and activities designed to promote social and moral growth and acceptance of responsibility by the residents. All Detention residents attend year-round schooling as well as participating in the behavior management system, recreational opportunities, and other programs both of a general nature and specific to their individual needs. Additional professional services including medical, dental, psychiatric/psychological, and substance abuse assessment are available on a referral basis.

Treatment/Training School Services: FYF's 20 bed Treatment Unit was created by the consolidation of an 8 bed and a 12 bed unit in 1991. Prior to this time the two units operated separately, providing different treatment services to two distinct offender populations. Without the ability to internally classify youth, the Treatment Unit program and staff must provide services to an extremely diverse offender population presenting a multitude of both developmental issues and clinical services demands. During FY00 the average daily population was 20.02 residents (100.1% of capacity). The Treatment Unit is staffed with a Unit Leader and fifteen Youth Counselor I/II/III positions. Treatment Unit staff serve functions similar to those of Detention staff, with additional responsibility for functioning as treatment team members for an assigned caseload of residents, monitoring and reporting on resident progress in established treatment goals, more in-depth and long-term treatment groups, assignments and activities, and working with residents, families and communities to prepare the resident for release. Unit staff have begun to undertake an aftercare services program, and have been enhancing restorative justice program components such as community work service and an increased awareness of victims' rights and concerns.

Administrative and Support Services: The Administrative Unit at the Fairbanks Youth Facility consists of a Superintendent II, Administrative Manager II, and Administrative Assistant. Support services staff include an Administrative Clerk, a full-time and part-time Nurse and a Maintenance Specialist. The Superintendent II is responsible for all aspects of the Fairbanks Youth Facility operation and management, as well as the general supervision of both the Nome Youth Facility and Bethel Youth Facility. The Administrative Manager II and Administrative Assistant are responsible for all administrative/fiscal activities of the three juvenile institutions and the Northern Region Juvenile Probation Section, which includes the Fairbanks office, and offices in Barrow, Kotzebue, Nome and Bethel. These responsibilities include providing budget management, processing payroll and personnel actions, and the accounts payable function. The Administrative Clerk III performs functions related to file and records management, processing reports and correspondence, maintenance of facility training records and accreditation files, and other related functions. The Maintenance Worker maintains all aspects of the physical plant including preventative maintenance and repair, and oversees any work done in the facility by outside vendors. The facility

nurses conduct health screening of all residents, conduct sick call, oversee all medical services for facility residents, and coordinate care with Fief's Health Authority and other health care professionals.

Component Goals and Strategies

To protect the community from delinquency, to impose accountability for offenses committed, and to equip juvenile offenders with the competencies necessary to live productively and responsibly in the community.

To provide detained youthful offenders with a safe, secure and intensively supervised living environment which is consistent with nationally recognized standards and which protects the public, provides for the safety of youth, and ensures appearance at scheduled court hearings.

To provide the serious, violent, and chronic juvenile offenders with secure sanctions to hold them accountable for their offenses, protect the public, and provide a structured treatment environment that is consistent with nationally recognized standards.

To work in collaboration with community agencies to develop a continuum of services to allow juvenile offenders to remain near family and community.

Key Component Issues for FY2001 – 2002

The significant increase in mental health residents in Detention is causing a strain on all aspects of facility operation, including staff and resident safety. Increases in a resident population with special needs necessitate higher staffing levels to adequately supervise, treat, provide court and medical escorts, etc. The facility budget is also strained due to increased costs in personal services, contractual services, and commodities, as well as needing to work one on one with a difficult to manage population.

There is inadequate indoor recreation space, classroom space, and support service space (nursing and maintenance) for a resident population which has increased over 250 % since construction of the facility. Of particular concern is the lack of recreational space to allow youth to burn off energy. This lack of space greatly increases the incidents at the facility due to the inability of youth to relieve their tension on a crowded unit for 7-8 months at a time.

The consolidation of the 12 bed and eight bed unit in 1991 created a poorly configured twenty bed Treatment Unit lacking in adequate dayroom space. The L-shaped unit is inadequately lighted, difficult to supervise, and does not have a private individual/family counseling area.

Facility maintenance is also an increasing concern due to both normal wear and tear and the destructiveness of the resident population. As the facility enters its twentieth year of operation, the need for repairs and renovations is increasing.

Facility staff are faced with increasing expectations in the areas of community involvement and responsiveness, resident aftercare services, and enhancing restorative aspects of resident programs. This places a great strain on staff due to minimum staffing levels needed in the facility coupled with supervision needs in the community.

Major Component Accomplishments for FY2000

Fairbanks Youth Facility retained accreditation status with the American Correctional Association by achieving 100% compliance with mandatory standards, 94.8% compliance with non-mandatory standards on the Detention Unit, and 97.1% compliance with non-mandatory standards on the Treatment Unit.

The Fairbanks Youth Facility made considerable progress in expanding and enhancing the volunteer and internship program. Volunteers and interns have provided residents with religious services, recreational opportunities, group counseling, and increased opportunities to participate in community activities including community work service projects. Residents are required to log 40 hours of community work service as part of their treatment plan. One notable community work service project of the Fairbanks Youth Facility is our partnership with the Fairbanks

Community Food Bank. During the summer of 2000 the Treatment Unit residents and staff provided the Food Bank with 267 pounds of vegetables and herbs.

The Fairbanks Youth Facility also began the development and implementation of a community reintegration and aftercare program to assist residents in making a successful transition from the institution. Community Connections, a religious based volunteer group, has partnered with the Fairbanks Youth Facility and has been instrumental in assisting youth with job interview skills and job placement. Fairbanks Youth Facility residents have participated in victim-offender mediation, victim impact classes, circles of care, and traditional counseling measures.

The Fairbanks Youth Facility joined the Fairbanks Chamber of Commerce in an effort to interface with the business community, and to educate that community on aspects of the juvenile justice system that are unfamiliar to them.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services and Institutions
- AS 47.10 Children in Need in Aid
- AS 47.12 Delinquent Minors
- AS 47.14 Juvenile Institutions
- AS 47.15 Uniform Interstate Compact on Juveniles
- AS 47.17 Child Protection
- AS 47.18 Programs and Services Related to Adolescents
- AS 47.21 Adventure Based Education
- AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
- 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
- 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Performance Measures are shown at the BRU level - Juvenile Justice. 			X		

Fairbanks Youth Facility
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	2,285.4	2,222.1	2,252.7
72000 Travel	6.6	10.5	10.5
73000 Contractual	248.1	247.0	247.0
74000 Supplies	301.7	315.4	295.1
75000 Equipment	2.2	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	84.0	70.0	70.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,928.0	2,865.0	2,875.3
Funding Sources:			
1002 Federal Receipts	0.0	45.8	46.2
1004 General Fund Receipts	2,740.9	2,656.3	2,672.4
1007 Inter-Agency Receipts	108.9	69.0	76.8
1037 General Fund / Mental Health	78.2	80.2	79.9
1053 Investment Loss Trust Fund	0.0	13.7	0.0
Funding Totals	2,928.0	2,865.0	2,875.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	45.8	50.0	46.2	50.0
Interagency Receipts	51015	108.9	69.0	80.0	76.8	80.0
Restricted Total		108.9	114.8	130.0	123.0	130.0
Total Estimated Revenues		108.9	114.8	130.0	123.0	130.0

Fairbanks Youth Facility
Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,750.2	45.8	69.0	2,865.0
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	2.1	0.4	0.0	2.5
Proposed budget increases:				
-Incr I/A for the School Lunch Program at FYF	0.0	0.0	7.8	7.8
FY2002 Governor	2,752.3	46.2	76.8	2,875.3

Fairbanks Youth Facility
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	36	37	Annual Salaries	1,626,799
Part-time	2	1	COLA	22,329
Nonpermanent	0	0	Premium Pay	19,558
			Annual Benefits	583,973
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	38	38	Total Personal Services	2,252,659

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	1	0	0	1
Administrative Clerk III	0	1	0	0	1
Administrative Manager II	0	1	0	0	1
Maint Spec Bfc Jrny II/Lead	0	1	0	0	1
Mntl Hlth Clinician I	0	1	0	0	1
Nurse II	0	2	0	0	2
Unit Leader	0	2	0	0	2
Youth Center Supt II	0	1	0	0	1
Youth Counselor I	0	3	0	0	3
Youth Counselor II	0	20	0	0	20
Youth Counselor III	0	5	0	0	5
Totals	0	38	0	0	38

Component: Nome Youth Facility

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

The Nome Youth Facility operates as a short term detention facility for juveniles of the Nome and Kotzebue region. Treatment services have steadily grown for the residents with the development of the Accountability Program. The facility is considered minimum security and is currently staffed to hold up to six residents. The resident population is primarily male and nearly all Alaska Native. The residents are commonly detained for property crimes but there has been an increase in the number of residents charged with assault being held at the facility. Many of the youth have a history of substance abuse.

Current staffing includes one Superintendent I who is responsible for the operation and overall function of the facility. The Superintendent is also developing intervention and treatment approaches with the other agencies in the community. There are five full time Youth Counselor I/II positions at the facility. These positions are responsible for the daily operation of the facility and the direct supervision of the residents. There is also one full time Maintenance Worker who is responsible for the operation of the physical plant.

Component Goals and Strategies

To provide detained youthful offenders with a safe and secure living environment for the protection of the public, the safety of the youth, and appearance at scheduled court hearings.

To impose accountability for offenses committed by providing detained juvenile offenders opportunity to participate in community based activities.

To work in collaboration with community agencies to develop a continuum of services to allow juvenile offenders to remain near family and community.

To develop a chaplaincy program through a local church that will help develop mentoring, relationship building, socializing, etc. with community agencies and individuals.

Key Component Issues for FY2001 – 2002

The physical plant is in need of significant upgrades and repairs. The building has not had a significant renovation for fifteen years. Cold infiltration, freezing pipes, deteriorating flooring, windows, etc. compromise the safety and security of the building. Additionally, now that the Juvenile Probation Officers are located in the building, space has become quite limited. The residents in the facility are forced to eat, exercise, relax, and attend school in a very small dayroom space.

One other concern is the staffing level now that the detention count is remaining near capacity. With only five full time Youth Counselors and one Superintendent many shifts are covered by only one staff. This situation not only creates obvious safety issues, but also impairs the staff's ability to work with the resident population, having to spend all their time on custodial and security issues. This situation will become more pronounced as the newer staff begin to accumulate more leave time.

Major Component Accomplishments for FY2000

The primary accomplishment was the reopening of the short term detention program to provide services beyond 48 hour emergency detention. This goal was achieved through increasing the operating budget to add staff, through the completion of several major deferred maintenance projects, and the co-location of the juvenile probation office in the main facility building. This accomplishment has allowed youth to remain near family and community while receiving services, and has lessened the overcrowding on the Detention Unit at the Fairbanks Youth Facility.

Secondly, the facility has started an Accountability Program which is designed to provide meaningful intervention for selected detention residents. The juveniles selected for the program do community work service in Nome, attend off-center groups and individual counseling, attend culturally relevant activities, seek and gain employment.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services and Institutions
- AS 47.10 Children in Need of Aid
- AS 47.12 Delinquent Minors
- AS 47.14 Juvenile Institutions
- AS 47.15 Uniform Interstate Compact on Juveniles
- AS 47.17 Child Protection
- AS 47.18 Programs and Services Related to Adolescents
- AS 47.21 Adventure Based Education
- AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
- 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
- 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Performance Measures are shown at the BRU level - Juvenile Justice. 			X		

Nome Youth Facility
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	421.9	493.9	491.1
72000 Travel	5.2	5.5	5.5
73000 Contractual	69.4	95.0	95.0
74000 Supplies	40.6	50.8	50.8
75000 Equipment	3.6	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	9.0	42.5	42.5
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	549.7	687.7	684.9
Funding Sources:			
1004 General Fund Receipts	549.7	684.5	684.9
1053 Investment Loss Trust Fund	0.0	3.2	0.0
Funding Totals	549.7	687.7	684.9

Nome Youth Facility

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	687.7	0.0	0.0	687.7
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-2.8	0.0	0.0	-2.8
FY2002 Governor	684.9	0.0	0.0	684.9

Nome Youth Facility

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	7	7	Annual Salaries	354,264
Part-time	1	1	COLA	5,692
Nonpermanent	0	0	Premium Pay	9,777
			Annual Benefits	121,398
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	8	8	Total Personal Services	491,131

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Maint Gen Journey	0	0	0	1	1
Youth Center Supt I	0	0	0	1	1
Youth Counselor I	0	0	0	3	3
Youth Counselor II	0	0	0	3	3
Totals	0	0	0	8	8

Component: Johnson Youth Center

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

The Johnson Youth Center 30-bed facility provides short-term, pre-trial detention, control and intervention for juveniles whom the Superior court has ordered confined due to the danger they present to the public and/or themselves. The Johnson Youth Center Detention Unit provides an array of basic and specialized delinquency intervention services which include: 1) a highly structured behavior management core program; 2) short term individual, group and family counseling; 3) an accredited education component, including special education services and educational testing; 4) health screening and medical care; 5) mental health diagnostics and services; 6) anger management and aggression replacement training; 7) substance abuse education and prevention; 8) a life skills competency building curriculum.

The Johnson Youth Center also provides delinquency intervention services for youth committed to the Department for long term habilitation. This training school program is specifically designed to intervene in entrenched delinquent behavior, to build value systems reflective of the community and restore victims and the community to the fullest degree possible. Youth are assigned a Treatment team that works with them and their families throughout their stay to break the cycle of offending. Comprehensive treatment plans are developed with resident and family input targeting specific areas requiring change and growth. Education services are provided by the local school district including services for special needs students. Comprehensive medical and mental health services are provided to all long term residents as necessary. In conjunction with Probation, aftercare services are being developed to ensure a greater number of youth will adjust to community placement and retain the progress they have made while in the program.

Component Goals and Strategies

Assure that accused youth offenders are securely confined in Detention pending court, appear on time, and are protected from harm; and to protect the community while offenders are awaiting appropriate rehabilitation opportunities.

Utilize the new twenty-two bed Treatment Unit to reduce delinquent behavior and preserve and strengthen families through family involvement and effective intervention in youthful offenses. Facilitate appropriate rehabilitation and reunification of delinquent youth and their families when possible.

Coordinate with Juvenile Probation an effective continuum of services that benefits the youth, their families and the communities in the region.

Key Component Issues for FY2001 – 2002

The Johnson Youth Center Detention Unit has been overcrowded, frequently housing nine to sixteen residents on a living unit designed for eight. We are working closely with Juvenile Probation to develop alternatives and community programs.

The Johnson Youth Center Detention Unit was opened in 1982 and has received hard use throughout these eighteen years. Maintaining this unit and its mechanical and ventilation systems is becoming increasingly expensive and time consuming.

The design and implementation of a comprehensive Aftercare program with Juvenile Probation is the number one priority for the Facility in FY2001 and FY2002.

Major Component Accomplishments for FY2000

The previously unfinished kitchen in the core support building was designed and installed in 1999 servicing both the Detention and Treatment Unit residents. This has offered some of the residents the opportunity to learn vocational work skills serving meals, washing dishes, pans and trays while learning their way around an industrial kitchen environment serving 50 meals three times a day.

The Johnson Youth Center Detention Unit passed its third successful audit with the American Correctional Association in October of 1999. Auditors comments included "The Johnson Youth Center is one of the best run juvenile detention programs in the country." This is quite a compliment and recognition of the hard work all the Youth Counselors put into their jobs every day.

The Johnson Youth Center conducted an exhaustive search and cataloging of all relevant systems within the facility complex that may have been affected by Y2K malfunctions. All systems were inspected and certified to operate normally in the year 2000. Emergency tests were conducted and plans were in place to address any failures that would have occurred outside our control. This exercise had prepared the facility to deal with natural disasters or unexpected events in the community.

Construction of an arched security fencing system is underway at JYC and should be completed in the fall of 2000. This will allow residents who have earned the status to utilize the JYC grounds for recreational activities as well as new vocational opportunities in landscape maintenance and horticulture. This will also allow for increased outdoor activity to improve the overall physical and mental health of all the residents.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services and Institutions
- AS 47.10 Children in Need of Aid
- AS 47.12 Delinquent Minors
- AS 47.14 Juvenile Institutions
- AS 47.15 Uniform Interstate Compact on Juveniles
- AS 47.17 Child Protection
- AS 47.18 Programs and Services Related to Adolescents
- AS 47.21 Adventure Based Education
- AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
- 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
- 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Performance Measures are shown at the BRU level - Juvenile Justice.		X			

Johnson Youth Center
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,700.5	1,734.6	1,730.6
72000 Travel	13.2	20.0	20.0
73000 Contractual	153.5	252.5	252.5
74000 Supplies	270.0	219.3	271.9
75000 Equipment	10.4	107.2	107.2
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	185.1	162.0	162.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,332.7	2,495.6	2,544.2
Funding Sources:			
1002 Federal Receipts	0.0	5.1	5.1
1004 General Fund Receipts	2,267.6	2,455.3	2,462.5
1007 Inter-Agency Receipts	65.1	24.0	76.6
1053 Investment Loss Trust Fund	0.0	11.2	0.0
Funding Totals	2,332.7	2,495.6	2,544.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	5.0	5.5	5.1	5.5
Interagency Receipts	51015	65.1	24.0	30.0	76.6	50.0
Restricted Total		65.1	29.0	35.5	81.7	55.5
Total Estimated Revenues		65.1	29.0	35.5	81.7	55.5

Johnson Youth Center

Proposed Changes in Levels of Service for FY2002

No service changes.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,466.5	5.1	24.0	2,495.6
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-4.0	0.0	0.0	-4.0
Proposed budget increases:				
-Incr I/A for the School Lunch Program at JYC	0.0	0.0	52.6	52.6
FY2002 Governor	2,462.5	5.1	76.6	2,544.2

Johnson Youth Center
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	28	30	Annual Salaries	1,159,285
Part-time	2	0	COLA	17,578
Nonpermanent	0	0	Premium Pay	97,070
			Annual Benefits	456,698
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	30	30	Total Personal Services	1,730,631

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	1	0	1
Maint Gen Journey	0	0	1	0	1
Nurse II	0	0	1	0	1
Unit Leader	0	0	2	0	2
Youth Center Supt I	0	0	1	0	1
Youth Counselor I	0	0	4	0	4
Youth Counselor II	0	0	14	0	14
Youth Counselor III	0	0	5	0	5
Totals	0	0	30	0	30

Component: Bethel Youth Facility

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

The Bethel Youth Facility consists of an eight bed Detention Unit and an eleven bed Treatment Unit. The Detention Unit houses and offers services to alleged and adjudicated offenders who are either involved in the court process or awaiting other placement. The Treatment Unit houses and makes available rehabilitative services to adjudicated offenders who have been institutionalized by the Court. Since August, 1990, both components have been accredited by the American Correctional Association. Both Units are co-ed, and at this point in time our Treatment Unit is the only co-ed institutional treatment program in the Northern Region. Our population is largely Alaska Native, particularly Yup'ik Eskimo, and come to the facility from a wide geographical area including Southcentral communities as well as Barrow, Nome, Kotzebue, Fairbanks and the Yukon-Kuskokwim Delta. Residents of the Bethel Youth Facility continue to represent a broad range of offenses, but recent years have seen a disturbing number of violent and high profile offenses. At the time of this writing, five of our current 25 residents, or 20%, are in the facility on murder or related charges.

Detention Services: BYF's Detention Unit, with a design capacity of 8 residents, had an average population of 14.66 juveniles during FY00 (183.25% of capacity). The Detention Unit is staffed with a Unit Leader and nine Youth Counselor I/II/III positions. Unit staff are responsible for scheduling and monitoring all resident activity, ensuring compliance with court orders, maintaining the secure custody of residents and a safe environment for residents and staff, and providing programs and activities designed to promote social and moral growth and acceptance of responsibility by the residents. All Detention residents attend year-round schooling as well as participating in the behavior management system, recreational opportunities, and other programs both of a general nature and specific to their individual needs. Additional professional services including medical, dental, psychiatric/psychological, and substance abuse assessment are available on a referral basis. The staffing level of BYF's Detention Unit increased by 1 Youth Counselor I/II in FY01, the first change since the Unit first became operational in October, 1987.

Treatment/Training School Services: BYF's Treatment Unit has a design capacity of 11 residents, and had an average population of 10.40 residents in FY00 (94.5% of capacity). The lengthy waiting list for program entry that we experienced throughout FY99 decreased in FY00. The Treatment Unit is staffed with a Unit Leader and eight Youth Counselor I/II/III positions. These staffing levels are also unchanged since the Unit became operational in January, 1989. Treatment Unit staff serve functions similar to those of Detention staff, with additional responsibility for functioning as treatment team members for an assigned caseload of residents, monitoring and reporting on resident progress in established treatment goals, more in-depth and long-term treatment groups, assignments and activities, and working with residents, families and communities to prepare the resident for release. Unit staff have begun to undertake an aftercare services program and have been enhancing restorative justice program components such as community work service, victim offender mediation and the completion of court ordered restitution.

Support and Administrative Services: Unit staff are supported by a facility Superintendent, an Administrative Clerk, a Maintenance Worker, and a half-time nurse. The Superintendent is responsible for all aspects of facility operation and management. The sole clerical support staff performs functions related to file and records management, facility accounts payable, resident funds, resident and staff travel, processing reports and correspondence, and other related functions. The Maintenance Worker maintains all aspects of the physical plant including preventative maintenance and repair, and oversees any work done in the facility by outside vendors. Given the aging of the facility and the high resident population, maintaining the facility has become an increasing challenge. The facility nurse conducts health screening of all residents, conducts sick call, oversees all medical services for facility residents, and coordinates care with BYF's Health Authority and other health care professionals. The Nurse II position is established as a 20-hour per

week position, but with the high number of residents and increased demand for services, she is often exceeding 20 hours.

Component Goals and Strategies

To protect the community from delinquency, to impose accountability for offenses committed, and to equip juvenile offenders with the competencies necessary to live productively and responsibly in the community.

To provide detained youthful offenders with a safe, secure and intensively supervised living environment which is consistent with nationally recognized standards and which protects the public, provides for the safety of youth, and ensures appearance at scheduled court hearings.

To provide the serious, violent, and chronic juvenile offenders with secure sanctions to hold them accountable for their offenses, protect the public, and provide a structured treatment environment that is consistent with nationally recognized standards.

To work in collaboration with community agencies to develop a continuum of services to allow juvenile offenders to remain near family and community.

Key Component Issues for FY2001 – 2002

Significant overcrowded conditions in Detention are causing a strain on all aspects of facility operation, including staff and resident safety. Increases in resident population necessitate higher staffing levels to adequately supervise, treat, provide court and medical escorts, etc. The facility budget is also strained due to increased costs in all areas including food, clothing, medical care, facility maintenance, and staffing.

Facility maintenance is also an increasing concern due to both normal wear and tear and the destructiveness of the resident population. As the facility enters its thirteenth year of operation, the need for repairs and renovations is increasing.

Facility staff are faced with increasing expectations in the areas of community involvement and responsiveness, resident aftercare services, and enhancing restorative aspects of resident programs. Additionally, a high number of mental health residents needing intense supervision continue to reside at the facility creating a drain on staff.

Major Component Accomplishments for FY2000

Bethel Youth Facility retained accreditation status with the American Correctional Association by achieving 100% compliance with mandatory standards, 96.6% compliance with non-mandatory standards on the Detention Unit, and 98.4% compliance with non-mandatory standards on the Treatment Unit.

Funding for mental health services has allowed BYF to better meet the needs of our residents through individual counseling with a trained mental health clinician, staff training, and a formalized suicide risk assessment process.

BYF has implemented a program of aftercare services as a component of the mental health funding provided this year. This is significant and difficult due to the fact that many of the residents reside in villages surrounding Bethel. The logistics of the youth often require creativity to effectively work with them.

Statutory and Regulatory Authority

AS 47.05 Administration of Welfare, Social Services and Institutions
AS 47.10 Children in Need of Aid
AS 47.12 Delinquent Minors
AS 47.14 Juvenile Institutions
AS 47.15 Uniform Interstate Compact on Juveniles

AS 47.17 Child Protection
 AS 47.18 Programs and Services Related to Adolescents
 AS 47.21 Adventure Based Education
 AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Performance Measures are shown at the BRU level - Juvenile Justice. 			X		

Bethel Youth Facility
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,704.3	1,738.1	1,815.5
72000 Travel	2.8	10.6	10.6
73000 Contractual	190.3	160.0	160.0
74000 Supplies	110.1	142.5	153.4
75000 Equipment	2.8	0.7	0.7
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	55.9	29.8	29.8
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,066.2	2,081.7	2,170.0
Funding Sources:			
1004 General Fund Receipts	1,972.2	1,982.8	2,071.7
1007 Inter-Agency Receipts	44.0	37.4	48.3
1037 General Fund / Mental Health	50.0	50.0	50.0
1053 Investment Loss Trust Fund	0.0	11.5	0.0
Funding Totals	2,066.2	2,081.7	2,170.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	44.0	37.4	45.0	48.3	95.0
Restricted Total		44.0	37.4	45.0	48.3	95.0
Total Estimated Revenues		44.0	37.4	45.0	48.3	95.0

Bethel Youth Facility

Proposed Changes in Levels of Service for FY2002

The FY02 Governor's budget requests funding for one new Youth Counselor position for the BYF Detention Unit and annualization of the salary for the Youth Counselor position created in FY01.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,044.3	0.0	37.4	2,081.7
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-7.9	0.0	0.0	-7.9
Proposed budget increases:				
-Bethel Youth Facility Overcrowding	85.3	0.0	0.0	85.3
-Incr I/A for the School Lunch Program at BYF	0.0	0.0	10.9	10.9
FY2002 Governor	2,121.7	0.0	48.3	2,170.0

Bethel Youth Facility
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	22	23	Annual Salaries	1,309,871
Part-time	1	1	COLA	19,124
Nonpermanent	0	0	Premium Pay	55,964
			Annual Benefits	430,562
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	23	24	Total Personal Services	1,815,521

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk III	0	0	0	1	1
Maint Gen Journey	0	0	0	1	1
Nurse II	0	0	0	1	1
Unit Leader	0	0	0	2	2
Youth Center Supt I	0	0	0	1	1
Youth Counselor I	0	0	0	2	2
Youth Counselor II	0	0	0	12	12
Youth Counselor III	0	0	0	4	4
Totals	0	0	0	24	24

Component: Mat-Su Youth Facility

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

The Mat-Su Youth Facility provides a fully operational secure setting for juveniles from the Mat-Su District who have committed a crime and who are being detained until their cases can be investigated and processed through the court. The number of detention admissions to the McLaughlin Youth Center (MYC) from Mat-Su and MYC's detention overcrowding, resulted in the FY2000 construction of a new 15-bed detention facility in the Mat-Su which opened for operation in the Fall of 2000.

Serving youth in their community provides for greater offender accountability, easier victim and community restoration, and contact with families, the court, local and state law enforcement officials, public defenders, and schools. Opening a detention facility in the Mat-Su area allows probation and youth counselor staff to work with community service providers for placement of youth leaving the facility. This program provides probation staff to insure effective victim service coordination and provides adequate supervision of youth being released back into the community to help provide for the continued protection of the community. The operation of this detention unit reduces the time of transit incurred by law enforcement personnel (both state and local governments), department staff, youth advocates, families and many others.

To assist in transition planning to avoid lengthy stays in detention, residents will be assessed through a local agency and an initial plan of intervention and support will be constructed between the family, the minor and DJJ's community partners to ensure prompt and appropriate intervention in each case. This plan will include close supervision by facility staff in an overall effort to reduce the potential of re-offense.

In an effort to closely address substance abuse and mental health issues present with many of our residents, active planning and implementation of education and support services for these issues will be part of the programming at the MSYF. This will involve the active participation of community partners inside the facility.

The MSYF will continue to provide a safe and supervised setting for the local school district program to function year around. Also, the MSYF will continue to provide a similar setting for a night school (away from the detention population) targeting high risk probationers who have been either suspended or expelled and are potential residents for the facility.

Where possible, operating costs have been reduced to take advantage of already-existing administrative support services such as human resources, accounting and payroll, staff training, procurement and supply available at MYC in Anchorage.

Component Goals and Strategies

To protect the community from delinquency, to impose accountability for offenses committed, and to equip juvenile offenders with the competencies necessary to live productively and responsibly in the community.

To provide detained youthful offenders with a safe, secure and intensively supervised living environment which is consistent with nationally recognized standards and which protects the public, provides for the safety of youth, and ensures appearance at scheduled court hearings.

To provide opportunities for the families of detained juveniles to become involved with detention and Restorative Justice programming within the facility.

To provide alternative to detention services for juveniles and families, identify and provide intervention/treatment/support/supervision services in an expedited manner to hasten the juveniles' release from detention into a more appropriate setting with services that are aligned with Restorative Justice principals.

To provide the serious, violent, and chronic juvenile offenders with secure sanctions to hold them accountable for their offenses, protect the public, and provide a structured treatment environment that is consistent with nationally recognized standards.

Key Component Issues for FY2001 – 2002

The Mat-Su valley is the fastest growing area of the state with projections for significant growth in the next few years. Accommodating this population will be a major challenge for the facility in the next decade.

So far this year the Mat-Su resident count in the detention programs at MYC have been higher on the average compared with other years. This count reached an all-time high of 23 residents in February 2000. Services provided by youth facilities are mandated by law and facilities have no control over admissions.

The Mat-Su Youth Facility is a 15 bed secure detention unit that serves three different law enforcement agencies and a local juvenile probation unit of 5 JPOs who also make admissions to the facility.

The Mat-Su Youth Facility is a newly constructed facility whose security and general physical operations are being tested by the full time daily operation of the detention program. This in itself will continue to present challenges for all staff.

An alternative to detention effort which focuses on prompt assessment and service identification within the community will help to shorten the length of stay for detention residents and at the same time shorten the length of time between the release and the involvement of the minor and their family in intervention and support services. Successful reintegration of residents back into the community requires close coordination between DJJ and community partners.

Mental health and substance abuse problems are common among Mat-Su DJJ clients and quick assessment and identification of services within the community and within the facility are important steps in beginning the process of change for clients. Currently, one-third of the residents at the MSYF are prescribed psychotropic medications and many residents have drug and alcohol use and or abuse histories. Ongoing mental health/substance abuse education and support programs inside the facility are essential to a resident's smooth transition back into the community.

Teaching Restorative Justice concepts through class instruction, group activity and service projects within the facility will enhance the residents' understanding of cause and effect relationships while at the same time develop empathy toward their victims.

Major Component Accomplishments for FY2000

Construction of the Mat-Su Youth Facility was complete in June of 2000 and the facility's Superintendent position was filled.

A Citizens Advisory Board for the Mat-Su DJJ function in the Valley was formed and is providing an advisory function for both the MSYF and the field probation office.

Mat-Su DJJ personnel have worked closely with community partners in the planning and implementation of a Juvenile Assessment Center (JAC) in the Mat-Su Valley. JAC clinicians will be performing initial assessments on juveniles who are detained at the MSYF to assist DJJ with appropriate identification of support services for kids and families based on the results of the assessment.

The MSYF Superintendent currently chairs the local Mat-Su Youth Crime and Violence Task Force which is a community group that takes on juvenile crime projects such as the construction of the MSYF and the Juvenile Assessment center. This task force also supports local community and agency efforts to address juvenile crime.

Throughout the development of the MSYF during the past year much community education has taken place in an effort to enhance the communities' knowledge of local and statewide DJJ activities and programming.

During the past year DJJ has been taken a leadership role in designing and implementing a truancy prevention program with several community partners in the Mat-Su Valley.

Statutory and Regulatory Authority

- AS 47.05 Administration of Welfare, Social Services and Institutions
- AS 47.10 Children in Need of Aid
- AS 47.12 Delinquent Minors
- AS 47.14 Juvenile Institutions
- AS 47.15 Uniform Interstate Compact on Juveniles
- AS 47.17 Child Protection
- AS 47.18 Programs and Services Related to Adolescents
- AS 47.21 Adventure Based Education
- AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
- 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
- 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Performance Measures are shown at the BRU level - Juvenile Justice. 			X		

Mat-Su Youth Facility
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	9.0	926.4	1,110.0
72000 Travel	0.4	2.0	2.0
73000 Contractual	4.4	92.3	92.3
74000 Supplies	0.0	80.0	95.0
75000 Equipment	1.0	106.0	106.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	20.0	20.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	14.8	1,226.7	1,425.3
Funding Sources:			
1004 General Fund Receipts	14.8	1,219.5	1,410.3
1007 Inter-Agency Receipts	0.0	0.0	15.0
1053 Investment Loss Trust Fund	0.0	7.2	0.0
Funding Totals	14.8	1,226.7	1,425.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	0.0	0.0	0.0	15.0	15.0
Restricted Total		0.0	0.0	0.0	15.0	15.0
Total Estimated Revenues		0.0	0.0	0.0	15.0	15.0

Mat-Su Youth Facility**Proposed Changes in Levels of Service for FY2002**

No service changes.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,226.7	0.0	0.0	1,226.7
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-5.0	0.0	0.0	-5.0
Proposed budget increases:				
-Incr I/A for the School Lunch Program at MSYF	0.0	0.0	15.0	15.0
-Annualize funding for the Mat-Su Youth Facility	188.6	0.0	0.0	188.6
FY2002 Governor	1,410.3	0.0	15.0	1,425.3

Mat-Su Youth Facility

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	19	19	Annual Salaries	786,181
Part-time	3	3	COLA	10,608
Nonpermanent	0	0	Premium Pay	18,189
			Annual Benefits	295,046
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	22	22	Total Personal Services	1,110,024

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk III	0	0	0	1	1
Custodian II	0	0	0	1	1
Juvenile Prob Officer II	0	0	0	2	2
Maintenance Worker II	0	0	0	1	1
Nurse II	0	0	0	1	1
Unit Leader	0	0	0	1	1
Youth Center Supt I	0	0	0	1	1
Youth Counselor II	0	0	0	11	11
Youth Counselor III	0	0	0	3	3
Totals	0	0	0	22	22

Component: Ketchikan Regional Youth Facility

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

A new 10-bed facility will be constructed in 2000-2001 for the Ketchikan Regional area. The 10 bed combined facility will provide detention of youth who are awaiting court hearings or who are court ordered into this facility for a brief period of time, up to 30 days (4 beds with lock-down capabilities) and residential diagnostic and treatment for emotionally disturbed youth (4 beds staff secure) and protective custody/observation beds (2 beds).

Component Goals and Strategies

To protect the community from delinquency, to impose accountability for offenses committed.

To provide detained youthful offenders with a safe, secure and intensively supervised living environment which is consistent with nationally recognized standards and which protects the public, provides for the safety of youth, and ensures appearance at scheduled court hearings.

To provide the serious, violent, and chronic juvenile offenders with secure sanctions to hold them accountable for their offenses, protect the public, and provide a structured treatment environment that is consistent with nationally recognized standards.

Key Component Issues for FY2001 – 2002

The most significant issue will be the definition, development and implementation of a unique service consortium serving both mental health and juvenile offender clientele. Through a highly coordinated effort involving community service providers, the court, the Division and other groups and individuals, the facility will provide a variety of services to unique populations.

The initial stage of establishing a new facility in a community is a critical time for a facility. Staff will need to work hard to develop positive resident and staff cultures in the facility.

Establish a citizen advisory board and defining relationship with key community agencies to ensure that the facility can carry out its multi-purpose mission.

Major Component Accomplishments for FY2000

Not applicable - new facility.

Statutory and Regulatory Authority

AS 47.05 Administration of Welfare, Social Services and Institutions
AS 47.10 Children in Need of Aid
AS 47.12 Delinquent Minors
AS 47.14 Juvenile Institutions

AS 47.15 Uniform Interstate Compact on Juveniles
 AS 47.17 Child Protection
 AS 47.18 Programs and Services Related to Adolescents
 AS 47.21 Adventure Based Education
 AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
 7 AAC 54 Administration

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Performance Measures are shown at the BRU level - Juvenile Justice. 			X		

Ketchikan Regional Youth Facility
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	834.0
72000 Travel	0.0	0.0	5.0
73000 Contractual	0.0	95.6	277.5
74000 Supplies	0.0	0.0	90.0
75000 Equipment	0.0	0.0	25.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	70.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	0.0	95.6	1,301.5
Funding Sources:			
1004 General Fund Receipts	0.0	95.6	1,301.5
Funding Totals	0.0	95.6	1,301.5

Ketchikan Regional Youth Facility**Proposed Changes in Levels of Service for FY2002**

A new 10-bed facility will be constructed in 2001 for the Ketchikan Regional area. The 10 bed combined facility will provide detention of youth who are awaiting court hearings or who are court ordered into this facility for a brief period of time, up to 30 days (4 beds with lock-down capabilities) and residential diagnostic and treatment for emotionally disturbed youth (4 beds staff secure) and protective custody/observation beds (2 beds).

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	95.6	0.0	0.0	95.6
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	14.2	0.0	0.0	14.2
Proposed budget increases:				
-Annualize funding for the Ketchikan Youth Facility	1,191.7	0.0	0.0	1,191.7
FY2002 Governor	1,301.5	0.0	0.0	1,301.5

Ketchikan Regional Youth Facility**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	0	15	Annual Salaries	570,119
Part-time	0	2	COLA	9,533
Nonpermanent	0	0	Premium Pay	25,362
			Annual Benefits	229,013
			<i>Less 0.00% Vacancy Factor</i>	(0)
			Lump Sum Premium Pay	0
Totals	0	17	Total Personal Services	834,027

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	0	0	0	1	1
Juvenile Prob Officer II	0	0	0	1	1
Maint Gen Journey	0	0	0	1	1
Nurse II	0	0	0	1	1
Unit Leader	0	0	0	1	1
Youth Center Supt I	0	0	0	1	1
Youth Counselor II	0	0	0	9	9
Youth Counselor III	0	0	0	2	2
Totals	0	0	0	17	17

Component: Delinquency Prevention

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

This component is comprised of several different federal grants received from the Office of Juvenile Justice and Delinquency Prevention, including the Formula Grant, Title V, Challenge, Juvenile Accountability Incentive Block Grant, Enforcing Underage Drinking Laws, and the Juvenile Justice Programs in Rural Alaska Grant programs. Funds are used to ensure that Alaska is in continued compliance with the mandates of the federal Juvenile Justice and Delinquency Prevention (JJDP) Act and to provide a range of community-based services for juvenile offenders, victims, and communities through grants to nonprofit agencies, and local governments eligible under 7AAC 78.030. Grantees provide both intervention and prevention services while holding juveniles accountable for their behavior. Examples of programs include a statewide network of nonsecure shelters for juveniles who are arrested but do not meet detention criteria; youth and community courts; restitution and community work service projects; victim-offender mediation; electronic monitoring. Juvenile Justice system improvements are supported by this component through RSAs to several other Alaska justice agency partners, with an emphasis on improving the response time and quality of services in juvenile justice cases, particularly in the Yukon-Kuskokwim Delta and other rural areas. The Alaska Juvenile Justice Advisory Committee (AJJAC) serves as the Congressionally mandated state advisory group to the Division in its use of federal funds and juvenile justice programming.

Component Goals and Strategies

To ensure that the Division meets the needs of juvenile offenders, victims and communities through the provision of a range of community-based programs serving both urban and rural Alaska. To promote offender accountability by strengthening the juvenile justice system through partnering with other juvenile justice agencies. To promote quality programs that effectively meet the stated need.

Key Component Issues for FY2001 – 2002

1. Further refine the performance measurements related to grant processes to ensure more effective services both to and from grantees
2. Comply with the various reporting requirements for all federal grant programs
3. Develop an evaluation protocol and process for juvenile justice grantees
4. Maintain continued compliance with the core requirements of the Juvenile Justice and Delinquency Prevention (JJDP) Act, with particular emphasis on reducing the number of juveniles held in adult jails or lockups and determining the effectiveness of the newly devised telephonic reporting system.

Major Component Accomplishments for FY2000

1. Continued compliance with the core mandates of the federal Juvenile Justice and Delinquency Prevention Act that require deinstitutionalization of status offenders, sight and sound separation of juveniles offenders from adult offenders in adult facilities, and examination of disproportionate minority representation in the state's juvenile justice system.

2. Distribution of large durable placards which explain the federally-mandated juvenile holding practices, which were posted in 125 adult jails and lock-ups throughout the state.
3. Submission of the state's "Formula Grant Three-Year Program Plan for 2000-2002" to the federal Office of Juvenile Justice and Delinquency Prevention (OJJDP).
4. Hosting a site visit by Alaska's OJJDP representative to DJJ grantees, offices and institutions throughout the state.
5. Award of 66 federally-funded grants totaling \$1,670,500 in FY01 to community-based programs providing accountability and prevention services in 123 communities.
6. Provision of short-term non-secure shelter services as an alternative to detention, primarily in rural areas, for 497 youth in FY2000.
7. Provision of 13,496 days of electronic monitoring as an alternative to detention for 278 youth in FY2000 at an average cost of \$25.11 per day.
8. Completion of an internal DJJ grants unit evaluation which resulted in establishment of performance measures for grants staff and improved coordination of multiple grant funding streams.
9. Expanded collaboration between DJJ grants staff and grants staff from other DHSS divisions, including expanded information dissemination and cross-participation in PECs, to improve coordination and reduce gaps in services.
10. Expanded technical assistance to grantees and potential grantees in both urban and rural areas, including site visits, community presentations, and increasing use of electronic information dissemination through email and the new DJJ web site.
11. Increased citizen input through increased collaboration with the Alaska Juvenile Justice Advisory Committee (AJJAC), including hosting monthly AJJAC public meetings at DJJ institutions as well as regular participation of the AJJAC Chair in DJJ planning meetings, OJJDP site visits, and the JAIBG Advisory Board.

Statutory and Regulatory Authority

AS 47.05.010(7) Administration of Welfare, Social Services & Institutions
 AS 47.12 Delinquent Minors
 AS 47.14.030 Juvenile Institutions
 7AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Performance Measures are shown at the BRU level - Juvenile Justice.			X		

Delinquency Prevention
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	57.0	125.3	125.3
73000 Contractual	623.7	1,275.5	1,275.5
74000 Supplies	6.7	13.5	13.5
75000 Equipment	257.1	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,539.2	1,877.7	1,877.7
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,483.7	3,292.0	3,292.0
Funding Sources:			
1002 Federal Receipts	2,483.7	3,203.0	3,203.0
1004 General Fund Receipts	0.0	89.0	89.0
Funding Totals	2,483.7	3,292.0	3,292.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Other Restricted Revenue	51000	18.3	0.0	0.0	0.0	0.0
Federal Receipts	51010	2,483.7	3,203.0	3,203.0	3,203.0	3,203.0
Restricted Total		2,502.0	3,203.0	3,203.0	3,203.0	3,203.0
Total Estimated Revenues		2,502.0	3,203.0	3,203.0	3,203.0	3,203.0

Delinquency Prevention

Proposed Changes in Levels of Service for FY2002

No service changes.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	89.0	3,203.0	0.0	3,292.0
FY2002 Governor	89.0	3,203.0	0.0	3,292.0

Component: Probation Services

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Juvenile Justice is to hold juvenile offenders accountable for their behavior, promote the safety and restoration of victims and communities, and assist offenders and their families in developing skills to prevent crime.

Component Services Provided

Probation Services includes a wide range of front line probation services, administrative program support and state level management and oversight functions. These services are broken down by service category.

Direct probation services. Probation officers assume a number of functions and responsibilities. The first task is to make a detention determination to authorize or deny a police officer's request to detain a juvenile following an arrest. Once a police investigation is received, the probation officer makes a determination if there is sufficient probable cause evidence against the youth to take further action. Once jurisdiction has been established, the probation officer meets with the youth, their family and the victim or victims involved in the case to decide if the matter can be handled informally through a community diversion plan or if the matter requires formal court intervention. If the matter is processed through a community diversion plan, the probation officer provides informal supervision to the youth until the diversion activity has been satisfactorily completed and the harm to the victim and community has been satisfactorily repaired. If the matter requires formal court action, the probation officer (in most offices around the state) prepares and files a delinquency petition with the court. The probation officer also meets with the victim and provides information to them about their rights and opportunities to participate in the juvenile justice process. The probation officer also offers direct support services to victims as well as a variety of referral references to those impacted by juvenile crime. If the juvenile is adjudicated delinquent, the probation officer then conducts a predisposition investigation and provides recommendations to the court as to the appropriate disposition in the case. The probation officer assists the victim in providing information to the court during the disposition hearing. If the court places the juvenile on probation, the probation officer then supervises the offender under the terms of an individual case plan and specific conditions of probation as ordered by the court. If the court orders the juvenile into a juvenile institution, the probation officer assists the youth facility staff in developing and implementing an institutional and victim service treatment plan. Once institutionalized youth complete treatment and return to the community, the probation officer assists the juvenile in making a successful reentry into the community. Probation officers work closely with individuals and community groups who develop and implement accountability support services in support of the Division's mission.

Administrative Program Support. Positions in this service unit provide a variety of clerical and information technology support services to professional staff. This service unit processes accounts payable, client service expenses, client and staff travel, and help maintain PROBER, the Division's client information data base.

State level management. This service unit consists of state level personnel responsible for administration of federal grant programs, statewide policy development and implementation, coordinated service delivery between field probation and the youth facilities and statewide staff training and development. This unit is responsible for the development of a new automated offender data base known as the Juvenile Offender Management Information System (JOMIS). This unit also performs all state level administrative functions including preparation and administration of the agency operating and capital budgets, coordination with the Commissioner, other Departments, the Governor and Legislature in the review and development of public law and policy related to the administration of juvenile justice.

Component Goals and Strategies

To provide a continuum of community based services designed to hold juvenile offenders accountable for repairing the harm caused to victims and communities as a result of their criminal behavior. To provide effective delinquency response interventions and delinquency prevention programs through a coordinated effort with schools, law enforcement, locally based accountability programs and other juvenile justice partners in support of the mission of the Division.

Key Component Issues for FY2001 – 2002

1. While delinquency referrals have remained essentially unchanged between FY 1999 and FY 2000 , the number of felony assault referrals increased slightly. Probation services has had to focus increased efforts on offender supervision and community intervention service coordination to meet public safety needs. Increases in the number of serious offenses in some of our rural, regional hubs impacts the Division's ability to effectively respond to less serious offenses.
2. Increased demand for victim services and growing requests from communities for help in developing additional community based intervention and response programs continues to put pressure on the probation services resources of the Division.
3. The number of community based accountability programs has increased throughout Alaska as local individuals and programs have stepped forward to take an active role in the juvenile justice process. Probation services have had to respond to the demand for increased training for Division staff in community justice practices. Probation services have also offered technical assistance to local groups in support of the active and successful partnerships which are addressing the issues of juvenile crime.
4. Police, schools, victims, businesses, neighborhoods and communities are insisting that probation staff provide services out in the community rather than from their office enclaves. As probation officers work "with" communities rather than "for" communities the juvenile justice system has experienced increased pressure to stretch limited resources to meet community service needs.
5. There has been an increase in the number of special needs offender populations into the system including juvenile offenders with mental health issues, FAS/FASE, and significant substance abuse issues. Probation services has had to provide enhanced services to meet the needs of these offender populations.
6. As more facilities are being brought on line, there is an increased need for probation services to help facilitate successful community reintegration as youth are discharged from facility placements.
7. The Division will complete development of the Juvenile Offender Management Information System (JOMIS), a client centered information data base in the early portion of FY 2001. JOMIS is slated to be fully implemented by June 30, 2001.
8. The Division will continue to establish an administrative and organizational presence and partnership with other Department Divisions, state and local agencies involved in the planning, design, implementation and assessment of justice services to the people of Alaska.

Major Component Accomplishments for FY2000

A restorative justice mission statement for the Division was adopted into the uncodified law of Alaska, Section 84. Division managers have successfully implemented this mission by partnering with communities and victims in the juvenile justice process.

Regulations related to the new Division and delinquency programming services provided by the agency were adopted in January, 2000.

Successful mental health probation service programs were implemented in the Southcentral and Northern Regions which helped minimize the need for secure detention of special needs offenders who could be successfully managed in community settings without compromising public safety.

The Division has increased services to victims of juvenile crime by initiating victim impact classes, establishing victim service advocate and volunteer coordinator services.

A special offender supervision agreement was implemented between Anchorage probation and the Anchorage Police to provide increased consistency, accountability and monitoring of juvenile offenders in Anchorage.

The statewide staff development officer and internal training work group completed development of probation officer restorative justice performance competencies. Officer safety and client control tactics training was completed in accordance with OSHA requirements.

Probation officers in Fairbanks, Anchorage, Nome, Bethel, Sitka, Ketchikan and the Mat-Su Borough worked with local schools to establish routine duty assignments in middle and senior high schools. Probation officers in the schools make contact with youth on probation, meet with at risk youth in an effort to mitigate the need for formal delinquency interventions in the future, provide counseling and referral assistance to at risk youth and their families and to network with schools and other social service providers involved in efforts to support and strengthen families and communities.

Collaborative efforts between the Division, the University of Alaska and the Alaska Native Justice Center have led to the successful placement of university probation interns in Nome, Bethel and Sitka.

Juvenile justice partnerships were established in approximately 40 communities throughout Alaska and have led to the creation of community, elders and youth courts; mediation centers; restitution and community work service programs.

The Alaska Juvenile Probation Restorative Justice Resource Needs Time Study was completed in the Fall of 2000.

Statutory and Regulatory Authority

- AS 09.35 Execution
- AS 11.81 General Provisions
- AS 12.25 Arrests and Citations
- AS 12.35 Search and Seizures
- AS 25.27 Child Support Enforcement Agency
- AS 47.05 Administration of Welfare, Social Services and Institutions
- AS 47.10 Children in Need in Aid
- AS 47.12 Delinquent Minors
- AS 47.14 Juvenile Institutions
- AS 47.15 Uniform Interstate Compact on Juveniles
- AS 47.17 Child Protection
- AS 47.18 Programs and Services Related to Adolescents
- AS 47.21 Adventure Based Education
- AS 47.37 Uniform Alcoholism and Intoxication Treatment Act
- 7 AAC 52 Juvenile Correctional Facilities & Juvenile Detention Facilities
- 7 AAC 53 Social Services
- 7 AAC 54 Administration
- Alaska Delinquency Rules
- Alaska Rules of Civil Procedure
- Alaska Rules of Criminal Procedure

Key Performance Measures for FY2002

Measure: Performance Measures are shown at the BRU level - Juvenile Justice.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
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Component — Probation Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none">Performance Measures are shown at the BRU level - Juvenile Justice.			X		

Probation Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	6,229.5	6,731.9	7,419.9
72000 Travel	133.4	116.7	143.0
73000 Contractual	551.3	700.6	610.8
74000 Supplies	134.5	65.8	75.8
75000 Equipment	133.5	41.3	85.3
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	142.1	140.0	140.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	7,324.3	7,796.3	8,474.8
Funding Sources:			
1002 Federal Receipts	271.2	519.0	518.5
1004 General Fund Receipts	6,685.0	6,955.4	7,673.3
1007 Inter-Agency Receipts	162.4	0.0	0.0
1053 Investment Loss Trust Fund	0.0	39.1	0.0
1108 Statutory Designated Program Receipts	205.7	282.8	283.0
Funding Totals	7,324.3	7,796.3	8,474.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	271.2	519.0	525.0	518.5	525.0
Interagency Receipts	51015	162.4	0.0	0.0	0.0	0.0
Statutory Designated Program Receipts	51063	205.7	282.8	300.0	283.0	300.0
Restricted Total		639.3	801.8	825.0	801.5	825.0
Total Estimated Revenues		639.3	801.8	825.0	801.5	825.0

Probation Services

Proposed Changes in Levels of Service for FY2002

The Division intends to move forward to implement a three year plan to increase field probation resources in support of restorative juvenile justice services throughout Alaska. Demands to provide more services to victims, increased interest from communities wanting to develop and implement juvenile justice partnerships, and the need to enhance the juvenile justice service continuum in rural Alaska will require the Division to begin implementation of a restorative justice strategic plan in FY 2002.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	6,994.5	519.0	282.8	7,796.3
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	20.8	-0.5	0.2	20.5
Proposed budget increases:				
-Juvenile Accountability and Victim Services	564.5	0.0	0.0	564.5
-Victim Services Coordinator	93.5	0.0	0.0	93.5
FY2002 Governor	7,673.3	518.5	283.0	8,474.8

Probation Services

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	113	125	Annual Salaries	5,799,484
Part-time	0	0	COLA	84,386
Nonpermanent	0	0	Premium Pay	71,557
			Annual Benefits	2,022,968
			<i>Less 7.00% Vacancy Factor</i>	<i>(558,487)</i>
			Lump Sum Premium Pay	0
Totals	113	125	Total Personal Services	7,419,908

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Clerk I	1	0	0	0	1
Administrative Assistant	1	0	1	0	2
Administrative Clerk II	6	3	1	3	13
Administrative Clerk III	1	0	1	0	2
Administrative Manager IV	0	0	1	0	1
Assoc Coordinator	0	0	2	0	2
Coordinator	0	0	1	0	1
Division Director	0	0	1	0	1
Juvenile Prob Officer I	2	0	1	7	10
Juvenile Prob Officer II	21	11	4	18	54
Juvenile Prob Officer III	2	2	4	9	17
Juvenile Prob Officer IV	2	2	3	0	7
Micro/Network Spec I	1	0	0	0	1
Mntl Hlth Clinician III	0	1	0	0	1
Research Analyst III	0	0	1	0	1
Social Svcs Assoc I	0	0	0	3	3
Social Svcs Assoc II	0	0	0	1	1
Social Svcs Assoc III	0	1	0	3	4
Social Svcs Prog Officer	1	0	1	0	2
Youth Corrections OPS Manager	1	0	0	0	1
Totals	39	20	22	44	125

BRU/Component: Human Services Community Matching Grant

(There is only one component in this BRU. To reduce duplicate information, we did not print a separate BRU section.)

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Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Human Services Community Matching Grants are made in accordance with AS 29.60.600 which authorizes the Department to make grants to qualified municipalities. Services from municipalities include, but are not limited to, the following: substance abuse treatment, mental health services, food and shelter for the low income, sexual assault & domestic violence treatment, runaway shelters, health services for low income, housing and rehabilitation for the physically and mentally ill. These services are purchased through contracts with non-profit agencies.

FY2001 Grantees and Grant Awards:

Municipality of Anchorage: \$1,297,771

Fairbanks North Star Borough: \$ 419,129

Component Goals and Strategies

TO PREVENT OR ALLEVIATE SERIOUS MENTAL OR PHYSICAL HARDSHIP BY THE PROVISION OF VARIOUS SERVICES BY LOCAL NON-PROFIT ORGANIZATIONS.

-The eligible municipalities are required to match the state funding with a 30% match.

Key Component Issues for FY2001 – 2002

To obtain services within Alaskan municipalities to provide essential human and health services to prevent serious mental or physical hardship to individuals.

Major Component Accomplishments for FY2000

- 1) Provided temporary shelter for homeless people and others who need emergency shelter
- 2) Provided delivery of meals to those in economic need as well as for the homeless
- 3) Provided health services for the homeless and others who cannot afford to purchase such services
- 4) Provided child care for school age children from low and moderate income families
- 5) Provided domestic violence services to all members of families involved

Statutory and Regulatory Authority

AS 29.60.600-.650

Human services community matching grants.

Key Performance Measures for FY2002

Measure: This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up in Purchased Services and the Family and Youth Services Management BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> This component is for pass through funds and the performance measures for the Division of Family and Youth Services is set up under the Purchased Services and the Family and Youth Services BRU. 			X		

Human Services Community Matching Grant
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,716.9	1,716.9	1,716.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,716.9	1,716.9	1,716.9
Funding Sources:			
1004 General Fund Receipts	410.9	410.9	410.9
1007 Inter-Agency Receipts	1,306.0	1,306.0	1,306.0
Funding Totals	1,716.9	1,716.9	1,716.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	1,306.0	1,306.0	1,306.0	1,306.0	1,306.0
Restricted Total		1,306.0	1,306.0	1,306.0	1,306.0	1,306.0
Total Estimated Revenues		1,306.0	1,306.0	1,306.0	1,306.0	1,306.0

**Human Services Community Matching Grant
Proposed Changes in Levels of Service for FY2002**

None

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	410.9	0.0	1,306.0	1,716.9
FY2002 Governor	410.9	0.0	1,306.0	1,716.9

Maniilaq Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

BRU Mission

Committed to individual responsibility for health and quality care through tribal self-governance.

BRU Services Provided

This BRU was established in FY 85 to consolidate selected health and social services grants administered by Maniilaq Association. Services are administered in accordance with 7 AAC 78.010-320. The programs supported by this BRU are:

Social services component: family services, children's home, and women's crisis project.

Public health services component: public health nursing, community health aide training and supervision, emergency medical services, eye care services, prematernal home, audiology, home care services.

Alcohol and drug abuse services component: comprehensive alcohol program and detox services.

Mental health services component: counseling services.

BRU Goals and Strategies

See component levels.

Key BRU Issues for FY2001 – 2002

See component levels.

Major BRU Accomplishments for FY2000

See component levels.

Maniilaq

BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
None.												
Non-Formula Expenditures												
Maniilaq Social Services	843.9	0.0	0.0	843.9	843.9	0.0	0.0	843.9	843.9	0.0	0.0	843.9
Maniilaq Public Health Services	901.3	0.0	0.0	901.3	901.3	0.0	0.0	901.3	901.3	0.0	0.0	901.3
Maniilaq Alcohol & Drug Abuse	950.1	0.0	33.0	983.1	950.1	0.0	0.0	950.1	950.1	0.0	83.0	1,033.1
Maniilaq Mental Health/DD Svcs	350.0	0.0	0.0	350.0	350.0	0.0	0.0	350.0	350.0	0.0	0.0	350.0
Totals	3,045.3	0.0	33.0	3,078.3	3,045.3	0.0	0.0	3,045.3	3,045.3	0.0	83.0	3,128.3

Maniilaq**Proposed Changes in Levels of Service for FY2002**

The Maniilaq Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Maniilaq**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	3,045.3	0.0	0.0	3,045.3
Proposed budget increases:				
-Maniilaq Alcohol & Drug Abuse	0.0	0.0	83.0	83.0
FY2002 Governor	3,045.3	0.0	83.0	3,128.3

Component: Maniilaq Social Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Family services: counseling, crisis intervention, information and referral, home investigation, licensing and placement, and child and adult placement.

Children's home: residential facility for youth who cannot reside with their families.

Regional women's crisis project: a temporary residence for women and children who are experiencing domestic crisis and violence.

Component Goals and Strategies

The goal of this component is to provide services to strengthen individuals, families, and communities in the Maniilaq service area; to provide emergency residential care for minors in state custody and referred by the Maniilaq alcohol program, Maniilaq family services, and Maniilaq counseling services; and to provide shelter for safety and support services for the women and children of domestic violence and sexual assault.

Key Component Issues for FY2001 – 2002

No key issues.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

AS 47.05.010

Key Performance Measures for FY2002

Measure: To maintain a 24-hour shelter for women and children averaging 305 client nights quarterly.
(Not yet addressed by Legislature.)

Measure: To provide 224 quarterly hours of crisis referral and information in crisis line and advocacy services.
(Not yet addressed by Legislature.)

Measure: To provide approximately 99 client hours per quarter to one-on-one counseling.
(Not yet addressed by Legislature.)

Measure: To provide nine parenting classes per quarter.
(Not yet addressed by Legislature.)

Measure: To provide educational play activities for an average of 45 children per quarter.
(Not yet addressed by Legislature.)

Measure: To provide support, information, referrals, and counseling to 14 perpetrators per quarter.
(Not yet addressed by Legislature.)

Measure: To maintain outreach with the 11 villages and 27 safe home providers once a year.
(Not yet addressed by Legislature.)

Measure: To make at least six major public presentations per year.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• To maintain a 24-hour shelter for women and children averaging 305 client nights quarterly.		X			
• To provide 224 quarterly hours of crisis referral and information in crisis line and advocacy services.		X			
• To provide approximately 99 client hours per quarter to one-on-one counseling.		X			
• To provide nine parenting classes per quarter.		X			
• To provide educational play activities for an average of 45 children per quarter.		X			
• To provide support, information, referrals, and counseling to 14 perpetrators per quarter.		X			
• To maintain outreach with the 11 villages and 27 safe home providers once a year.		X			
• To make at least six major public presentations per year.		X			

Maniilaq Social Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	843.9	843.9	843.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	843.9	843.9	843.9
Funding Sources:			
1004 General Fund Receipts	843.9	843.9	843.9
Funding Totals	843.9	843.9	843.9

Maniilaq Social Services

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	843.9	0.0	0.0	843.9
FY2002 Governor	843.9	0.0	0.0	843.9

Component: Maniilaq Public Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Public health nursing: health promotion and prevention services by public health nurses. Community health aide training and supervision: education and supervision for 31 primary CHAs. Emergency medical services: training of volunteer emergency medical technicians, implementation of EMS system. Eye care services: optometric screening, diagnosis, treatment, and referral services. Prematernal home: residential, educational, and support services for pregnant women awaiting delivery at the Kotzebue hospital. Audiology services: hearing and language disorder screening, diagnosis, and referral services provided by an audiologist. Home care services: personal care attendant and chore services provided to allow eligible clients to live safely at home.

Component Goals and Strategies

The goal of the public health component of the Maniilaq BRU is to assure the availability and quality of community-based preventive and medical services.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

No Major Accomplishments.

Statutory and Regulatory Authority

AS 18.05.30
AS 44.29.020
AS 18.08.010 & 080
AS47.07.010 & 030
AS 47.20.005-050
AS 47.17.101
AS 18.25.040-080
AS 14.30.127
AS 18.28.010-100
7 AAC 27.110
7 AAC 27.510.560
7 AAC 13.010

Key Performance Measures for FY2002

Measure: Increase the percentage of two year old children who are fully immunized so that all Public Health Nursing Centers meet or exceed the statewide average for children fully immunized for 4/3/1/3.

(Not yet addressed by Legislature.)

Current Status:

The 1998 C.A.S.A. (immunization status review methodology) average percentage for two year olds served in PHN Centers was 74.9% fully immunized. In 1997 the percentage was 71%. The statewide percentage for two year olds fully immunized as measured by the National Immunization Survey (NIS) for 1998 was 81.3%. The goal for the end of the year 2000 is to achieve 90% fully immunized two year olds.

Background and Strategies:

The Nursing Component has significantly increased the work focus on the immunization of young children since 1997. In 1996, the NIS placed Alaskan two year olds at 69% fully protected. Public Health Nurses across the state increased the amount of clinic time devoted to immunizations, activated recall systems for children who were behind on vaccines, built community coalitions, and led the communities in creative community based solutions to improve the childhood immunization rates. PHNs increased the percentage of clinical time spent on immunizations from 14% in 1996 to 29% in 1998, representing a significant shift in work priorities. With the focus on childhood immunizations, the rates have begun to rise, and more Alaskan children are protected. This intensified immunization effort must continue to assure that newborns and children moving to Alaska are protected as additional progress is made toward the goal of 90% fully immunized two year olds. Several areas persist with unacceptably low rates requiring more PHN time and energy to achieve adequate protective levels of immunizations. Areas in Alaska with rapid population growth and low public health staffing continue at risk with low immunization levels for young children. With additional funding for direct service staff in these targeted areas in FY 01, we expect the same success as we have accomplished in other parts of Alaska in these past two years from educating parents, giving more shots, working with private and public providers, and promoting awareness of the importance of protecting children against these diseases.

Measure: Public Health Nursing: Reduce the incidence of morbidity/mortality from influenza/pneumonia in high risk individuals. Provide Hepatitis B screening and surveillance.
(Not yet addressed by Legislature.)

Measure: Community health aide training and supervision: Provide three field trips to each village for CHA orientation, education, and reviews.
(Revised from Legislature's FY2002 version.)

Measure: Emergency Medical Services: Conduct two emergency medical technician workshops and two emergency trauma training courses for search and rescue personnel an the general public. Conduct one CPR class.
(Not yet addressed by Legislature.)

Measure: Eye Care Services: Maintain an optometry clinic in Kotzebue and travel once per year to each village.
(Not yet addressed by Legislature.)

Measure: Prematernal Home: Provide a six bed residential facility for expectant mothers in the later stages of pregnancy.
(Not yet addressed by Legislature.)

Measure: Audiology services: Provide 15 weeks of audiology services, including one trip to each village and four weeks of service in Kotzebue.
(Not yet addressed by Legislature.)

Measure: Home Care Services: Provide services to non-Medicaid eligible clients and full operational support to enable Maniilaq to provide home care services to all clients clinically eligible for services.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Increase the percentage of two year old children who are fully immunized so that all Public Health Nursing Centers meet or exceed the statewide average for children fully immunized for 4/3/1/3. Public Health Nursing: Reduce the incidence of morbidity/mortality from influenza/pneumonia in high risk individuals. Provide Hepatitis B screening and surveillance. Community health aide training and supervision: Provide three field trips to each village for CHA orientation, education, and reviews. Emergency Medical Serviced: Conduct two emergency medical technician workshops and two emergency trauma training courses for seach and rescue personnel an the general public. Conduct one CPR class. Eye Care Services: Maintain an optometry clinic in Kotzebue and travel once per year to each village. 			X		
		X			
		X			
		X			
		X			

Component — Maniilaq Public Health Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Prematernal Home: Provide a six bed residential facility for expectant mothers in the later stages of pregnancy. • Audiology services: Provide 15 weeks of audiology services, including one trip to each village and four weeks of service in Kotzebue. • Home Care Services: Provide services to non-Medicaid eligible clients and full operational support to enable Maniilaq to provide home care services to all clients clinically eligible for services. 		X			
		X			
		X			

**Maniilaq Public Health Services
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	901.3	901.3	901.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	901.3	901.3	901.3
Funding Sources:			
1004 General Fund Receipts	901.3	901.3	901.3
Funding Totals	901.3	901.3	901.3

Maniilaq Public Health Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	901.3	0.0	0.0	901.3
FY2002 Governor	901.3	0.0	0.0	901.3

Component: Maniilaq Alcohol and Drug Abuse Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Outpatient counseling: Education about the diseases of alcoholism and drug abuse as well as individual and group counseling on a scheduled basis.

Intermediate care: A 30- to 90-day program of intermediate care includes a 12-step program of recovery.

Village outreach services: Assistance to residents of the Northwest Arctic Region villages in identification of substance abuse problems and resources for treatment.

MASAP: Database statistics for court referrals.

Component Goals and Strategies

The goals of this component are to support a client's ability to obtain complete abstinence from alcohol and other mood-altering chemicals by providing differing intensities of treatment modalities; and to provide substance abuse treatment to specific clients while enabling, if possible, continuation of normal activities, including employment and family life.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

No Major Accomplishments.

Statutory and Regulatory Authority

AS 14.30.147
AS 18.05.30
AS 18.08.010-080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 44.29.100-150
AS 47.07.010-030
AS 47.17.101
AS 47.20.005-050
AS 47.30.470-500
AS 47.37.010-270
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: To provide 30 to 90 days of intermediate care treatment to a maximum of 10 clients.
(Not yet addressed by Legislature.)

Measure: To maintain 80 percent bed utilization.
(Not yet addressed by Legislature.)

Measure: To refer to aftercare 100 percent of clients completing the outpatient component.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• To provide 30 to 90 days of intermediate care treatment to a maximum of 10 clients.		X			
• To maintain 80 percent bed utilization.		X			
• To refer to aftercare 100 percent of clients completing the outpatient component.		X			

Maniilaq Alcohol and Drug Abuse Services**Component Financial Summary***All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	983.1	950.1	1,033.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	983.1	950.1	1,033.1
Funding Sources:			
1004 General Fund Receipts	427.7	427.7	427.7
1007 Inter-Agency Receipts	33.0	0.0	83.0
1037 General Fund / Mental Health	522.4	522.4	522.4
Funding Totals	983.1	950.1	1,033.1

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	33.0	0.0	0.0	83.0	0.0
Restricted Total		33.0	0.0	0.0	83.0	0.0
Total Estimated Revenues		33.0	0.0	0.0	83.0	0.0

Maniilaq Alcohol and Drug Abuse Services

Proposed Changes in Levels of Service for FY2002

The Maniilaq Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	950.1	0.0	0.0	950.1
Proposed budget increases:				
-Restore Adult Statewide ASAP	0.0	0.0	83.0	83.0
FY2002 Governor	950.1	0.0	83.0	1,033.1

Component: Maniilaq Mental Health and Developmental Disabilities Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

This component provides outpatient mental health services on both short- and long-term bases, crisis intervention, mental health evaluations and assessments, court screenings, referral services, prevention services, and crisis respite.

Component Goals and Strategies

The goals of this component are to provide a wide range of mental health services and related care to the people of the Northwest Arctic Borough and the village of Point Hope.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

No Major Accomplishments.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.30
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.05.010
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560
7 AAC 71.010
7 AAC 78.010

Key Performance Measures for FY2002

Measure: To manage 350 cases.
(Not yet addressed by Legislature.)

Measure: To provide 90 village trips.
(Not yet addressed by Legislature.)

Measure: To respond to 50 emergency contacts after hours.
(Not yet addressed by Legislature.)

Measure: To provide 7 training workshops for the community or other human services providers.
(Not yet addressed by Legislature.)

Measure: To reduce the need for APH admissions to 7.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• To manage 350 cases.		X			
• To provide 90 village trips.		X			
• To respond to 50 emergency contacts after hours.		X			
• To provide 7 training workshops for the community or other human services providers.		X			
• To reduce the need for APH admissions to 7.		X			

Maniilaq Mental Health and Developmental Disabilities Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	350.0	350.0	350.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	350.0	350.0	350.0
Funding Sources:			
1037 General Fund / Mental Health	350.0	350.0	350.0
Funding Totals	350.0	350.0	350.0

Maniilaq Mental Health and Developmental Disabilities Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	350.0	0.0	0.0	350.0
FY2002 Governor	350.0	0.0	0.0	350.0

Norton Sound Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

BRU Mission

In partnership with the people of our region, NSHC will work progressively to create strong, healthy families and communities through education, prevention, and delivery of quality health services in a compassionate and respectful manner which strengthens the behavioral, environmental, physical and spiritual aspects of our lives.

BRU Services Provided

This BRU was established in FY 85 to consolidate selected health and social services grants administered by the Norton Sound Health Corporation. Services are administered in accordance with 7 AAC 78.010-320. The programs supported by this BRU are:

Social services: Child abuse prevention.

Public health services: public health nursing, prematernal home, audiology, infant learning, community health aide training and supervision, emergency medical services, EMS ambulance support, health clinic, eye care services, and home care services.

Alcohol and drug abuse services: substance abuse, drug abuse education and prevention services.

Mental health and developmentally disabled services: community mental health center, chronically mentally ill, developmental disabilities.

Sanitation: inspection of facilities and public services for public health safety.

BRU Goals and Strategies

See component levels.

Key BRU Issues for FY2001 – 2002

See component levels.

Major BRU Accomplishments for FY2000

See component levels.

Norton Sound
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
NS Social Services	62.2	0.0	0.0	62.2	62.2	0.0	0.0	62.2	62.2	0.0	0.0	62.2
NS Public Health Services	1,370.2	0.0	0.0	1,370.2	1,370.2	0.0	0.0	1,370.2	1,370.2	0.0	0.0	1,370.2
NS Alcohol & Drug Abuse Svcs	522.4	0.0	17.6	540.0	522.4	0.0	0.0	522.4	522.4	0.0	67.6	590.0
NS Mental Health/DD Svcs	402.4	0.0	0.0	402.4	402.4	0.0	0.0	402.4	402.4	0.0	0.0	402.4
NS Sanitation	96.3	0.0	0.0	96.3	96.3	0.0	0.0	96.3	96.3	0.0	0.0	96.3
Totals	2,453.5	0.0	17.6	2,471.1	2,453.5	0.0	0.0	2,453.5	2,453.5	0.0	67.6	2,521.1

Norton Sound**Proposed Changes in Levels of Service for FY2002**

The Norton Sound Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Norton Sound**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,453.5	0.0	0.0	2,453.5
Proposed budget increases:				
-NS Alcohol & Drug Abuse Svcs	0.0	0.0	67.6	67.6
FY2002 Governor	2,453.5	0.0	67.6	2,521.1

Component: Norton Sound Social Services

Contact: Janet Clarke, Director, Administrative Services
Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Child abuse prevention: child protection services, family intervention.

Component Goals and Strategies

The goal of the social services component of the Norton Sound Health Corporation BRU is to protect at-risk children.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

No Major Accomplishments.

Statutory and Regulatory Authority

AS 47.05.010

Key Performance Measures for FY2002

Measure: To increase to 20 the number of families provided preventive service treatment.
(Not yet addressed by Legislature.)

Measure: To increase to 30 the number of children/youth provided services for abuse or neglect.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• To increase to 20 the number of families provided preventive service treatment.		X			
• To increase to 30 the number of children/youth provided services for abuse or neglect.		X			

Norton Sound Social Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	62.2	62.2	62.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	62.2	62.2	62.2
Funding Sources:			
1004 General Fund Receipts	62.2	62.2	62.2
Funding Totals	62.2	62.2	62.2

Norton Sound Social Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	62.2	0.0	0.0	62.2
FY2002 Governor	62.2	0.0	0.0	62.2

Component: Norton Sound Public Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Public health nursing: health promotion and prevention services provided by public health nurses.

Prematernal home: residential, educational, and support services for pregnant women from the Norton Sound region awaiting delivery at the Nome hospital.

Audiology: hearing and language disorder screening, diagnosis, and referral services provided by an audiologist at Norton Sound Regional Hospital.

Infant learning: specialized education and developmental services for children aged 0-3 with learning and physical disabilities.

Community health aide training and supervision: education and supervision for 21 primary CHAs.

Emergency medical services: training of volunteer emergency medical technicians, implementation of EMS system. EMS ambulance support: operational support for the Nome community ambulance.

Health clinic: assistance for a midlevel practitioner clinic at Unalakleet.

Eye care services: optometric screening, diagnosis, treatment, and referral services at Norton Sound Regional Hospital.

Home care services: personal care attendant and chore services provided to allow eligible clients to live safely at home.

Tuberculosis control and prevention program.

Component Goals and Strategies

The goals of the public health services component of the Norton Sound Health Corporation BRU are to reduce the incidence of preventable causes of illness, injury, disability, and death, and to mitigate social problems associated with public health problems.

Key Component Issues for FY2001 – 2002

Infant learning: On June 30, 2000 there were 18 children enrolled in the Infant learning program. This is the maximum number of children that can be served by 1 full time employee Coordinator/Teacher and 1 Full time employee Early Intervention Associate in a rural Infant learning program according to recommended caseload guidelines. In order to increase enrollment to 35, additional funding to hire professional staff and to fund additional travel to villages, facility costs and supplies would be required to serve additional children in the Norton Sound region. At this time, there are 11 children identified and on the waitlist for services and 28 children referred and awaiting eligibility determination.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.30
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: Increase the percentage of two year old children who are fully immunized so that all Public Health Nursing Centers meet or exceed the statewide average for children fully immunized.
(Not yet addressed by Legislature.)

Measure: Public health nursing: To increase to 400 the number of sexually transmitted disease clients screened by public health nurses.
(Not yet addressed by Legislature.)

Measure: Prematernal home: To increase to 90 the number of beds for women admitted to the prematernal home.
(Not yet addressed by Legislature.)

Measure: Prematernal home: To increase to 10 the number of beds for teens admitted to the prematernal home.
(Not yet addressed by Legislature.)

Measure: Audiology: To increase to 1,250 the number of comprehensive audiologic assessments performed.
(Not yet addressed by Legislature.)

Measure: Infant Learning: To increase to 35 the number of children enrolled in the infant learning program.
(Not yet addressed by Legislature.)

Measure: Community health aide training and supervision: To increase to 55 the number of CHAs completing training (including continuing medical education).
(Not yet addressed by Legislature.)

Measure: Community health aide training and supervision: To increase to 30 the number of supervisory contacts by health corporation personnel.
(Not yet addressed by Legislature.)

Measure: Emergency medical services: To increase to 50 the percent of level one communities with trained EMTs.
(Not yet addressed by Legislature.)

Measure: Emergency medical services: To increase to 40 the number of first aid and CPR courses taught.
(Not yet addressed by Legislature.)

Measure: EMS ambulance support: To continue providing financial and technical support for the maintenance of the Nome community ambulance.
(Not yet addressed by Legislature.)

Measure: Health clinic: To increase to 1,600 the number of patient encounters at the midlevel practitioner clinic in Unalakleet.
(Not yet addressed by Legislature.)

Measure: Eye care services: To increase to 1,500 the number of patient encounters.
(Not yet addressed by Legislature.)

Measure: Eye care services: To maintain at 16 the number of communities served.
(Not yet addressed by Legislature.)

Measure: Home care services: to provide services to non-Medicaid eligible clients and full operational support to enable Norton Sound Health Corporation to provide home care services to all clients clinically.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Increase the percentage of two year old children who are fully immunized so that all Public Health Nursing Centers meet or exceed the statewide average for children fully immunized for 4/3/1/3. 			X		
<ul style="list-style-type: none"> • Public health nursing: To increase to 400 the number of sexually transmitted disease clients screened by public health nurses. 		X			
<ul style="list-style-type: none"> • Prematernal home: To increase to 90 the number of beds for women admitted to the prematernal home. 		X			
<ul style="list-style-type: none"> • Prematernal home: To increase to 10 the number of beds for teens admitted to the prematernal home. 		X			
<ul style="list-style-type: none"> • Audiology: To increase to 1,250 the number of comprehensive audiologic assessments performed. 		X			
<ul style="list-style-type: none"> • Infant Learning: To increase to 35 the number of children enrolled in the infant learning program. 		X			
<ul style="list-style-type: none"> • Community health aide training and supervision: To increase to 55 the number of CHAs completing training (including continuing medical education). 		X			
<ul style="list-style-type: none"> • Community health aide training and supervision: To increase to 30 the number of supervisory contacts by health corporation personnel. 		X			
<ul style="list-style-type: none"> • Emergency medical services: To increase to 50 the percent of level one communities with trained EMTs. 		X			
<ul style="list-style-type: none"> • Emergency medical services: To increase to 40 the number of first aid and CPR courses taught. 		X			
<ul style="list-style-type: none"> • EMS ambulance support: To continue providing financial and technical support for the maintenance of the Nome community ambulance. 		X			
<ul style="list-style-type: none"> • Health clinic: To increase to 1,600 the number of patient encounters at the midlevel practitioner clinic in Unalakleet. 		X			
<ul style="list-style-type: none"> • Eye care services: To increase to 1,500 the number of patient encounters. 		X			
<ul style="list-style-type: none"> • Eye care services: To maintain at 16 the number of communities served. 		X			

Component — Norton Sound Public Health Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Home care services: to provide services to non-Medicaid eligible clients and full operational support to enable Norton Sound Health Corporation to provide home care services to all clients clinically. 		X			

Norton Sound Public Health Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,370.2	1,370.2	1,370.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,370.2	1,370.2	1,370.2
Funding Sources:			
1004 General Fund Receipts	1,271.9	1,271.9	1,271.9
1037 General Fund / Mental Health	98.3	98.3	98.3
Funding Totals	1,370.2	1,370.2	1,370.2

Norton Sound Public Health Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,370.2	0.0	0.0	1,370.2
FY2002 Governor	1,370.2	0.0	0.0	1,370.2

Component: Norton Sound Alcohol and Drug Abuse Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Substance abuse: residential alcohol treatment, outpatient counseling, education, patient followup care services, alcohol education; counseling and treatment for court referrals; drug abuse education and prevention services.

Component Goals and Strategies

The goals of the alcohol and drug abuse services component of the Norton Sound Health Corporation BRU are to provide treatment for alcohol and drug abuse problems and to increase public awareness of the dangers of alcohol and drug abuse.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

A major accomplishment was a transition to becoming an integrated behavioral health program. Community based services and outpatient services have been built up tremendously. The Alcohol and Drug Abuse component no longer provides inpatient services.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.30
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 44.29.100-150
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
AS 47.30.470-500
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: To increase to 33 the number of persons completing treatment plans.
(Not yet addressed by Legislature.)

Measure: To increase to 80 the percent of utilization of available beds in residential treatment settings.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• To increase to 33 the number of persons completing treatment plans.		X			
• To increase to 80 the percent of utilization of available beds in residential treatment settings.		X			

**Norton Sound Alcohol and Drug Abuse Services
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	540.0	522.4	590.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	540.0	522.4	590.0
Funding Sources:			
1004 General Fund Receipts	290.2	290.2	290.2
1007 Inter-Agency Receipts	17.6	0.0	67.6
1037 General Fund / Mental Health	232.2	232.2	232.2
Funding Totals	540.0	522.4	590.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	17.6	0.0	0.0	67.6	0.0
Restricted Total		17.6	0.0	0.0	67.6	0.0
Total Estimated Revenues		17.6	0.0	0.0	67.6	0.0

Norton Sound Alcohol and Drug Abuse Services

Proposed Changes in Levels of Service for FY2002

The Norton Sound Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	522.4	0.0	0.0	522.4
Proposed budget increases:				
-Restore Adult Statewide ASAP	0.0	0.0	67.6	67.6
FY2002 Governor	522.4	0.0	67.6	590.0

Component: Norton Sound Mental Health and Developmental Disabilities Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Community mental health center: outpatient and inpatient counseling, rehabilitation, and followup services for individuals experiencing active psychological problems.

Chronically mentally ill: outpatient medication, monitoring, and followup for individuals receiving care in the community.

Developmental disabilities: developmental care services for individuals with handicapping conditions in order that they may live as independently as possible outside of institutional settings.

Component Goals and Strategies

The goals of the mental health and developmental disabilities services component of the Norton Sound Health Corporation BRU are to maintain the level of mental health of individuals and to improve the functioning of developmentally disabled persons in the community.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.30
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.05.010
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560
7 AAC 71.010
7 AAC 78.010

Key Performance Measures for FY2002

Measure: Community mental health center: To increase to 235 the number of admissions to community mental health center services.
(Not yet addressed by Legislature.)

Measure: Community mental health center: To increase to 12,350 the number of hours of direct client services.
(Not yet addressed by Legislature.)

Measure: Chronically mentally ill: To increase to 5,200 the number of hours of service received by the chronically or severely mentally ill.
(Not yet addressed by Legislature.)

Measure: Developmental disabilities: To increase to 11 the number of clients receiving respite care.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Community mental health center: To increase to 235 the number of admissions to community mental health center services.		X			
• Community mental health center: To increase to 12,350 the number of hours of direct client services.		X			
• Chronically mentally ill: To increase to 5,200 the number of hours of service received by the chronically or severely mentally ill.		X			
• Developmental disabilities: To increase to 11 the number of clients receiving respite care.		X			

Norton Sound Mental Health and Developmental Disabilities Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	402.4	402.4	402.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	402.4	402.4	402.4
Funding Sources:			
1037 General Fund / Mental Health	402.4	402.4	402.4
Funding Totals	402.4	402.4	402.4

Norton Sound Mental Health and Developmental Disabilities Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	402.4	0.0	0.0	402.4
FY2002 Governor	402.4	0.0	0.0	402.4

Component: Norton Sound Sanitation

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Sanitation: Inspection of facilities and public services for public health and safety.

Component Goals and Strategies

The goal of the sanitation component of the Norton Sound Health Corporation BRU is to limit illnesses due to food-borne disease or inadequate sanitation in public facilities.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

AS 03.05.011 & 020
AS 16.03.140
AS 16.10.010
AS 17.20.010, 050, 180
AS 46.06.010-080
AS 47.05.010
18 AAC 30.100-990
18 AAC 31.005-490 & 990
AS 18.35.030, 120, 220, 310, 330,340, 350, 360
18 AAC 55.010-060 & 900
18 AAC 60.010-410 & 900-910
18 AAC 72.010.280 & 10-990
18 AAC 80.010-110 & 990
18 AAC 95.010-170 & 900

Key Performance Measures for FY2002

Measure: To increase to 131 the number of public facilities Inspections, investigations, and compliance referrals.

(Not yet addressed by Legislature.)

Measure: To limit to 10 the number of confirmed illnesses due to food-borne disease or inadequate sanitation in public facilities.

(Not yet addressed by Legislature.)

Measure: To maintain the number of food service facilities with critical violations at 20 percent of those inspected.

(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> To increase to 131 the number of public facilities Inspections, investigations, and compliance referrals. 		X			
<ul style="list-style-type: none"> To limit to 10 the number of confirmed illnesses due to food-borne disease or inadequate sanitation in public facilities. 		X			
<ul style="list-style-type: none"> To maintain the number of food service facilities with critical violations at 20 percent of those inspected. 		X			

Norton Sound Sanitation
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	96.3	96.3	96.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	96.3	96.3	96.3
Funding Sources:			
1004 General Fund Receipts	96.3	96.3	96.3
Funding Totals	96.3	96.3	96.3

Norton Sound Sanitation

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	96.3	0.0	0.0	96.3
FY2002 Governor	96.3	0.0	0.0	96.3

Southeast Alaska Regional Health Consortium Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

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BRU Mission

To provide the highest quality health services in partnership with Native people.

BRU Services Provided

This BRU was established in FY 89 to consolidate selected health and social services grants administered by the Southeast Alaska Regional Health Consortium (SEARHC). These services are administered in accordance with 7 AAC 78.010-320. The programs supported by the BRU are:

Public health component: Community health aide training and supervision - basic and continuing medical education and supervision for 22 community health aides in the Southeast region in accordance with AS 18.28.010.

Alcohol and drug abuse component: Rural substance abuse - substance abuse treatment and prevention services for the rural communities of Klukwan, Haines, Kake, Angoon, and Yakutat. Raven's Way - residential alcohol treatment services are provided to adolescents from all regions of the state.

Mental health services component: Community mental health services - mental health counseling, aftercare, outreach, education, prevention, and community development in the rural communities of Southeast Alaska.

BRU Goals and Strategies

See component levels.

Key BRU Issues for FY2001 – 2002

Level funding will reduce our ability to provide medical and behavioral health services to the villages we serve.

Major BRU Accomplishments for FY2000

No major accomplishments.

Key Performance Measures for FY2002

Measure: Rural substance abuse: To increase to 24 the number of community meetings regarding alcohol/drug use and abuse.
(Not yet addressed by Legislature.)

Measure: Rural substance abuse: To increase to 50 the number of clients completing treatment plans on an outpatient basis.
(Not yet addressed by Legislature.)

Measure: Raven's Way: To increase to 12 the number of youth admitted to treatment.
(Not yet addressed by Legislature.)

Measure: Raven's Way: To increase to 10 the number of youth completing treatment plans.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Rural substance abuse: To increase to 24 the number of community meetings regarding alcohol/drug use and abuse.			X		
• Rural substance abuse: To increase to 50 the number of clients completing treatment plans on an outpatient basis.			X		
• Raven's Way: To increase to 12 the number of youth admitted to treatment.			X		
• Raven's Way: To increase to 10 the number of youth completing treatment plans.			X		

Southeast Alaska Regional Health Consortium

BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
SEARHC Public Health Svcs	120.1	0.0	0.0	120.1	120.1	0.0	0.0	120.1	120.1	0.0	0.0	120.1
SEARHC Alcohol & Drug Abuse Svcs	320.4	0.0	11.0	331.4	320.4	0.0	0.0	320.4	320.4	0.0	11.0	331.4
SEARHC Mental Health Services	125.2	0.0	0.0	125.2	125.2	0.0	0.0	125.2	125.2	0.0	0.0	125.2
Totals	565.7	0.0	11.0	576.7	565.7	0.0	0.0	565.7	565.7	0.0	11.0	576.7

Southeast Alaska Regional Health Consortium

Proposed Changes in Levels of Service for FY2002

The SEARHC Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Southeast Alaska Regional Health Consortium

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	565.7	0.0	0.0	565.7
Proposed budget increases:				
-SEARHC Alcohol & Drug Abuse Svcs	0.0	0.0	11.0	11.0
FY2002 Governor	565.7	0.0	11.0	576.7

Component: Southeast Alaska Regional Health Consortium Public Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Community health aide training and supervision: Basic and continuing medical education and supervision for 22 community health aides in the Southeast region in accordance with AS 18.28.010.

Component Goals and Strategies

The goal of the public health component of the SEARHC BRU is to assure the availability of community-based preventive and medical services.

Key Component Issues for FY2001 – 2002

To address the needs of rural patients and their families dealing with diabetes and/or cancer through in-service training for community health aides.

Major Component Accomplishments for FY2000

Advanced four Community Health Aides to Emergency Medical Technician III level.

Provide advanced training in PALS (pediatric advanced life support) and other emergency skills to seven Community Health Aides.

Maintained midlevel provider services to all SEARHC Community Health Aide Program communities either on site or on an itinerant basis.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05..010-.070
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
7 AA C 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: Maintain or increase the number of training courses provided to, and supervisory contacts with, community health aides and community health practitioners.
(Not yet addressed by Legislature.)

Current Status:

During FY 99, the CHATS grant program supported 63 training courses directly related to the provision of community health aide services predominantly in rural areas where more advanced medical personnel are unavailable. During FY99, CHATS grant funds helped support over 1,500 training courses and over 11,000 supervisory contacts to CHA/Ps employed by the Southeast Regional Health Consortium.

Background and Strategies:

The CHATS grant program provides funds for training and supervision of CHA/Ps. CHA/Ps are located predominantly in rural areas where more advanced medical personnel are unavailable. During FY99, CHATS grant funds helped support over 1,500 training courses and over 11,000 supervisory contacts to CHA/Ps statewide.

Measure: To increase to 44 the number of community health aides completing training (including continuing medical education).
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Maintain or increase the number of training courses provided to, and supervisory contacts with, community health aides and community health practitioners. 		X			
<ul style="list-style-type: none"> To increase to 44 the number of community health aides completing training (including continuing medical education). 		X			

Southeast Alaska Regional Health Consortium Public Health Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	120.1	120.1	120.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	120.1	120.1	120.1
Funding Sources:			
1004 General Fund Receipts	120.1	120.1	120.1
Funding Totals	120.1	120.1	120.1

Southeast Alaska Regional Health Consortium Public Health Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	120.1	0.0	0.0	120.1
FY2002 Governor	120.1	0.0	0.0	120.1

Component: Southeast Alaska Regional Health Consortium Alcohol and Drug Abuse

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To provide village based substance abuse services as a component to the continuum of care for those suffering from substance abuse.

Component Services Provided

Rural substance abuse: Substance abuse treatment and prevention services for the rural communities of Klukwan, Haines, Kake, Hoonah, Angoon, and Yakutat.

Raven's Way: Residential alcohol treatment services are provided to adolescents from all regions of the state.

Component Goals and Strategies

The goals of the alcohol and drug abuse component of the Southeast Alaska Regional Health Consortium BRU are to provide treatment for alcohol and drug abuse problems and to increase public awareness of the dangers of alcohol and drug abuse.

Key Component Issues for FY2001 – 2002

Level funding with no increases for 12 years have resulted in us dropping village-based services to 3 communities and reducing production efforts in existing communities. We also have patient beds in Raven's Way.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.010-.070
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 44.29.100-150
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
AS 47.30.470-500
AS 47.37.010-270
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: Rural substance abuse: To increase to 24 the number of community meetings regarding alcohol/drug use and abuse.
(Not yet addressed by Legislature.)

Measure: Rural substance abuse: To increase to 50 the number of clients completing treatment plans on an outpatient basis.
(Not yet addressed by Legislature.)

Measure: Raven's Way: To increase to 12 the number of youth admitted to treatment.
(Not yet addressed by Legislature.)

Measure: Raven's Way: To increase to 10 the number of youth completing treatment plans.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Rural substance abuse: To increase to 24 the number of community meetings regarding alcohol/drug use and abuse.		X			
• Rural substance abuse: To increase to 50 the number of clients completing treatment plans on an outpatient basis.		X			
• Raven's Way: To increase to 12 the number of youth admitted to treatment.		X			
• Raven's Way: To increase to 10 the number of youth completing treatment plans.		X			

Southeast Alaska Regional Health Consortium Alcohol and Drug Abuse

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	331.4	320.4	331.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	331.4	320.4	331.4
Funding Sources:			
1004 General Fund Receipts	179.8	179.8	179.8
1007 Inter-Agency Receipts	11.0	0.0	11.0
1037 General Fund / Mental Health	140.6	140.6	140.6
Funding Totals	331.4	320.4	331.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	11.0	0.0	0.0	11.0	0.0
Restricted Total		11.0	0.0	0.0	11.0	0.0
Total Estimated Revenues		11.0	0.0	0.0	11.0	0.0

Southeast Alaska Regional Health Consortium Alcohol and Drug Abuse

Proposed Changes in Levels of Service for FY2002

The SEARHC Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	320.4	0.0	0.0	320.4
Proposed budget increases:				
-Increase Interagency Receipt Authority	0.0	0.0	11.0	11.0
FY2002 Governor	320.4	0.0	11.0	331.4

Component: Southeast Alaska Regional Health Consortium Mental Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To provide village based mental health services to enhance the health status of village residents.

Component Services Provided

Community mental health services: Mental health counseling, aftercare, outreach, education, prevention, and community development in the rural communities of Southeast Alaska.

Component Goals and Strategies

The goal of the mental health services component of the Southeast Alaska Regional Health Consortium BRU is to maintain the level of mental health of individuals.

Key Component Issues for FY2001 – 2002

Level funding does not keep pace with inflation.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

AS 18.05.010-.070
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050

Key Performance Measures for FY2002

Measure: To increase to 500 the number of contacts with community family service workers for mental health counseling services.
(Not yet addressed by Legislature.)

Measure: To increase to 10 the number of presentations provided in communities on mental health prevention/education issues.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> To increase to 500 the number of contacts with community family service workers for mental health counseling services. 		X			
<ul style="list-style-type: none"> To increase to 10 the number of presentations provided in communities on mental health prevention/education issues. 		X			

Southeast Alaska Regional Health Consortium Mental Health Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	125.2	125.2	125.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	125.2	125.2	125.2
Funding Sources:			
1037 General Fund / Mental Health	125.2	125.2	125.2
Funding Totals	125.2	125.2	125.2

Southeast Alaska Regional Health Consortium Mental Health Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	125.2	0.0	0.0	125.2
FY2002 Governor	125.2	0.0	0.0	125.2

BRU/Component: Kawerak Social Services

(There is only one component in this BRU. To reduce duplicate information, we did not print a separate BRU section.)

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Kawerak Social Services provides case planning and management for child protection referrals received from the Division of Family & Youth Services. Case workers participate in multi-disciplinary case staff meetings and review hearings necessary to move their clients toward case closure.

Kawerak Social Services strives to service emergency, short and long term relative or foster home placements within the Bering Strait region. They actively recruit, evaluate, and train foster parents and provide services pertaining to permanent placements such as guardianships and adoptions.

Component Goals and Strategies

TO REDUCE THE INCIDENCE OF CHILD ABUSE AND NEGLECT WITHIN THE BERING STRAIT REGION WHILE ALSO SEEKING PERMANENT PLACEMENT FOR CHILDREN IN NEED.

- Provide child protective services
- Recruit foster homes
- Evaluate foster parents
- Train foster parents
- Provide services pertaining to guardianships and adoptions

Key Component Issues for FY2001 – 2002

Kawerak works in partnership with the Division of Family & Youth Services in providing quality social services directed at child protection and promoting family stability in the Bering Straits region.

Major Component Accomplishments for FY2000

- 1) Provided culturally relevant child protective services through direct family intervention and case management services
- 2) Provided a foster care program for children of the Bering Strait region who are in state custody
- 3) Recruited adoptive homes and provided other adoption services

Statutory and Regulatory Authority

AS 37.053.316
Ch 99/SLA 98

Key Performance Measures for FY2002

Measure: This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU. 			X		

Kawerak Social Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	372.7	372.7	372.7
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	372.7	372.7	372.7
Funding Sources:			
1004 General Fund Receipts	372.7	372.7	372.7
Funding Totals	372.7	372.7	372.7

Kawerak Social Services

Proposed Changes in Levels of Service for FY2002

None

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	372.7	0.0	0.0	372.7
FY2002 Governor	372.7	0.0	0.0	372.7

Tanana Chiefs Conference Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_Clarke@health.state.ak.us

BRU Mission

A unified voice advancing tribal governments, economic/social development, educational opportunities and protecting traditional/cultural values.

BRU Services Provided

This BRU was established in FY 86 to consolidate selected health and social services grants administered by the Tanana Chiefs Conference and through a mutual agreement with the Council of Athabascan Tribal Governments. Services are administered in accordance with 7 AAC 78.010-320. The programs supported by this BRU are:

Public health services component: community health aide training and supervision.

Alcohol and drug abuse services component: comprehensive alcohol program, regional drug abuse prevention, recovery camps.

Mental health services component: community mental health centers, chronically mentally ill, fetal alcohol syndrome.

BRU Goals and Strategies

- *Assist all chronically mentally ill patients in their home communities.
- *Provide itinerant services for each sub-regional community.
- *Provide aftercare services to maintain gains made by clients while in inpatient treatment.

Key BRU Issues for FY2001 – 2002

See component levels.

Major BRU Accomplishments for FY2000

- *Completed strategic planning process for each individual program of Tanana Chiefs Conference Mental Health and Alcohol programs.
- *Completed incidence of FAS/FAE study with University of Fairbanks for the Circle of Care project.

Tanana Chiefs Conference
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
TCC Public Health Svcs	239.3	0.0	0.0	239.3	239.3	0.0	0.0	239.3	239.3	0.0	0.0	239.3
TCC Alcohol & Drug Abuse Svcs	481.0	0.0	16.5	497.5	481.0	0.0	0.0	481.0	481.0	0.0	16.5	497.5
TCC Mental Health Svcs	534.8	0.0	0.0	534.8	534.8	0.0	0.0	534.8	534.8	0.0	0.0	534.8
Totals	1,255.1	0.0	16.5	1,271.6	1,255.1	0.0	0.0	1,255.1	1,255.1	0.0	16.5	1,271.6

Tanana Chiefs Conference

Proposed Changes in Levels of Service for FY2002

The Tanana Chiefs Conference Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Tanana Chiefs Conference

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,255.1	0.0	0.0	1,255.1
Proposed budget increases:				
-TCC Alcohol & Drug Abuse Svcs	0.0	0.0	16.5	16.5
FY2002 Governor	1,255.1	0.0	16.5	1,271.6

Component: Tanana Chiefs Conference Public Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Community health aide training and supervision: basic and continuing medical education and supervision of 45 community health aides in the Tanana region in accordance with AS 18.28.010

Component Goals and Strategies

The goal of the public health component of the Tanana Chiefs Conference BRU is to assure the availability and quality of community-based preventive and medical services.

Key Component Issues for FY2001 – 2002

No Key Issues.

Major Component Accomplishments for FY2000

Andrew Issac Health Center; Tanana Chiefs Eye Clinic; Tanana Chiefs Dental Clinic; Rural Health Services and Tanana Chiefs Counseling Center completed program review and achieved Joint Commission of Accreditation for Healthcare Organizations Network Accreditation.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.010-.070
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: Maintain or increase the number of training courses provided to, and supervisory contacts with, community health aides and community health practitioners (CHA/Ps).
(Not yet addressed by Legislature.)

Current Status:

During FY99, the CHATS grant program support 104 training courses directly to the provision of community health aide services and over 2,500 supervisory contacts to CHA/Ps employed by the Tanana Chiefs Conference.

Background and Strategies:

The CHATS grant program provides funds for training and supervision of CHA/Ps. CHA/Ps are located predominantly in rural areas where more advanced medical personnel are unavailable. During FY99, CHATS grant funds help support over 1,500 training courses and over 11,000 supervisory contacts to CHA/Ps statewide.

Measure: To increase to 85 the number of community health aides completing training (including medical education).
(Not yet addressed by Legislature.)

Measure: To increase to 50 the number of supervisory contacts by health corporation personnel.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Maintain or increase the number of training courses provided to, and supervisory contacts with, community health aides and community health practitioners (CHA/Ps). 		X			
<ul style="list-style-type: none"> To increase to 85 the number of community health aides completing training (including medical education). 		X			
<ul style="list-style-type: none"> To increase to 50 the number of supervisory contacts by health corporation personnel. 		X			

Tanana Chiefs Conference Public Health Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	239.3	239.3	239.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	239.3	239.3	239.3
Funding Sources:			
1004 General Fund Receipts	239.3	239.3	239.3
Funding Totals	239.3	239.3	239.3

Tanana Chiefs Conference Public Health Services
Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	239.3	0.0	0.0	239.3
FY2002 Governor	239.3	0.0	0.0	239.3

Component: Tanana Chiefs Conference Alcohol and Drug Abuse Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Comprehensive alcohol program: regional alcohol counseling and education services.

Regional drug abuse prevention: drug abuse education and counseling services for the Tanana region.

Recovery camps: substance abuse treatment for chronic alcoholics and their family members in a subsistence environment.

Component Goals and Strategies

The goals of the alcohol and drug abuse services component of the Tanana Chiefs Conference BRU are to provide treatment for alcohol and drug abuse problems and to increase public awareness of the dangers of alcohol and drug abuse.

Key Component Issues for FY2001 – 2002

Made new, revised or updated strategic plans for all programs.

Major Component Accomplishments for FY2000

Key counseling staff positions were filled.
Staff development, training and certification accomplished.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.30
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 44.29.100-150
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
AS 47.30.470-500
AS 47.37.010-270
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: Comprehensive alcohol program: To increase to 165 the number of persons admitted to treatment on an outpatient basis.
(Not yet addressed by Legislature.)

Measure: Comprehensive alcohol program: To increase to 70 the number of persons completing treatment plans on an outpatient basis.
(Not yet addressed by Legislature.)

Measure: Regional drug abuse prevention: To increase to 15 the number of village visits.
(Not yet addressed by Legislature.)

Measure: Regional drug abuse prevention: To increase to 250 the number of participants in educational presentations on substance abuse.
(Not yet addressed by Legislature.)

Measure: Recovery camps: To increase to 20 the number of persons admitted to treatment at family recovery camps.
(Not yet addressed by Legislature.)

Measure: Recovery camps: To increase to 15 the number of persons completing treatment at family recovery camps.
(Not yet addressed by Legislature.)

Measure: *This component is currently developing a new reporting system with measures that will help both grantee and department in tracking progress of programs.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Comprehensive alcohol program: To increase to 165 the number of persons admitted to treatment on an outpatient basis.		X			
• Comprehensive alcohol program: To increase to 70 the number of persons completing treatment plans on an outpatient basis.		X			
• Regional drug abuse prevention: To increase to 15 the number of village visits.		X			
• Regional drug abuse prevention: To increase to 250 the number of participants in educational presentations on substance abuse.		X			
• Recovery camps: To increase to 20 the number of persons admitted to treatment at family recovery camps.		X			
• Recovery camps: To increase to 15 the number of persons completing treatment at family recovery camps.		X			

Component — Tanana Chiefs Conference Alcohol and Drug Abuse Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> *This component is currently developing a new reporting system with measures that will help both grantee and department in tracking progress of programs. 		X			

**Tanana Chiefs Conference Alcohol and Drug Abuse Services
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.6	0.6	0.6
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	496.9	480.4	496.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	497.5	481.0	497.5
Funding Sources:			
1004 General Fund Receipts	278.6	278.6	278.6
1007 Inter-Agency Receipts	16.5	0.0	16.5
1037 General Fund / Mental Health	202.4	202.4	202.4
Funding Totals	497.5	481.0	497.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	16.5	0.0	0.0	16.5	0.0
Restricted Total		16.5	0.0	0.0	16.5	0.0
Total Estimated Revenues		16.5	0.0	0.0	16.5	0.0

Tanana Chiefs Conference Alcohol and Drug Abuse Services

Proposed Changes in Levels of Service for FY2002

The Tanana Chiefs Conference Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	481.0	0.0	0.0	481.0
Proposed budget increases:				
-Increase Interagency Receipt Authority	0.0	0.0	16.5	16.5
FY2002 Governor	481.0	0.0	16.5	497.5

Component: Tanana Chiefs Conference Mental Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

See BRU Level.

Component Services Provided

Community mental health centers: psychiatric emergency services, prehospitalization screening and evaluation, outpatient care and follow-up.

Chronically mentally ill: regional case management services through monitoring and follow-up for the chronically mentally ill, including medication control, referral to inpatient care, day treatment, and assistance to families in developing appropriate support services.

Fetal alcohol syndrome: services benefiting individuals experiencing FAS/FAE.

Component Goals and Strategies

The goals of the mental health services component of the Tanana Chiefs Conference BRU are to maintain the level of mental health of individuals and to provide support to persons suffering from fetal alcohol syndrome (FAS) and fetal alcohol effects (FAE).

Key Component Issues for FY2001 – 2002

No key issues.

Major Component Accomplishments for FY2000

Circles of core strategic planning process for development of a service system for seriously emotionally disturbed youth have been completed and the Cheghuten project has been funded by SAMSHA.

Provided itinerant services and assisted all chronically mentally ill patients in their home communities.

Provided prevention and community education workshops in schools and communities as requested.

Maintained evaluation capability for involuntary commitments.

Provided aftercare services to maintain gains made by clients while in inpatient treatment.

Statutory and Regulatory Authority

AS 18.05.010-.070

AS 18.08.10 & 080

AS 18.25.040-080

AS 18.28.010-100

AS 44.29.020

AS 47.07.010 & 030

AS 47.17.101

AS 47.20.005-050

Key Performance Measures for FY2002

Measure: Community mental health center: To increase to 94 the number of admissions to community mental health center services.
(Not yet addressed by Legislature.)

Measure: Community mental health center: To increase to 910 the number of hours of direct client services.
(Not yet addressed by Legislature.)

Measure: Chronically mentally ill: To increase to 130 the number of hours of services received by the chronically or severely mentally ill.
(Not yet addressed by Legislature.)

Measure: Fetal alcohol syndrome: To maintain at 23 the number of fetal alcohol syndrome clients served.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Community mental health center: To increase to 94 the number of admissions to community mental health center services.		X			
• Community mental health center: To increase to 910 the number of hours of direct client services.		X			
• Chronically mentally ill: To increase to 130 the number of hours of services received by the chronically or severely mentally ill.		X			
• Fetal alcohol syndrome: To maintain at 23 the number of fetal alcohol syndrome clients served.		X			

Tanana Chiefs Conference Mental Health Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.6	0.6	0.6
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	534.2	534.2	534.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	534.8	534.8	534.8
Funding Sources:			
1037 General Fund / Mental Health	534.8	534.8	534.8
Funding Totals	534.8	534.8	534.8

Tanana Chiefs Conference Mental Health Services
Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	534.8	0.0	0.0	534.8
FY2002 Governor	534.8	0.0	0.0	534.8

Tlingit-Haida Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services
Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

BRU Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

BRU Services Provided

Providing on-site social services in the Southeast Tlingit and Haida communities of Haines, Petersburg, Wrangell, Craig, Klawock, and Saxman. The services include educational activities to prevent child abuse and neglect, early intervention in instances where abuse or neglect has occurred, working with the Division of Family & Youth Services if out-of-home placement becomes necessary and assisting in family reunification.

Other services may include, but are not limited to, assisting communities in assessing and addressing their unique population needs and intensifying outreach programs, providing regular and on-going prevention services, and increasing cooperation between tribal and state workers in order to accomplish the referenced multi-disciplinary objectives.

Providing early intervention services through the "Safety Bear" program that targets young children between 3 and 10 years of age in the Southeast Tlingit-Haida communities of Hydaburg, Kasaan, Kake, Craig, Klawock, and Hoonah. Other Southeast communities that have been included in the program through participation in health fairs are Yakutat, Thorne Bay, and Juneau.

The alcohol and drug abuse service programs include the local Village Public Safety Officers, who are trained to co-teach this program with those individuals who use the bear suit.

BRU Goals and Strategies

- 1) Reducing geographic isolation through the placement of on-site social worker staff who provide regular and on-going prevention and early intervention services.
- 2) Reducing cultural isolation by employing social workers who are knowledgeable and experienced in the life and cultures of the Tlingit and Haida people, and by separating the function of investigation and treatment.
- 3) Opening communication between the non-native and rural communities enabling smooth cultural transitions.
- 4) Reducing the number of out-of-home placements of native children and hastening the return of those children to their home or that of a relative.
- 5) Increasing workers' knowledge and expertise by increasing worker training opportunities.
- 6) Assisting families and tribal communities in achieving and maintaining self-sufficiency and well-being by making appropriate human services available.

Key BRU Issues for FY2001 – 2002

Tlingit and Haida Social Services works in partnership with the Division of Family & Youth Services in providing quality social services directed at child protection and promoting family stability in the Southeast region.

Tlingit and Haida Social Services works in partnership with the Division of Family & Youth Services in providing alcohol and drug abuse early intervention programs.

Major BRU Accomplishments for FY2000

- 1) Provided child protective services through direct family intervention and case management services.
- 2) Provided a foster care program for children in southeast Tlingit and Haida communities who are in state custody.
- 3) Provided adoption and guardianship services for children in southeast Tlingit and Haida communities who are in state custody.
- 4) Presented the "safety bear" program to twelve communities for kindergarten through 4th grade along with the presence of the village public safety officer.
- 5) Participated in health fairs in Yakutat, Hoonah, Thorne Bay, and Juneau.
- 6) Trained village public safety officers to co-teach the program with those trained in using the bear suit.

Key Performance Measures for FY2002

Measure: This BRU is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU's.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • This BRU is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU's. 			X		

Tlingit-Haida
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
T-H Social Services	186.6	0.0	0.0	186.6	186.6	0.0	0.0	186.6	186.6	0.0	0.0	186.6
T-H Alcohol & Drug Abuse Svcs	11.8	0.0	0.0	11.8	11.9	0.0	0.0	11.9	11.9	0.0	0.0	11.9
Totals	198.4	0.0	0.0	198.4	198.5	0.0	0.0	198.5	198.5	0.0	0.0	198.5

Tlingit-Haida**Proposed Changes in Levels of Service for FY2002**

There are no proposed changes for this BRU for FY2002. However, the Department has submitted an FY2002 increment request in the Family Preservation component to increase Federal authority to implement a Federal Title IVE Tribal Pass Through project. DFYS has been working with four tribal organizations including Kawerak, Tlingit-Haida Central Council, Tanana Chiefs Conference, and Cook Inlet Tribal Council to assist them in receiving Federal Title IVE reimbursement for Indian child welfare services.

Tlingit-Haida**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	198.5	0.0	0.0	198.5
FY2002 Governor	198.5	0.0	0.0	198.5

Component: Tlingit-Haida Social Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Providing on-site social services in the Southeast Tlingit and Haida communities of Haines, Petersburg, Wrangell, Craig, Klawock, and Saxman. The services include educational activities to prevent child abuse and neglect, early intervention in instances where abuse or neglect has occurred, working with the Division of Family & Youth Services if out-of-home placement becomes necessary and assisting in family reunification.

Other services may include, but are not limited to, assisting communities in assessing and addressing their unique population needs and intensifying outreach programs, providing regular and on-going prevention services, and increasing cooperation between tribal and state workers in order to accomplish the referenced multi-disciplinary objectives.

Component Goals and Strategies

PROVIDING SOCIAL SERVICES TO THE SOUTHEAST TLINGIT AND HAIDA COMMUNITIES.

- Monitoring and reporting child abuse and neglect
- Recruiting and supervising foster homes and relative homes
- Supervising placement in foster homes and in alternative care situations
- Providing counseling referral services
- Assisting community organizations to effect social improvements and prevention programs

Key Component Issues for FY2001 – 2002

Tlingit and Haida Social Services works in partnership with the Division of Family & Youth Services in providing quality social services directed at child protection and promoting family stability in the Southeast region.

Major Component Accomplishments for FY2000

- 1) Provided child protective services through direct family intervention and case management services.
- 2) Provided a foster care program for children in southeast Tlingit and Haida communities who are in state custody.
- 3) Provided adoption and guardianship services for children in southeast Tlingit and Haida communities who are in state custody.

Statutory and Regulatory Authority

AS 37.05.316

Key Performance Measures for FY2002

Measure: This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> This component is for pass through funds and the performance measures for the Division of Family and Youth Services is set up under the Purchased Services and the Family and Youth Services BRU. 			X		

Tlingit-Haida Social Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	186.6	186.6	186.6
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	186.6	186.6	186.6
Funding Sources:			
1004 General Fund Receipts	186.6	186.6	186.6
Funding Totals	186.6	186.6	186.6

Tlingit-Haida Social Services
Proposed Changes in Levels of Service for FY2002

None

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	186.6	0.0	0.0	186.6
FY2002 Governor	186.6	0.0	0.0	186.6

Component: Tlingit-Haida Alcohol and Drug Abuse Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

The mission of the Division of Family and Youth Services is to protect children who are abused and neglected or at risk of abuse and neglect.

Component Services Provided

Providing early intervention services through the "Safety Bear" program that targets young children between 3 and 10 years of age in the Southeast Tlingit-Haida communities of Hydaburg, Kasaan, Kake, Craig, Klawock, and Hoonah. Other Southeast communities that have been included in the program through participation in health fairs are Yakutat, Thorne Bay, and Juneau.

The alcohol and drug abuse service programs include the local Village Public Safety Officers, who are trained to co-teach this program with those individuals who use the bear suit.

Component Goals and Strategies

TO PROVIDE ALCOHOL AND DRUG ABUSE SERVICES TO THE SOUTHEAST TLINGIT AND HAIDA COMMUNITIES

-Providing "Safety Bear" program visits to community schools

Key Component Issues for FY2001 – 2002

Tlingit and Haida Social Services works in partnership with the Division of Family & Youth Services in providing alcohol and drug abuse early intervention programs.

Major Component Accomplishments for FY2000

- 1) Presented the "Safety Bear" program to twelve communities for kindergarten through 4th grade along with the presence of the Village Public Safety Officer
- 2) Participated in health fairs in Yakutat, Hoonah, Thorne Bay, and Juneau
- 3) Trained Village Public Safety Officers to co-teach the program with those trained in using the bear suit

Statutory and Regulatory Authority

AS 37.05.316

Key Performance Measures for FY2002

Measure: This component is for pass through funds and the performance measures for the Division of Family and Youth Services are set up under the Purchased Services and the Front Line Social Workers BRU.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> This component is for pass through funds and the performance measures for the Division of Family and Youth Services is set up under the Purchased Services and the Family and Youth Services BRU. 			X		

Tlingit-Haida Alcohol and Drug Abuse Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	11.8	11.9	11.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	11.8	11.9	11.9
Funding Sources:			
1004 General Fund Receipts	5.9	5.9	5.9
1037 General Fund / Mental Health	5.9	6.0	6.0
Funding Totals	11.8	11.9	11.9

Tlingit-Haida Alcohol and Drug Abuse Services
Proposed Changes in Levels of Service for FY2002

None

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	11.9	0.0	0.0	11.9
FY2002 Governor	11.9	0.0	0.0	11.9

Yukon-Kuskokwim Health Corporation Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

BRU Mission

The mission of the Yukon-Kuskokwim Health Corporation is to achieve the greatest possible improvement in the health status of the people of the Yukon-Kuskokwim Delta Region of Alaska. We are committed to the development of culturally relevant programs for primary care, prevention and health promotion in a setting that fosters Native self-determination in the control and management of health delivery.

BRU Services Provided

This BRU was established in FY 89 to consolidate health and social services grants administered by the Yukon-Kuskokwim Health Corporation. Services are administered in accordance with 7 AAC 78.010-320. Programs supported by the BRU are:

Public health services component: community health aide training and supervision, emergency medical services, injury prevention.

Alcohol/drug abuse services component: regional ADA, Phillips Ayagnirvik (alcohol treatment center), Bethel alcohol safety action program, youth substance abuse.

Mental health services component: general mental health services, community support program, crisis respite center and emergency services.

BRU Goals and Strategies

Provide services as close to home as possible. Home villages are accessible only by air or by boat, and access to basic services is therefore extremely limited.

Enhance basic health services, such as well child exams, immunizations, women's health services, mental health screenings, and substance abuse counseling in the villages.

Facilitate community-based support and training of community members to provide a base for healthy living.

Key BRU Issues for FY2001 – 2002

The Yukon-Kuskokwim Health Corporation is essentially the sole health provider for 25,000 people living in isolated communities in an area of 80,000 square miles.

Access to care is impacted by distance and transportation on a daily basis.

Crowded living conditions, lack of basic sanitation facilities, lack of employment opportunities, low per capita income, and high cost of living all impact health status.

Major BRU Accomplishments for FY2000

JCAHO Accreditation of all programs.

Provision of well child services in 15 villages.

Implementation of Behavioral Health programs, integrating village and Bethel based services through regional teams.

**Yukon-Kuskokwim Health Corporation
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
Y-K Public Health Svcs	907.4	0.0	0.0	907.4	907.4	0.0	0.0	907.4	907.4	0.0	0.0	907.4
Y-K Alcohol & Drug Abuse Svcs	927.4	0.0	31.9	959.3	927.4	0.0	0.0	927.4	927.4	0.0	81.9	1,009.3
Y-K Mental Health Svcs	907.4	0.0	0.0	907.4	907.4	0.0	0.0	907.4	907.4	0.0	0.0	907.4
Totals	2,742.2	0.0	31.9	2,774.1	2,742.2	0.0	0.0	2,742.2	2,742.2	0.0	81.9	2,824.1

Yukon-Kuskokwim Health Corporation

Proposed Changes in Levels of Service for FY2002

The Yukon Kuskokwim Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Yukon-Kuskokwim Health Corporation

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,742.2	0.0	0.0	2,742.2
Proposed budget increases:				
-Y-K Alcohol & Drug Abuse Svcs	0.0	0.0	81.9	81.9
FY2002 Governor	2,742.2	0.0	81.9	2,824.1

Component: Yukon-Kuskokwim Health Corporation Public Health Services

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Community Health Aide Program (CHAP) is to provide access, for all Yukon-Kuskokwim Delta residents, to quality village-based primary and secondary health care. This mission is accomplished through Community Health Aides/Practitioners to provide preventative, acute and chronic care for all residents of this region.

Component Services Provided

Community health aide training and supervision: basic and continuing education and field supervision services are provided for 73 community health aides as prescribed by AS 18.28.010.

Emergency medical services: training and support for volunteer emergency medical technicians and emergency trauma technicians, and implementation of a comprehensive EMS system.

Component Goals and Strategies

The goals of the public health services component of the Yukon-Kuskokwim Health Corporation BRU are to assure the availability and quality of community-based preventive and medical services and to reduce the incidence of accidental injury and death or injury.

The Yukon-Kuskokwim Health Corporation Board of Directors has mandated that all levels of service be provided in closer proximity to the villages in a region the size of the state of Oregon but not connected by road. These indigenous people at times do not seek care for chronic or potentially life threatening health issues until the problem becomes critical.

Enhanced basic and advanced track training's in well child and women's health issues are moving more of those basic services to the point of service.

Emergency medical services training services greatly enhances the first responder capabilities to those communities as well.

Key Component Issues for FY2001 – 2002

Continue well child and women's health advance track training, Emergency Trauma Technician training on the village level for local Search and Rescue Team members to enhance first responder capabilities in the village and in the field.

Major Component Accomplishments for FY2000

To maintain community health aide training supervisory contacts at the current rate of 250 per year or greater.

To increase village based service by coordinating with the local Search and Rescue groups and training those team members as emergency Trauma Technicians.

Injury Prevention will continue to provide preventative education and hands-on services to the 47 villages served on the Yukon-Kuskokwim Delta.

Well child and women's health advance community health aide training will continue to expand in more communities and with more participating health aides.

Statutory and Regulatory Authority

AS 14.30.127
AS 18.05.30
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.07.010 & 030
AS 47.17.101
AS 47.20.005-050
7 AAC 13.010
7 AAC 27.110
7 AAC 27.510-560

Key Performance Measures for FY2002

Measure: Maintain or increase the number of training courses provided to, and supervisory contacts with, community health aides and community health practitioners (CHA/Ps).
(Not yet addressed by Legislature.)

Current Status:

During FY99, the CHATS grant program supported 720 training courses directly related to the provision of community health aide services and over 700 supervisory contacts to CHA/Ps employed by the Yukon Kuskokwim Health Corporation.

Background and Strategies:

The CHATS grant program provides funds for training and supervision of CHA/Ps. CHA/Ps are located predominantly in rural areas where more advanced medical personnel are unavailable. During FY99, CHATS grant funds help support over 1,500 training courses and over 11,000 supervisory contacts to CHA/Ps statewide.

Measure: Community health aide training and supervision: To increase to 160 the number of community health aides completing training (including continuing medical training).
(Not yet addressed by Legislature.)

Measure: Community health aide training and supervision: To increase to 250 the number of supervisory contacts by health corporation personnel.
(Not yet addressed by Legislature.)

Measure: Emergency medical services: To increase to 15 the percent of level one communities with trained Emergency Medical Technicians I.
(Not yet addressed by Legislature.)

Measure: Emergency medical services: To increase to 90 the number of first aid and CPR courses taught.
(Not yet addressed by Legislature.)

Measure: Injury prevention: To continue to provide injury prevention training to the 48 villages in the Yukon-Kuskokwim Delta.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Maintain or increase the number of training courses provided to, and supervisory contacts with, community health aides and community health practitioners (CHA/Ps). 		X			
<ul style="list-style-type: none"> Community health aide training and supervision: To increase to 160 the number of community health aides completing training (including continuing medical training). 		X			
<ul style="list-style-type: none"> Community health aide training and supervision: To increase to 250 the number of supervisory contacts by health corporation personnel. 		X			
<ul style="list-style-type: none"> Emergency medical services: To increase to 15 the percent of level one communities with trained Emergency medical technician I's. 		X			
<ul style="list-style-type: none"> Emergency medical services: To increase to 90 the number of first aid and CPR courses taught. 		X			
<ul style="list-style-type: none"> Injury prevention: To continue to provide injury prevention training to the 48 villages in the Yukon-Kuskokwim Delta. 		X			

Yukon-Kuskokwim Health Corporation Public Health Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	907.4	907.4	907.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	907.4	907.4	907.4
Funding Sources:			
1004 General Fund Receipts	907.4	907.4	907.4
Funding Totals	907.4	907.4	907.4

Yukon-Kuskokwim Health Corporation Public Health Services

Proposed Changes in Levels of Service for FY2002

No Service Level Changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	907.4	0.0	0.0	907.4
FY2002 Governor	907.4	0.0	0.0	907.4

Component: Yukon-Kuskokwim Health Corporation Alcohol and Drug Abuse Services

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

In accordance with the mission of the Yukon-Kuskokwim Health Corporation, we provide an array of holistic, life enhancing, culturally based behavioral health services for the people of the Yukon-Kuskokwim Delta.

Component Services Provided

Regional ADA: Operational support for alcohol counseling and drug abuse prevention programs in the YK region.

Phillips Ayagnirvik (alcohol treatment center): Residential care, outpatient care, and aftercare.

Bethel alcohol safety action program: Alcohol screening and centralized case management of civil and criminal justice cases.

Youth substance abuse services support for service to youth and adolescents.

Component Goals and Strategies

The goal of the alcohol/drug abuse component of the Yukon-Kuskokwim Health Corporation BRU is to increase public awareness of the dangers of alcohol and drug abuse.

Provide treatment options including assessment, outpatient services, misdemeanor services and adult intermediate care for those diagnosed with alcohol or drug dependency.

Key Component Issues for FY2001 – 2002

Developing and retaining a pool of qualified, competent service providers in an isolated region of the State.

Facilitating communication through the services continuum within technological and geographical constraints.

Major Component Accomplishments for FY2000

Programmatic integration of Mental Health/Substance Abuse Services to assure improved access to services.

Completed JCAHO (Joint Commission for Accreditation of Health Organizations) for Behavioral Health Programs.

Developed Memoranda of Agreement with area services providers to coordinate services within the region and avoid duplication of any services.

Statutory and Regulatory Authority

AS 18.05.010-070
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 44.29.100-200
AS 47.07.010 & 030

AS 47.17.010-290
 AS 47.20.060-290
 AS 47.30.470-500
 AS 47.37.010-270

Key Performance Measures for FY2002

Measure: Regional ADA: To increase to 1200 the number of outpatient sessions.
(Not yet addressed by Legislature.)

Measure: Regional ADA: To increase to 400 the number of aftercare sessions.
(Not yet addressed by Legislature.)

Measure: Phillips Ayagnirvik (alcohol treatment center): To increase to 18 the number of clients per treatment cycle of 42-56 days.
(Not yet addressed by Legislature.)

Measure: Phillips Ayagnirvik (alcohol treatment center): To increase to 100 the percentage of intermediate care and outpatient clients who receive aftercare.
(Not yet addressed by Legislature.)

Measure: Bethel safety action program: To provide intervention services to the court for 100 percent of persons convicted of DWI and other related alcohol offenses.
(Not yet addressed by Legislature.)

Measure: Youth substance abuse: To increase to 235 the number of community/school educational presentations about the extent of the substance abuse problem in the region and ways in which it can be alleviated.
(Not yet addressed by Legislature.)

Measure: Youth substance abuse: To increase to 9 the number of village alcohol education counselors.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Regional ADA: To increase to 1200 the number of outpatient sessions.		X			
• Regional ADA: To increase to 400 the number of aftercare sessions.		X			
• Phillips Ayagnirvik (alcohol treatment center): To increase to 18 the number of clients per treatment cycle of 42-56 days.		X			
• Phillips Ayagnirvik (alcohol treatment center): To increase to 100 the percentage of intermediate care and outpatient clients who receive aftercare.		X			
• Bethel safety action program: To provide intervention services to the court for 100 percent of persons convicted of DWI and other related alcohol offenses.		X			

Component — Yukon-Kuskokwim Health Corporation Alcohol and Drug Abuse Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Youth substance abuse: To increase to 235 the number of community/school educational presentations about the extent of the substance abuse problem in the region and ways in which it can be alleviated. 		X			
<ul style="list-style-type: none"> Youth substance abuse: To increase to 9 the number of village alcohol education counselors. 		X			

Yukon-Kuskokwim Health Corporation Alcohol and Drug Abuse Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	959.3	927.4	1,009.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	959.3	927.4	1,009.3
Funding Sources:			
1004 General Fund Receipts	508.9	508.9	508.9
1007 Inter-Agency Receipts	31.9	0.0	81.9
1037 General Fund / Mental Health	418.5	418.5	418.5
Funding Totals	959.3	927.4	1,009.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	31.9	0.0	0.0	81.9	0.0
Restricted Total		31.9	0.0	0.0	81.9	0.0
Total Estimated Revenues		31.9	0.0	0.0	81.9	0.0

Yukon-Kuskokwim Health Corporation Alcohol and Drug Abuse Services

Proposed Changes in Levels of Service for FY2002

The Yukon Kuskokwim Alcohol and Drug Abuse Services component is being increased with Interagency Receipts in order to replace the reduction made initially in FY2000. These funds will help to maintain the level of services provided.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	927.4	0.0	0.0	927.4
Proposed budget increases:				
-Restore Adult Statewide ASAP	0.0	0.0	81.9	81.9
FY2002 Governor	927.4	0.0	81.9	1,009.3

Component: Yukon-Kuskokwim Health Corporation Mental Health Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

In accordance with the mission of Yukon-Kuskokwim Health Corporation, we provide an array of holistic, life enhancing, culturally based behavioral health services for the people of the Yukon-Kuskokwim Delta.

Component Services Provided

Emergency services: community mental health crisis intervention.

General mental health services: community mental health services.

Community support program: case management services for the chronically mentally ill.

Crisis respite care: crisis intervention and respite services to persons experiencing psychiatric emergencies who are not violent or dangerous to others.

Component Goals and Strategies

The goal of the mental health services component of the Yukon-Kuskokwim Health Corporation BRU is to provide crisis intervention and stabilizing services to all persons in the Y-K Delta.

Support chronically mentally ill adults in the least restrictive environment.

Provide respite for adults during crisis stabilization and major life transitions.

Key Component Issues for FY2001 – 2002

Developing and retaining a pool of qualified, competent service providers in an isolated region of the state.

Facilitating communication through the services continuum within technological and geographical constraints.

Major Component Accomplishments for FY2000

Programmatic integration of Mental Health/Substance Abuse Services to assure improved access to services.

Completed JCAHO (Joint Commission for Accreditation of Health Organization) for Behavioral Health Programs.

Developed Memoranda of Agreement with area service providers to coordinate services within region and avoid duplication of any services.

Statutory and Regulatory Authority

AS 18.05.010-.070
AS 18.08.010 & 080
AS 18.25.040-080
AS 18.28.010-100
AS 44.29.020
AS 47.07.010 & 030

AS 47.17.101
 AS 47.20.005-050

Key Performance Measures for FY2002

Measure: General mental health services: To increase to 35 the number of admissions to community mental health center services.
(Not yet addressed by Legislature.)

Measure: General mental health services: To increase to 6,440 the number of hours of direct client services.
(Not yet addressed by Legislature.)

Measure: Community support program: To increase to 395 the number of hours of service received by the chronically or severely mentally ill.
(Not yet addressed by Legislature.)

Measure: Crisis respite: To increase to 100 the percentage of clients needing and seeking crisis respite services who will be provided with those services.
(Not yet addressed by Legislature.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• General mental health services: To increase to 35 the number of admissions to community mental health center services.			X		
• General mental health services: To increase to 6,440 the number of hours of direct client services.			X		
• Community support program: To increase to 395 the number of hours of service received by the chronically or severely mentally ill.			X		
• Crisis respite: To increase to 100 the percentage of clients needing and seeking crisis respite services who will be provided with those services			X		

Yukon-Kuskokwim Health Corporation Mental Health Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	907.4	907.4	907.4
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	907.4	907.4	907.4
Funding Sources:			
1037 General Fund / Mental Health	907.4	907.4	907.4
Funding Totals	907.4	907.4	907.4

Yukon-Kuskokwim Health Corporation Mental Health Services

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	907.4	0.0	0.0	907.4
FY2002 Governor	907.4	0.0	0.0	907.4

State Health Services Budget Request Unit

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BRU Mission

The mission of the Division of Public Health is to preserve and promote the state's public health.

BRU Services Provided

The Division of Public Health services are primarily "population-based", focusing on achieving and preserving the health and well being of entire communities or populations rather than on individual medical/illness care. Professional staff monitor and assess the health status of Alaskans through the collection and analysis of vital statistics, behavioral risk factor data, and data on disease and injury, including forensic data from post mortem examinations. The Division uses these data and other scientific information and expertise to develop sound policy to improve the health of Alaskans. Professional staff assures that services needed to achieve public health goals are available by encouraging, supporting and sometimes requiring their development by others, and by providing services directly when unavailable due to a void in the private sector. Staff also conducts disease surveillance and investigation and provides treatment consultation, case management and laboratory testing services to control outbreaks of communicable diseases and prevent epidemics. The Division promotes healthy behaviors by educating citizens, mobilizing and supporting community action to reduce risks and promote health. Staff performs outreach activities to link high risk and disadvantaged persons to needed services and provides treatment and clinical preventative services directly as well to these populations.

BRU Goals and Strategies

The primary goals of public health are to promote good physical and mental health and prevent disease, injury and disability. Strategies to accomplish this goal include: preventing epidemics and the spread of disease, promoting awareness of health impacts related to environmental contaminants, preventing injuries, promoting and encouraging healthy behaviors, planning for and responding to disasters and assuring the quality and accessibility of health services.

Key BRU Issues for FY2001 – 2002

Obtaining adequate long term funding to enhance the existing capacity needed to prevent and intervene, when necessary, in the transmission of communicable diseases statewide and to maintain this capacity over time.

Obtaining the needed funding to meet the needs identified in the Code Blue document that details the severe and immediate needs of the EMS system in the state.

Problems related to recruiting, retaining and supporting qualified staff at all levels statewide.

Covering costs and managing problems related to relocation of all Division staff from various locations in Anchorage to the Frontier Building,

Planning and support for continuation of efforts begun with federal dollars once initial project funding ends.

Development of a comprehensive long term state health plan that has the involvement and buy in of all stakeholders statewide.

Developing support for work related to environmental contaminants and their effects on Alaskans as a result of consumption of foods that may have been exposed to environmental contaminants.

Integrating and facilitating the work of the Denali Commission with its' focus on facility construction and repair with the needs related to program and service delivery in rural areas.

Developing the needed relationships with the newly emerging Tribal health and other local health service entities to ensure that local health planning and service delivery is done in an integrated and efficient manner.

Getting the needed legislative and inter-Departmental support needed to design and implement an effective tobacco sales to minors enforcement program that will both meet federal requirements and significantly reduce youth access to tobacco products.

Major BRU Accomplishments for FY2000

Continued the outreach and marketing effort that has facilitated the enrollment of several thousand newly eligible and previously eligible but not enrolled children in the State's expanded Medicaid child insurance program, Denali KidCare. Additional work has facilitated the enrollment of several hundred additional pregnant women to ensure they received early and adequate prenatal care in order to give their babies the healthiest start possible.

Continued an aggressive immunization campaign at the state and local level to assure that Alaska's children are immunized against preventable childhood diseases, revised the immunization requirements by adding several new immunizations to the list of those required for school and day care, and increased immunization levels against hepatitis A and hepatitis B.

Increased disease investigations by public health professionals to identify contacts and improve follow-up, diagnosis, treatment, and education for tuberculosis, HIV, and STDs and responded to and managed major TB outbreaks in several areas of the state.

Construction moved towards completion on the new Laboratories and State Medical Examiner Facility in Anchorage.

Instituted the marijuana registry as required by AS 37.

Collected \$50,000 for the Children's Trust Fund through the sale of heirloom birth certificates.

Established a Health Information and Systems Support Unit to assist in developing health status targets for planning purposes, implementing the Public Health Improvement program and development of the capacity to provide technical assistance to agencies and communities on health data issues, program evaluation and community health planning.

In partnership with other private and public partners, initiated activities related to decreasing the morbidity and mortality of Alaskans related to tobacco through education, enforcement and cessation activities statewide.

Obtained major revisions in the WIC funding formula and regulations from USDA that will allow full utilization of available food dollars and increased access to program benefits for many pregnant and breastfeeding women and children under five years of age in Alaska, now and in the future.

Initiated a major effort, in partnership with other state agencies and local entities, to address the behavioral issues of young children and it's impact on their families.

Worked with communities and Regional EMS groups to develop the CODE BLUE document, which describes the extent of the crisis resulting from long term underfunding of the emergency response system and lists the equipment and vehicles needed to bring the system back to a minimal level of response capacity. Together with local, state and federal partners, worked to identify and access fund sources and match dollars needed to purchase needed equipment and vehicles.

Continued development of the Child Death Review team, to enhance overall capacity to determine causes of death for Alaska children, to ensure prosecution when appropriate, and increased collaboration between the Child Death Review Team and Maternal and Infant Mortality Review team, to maximize coordination and learning related to the work of both groups.

Continued the development of the comprehensive child injury and trauma effort, through improving collection and analysis of data on fatal and non-fatal injuries to children and dissemination of this information to communities, families and professionals, to facilitate the development and implementation of programs and practices that will decrease death and disability related to childhood injury in the state.

Assisted nine communities in conducting the financial analysis required to determine whether it would be beneficial for them to gain designation as a critical access hospital (CAH) and together with the Division of Medical Assistance, developed and adopted the regulations that will allow them to be certified in Alaska. One hospital is now a designated CAH and several others are in the process of determining the benefits to them of becoming one. Additional work under this effort has assisted communities in conducting overall need assessments and determining their critical care, primary care and EMS needs in order to develop sustainable systems of care.

Utilizing bio-terrorism preparedness dollars, we greatly increased the capacity of state, regional and local health agencies and organizations to communicate and collect and disseminate information. While this enhanced system ensures our ability to identify a bio-terrorist event and respond timely, it also serves the public health effort daily through increased capacity to share information, update and educate professionals and collect data on disease and trends.

Key Performance Measures for FY2002

Measure: Increase the percentage of children fully immunized at age two

(Developed jointly with Legislature in FY2001.)

Current Status:

The percentage of fully immunized 2-year-olds for calendar year 1999 was 80.1%.

Benchmark:

69% were immunized by the end of 1996.

Background and Strategies:

In 1997, the Department launched a major initiative to increase the rate of fully immunized two-year-olds. In three years, we have jumped up 20 positions, going from 48th to 28th in national rankings. Now, over 80% of our two-year-old children have received their recommended vaccines. Alaska's comprehensive public-private initiative to increase childhood immunization rates will be extended through 2002 to achieve the highest possible immunization rates and to assure that Alaska children in school and daycare will have all required immunizations by the fall of 2001.

Measure: Identify Rate of TB (Tuberculosis) cases by race

(Developed jointly with Legislature in FY2001.)

Current Status:

1999 Alaska TB rate = 9.8 per 100,000 population

- Alaska Native = 39.4/100,000
- Asian/Pacific Islander = 43.0/100,000
- Black = 0
- White = 1.5/100,000

Benchmark:

1996 Alaska TB rate = 16.0/100,000 population

Background and Strategies:

Tuberculosis has been a long-standing problem in Alaska and was the cause of death for 46% of all Alaskans who died in 1946. Major efforts, which included 10% of the entire state budget in 1946, led to one of the state's most visible public health successes-major reductions in TB across the state. Now this disease is reemerging and with it the threat of treatment resistant strains of the disease. Inadequate resources to monitor and educate those most at risk have resulted in outbreaks in three geographic areas this past year. Significant new resources are needed to do the case finding, diagnostic tests and treatment follow-up required to keep the disease in check.

Measure: Identify Rate of Hepatitis A*(Not yet addressed by Legislature.)***Current Status:**

1999 Alaska Hepatitis A Rate = 2.4 per 100,000

Benchmark:

1996 Hepatitis B Rate = 2.6 per 100,000 population

Background and Strategies:

Alaska has suffered from large and recurrent outbreaks of Hepatitis A that has resulted in thousands of cases and numerous hospitalizations over time. Aggressive control activities were not successful until the vaccine became available in the early 1990's. With use of the vaccine Hepatitis A, the disease burden has been greatly reduced. Efforts are still needed to make sure maximum immunization levels are reached and maintained.

Measure: Identify Rate of Hepatitis B*(Not yet addressed by Legislature.)***Current Status:**

1999 Hepatitis B Rate = 2.9 per 100,000 population

Benchmark:

1996 Hepatitis B Rate = 2.6 per 100,000 population

Background and Strategies:

Hepatitis B vaccine became available in the early 1980s. Prior to that time Alaska had among the highest rates in the country. Well-organized immunization efforts in the 1980s brought rates to very low levels. Unfortunately because of historically high disease rates, many persons who had Hepatitis B in the past are now suffering from associated disease like cancer of the liver and liver failure. Current immunization efforts must be maintained to keep from "turning back the clock".

Measure: Identify rate of child hospitalizations and fatalities related to injury*(Developed jointly with Legislature in FY2002.)***Current Status:**

Fatalities for children 0-19 in 1998 were:

Homicide	2.3/100,000
Suicide	8.4/100,000

Hospitalizations for Alaskan children 0-19 related to injury (non-fatal) in 1998 were:

Intentional injuries	83.3/100,000
Unintentional Injuries	410.4/100,000
Unintentional Injury	21.0/100,000

Benchmark:

Fatalities for children 0-19 in 1996 were:

Homicide	4.8/100,000
Suicide	9.2/100,000
Unintentional Injury	29.0/100,000

Child hospitalizations for children 0-19 related to injury in 1996 were:

Intentional injuries	82.6/100,000
Unintentional Injuries	416.8/100,000

Background and Strategies:

The Alaska Trauma Registry and Vital Statistics systems provide information on deaths and hospitalizations related to injury to children. The Division of Public Health has set targets for FY 2002 for reducing child hospitalizations related to injury to 74 per 100,000 due to intentional injuries and 375 per 100,000 due to unintentional injuries. The data provide very useful information for evaluating and refining child and adolescent injury prevention strategies. The

decreases in fatalities shown above between 1996 and 1998 suggest strong improvement in the effort to reduce unintentional injuries, homicides and suicides among children 0-19.

Measure: Decrease Rates of smoking by middle school students

(Not yet addressed by Legislature.)

Current Status:

In 1999, according to the YRBS data, 21% of middle school students reported smoking within the last 30 days. (Sample did not include Anchorage students)

Benchmark:

In 1995, according to the YRBS data, 25% of middle school students reported smoking within the last 30 days. (Statewide sample)

Background and Strategies:

According to information gleaned from the Youth Risk Behavior System (YRBS), between early 1995 and early 1999 there was a 7% decrease in overall current smoking for high school youth in Alaska. During this same period of time there was a 1% decrease in smokeless tobacco use. Plans are underway for the YRBS to be administered statewide in the spring of 2001. The new active parental consent law for surveys has increased significantly the burden on local school districts. The value of the YRBS data may be compromised as a result of the constraints that the new law imposes on districts.

The YRBS is a survey tool that in schools to a random sample of students in various grades. During the 1999 survey, the Anchorage School district did not participate in the survey, so the state 1995 to state 1999 comparisons listed above do not include Anchorage for 1999. We are continuing to do analysis to determine changes for the various age groups and will have additional data within the next six months. However, preliminary analysis indicates much larger increases for the younger children (i.e. 9th grade vs. 12th grade). Utilizing tobacco settlement dollars and other funds, in an on-going public-private partnership, the Department intends to intensify the effort to decrease smoking and use of smokeless tobacco by youth for the next several years. These efforts will include counter-marketing efforts, enforcement of laws prohibiting sales to minors etc. An increased focus will be related to the use of smokeless tobacco, since the decline in that area has been so minimal.

Measure: Decrease Rates of alcohol use among high school students

(Not yet addressed by Legislature.)

Current Status:

In 1999, according to YRBS data, 46.9 % of high school students reported having had at least one drink of alcohol in the past 30 days. 34.4% reported at least one binge drinking episode (five or more drinks in a row) in the past 30 days. (Anchorage students not included in the sample)

Benchmark:

In 1995, according to YRBS data, 47.5 % of high school students reported having had at least one drink of alcohol in the past 30 days. 31.3 % reported at least one binge drinking episode in the past 30 days. (Statewide sample)

Background and Strategies:

See explanation of the Youth Behavior Risk Survey (YRBS) provided under key indicator measure: "decrease rates of smoking by middle school students." The YRBS is the survey tool that provides information on this measure. If a sufficient and reliable sample of the state's high school students cannot be identified under the active parental consent requirement, the measurement of alcohol use among high school students may not be possible in the future, until another method can be devised. Efforts to reduce youth drinking are on going and varied.

Measure: Identify Life expectancy for all Alaskans by race

(Not yet addressed by Legislature.)

Current Status:

For 1998: Life expectancy at birth for all Alaskans = 75.4 years
Alaska Natives = 70.3 years

White = 76.2 years

Benchmark:

For 1996: Life expectancy at birth for all Alaskans = 74.5 years
 Alaska Natives = 69.3 years
 White = 75.4 years

Background and Strategies:

In the last three decades, dramatic increase in life expectancy has been realized by reducing infant mortality across Alaska. Fewer deaths due to infectious disease and injury among children and youth have also contributed to improvement in life expectancy. Continuing to improve birth outcomes, injury prevention, and prevention of chronic and infectious diseases will result in continuation of the trend toward longer life expectancy for the population as a whole, and for Alaska Natives in particular.

Measure: Decrease Teen birth rate, age 15-19

(Not yet addressed by Legislature.)

Current Status:

For 1998: 48.4 births per 1000 girls aged 15-19

Benchmark:

For 1996: 51.5 births per 1000 girls aged 15-19

Background and Strategies:

The teen birth rate has in 1998 reached the Healthy Alaskans 2000 goal of fewer than 50 per 1,000 girls aged 15-19, down from 66.2 in 1990. Activities to educate on the risks associated with unmarried and teen child bearing, together with increased access to reliable contraception may have influenced these numbers.

Measure: Decrease Teen suicide rate (per 100,000 aged 15-19 years)

(Not yet addressed by Legislature.)

Current Status:

For 1998: 37.0 per 100,000

Benchmark:

For 1996: 38.3 per 100,000

Background and Strategies:

Teen suicide continues to be a major concern in Alaska, being nearly four times the U.S. rate of 9.5 per 100,000 (the level for Alaskans of all ages is 23.7 in 1998, about twice the U.S. rate of 10.3). Numerous activities at the state and local level over the past several years have been directed specifically to identifying youth at risk and providing the individual and group education and intervention needed to help prevent/reduce teen suicides.

Measure: The percentage of families who are qualified for the services of the infant learning program who are enrolled in the program.

(Added by Legislature in FY2002 version.)

Current Status:

For FY2000, 84% of children qualified received EI/ILP services

Benchmark:

This is a new measure.

Background and Strategies:

1602 children were enrolled in the Infant Learning Program in FY2000 and there were 307 on the waitlist* for services as of June 30, 2000 for a total of 1909 eligible children.

*waitlist = children who are not eligible for Part C, who have been referred for screening, evaluation or enrollment in early intervention services and who have been waiting greater than 45 days for these services

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Increase the percentage of children that are fully immunized at age two. • Identify Rate of TB (Tuberculosis) cases by race • Identify Rate of Hepatitis A • Identify Rate of Hepatitis B • Identify Rate of child hospitalizations and fatalities related to injury • Decrease Rates of smoking by middle school students • Decrease Rates of alcohol use among high school students • Identify Life expectancy for all Alaskans by race • Decrease Teen birth rate, age 15-19 • Decrease Teen suicide rate (per 100,000 aged 15-19 years) 	 X X X X X 	 X X 	 X X X 		

State Health Services
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
None.												
Non-Formula Expenditures												
Nursing	8,205.2	600.7	5,203.5	14,009.4	8,344.9	1,032.4	5,668.3	15,045.6	9,899.9	1,032.1	5,597.4	16,529.4
Women, Infants and Children Maternal, Child, & Family Hlth	0.0	16,111.6	2,932.5	19,044.1	0.0	16,842.2	3,700.0	20,542.2	0.0	16,842.2	3,700.0	20,542.2
Healthy Families Public Health Admin Svcs	1,903.5	7,266.6	1,591.4	10,761.5	1,728.0	9,322.0	2,171.1	13,221.1	1,835.9	9,160.8	2,123.7	13,120.4
Epidemiology	13.5	0.0	1,211.2	1,224.7	3.3	0.0	1,297.9	1,301.2	1.8	0.0	1,298.8	1,300.6
Bureau of Vital Statistics	504.8	515.7	0.0	1,020.5	506.2	819.6	1.4	1,327.2	549.7	819.0	0.0	1,368.7
Health Info/System Support	2,012.5	4,556.2	355.6	6,924.3	2,062.7	5,302.8	475.2	7,840.7	2,938.8	5,260.9	367.6	8,567.3
Health Services/Medic aid	1,005.9	229.0	206.1	1,441.0	234.8	253.9	1,216.8	1,705.5	218.0	253.8	1,374.0	1,845.8
Community Health/EMS Services	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	34.3	405.5	439.8
Community Health Grants	0.0	0.0	3,270.8	3,270.8	0.0	0.0	3,404.5	3,404.5	0.0	0.0	3,952.8	3,952.8
Emergency Medical Svcs Grants	742.8	2,676.9	339.3	3,759.0	855.8	4,594.8	335.8	5,786.4	865.8	16,344.4	330.2	17,540.4
State Medical Examiner	1,225.2	144.1	0.0	1,369.3	1,225.2	350.0	0.0	1,575.2	1,225.2	350.0	0.0	1,575.2
Infant Learning Program Grants	1,710.1	0.0	0.0	1,710.1	1,710.1	0.0	50.0	1,760.1	1,710.1	0.0	50.0	1,760.1
Public Health Laboratories	1,018.2	0.0	0.0	1,018.2	1,174.6	0.0	11.5	1,186.1	1,234.4	0.0	0.0	1,234.4
	4,721.9	0.0	0.4	4,722.3	4,721.9	0.0	1,030.7	5,752.6	5,421.9	0.0	330.7	5,752.6
	2,159.8	432.0	364.0	2,955.8	2,442.3	454.6	494.2	3,391.1	3,248.4	605.2	479.9	4,333.5

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Radiological Health	83.6	104.8	0.0	188.4	138.8	148.9	0.7	288.4	0.0	0.0	0.0	0.0
Tobacco Prevention and Control	1,400.0	0.0	0.0	1,400.0	1,400.0	0.0	0.0	1,400.0	1,400.0	0.0	0.0	1,400.0
Totals	26,707.0	32,637.6	15,474.8	74,819.4	26,548.6	39,121.2	19,858.1	85,527.9	30,549.9	50,702.7	20,010.6	101,263.2

State Health Services

Proposed Changes in Levels of Service for FY2002

With increases in General Fund Receipts, the Division of Public Health will:

Increase the efficiency and effectiveness of the Yukon-Kuskokwim Public Health Nurses through procurement of adequate facilities to both deliver services in Bethel and support itinerant and administrative PHN activities in the region.

Increase the ability of the Public Health Nursing Program to prevent outbreaks of TB, STDs and other diseases when possible and to intervene when needed to identify infected persons, monitor their treatment and do appropriate patient education to control the spread of disease. This will be accomplished by increasing the number of public health nurses in selected areas with high need and providing them with the supplies and travel money needed to deliver services.

Increase the capacity of the new public health laboratory to meet demands for increased numbers and types of diagnostic and screening tests. An increasing population and additional tests such as one for Hepatitis C, added in 1999, are greatly increasing service needs. By adding two additional microbiologists and purchasing the additional test kits and supplies needed, turnaround time can be improved as well as overall volume capacity.

Increase the ability of the Section of Epidemiology to establish a statewide system of electronic disease surveillance for all reportable diseases, provide clinical expertise and support to public health staff in the field, collect and analyze health data being collected to improve service delivery and patient outcomes and increase the expertise and capacity related to partner notification and patient education for communicable diseases.

Increase the ability of the Division to monitor and study the impact of environmental contaminants on Alaskans and provide the information and education that will allow individuals and groups to make informed choices regarding consumption of fish, seafood and marine mammals.

Allow for full funding for maintaining the new Laboratory and SME facility in Anchorage and the new Kenai Health Center.

Allow the Division to maintain long term the Birth Defects Registry established with federal funding. This will enable the state to determine the incidence of various birth defects in order to plan services and also to monitor the effects of efforts to reduce the number of birth defects in newborns.

Enable the Infant Learning Program to eliminate the waitlist of infants and toddlers and ensure that all newly identified children are enrolled and receive services immediately after screening and identification of need.

Additionally, the Division will utilize additional funding from the Robert Wood Johnson Foundation to establish the Alaska Public Health Information System, lead a national effort to develop a model state public health law and participate in a national program to develop performance measurement tools for states and localities.

Additional and increased categorical federal grants will support more work in a number of specific public health areas.

State Health Services

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	26,548.6	39,121.2	19,858.1	85,527.9

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
Adjustments which will continue current level of service:				
-Nursing	100.0	-0.3	-82.1	17.6
-Maternal, Child, & Family Hlth	107.9	-161.2	-77.4	-130.7
-Healthy Families	-1.5	0.0	0.9	-0.6
-Public Health Admin Svcs	43.5	-0.6	-1.4	41.5
-Epidemiology	17.1	-41.9	-107.6	-132.4
-Bureau of Vital Statistics	-16.8	-0.1	15.0	-1.9
-Health Info/System Support	0.0	34.3	405.5	439.8
-Health Services/Medicaid	0.0	0.0	-239.7	-239.7
-Community Health/EMS Services	10.0	-2.4	-5.6	2.0
-State Medical Examiner	9.8	0.0	-11.5	-1.7
-Infant Learning Program Grants	700.0	0.0	-700.0	0.0
-Public Health Laboratories	156.1	150.6	-14.3	292.4
-Radiological Health	-138.8	-148.9	-0.7	-288.4
Proposed budget increases:				
-Nursing	1,455.0	0.0	11.2	1,466.2
-Maternal, Child, & Family Hlth	0.0	0.0	30.0	30.0
-Epidemiology	859.0	0.0	0.0	859.0
-Bureau of Vital Statistics	0.0	0.0	142.2	142.2
-Health Services/Medicaid	0.0	0.0	788.0	788.0
-Community Health/EMS Services	0.0	11,752.0	0.0	11,752.0
-State Medical Examiner	50.0	0.0	0.0	50.0
-Public Health Laboratories	650.0	0.0	0.0	650.0
FY2002 Governor	30,549.9	50,702.7	20,010.6	101,263.2

Component: Nursing

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Component Mission

To provide statewide professional public health nursing services to Alaskans - particularly very young children, medically under-served pregnant women and the elderly - in a manner that maintains dignity, promotes self-reliance and community integrity in order to enable individuals, families and communities to be healthy and productive.

Component Services Provided

The public health nursing program provides a major portion of the Division of Public Health's service delivery for disease prevention and protection, health assessments, and health promotion. Public Health Nurses are the public health "safety net" throughout Alaska. Direct services are provided through itinerant PHN services to over 250 communities, 4 regional offices, and 19 Public Health Centers, down from 21 last years with two facility consolidations in Bethel and Mat-Su. Four areas (Norton Sound, Maniilaq/Kotzebue, North Slope Borough, and Municipality of Anchorage) are supported through BRU or grantee/contract funding and technical assistance to assure that PHN services are available statewide.

Services provided include: Communicable disease control through immunizations, clinical screening and testing, contact investigation, specimen collection, counseling and education, surveillance, follow-up, and medication therapy for tuberculosis (TB) directly observed therapy (DOT), for sexually transmitted infections, for Hepatitis A/B/C, for HIV, for food borne and water borne diseases that affect humans, and assist with other epidemiological investigations of diseases or exposures to hazards; child health outreach and screening, well child and HeadStart exams, health tracking for children in foster care, health consultation to child care providers, screening, and referral, medical specialty clinics support, WIC and Infant Learning Program referrals, field support for the Infant Mortality Review Program and Children with Special Needs Programs, school screening, hearing and vision testing, parenting education, family planning and prenatal screening and monitoring, newborn home visits, senior citizen clinics, and chronic disease prevention and education.

Public Health Nursing supports communities in identifying health concerns and in organizing a local response to local concerns by bringing together people and agencies interested in the problem and by connecting the community group with resources and people who can assist them. Examples of this community work include immunization coalitions, domestic violence support services, youth asset groups, interagency work groups, health education efforts, and community health planning.

Component Goals and Strategies

The Nursing component has a Long Range Plan for Public Health Nursing. The Section of Nursing provides a wide variety of disease prevention, health promotion, and health assessment services in the broad goal categories of Infectious Diseases, Family and Individual Health, Violence and Injury, Non-Infectious Diseases, Community Health, Health Data Assessment, Quality Improvement and Assurance, Health Policy development, Health Resources, and Nursing Administration.

PHNs working at the regional and local community level help reduce health care costs through early detection and prevention of health problems. The blend of nursing skills with broad-based public health knowledge and experience provides communities and villages with direct clinical services, health consultation, information and referral assistance, and assistance in local planning and crafting solutions to health problems.

Public Health Nursing's goals for FY 02 include implementing a system of clinical telehealth applications and training that will improve access to health care through the collaborative development of sustainable telehealth systems, with the Alaska Federal Partnership of Department of Defense, Veterans Administration, US Coast Guard, Indian Health Services-Alaska Native Tribal Health Consortium, and State Public Health Nursing. Additionally, Public Health Nursing

will improve communications and information resources at the local level across the state to create the Health Alert Network in collaboration with other components, departments, and emergency preparedness agencies to assure Alaska's response and readiness for biological or chemical events that could threaten the health of Alaskans, through active participation in the Bioterrorism Preparedness effort.

Key Component Issues for FY2001 – 2002

- Disease Control efforts
- New vaccines for children and youth
- Increased service demands of a growing population
- Child Health services and outreach
- Adequate public health facilities to serve the public

The most pressing and important issue facing PHNs this year is the increasing demands for disease control services to Alaska's growing population. If we are to have the level of public health services across our state necessary to protect Alaskans against preventable diseases, there is a need to assure an adequate frontline Public Health Nursing workforce. PHNs are the foot soldiers of Alaska's public health system. There is a need for more direct service workers to assure a public health response to public health threats. The most basic and mandated responsibility of the division is to protect the public's health. Disease control is central to delivering on that responsibility.

Alaska had unusually high numbers of active TB cases in FY00-01 with many additional people infected by those active cases. Along with soaring numbers of positive chlamydia tests being reported now, increased requirements for childhood immunizations, emerging diseases such as Hepatitis C, and increasing concerns for human health impacts from environmental hazards and exposures, the demands for public health nursing services in disease control have exceeded our resources in staff and supplies. With each resurgence of old problems like TB, or new problems like Hepatitis C and important contact follow-up for HIV and chlamydia, some other public health service for Alaskans must be deferred or delayed. This is a formula for losing ground on improving the health of Alaskans and losing the gains we have made in childhood immunizations and child health.

Meeting the demands of the high number of active TB cases in the PHN caseloads has eroded the PHN time in other critical service areas like childhood immunizations and sexually transmitted disease screening and treatment. The difficult work of tracking contacts—those who have been exposed—so they may be informed, screened and treated is the most basic of public health protection against disease spreading to more people. The contact tracing takes time and skilled staff to locate, educate, and bring those exposed into treatment. Failure to do that contact tracing and treatment allows diseases to continue silently among our citizens, sometime causing lifetime consequences and serious threats to health.

Meeting the demands of new childhood vaccines to be added (Prevnar for pneumococcal disease in children) and new regulations for schools and day cares (Hep A and Hep B, HIB and Varicella) will require nurses to provide an immunization campaign effort to have school children immunized before the school exclusion date of September 2001. The HepA/HepB series requires a 6-month time frame to complete so efforts must begin in FY 01 if we are to make significant progress in vaccinating all school age children.

With Alaska's continued population growth, there are areas of rapid population growth that are below minimum public health staffing levels necessary to accomplish disease control. Without local nursing staff to do the disease screening, treatment, contact tracing and follow-up and immunizations, these areas suffer from low immunization levels, inadequate protection and response to communicable diseases, and are not able to assist local physicians and clinics with the public health field work and consultation for proper disease control. Adequate public health nursing staff to respond in a timely way to requests for services are central and basic to disease control and health protection expected from public health.

There is a critical need to obtain an adequate facility for Y-K area public health nursing services in Bethel. Currently 22 staff and the Bethel public health clinic operate out of 3600 sf., augmented by two on-site freezer vans for storage. There are no sinks in the clinic exam rooms that also serve as offices for nursing staff. The building is not up to code

for handicapped access or for use as a clinic. This crisis situation was precipitated by the eviction of PHNs from previous health clinic space in May 2000, and the lack of construction funding to build a suitable public health clinic.

The Juneau Public Health Center will solve the fire alarm system problems in FY 01, and will have to complete the design and specifications for the replacement of the HVAC system this year with only partial funding in FY01. FY 02 funding will be needed to make the necessary HVAC improvements to provide adequate heating and ventilation for this clinic facility before a crisis repair is required when the heat pumps fail.

Implementation of the Needlestick Bill (CS-SB 261; AS 18.60.880-890) will be required as of January 1, 2001. The costs of expendable supplies for immunizations and blood drawing will increase at least five-fold. when annualized for the year in FY02. Requirements for product evaluation procedures will create initial costs in FY01 to obtain supplies for product evaluations and to implement this statute that flows from an OSHA directive of November 1999.

Safeguarding public health nurses who provide year-round services traveling across Alaska is a focus for FY02. There is a need for replacing old (1983-1991) vehicles and to provide four wheel drive vehicles for those staff that must drive Alaska highways in all seasons to provide health services to communities. Providing cellular or radio phones for nurses who travel to remote areas to provide health services is a safeguard we should provide.

Major Component Accomplishments for FY2000

PHNs provided over 118,000 health care visits to over 57,000 patients.

PHNs administered 98,353 doses of vaccine.

PHNs gave 23,094 tests for TB.

PHNs served 40,093 children and youth (birth-19 years).

Improved PHN staffing in Mat-Su by moving the federal Title X Grant funding from Bethel to Mat-Su based on projections of larger service demands and caseloads.

Improved training and planning for public health nurse consultation to child care providers.

Sustained high levels of childhood immunizations in the birth to three years group.

Continued progress with federal agency partnerships to bring telehealth clinical services to all public health centers by the end of FY 01, resulting in improved technology and communications for all public health centers.

Completion of design and progress on the joint Kenai Public Health and Hospital building, set for occupancy by the end of FY01-a joint effort between the City of Kenai, the Kenai Peninsula Borough, Central Kenai Hospital and the Department of Health and Social Services/Division of Public Health/Nursing Component.

Statutory and Regulatory Authority

AS 8.68	Nursing
AS 9.25.120	Public Records
AS 9.65.090, 095, 100	Actions, Immunities, Defenses and Duties
AS 14.30.065 - 125, 191, 231	Physical Examinations & Screening Examinations
AS 18.05.010 - 040	Administration of Public Health and Related Laws
AS 18.08.035, 086	Emergency Medical Services
AS 18.15	Disease Control
AS 18.23.010, 310	Health Care Services Information & Review Organizations
AS 18.50.160, 230, 240	Vital Statistics Act
AS 18.60.880-890	Health Care Protections (Needle stick and sharps injuryprotections)
AS 25.20.025	Examination and Treatment of Minors

AS 44.29.020, 022	Department of Health & Social Services
AS 47.7.010 - 030	Medical Assistance for Needy Persons
AS 47.17	Child Protection
AS 47.24.900	Protection for Vulnerable Adults
4 AAC 06.055, 090	Immunizations
7 AAC 26.280, 390, 710	Emergency Medical Services
7 AAC 27	Control of Communicable Diseases in Man
7 AAC 43	Medical Assistance
7 AAC 50.450, 455	Health in Facilities
7 AAC 80	Fees for Department Services
12 AAC 2.280	Board of Nursing
12 AAC 44	Advanced Nurse Practitioner
18 AAC 31.300	Disease Transmission

Nursing
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	10,540.8	11,068.7	11,897.3
72000 Travel	606.3	572.3	672.3
73000 Contractual	1,322.1	1,428.0	1,882.0
74000 Supplies	253.9	386.9	488.1
75000 Equipment	107.3	329.2	329.2
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,179.0	1,260.5	1,260.5
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	14,009.4	15,045.6	16,529.4
Funding Sources:			
1002 Federal Receipts	600.7	1,032.4	1,032.1
1004 General Fund Receipts	8,100.6	8,193.5	9,791.4
1005 General Fund/Program Receipts	104.6	105.6	108.5
1007 Inter-Agency Receipts	5,203.5	5,337.7	5,347.4
1053 Investment Loss Trust Fund	0.0	45.8	0.0
1108 Statutory Designated Program Receipts	0.0	330.6	250.0
Funding Totals	14,009.4	15,045.6	16,529.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	600.7	1,032.4	1,032.5	1,032.1	1,032.4
Interagency Receipts	51015	5,203.5	5,337.7	5,348.9	5,347.4	5,337.7
General Fund Program Receipts	51060	104.6	105.6	105.6	108.5	105.6
Statutory Designated Program Receipts	51063	0.0	330.6	330.6	250.0	250.0
Restricted Total		5,908.8	6,806.3	6,817.6	6,738.0	6,725.7
Total Estimated Revenues		5,908.8	6,806.3	6,817.6	6,738.0	6,725.7

Nursing

Proposed Changes in Levels of Service for FY2002

With proposed budget for FY 02, the Nursing component intends to provide active and increased disease control efforts that will protect Alaska citizens across the state from communicable diseases. PHNs will provide increased direct services at the local community level to implement the disease control efforts of the Division of Public Health. The Nursing component, working closely with the Epidemiology and Laboratories components, will assure that persons with communicable diseases are tested or screened, treated, and educated to prevent spread. In addition, PHNs will identify those who are exposed and in need of testing and treatment to stop the spread of disease in our state. Directly Observed Therapy for TB will be assured to improve the control of TB in our state. PHNs will provide timely disease control and contact outreach for Tuberculosis, sexually transmitted diseases, Hepatitis A/B/C, vaccine preventable diseases, food and water borne diseases, and other outbreaks or clusters of unusual disease events.

PHNs will continue to improve the childhood immunization rates for young children in all areas, to reach 90% levels. PHNs will implement the new school and day care regulations by organizing and providing immunization opportunities for school students to be able to comply with vaccinations for school entry in fall, 2001.

PHNs will provide increased support to local physicians and clinics in the contact follow-up for reportable communicable diseases, and will promote active disease reporting by all providers. PHNs will assure communities, the public, and health care providers have access to consultation and direction in disease control efforts.

PHNs will sustain service levels in all other areas while increasing services in disease control. PHNs will continue to provide child health services, services to high risk families and children, supporting special needs children and their families, chronic disease prevention, injury and violence prevention, family planning and prenatal care, promoting early childhood development and parenting supports, and assisting communities in identifying and solving public health problems. PHNs will increase efforts in promoting healthy youth who succeed and avoid risky behaviors through asset development with communities and groups. PHNs will expand efforts to assure the health of children in foster care through spreading the Health Passport for Foster Kids to PHNs in areas beyond Anchorage.

PHNs will assist communities in using telemedicine clinical applications and will increase health trainings in communities through the Health Alert Network and Public Health readiness efforts.

PHNs are committed to providing the direct clinic services that are needed, the consultation and leadership at the local level for public health planning, and problem solving to assure that Alaskans are healthy and safe.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	8,344.9	1,032.4	5,668.3	15,045.6
Adjustments which will continue current level of service:				
-Convert Special FY 2001 Labor Cost Fund Sources to GF	80.6	0.0	-80.6	0.0
-Year 2 Labor Costs - Net Change from FY2001	19.4	-0.3	-1.5	17.6
Proposed budget increases:				
-Annualization of Maintenance Costs for the Kenai Health Center	20.8	0.0	11.2	32.0
-Bethel Public Health Center Lease	162.0	0.0	0.0	162.0

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
Costs				
-Back to Basics - Infection Detection and Protection - Nursing	1,272.2	0.0	0.0	1,272.2
FY2002 Governor	9,899.9	1,032.1	5,597.4	16,529.4

Nursing

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	179	194	Annual Salaries	9,286,164
Part-time	13	13	COLA	120,741
Nonpermanent	0	0	Premium Pay	3,173
			Annual Benefits	3,189,283
			<i>Less 5.57% Vacancy Factor</i>	<i>(702,061)</i>
			Lump Sum Premium Pay	0
Totals	192	207	Total Personal Services	11,897,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	1	1	1	1	4
Administrative Clerk II	2	6	5	12	25
Administrative Clerk III	4	4	2	22	32
Administrative Manager I	0	0	1	0	1
Administrative Supervisor	0	1	1	2	4
Analyst/Programmer IV	3	0	0	0	3
Asst Chf Pub Health Nurs	1	0	0	0	1
Chf Pub Health Nurs	0	0	1	0	1
Enviro Services Journey I	0	0	0	1	1
Health Program Mgr III	1	0	0	0	1
Micro/Network Tech I	1	1	0	0	2
Micro/Network Tech II	0	0	1	0	1
Nurse II	0	0	1	2	3
Public Health Nurse Aide	0	3	3	6	12
Public Health Nurse I	1	1	0	5	7
Public Health Nurse II	0	12	5	21	38
Public Health Nurse III	7	9	4	36	56
Public Health Nurse IV	0	2	1	4	7
Public Health Nurse V	2	1	1	0	4
Public Health Spec II	3	0	1	0	4
Totals	26	41	28	112	207

Component: Women, Infants and Children

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Component Mission

To improve the quality of life for pregnant women, children and families and decrease health care costs by furthering nutrition education, promoting access to nutritious foods and improving access to nutrition services as an integral part of health care services.

Component Services Provided

Pregnant, postpartum, and breastfeeding women, infants and children are screened for income and health and/or nutritional risk; if criteria are met, they are certified for the WIC program. Participants receive nutrition education, referrals, and food warrants that may be used at any state-approved WIC vendor for specific food items that will improve their health and nutritional status.

Certification periods are normally six months, but infants are certified for one year, and pregnant women are certified for the duration of their pregnancy.

Component Goals and Strategies

Prevention of prenatal and childhood morbidity related to nutritional problems through the provision of specific nutritious food and nutrition education for low-income, nutritionally-at-risk pregnant, postpartum and breastfeeding women, infants and children up to 5 years of age.

Key Component Issues for FY2001 – 2002

To maintain the infrastructure to handle the caseload up to 29,000 individuals/month.

To ensure that the MIS system continues to perform properly.

Major Component Accomplishments for FY2000

Implementation of a new MIS computer system to all of the WIC agencies which can print warrants and reconcile them on site.

Providing nutritional services and education to over 25,000 individuals/month.

Implemented an Anemia Task Force to address the high prevalence of iron deficiency anemia in children who live in the Y-K delta.

Statutory and Regulatory Authority

AS 18.05.010-070
AS 44.29.020
7ACC 78.010-320

Administration of Public Health and Related Laws
Department of Health & Social Services
Grant Programs

Women, Infants and Children
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	205.4	0.0	0.0
74000 Supplies	14,204.4	15,947.0	15,947.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	4,634.3	4,595.2	4,595.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	19,044.1	20,542.2	20,542.2
Funding Sources:			
1002 Federal Receipts	16,111.6	16,842.2	16,842.2
1108 Statutory Designated Program Receipts	2,932.5	3,700.0	3,700.0
Funding Totals	19,044.1	20,542.2	20,542.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	16,111.6	16,842.2	16,842.2	16,842.2	16,842.2
Statutory Designated Program Receipts	51063	2,932.5	3,700.0	3,700.0	3,700.0	3,700.0
Restricted Total		19,044.1	20,542.2	20,542.2	20,542.2	20,542.2
Total Estimated Revenues		19,044.1	20,542.2	20,542.2	20,542.2	20,542.2

Women, Infants and Children

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	16,842.2	3,700.0	20,542.2
FY2002 Governor	0.0	16,842.2	3,700.0	20,542.2

Component: Maternal, Child, and Family Health

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Component Mission

To promote optimal health outcomes for all Alaskans by providing leadership, coordinating with the public and private provider entities within the health care system, and delivering preventive, rehabilitative, and educational services targeting children, child bearing women and families.

Component Services Provided

Programs within the component work to assess the health status of women and children, work with other private and public health entities to identify needed services and collaborate with families, local providers and other state and public agencies to assure the delivery of needed services and education and referral, as appropriate.

A list of the primary services include:

- 1) Obtaining, analyzing and disseminating information specific to the health status and health risks of women, children and families in Alaska for use in identifying and defining important health issues, so the service delivery system and resources can best be directed to address the problems and improve the overall health status of these populations. Examples of projects to carry out this work include:
 - a) the Pregnancy Risk Assessment Monitoring System (PRAMS) - a monthly survey of women who give birth which gathers information on the health risk behaviors and circumstances of pregnancy and postpartum women;
 - b) Maternal and Infant Mortality Review (MIMR) - a coordinated statewide review of infant deaths, so as to identify possible preventable causes of infant deaths as a first step in designing education and intervention programs to reduce the infant mortality rate;
 - c) The maintenance of an FAS surveillance system and development and implementation of strategies for prevention;and
 - d) Maintenance of a birth defects registry for the purpose of identifying the specific birth defects in the state and the magnitude of various disorders so appropriate programs and services are made available to serve these special needs.
- 2) Promoting access to a flexible array of quality services to all Alaskan infant and toddlers with special developmental needs and to their families, through the Early Intervention/Infant Learning Program. Services are provided through 19 local grantees in a manner that respects families, communities and cultural differences and promotes genuine partnerships in all aspects of service design and delivery. This program includes Part C of IDEA, the federal program mandating services to young children birth through age two who experience severe developmental delays.
- 3) Providing services to women of child bearing age to ensure child bearing occurs in the healthiest manner possible. Support for this outcome is provided through grants and contracts that support family planning service providers in select communities, training and technical assistance to local providers in the areas of prenatal care, high risk pregnancy management and overall women's health care. Family Planning services are available in several areas of the state.
- 4) Providing information, technical assistance and training and other support to local communities in the development of holistic adolescent health programs, based on sound research and tested methods for successful intervention. Services are made available based on the State Adolescent Health Plan developed by an autonomous multi-disciplinary, private -public advisory council.
- 5) Managing the mandatory state newborn screening program to ensure that all newborns are tested in a timely manner, that positive results are made available to providers and families in a timely manner and treatment initiated within established time frames.

- 6) Ensuring access to specialty/diagnostic clinic consultation and counseling in the areas of genetics, cardiology, neurodevelopmental, and cleft lip and palate, through contracts with specialty physicians and collaboration with other Alaskan providers and institutions.
- 7) Coordinating and managing the Healthy Families Alaska Program services are provided through a separate component and funding is provided through grants to local agencies on a long-term basis.
- 8) Continue to offer a Family Violence Prevention Program to educate health providers to identify, refer and intervene appropriately when abuse is suspected/identified. Improve the local community's capacity to involve health providers in local domestic abuse prevention/treatment efforts. Coordinate a clearing house on family violence issues.
- 9) Provide access to Breast & Cervical Cancer Screening services through provider agreements with screening and diagnostic providers in communities statewide.

Component Goals and Strategies

The goal of this component is to promote optimum health outcomes for Alaskans by providing leadership in health care, assessing individual and community health status and needs, providing support and information to policy makers, and assuring the delivery of preventative, rehabilitative, and educational health services targeting children, child-bearing women, and families, especially those with limited incomes, disabilities, and other circumstances of vulnerability.

Key Component Issues for FY2001 – 2002

Continue the Children's Behavioral Health Initiative.

Establish a Universal Newborn Hearing Screening Program.

Major Component Accomplishments for FY2000

The birth defects registry is functional, with children born from January, 1990 to present (8,500 children with birth defects) in the data base. The division has issued and will continue to issue reports on birth defect prevalencies in Alaska.

The FAS Surveillance System is functional with 50% of children with FAS born between 1995-1998 having their charts abstracted and entered into the system. We have calculated a preliminary state FAS prevalence rate and have begun work on defining the characteristics of mothers who have children with FAS.

The Breast & Cervical Cancer Early Detection Program screened approximately 3,800 women statewide between July, 1999 and June, 2000.

Initiated a children behavioral health initiative which focuses on children 0 to 5 years of age with the intent to look at the prevention behavioral pathology in children.

MCFH was awarded a federal grant to develop a Universal Newborn Hearing Screening Program in Alaska.

Statutory and Regulatory Authority

AS 08.36.271	Dentist Permits for Isolated Areas
AS 09.25.120	Public Records
AS 14.30.191, .231	Education for Exceptional Children
AS 18.05.010-070	Administration of Public Health and Related Laws
AS 18.15.200	Disease Control

AS 18. 16.010	Regulation of Abortions
AS18.50.010/.30/.40	Vital Statistics Act
AS 44.29.020	Department of Health & Social Services
AS 47.20	Services for Developmentally Delayed or Disabled Children
7AAC23.010-.900	Programs for Handicapped Children
7AAC27.005-.900	Preventative Medical Services
7AAC 78.010-.320	Grant Programs

Maternal, Child, and Family Health
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	4,313.6	4,854.7	4,820.8
72000 Travel	184.4	284.4	284.4
73000 Contractual	2,760.6	3,192.6	3,125.8
74000 Supplies	518.7	535.9	535.9
75000 Equipment	31.6	176.5	176.5
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	2,952.6	4,177.0	4,177.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	10,761.5	13,221.1	13,120.4
Funding Sources:			
1002 Federal Receipts	7,266.6	9,322.0	9,160.8
1003 General Fund Match	1,075.9	1,078.0	1,083.7
1004 General Fund Receipts	461.8	303.7	262.0
1005 General Fund/Program Receipts	265.4	235.6	237.7
1007 Inter-Agency Receipts	1,591.4	2,051.0	1,973.0
1037 General Fund / Mental Health	100.4	101.2	252.5
1053 Investment Loss Trust Fund	0.0	9.5	0.0
1092 Mental Health Trust Authority Authorized Receipts	0.0	120.0	150.7
1108 Statutory Designated Program Receipts	0.0	0.1	0.0
Funding Totals	10,761.5	13,221.1	13,120.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	7,266.6	9,322.0	9,322.0	9,160.8	9,322.0
Interagency Receipts	51015	1,591.4	2,051.0	1,976.0	1,973.0	1,976.0
General Fund Program Receipts	51060	265.4	235.6	235.6	237.7	235.6
Statutory Designated Program Receipts	51063	0.0	0.1	0.1	0.0	0.0
Mental Health Trust Authority Auth.Rec.	51410	0.0	120.0	120.0	150.7	150.0
Restricted Total		9,123.4	11,728.7	11,653.7	11,522.2	11,683.6

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Total Estimated Revenues		9,123.4	11,728.7	11,653.7	11,522.2	11,683.6

Maternal, Child, and Family Health**Proposed Changes in Levels of Service for FY2002**

The WIC program was able to have full implementation of the new MIS system in FY99. In order to ensure that the system continues full optimum functions, additional MIS staffing is needed.

The increment for the behavioral mental health services and supports for young children will provide training opportunities for human service providers that give intervention services to young children through 5 years of age.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,728.0	9,322.0	2,171.1	13,221.1
Adjustments which will continue current level of service:				
-Birth Defects Register	150.0	-150.0	0.0	0.0
-Transfer 1 PFT PCN from MCFH to PHAdmin	-41.8	0.0	0.0	-41.8
-Transfer 1 PFT PCN from MCFH to Health Services/Medicaid	0.0	0.0	-75.0	-75.0
-Convert Special FY2001 Labor Cost Fund Sources to GF	0.1	0.0	-0.1	0.0
-Year 2 Labor Costs - Net Change from FY2001	-0.4	-11.2	-2.3	-13.9
Proposed budget increases:				
-Behavioral/Mental Health Services for Young Children	0.0	0.0	30.0	30.0
FY2002 Governor	1,835.9	9,160.8	2,123.7	13,120.4

Maternal, Child, and Family Health**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	82	82	Annual Salaries	3,682,291
Part-time	0	0	COLA	52,652
Nonpermanent	0	0	Premium Pay	79,085
			Annual Benefits	1,310,866
			<i>Less 5.93% Vacancy Factor</i>	<i>(304,094)</i>
			Lump Sum Premium Pay	0
Totals	82	82	Total Personal Services	4,820,800

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant III	1	0	1	0	2
Accounting Clerk I	2	0	0	0	2
Accounting Tech I	1	0	1	0	2
Accounting Tech II	1	0	1	0	2
Administrative Assistant	1	0	0	0	1
Administrative Clerk II	10	0	2	0	12
Administrative Clerk III	6	0	1	0	7
Administrative Supervisor	1	0	1	0	2
Analyst/Programmer IV	3	0	3	0	6
Analyst/Programmer V	1	0	0	0	1
Grants Administrator I	1	0	0	0	1
Health Program Associate	4	0	1	0	5
Health Program Mgr I	2	0	1	0	3
Health Program Mgr II	9	0	2	0	11
Health Program Mgr III	5	0	1	0	6
Health Program Mgr IV	1	0	0	0	1
Hlth & Soc Svcs Plnr II	1	0	0	0	1
Micro/Network Spec I	0	0	1	0	1
Micro/Network Tech I	1	0	0	0	1
Prog Coordinator	1	0	0	0	1
Public Health Spec I	3	0	1	0	4
Public Health Spec II	7	0	0	0	7
Public Hlth Medical Spec	1	0	0	0	1
Publications Tech II	1	0	0	0	1
Statistical Clerk	1	0	0	0	1
Totals	65	0	17	0	82

Component: Healthy Families

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To reduce the incidence and severity of the abuse and neglect experience by the target children and families enrolled in the program. Additionally, the program seeks to assist families in resolving the problems and issues, such as unemployment, homeless and substance abuse, that creates stress in family's lives. We seek to increase capacity of caregivers to more successfully parent their children.

Component Services Provided

This is a child abuse/neglect prevention grant program currently serving seven communities/target groups (two in Anchorage) state-wide. One additional site, the Kenai Parent Support Program, is administered through the Section of Public Health Nursing. The programs screen all births in their designated service area; those families with positive screens are offered an assessment of eligibility for voluntary home visiting services. Paraprofessional home visitors, from the community in which the program is located, offer families of pregnant women and newborns who have significant life stressors, intensive services designed to enhance the parent's ability to provide a safe and nurturing environment for the infant(s). Services are provided for up to 3-5 years. Initially services are offered at least once a week; as families stabilize, service frequency decreases.

Component Goals and Strategies

Healthy Families Alaska is a home visiting program for pregnant women/families of newborns with life stressors that place their infants at risk for child abuse and neglect and other poor childhood outcomes. Services, offered intensively and over the long term (three to five years), are designed to promote infant-parent bonding, child health and development, supportive parenting, and family self-sufficiency. Programs screen and assess all pregnant women/parents of newborns in the geographic area served by the program; those with significant stressors are offered voluntary home visiting services. Examination of data from February 1998 reveals that the program is targeting high-risk parents. Of approximately 300 families enrolled in the program for greater than 90 days: 47% were on the Alaska Temporary Assistance Program (ATAP); 39% had domestic violence concerns; 52% were experiencing social isolation; 46% had mental health issues as a concern; 39% had not completed a GED or high school education; 75% were unemployed; 71% were on Medicaid; 22% were experiencing substance abuse; and 24% had alcohol abuse as a concern.

While the program is still fairly new (most programs have been providing services for less than two years) 39% of the families enrolled have been receiving services for greater than 12 months. The following promising outcomes have been achieved: 35% of primary care givers (usually mothers) have become employed or started school; 22% have graduated from ATAP; 54% obtained support services for domestic violence; 41% of those who felt isolated, are no longer experiencing isolation; 61% had stabilized their mental health issues; and 24% had completed their GED or graduated from high school. 94% of target children who had received at least one home visit were free of substantiated abuse.

MCFH has issued a contract with Johns Hopkins University to perform a control group study of the program and demonstrate program efficacy.

Key Component Issues for FY2001 – 2002

The John Hopkins randomized control study will study the effectiveness of the Healthy Family model against a control group.

Major Component Accomplishments for FY2000

Have seven highly functioning programs located throughout the state.

The Hopkins control study is well under way with 50% of the study's participants already enrolled.

Statutory and Regulatory Authority

N/A

Healthy Families
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	221.7	221.9	221.3
72000 Travel	0.0	0.0	0.0
73000 Contractual	100.0	100.0	100.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	903.0	979.3	979.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,224.7	1,301.2	1,300.6
Funding Sources:			
1004 General Fund Receipts	7.5	1.8	1.8
1007 Inter-Agency Receipts	1,111.2	1,195.2	1,198.8
1037 General Fund / Mental Health	6.0	0.0	0.0
1053 Investment Loss Trust Fund	0.0	1.5	0.0
1092 Mental Health Trust Authority Authorized Receipts	100.0	100.0	100.0
1108 Statutory Designated Program Receipts	0.0	2.7	0.0
Funding Totals	1,224.7	1,301.2	1,300.6

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	1,111.2	1,195.2	1,123.0	1,198.8	1,195.2
Statutory Designated Program Receipts	51063	0.0	2.7	2.7	0.0	0.0
Mental Health Trust Authority Auth.Rec.	51410	100.0	100.0	100.0	100.0	100.0
Restricted Total		1,211.2	1,297.9	1,225.7	1,298.8	1,295.2
Total Estimated Revenues		1,211.2	1,297.9	1,225.7	1,298.8	1,295.2

Healthy Families

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	3.3	0.0	1,297.9	1,301.2
Adjustments which will continue current level of service:				
-Convert Special FY2001 Labor Cost Fund Sources to GF	2.7	0.0	-2.7	0.0
-Year 2 Labor Costs - Net Change from FY2001	-4.2	0.0	3.6	-0.6
FY2002 Governor	1.8	0.0	1,298.8	1,300.6

Healthy Families

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	5	5	Annual Salaries	159,858
Part-time	0	0	COLA	1,864
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	65,802
			<i>Less 2.74% Vacancy Factor</i>	<i>(6,224)</i>
			Lump Sum Premium Pay	0
Totals	5	5	Total Personal Services	221,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	0	0	0	1	1
Public Health Nurse Aide	0	0	0	3	3
Public Health Nurse II	0	0	0	1	1
Totals	0	0	0	5	5

Component: Public Health Administrative Services

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To provide overall divisional management, procurement, budget and financial administration.

Component Services Provided

Public Health Administration provides overall divisional management that includes financial administration, budget development, centralized grant and contract administration and personnel. As part of the management function, staff are also involved in policy development, legislative liaison activities, health service planning and development.

Component Goals and Strategies

The Public Health Administrative Services Component provides overall divisional management, procurement, budget and financial administration.

Key Component Issues for FY2001 – 2002

To be able to implement new federal grants within 90 days as required by the federal programs.

Major Component Accomplishments for FY2000

All divisional accomplishments are achieved through the leadership of the director's office.

Statutory and Regulatory Authority

AS 18.05.010-070
AS 44.29.020
7 AAC 78.010-320

Administration of Public Health and Related Laws
Department of Health & Social Services
Grant Programs

Public Health Administrative Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	764.2	714.7	800.2
72000 Travel	5.9	3.8	3.8
73000 Contractual	149.9	585.0	541.0
74000 Supplies	75.9	18.2	18.2
75000 Equipment	24.0	5.5	5.5
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.6	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,020.5	1,327.2	1,368.7
Funding Sources:			
1002 Federal Receipts	515.7	819.6	819.0
1004 General Fund Receipts	504.8	505.5	549.7
1053 Investment Loss Trust Fund	0.0	0.7	0.0
1108 Statutory Designated Program Receipts	0.0	1.4	0.0
Funding Totals	1,020.5	1,327.2	1,368.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	515.7	819.6	819.6	819.0	819.6
Statutory Designated Program Receipts	51063	0.0	1.4	1.4	0.0	0.0
Restricted Total		515.7	821.0	821.0	819.0	819.6
Total Estimated Revenues		515.7	821.0	821.0	819.0	819.6

Public Health Administrative Services
Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	506.2	819.6	1.4	1,327.2
Adjustments which will continue current level of service:				
-Transfer 1 PFT PCN from MCFH to PHAdmin	41.8	0.0	0.0	41.8
-Convert Special FY2001 Labor Cost Fund Sources to GF	1.4	0.0	-1.4	0.0
-Year 2 Labor Costs - Net Change from FY2001	0.3	-0.6	0.0	-0.3
FY2002 Governor	549.7	819.0	0.0	1,368.7

Public Health Administrative Services**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	10	11	Annual Salaries	624,953
Part-time	0	0	COLA	10,641
Nonpermanent	1	1	Premium Pay	0
			Annual Benefits	196,268
			<i>Less 3.81% Vacancy Factor</i>	(31,662)
			Lump Sum Premium Pay	0
Totals	11	12	Total Personal Services	800,200

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant III	0	0	1	0	1
Administrative Manager IV	0	0	1	0	1
Analyst/Programmer III	0	0	1	0	1
Analyst/Programmer IV	1	0	0	0	1
Analyst/Programmer V	0	0	1	0	1
Dir Public Health	0	0	1	0	1
Grants Administrator II	0	0	1	0	1
Health Program Mgr IV	0	0	1	0	1
Personnel Asst I	0	0	1	0	1
Procurement Spec I	0	0	1	0	1
Secretary	0	0	1	0	1
Student Intern I	0	0	1	0	1
Totals	1	0	11	0	12

Component: Epidemiology

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To provide surveillance, epidemic response, investigation and control of acute and chronic diseases and injuries through defining causal factors, identifying and directing control measures and providing a basis for policy for development, program planning and evaluation.

Component Services Provided

- Provide trained public health professional services for partner notification and contact identification and contact identification, education, diagnosis, treatment, and tracking for tuberculosis, HIV, STD, and other infectious diseases that can be transmitted from person to person.
- Establish and maintain a system of direct disease reporting to the Section of Epidemiology from laboratories.
- Assure adequacy of immunization outreach and access to vaccinations to insure that all Alaska children receive vaccinations to be in compliance with new daycare and school immunization requirements.
- Support Alaska school districts to successfully implement the Youth Risk Behavior Survey (YRBS) in 2001.
- Develop educational curriculum regarding Arctic environmental contaminants and continue measurements of exposure levels of Alaskans contaminants.
- Maintain all existing programs and meet federal grant objectives and state outcome measures for Immunization, Tuberculosis, Sexually Transmitted Diseases, HIV/AIDS, Diabetes, Cancer, Heart Disease, Injury Prevention, Surveillance, Environmental Health Risk Assessment, Epidemic Response, Occupational Injury Prevention, Lead, Arthritis.
- Continue to develop and improve existing data systems to support surveillance, provide an accurate picture of the health status of Alaskans, and enable improved evaluation of program activities.
- Increase cooperative activities with Sections in Division of Public Health, with other divisions within DHSS, and with other agencies with health missions in Alaska.
- Maintain medical and epidemiological expertise needed to accomplish mission.
- Develop public health guidelines for consumption of subsistence foods.

Component Goals and Strategies

The Section of Epidemiology is responsible for surveillance, epidemic response, investigation, and control of acute and chronic diseases and injuries through defining causal factors, identifying and directing control measures, and providing a basis for policy development, program planning and evaluation.

"A foundation stone for public health activities is an assessment and surveillance capacity that identifies problems, provides data to assist in decisions about appropriate actions and monitors progress." Epidemiology has long been considered the essential science of public health, and a strong assessment and surveillance system based on epidemiological principles is a fundamental part of a technically competent public health system.

Key Component Issues for FY2001 – 2002

Insuring that the funding is available for responses to disease outbreaks and control of emerging infectious diseases.

Continuing to build on the current foundation for ensuring that all children are immunized on time.

Support development of consensus guidelines for consumption of subsistence foods and commercial seafoods.

Major Component Accomplishments for FY2000

Implementation of the second dose measles vaccine.

Building of immunization coalitions.

Statutory and Regulatory Authority

AS 09.65.121	Actions, Immunities, Defenses and Duties
AS 09-25.120	Evidence, Presumptions, Public Records and Privileges
AS 14.07.020	Administration of Public Schools
AS 14.30	Pupils and Educational Programs for Pupils
AS 18.05.010-.070	Administration of Public Health and Related Laws
AS 18.60.010 & .030	Safety
AS 18.15.120 - 320	Disease Control
AS 44.29.020	Department of Health & Social Services
AS 47.35.010	Child Care Facilities, Child Placement Agencies, Child Treatment Facilities, Foster Homes, and Maternity Homes
4 AAC 06.055	Government of Schools - Immunizations Required
4 AAC 60.115	Pre-Elementary Schools - Immunizations Required
7AAC 12.650	Employee Health Program
7AAC 27.005-.900	Preventative Medical Services
7AAC 50.450,.455	Health in Care Facilities
7AAC 75.220	Health Care Facilities - General Employment
7 AAC 78.010-.320	Grant Programs
13 AAC 08.025	Medical Standards

Epidemiology

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	3,787.3	4,148.2	4,655.2
72000 Travel	244.7	261.4	316.4
73000 Contractual	1,011.5	1,057.0	1,221.6
74000 Supplies	588.9	758.3	758.3
75000 Equipment	0.0	80.0	80.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,291.9	1,535.8	1,535.8
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	6,924.3	7,840.7	8,567.3
Funding Sources:			
1002 Federal Receipts	4,556.2	5,302.8	5,260.9
1004 General Fund Receipts	2,012.5	2,055.4	2,938.8
1007 Inter-Agency Receipts	305.6	411.5	317.6
1053 Investment Loss Trust Fund	0.0	7.3	0.0
1108 Statutory Designated Program Receipts	50.0	63.7	50.0
Funding Totals	6,924.3	7,840.7	8,567.3

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	4,556.2	5,302.8	5,302.8	5,260.9	5,269.0
Interagency Receipts	51015	305.6	411.5	411.5	317.6	321.5
Statutory Designated Program Receipts	51063	50.0	63.7	63.7	50.0	50.0
Restricted Total		4,911.8	5,778.0	5,778.0	5,628.5	5,640.5
Total Estimated Revenues		4,911.8	5,778.0	5,778.0	5,628.5	5,640.5

Epidemiology

Proposed Changes in Levels of Service for FY2002

The component is requesting a GF increment for \$659.0 to cover the costs of investigating and controlling infectious diseases. Funding over the years has remained relatively flat, but with increases in population, newer childhood vaccines and increased costs of doing business, Epidemiology is seriously underfunded to protect the public's health.

The division is also requesting an increment in the amount of \$200.0 to be able to provide scientifically credible public health advice about environmental contaminants in subsistence foods. These issues have emerged as a major issue for Alaska subsistence consumers using traditionally harvested foods, primarily fish.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,062.7	5,302.8	475.2	7,840.7
Adjustments which will continue current level of service:				
-Transfer 1 PFT PCN from Epidemiology to Health Information & System Support	0.0	-33.8	-90.0	-123.8
-Convert Special FY2001 Labor Cost Fund Sources to GF	13.7	0.0	-13.7	0.0
-Year 2 Labor Costs - Net Change from FY2001	3.4	-8.1	-3.9	-8.6
Proposed budget increases:				
-Back to Basics - Infection Detection and Protection - Epidemiology	659.0	0.0	0.0	659.0
-Public Health Evaluation of Environmental Contaminants	200.0	0.0	0.0	200.0
FY2002 Governor	2,938.8	5,260.9	367.6	8,567.3

Epidemiology

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	63	71	Annual Salaries	3,685,906
Part-time	2	2	COLA	52,630
Nonpermanent	0	0	Premium Pay	27,000
			Annual Benefits	1,229,969
			<i>Less 6.81% Vacancy Factor</i>	(340,305)
			Lump Sum Premium Pay	0
Totals	65	73	Total Personal Services	4,655,200

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	1	0	0	0	1
Administrative Clerk II	9	0	0	0	9
Administrative Clerk III	11	0	0	0	11
Analyst/Programmer IV	6	0	0	0	6
Education Specialist I	1	0	0	0	1
Health Program Mgr II	3	0	0	0	3
Health Program Mgr III	6	0	0	0	6
Health Program Mgr IV	1	0	0	0	1
Micro/Network Spec II	1	0	0	0	1
Micro/Network Tech II	1	0	0	0	1
Prog Coordinator	1	0	0	0	1
Public Health Spec I	7	0	0	0	7
Public Health Spec II	20	0	0	0	20
Public Hlth Medical Spec	3	0	0	0	3
Publications Tech II	1	0	0	0	1
State Epidemiologist	1	0	0	0	1
Totals	73	0	0	0	73

Component: Bureau of Vital Statistics

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To register and safeguard records of vital events for Alaska.

Component Services Provided

The Bureau registers all vital events for the State of Alaska. In addition, the Bureau maintains a statewide training program to train magistrates to act as local registrars, hospitals to properly complete birth and death certificates, funeral directors to properly complete death certificates, and court clerks to properly process and complete divorce certificates. The Bureau maintains a complete record of entry that includes a checking, editing and correcting process to ensure that the information contained in each record accurately reflects the true facts surrounding the vital event. The Bureau also provides a certification and issue process to provide the public with certified copies of records of vital events as needed for estate, passport, and innumerable other legal grounds.

The Bureau implemented and maintains an Heirloom Birth Certificate program that collects funds dedicated to the Alaska Children's Trust. Finally, the Bureau maintains the Medical Marijuana Registry.

Component Goals and Strategies

The Bureau of Vital Statistics is responsible for:

providing complete registration of all births, deaths, marriages, divorces and adoptions for residents, and, when appropriate, visitors to the State of Alaska;

the issuance of marriage licenses for residents and visitors;

ensuring that all facts and information entered on records of vital events are accurate;

providing policy makers, planners and health professionals with accurate and timely data, information and analysis of the health status of the population.

Key Component Issues for FY2001 – 2002

No key issues.

Major Component Accomplishments for FY2000

Implementation of Hallmark Immunization greeting card program.

Implementation of a statewide marijuana registry.

Statutory and Regulatory Authority

AS 18.05.010 - 070	Administration of Public Health and Related Laws
AS 18..50.010 - 990	Vital Statistics Act
AS 25.05.071 - 391	Alaska Marriage Code
AS 25.20.050(b)	Parent and Child
AS 25.20..055	Parent and Child

AS 25.23.160 - 170 Adoption
AS 44.29.020 Department of Health & Social Services
AS 09.55.060 Special Actions and Proceedings
AS 17.37.030 Medical Use of Marijuana
7 AAC 05.110 - 990 Vital Records

Bureau of Vital Statistics
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,122.6	1,209.8	1,285.1
72000 Travel	19.1	26.5	26.5
73000 Contractual	167.4	411.5	436.5
74000 Supplies	48.4	36.4	76.4
75000 Equipment	83.5	21.3	21.3
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,441.0	1,705.5	1,845.8
Funding Sources:			
1002 Federal Receipts	229.0	253.9	253.8
1004 General Fund Receipts	335.0	214.5	218.0
1005 General Fund/Program Receipts	670.9	0.0	0.0
1007 Inter-Agency Receipts	206.1	289.0	288.9
1053 Investment Loss Trust Fund	0.0	20.3	0.0
1108 Statutory Designated Program Receipts	0.0	2.7	0.0
1156 Receipt Supported Services	0.0	925.1	1,085.1
Funding Totals	1,441.0	1,705.5	1,845.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
Interagency Receipts	51015	0.0	0.0	0.0	0.0	35.0
Unrestricted Total		0.0	0.0	0.0	0.0	35.0
Restricted Revenues						
Federal Receipts	51010	229.0	253.9	253.9	253.8	248.7
Interagency Receipts	51015	206.1	289.0	299.4	288.9	289.0
General Fund Program Receipts	51060	670.9	0.0	0.0	0.0	0.0
Statutory Designated Program Receipts	51063	0.0	2.7	2.7	0.0	0.0
Receipt Supported Services	51073	0.0	925.1	925.1	1,085.1	1,068.3
Restricted Total		1,106.0	1,470.7	1,481.1	1,627.8	1,606.0
Total Estimated Revenues		1,106.0	1,470.7	1,481.1	1,627.8	1,641.0

Bureau of Vital Statistics

Proposed Changes in Levels of Service for FY2002

The Bureau is developing a new web-based vital statistics entry and information system for statewide implementation.

The Bureau has moved its Anchorage office into leased space and will be moving its Juneau and Fairbanks offices as soon as suitable space is located.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	234.8	253.9	1,216.8	1,705.5
Adjustments which will continue current level of service:				
-Convert Special FY2001 Labor Cost Fund Sources to GF	2.7	0.0	-2.7	0.0
-Convert GF Prgm resulting from salary adjustments to Receipts for Services	-5.2	0.0	5.2	0.0
-Year 2 Labor Costs - Net Change from FY2001	-14.3	-0.1	12.5	-1.9
Proposed budget increases:				
-Increase Public Service Staffing, Supplies and Leasing Funds for Fbks	0.0	0.0	142.2	142.2
FY2002 Governor	218.0	253.8	1,374.0	1,845.8

Bureau of Vital Statistics

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	25	27	Annual Salaries	939,038
Part-time	1	1	COLA	14,216
Nonpermanent	0	0	Premium Pay	10,427
			Annual Benefits	373,069
			<i>Less 3.86% Vacancy Factor</i>	(51,650)
			Lump Sum Premium Pay	0
Totals	26	28	Total Personal Services	1,285,100

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	5	0	5
Administrative Clerk III	3	2	6	0	11
Administrative Supervisor	1	0	2	0	3
Analyst/Programmer IV	0	0	1	0	1
Chf Health Res & Vital Stat	0	0	1	0	1
Health Program Associate	0	0	1	0	1
Micro/Network Spec I	0	0	1	0	1
Research Analyst II	0	0	2	0	2
Research Analyst III	0	0	1	0	1
Research Analyst IV	0	0	1	0	1
Totals	4	2	22	0	28

Component: Health Information & System Support

Contact: Manager: Janet Clarke, Director, Administrative Services

Tel: (970) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To facilitate access to health status and health system information, and to support state and community level health system planning, program development, and evaluation.

Component Services Provided

The component provides information and systems analysis support to state agencies, policy-makers and other public and private partners.

The component coordinates the Alaska Public Health Improvement Process and the Healthy Alaskans 2010 target-setting effort.

The component provides health status information to the public through the development and maintenance of the Alaska Public Health Information System, drawing upon state and other public data sources.

Component Goals and Strategies

The goal of the component is to work in partnership with public and private providers to ensure that Alaskans have adequate access to public health and health care services, so they will live longer and healthier lives.

Key Component Issues for FY2001 – 2002

Strengthen the assessment and evaluation capacity in the Division of Public Health to meet the increasing demand from both state and community levels for health data, planning assistance, evaluation methods, and needs assessment.

Implement the Alaska Public Health Improvement Plan, including

- Development and implementation of the Alaska Public Health Information System to facilitate the routine sharing of information to ensure the public's health is optimally maintained.
- Facilitation of the expansion of public health workforce development capacity
- Support for communities' public health data and local health planning activities
- Leadership of a national effort to develop a model state public health law
- Participation in a national project to identify best practices in public health performance management

Complete and publish Health Status in Alaska, 2000 Edition, and provide ongoing capacity for tracking and reporting on health status indicators, health care resources and access to care for Alaskans.

Coordinate with other public and private partners to establish health status and health system targets for Alaska for 2010, and publish these targets (Healthy Alaskans 2010)

Develop and implement a strategic health policy plan for Alaska to facilitate progress toward the targets identified in Healthy Alaskans 2010

Major Component Accomplishments for FY2000

This is a new component in the FY2002 budget request, but development began during FY2000. The component has responsibility for developing health status targets for Alaska for 2010 in conjunction with the national Healthy People 2010 process, implementing the Alaska Public Health Improvement program, and developing the capacity to provide technical assistance to agencies and communities on health data issues, evaluation of programs, and community health planning.

The component secured a major grant from the Robert Wood Johnson Foundation for establishing the Alaska Public Health Information System, for leading a national effort to develop a model state public health law, and for participating in a national program to develop performance measurement tools for states and localities. The component will carry out these responsibilities.

Statutory and Regulatory Authority

No statutes and regulations.

Health Information & System Support

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	283.9
72000 Travel	0.0	0.0	48.5
73000 Contractual	0.0	0.0	82.4
74000 Supplies	0.0	0.0	5.0
75000 Equipment	0.0	0.0	20.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	0.0	0.0	439.8
Funding Sources:			
1002 Federal Receipts	0.0	0.0	34.3
1007 Inter-Agency Receipts	0.0	0.0	101.5
1108 Statutory Designated Program Receipts	0.0	0.0	304.0
Funding Totals	0.0	0.0	439.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	0.0	0.0	34.3	33.8
Interagency Receipts	51015	0.0	0.0	0.0	101.5	100.0
Statutory Designated Program Receipts	51063	0.0	0.0	0.0	304.0	302.9
Restricted Total		0.0	0.0	0.0	439.8	436.7
Total Estimated Revenues		0.0	0.0	0.0	439.8	436.7

Health Information & System Support
Proposed Changes in Levels of Service for FY2002

The component anticipates focusing on maintenance of effort in FY2002.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	0.0	0.0	0.0
Adjustments which will continue current level of service:				
-Health Services/Medicaid Transfer In	0.0	0.0	312.9	312.9
-Transfer of PFT PCN from Epidemiology to Health Information & System Support	0.0	33.8	90.0	123.8
-Year 2 Labor Costs - Net Change from FY2001	0.0	0.5	2.6	3.1
FY2002 Governor	0.0	34.3	405.5	439.8

Health Information & System Support

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	0	4	Annual Salaries	218,232
Part-time	0	0	COLA	4,210
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	68,827
			<i>Less 2.53% Vacancy Factor</i>	<i>(7,369)</i>
			Lump Sum Premium Pay	0
Totals	0	4	Total Personal Services	283,900

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Health Program Mgr III	0	0	1	0	1
Hlth & Soc Svcs Plnr II	0	0	1	0	1
Public Hlth Medical Spec	1	0	0	0	1
Publications Tech I	0	0	1	0	1
Totals	1	0	3	0	4

Component: Health Services/Medicaid

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To improve the health of Medicaid eligible Alaskans served by and through the Division of Public Health with a primary focus on pregnant women and children birth to 21 years of age, through direct and collaborative efforts.

Component Services Provided

The Medicaid Services Unit (MSU) provides support and coordinating functions within the Division of Public Health relative to the services performed by the Sections and staff of the MSU for or on behalf of low income, Medicaid eligible Alaskans. The MSU provides support services to activities conducted by the Director's Office, the Sections of Epidemiology, Vital Statistics, Maternal, Child and Family Health, Public Health Nursing, Laboratories, Community Health and Emergency Medical Services, which benefit persons eligible for Medicaid.

The MSU provides direct assistance in the delivery of services to pregnant women and children enrolled in the Medicaid program; oversees statewide outreach on well child exams as required by the EPSDT provisions in Medicaid; collaborates with DMA on health services and public health issues affecting the low income populations. Further the unit assists with service related travel that is not covered by the contractor such as reimbursement for travel, gas, food, and provide bus tokens for Medicaid eligible Alaskans for special service needs; assists in trouble shooting client/payer or client/provider problems. The unit also maintains the EPSDT data subsystems of the MMIS necessary for the unit's functions, assuring data is available to the Divisions and the Department; purchases and distributes medical and related clinical supplies and equipment, and materials to implement the services for pregnant women and children enrolled in Medicaid. The MSU does statewide outreach to inform clients on the availability of the program and to encourage appropriate access to preventive health services. The MSU seeks collaborative opportunities for improving services to pregnant women and children, and targeted groups such as children in foster care, and children with special health care needs.

The MSU prepares, maintains, and oversees the Memorandum of Agreement between DPH and DMA, and assists with Reimbursable Services Agreement and the Cost Allocation Plan for services provided by Public Health on behalf of Medicaid eligible Alaskans. The unit maintains appropriate management, audit procedures, and accountability practices for DPH use of interagency funds (such as time study methodology, reporting mechanisms, site visits; review of services provided, prepares awards and administers contracts funded from interagency funds for development of services, pilot programs, program evaluations, and development of materials for client and program use). The unit provides support in the development of policies, plans, regulations, manuals, etc., which clarify or implement programs financed for the low income Medicaid eligible, participates and support DPH and DHSS efforts to improve service delivery to children, pregnant women, and others who are low income. Examples of these activities include implementation of the Child Health Plan and the Adolescent Health Plan, initiatives of the DHSS relating to child health such as for immunizations and Children's Cabinet; and in the role of liaison for DPH and DMA in program administration for Medicaid eligible Alaskans. The MSU is an active participant in the changes and planning relating to Welfare reform and its affects on Medicaid, and changes in service delivery strategies of the State's program for the low-income, such as Primary Care Case Management and Managed Care.

Component Goals and Strategies

Improve the health of Medicaid eligible Alaskans served by and through the Division of Public Health (DPH), with a primary focus on pregnant women and children birth to 21 years of age, through direct and collaborative efforts.

Key Component Issues for FY2001 – 2002

Continuation of enrollment and outreach for the Denali Kid Care.

Developing a baseline measure for the immunization rate of 2-year olds enrolled in the Medicaid Program.

Major Component Accomplishments for FY2000

Second year of implementation of Denali Kid Care, and continued to exceed the goal of the federal grant. Increased the documented EPSDT screening rate from 36% in federal fiscal year (FFY) 1998 to 68% in FFY 1999.

Statutory and Regulatory Authority

AS 47.07.010
7 ACC 43.450-480
42 CFR 440 & 441
Title XIX Social Security Act
Title XXI Social Security Act

Medical Assistance for Needy Persons
Children Services
HCFA General Provisions & Services Requirements and Limits

Health Services/Medicaid
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,140.9	1,270.6	1,158.8
72000 Travel	168.7	249.1	173.6
73000 Contractual	684.8	1,050.0	1,790.6
74000 Supplies	513.7	143.5	138.5
75000 Equipment	171.8	64.3	64.3
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	590.9	627.0	627.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	3,270.8	3,404.5	3,952.8
Funding Sources:			
1007 Inter-Agency Receipts	3,131.5	3,101.6	3,952.8
1108 Statutory Designated Program Receipts	139.3	302.9	0.0
Funding Totals	3,270.8	3,404.5	3,952.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	3,131.5	3,101.6	3,101.6	3,952.8	3,954.6
Statutory Designated Program Receipts	51063	139.3	302.9	302.9	0.0	0.0
Restricted Total		3,270.8	3,404.5	3,404.5	3,952.8	3,954.6
Total Estimated Revenues		3,270.8	3,404.5	3,404.5	3,952.8	3,954.6

Health Services/Medicaid**Proposed Changes in Levels of Service for FY2002**

This component may experience significant changes with an expansion in Medicaid eligibility for children under age 19 and pregnant women. MSU will continue work with DPH, DMA, and all components of the DHSS to implement the new program design for low-income children and pregnant women. With additional health coverage for children and pregnant women the Division of Public Health will be taking on a variety of new projects related to outreach for enrollment of clients in the program implementation of new access points for enrollment, and evaluation of the program. Additionally, with any managed care strategies implemented in the State the MSU functions could involve more contracting of services with managed care organizations.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	0.0	3,404.5	3,404.5
Adjustments which will continue current level of service:				
-Transfer of 1 PFT PCN from MCFH to Health Services/Medicaid	0.0	0.0	75.0	75.0
-Transfer 3 PFT PCN's Stat Desig & I/A funds to Health Information & System Support	0.0	0.0	-312.9	-312.9
-Year 2 Labor Costs - Net Change from FY2001	0.0	0.0	-1.8	-1.8
Proposed budget increases:				
-Increase in I/A with DMA resulting from the Medicaid Expansion	0.0	0.0	788.0	788.0
FY2002 Governor	0.0	0.0	3,952.8	3,952.8

Health Services/Medicaid
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	22	20	Annual Salaries	878,596
Part-time	0	0	COLA	12,319
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	312,472
			<i>Less 3.83% Vacancy Factor</i>	<i>(46,087)</i>
			Lump Sum Premium Pay	0
Totals	22	20	Total Personal Services	1,157,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	2	0	2
Administrative Clerk III	1	0	2	0	3
Analyst/Programmer III	0	0	1	0	1
Health Program Mgr I	3	1	1	0	5
Health Program Mgr II	0	0	3	0	3
Health Program Mgr III	0	0	1	0	1
Hlth & Soc Svcs Plnr II	0	0	1	0	1
Public Health Spec I	1	0	1	0	2
Research Analyst II	1	0	0	0	1
Totals	6	1	13	0	20

Component: Community Health/Emergency Medical Services

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

(1) To reduce both the human suffering and economic loss to society resulting from premature death and disability due to injuries and sudden illness; and (2) to assure access to community-based primary care and preventive health services through assessment, policy development, certification and licensure, provision of financial and technical assistance, and interagency coordination.

Component Services Provided

- (1) Support to community-based efforts that prevent and modify risk factors associated with the leading causes of morbidity and mortality in Alaska.
- (2) Collection, analysis, and publication of prevalence data on behavioral risks associated with the leading causes of mortality and chronic disease in Alaska.
- (3) Implementation of the statewide tobacco prevention and control program aimed at reducing the use of tobacco in Alaska.
- (4) Community-based primary care systems planning and development, including provider recruitment and retention enhancement.
- (5) Implementation of a statewide cardiovascular health program.
- (6) Implementation and maintenance of a statewide emergency medical services system.
- (7) Implementation of a statewide injury prevention program.

Component Goals and Strategies

- (1) reduce the risk factors associated with the main causes of death, disability, and hospitalization in Alaska;
- (2) improve access to community-based primary care services;
- (3) improve the overall status of rural health care in Alaska;
- (4) prevent life threatening and disabling injuries whenever possible; and
- (5) establish a comprehensive, coordinated system of emergency medical services that: assures citizens and visitors easy access to services; expedites initial EMS responses; ensures that appropriate lifesaving and stabilization measures are rendered at the scene; and ensures that patients are transported or transferred in a timely and efficient manner to medical facilities capable of effecting maximum recovery and rehabilitation

Key Component Issues for FY2001 – 2002

Lack of access to adequate primary health care services in rural and underserved communities.

High rate of injury and death related to risk factors unique to Alaska.

Retention and recruitment of volunteer EMS providers and primary care providers.

Multiple risk factors associated with the main causes of death and chronic diseases.

Major Component Accomplishments for FY2000

Maintained over 3,500 certified EMS EMTs, EMS Instructors, and Defibrillator Technicians.

Obtained federal grant funding for Rural Hospital Flexibility, Health Alert Network, EMS for Children, Primary Care, Alaska Health Education Library Project, EMS Data Systems, Fire and Burn Injury Prevention, Placement of Health Professions Students in Underserved Areas, State Office of Rural Health, Telemedicine, Poison Control, and Tobacco Prevention and Control projects.

Maintained the statewide Alaska Trauma Registry, which collects data on all injury admissions in every hospital in the state.

Distributed smoke alarms to rural and low-income communities to help prevent deaths from house fires.

Completed over 1,000 tobacco-sales-to-minors investigations of retail stores statewide.

Placed over 30 health profession students in shortage areas.

Assisted Southeast Alaska Regional Health Consortium and the Sunshine Health Clinic (Talkeetna) to become federally qualified Community Health Centers.

Provided technical assistance to eight rural hospitals on the critical access hospital program, which has resulted in the conversion of the Valdez Hospital to a critical access hospital.

Received a national award for EMS for Children grant accomplishments.

Awarded 5 community-based health promotion grants, resulting in the coordination of over 45 rural health fairs, the training of community wellness advocates, the provision of fire safety education to more than 1,600 children and adults, and the provision of mammography clinics and cancer education.

Established Alaskans Promoting Physical Activity statewide coalition, and produced and distributed two public service announcements on the importance of physical activity.

Awarded 9 local and 6 regional tobacco prevention and control grants, resulting in the maintenance of tobacco prevention and control coalitions, tobacco use education to youth, and the development of a PSA on the use of tobacco.

Statutory and Regulatory Authority

AS 08.64.369	Medicine
AS 09.65.090, 091, 095, 100, 120	Actions, Immunities, Defenses and Duties
AS 11.81.430	Use of Force, special relationships
AS 12.55.155	Sentencing & Probation
AS 18.08.010, 015, 020, 060, 070, 075, 080, 082, 084, 086, 087, 089, 090	Emergency Medical Services
AS 18.12.035	Living Wills and Do Not Resuscitate Orders
AS 18.15.250	Disease Control
AS 47.17.020	Child Protection
AS 47.24.010	Protection of Vulnerable Adults
AS 47.24.110	Protection of Vulnerable Adults
7 AAC 16.10 - 90	Do Not Resuscitate Protocol and Identification
7 AAC 26.010-170	
7 AAC 26.210 - 290	
7 AAC 26.310 - 400	
7 AAC 26.410 - 490	
7 AAC 26.610 - 700	
7 AAC 26.710 - 745	
7 AAC 26.810 - 840	

7 AAC 26.999

Community Health/Emergency Medical Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,363.2	1,750.3	2,146.9
72000 Travel	246.4	249.6	319.6
73000 Contractual	1,069.0	3,236.3	3,845.0
74000 Supplies	207.7	129.5	341.5
75000 Equipment	101.5	220.3	175.3
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	771.2	200.4	10,712.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	3,759.0	5,786.4	17,540.4
Funding Sources:			
1002 Federal Receipts	2,676.9	4,594.8	16,344.4
1004 General Fund Receipts	700.0	803.2	816.0
1005 General Fund/Program Receipts	42.8	49.1	49.8
1007 Inter-Agency Receipts	339.3	330.6	330.2
1053 Investment Loss Trust Fund	0.0	3.5	0.0
1108 Statutory Designated Program Receipts	0.0	5.2	0.0
Funding Totals	3,759.0	5,786.4	17,540.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	2,676.9	4,594.8	4,594.8	16,344.4	16,344.4
Interagency Receipts	51015	339.3	330.6	330.6	330.2	330.2
General Fund Program Receipts	51060	42.8	49.1	49.1	49.8	49.8
Statutory Designated Program Receipts	51063	0.0	5.2	5.2	0.0	0.0
Restricted Total		3,059.0	4,979.7	4,979.7	16,724.4	16,724.4
Total Estimated Revenues		3,059.0	4,979.7	4,979.7	16,724.4	16,724.4

Community Health/Emergency Medical Services

Proposed Changes in Levels of Service for FY2002

Grants have been received to aid the state to prevent and control tobacco use, to respond to bio-terrorism acts, to strengthen the financial viability of rural hospitals and rural health care systems, to improve emergency medical services to children in rural communities, and to prevent fire and burn injuries.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	855.8	4,594.8	335.8	5,786.4
Adjustments which will continue current level of service:				
-Convert Special FY2001 Labor Cost Fund Sources to GF	5.2	0.0	-5.2	0.0
-Year 2 Labor Costs - Net Change from FY2001	4.8	-2.4	-0.4	2.0
Proposed budget increases:				
-Frontier Health	0.0	10,000.0	0.0	10,000.0
-Obesity Prevention and Control Program	0.0	500.0	0.0	500.0
-Childhood Injury Prevention	0.0	1,252.0	0.0	1,252.0
FY2002 Governor	865.8	16,344.4	330.2	17,540.4

Community Health/Emergency Medical Services

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	25	32	Annual Salaries	1,629,610
Part-time	3	4	COLA	22,393
Nonpermanent	2	2	Premium Pay	23,870
			Annual Benefits	571,115
			<i>Less 4.45% Vacancy Factor</i>	(100,088)
			Lump Sum Premium Pay	0
Totals	30	38	Total Personal Services	2,146,900

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	5	0	5
Administrative Clerk III	0	0	4	0	4
Chf, Emerg Medical Serv	0	0	1	0	1
College Intern II	0	0	2	0	2
Grants Administrator I	0	0	1	0	1
Health Program Associate	0	0	2	0	2
Health Program Mgr I	0	0	3	0	3
Health Program Mgr II	0	0	7	0	7
Health Program Mgr III	0	0	3	0	3
Medical Assist Admin IV	1	0	0	0	1
Project Coord	1	0	1	0	2
Public Health Spec I	0	0	4	0	4
Public Health Spec II	1	0	1	0	2
Totals	3	0	35	0	38

Component: Community Health Grants

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To provide financial assistance to nonprofit organizations and local government entities for the support of: (1) health clinics staffed by midlevel practitioners in communities otherwise without access to medical care; (2) the training and supervision of community health aides and community health practitioners in rural areas of the state; (3) community-based agencies to develop health promotion and education activities to address the leading causes of death and morbidity; and (4) local programs aimed at reducing youth access to tobacco, creating tobacco-free environments, tobacco cessation, and decreasing advertising and promotion.

Component Services Provided

Component services are grant support for:

- (1) health clinics staffed by midlevel practitioners in communities otherwise without access to medical care;
- (2) the training and supervision of community health aides in rural areas of the state;
- (3) community-based agencies to develop health promotion and education activities;
- (4) local programs aimed at reducing youth access to tobacco, creating tobacco free environments, tobacco cessation and decreasing advertising and promotion.

Component Goals and Strategies

This component funds four grant programs and a number of local programs through contractual services. The goals of these programs are to:

- (1) maintain the availability and quality of primary care services in rural communities by supporting midlevel practitioners in communities without access to medical care;
- (2) improve the availability and quality of training and supervision provided for community health aides;
- (3) enhance community capabilities for health promotion and modification of risk factors associated with the leading causes of mortality and to increase years of healthy life; and
- (4) reduce tobacco use statewide.

Key Component Issues for FY2001 – 2002

Recruitment, retention, and provision of continuing education for community health aides and community health practitioners.

Need to develop infrastructure and organizational capacity at the state and local level for tobacco control and prevention activities.

Major Component Accomplishments for FY2000

Maintained and initiated grants to communities to support: (1) midlevel practitioners in community health clinics; (2) community health aide/practitioners training and supervision; (3) community-based planning and intervention projects; and (4) tobacco prevention and control projects.

Statutory and Regulatory Authority

AS 18.05.030	Administration of Public Health and Related Laws
AS 18.08.010-090	Emergency Medical Services
AS 18.25.040-080	Assistance to Hospitals and Health Facilities
AS 18.28.010-100	State Assistance for Community health Aide Programs
AS 44.29.020	Department of Health & Social Services
AS 47.20.005-050	Services for Developmentally Delayed or Disabled Children
7 AAC 26.010-900	Emergency Medical Services
7 AAC 78.010-320	Grant Programs

Community Health Grants
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	3.3	0.0	0.0
72000 Travel	0.0	6.5	0.0
73000 Contractual	66.9	90.0	120.0
74000 Supplies	76.2	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,222.9	1,478.7	1,455.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,369.3	1,575.2	1,575.2
Funding Sources:			
1002 Federal Receipts	144.1	350.0	350.0
1004 General Fund Receipts	1,225.2	1,225.2	1,225.2
Funding Totals	1,369.3	1,575.2	1,575.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	144.1	350.0	350.0	350.0	350.0
Restricted Total		144.1	350.0	350.0	350.0	350.0
Total Estimated Revenues		144.1	350.0	350.0	350.0	350.0

Community Health Grants

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,225.2	350.0	0.0	1,575.2
FY2002 Governor	1,225.2	350.0	0.0	1,575.2

Component: Emergency Medical Services Grants

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To provide financial assistance to regional EMS agencies for the: (1) planning, development, and coordination of regional EMS systems; and (2) direct training, testing, and certification of emergency medical personnel, ground and air ambulance services, and hospital trauma centers.

Component Services Provided

Component services are for EMS grants to regions for training and certification, testing for EMS providers and the general public, and technical assistance to local and regional EMS entities.

Component Goals and Strategies

The goal of this program is to ensure a coordinated statewide emergency medical services (EMS) system through the distribution of grants to EMS regions/agencies.

Key Component Issues for FY2001 – 2002

Retention and recruitment of volunteer EMS providers.

Inadequate financial support for small, rural, volunteer EMS services.

Maintenance of medical direction for rural, volunteer EMS services.

Major Component Accomplishments for FY2000

Conducted continuing medical education training to hospital and pre-hospital medical personnel statewide.

Implemented numerous injury prevention projects, such as safety fairs, PACE(injury prevention in the community), and Kids Don't Float.

Assessed and planned for the implementation of a new EMS communications system on the major highways of interior Alaska.

Assessed pediatric equipment needs statewide and distributed equipment accordingly.

Provided financial support to rural communities for EMS training and equipment.

Facilitated mass casualty disaster planning and exercises with local EMS agencies, hospitals and public safety agencies.

Upgraded or re-established rural, local EMS volunteer services that had ceased operations or downgraded level of service.

Statutory and Regulatory Authority

AS 18.05.030 Administration of Public Health and Related Laws

AS 18.08.010-090 Emergency Medical Services

Released December 15th

FY2002 Governor

01/05/2001 4:22 PM

Department of Health and Social Services

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AS 44.29.020 Department of Health & Social Services
AS 47.20.005-050 Services for the Developmentally Delayed or Disabled Children
7 AAC 26.010-900 Emergency Medical Services
7 AAC 78.010-320 Grant Programs

Emergency Medical Services Grants
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,710.1	1,760.1	1,760.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,710.1	1,760.1	1,760.1
Funding Sources:			
1004 General Fund Receipts	1,710.1	1,710.1	1,710.1
1007 Inter-Agency Receipts	0.0	50.0	50.0
Funding Totals	1,710.1	1,760.1	1,760.1

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	0.0	50.0	50.0	50.0	50.0
Restricted Total		0.0	50.0	50.0	50.0	50.0
Total Estimated Revenues		0.0	50.0	50.0	50.0	50.0

Emergency Medical Services Grants

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,710.1	0.0	50.0	1,760.1
FY2002 Governor	1,710.1	0.0	50.0	1,760.1

Component: State Medical Examiner

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To provide a state-wide system for the medical-legal investigation of unanticipated, sudden, violent deaths in order to provide accurate, legally defensible determinations of the cause of death.

Component Services Provided

This agency provides forensic pathology services statewide. The central facility, in Anchorage, provides post mortem examinations appropriate for each case referred and includes access to state of the art forensic medical services including not only forensic pathology but also radiology, odontology, anthropology and the services of the Department of Public Safety Scientific Crime Detection Laboratory.

Component Goals and Strategies

1. Continue implementation of a state-wide system for the medical-legal investigation of unanticipated, sudden, violent deaths in order to provide accurate, legally defensible determinations of the cause of death.
2. Perform examinations necessary in deaths subject to investigation.
 - a. Limit complete autopsies only to appropriate cases as determined by the medical examiner and not at the request of other individuals.
 - b. Stop shipping remains where such transportation is not necessary.
3. Train personnel involved in death investigation, including local physicians, state and local police, village public safety officers, etc.

Key Component Issues for FY2001 – 2002

The key issue for this program is the increased workload resulting from the Child Protection Laws and the need for recruitment of an additional forensic pathologist medical examiner.

Opening of the new Public Health Laboratory/SME facility in Anchorage in January 2001.

Major Component Accomplishments for FY2000

- A) Reviewed death investigation costs.
 1. Utilized contracts with common carriers for transport of remains.
 2. Enforced criteria for cases to be further examined by forensic pathologists.
 3. Diminished use of toxicology and other consultative services to the State Medical Examiner's Office by defensible criteria for such exams.
- B) Continued quality assurance system for the State Medical Examiner's Office.
- C) Planned for moving to new Medical Examiner facility.

Statutory and Regulatory Authority

AS 12.65
7 AAC 35

Death Investigations and Medical Examinations
Embalming

State Medical Examiner
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	720.0	880.7	929.0
72000 Travel	8.4	7.1	7.1
73000 Contractual	208.3	205.8	205.8
74000 Supplies	42.4	49.3	49.3
75000 Equipment	38.9	43.2	43.2
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.2	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,018.2	1,186.1	1,234.4
Funding Sources:			
1004 General Fund Receipts	1,018.2	1,168.5	1,234.4
1053 Investment Loss Trust Fund	0.0	6.1	0.0
1108 Statutory Designated Program Receipts	0.0	11.5	0.0
Funding Totals	1,018.2	1,186.1	1,234.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Statutory Designated Program Receipts	51063	0.0	11.5	11.5	0.0	0.0
Restricted Total		0.0	11.5	11.5	0.0	0.0
Total Estimated Revenues		0.0	11.5	11.5	0.0	0.0

State Medical Examiner

Proposed Changes in Levels of Service for FY2002

With the passage of the Child Protection Act, additional professional staff needs to be added to insure that the children of Alaska are protected from Child Abuse and Neglect. The State Medical Examiner's Office is increasingly being asked to become involved in Child Abuse cases while the child is still alive to determine if the child's injuries are inflicted or accidental in nature.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,174.6	0.0	11.5	1,186.1
Adjustments which will continue current level of service:				
-Convert Special FY2001 Labor Cost Fund Sources to GF	11.5	0.0	-11.5	0.0
-Year 2 Labor Costs - Net Change from FY2001	-1.7	0.0	0.0	-1.7
Proposed budget increases:				
-Annualization of 3rd Pathologist	50.0	0.0	0.0	50.0
FY2002 Governor	1,234.4	0.0	0.0	1,234.4

State Medical Examiner
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	13	13	Annual Salaries	693,083
Part-time	0	0	COLA	12,664
Nonpermanent	0	0	Premium Pay	26,729
			Annual Benefits	223,518
			<i>Less 2.82% Vacancy Factor</i>	(26,994)
			Lump Sum Premium Pay	0
Totals	13	13	Total Personal Services	929,000

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	1	0	0	0	1
Administrative Clerk II	2	0	0	0	2
Autopsy Assistant	1	0	0	0	1
Deputy State Medical Examiner	2	0	0	0	2
Embalmer	2	0	0	0	2
Investigator I	3	0	0	0	3
Investigator II	1	0	0	0	1
State Medical Examiner	1	0	0	0	1
Totals	13	0	0	0	13

Component: Infant Learning Program Grants

Contact: Janet Clarke, Director, Administrative Services
Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To allow children to live as full and productive life as possible through early intervention.

Component Services Provided

Comprehensive, coordinated, home-based early intervention services are provided through grantees across Alaska. These services are delivered through approximately nineteen local "hub" programs that itinerate to rural areas. Services include home visits, care coordination, evaluation, therapy and educational services. Two statewide consultative service programs deliver both direct services to eligible children and consultative services to professional and paraprofessional early intervention service providers for children with low incidence handicaps and in rural areas with children in need of evaluations. Where needed, comprehensive evaluations are provided by an itinerant team including a speech pathologist, physical therapist, occupational therapist, medical doctors, and other health professionals.

Component Goals and Strategies

To identify children age birth through two who experience a developmental delay or disability, handicapping condition, or who are at risk of developmental delay or disability according to certain risk factors.

To enhance the development of eligible children to maximize their potential for independent living in society.

To enhance the capacity of families who have children with special developmental needs to meet the special needs of their children in the child's natural environment.

Key Component Issues for FY2001 – 2002

The division is requesting a funding switch of \$700.0 from federal to GF/MH. In FY2001, the Legislature gave the division \$700.0 in federal authorization in order to draw down from the new federal FAS grant. The categorical funding of that grant does not allow the funds to be used for ILP purposes. The intent of the Legislature was to reduce the wait-list for all children and to enhance services for children in rural areas. This fund source switch will allow this to happen.

Major Component Accomplishments for FY2000

One of the major accomplishments for ILP in FY2000 was the program's ability to train transition teams to aid children as they move from ILP to other developmentally disabled programs for older children.

Voluntary credential was implemented.

An Early Intervention Enhancement and Improvement Opportunity (EIEIO) initiative was implemented.

Statutory and Regulatory Authority

AS 47.20.005-050	Services for Developmentally Delayed or Disabled Children
7 AAC 78-010-320	Grant Programs
7 AAC 23.010-100	Infant Learning Program
7 AAC 80.010-925	Fees for Department Services

**Infant Learning Program Grants
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	4,722.3	5,752.6	5,752.6
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	4,722.3	5,752.6	5,752.6
Funding Sources:			
1004 General Fund Receipts	868.6	868.6	868.6
1007 Inter-Agency Receipts	0.4	1,030.7	330.7
1037 General Fund / Mental Health	3,853.3	3,853.3	4,553.3
Funding Totals	4,722.3	5,752.6	5,752.6

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	0.4	1,030.7	330.7	330.7	330.7
Restricted Total		0.4	1,030.7	330.7	330.7	330.7
Total Estimated Revenues		0.4	1,030.7	330.7	330.7	330.7

Infant Learning Program Grants

Proposed Changes in Levels of Service for FY2002

The proposed increment will put all the children currently on the wait list into ILP services. There are over 200 children waitlisted.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	4,721.9	0.0	1,030.7	5,752.6
Adjustments which will continue current level of service:				
-Funding Source Change for ILP Based on Governor's Council Recommendation	700.0	0.0	-700.0	0.0
FY2002 Governor	5,421.9	0.0	330.7	5,752.6

Component: Public Health Laboratories

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To provide analytical and technical laboratory information in support of state and national public health disease prevention programs and represent a first line of defense in the rapid recognition of the spread of communicable diseases.

Component Services Provided

(1) Monitoring the population for the occurrence of communicable diseases so that early intervention and control can take place. (2) Generating data to identify which control measures are most effective. (3) Generating data for prevalence, incidence and trend analyses. (4) Providing expert technical information regarding infectious disease laboratory diagnosis to the Alaskan health care community. (5) In cooperation with the Centers for Disease Control provide continuing education to laboratory professionals in Alaska. (6) Providing quality assurance, materials, procedures, and bench training to laboratory professionals to assist in improving their skill and accuracy.

Component Goals and Strategies

The goal is to protect and improve the health of Alaskan citizens. Specific goals for each of the major activities are:

To provide analytical services for the diagnosis and control of communicable diseases and toxicants so that the detrimental effects of these agents can be reduced or eliminated.

To improve the quality of all public laboratory services throughout the state by the provision of clinical assistance, quality assurance, and training.

Key Component Issues for FY2001 – 2002

Opening of the new Public Health Laboratory/SME facility in Anchorage in January 2001.

Establish a laboratory response capability to biologic weapons of mass destruction at the State Public Health Laboratory-Anchorage.

Increase technical training provided to staff and Alaska's professional laboratory work force

Increase the number and types of bacterial isolates typed and entered into the National Data base by the Pulse Field Gel Electrophoresis finger printing system.

Major Component Accomplishments for FY2000

Implementation of the construction of the new lab facility in Anchorage.

Statutory and Regulatory Authority

AS 17.020-030 Food
AS 18.15.120-138 Disease Control
AS 18.50.010, 030, 040 Vital Statistics Act
AS 18.60.475-545 Radiation Protection
AS 44.29.020 Department of Health & Social Services

7 AAC 12.810	Laboratory Safety
7 AAC 27	Preventative Medical Services
7 AAC 80	Fees for Department Services
18 AAC 80	Drinking Water

Public Health Laboratories
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,813.4	2,135.3	2,453.9
72000 Travel	23.6	24.3	32.3
73000 Contractual	418.9	406.5	837.3
74000 Supplies	625.6	566.9	748.9
75000 Equipment	74.0	258.1	261.1
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.3	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,955.8	3,391.1	4,333.5
Funding Sources:			
1002 Federal Receipts	432.0	454.6	605.2
1004 General Fund Receipts	2,129.9	2,431.4	3,177.4
1005 General Fund/Program Receipts	29.9	0.3	71.0
1007 Inter-Agency Receipts	364.0	480.3	479.9
1053 Investment Loss Trust Fund	0.0	10.6	0.0
1108 Statutory Designated Program Receipts	0.0	13.9	0.0
Funding Totals	2,955.8	3,391.1	4,333.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	432.0	454.6	432.0	605.2	580.4
Interagency Receipts	51015	364.0	480.3	480.3	479.9	480.3
General Fund Program Receipts	51060	29.9	0.3	0.3	71.0	69.9
Statutory Designated Program Receipts	51063	0.0	13.9	13.9	0.0	0.0
Restricted Total		825.9	949.1	926.5	1,156.1	1,130.6
Total Estimated Revenues		825.9	949.1	926.5	1,156.1	1,130.6

Public Health Laboratories

Proposed Changes in Levels of Service for FY2002

The component is requesting a GF increment for \$350.0 to cover the costs of increased numbers of testing generated from contact interviewing in TB and STDs, increased costs of individual tests and increased number of tests available for the control of infectious diseases.

The component is expecting an increase in the federal grant for tuberculosis equipment and supplies.

With the opening of the new facility, the component is asking for an increment to pay for maintenance costs associated with the operation of the building.

Summary of Component Budget Changes From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,442.3	454.6	494.2	3,391.1
Adjustments which will continue current level of service:				
-Consolidation of Radiological Health and Public Health Laboratories	138.8	148.9	0.7	288.4
-Convert Special FY2001 Labor Cost Fund Sources to GF	14.6	0.0	-14.6	0.0
-Year 2 Labor Costs - Net Change from FY2001	2.7	1.7	-0.4	4.0
Proposed budget increases:				
-Annualization of the Anchorage Public Health Laboratory Maintenance Costs	300.0	0.0	0.0	300.0
-Back to Basics - Infection Detection and Protection - Public Health Laboratories	350.0	0.0	0.0	350.0
FY2002 Governor	3,248.4	605.2	479.9	4,333.5

Public Health Laboratories

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	40	44	Annual Salaries	1,853,805
Part-time	0	1	COLA	26,166
Nonpermanent	0	0	Premium Pay	16,345
			Annual Benefits	676,118
			<i>Less 4.61% Vacancy Factor</i>	(118,534)
			Lump Sum Premium Pay	0
Totals	40	45	Total Personal Services	2,453,900

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Clerk I	1	0	0	0	1
Administrative Assistant	1	0	0	0	1
Administrative Clerk II	3	2	0	0	5
Administrative Clerk III	1	1	0	0	2
Analyst/Programmer IV	1	0	0	0	1
Chief Public Health Lab	1	0	0	0	1
Enviro Services Journey I	1	0	0	0	1
Laboratory Tech II	4	4	0	0	8
Maint Spec Bfc Jrny II/Lead	1	0	0	0	1
Micro/Network Tech II	1	0	0	0	1
Microbiologist II	7	5	0	0	12
Microbiologist III	5	2	0	0	7
Microbiologist IV	1	1	0	0	2
Radiolog Hlth Spec I	1	0	0	0	1
Radiolog Hlth Spec II	1	0	0	0	1
Totals	30	15	0	0	45

Component: Radiological Health

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Component Mission

Transferred to Public Health Laboratories Component

Component Services Provided

No services provided.

Component Goals and Strategies

Key Component Issues for FY2001 – 2002

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

No statutes and regulations.

Radiological Health
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	68.5	143.6	0.0
72000 Travel	10.1	8.0	0.0
73000 Contractual	93.5	131.8	0.0
74000 Supplies	14.4	2.0	0.0
75000 Equipment	1.9	3.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	188.4	288.4	0.0
Funding Sources:			
1002 Federal Receipts	104.8	148.9	0.0
1004 General Fund Receipts	44.6	66.9	0.0
1005 General Fund/Program Receipts	39.0	69.6	0.0
1053 Investment Loss Trust Fund	0.0	2.3	0.0
1108 Statutory Designated Program Receipts	0.0	0.7	0.0
Funding Totals	188.4	288.4	0.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	104.8	148.9	148.9	0.0	0.0
General Fund Program Receipts	51060	39.0	69.6	69.6	0.0	0.0
Statutory Designated Program Receipts	51063	0.0	0.7	0.7	0.0	0.0
Restricted Total		143.8	219.2	219.2	0.0	0.0
Total Estimated Revenues		143.8	219.2	219.2	0.0	0.0

Radiological Health**Proposed Changes in Levels of Service for FY2002**

No service changes.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	138.8	148.9	0.7	288.4
Adjustments which will continue current level of service:				
-Consolidation of Radiological Health and Public Health Laboratories	-138.8	-148.9	-0.7	-288.4
FY2002 Governor	0.0	0.0	0.0	0.0

Radiological Health

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	2	0	Annual Salaries	0
Part-time	0	0	Premium Pay	0
Nonpermanent	0	0	Annual Benefits	0
			<i>Less % Vacancy Factor</i>	()
			Lump Sum Premium Pay	0
Totals	2	0	Total Personal Services	

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
No personal services.					
Totals	0	0	0	0	0

Component: Tobacco Prevention and Control

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To lower the use of tobacco products among youth and adults.

Component Services Provided

This component funds subgrants and contracts to local community organizations for pilot cessation projects. It also includes the development and implementation of an extensive countermarketing campaign for print, television, and radio. Finally, this component includes an evaluation effort to assess the effectiveness of tobacco prevention activities.

Component Goals and Strategies

The goal of this component is to develop, implement and follow-through with a program to reduce the use of tobacco and to eliminate exposure to secondhand smoke in Alaska. This goal will be accomplished by implementing a statewide cessation plan, conducting a countermarketing campaign, and establishing a surveillance and evaluation system to measure the effectiveness of the program. The program will follow the Centers for Disease Control and Prevention's (CDC's) "Best Practice Guidelines."

Key Component Issues for FY2001 – 2002

Countering the tobacco industry's marketing campaigns to entice new smokers, particularly youth.

Major Component Accomplishments for FY2000

Through a grant to the American Lung Association of Alaska, developed and conducted a statewide media cessation campaign, funded cessation pilot grants to local communities, conducted tobacco prevention and control training and education, and conducted health care provider surveys.

Statutory and Regulatory Authority

N/A

Tobacco Prevention and Control
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,400.0	1,400.0	1,400.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,400.0	1,400.0	1,400.0
Funding Sources:			
1004 General Fund Receipts	0.0	188.6	188.6
1119 Tobacco Settlement	1,400.0	1,211.4	1,211.4
Funding Totals	1,400.0	1,400.0	1,400.0

Tobacco Prevention and Control
Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,400.0	0.0	0.0	1,400.0
FY2002 Governor	1,400.0	0.0	0.0	1,400.0

Alcohol and Drug Abuse Services Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

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BRU Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

BRU Services Provided

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants. In addition to the administration of a central office and two regional offices this BRU includes duties related to quality assurance activities, technical assistance, grant monitoring activities, planning and policy development, data collection for prevention, intervention and treatment services aimed at eliminating the use of illegal drugs, alcohol use by minors, problem use of alcohol, provides for treatment of alcoholics and drug abusers. Additionally, the Alcohol Safety Action Program (ASAP) provides direct services in the Anchorage area and provides oversight of the Division's statewide ASAP grant programs. Finally, the Division's Rural Services Grants component helps smaller communities design and implement local projects to reduce suicide and self-destructive behavior, funds local community agencies in coordination with local school districts to identify and train "peer helpers", and provides funding for linking rural village based staff and training via the University of Alaska Fairbanks to assure training, employment and supervision of village based human service workers.

Alcohol and drug abuse treatment and prevention grants funded through this BRU are the foundation of Alaska's effort to prevent and remedy substance abuse within the State. Grants are distributed to non-profit organizations and local government agencies through a grant-in-aid process established in AS 47.30.475. Funds are granted to support community-based substance abuse, prevention, intervention, and treatment services to provide the comprehensive system required by law. These publicly funded programs serve the poorest Alaskans, those without insurance coverage to reimburse the programs for services. These clients are not served by the private providers of substance abuse treatment services.

BRU Goals and Strategies

Support community-based processes that build partnerships and provide more effective prevention and treatment services. Encourage activities and initiatives that will change community standards and emphasize healthy lifestyles. Distribute useful and effective information to targeted populations. Promote the benefits of treatment, recovery, and sober lifestyle. Encourage traditional and alternative social activities that are alcohol and drug free. Advocate for positive change through legal and regulatory initiatives. Ensure the delivery of quality services by offering appropriate continuing education and training for chemical dependency treatment professionals. Expand awareness of substance abuse issues for allied health professionals, educators and other helping agents. Use education strategies to help youth improve critical life and social skills. Identify people with problems as early as possible and refer them for appropriate services. Improve interdisciplinary coordination and collaboration at local, regional and statewide levels. Support a continuum of care for chronic alcoholics with psychosis that focuses on intervention, treatment, and the client's long term life domain requirements. Develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations. Identify and remove barriers that prevent clients from entering treatment. Support community efforts to establish involuntary commitment procedures and to use them when appropriate. Provide appropriate services for underserved Alaskans. Use relevant research to identify and incorporate key variables that contribute to successful treatment outcomes. Address the treatment needs of persons in the criminal justice system.

Key BRU Issues for FY2001 – 2002

The high level and broad extent of substance abuse coupled with the state's steadily increasing population fuels the need for continuation of substance abuse prevention and treatment services at existing or higher levels. Unless the availability, accessibility and quality of these services are maintained and improved the long term cost of other government services will continue to increase. The Division must assure, where possible, increases in resources. At the same time the Division must continue efforts to assure that resources are used wisely and that the services show an impact on the indicators chosen to measure progress.

Over the last several years very significant efforts have been focused on increasing services for women, primarily of child bearing age. The Division has been awarded increased federal funds for services for women. Local organizations have also been successful in finding additional funds for services. By increasing women's services we not only provide benefits to today's citizens but provide significant prevention services to future generations of Alaskans. These future Alaskans, the unborn children of individuals who are now abusing or at risk of abusing substances, will have brighter futures and healthier lives as a result of our efforts today. With the changes in child protection laws and the impact of welfare reform there will be increased pressure to have easier and quicker access to treatment for adults, especially for women with dependent children.

Major BRU Accomplishments for FY2000

During FY2000 this BRU provided quality assurance activities, technical assistance, grant monitoring, planning and policy development, and data collection for prevention, intervention and treatment services aimed at eliminating alcohol and other substance abuse in Alaska. During FY2000 this BRU was responsible for successfully awarding, administering, and overseeing 175 grant awards totaling more than \$23,500.0. Grants awards ranged in value from \$3.6 to \$2,636.2.

FY2000 was the first year grants were awarded to Alaskan prevention service providers to provide the direct services for the State Incentive Grant Alaskans Collaborating for Teens (SIG/ACT) process. The primary result desired from this major prevention effort is that fewer children and youth will use alcohol and drugs.

During FY2001 this BRU was also awarded federal funding for fetal alcohol syndrome (FAS) and other alcohol related birth defects (ARBD). This five year, \$29,000.0 project is to develop a comprehensive, integrated community based system of support services and programs to address both the prevention of and services to individuals with FAS/ARBD.

In addition to the activities required to administer, monitor, and oversee the grant programs mentioned above, FY1999 was also the culmination of a structured consensus building process which produced the indicators now being used by the Division to determine the success or failure of its activities. As a result of the Division's formal adoption of outcome indicators in FY1999 and the shift to outcome based funding decisions in FY1998 a significant accomplishment of the past fiscal year has been the steps we have taken towards outcome based funding decisions. Although a significant amount of work is needed to successfully complete this evolution a framework has been developed which will be used to continue movement towards our goal of "Alaskans living free from the negative consequences of alcohol and other drug use".

Key Performance Measures for FY2002

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons.

(Not yet addressed by Legislature.)

Current Status:

The twenty year old excise tax has not recently been adjusted for inflation and cost may no longer be a deterrent. The data indicates Alaska's consumption rate may not continue the decrease experienced in prior years. (From FY90 to FY98 Alaska experienced an overall decline). The rate (gallons per capita) decreased from 2.64 in FY97 to 2.51 in FY98 with a small increase to 2.67 gallons per capital for FY99.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free.

Measure: Track the total number of new convictions and reduce the number of repeat convictions in state district and superior courts on charges of driving while intoxicated (DWI). (SB281)
(Revised from Legislature's FY2001 version.)

Current Status:

Felony DWI cases showed a slight decrease since 1997. For 1997 and 1998 convictions were 322 and 326 respectively. Convictions for 1999 were 317.

Benchmark:

227 DWI convictions in 1996.

Background and Strategies:

Driving while under the influence of alcohol (DWI) is one of the strongest indicators of the negative consequences associated with alcohol misuse. Recent DWI data for shows that approximately 45 - 48 percent of all automobile accident fatalities had alcohol or drugs as the major contributing factor. Driving while under the influence of alcohol impacts lives, not only in accidents, injuries, and deaths, but also in family suffering, employment problems, and social functioning.

DWI conviction data are collected and maintained by the State of Alaska Court System. Felony DWI data are included as a separate conviction category in regularly published reports. Misdemeanor DWI conviction data, however, are included with other misdemeanor traffic violations. To improve the measurement of this indicator misdemeanor DWI data should be collected as a separate category.

There are many variables that have an impact on a reduction in the number of DWI convictions, including enforcement efforts and prosecutor caseloads. However, we know that reductions in DWI also correlate with successful prevention efforts, particularly in terms of public awareness of the consequences of DWI. Other strategies used by the Division include but are not limited to: distribution of useful and effective information to targeted populations; Identification of people with problems as early as possible and referral for appropriate services; improvement of interdisciplinary coordination and collaboration at local, regional and statewide levels.

Measure: Reduce the number of state criminal convictions on alcohol or drug-related charges.
(Not yet addressed by Legislature.)

Current Status:

Drug & alcohol related misdemeanor offenses increased from 2,404 in FY97 to 3,067 in FY98. Felony offenses also increased to 836 in FY98 from 791 in FY97.

Benchmark:

FY93, misdemeanor convictions totaled 2,317. Felony convictions totaled 478.

Background and Strategies:

Convictions for drug and alcohol-related offenses, like DUI convictions, offer a clear picture of the negative consequences of use of alcohol and other drugs. Between FY93 and FY97, felony convictions increased from 478 to 791. Misdemeanor convictions have increased from 2,317 to 3,067.

There are a number of factors that impact this indicator including local and statewide enforcement, changes in laws, and prosecution. A reduction in the number of alcohol and other drug related charges can be attributed to early intervention and appropriate, timely treatment for offenders. Other strategies used by the Division include but are not limited to: support community-based processes that build partnerships and provide more effective prevention and treatment services; identify people with problems as early as possible and refer them for appropriate services; develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations; and, addressing the treatment needs of persons in the criminal justice system.

Measure: Reduce the number of alcohol-related injuries requiring hospitalization.

(Not yet addressed by Legislature.)

Current Status:

Alcohol related injuries increased from 898 in FY 96 to 1028 in FY97 and 1040 in FY98. Data from previous years is as follows: 1991, 732; 1992, 789; 1993, 805; 1995, 734. Given the generally upward trend and the nature of the data being collected to measure this indicator the Division along with the Advisory Board are deliberating on whether to continue with this indicator in its current form.

Benchmark:

732 cases in FY91.

Background and Strategies:

Injuries involving the use of alcohol represent a significant and costly negative impact consequence.

The Alaska Trauma Registry, which collects the information from every hospital in the state, tracks all injuries requiring hospitalization. It collects data on involvement with alcohol. The number seemed to peak in 1993 and start a downward trend. However, the number of injuries in 1998 showed sharp increase from 1997. These injuries typically involve young people. They affect the injured individuals, families, and sometimes, entire villages. They require the most expensive level of medical care provided in an emergency room or trauma center.

The efforts that are most likely to impact this indicator are those which seek to restrict access to alcohol or other drugs through public policy advocacy. Early intervention and treatment services have also been shown to have a positive impact on this indicator.

Measure: Reduce the number of 12-hour protective custody holds.

(Not yet addressed by Legislature.)

Current Status:

Protective custody holds declined from 2,273 in FY98 to 2,109 in FY99, but significantly increase to 2322 in FY00. The data collected for FY00 may be in part due to the need for increased treatment capacity in Alaska rather than an upward trend. The newest data remains well under the benchmark.

Benchmark:

FY91, 2,878 12 hour protective custody holds.

Background and Strategies:

AS 47.37 provides that persons incapacitated by alcohol may be taken into custody in order to protect them and others from the negative consequences of their incapacitation. If suitable detoxification facilities are not available, they are taken to Department of Correction facilities. They are held until protective custody is no longer necessary or for up to twelve hours. During 1996 the Division began to place more emphasis on early intervention for late stage, chronic alcoholics. This is the population most likely to require protective custody.

As treatment programs work with communities to provide more appropriate services and timely interventions, the number of protective custody holds should decrease. Community partnerships, resource expansion and community training in involuntary commitment procedures contribute to the reduction in the number of 12-hour protective custody holds.

Measure: Reduce the rate of binge or chronic drinking by adults.

(Revised from Legislature's FY2001 version.)

Current Status:

The CDC has changed the information that is being collected. The Division along with the Advisory Board are deliberating on whether this indicator will continue to be used.

Measure: Monitor the indicators in the Governor's Advisory Board on Alcoholism and Drug Abuse (Advisory Board) State Plan for Alcohol and Drug Abuse Services, 1999-2003.

(Not yet addressed by Legislature.)

Current Status:

To the extent possible all indicators have been updated. In their current form several indicators require reassessment as indicators. These indicators include drug and alcohol related convictions, injuries requiring hospitalization, and the rate of chronic and binge drinking.

Benchmark:

The project was begun in FY99.

Background and Strategies:

In FY99 a structured consensus building process culminated in the Governor's Advisory Board on Alcoholism and Drug Abuse (Advisory Board) State Plan for Alcohol and Drug Abuse Services, 1999-2003. This plan defines the results adopted by the Division that same year. As a consequence, the Division evaluates its effectiveness by measurable outcomes for the result "Alaskans living free from the negative consequences of alcohol and other drug use".

To continue our early success continued structured consensus building processes which integrate and positively address all the needs of the state's population negatively affected by alcohol and other drug abuse are needed.

Measure: By the FY 2002 competitive grant cycle monitor, using the Management Information System and grants management processes, funded programs compliance with program performance (outcome) reporting.

(Not yet addressed by Legislature.)

Current Status:

Programmatic and administrative grant management functions are beginning the second year of redesign and testing to provide decision makers with quality program outcome information.

Benchmark:

The evolution and benchmark of outcome based grant funding for the Division began in FY98. This was the first year of a competitive grant cycle in which outcome requirements were in solicitations for grant applications.

Background and Strategies:

In FY98 the Division began to fund alcohol and other drug treatment and prevention services based upon a funded program's proposed outcomes and impacts on target populations. Prior to the implementation of outcome based funding, reporting on program impacts focused on the quantity of services delivered rather than client and community well being, or outcomes which have better meaning.

An extensive audit conducted by the Legislative Audit Division in FY99 documented several weaknesses in our reporting and monitoring functions. Since completion of the audit the Division has been in the process of rewriting the policies and procedures which are used to monitor and administer the Division approved substance abuse treatment and prevention programs.

Several work groups made up of Division staff and external stake holders continue their work on the Division's revised policies and procedures. These efforts have produced positive results in making the substantial change required to use outcome based measurement as the measure of success or failure. The Division intends to continue this structured consensus building process which promotes outcome based monitoring and compliance management practices.

Measure: Reduce the number of infants affected by prenatal exposure to alcohol as reported to the Alaska Birth Defects Registry. (SB281)

(Added by Legislature in FY2002 version.)

Current Status:

The current data used is based on birth year 1998. Since this is a new reporting system, and because reports can be made on a child through the sixth birthday, this data will change as more reports are made.

Benchmark:

134 children, born in 1998, have been reported to the Alaska Birth Defects Registry with the prenatal exposure to alcohol code number, as of November 1999.

Background and Strategies:

The Alaska Birth Defects Registry began collecting data on infant birth defects in 1996. Prenatal exposure to alcohol became a reportable birth defect/condition in 1998. Unlike all other birth defects that must be reported within the first year following birth, alcohol-related birth defects (ARBD) can be reported up through the age of six. Data collection procedures are fairly recent so benchmark numbers are for reports made for birth year 1998.

In an effort to increase our knowledge regarding the true number of children born with alcohol-related birth defects, we have, since 1998, been increasing the capacity for diagnosis of FAS/ARBD across the state. For this reason we expect to see an increase in the number of reports to the Alaska Birth Defect Registry over the next five years and then beginning in FY06, we will begin to see a steady decrease in births prenatally exposed to alcohol. Over the next 5 years we are implementing a statewide public education campaign to change the public norm about drinking during pregnancy-no amount of alcohol during pregnancy is safe. We also will be developing targeted interventions aimed at women identified at-risk of giving birth to a child with FAS/ARBD-increasing treatment, health care and other appropriate services for this population.

Measure: Track the number of new admissions as a percentage of total admissions to treatment programs for alcohol and drug abuse. (SB281)

(Added by Legislature in FY2002 version.)

Current Status:

This is a new measure for FY2002. The Division will need to analyze and review all implications of the measure in order to establish base line statistics and a benchmark.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001. Reduce the number of convictions in state district and superior courts on charges of driving while under the influence (DUI) of alcohol. Reduce the number of state criminal convictions on alcohol or drug-related charges. Reduce the number of alcohol-related injuries requiring hospitalization. 			X		
			X		
			X		
			X		

Budget Request Unit — Alcohol and Drug Abuse Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Reduce the number of 12-hour protective custody holds. • Reduce the rate of binge or chronic drinking by adults. • Monitor the indicators in the Governor's Advisory Board on Alcoholism and Drug Abuse (Advisory Board) State Plan for Alcohol and Drug Abuse Services, 1999-2003. • By the FY 2002 competitive grant cycle monitor, using the Management Information System and grants management processes, funded programs compliance with program performance (outcome) reporting. 		X	X		

Alcohol and Drug Abuse Services
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
None.												
Non-Formula Expenditures												
Administration	1,201.2	1,044.8	278.4	2,524.4	1,269.4	1,818.0	441.4	3,528.8	1,268.4	2,037.6	389.5	3,695.5
Alcohol Safety Action Program	1,065.6	0.0	0.0	1,065.6	1,106.4	0.0	0.0	1,106.4	2,542.4	0.0	0.0	2,542.4
Alcohol/Drug Abuse Grants	11,719.4	5,546.5	1,325.2	18,591.1	11,734.2	6,412.9	1,903.3	20,050.4	17,261.7	5,092.9	1,483.3	23,837.9
Community Grants - Prevention	0.0	1,193.2	0.0	1,193.2	0.0	8,023.2	0.0	8,023.2	0.0	8,250.2	0.0	8,250.2
CAASA Grants	177.3	0.0	0.0	177.3	177.3	0.0	0.0	177.3	603.3	0.0	0.0	603.3
Corrections' ADA Services	563.6	0.0	0.0	563.6	563.6	0.0	0.0	563.6	563.6	0.0	0.0	563.6
Rural Services Grants	2,529.3	0.0	144.7	2,674.0	2,596.0	0.0	0.0	2,596.0	3,346.0	0.0	0.0	3,346.0
Totals	17,256.4	7,784.5	1,748.3	26,789.2	17,446.9	16,254.1	2,344.7	36,045.7	25,585.4	15,380.7	1,872.8	42,838.9

Alcohol and Drug Abuse Services

Proposed Changes in Levels of Service for FY2002

Alcohol Safety Action Program (ASAP) component increment: an increment of \$1,429.6 GF for stabilization and restoration of the adult ASAP program and establish Juvenile program.

Alcohol/Drug Abuse Grants component increments: increments for Recovery Camps (\$357.0 GF), Transitional Housing for recovering adults (\$200.0 MHTAAR), Mini-grants for chronic alcoholic Beneficiaries (\$40.0 MHTAAR), Adult alcohol treatment expansion (\$2,000.0 GF), and Juvenile alcohol treatment services (\$1010.5 GF). There is also a fund switch of \$1,500.0 from federal to general funds to replace anticipated loss of federal SYNAR funding.

Community Action Against Substance Abuse (CAASA) grants component increment: an increment of \$426.0 GF to establish Juvenile assessment and referral services.

Rural Service Grants component increment: an increment of \$750.0 GF for ten additional Rural Human Services workers to expand program services.

Alcohol and Drug Abuse Services

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	17,446.9	16,254.1	2,344.7	36,045.7
Adjustments which will continue current level of service:				
-Administration	-1.0	219.6	-51.9	166.7
-Alcohol Safety Action Program	6.4	0.0	0.0	6.4
-Alcohol/Drug Abuse Grants	2,160.0	-1,500.0	-660.0	0.0
-Community Grants - Prevention	0.0	-173.0	0.0	-173.0
Proposed budget increases:				
-Alcohol Safety Action Program	1,429.6	0.0	0.0	1,429.6
-Alcohol/Drug Abuse Grants	3,367.5	180.0	240.0	3,787.5
-Community Grants - Prevention	0.0	400.0	0.0	400.0
-CAASA Grants	426.0	0.0	0.0	426.0
-Rural Services Grants	750.0	0.0	0.0	750.0
FY2002 Governor	25,585.4	15,380.7	1,872.8	42,838.9

Component: Administration

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

In addition to the administration of the central office and two regional offices, this component includes quality assurance activities, grant monitoring activities, planning and policy development. Data collection is an integral part of these responsibilities. This component implements the program policy development of prevention, intervention and treatment services aimed at eliminating the use of illegal drugs, alcohol use by minors, problem use of alcohol, provides for treatment of alcoholics and drug abusers, oversees state approved programs, provides technical assistance, monitors grant-in-aid programs; and provides for statewide data collection through the Management Information System.

Component Goals and Strategies

Support community-based processes that build partnerships and provide more effective prevention and treatment services. Distribute useful and effective information to targeted populations. Advocate for positive change through legal and regulatory initiatives. Improve interdisciplinary coordination and collaboration at local, regional and statewide levels. Support a continuum of care for chronic alcoholics with psychosis that focuses on intervention, treatment, and the client's long term life domain requirements. Develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations. Identify and remove barriers that prevent clients from entering treatment. Support community efforts to establish involuntary commitment procedures and to use them when appropriate. Use relevant research to identify and incorporate key variables that contribute to successful treatment outcomes.

Key Component Issues for FY2001 – 2002

The Division is in the process of re-engineering its grants management and program approval systems to improve efficiency, increase communication and enhance collaboration among substance abuse programs, between the programs and the Division, and between substance abuse and related human services fields. While the grant administration portion of this project will be implemented in the near future the program approval process will take several years to re-engineer. It is the goal to be able to substantially implement this the redesign during the FY 2002 competitive grant cycle.

A second key issue is the redesign of the Division's Management Information System in order to meet changing data requests by both state and federal officials as well as the Division's grantee providers.

Major Component Accomplishments for FY2000

During FY2000 this BRU provided quality assurance activities, technical assistance, grant monitoring, planning and policy development, and data collection for prevention, intervention and treatment services aimed at eliminating alcohol and other substance abuse in Alaska. During FY2000 this BRU was responsible for successfully awarding, administering, and overseeing 175 grant awards totaling more than \$23,500.0. Grants awards ranged in value from \$3.6 to \$2,636.2.

In addition to the activities required to administer, monitor, and oversee the grant programs mentioned above, FY99 was also the culmination of a structured consensus building process which produced the indicators now being used by the Division to determine the success or failure of its activities. As a result of the Division's formal adoption of outcome indicators in FY99 and the shift to outcome based funding decisions in FY98, a significant accomplishment of the past fiscal year has been the steps we have taken towards outcome based funding decisions. Although a significant amount of work is needed to successfully complete this evolution, a framework has been developed which will be used to continue movement towards our goal of "Alaskans living free from the negative consequences of alcohol and other drug use".

Statutory and Regulatory Authority

AS 44.29.210-230 Department of Health & Social Services
 AS 47.30.470-500 Mental Health
 AS 47.37 Uniform Alcoholism & Intoxication Treatment Act
 7 AAC 28 Community Grant-In-Aid Program for Alcoholism
 7 AAC 29 Uniform Alcoholism & Intoxication Treatment Act
 7 AAC 32 Depressant, Hallucinogenic, and Stimulant Drugs
 7 AAC 33 Methadone Programs
 7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Monitor the indicators in the Governor's Advisory Board on Alcoholism and Drug Abuse (Advisory Board) State Plan for Alcohol and Drug Abuse Services, 1999-2003.

(Not yet addressed by Legislature.)

Current Status:

To the extent possible all indicators have been updated. In their current form several indicators require reassessment as indicators. These indicators include drug and alcohol related convictions, injuries requiring hospitalization, and the rate of chronic and binge drinking.

Benchmark:

The project was begun in FY99.

Background and Strategies:

In FY99 a structured consensus building process culminated in the Governor's Advisory Board on Alcoholism and Drug Abuse (Advisory Board) State Plan for Alcohol and Drug Abuse Services, 1999-2003. This plan defines the results adopted by the Division that same year. As a consequence, the Division evaluates its effectiveness by measurable outcomes for the result "Alaskans living free from the negative consequences of alcohol and other drug use".

To continue our early success, continued structured consensus building processes which integrate and positively address all the needs of the state's population negatively affected by alcohol and other drug abuse are needed.

Measure: By the FY 2002 competitive grant cycle monitor, using the Management Information System and grants management processes, funded programs' compliance with program performance (outcome) reporting.

(Not yet addressed by Legislature.)

Current Status:

Programmatic and administrative grant management functions are beginning the second year of redesigned and testing to provide decision makers with quality program outcome information.

Benchmark:

The evolution and benchmark of outcome based grant funding for the Division began in FY98. This was the first year of a competitive grant cycle in which outcome requirements were in solicitations for grant applications.

Background and Strategies:

In FY98 the Division began to fund alcohol and other drug treatment and prevention services based upon a funded program's proposed outcomes and impacts on target populations. Prior to the implementation of outcome based funding, reporting on program impacts focused on the quantity of services delivered rather than client and community well being, or outcomes which have better meaning.

An extensive audit conducted by the Legislative Audit Division in FY99 documented several weaknesses in our reporting and monitoring functions. Since completion of the audit the Division has been in the process of rewriting the policies and procedures which are used to monitor and administer the Division approved substance abuse treatment and prevention programs.

Several work groups made up of Division staff and external stake holders continue their work on the Division's revised policies and procedures. These efforts have produced positive results in making the substantial change required to use outcome based measurement as the measure of success or failure. The Division intends to continue this structured consensus building process which promotes outcome based monitoring and compliance management practices.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Monitor the indicators in the Governor's Advisory Board on Alcoholism and Drug Abuse (Advisory Board) State Plan for Alcohol and Drug Abuse Services, 1999-2003. By the FY 2002 competitive grant cycle monitor, using the Management Information System and grants management processes, funded programs compliance with program performance (outcome) reporting. 			X		

Administration
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,413.8	2,016.6	2,010.3
72000 Travel	231.6	248.9	305.1
73000 Contractual	835.1	1,207.1	1,249.5
74000 Supplies	32.6	43.9	83.9
75000 Equipment	11.3	12.3	46.7
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,524.4	3,528.8	3,695.5
Funding Sources:			
1002 Federal Receipts	1,042.8	1,816.0	2,035.6
1004 General Fund Receipts	93.9	136.3	137.4
1007 Inter-Agency Receipts	253.6	316.4	314.2
1013 Alcoholism & Drug Abuse Revolving Loan	2.0	2.0	2.0
1037 General Fund / Mental Health	1,107.3	1,132.6	1,131.0
1053 Investment Loss Trust Fund	0.0	0.5	0.0
1092 Mental Health Trust Authority Authorized Receipts	24.8	50.0	0.0
1108 Statutory Designated Program Receipts	0.0	75.0	75.3
Funding Totals	2,524.4	3,528.8	3,695.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,042.8	1,816.0	1,549.6	2,035.6	1,180.4
Interagency Receipts	51015	253.6	316.4	139.0	314.2	139.0
Statutory Designated Program Receipts	51063	0.0	75.0	75.0	75.3	75.0
Alcohol/Drug Abuse Revolving Loan Fund	51377	2.0	2.0	2.0	2.0	2.0
Mental Health Trust Authority Auth.Rec.	51410	24.8	50.0	50.0	0.0	0.0
Restricted Total		1,323.2	2,259.4	1,815.6	2,427.1	1,396.4

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Total Estimated Revenues		1,323.2	2,259.4	1,815.6	2,427.1	1,396.4

Administration

Proposed Changes in Levels of Service for FY2002

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,269.4	1,818.0	441.4	3,528.8
Adjustments which will continue current level of service:				
-Fetal Alcohol Syndrome Operating Adjustments (RP6-1-0002)	0.0	173.0	0.0	173.0
-FAS/ARBD administration	0.0	50.0	-50.0	0.0
-Year 2 Labor Costs - Net Change from FY2001	-1.0	-3.4	-1.9	-6.3
FY2002 Governor	1,268.4	2,037.6	389.5	3,695.5

Administration

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	30	30	Annual Salaries	1,508,983
Part-time	1	1	COLA	23,437
Nonpermanent	0	0	Premium Pay	54,872
			Annual Benefits	520,160
			<i>Less 4.61% Vacancy Factor</i>	(97,152)
			Lump Sum Premium Pay	0
Totals	31	31	Total Personal Services	2,010,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	2	0	2
Administrative Clerk III	1	0	0	0	1
Administrative Manager III	0	0	1	0	1
Alcohol Prog Administrator	0	0	1	0	1
Analyst/Programmer III	0	0	1	0	1
Analyst/Programmer IV	0	0	1	0	1
Assoc Coordinator	2	0	2	0	4
Division Director	0	0	1	0	1
Grants Administrator II	0	0	3	0	3
Health Program Mgr III	1	0	0	0	1
Hlth Facil Surv I	4	0	1	0	5
Hlth Facil Surv II	1	0	0	0	1
Micro/Network Tech II	0	0	1	0	1
Mntl Hlth Clinician III	1	0	0	0	1
Project Asst	0	0	1	0	1
Project Coord	0	0	1	0	1
Project Manager	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Research Analyst IV	0	0	1	0	1
Secretary	0	0	1	0	1
Totals	10	0	21	0	31

Component: Alcohol Safety Action Program (ASAP)

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

The Alcohol Safety Action Program (ASAP) as a direct service provider in the Anchorage area, and as the oversight office for the Division's statewide ASAP grant programs, facilitates entry of all misdemeanor defendants ordered by the court into substance abuse education and/or treatment, monitors court requirements, and provides data regarding those defendants. In its grants management role the ASAP provides training to qualify administrators for ASAP grant programs throughout the state, and provides quality control and monitoring functions on all State approved ASAP programs.

Component Goals and Strategies

Distribute useful and effective information to targeted populations. Promote the benefits of substance abuse treatment, recovery, and sober lifestyle. Advocate for positive change through legal and regulatory initiatives. Expand awareness of substance abuse issues for allied health professionals, educators and other helping agents. Identify people with problems as early as possible and refer them for appropriate services. Address the substance abuse education and/or treatment needs of persons in the criminal justice system.

Key Component Issues for FY2001 – 2002

During FY 2002, the Division intends to concentrate on the "high-risk" ASAP client. This is the group of clients who comprise 30-35% of the client population, but utilize an enormous amount of services throughout the system. Since a number of these clients are repeat DWI offenders, it is being recommended that intensive monitoring and other strategies be employed to deal effectively with this population. This will result in a reorganization of the Anchorage ASAP office, including an extensive review of caseloads and administrative functions of the agency.

Additionally, the Division will continue with the ongoing expansion of the ASAP case management system to other locations outside of Anchorage, Fairbanks, Juneau and Mat-Su. This will ensure that there is a consistent and standardized process for screening, classification, referral and monitoring of all cases ordered to the ASAP system, regardless of the physical location.

The Division intends to develop information regarding client, or case costs for the direct services provided by the Anchorage ASAP as well as our grantee sites. This information is intended to address issues raised during the last Legislative Session regarding the efficiency of state operations vs. private providers.

Major Component Accomplishments for FY2000

During FY2000 this component provided quality assurance activities, technical assistance, grant monitoring, planning and policy development, and data collection for direct services in the Anchorage area as well as the other 8 Alcohol Safety Action Program (ASAP) grantees. In addition to the direct services in Anchorage this component was responsible for successfully, administering, and overseeing 8 grant programs totaling \$533.9. Grants awards ranged in value from \$24.2 to \$106.0.

During FY 2000, the Division responded to an audit of the cash management, accounts receivable and collection processes. This resulted in the Division changing the client billing system to the Quickbooks Pro 99 format, as well as implementing policies and procedures to assure that the requirements of the Alaska Administrative Code and Administrative Manual were being met on a consistent basis. At the end of the fiscal year, the new client billing system was in full operation, along with the revised policies and procedures.

As a result of the Division's formal adoption of outcome indicators in FY1999 and the shift to outcome based funding decisions a significant accomplishment of the past fiscal year has been the work and movement towards outcome based funding decisions. Although a significant amount of work is needed to successfully complete this evolution a framework has been developed. Without the work of this component, and its staff the Division would not be able to continue towards our goal of "Alaskans living free from the negative consequences of alcohol and other drug use".

Statutory and Regulatory Authority

AS 28.35.030 Miscellaneous Provisions
AS 47.30.470-500 Mental Health
AS 47.37 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 29 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Track the total number of new convictions and reduce the number of repeat convictions in state district and superior courts on charges of driving while intoxicated (DWI). (SB281)
(Revised from Legislature's FY2001 version.)

Current Status:

Felony DWI cases showed a slight decrease since 1997. For 1997 and 1998 convictions were 322 and 326 respectively. Convictions for 1999 were 317.

Benchmark:

227 DUI convictions in 1996.

Background and Strategies:

Driving while under the influence of alcohol (DWI) is one of the strongest indicators of the negative consequences associated with alcohol misuse. DWI data for 1998 show that 45.2 percent of all automobile accident fatalities had alcohol or drugs as the major contributing factor. Driving while under the influence of alcohol impacts lives, not only in accidents, injuries, and deaths, but also in family suffering, employment problems, and social functioning.

DWI conviction data are collected and maintained by the State of Alaska Court System. Felony DWI data are included as a separate conviction category in regularly published reports. Misdemeanor DWI conviction data, however, are included with other misdemeanor traffic violations. To improve the measurement of this indicator misdemeanor DUI data should be collected as a separate category.

There are many variables that have an impact on a reduction in the number of DWI convictions, including enforcement efforts and prosecutor case loads. However, we know that reductions in DWI also correlate with successful prevention efforts, particularly in terms of public awareness of the consequences of DWI. Other strategies used by the Division include but are not limited to: distribution of useful and effective information to targeted populations; Identification of people with problems as early as possible and referral for appropriate services; improvement of interdisciplinary coordination and collaboration at local, regional and statewide levels.

Measure: Reduce the number of state criminal convictions on alcohol or drug-related charges.
(Not yet addressed by Legislature.)

Current Status:

Drug & alcohol related misdemeanor offenses increased from 2,404 in FY97, to 3,067 in FY98 and decreased to 2531 in FY99. Felony offenses increased from 791 in FY97 to 836 in FY98 and decreased to 809 in FY99.

Benchmark:

FY93, misdemeanor convictions totaled 2,317. Felony convictions totaled 478.

Background and Strategies:

Convictions for drug and alcohol-related offenses, like DWI convictions, offer a clear picture of the negative consequences of use of alcohol and other drugs. Between FY93 and FY97, felony convictions increased from 478 to 791. Misdemeanor convictions have increased from 2,317 to 3,067. The small decrease in convictions recorded in FY98 may be an indicator that statewide efforts to reduce charges are finding results.

There are a number of factors that impact this indicator including local and statewide enforcement, changes in laws, and prosecution. A reduction in the number of alcohol and other drug related charges can be attributed to early intervention and appropriate, timely treatment for offenders. Other strategies used by the Division include but are not limited to: support community-based processes that build partnerships and provide more effective prevention and treatment services; identify people with problems as early as possible and refer them for appropriate services; develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations; and addressing the treatment needs of persons in the criminal justice system.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Reduce the number of convictions in state district and superior courts on charges of driving while under the influence (DUI) of alcohol 			X		
<ul style="list-style-type: none"> Reduce the number of state criminal convictions on alcohol or drug-related charges. 			X		

Alcohol Safety Action Program (ASAP)**Component Financial Summary***All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	467.2	502.5	944.1
72000 Travel	10.7	8.7	13.7
73000 Contractual	38.5	37.4	37.4
74000 Supplies	15.3	15.0	37.8
75000 Equipment	0.0	8.9	60.5
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	533.9	533.9	1,448.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,065.6	1,106.4	2,542.4
Funding Sources:			
1004 General Fund Receipts	941.2	954.8	2,394.1
1005 General Fund/Program Receipts	124.4	146.4	148.3
1053 Investment Loss Trust Fund	0.0	5.2	0.0
Funding Totals	1,065.6	1,106.4	2,542.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
General Fund Program Receipts	51060	124.4	146.4	124.4	148.3	146.4
Restricted Total		124.4	146.4	124.4	148.3	146.4
Total Estimated Revenues		124.4	146.4	124.4	148.3	146.4

Alcohol Safety Action Program (ASAP)**Proposed Changes in Levels of Service for FY2002**

The Division is requesting the following increment: an increment of \$1,429.6 GF for stabilization and restoration of the adult ASAP program and establish Juvenile program.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,106.4	0.0	0.0	1,106.4
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	6.4	0.0	0.0	6.4
Proposed budget increases:				
-Stabilization & Restoration of Alcohol Safety Action Program (ASAP)	1,366.1	0.0	0.0	1,366.1
-Underage Drinking, Establish Juvenile ASAP assessment and referral services	63.5	0.0	0.0	63.5
FY2002 Governor	2,542.4	0.0	0.0	2,542.4

Alcohol Safety Action Program (ASAP)**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	10	19	Annual Salaries	693,478
Part-time	0	0	COLA	8,772
Nonpermanent	0	0	Premium Pay	5,089
			Annual Benefits	269,954
			<i>Less 3.40% Vacancy Factor</i>	(33,193)
			Lump Sum Premium Pay	0
Totals	10	19	Total Personal Services	944,100

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
A.P.O. II, ASAP	6	0	0	0	6
Accounting Clerk I	1	0	0	0	1
Administrative Clerk II	2	0	0	0	2
Administrative Clerk III	2	0	0	0	2
Adult Probation Off III	2	0	0	0	2
Juvenile Prob Officer II	1	0	0	0	1
Social Svcs Assoc I	2	0	0	0	2
Social Svcs Assoc III	2	0	0	0	2
Social Svcs Prog Coord	1	0	0	0	1
Totals	19	0	0	0	19

Component: Alcohol and Drug Abuse Grants

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

Alcohol and drug abuse grants funded through this component are the foundation of Alaska's effort to prevent and remedy substance abuse within the State. Grants are distributed to non-profit organizations and local government agencies through a grant-in-aid process established in AS 47.30.475. Funds are granted to support community-based substance abuse, prevention, intervention, and treatment services to provide the comprehensive system required by law. Over 14,000 Alaskans receive substance abuse treatment services annually through these grants. These publicly funded programs serve those Alaskans without insurance or the ability to pay the full cost of services. These clients are not served by the private providers of substance abuse treatment services.

Component Goals and Strategies

Support and enhance community-based processes that build partnerships and provide more effective prevention and treatment services. Encourage activities and initiatives designed to develop and strengthen community standards, activities that emphasize healthy lifestyles and promote the benefits of treatment, recovery, and sober, drug free lifestyle. Encourage traditional and alternative social activities that are alcohol free. Support education strategies to help youth improve critical life and social skills. Encourage early identification and referral of people with substance abuse problems. Support community efforts to establish involuntary commitment procedures and to use them when appropriate. Develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations. Identify and remove barriers that prevent clients from entering treatment. Support appropriate and available treatment for women, women with children, and for the dually diagnosed. Support a continuum of care for chronic alcoholics with psychosis that focuses on intervention, treatment, and the client's long term life domain requirements.

Key Component Issues for FY2001 – 2002

The Division continues to work hard to meet the need for services for rural women and children and to meet the increasing demands for service due to welfare reform and changes in child protection laws. This means locating and securing additional resources and developing innovative and effective strategies for treating these clients. There is also need for additional resources and effective treatments to better serve the incarcerated substance abuser and the chronic substance abuser.

In addition, the need for substance abuse and mental health agencies to maximize third-party and Medicaid reimbursements has led to a desire on the part of some agencies to move to a behavioral health model in which substance abuse and mental health services are provided by the same agency and program. The key issue for the Division is to insure that the unique needs of substance abusers are well met in this model and that substance abuse services are provided by trained, qualified chemical dependency professionals. Maintaining a qualified trained chemical dependency workforce, especially in rural Alaska, is of continuing concern.

Major Component Accomplishments for FY2000

In FY 2000 a total of 71 grant awards and other program agreements provided by this component of service totaled \$18,591.1. These awards for substance abuse treatment agencies and also to increase the capacity of women's

services (a funding priority for the Division) were distributed to a wide geographic area (Barrow to Ketchikan) and variety of community size.

Statutory and Regulatory Authority

AS 47.30.470-500 Mental Health
AS 47.37 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 28 Community Grant-In-Aid Program for Alcoholism
7 AAC 29 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 32 Depressant, Hallucinogenic, and Stimulant Drugs
7 AAC 33 Methadone Programs
7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons.
(Not yet addressed by Legislature.)

Current Status:

The data indicates that Alaska's consumption rate is continuing to decline. Since FY90 Alaska has experienced a steady decline with the most recent years rates of 2.64 and 2.51 gallons per capita for FY97 and FY98 respectively.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free.

Measure: Reduce the number of convictions in state district and superior courts on charges of driving while under the influence (DUI) of alcohol.
(Not yet addressed by Legislature.)

Current Status:

Felony DUI case increases since 1997 have for the most part leveled. For 1997 and 1998 convictions were 322 and 326 respectively.

Benchmark:

227 DUI convictions in 1996.

Background and Strategies:

Driving while under the influence of alcohol (DUI) is one of the strongest indicators of the negative consequences associated with alcohol misuse. DUI data for 1997 show that 30 percent of all automobile accident fatalities had alcohol or drugs as the major contributing factor. Driving while under the influence of alcohol impacts lives, not only in accidents, injuries, and deaths, but also in family suffering, employment problems, and social functioning.

DUI conviction data are collected and maintained by the State of Alaska Court System. Felony DUI data are included as a separate conviction category in regularly published reports. Misdemeanor DUI conviction data, however, are included with other misdemeanor traffic violations. To improve the measurement of this indicator misdemeanor DUI data should be collected as a separate category.

There are many variables that have an impact on a reduction in the number of DUI convictions, including enforcement efforts and prosecutor case loads. However, we know that reductions in DUI also correlate with successful prevention efforts, particularly in terms of public awareness of the consequences of DUI. Other strategies used by the Division include but are not limited to: distribution of useful and effective information to targeted populations; Identification of people with problems as early as possible and referral for appropriate services; improvement of interdisciplinary coordination and collaboration at local, regional and statewide levels.

Measure: Reduce the number of state criminal convictions on alcohol or drug-related charges.

(Not yet addressed by Legislature.)

Current Status:

Drug & alcohol related misdemeanor offenses increased from 2,404 in FY97 to 3,067 in FY98. Felony offenses also increased to 836 in FY98 from 791 in FY97.

Benchmark:

FY93, misdemeanor convictions totaled 2,317. Felony convictions totaled 478.

Background and Strategies:

Convictions for drug and alcohol-related offenses, like DUI convictions, offer a clear picture of the negative consequences of use of alcohol and other drugs. Between FY93 and FY97, felony convictions increased from 478 to 791. Misdemeanor convictions have increased from 2,317 to 3,067.

There are a number of factors that impact this indicator including local and statewide enforcement, changes in laws, and prosecution. A reduction in the number of alcohol and other drug related charges can be attributed to early intervention and appropriate, timely treatment for offenders. Other strategies used by the Division include but are not limited to: support community-based processes that build partnerships and provide more effective prevention and treatment services; identify people with problems as early as possible and refer them for appropriate services; develop sufficient resources to meet community needs for appropriate levels of treatment for adults, youth and special populations; and addressing the treatment needs of persons in the criminal justice system.

Measure: Reduce the number of alcohol-related injuries requiring hospitalization

(Not yet addressed by Legislature.)

Current Status:

Alcohol related injuries increased from 898 in FY 96 to 1028 in FY97. Data from previous years is as follows: 1991, 732; 1992, 789; 1993, 805; 1995, 734. Given the generally upward trend and the nature of the data being collected to measure this indicator the Division along with the Advisory Board are deliberating on whether to continue with this indicator in its current form.

Benchmark:

732 cases in FY91.

Background and Strategies:

Injuries involving the use of alcohol represent a significant and costly negative impact consequence. The Alaska Trauma Registry, which collects the information from every hospital in the state, tracks all injuries requiring hospitalization. It collects data on involvement with alcohol. The number seemed to peak in 1993 and start a downward trend. However, the number of injuries in 1998 showed sharp increase from 1997. These injuries typically involve young people. They affect the injured individuals, families, and sometimes entire villages. They require the most expensive level of medical care, that provided in an emergency room or trauma center.

The efforts that are most likely to impact this indicator are those which seek to restrict access to alcohol or other drugs through public policy advocacy. Early intervention and treatment services have also been shown to have a positive impact on this indicator.

Measure: Reduce the number of 12-hour protective custody holds.
(Not yet addressed by Legislature.)

Current Status:

Protective custody holds declined from 2,273 in FY98 to 2,109 in FY99.

Benchmark:

FY91, 2,878 12 hour protective custody holds.

Background and Strategies:

AS 47.37 provides that persons incapacitated by alcohol may be taken into custody in order to protect them and others from the negative consequences of their incapacitation. If suitable detoxification facilities are not available, they are taken to Department of Correction facilities. They are held until protective custody is no longer necessary or for up to twelve hours. During 1995 and 1996 the Division began to place more emphasis on early intervention for late stage, chronic alcoholics. This is the population most likely to require protective custody.

As treatment programs work with communities to provide more appropriate services and timely interventions, the number of protective custody holds decreases. Community partnerships, resource expansion and community training in involuntary commitment procedures contribute to the reduction in the number of 12-hour protective custody holds.

Measure: Reduce the rate of binge or chronic drinking by adults.
(Not yet addressed by Legislature.)

Current Status:

The CDC has changed the information that is being collected. The Division along with the Advisory Board are deliberating on whether this indicator will continue to be an indicator.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001.			X		
• Reduce the number of convictions in state district and superior courts on charges of driving while under the influence (DUI) of alcohol.			X		
• Reduce the number of state criminal convictions on alcohol or drug-related charges.			X		
• Reduce the number of alcohol-related injuries requiring hospitalization			X		
• Reduce the number of 12-hour protective custody holds.			X		
• Reduce the rate of binge or chronic drinking by adults.			X		

Alcohol and Drug Abuse Grants

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	18,591.1	20,050.4	23,837.9
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	18,591.1	20,050.4	23,837.9
Funding Sources:			
1002 Federal Receipts	5,546.5	6,412.9	5,092.9
1004 General Fund Receipts	4,457.8	4,019.6	8,530.1
1007 Inter-Agency Receipts	368.5	850.0	350.0
1037 General Fund / Mental Health	7,261.6	7,714.6	8,731.6
1092 Mental Health Trust Authority Authorized Receipts	956.7	1,053.3	1,133.3
Funding Totals	18,591.1	20,050.4	23,837.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	5,546.5	6,412.9	5,756.9	5,092.9	3,428.5
Interagency Receipts	51015	368.5	850.0	320.0	350.0	350.0
Mental Health Trust Authority Auth.Rec.	51410	956.7	1,053.3	1,053.3	1,133.3	1,083.3
Restricted Total		6,871.7	8,316.2	7,130.2	6,576.2	4,861.8
Total Estimated Revenues		6,871.7	8,316.2	7,130.2	6,576.2	4,861.8

Alcohol and Drug Abuse Grants**Proposed Changes in Levels of Service for FY2002**

The Division is requesting the following increments: increments for Recovery Camps (\$357.0 GF), Transitional Housing for recovering adults (\$200.0 MHTAAR), Mini-grants for chronic alcoholic Beneficiaries (\$40.0 MHTAAR), Adult alcohol treatment expansion (\$2,000.0 GF), and Juvenile alcohol treatment services (\$1010.5 GF). There is also a switch fund from Federal Receipts to General Funds to replace anticipated loss of federal SYNAR funding (\$1,500.0).

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	11,734.2	6,412.9	1,903.3	20,050.4
Adjustments which will continue current level of service:				
-Fund Switch to replace anticipated loss of federal funding (SYNAR)	1,500.0	-1,500.0	0.0	0.0
-Restore ADA Grants/replace unusable I/A	500.0	0.0	-500.0	0.0
-Domiciliary Care in Fairbanks	160.0	0.0	-160.0	0.0
Proposed budget increases:				
-Spirit/Recovery Camp Development	357.0	0.0	0.0	357.0
-Transitional Housing for Recovering Substance Abusers	0.0	0.0	200.0	200.0
-Mini-grants for Chronic Alcoholic Beneficiaries	0.0	0.0	40.0	40.0
-API 2000 Dual Diagnosis and Detox Treatment	0.0	180.0	0.0	180.0
-Adult alcohol treatment services expansion	2,000.0	0.0	0.0	2,000.0
-Juvenile alcohol treatment services expansion	1,010.5	0.0	0.0	1,010.5
FY2002 Governor	17,261.7	5,092.9	1,483.3	23,837.9

Component: Community Grants - Prevention

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

It is the intent that this component will provide the foundation of Alaska's effort to prevent substance abuse within the State. SIG/ACT Grants are to be distributed to non-profit organizations and local government agencies through the grant-in-aid process established in AS 47.30.475. Funds will be granted to support community-based substance abuse prevention services which provide the comprehensive substance abuse system required by law.

Through the Office of FAS a number of community grant programs will be ongoing during FY02. The primary areas of focus will be on community-based projects, projects aimed at improved diagnostic and service coordination, primary prevention of alcohol-affected births, and improved outcomes for individuals with FAS and other alcohol-related birth defects (ARBD). Specific attention will be paid to improved educational services for individuals with FAS, intervention services for high-risk women in our state's correctional system, and expanding diagnostic services across the state.

Component Goals and Strategies

The goals for this component are two-fold. 1) The overall goals for the State Incentive Grants are to develop a comprehensive integrated statewide approach to substance abuse prevention, to encourage local community groups to propose solutions that are based on scientific findings and to reduce substance abuse by youth in Alaska. 2) The goal of the Office of FAS is to develop a comprehensive, integrated state plan for the prevention of fetal alcohol syndrome and to improve the service delivery system for individuals with FAS/ARBD and their families. The primary focus is to promote sustainable system changes within our current delivery system across the state.

Key Component Issues for FY2001 – 2002

Key issues for SIG/ACT are funding local community groups to deliver research based prevention activities and, working with the Prevention Advisory Council to develop a comprehensive prevention plan. Measurement of this effort is greatly dependent on the ability of the State and or local communities to survey youth. In this regard, Alaska has conducted the Youth Risk Behavior Survey (YBRS) in 1995 and 1999. In order to have credible data the YBRS should be done every two years.

Key issues for FAS/ARBD will be to continue the development of FAS Multidisciplinary Community Teams, developing a system of support services to promote success, and to fund innovative community-developed programs to address both the prevention of alcohol-related birth defects and the improvement of services to those individuals with FAS/ARBD and their families. A comprehensive evaluation will be conducted to assure positive and productive outcomes and improvements in the system of care related to prenatal exposure to alcohol. Comprehensive statewide data will be collected and analyzed to provide a statewide "picture" of the progress being made.

Major Component Accomplishments for FY2000

During FY99 this component established the federal funding for the State Incentive Grant Alaskans Collaborating for Teens (SIG/ACT) process. This federally funded initiative is targeted at adolescents 10-18 years old. FY2000 was the second year of the federal grant award to the Division and was the first year grants were awarded to Alaskan

prevention service providers which were to provide the direct services for this statewide initiative. The primary result desired from this major prevention effort is that fewer children and youth will use alcohol and drugs.

Statutory and Regulatory Authority

AS 47.30.470-500 Mental Health
 AS 47.37 Uniform Alcoholism & Intoxication Treatment Act
 7 AAC 28 Community Grant-In-Aid Program for Alcoholism
 7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons.

(Not yet addressed by Legislature.)

Current Status:

The data indicates that Alaska's consumption rate is continuing to decline. Since FY90 Alaska has experienced a steady decline with the most recent years rates of 2.64 and 2.51 gallons per capita for FY97 and FY98 respectively.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001. 			X		

Community Grants - Prevention
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	2,600.0	2,427.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,193.2	5,423.2	5,823.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,193.2	8,023.2	8,250.2
Funding Sources:			
1002 Federal Receipts	1,193.2	8,023.2	8,250.2
Funding Totals	1,193.2	8,023.2	8,250.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,193.2	8,023.2	6,500.0	8,250.2	7,650.2
Restricted Total		1,193.2	8,023.2	6,500.0	8,250.2	7,650.2
Total Estimated Revenues		1,193.2	8,023.2	6,500.0	8,250.2	7,650.2

Community Grants - Prevention

Proposed Changes in Levels of Service for FY2002

Addition of FAS/ARBD community based system of support services and programs to address prevention.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	8,023.2	0.0	8,023.2
Adjustments which will continue current level of service:				
-Fetal Alcohol Syndrome Adjustment (RP6-1-0002)	0.0	-173.0	0.0	-173.0
Proposed budget increases:				
-State Incentive Grant - Alaskans Collaborating for Teens (ACT)	0.0	400.0	0.0	400.0
FY2002 Governor	0.0	8,250.2	0.0	8,250.2

Component: Community Action Against Substance Abuse Grants

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

This program was established by the Legislature in 1990 for the express purpose of authorizing the Department of Health and Social Services to provide grants to community organizations to combat the most pressing substance abuse problems as determined by the applicant community. Applicants for Community Action Against Substance Abuse (CAASA) grants are required to compete through the Request for Proposal Process. The proposals are reviewed and scored by a proposal evaluation committee.

Component Goals and Strategies

Support community-based processes that build partnerships and provide more effective prevention services. Encourage activities and initiatives that will change community standards and emphasize healthy lifestyles. Distribute useful and effective information to targeted populations. Encourage traditional and alternative social activities that are alcohol and drug free. Use education strategies to help youth improve critical life and social skills.

Key Component Issues for FY2001 – 2002

The key issues for this component are related to those for the Community Grants - Prevention component and include funding local community groups to deliver prevention activities and, working with the Prevention Advisory Council established under the SIG/ACT grant program, develop a comprehensive prevention plan. This Council's overall goals are to develop a comprehensive integrated statewide approach to substance abuse prevention, to encourage local community groups to propose solutions that are based on scientific findings and to reduce substance abuse by youth in Alaska.

Measurement of this effort is greatly dependent on the ability of the State and or local communities to survey youth. In this regard, Alaska has conducted the Youth Risk Behavior Survey (YBRS) in 1995 and 1999. In order to have credible data the YBRS should be done every two years.

Major Component Accomplishments for FY2000

This component provides funding for grant services and programs per AS 47.37.045. The primary result desired from this prevention effort is that fewer children and youth will use alcohol and drugs. During FY2000 a total of 6 grant awards totaling \$177.3 were made. Grant awards ranged from \$4.0 to \$50.0.

Statutory and Regulatory Authority

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

Key Performance Measures for FY2002

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons.

(Not yet addressed by Legislature.)

Current Status:

The data indicates that Alaska's consumption rate is continuing to decline. Since FY90 Alaska has experienced a steady decline with the most recent years rates of 2.64 and 2.51 gallons per capita for FY97 and FY98 respectively.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001. 			X		

Community Action Against Substance Abuse Grants

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	177.3	177.3	603.3
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	177.3	177.3	603.3
Funding Sources:			
1004 General Fund Receipts	177.3	177.3	603.3
Funding Totals	177.3	177.3	603.3

Community Action Against Substance Abuse Grants

Proposed Changes in Levels of Service for FY2002

The Division is requesting the following increment: an increment of \$426.0 GF to establish Juvenile assessment and referral services.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	177.3	0.0	0.0	177.3
Proposed budget increases:				
-Underage Drinking, Establish Juvenile ASAP assessment and referral services	426.0	0.0	0.0	426.0
FY2002 Governor	603.3	0.0	0.0	603.3

Component: Correctional ADA Grant Services

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

These funds provide 27 substance abuse treatment beds in various communities in the state for inmates. These services are purchased in coordination with the Department of Corrections. The division uses a grant process to distribute the funds.

Component Goals and Strategies

Promote the benefits of treatment, recovery, and sober lifestyle. Improve interdisciplinary coordination and collaboration at local, regional and statewide levels. Provide appropriate services for underserved Alaskans. Address the treatment needs of persons in the criminal justice system.

Key Component Issues for FY2001 – 2002

There are no major issues at this time.

Major Component Accomplishments for FY2000

This component provides funding for grant services that provide for community treatment for persons leaving a state correctional facility. During FY2000 8 grants were award for these services totaling \$563.6. Awards ranged from \$9.0 to \$295.3. These services are integrated into the programs funded under the Alcohol/Drug Abuse Grants component.

Statutory and Regulatory Authority

AS 47.30.470-500 Mental Health
AS 47.37 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 28 Community Grant-In-Aid Program for Alcoholism
7 AAC 29 Uniform Alcoholism & Intoxication Treatment Act
7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Reduce the number of 12-hour protective custody holds.

(Not yet addressed by Legislature.)

Current Status:

Protective custody holds declined from 2,273 in FY98 to 2,109 in FY99.

Benchmark:

FY91, 2,878 12 hour protective custody holds.

Background and Strategies:

AS 47.37 provides that persons incapacitated by alcohol may be taken into custody in order to protect them and others from the negative consequences of their incapacitation. If suitable detoxification facilities are not available, they are taken to Department of Correction facilities. They are held until protective custody is no longer necessary or for up to twelve hours. During 1995 and 1996 the Division began to place more emphasis on early intervention for late stage, chronic alcoholics. This is the population most likely to require protective custody.

As treatment programs work with communities to provide more appropriate services and timely interventions, the number of protective custody holds decreases. Community partnerships, resource expansion and community training in involuntary commitment procedures contribute to the reduction in the number of 12-hour protective custody holds.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Reduce the number of 12-hour protective custody holds. 			X		

Correctional ADA Grant Services
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	563.6	563.6	563.6
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	563.6	563.6	563.6
Funding Sources:			
1004 General Fund Receipts	281.8	281.8	281.8
1037 General Fund / Mental Health	281.8	281.8	281.8
Funding Totals	563.6	563.6	563.6

Correctional ADA Grant Services

Proposed Changes in Levels of Service for FY2002

None.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	563.6	0.0	0.0	563.6
FY2002 Governor	563.6	0.0	0.0	563.6

Component: Rural Services Grants

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Component Mission

The mission of the Division of Alcoholism and Drug Abuse is to promote the health and well-being of Alaskans by preventing and treating the abuse of alcohol, other drugs and inhalants.

Component Services Provided

The Rural Services Component focuses on insuring that needed services are both available in and culturally appropriate to the villages and towns of rural Alaska.

The Community Based Suicide Prevention Program makes grants available to the smaller communities of Alaska to design and implement their own programs to reduce suicide and self-destructive behavior.

The Rural Human Services System Project enables rural agencies to hire, train and supervise a network of village-based counselors. It works with three campuses of the University of Alaska to insure the training is of high quality, appropriate, culturally informed, and fully accredited.

The Peer Helper Program funds local community agencies in coordination with local school districts to identify and train "peer helpers" in listening and problem solving skills, and accessing local resources.

Component Goals and Strategies

Support community based processes that empower local communities to develop programs to address their own needs. Encourage partnerships and collaboration among communities and between communities, agencies, educational institutions and government. Serve as a resource for information and training. Encourage communities to recognize and promote the benefits of a sober, drug free lifestyle, and encourage traditional and alternative healthy, drug free activities. Support an increase in the number of villages that have rural human services trained resident counselors and continue to develop and enhance the training those counselors receive. Increase the number of rural Alaskans seeking substance abuse treatment by both removing barriers to treatment and enhancing the ability of treatment programs to effectively serve clients from rural areas. Support the number and variety of alternative treatment programs, including family treatment camps and village interventions.

Key Component Issues for FY2001 – 2002

The Rural Human Services System Project does not yet serve every region of the state and there are still many villages without trained counselors. The Project needs to grow to fill in these gaps. The Project also needs to explore ways of assisting Rural Human Services graduates pursue higher education and move into positions of increasing responsibility in their agencies.

The Community Based Suicide Prevention Project needs to develop new ways to enhance training for project coordinators and establish and/or broaden links among projects.

Major Component Accomplishments for FY2000

During FY2000 the Community Based Suicide Prevention Program awarded 63 grants totaling approximately \$792.1. Grant awards ranged in value from \$3.6 to \$20.0. This component of service is designed to help smaller rural communities design and implement local projects to reduce suicide and self-destructive behavior. An initial evaluation of the project suggests that communities that sustain projects for three or more years can reduce their rate of suicide.

In FY2000 the Peer Helper Program funded 9 grant awards totaling \$305.8. Grant awards varied in amount from \$5.0 to \$60.0. This program funds local community agencies, in collaboration with local school districts, to identify and train "peer helpers" in listening and problem solving skills, and accessing local resources to help youth.

Finally, in FY2000 the Rural Human Services Project funded 14 grant awards totaling \$1,431.4. Awards ranged in value from \$9.0 to \$380.1. At the end of FY2000 there were one hundred thirty-six trained Rural Human Services counselors working in eighty-eight different communities across Alaska. The University of Alaska, Rural Human Services (RHS) training program was offered on three different campuses. In addition, a second RHS curriculum is being developed to prepare counselors to take on supervisory and mentoring responsibilities.

Statutory and Regulatory Authority

AS 47.30.470-500 Mental Health
7 AAC 78 Grant Programs

Key Performance Measures for FY2002

Measure: Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons.
(Not yet addressed by Legislature.)

Current Status:

The data indicates that Alaska's consumption rate is continuing to decline. Since FY90 Alaska has experienced a steady decline with the most recent years rates of 2.64 and 2.51 gallons per capita for FY97 and FY98 respectively.

Benchmark:

The benchmark for this measure is 3.46 gallons in FY85. Per capita consumption was 2.51 in FY98.

Background and Strategies:

We know that the prevalence and severity of alcohol-related problems among Alaskans is directly related to the amount of alcohol consumed. The data, as collected, are based on total alcohol purchased at the wholesale level and the number of Alaskans who are 14 years of age and older but does not acknowledge the state's significant (and increasing) visitor population.

The strategies that impact this indicator most readily are those that address public policy issues such as the number of licensed outlets and their hours of operation. In relation to this strategy the Division advocates for positive change through legal and regulatory initiatives. Other strategies used by the Division include but are not limited to: encourage activities and initiatives that will change community standards and emphasize healthy lifestyles; encourage traditional and alternative social activities that are alcohol and drug free.

Measure: Reduce the number of alcohol-related injuries requiring hospitalization.
(Not yet addressed by Legislature.)

Current Status:

Alcohol related injuries increased from 898 in FY 96 to 1028 in FY97. Data from previous years is as follows: 1991, 732; 1992, 789; 1993, 805; 1995, 734. Given the generally upward trend and the nature of the data being collected to measure this indicator the Division along with the Advisory Board are deliberating on whether to continue with this indicator in its current form.

Benchmark:

732 cases in FY91.

Background and Strategies:

Injuries involving the use of alcohol represent a significant and costly negative impact consequence. The Alaska Trauma Registry, which collects the information from every hospital in the state, tracks all injuries requiring hospitalization. It collects data on involvement with alcohol. The number seemed to peak in 1993 and start a downward trend. However, the number of injuries in 1998 showed sharp increase from 1997. These injuries typically involve young people. They affect the injured individuals, families, and sometimes entire villages. They require the most expensive level of medical care, that provided in an emergency room or trauma center.

The efforts that are most likely to impact this indicator are those which seek to restrict access to alcohol or other drugs through public policy advocacy. Early intervention and treatment services have also been shown to have a positive impact on this indicator.

Measure: Reduce the rate of binge or chronic drinking by adults.

(Not yet addressed by Legislature.)

Current Status:

The CDC has changed the information that is being collected. The Division along with the Advisory Board are deliberating on whether this indicator will continue to be an indicator.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Reduce the annual per capita alcohol consumption by people aged 14 and over from 2.55 to 2.25 gallons by FY2001. Reduce the number of alcohol-related injuries requiring hospitalization. Reduce the rate of binge or chronic drinking by adults. 			X		

Rural Services Grants
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	2,674.0	2,596.0	3,346.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	2,674.0	2,596.0	3,346.0
Funding Sources:			
1037 General Fund / Mental Health	2,529.3	2,596.0	3,346.0
1092 Mental Health Trust Authority Authorized Receipts	144.7	0.0	0.0
Funding Totals	2,674.0	2,596.0	3,346.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Mental Health Trust Authority Auth.Rec.	51410	144.7	0.0	0.0	0.0	0.0
Restricted Total		144.7	0.0	0.0	0.0	0.0
Total Estimated Revenues		144.7	0.0	0.0	0.0	0.0

Rural Services Grants

Proposed Changes in Levels of Service for FY2002

The Division is requesting the following increment: an increment of \$750.0 GF for ten additional Rural Human Services workers to expand program services.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,596.0	0.0	0.0	2,596.0
Proposed budget increases:				
-Rural human services program expansion - alcohol & substance abuse counselors	750.0	0.0	0.0	750.0
FY2002 Governor	3,346.0	0.0	0.0	3,346.0

Community Mental Health Grants Budget Request Unit

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BRU Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

BRU Services Provided

The Alaska community mental health program, through competitive grant funding to local, nonprofit health organizations, provides Alaskans with a statewide comprehensive array of outpatient, residential, and locally provided inpatient mental health services. Annually, these services benefit in excess of 20,000 persons suffering from mental illness or severe emotional dysfunction in Alaska.

The Community Mental Health Grants BRU has five components - General Community Health Grants, Psychiatric Emergency Services, Designated Evaluation and Treatment, Services to the Chronically Mentally Ill, and Services for Seriously Emotionally Disturbed Youth. The five component budget structure is the primary way the program assures that mental health services are provided to the most severely disabled priority populations. Each component provides funding for an identified population or program.

BRU Goals and Strategies

- 1) PROVIDE AN ARRAY OF COST-EFFECTIVE COMMUNITY MENTAL HEALTH SERVICES THROUGHOUT THE STATE.
 - Provide assistance to local communities to help plan, develop and maintain services.
 - Provide oversight of the quality and quantity of services provided.
- 2) PROVIDE FOR CONSUMER INPUT IN THE PLANNING, DEVELOPMENT, OPERATION, AND MONITORING OF THE COMMUNITY MENTAL HEALTH SERVICES.
 - Involve consumers in all phases of program planning and implementation.
 - Involve consumers in the grant award process as active Proposal Evaluation Committee members.
 - Involve consumers in the monitoring or investigation of the quality of services provided.

Key BRU Issues for FY2001 – 2002

The Division will be seeking new mental health legislation on four fronts.

- We are pursuing expansion of the categories of mental health professionals allowed to provide ex-parte psychiatric evaluations under AS 47.30 to include licensed marriage and family therapists, and licensed professional counselors. This practical measure is necessary because in most areas of the state, particularly during off hours, a psychiatrist or clinical psychologist may not be available to complete the assessment. In rural areas, a clinician of that level may not be available at all.
- The Division seeks enactment of legislation establishing standards for Assisted Living Home (ALH) facilities, and requiring that all ALHs seeking State funding be licensed and regulated by the State.
- The current DET statutes include a sunset clause which will become effective June 30, 2001. Rather than lose the program, the Division will seek removal of this clause.
- Finally, the Division hopes to alter the current confidentiality statutes to require Division notification by provider agencies if a consumer is known to be missing, seriously injured, or deceased. We will also pursue language that clarifies the legality of providers' submission of mental health consumer client data.

Committees of stakeholders are developing new service requirements and standards for the Services to the Chronically Mentally Ill and Services to the Severely Emotionally Disturbed Youth components for FY02 and 03. These standards will be included in the FY02 - 03 RFP as requirements to receive a grant from either program.

As a part of the Department's grants re-engineering/improvement process, the Alaska Youth Initiative (AYI) program will initiate a fee-for-service pilot beginning July 1, 2001. There is an increment request for increased funding for the 13 smallest CMHC's. These funds will provide a basic infrastructure of two clinicians, travel and necessary support.

Major BRU Accomplishments for FY2000

In FY 2000, mental health services were provided to over 20,000 people in Alaska suffering from mental illness or severe emotional dysfunction. Services were provided through 60+ grantee agencies and an array of for-profit physicians, hospitals and transportation services. The 20,000 figure includes some clients who were provided services through more than one of the components listed below, and is an estimated unduplicated head count.

Key Performance Measures for FY2002

Measure: Increase the percentage of mental health consumers receiving services who show improved functioning as a result of the services. (SB 281, modified)

(Developed jointly with Legislature in FY2000.)

Current Status:

In FY00, 20% of those consumers sampled showed improved functioning (higher GAF score) between initial intake and final contact. Given the serious nature of chronic mental illness, a great deal of improvement is not expected. Instead the focus of treatment is to maintain consumers' current level of functioning and to avoid the need for inpatient treatment.

Benchmark:

FY99 benchmark was 0% showing improved functioning (higher GAF score) as a result of services. Percentage is not necessarily a reflection on services but more probably related to the very small sample size; the Division struggled with grantee data submission issues.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Increase the percentage of mental health consumers receiving services who show improved functioning as a result of the services. (SB 281, modified) 		X			

**Community Mental Health Grants
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
General Comm Mental Hlth Grnts	780.8	0.0	233.6	1,014.4	1,236.5	0.0	909.0	2,145.5	773.8	64.0	550.0	1,387.8
Psychiatric Emergency Svcs	5,976.9	124.9	0.0	6,101.8	5,455.1	1,554.5	250.0	7,259.6	6,525.6	1,554.5	250.0	8,330.1
Svcs/Chronically Mentally Ill	10,868.6	308.5	371.3	11,548.4	10,801.4	394.5	628.3	11,824.2	12,324.9	1,972.8	1,414.8	15,712.5
Designated Eval & Treatment Svcs/Seriously Emotion Dst Yth	1,119.3	782.2	0.0	1,901.5	1,046.3	1,279.7	0.0	2,326.0	1,146.3	724.9	200.0	2,071.2
	5,841.1	0.0	1,209.8	7,050.9	6,219.4	0.0	1,337.0	7,556.4	6,219.4	57.7	1,137.0	7,414.1
Totals	24,586.7	1,215.6	1,814.7	27,617.0	24,758.7	3,228.7	3,124.3	31,111.7	26,990.0	4,373.9	3,551.8	34,915.7

Community Mental Health Grants

Proposed Changes in Levels of Service for FY2002

- 1) There will be increased service capacity in the 13 smallest CMHC's.
- 2) There will be a single point of entry established in Anchorage.

Community Mental Health Grants

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	24,758.7	3,228.7	3,124.3	31,111.7
Adjustments which will continue current level of service:				
-General Comm Mental Hlth Grnts	-462.7	64.0	-459.0	-857.7
-Psychiatric Emergency Svcs	765.0	0.0	0.0	765.0
-Svcs/Chronically Mentally Ill	857.2	1,578.3	459.0	2,894.5
-Designated Eval & Treatment	0.0	-554.8	0.0	-554.8
-Svcs/Seriously Emotion Dst Yth	0.0	57.7	0.0	57.7
Proposed budget decreases:				
-Svcs/Seriously Emotion Dst Yth	0.0	0.0	-200.0	-200.0
Proposed budget increases:				
-General Comm Mental Hlth Grnts	0.0	0.0	100.0	100.0
-Psychiatric Emergency Svcs	305.5	0.0	0.0	305.5
-Svcs/Chronically Mentally Ill	666.3	0.0	327.5	993.8
-Designated Eval & Treatment	100.0	0.0	200.0	300.0
FY2002 Governor	26,990.0	4,373.9	3,551.8	34,915.7

Component: General Community Mental Health Grants

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

The General Community Mental Health Grants component funds prevention and treatment services for people with mild to moderate, non-disabling emotional disturbances. Core treatment services include assessment, brief psychotherapy, and chemotherapy services. This component also funds a combined consumer and family training conference.

Component Goals and Strategies

- 1) PROVIDE BASIC SERVICES TO MEDICAID AND NON-MEDICAID ELIGIBLE ADULTS AND CHILDREN WITH MILD TO MODERATE, NON-DISABLING EMOTIONAL DISTURBANCES IN ALL AREAS OF THE STATE.
 - Distribute general community mental health services grants to local community mental health agencies to establish basic service capacity in each of the state's service areas.
 - Assist local programs in the implementation and on-going operation of the programs.
- 2) MAINTAIN OR EXPAND HIGH-QUALITY GENERAL MENTAL HEALTH SERVICES IN ALL AREAS OF THE STATE.
 - Provide on-going monitoring and oversight of the programs.
 - Investigate problems and complaints as they arise.

Key Component Issues for FY2001 – 2002

There is a need for enhance the family therapy capability funded through the component, but resources are not currently available.

Major Component Accomplishments for FY2000

- 1) FY 2000 services were maintained at the FY 1999 level, with no significant program changes.
- 2) Approximately 14,000 people were served, which included some high-functioning adults with chronic mental illness and families of SED youth. The component also serves some clients for brief follow-up therapy who were first seen in emergency services.

Statutory and Regulatory Authority

AS 47.30.520-620	Community Mental Health Services Act
AS 47.30.655-915	State Mental Health Policy (Hospitalization of Clients)
AS 47.30.056	Use of Money in the Mental Health Trust Income Account
7 AAC 78.010-320	Grant Programs (Regulations)
7 AAC 72.010-900	Civil Commitment (Regulations)
7 AAC 71.010-300	Community Mental Health Services (Regulations)

General Community Mental Health Grants

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	164.0	155.7	155.7
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	850.4	1,989.8	1,232.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,014.4	2,145.5	1,387.8
Funding Sources:			
1002 Federal Receipts	0.0	0.0	64.0
1037 General Fund / Mental Health	780.8	1,236.5	773.8
1092 Mental Health Trust Authority Authorized Receipts	233.6	909.0	550.0
Funding Totals	1,014.4	2,145.5	1,387.8

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	0.0	0.0	64.0	64.0
Mental Health Trust Authority Auth.Rec.	51410	233.6	909.0	514.5	550.0	550.0
Restricted Total		233.6	909.0	514.5	614.0	614.0
Total Estimated Revenues		233.6	909.0	514.5	614.0	614.0

General Community Mental Health Grants**Proposed Changes in Levels of Service for FY2002**

There will be no change in the level of service provided.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,236.5	0.0	909.0	2,145.5
Adjustments which will continue current level of service:				
-Change the Component for SB 73 Appropriation Assisted Living Homes (RP06-1-0002)	-462.7	0.0	-459.0	-921.7
-Transfer Out All Fed-Transfer In HRSA Tramatic Brain Injury	0.0	64.0	0.0	64.0
Proposed budget increases:				
-Rural Svcs for the Deaf and Hearing Impaired	0.0	0.0	100.0	100.0
FY2002 Governor	773.8	64.0	550.0	1,387.8

Component: Psychiatric Emergency Services

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

The Psychiatric Emergency Services component provides competitive grant funding to community mental health agencies for services intended to aid people in psychiatric crisis. The service array may include crisis intervention and brief therapeutic interventions to help stabilize the client, and follow-up services. There are also specialized services such as outreach teams, and residential crisis/respice services.

Component Goals and Strategies

- 1) PROVIDE A COST-EFFECTIVE MINIMUM BASIC ARRAY OF OUTPATIENT, RESIDENTIAL AND INPATIENT SERVICES IN ALL AREAS OF THE STATE TO RESPOND TO A VARIETY OF PSYCHIATRIC EMERGENCY SITUATIONS, AND TO PROVIDE BRIEF STABILIZATION AND FOLLOW-UP SERVICES.
 - Distribute psychiatric emergency services grants to local community mental health agencies to establish basic service capacity in each of the state's service areas.
 - Assist local programs in the implementation and on-going operation of the programs.
- 2) IN EACH COMMUNITY, DEVELOP A LOCALLY APPROPRIATE SET OF SERVICES THAT ARE THE LEAST RESTRICTIVE AND INTRUSIVE POSSIBLE, EMPHASIZING NON-HOSPITAL OPTIONS.
 - In each service area, work with local providers, consumers, and the community to maximally utilize local resources and existing service configurations.
 - Set broad service parameters based on state guidelines and service principles, while allowing local creativity within those parameters.
- 3) CONTINUE DEVELOPMENT OF THE NEW SINGLE POINT OF ENTRY FACILITY AND OTHER SUPPORT SERVICES IN ANCHORAGE AND THE SURROUNDING AREA TO ENABLE THE NEW API FACILITY TO BE DESIGNED WITH A REDUCED CAPACITY OF 54 BEDS.
 - Continue the program development of the single point of entry facility and related services, parts of which may come on line by early FY 2001.
 - Work with the Anchorage community to integrate the new services into their community mental health system.

Key Component Issues for FY2001 – 2002

A major issue facing the component is the current reluctance of some providers to work with high acuity clients. Ongoing efforts to enact new service provider requirements will continue.

The Division will be seeking new legislation to expand the types of clinicians allowed to provide ex-parte psychiatric evaluations under AS 47.30 to include licensed marriage and family therapists and licensed professional counselors.

API and other mental health service provider agencies in Alaska are experiencing difficulty recruiting psychiatrists. Since there is only a limited supply of psychiatrists in the nation, they are in high demand and agencies in the country's more densely populated areas tend to be able to offer an employment/lifestyle package which is more attractive than Alaska can offer.

There is very limited grant funding for the smallest 13 CMHC's. They are not able to maintain a basic infrastructure.

Major Component Accomplishments for FY2000

- 1) FY 2000 services were maintained at the FY 1999 level, with no significant program changes.
- 2) Approximately 15,000 persons were served, many of whom were served in other components when not in crisis.

Statutory and Regulatory Authority

AS 47.30.520-620	Community Mental Health Services Act
AS 47.30.655-915	State Mental Health Policy (Hospitalization of Clients)
AS 47.30.056	Use of Money in the Mental Health Trust Income Account
7 AAC 78.010-320	Grant Programs (Regulations)
7 AAC 72.010-900	Civil Commitment (Regulations)
7 AAC 71.010-300	Community Mental Health Services (Regulations)

**Psychiatric Emergency Services
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	856.3	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	6,101.8	6,403.3	8,330.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	6,101.8	7,259.6	8,330.1
Funding Sources:			
1002 Federal Receipts	124.9	1,554.5	1,554.5
1037 General Fund / Mental Health	5,976.9	5,455.1	6,525.6
1092 Mental Health Trust Authority Authorized Receipts	0.0	250.0	250.0
Funding Totals	6,101.8	7,259.6	8,330.1

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	124.9	1,554.5	917.8	1,554.5	0.0
Mental Health Trust Authority Auth.Rec.	51410	0.0	250.0	125.0	250.0	250.0
Restricted Total		124.9	1,804.5	1,042.8	1,804.5	250.0
Total Estimated Revenues		124.9	1,804.5	1,042.8	1,804.5	250.0

Psychiatric Emergency Services**Proposed Changes in Levels of Service for FY2002**

- 1) There will be a single point of entry added to the Anchorage Emergency System.
- 2) There will be increased service capacity in the 13 smallest CMHC's.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	5,455.1	1,554.5	250.0	7,259.6
Adjustments which will continue current level of service:				
-Transfer in from DMA	765.0	0.0	0.0	765.0
Proposed budget increases:				
-Clinician Services for Small Communities	305.5	0.0	0.0	305.5
FY2002 Governor	6,525.6	1,554.5	250.0	8,330.1

Component: Services to the Chronically Mentally Ill

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

The Services for the Chronically Mentally Ill component provides competitive grant funding to community mental health agencies for an array of assessment, treatment, rehabilitation and support services for adults with severe mental illnesses. Core services are assessment, psychotherapy, case management, and rehabilitative services. Specialized services include residential services, vocational services, and drop-in centers. The component also funds the Adult Institutional Discharge Project, a program of intensive services for clients with very severe disabilities.

Component Goals and Strategies

- 1) PROVIDE BASIC SERVICE TO MEDICAID AND NON-MEDICAID ELIGIBLE ADULTS WITH A SEVERE MENTAL ILLNESS.
 - Distribute services to the chronically mentally ill grants to local community mental health agencies to establish basic service capacity in each of the state's service areas.
 - Assist local programs in the implementation and on-going operation of the programs.
- 2) MAINTAIN OR EXPAND THE NUMBER, TYPE AND UTILIZATION OF CORE SERVICES FOR ADULTS WITH A SEVERE MENTAL ILLNESS, SUCH AS OUTREACH AND CASE-FINDING, ASSESSMENT, MEDICAL AND PSYCHIATRIC, SKILL BUILDING AND RESIDENTIAL SUPPORT SERVICES.
 - Provide on-going monitoring and oversight of the programs.
 - Investigate problems and complaints as they arise.

Key Component Issues for FY2001 – 2002

There will be new service requirements and standards for the Services to the Chronically mentally Ill component for FY02 and 03. A committee of stakeholders is developing the standards, and they will be in the FY02-03 RFP as requirements to receive a grant.

Starting in the fall of 2000, over a period of three fiscal years the Division is phasing in the Assisted Living Home (ALH) rate increases established with the passage of SB 73 last session. In addition, there will be efforts to enhance new ALH legislation to establish standards addressing health and safety issues for the facilities.

Consumer health and safety issues continue to be at the forefront of the Division's concerns. This coming session we will be seeking legislative change which would require provider agencies to notify the Division in the case of consumers known to be missing, seriously injured or deceased. We will also be seeking revision of the current statutes and regulations governing ALHs, which serve both mental health and developmental disabilities consumers. The Division strives to expand ALH licensing requirements to include homes with 1-2 clients, and expects to implement new standards of care, in an effort to increase the health and safety of ALH residents.

Major Component Accomplishments for FY2000

- 1) FY 2000 services were maintained at the FY 1999 level, with no significant program changes.
- 2) Approximately 3,900 persons were served.

Statutory and Regulatory Authority

AS 47.30.520-620 Community Mental Health Services Act
AS 47.30.655-915 State Mental Health Policy (Hospitalization of Clients)
AS 47.30.056 Use of Money in the Mental Health Trust Income Account
7AAC 78.010-320 Grant Programs (Regulations)
7 AAC 72.010-900 Civil Commitment (Regulations)
7 AAC 71.010-300 Community Mental Health Services (Regulations)

Services to the Chronically Mentally III
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	135.9	135.9	135.9
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	11,412.5	11,688.3	15,576.6
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	11,548.4	11,824.2	15,712.5
Funding Sources:			
1002 Federal Receipts	308.5	394.5	1,972.8
1004 General Fund Receipts	0.0	203.0	0.0
1007 Inter-Agency Receipts	371.3	426.3	426.3
1037 General Fund / Mental Health	10,868.6	10,598.4	12,324.9
1092 Mental Health Trust Authority Authorized Receipts	0.0	202.0	988.5
Funding Totals	11,548.4	11,824.2	15,712.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	308.5	394.5	394.5	1,972.8	2,063.2
Interagency Receipts	51015	371.3	426.3	321.5	426.3	321.5
Mental Health Trust Authority Auth.Rec.	51410	0.0	202.0	459.0	988.5	529.5
Restricted Total		679.8	1,022.8	1,175.0	3,387.6	2,914.2
Total Estimated Revenues		679.8	1,022.8	1,175.0	3,387.6	2,914.2

Services to the Chronically Mentally III**Proposed Changes in Levels of Service for FY2002**

There will be no change in service levels for FY02.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	10,801.4	394.5	628.3	11,824.2
Adjustments which will continue current level of service:				
-Change the Component for SB 73 Appropriation Assisted Living Homes (RP06-1-0002)	462.7	0.0	459.0	921.7
-Transfer Out All Fed-Transfer in SAMHSA Path & Block Grants, HUD Life Quest, Mat-Su Grants, from Fed	0.0	1,418.0	0.0	1,418.0
-Katmai Extended Care (CMH/API 2000)	394.5	-394.5	0.0	0.0
-Transfer in SAMHSA Anch Comorbidity Svcs from DET	0.0	554.8	0.0	554.8
Proposed budget increases:				
-Integrated Services for People with Co-occurring Disorders	0.0	0.0	165.0	165.0
-Assisted Living Home Rate Increase	666.3	0.0	0.0	666.3
-LINK Project	0.0	0.0	37.5	37.5
-Consumer-Directed Programs/Clubhouses	0.0	0.0	125.0	125.0
FY2002 Governor	12,324.9	1,972.8	1,414.8	15,712.5

Component: Designated Evaluation and Treatment

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

The Designated Evaluation and Treatment component provides fee-for-service funding, on a payer-of-last resort basis, to designated local community and specialty hospitals for evaluation and treatment services provided to people under court-ordered commitment through AS 47.30.655-915, and to people who meet those criteria, but have agreed to voluntary services in lieu of commitment. Through this funding, local facilities may provide 72 hour inpatient psychiatric evaluations, and up to 30 days of inpatient or residential psychiatric treatment services, close to the client's home, family, and support system. Component funding also supports client and client escort travel between the client's home and the hospital, and enhanced detox services for people who are intoxicated and expressing suicidal ideation.

Component Goals and Strategies

- 1) PROVIDE 72 HOUR INPATIENT PSYCHIATRIC EVALUATIONS, AND UP TO 30 DAYS OF INPATIENT PSYCHIATRIC TREATMENT IN LOCAL HOSPITALS AND SPECIALTY HOSPITALS, TO MAKE SERVICES AVAILABLE AS CLOSE TO THE CLIENT'S HOME AS POSSIBLE.
 - Distribute fee-for-service payments to local community hospital as a payer of last resort to implement these services.
 - Distribute grants to local detox facilities to provide enhanced detox services to people who are intoxicated and experiencing emotional problems.
 - Provide technical assistance and monitoring of the services.

Key Component Issues for FY2001 – 2002

A critical issue facing the component is the sunset clause in the DET statutes that will become effective June 30, 2001. The Division will pursue legislation to remove the clause.

The current, cumbersome payment system for the program is also a concern, and a new payment system is in the planning and design stage.

Major Component Accomplishments for FY2000

- 1) FY 2000 services were maintained at the FY 1999 levels.
- 2) Approximately 300 people were served, many of whom were also served in at least one of the other components.

Statutory and Regulatory Authority

AS 47.30.520-620 Community Mental Health Services Act
AS 47.30.655-915 State Mental Health Policy (Hospitalization of Clients)
AS 47.30.056 Use of Money in the Mental Health Trust Income Account
7 AAC 78.010-320 Grant Programs (Regulations)
7 AAC 72.010-900 Civil Commitment (Regulations)

7 AAC 71.010-300 Community Mental Health Services (Regulations)

**Designated Evaluation and Treatment
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,901.5	2,326.0	2,071.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,901.5	2,326.0	2,071.2
Funding Sources:			
1002 Federal Receipts	782.2	1,279.7	724.9
1037 General Fund / Mental Health	1,119.3	1,046.3	1,146.3
1092 Mental Health Trust Authority Authorized Receipts	0.0	0.0	200.0
Funding Totals	1,901.5	2,326.0	2,071.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	782.2	1,279.7	582.1	724.9	0.0
Mental Health Trust Authority Auth.Rec.	51410	0.0	0.0	0.0	200.0	200.0
Restricted Total		782.2	1,279.7	582.1	924.9	200.0
Total Estimated Revenues		782.2	1,279.7	582.1	924.9	200.0

Designated Evaluation and Treatment**Proposed Changes in Levels of Service for FY2002**

There will be no change in service level for FY02.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	1,046.3	1,279.7	0.0	2,326.0
Adjustments which will continue current level of service:				
-Transfer Excess SAMHSA Anch Comorbidity Svcs to CMI	0.0	-554.8	0.0	-554.8
Proposed budget increases:				
-Increased DET Svcs Cost Based on Increased Use by Community Hospitals	100.0	0.0	200.0	300.0
FY2002 Governor	1,146.3	724.9	200.0	2,071.2

Component: Services for Seriously Emotionally Disturbed Youth

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

The Services for Severely Emotionally Disturbed (SED) Youth component provides competitive grant funding to community mental health agencies for a range of assessment, treatment, rehabilitative and support services for seriously emotionally disturbed youth and their families, and to those youth who are at risk of becoming seriously emotionally disturbed. The core services provided are assessment, psychotherapy, chemotherapy, case management, and rehabilitation. Specialized services include individual skill building, day treatment, home-based therapy and residential services. The component also funds the Alaska Youth Initiative (AYI), individualized wrap-around services for children at risk of institutionalization.

Component Goals and Strategies

- 1) PROVIDE BASIC SERVICES TO MEDICAID AND NON-MEDICAID ELIGIBLE CHILDREN WITH A SERIOUS EMOTIONAL DISTURBANCE (SED).
 - Distribute services to SED youth grants to local community mental health agencies to establish basic service capacity in each of the state's service areas.
 - Assist local programs in the implementation and on-going operation of the programs.
- 2) MAINTAIN OR EXPAND THE NUMBER, TYPE AND UTILIZATION OF CORE SERVICES FOR SED YOUTH, SUCH AS ASSESSMENT, PSYCHOTHERAPY, MEDICAL AND PSYCHIATRIC SERVICES, SKILL BUILDING, RESIDENTIAL SUPPORT SERVICES, AND INDIVIDUALIZED WRAP-AROUND SERVICES AS NEEDED.
 - Provide on-going monitoring and oversight of the programs.
 - Investigate problems and complaints as they arise.

Key Component Issues for FY2001 – 2002

As a part of the Department's grants re-engineering/improvement process, the Alaska Youth Initiative (AYI) program will initiate a fee-for-service pilot beginning July 1, 2001.

A committee of stakeholders is developing new service requirements and standards for the Services to Severely Emotionally Disturbed Youth component for FY02 and 03. These standards will be included in the FY02 - 03 RFP as requirements to receive a grant from the program.

Major Component Accomplishments for FY2000

- 1) FY 2000 services were maintained at the FY 1999 level, with no significant program changes.
- 2) Approximately 3,300 persons were served.

Statutory and Regulatory Authority

AS 47.30.520-620	Community Mental Health Services Act
AS 47.30.655-915	State Mental Health Policy (Hospitalization of Clients)

AS 47.30.056 Use of Money in the Mental Health Trust Income Account
7 AAC 78.010-320 Grant Programs (Regulations)
7 AAC 72.010-900 Civil Commitment (Regulations)
7 AAC 71.010-300 Community Mental Health Services (Regulations)

Services for Seriously Emotionally Disturbed Youth
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	62.0	62.0	62.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	6,988.9	7,494.4	7,352.1
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	7,050.9	7,556.4	7,414.1
Funding Sources:			
1002 Federal Receipts	0.0	0.0	57.7
1007 Inter-Agency Receipts	996.8	1,137.0	1,137.0
1037 General Fund / Mental Health	5,841.1	6,219.4	6,219.4
1092 Mental Health Trust Authority Authorized Receipts	213.0	200.0	0.0
Funding Totals	7,050.9	7,556.4	7,414.1

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	0.0	0.0	57.7	57.7
Interagency Receipts	51015	996.8	1,137.0	1,016.0	1,137.0	1,016.0
Mental Health Trust Authority Auth.Rec.	51410	213.0	200.0	100.0	0.0	0.0
Restricted Total		1,209.8	1,337.0	1,116.0	1,194.7	1,073.7
Total Estimated Revenues		1,209.8	1,337.0	1,116.0	1,194.7	1,073.7

Services for Seriously Emotionally Disturbed Youth

Proposed Changes in Levels of Service for FY2002

There will be no change in service level for FY02.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	6,219.4	0.0	1,337.0	7,556.4
Adjustments which will continue current level of service:				
-Transfer Out All Fed-Transfer In SAMHSA Block Grant-AYI Portion	0.0	57.7	0.0	57.7
Proposed budget decreases:				
-Delete MH Stabilization Homes	0.0	0.0	-200.0	-200.0
FY2002 Governor	6,219.4	57.7	1,137.0	7,414.1

BRU/Component: Community Developmental Disabilities Grants

(There is only one component in this BRU. To reduce duplicate information, we did not print a separate BRU section.)

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

The Division has embraced the concept of cohesiveness and collaboration in providing a service delivery system with consumers, their families and providers. Consumers are the focus of activities undertaken by the Division. The Service Principles reflect this focus by continuing to provide new and innovative services to Alaskans with mental disorders or developmental disability related needs.

Component Services Provided

The Division of Mental Health and Developmental Disabilities provides assistance to eligible Alaskans with a developmental disability as defined in AS 47.80.900.

INDIVIDUALIZED SERVICES: All services provided to consumers are tailored to meet an individual's needs. A plan is developed, together with the consumer and often the family, which empowers the consumer to choose where he or she wishes to live, work and play. The plan defines the services to be offered and might include one or more available services listed below. A consumer may design his or her own services to meet his or her unique needs. Some services are limited by funding source. In FY 2000 approximately 2,460 consumers were served and 960 remain on the waitlist.

- **CARE COORDINATION** - Care coordination services are provided by certified care coordinators. Care coordinators assist people with developmental disabilities in gaining access to needed medical, social, educational, and other services. Care coordination services include screening, assessment, care plan development, and care plan implementation.
- **CHORE SERVICES** - Chore services are defined as housekeeping and other assistance necessary to maintain a consumer's home in a clean, sanitary and safe condition. These services are funded when necessary to avoid placing the consumer in an out-of-home or institutional setting.
- **ENVIRONMENTAL MODIFICATIONS** - Physical adaptations to a consumer's home, identified in a consumer's plan of care and necessary to insure the health, welfare, and safety of the consumer can be provided. These adaptations must enable the consumer to function with greater independence, and must be provided by a certified environmental modifications provider.
- **RESIDENTIAL HABILITATION SERVICES** - These services assist a consumer to acquire, retain, and improve self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings of his or her choice. Training takes place during normal daily routines and is designed to enhance the abilities, competencies, and functional life skills of the consumer. Residential Habilitation service could also be defined as full-time, out-of-home care, with a qualified adult or family. This is only provided in state licensed foster care or assisted living homes but does not require the natural family to give up custody or parental rights. Parents help choose the foster family that will care for their child. Natural and foster parents jointly agree to follow a written service plan and visitation schedules.
- **RESPIRE CARE** - Specialized, direct care respite services provide relief from the everyday stress of caring for a family member with a developmental disability. Respite care services can be provided in a variety of settings, including the consumer's home. Alternate care providers, trained in first aid, CPR, behavior and physical management and other skills specific to the consumer's needs, provide respite care. Respite care cannot be

used to replace the services provided by regular child care or adult day care except for short-term, emergency situations. Respite services alleviate stress on the family and may forestall or prevent out-of-home placements.

- **SPECIALIZED ADAPTIVE EQUIPMENT** - Specialized adaptive equipment and supplies are provided for consumers to increase their abilities to perform activities of daily living. These include equipment and supplies that assist consumers to perceive, control, or communicate with the environment where they live. These include only items that are of direct medical or remedial benefit to the consumer.
- **VOCATIONAL SERVICES:** Persons with developmental disabilities are trained in jobs matched with individual skills and abilities. Consumers participate in the development of the training plan, and job training takes place in an income-producing environment. All consumers are paid for their work.

Component Goals and Strategies

- 1) **MAXIMIZE THE POTENTIAL OF PEOPLE WITH DEVELOPMENTAL DISABILITIES TO LIVE AS "NORMAL" A LIFE AS POSSIBLE.**
 - Insure services are offered to consumers based on individual choice and consumer self-determination.
 - Insure services are offered based on the Division's Service Principles.
 - Insure individualized services meet a consumer's unique needs.
- 2) **EMPOWER PEOPLE WITH DEVELOPMENTAL DISABILITIES AND THEIR FAMILIES TO DETERMINE INDIVIDUALIZED SERVICES NEEDED IN ORDER TO MAXIMIZE THEIR INDEPENDENCE.**
 - Provide person-centered, individualized services in concert with consumers and their families.
 - Insure consumers and their families are fully informed about program and service availability.
 - Support consumers and their families in individualized decision-making.
- 3) **PROVIDE SUSTAINED COMMUNITY BASED, INDIVIDUALIZED SERVICES.**
 - Insure ongoing support and funding for current nonprofit grantee agencies.
 - Insure quality improvement and quality assurance of services provided.
 - Enhance system capacity to serve additional consumers.
 - Insure sufficient funding for Mental Retardation/Developmental Disability Medicaid waivers and Children with Complex Medical Conditions Medicaid waivers.
 - Insure sufficient funding for services to consumers ineligible for Medicaid waivers.

Key Component Issues for FY2001 – 2002

- 1) Insure funding to sustain current services and planned increases in system capacity.
- 2) Insure funding for services to consumers eligible for Medicaid waivers.
- 3) Insure funding for services to consumers ineligible for Medicaid.
- 4) Assure service delivery system quality with developmental disability standards.
- 5) Insure availability of core services to all consumers on the Waitlist who receive no other services.
- 6) Continue development and implementation of a developmental disabilities management information system.

Major Component Accomplishments for FY2000

- 1) In FY 2000, services were provided in 150 communities by 32 nonprofit grantee agencies. Approximately 2,460 consumers were served.
- 2) Core services were offered to over 235 consumers on the Waitlist receiving no other services.
- 3) New core service guidelines were distributed to grantees for implementation in FY00.
- 4) Institutional Prevention money in the amount of \$965,800 was distributed to 32 grantee agencies for capacity building purposes.
- 5) New waitlist selection guidelines were completed by a workgroup made up of agency members, Governor's Council members, Division staff, and consumers.
- 6) 304 consumers were selected for full services in FY00.

7) Revised Care Coordination training material and added a half day of family training.

Statutory and Regulatory Authority

AS 47.80.010-.900 Persons with Disabilities
 7 AAC 78.010-320 Grant Programs (Regulations)
 PL 100-203 OBRA '87
 7 AAC 43.1010-1990 Eligibility for the Home and Community-Based Waiver Services

Key Performance Measures for FY2002

Measure: Increase the number of developmental disabilities consumers who receive services from the Division. (SB 281, modified)
(Developed jointly with Legislature in FY2000.)

Current Status:

In FY00, 2,460 consumers received service through the program's grants and waivers, representing a 26% increase in one year.

Benchmark:

in FY99, 1,953 consumers received services through the program's grants and waivers.

Measure: Decrease the length of time that developmentally disabled consumers are on a waiting list before receiving services. (SB 281, modified)
(Developed jointly with Legislature in FY2000.)

Current Status:

In FY00, the greatest length of time any consumer had been on the Waitlist was four years.

Benchmark:

In FY99, the greatest period of time a consumer was on the Waitlist was thirteen years.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Increase the number of developmental disabilities consumers who receive services from the Division. (SB 281, modified) 		X			
<ul style="list-style-type: none"> Decrease the length of time that developmentally disabled consumers are on a waiting list before receiving services. (SB 281, modified) 		X			

Community Developmental Disabilities Grants

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	127.2	101.6	421.7
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	20,165.8	19,897.5	19,612.5
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	20,293.0	19,999.1	20,034.2
Funding Sources:			
1002 Federal Receipts	0.0	0.0	185.1
1004 General Fund Receipts	0.0	120.0	0.0
1007 Inter-Agency Receipts	681.4	652.4	652.4
1037 General Fund / Mental Health	19,058.0	18,386.7	18,626.7
1092 Mental Health Trust Authority Authorized Receipts	553.6	840.0	570.0
Funding Totals	20,293.0	19,999.1	20,034.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	0.0	0.0	185.1	0.0
Interagency Receipts	51015	681.4	652.4	652.4	652.4	652.4
Mental Health Trust Authority Auth.Rec.	51410	553.6	840.0	840.0	570.0	450.0
Restricted Total		1,235.0	1,492.4	1,492.4	1,407.5	1,102.4
Total Estimated Revenues		1,235.0	1,492.4	1,492.4	1,407.5	1,102.4

Community Developmental Disabilities Grants**Proposed Changes in Levels of Service for FY2002**

Increase the number of consumers receiving core services while on the waitlist.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	18,506.7	0.0	1,492.4	19,999.1
Adjustments which will continue current level of service:				
-Transfer Out All Fed-Transfer In ACF Far North Families' Support Project From Fed MH	0.0	185.1	0.0	185.1
-DD Risk Management and Institutional Prevention	120.0	0.0	-120.0	0.0
Proposed budget decreases:				
-DD Mini-Grant Program	0.0	0.0	-150.0	-150.0
FY2002 Governor	18,626.7	185.1	1,222.4	20,034.2

Institutions and Administration Budget Request Unit

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BRU Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

BRU Services Provided

This BRU has two components: Mental Health and Developmental Disabilities (MHDD) Administration, and the Alaska Psychiatric Institute (API).

MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES ADMINISTRATION:

This component provides centralized support services for the Alaska Psychiatric Institute, and two grant programs - Community Mental Health Grants and Community Developmental Disabilities Grants. Support services include administration and fiscal management, service system planning and development, maintenance of the automated information system, and oversight of the \$50.0 million grant programs. Direct services include quality assurance, technical assistance, case management, and consultation. The Division works closely with the Alaska Mental Health Board, the Governor's Council on Disabilities and Special Education, and the Alaska Mental Health Trust Authority to determine overall policy aspects of planning and implementing a comprehensive system of services for people who experience mental illness or developmental disabilities.

THE ALASKA PSYCHIATRIC INSTITUTE: Located in Anchorage, the Alaska Psychiatric Institute (API) is the major state facility providing inpatient psychiatric care to the people of Alaska. It is a seven day a week, twenty-four hour treatment facility. Clients are admitted either voluntarily, or involuntarily through a Police Officer Application or Ex Parte Commitment. API provides diagnosis, evaluation and treatment services in accordance with its statutory mandates and the strict health care industry standards and requirements set by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), Health Care Financing Administration (HCFA), and Alaska's Certification and Licensure section. API provides outreach, consultation, and training to mental health service providers, community mental health centers, and Pioneer Homes. In addition, API serves as a backup to the community mental health centers, coordinating transitions from outpatient care to hospitalization and, alternatively, providing follow-up services to patients at mental health centers upon release from API.

BRU Goals and Strategies

- 1) **IMPLEMENT STATE LAWS PROTECTING AND ENHANCING THE MENTAL HEALTH OF ALASKANS.**
 - Promote increased awareness and acceptance of people with special needs and work toward decreasing the incidence and impact of mental disorders and developmental disabilities.
 - Through direct service and oversight of other service agencies in the state, meet the needs of people with mental disorders or developmental disabilities and their families, consistent with requirements of the Mental Health Trust Settlement.
 - Maximize use of federal resources available to assist in meeting the mental health needs of Alaskans.
- 2) **ENSURE ABILITY TO HIRE AND RETAIN COMPETENT, QUALIFIED STAFF AT API BY WORKING TO MAINTAIN THE SALARIES OF API POSITIONS COMPETITIVE WITH PRIVATE SECTOR HEALTHCARE SALARIES (E.G., R.N. AND PHYSICIAN ASSISTANT SALARIES).**
- 3) **CONTINUE TO IMPROVE PATIENT CARE.**
 - Utilizing established multi-disciplinary teams, continue API's focus on its hospital-wide quality improvement program [API's teams are organized around the Joint Commission on Accreditation of Healthcare Organizations' (JCAHO's) functional standards]
 - Continue to train all API clinical staff in the role recovery approach to patient care and treatment

- Continue to improve API's therapeutic environment by improving the milieu of each patient unit and patient care areas more generally
- 4) REPLACE THE CURRENT 74 BED API FACILITY WITH A DOWNSIZED 54 BED FACILITY, AND FULLY IMPLEMENT THE COMMUNITY SERVICES PLAN DESIGNED TO REPLACE A PORTION OF API'S HOSPITAL-BASED SERVICES.

Key BRU Issues for FY2001 – 2002

Key issues for the Division as a whole include:

- **Health and safety:** Consumer health and safety issues continue to be at the forefront of the Division's concerns. This coming session we will be seeking legislative change which would require provider agencies to notify the Division in the case of consumers known to be missing, seriously injured or deceased. We will also be seeking revision of the current statutes and regulations governing ALHs, which serve both mental health and developmental disabilities consumers. The Division strives to expand Assisted Living Homes (ALH) licensing requirements to include homes with 1-2 clients, and expects to implement new standards of care, in an effort to increase the health and safety of ALH residents.
- **Staff recruitment and retention:** At both the state and provider levels, difficulty in recruiting and retaining quality staff is of increasing concern. Relative to Alaska's cost of living, local wages are no longer keeping pace with those in much of the lower 48. This points to a need for provider capacity building; without funds to support an adequate infrastructure, agencies are unable to serve a continually larger consumer base.
- **Data:** The Division faces a continued need for management information system (MIS) development in order to meet the increasingly complex data reporting requirements from the legislature, the Alaska Mental Health Trust Authority, the Alaska Mental Health Board, the Governor's Council, and the Commissioner's Office. However, obstacles exist on several fronts. The department as a whole is grappling with system compatibility/interconnectivity issues, and with grantee compliance with data reporting requirements.
- **Staff funding:** The Division seeks base budget funding for two critical staff, the Statewide Children's Mental Health Services Coordinator and the Mental Health Consumer Affairs position. Both positions were created under Trust initiatives and have proven their value in the mental health system.
- **Quality assurance:** In both the mental health and developmental disabilities programs, agencies need more technical assistance in their provision of quality services than the Division is able to provide. For the past year, three quality assurance staff have attempted to keep pace with the technical assistance demands from about 100 provider agencies. The Division seeks additional QA funding in order to be able to fill our fourth QA position, and to supplement the annual quality assurance contract.

Key Issues for the Alaska Psychiatric Institute include:

- Retain API's JCAHO accreditation during JCAHO's survey of the hospital in December of 2000
- Resolution of the API 2000 Project goal: find a replacement facility solution for Old API by focusing on the original option of building a new replacement facility on the present API site.
- Find a solution to API's use of mandatory overtime in the Nursing Department in order to adequately staff hospital patient units at a safe and therapeutic level; API management believes it is vitally necessary to greatly reduce or eliminate the use of mandatory overtime because of staff burnout and safety concerns
- Work to hire and retain competent clinical healthcare staff at API, in the face of significantly higher wages in the private sector
- Coordinate closely with the Community Mental Health/API 2000 Project in implementation of the new and enhanced community-based mental health services for the community of Anchorage, to assist in attempting to reduce the bed demand at API.

Major BRU Accomplishments for FY2000

Administration component staff provided oversight for the Division's \$50 million dollar community grant programs serving an estimated 2,460 developmentally disabled consumers and 20,000 consumers with mental health issues, through approximately 100 non-profit grantee agencies.

At API:

- Maintained an increase in the quality of services while facing at 10% increase in patient admission during FY00
- Reduced the use rate of hours in seclusion by 50% in one year
- Completed implementation of a hospital-wide performance improvement system using teams made up of staff from all departments and all levels within the hospital

Key Performance Measures for FY2002

Measure: Decrease the average number of publicly funded psychiatric hospital days used per hospitalized person. (SB 281, modified)

(Developed jointly with Legislature in FY2001.)

Current Status:

In FY00 the average was 10 days.

Benchmark:

In FY98 the average stay was 14 days. (excludes data on consumers in residence at API longer than 6 months)

Background and Strategies:

The purpose of the Community Mental Health/API 2000 Project (CMHP) is to replace the aging API with a new facility, make it possible to safely operate with reduced inpatient capacity by increasing and enhancing community-based mental health and substance abuse services in Anchorage, and further improve inpatient hospital care provided within API.

The new and enhanced services that are a part of the CMHP were designed to specifically impact the number of admissions to API from the Anchorage area and reduce the number of patient days. These new and enhanced Anchorage community services either are -- or are coming -- on line at this time. The first new service started in October of 1999, providing intensive, extended care services for 6 long-term API patients. Enhanced and expanded crisis respite care started in September of 2000, and enhanced detoxification and residential dual diagnosis services began in October of 2000.

Measure: Increase the percentage of mental health and developmental disabilities provider programs reviewed for consumer satisfaction to at least 50%. (SB 281, modified)

(Developed jointly with Legislature in FY2000.)

Current Status:

In FY00, 56% of MH provider programs were reviewed and 43% of DD provider programs were reviewed.

Benchmark:

In FY99, 49% of MH provider programs were reviewed and 34% of DD provider programs were reviewed.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Decrease the average number of publicly funded psychiatric hospital days used per hospitalized person. (SB 281, modified) 		X			

Budget Request Unit — Institutions and Administration

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Increase the percentage of mental health and developmental disabilities provider programs reviewed for consumer satisfaction to at least 50%. (SB 281, modified) 		X			

Institutions and Administration
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
None.												
Non-Formula Expenditures												
Mental Health/DD Admin	2,569.9	334.9	1,850.6	4,755.4	2,724.0	1,181.7	2,034.5	5,940.2	2,710.4	1,612.4	2,342.7	6,665.5
Alaska Psychiatric Institute	2,023.5	0.0	13,886.4	15,909.9	4,439.8	0.0	11,806.4	16,246.2	6,325.8	0.0	10,357.7	16,683.5
Federal Mental Health Projects	0.0	1,540.3	321.1	1,861.4	0.0	2,048.5	177.1	2,225.6	0.0	0.0	0.0	0.0
Totals	4,593.4	1,875.2	16,058.1	22,526.7	7,163.8	3,230.2	14,018.0	24,412.0	9,036.2	1,612.4	12,700.4	23,349.0

Institutions and Administration**Proposed Changes in Levels of Service for FY2002**

Not yet resolved.

Institutions and Administration**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	7,163.8	3,230.2	14,018.0	24,412.0
Adjustments which will continue current level of service:				
-Mental Health/DD Admin	-82.6	320.5	169.8	407.7
-Alaska Psychiatric Institute	636.8	0.0	-11.6	625.2
-Federal Mental Health Projects	0.0	-2,048.5	-177.1	-2,225.6
Proposed budget decreases:				
-Mental Health/DD Admin	0.0	0.0	-81.0	-81.0
-Alaska Psychiatric Institute	0.0	0.0	-686.8	-686.8
Proposed budget increases:				
-Mental Health/DD Admin	69.0	110.2	219.4	398.6
-Alaska Psychiatric Institute	1,249.2	0.0	-750.3	498.9
FY2002 Governor	9,036.2	1,612.4	12,700.4	23,349.0

Component: Mental Health/Developmental Disabilities Administration

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

This component provides centralized support services for the Alaska Psychiatric Institute, and the Division's two additional BRUs - Community Mental Health Grants and Community Developmental Disabilities Grants. Services include general administration, budget development and fiscal management, service system planning, development of service and training initiatives, maintenance and upgrade of the automated information system, and oversight of the mental health and developmental disabilities \$50.0 million grantee programs. Direct services include quality assurance, technical assistance, case management, and consultation. The Division works closely with the Alaska Mental Health Board, the Governor's Council on Disabilities and Special Education, and the Alaska Mental Health Trust Authority to determine overall policy aspects of planning and implementing a comprehensive system of services for persons who experience mental illness or developmental disabilities.

Component Goals and Strategies

IMPLEMENT STATE LAWS PROTECTING AND ENHANCING THE MENTAL HEALTH OF ALASKANS.

- Effectively administer the state mental health and developmental disabilities programs, oversee nonprofit grantee agencies' provision of related service, and manage the Division's resources.
- Promote increased awareness and acceptance of people with special needs and work toward decreasing the incidence and impact of mental disorders and developmental disabilities.
- Develop and implement operational plans for services to meet the needs of those with mental disorders or developmental disabilities and their families, consistent with requirements of the Mental Health Trust Settlement.

Key Component Issues for FY2001 – 2002

Key issues for the Division as a whole include:

- **Health and safety:** Consumer health and safety issues continue to be at the forefront of the Division's concerns. This coming session we will be seeking legislative change which would require provider agencies to notify the Division in the case of consumers known to be missing, seriously injured or deceased. We will also be seeking revision of the current statutes and regulations governing ALHs, which serve both mental health and developmental disabilities consumers. The Division strives to expand Assisted Living Homes (ALH) licensing requirements to include homes with 1-2 clients, and expects to implement new standards of care, in an effort to increase the health and safety of ALH residents.
- **Staff recruitment and retention:** At both the state and provider levels, difficulty in recruiting and retaining quality staff is of increasing concern. Relative to Alaska's cost of living, local wages are no longer keeping pace with those in much of the lower 48. This points to a need for provider capacity building; without funds to support an adequate infrastructure, agencies are unable to serve a continually larger consumer base.
- **Data:** The Division faces a continued need for management information system (MIS) development in order to meet the increasingly complex data reporting requirements from the legislature, the Alaska Mental Health Trust Authority, the Alaska Mental Health Board, the Governor's Council, and the Commissioner's Office. However, obstacles exist on several fronts. Interconnectivity with other DH&SS Divisions and with provider agency systems needs to be addressed. Currently the interface between the MIS for state-funded mental health services -- Alaska

Recipient Outcome Reporting Application (ARORA) -- and several providers' local systems is flawed and does not assure integrity in transfer of data. The same may become an issue for the Alaska Developmental Disabilities Information System (ADDIS) under development, or for the proposed collaborative ADA/MH Behavioral Health MIS project. Even with functioning system interconnectivity, large gaps in providers' data submission will remain an issue until we can better address grantee noncompliance with reporting requirements. In part, some providers' reluctance to participate in the data exchange with ARORA stems from concerns about consumer privacy issues, and whether the encryption of consumer identifiers is adequate to foil persistent hackers.

- Staff funding: The Division seeks base budget funding for two critical staff, the Statewide Children's Mental Health Services Coordinator and the Mental Health Consumer Affairs position. Both positions were created under Trust initiatives and have proven their value in the mental health system.
- Quality assurance: In both the mental health and developmental disabilities programs, agencies need more technical assistance in their provision of quality services than the Division is able to provide. For the past year, three quality assurance staff have attempted to keep pace with the technical assistance demands from about 100 provider agencies. The Division seeks additional QA funding in order to be able to fill our fourth QA position, and to supplement the annual quality assurance contract.

Major Component Accomplishments for FY2000

Administration component staff provided oversight for the Division's \$50 million dollar grant programs serving an estimated 2,460 developmentally disabled consumers and 20,000 consumers with mental health issues.

Statutory and Regulatory Authority

AS 47.30.520-620	Community Mental Health Services Act
7 AAC 78.010-320	Grant Programs (Regulations)
7 AAC 71.010-300	Community Mental Health Services (Regulations)
PL 102-321	Community Mental Health Services (Includes Block Grant)
AS 47.30.665-915	State Mental Health Policy (Hospitalization of Clients)
AS 47.80.010-900	Persons with Disabilities
7 AAC 72.010-900	Civil Commitment (Regulations)
AS 44.29.020	Department of Health and Social Services (State Management of Programs)

Mental Health/Developmental Disabilities Administration**Component Financial Summary***All dollars in thousands*

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	3,228.0	3,962.0	3,852.4
72000 Travel	303.7	328.9	373.6
73000 Contractual	957.6	1,461.9	2,198.2
74000 Supplies	106.1	75.9	76.0
75000 Equipment	137.1	99.1	89.1
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	22.9	12.4	76.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	4,755.4	5,940.2	6,665.5
Funding Sources:			
1002 Federal Receipts	334.9	1,181.7	1,612.4
1005 General Fund/Program Receipts	3.0	10.1	10.1
1007 Inter-Agency Receipts	1,555.7	1,715.8	1,949.6
1037 General Fund / Mental Health	2,566.9	2,713.9	2,700.3
1092 Mental Health Trust Authority Authorized Receipts	294.9	318.7	393.1
Funding Totals	4,755.4	5,940.2	6,665.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
<u>Unrestricted Revenues</u>						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
<u>Restricted Revenues</u>						
Federal Receipts	51010	334.9	1,181.7	1,181.7	1,612.4	806.0
Interagency Receipts	51015	1,555.7	1,715.8	1,892.9	1,949.6	2,032.8
General Fund Program Receipts	51060	3.0	10.1	10.1	10.1	10.1
Mental Health Trust Authority Auth.Rec.	51410	294.9	318.7	318.7	393.1	348.1
Restricted Total		2,188.5	3,226.3	3,403.4	3,965.2	3,197.0
Total Estimated Revenues		2,188.5	3,226.3	3,403.4	3,965.2	3,197.0

Mental Health/Developmental Disabilities Administration**Proposed Changes in Levels of Service for FY2002**

Not yet resolved.

Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,724.0	1,181.7	2,034.5	5,940.2
Adjustments which will continue current level of service:				
-Transfer Out All Fed-Transfer In Multiple Grants From Fed MH Project	0.0	323.7	0.0	323.7
-Transfer to API to meet Personal Services Need	-74.2	0.0	0.0	-74.2
-Year 2 Labor Costs - Net Change from FY2001	-8.4	-3.2	-7.3	-18.9
-Medicaid Disproportionate Share Indirect from Federal MH projects (RP06-1-0002)	0.0	0.0	177.1	177.1
Proposed budget decreases:				
-Consumer Affairs	0.0	0.0	-45.0	-45.0
-MHDD Admin Salary Adjustment	0.0	0.0	-36.0	-36.0
Proposed budget increases:				
-Inpatient Quality Assurance Reviews of DE and DE&T facilities, and API	0.0	0.0	30.0	30.0
-Assisted Living Homes Health & Safety Quality Assurance and Licensing	0.0	0.0	145.0	145.0
-Outpatient: Implement Integrated Quality Assurance Review Program	69.0	0.0	-50.0	19.0
-Increase Medicaid Svcs RSA, reduce DSH, LIT	0.0	0.0	33.2	33.2
-Vocational Rehab Counselor	0.0	0.0	61.2	61.2
-MHDD Admin Salary Adjustment	0.0	110.2	0.0	110.2
FY2002 Governor	2,710.4	1,612.4	2,342.7	6,665.5

Mental Health/Developmental Disabilities Administration**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	57	58	Annual Salaries	3,047,559
Part-time	3	4	COLA	43,373
Nonpermanent	1	1	Premium Pay	0
			Annual Benefits	1,010,980
			<i>Less 6.08% Vacancy Factor</i>	<i>(249,512)</i>
			Lump Sum Premium Pay	0
Totals	61	63	Total Personal Services	3,852,400

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant III	0	0	1	0	1
Accounting Clerk II	0	0	1	0	1
Accounting Tech I	0	0	1	0	1
Accounting Tech II	0	0	1	0	1
Administrative Assistant	1	0	1	0	2
Administrative Clerk II	2	0	3	0	5
Administrative Clerk III	1	1	1	1	4
Administrative Manager IV	0	0	1	0	1
Analyst/Programmer III	0	0	1	0	1
Analyst/Programmer IV	0	0	1	0	1
Analyst/Programmer V	0	0	1	0	1
Community Care Lic Spec I	2	0	0	0	2
Community Care Lic Spec II	1	0	0	0	1
Community Mh Svc Prog Adm	0	0	1	0	1
Dev Dis Program Admin	0	0	1	0	1
Dev Dis Program Spec I	2	0	1	1	4
Dev Dis Program Spec III	3	1	2	1	7
Division Director	0	0	1	0	1
Hlth & Soc Svcs Plnr I	1	0	0	0	1
Hlth & Soc Svcs Plnr III	1	0	0	0	1
Mntl Hlth Clinician II	5	1	1	1	8
Mntl Hlth Clinician III	5	1	2	1	9
Personnel Asst II	0	0	1	0	1
Project Asst	0	0	2	0	2
Project Director	1	0	0	0	1
Research Analyst II	0	0	1	0	1
Secretary	0	0	1	0	1
Social Svcs Prog Coord	0	0	1	0	1
Vocational Rehab Counselor III	1	0	0	0	1
Totals	26	4	28	5	63

Component: Alaska Psychiatric Institute

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

The mission of Alaska Psychiatric Institute (API) is to provide an appropriate array of quality, in-patient psychiatric services for the treatment of Alaskans with psychiatric disorders who meet admission criteria.

Component Services Provided

Alaska Psychiatric Institute (API) provides seven day a week, twenty-four hour inpatient treatment for Alaskans with severe and persistent psychiatric disorders or serious maladaptive behaviors. Approximately 85% of API's clients are indigent, with no third party resources (including Medicaid) to pay for services. Clients are admitted either voluntarily or involuntarily through a Police Officer Application or Ex Parte Commitment from a judge or magistrate, a mental health professional, or a community mental health center (CMHC). API provides outreach, consultation, and training to mental health service providers, CMHCs, and Pioneer Homes. API is presently budgeted, staffed and configured for 74 beds; however, as API may not turn away involuntary patients, we are often at risk of exceeding bed capacity (e.g., in FY00 our highest daily census was 80).

API provides diagnosis, evaluation and treatment services in accordance with its statutory mandates and the strict health care industry standards and requirements set by the Joint Commission on Accreditation of Healthcare Organizations, Health Care Financing Administration (HCFA), and Alaska's Certification and Licensure section. Services include screening and referral; medication stabilization; psychosocial rehabilitation services, multidisciplinary assessments, individualized and group therapy and counseling; patient and family education; and inpatient psychiatric treatment services for adolescents, court-ordered persons accused of criminal activity or found not guilty by reason of insanity, and adults with severe and persistent mental illnesses who need longer term care. In addition, API serves as a backup to the community mental health centers, coordinating transitions from outpatient care to hospitalization and, alternatively, providing follow-up services to patients at mental health centers upon release from API.

Component Goals and Strategies

- 1) ENSURE ABILITY TO HIRE AND RETAIN COMPETENT, QUALIFIED STAFF AT API BY WORKING TO MAINTAIN THE SALARIES OF API POSITIONS COMPETITIVE WITH PRIVATE SECTOR HEALTHCARE SALARIES (E.G., R.N. AND PHYSICIAN ASSISTANT SALARIES)
- 2) CONTINUE TO IMPROVE PATIENT CARE
 - Utilizing established multi-disciplinary teams, continue API's focus on its hospital-wide quality improvement program [API's teams are organized around the Joint Commission on Accreditation of Healthcare Organizations' (JCAHO's) functional standards]
 - Continue to train all API clinical staff in the role recovery approach to patient care and treatment
 - Continue to improve API's therapeutic environment by improving the milieu of each patient unit and patient care areas
- 3) OPERATE AN ACUTE ADMITTING UNIT FOR ADULTS
- 4) REPLACE THE CURRENT 74 BED API FACILITY WITH A DOWNSIZED 54 BED FACILITY, AND FULLY IMPLEMENT THE COMMUNITY SERVICES PLAN DESIGNED TO REPLACE A PORTION OF API'S HOSPITAL-BASED SERVICES

5) CONTINUE TO ADDRESS STAFF COMPETENCE, SAFETY, SECURITY, AND RELATED CLIENT-MANAGEMENT TRAINING CONCERNS

- Maintain an adequate staff-to-patient ratio on all units
- Routinely provide initial and on-going client management/safety training to appropriate API staff
- Continue to work to keep staff injuries down, reducing State workers' compensation expenditures

6) IMPLEMENT A REQUIRED PERFORMANCE MEASUREMENT SYSTEM

Continue to implement and participate in the "ORYX" performance measurement system (PMS), a hospital-based PMS created to meet the requirements of the JCAHO, and managed by the National Association of Mental Health Program Directors' Research Institute (NRI). NRI is collecting data on a variety of performance measures from over 200 public psychiatric hospitals across the nation, and reporting that data to JCAHO. API presently collects data on the following performance measures: rates of medication errors, patient injuries, patient elopements, and patient re-admits within 30 days. Beginning in January of 2001, API will also begin reporting on its rates of seclusion and restraint usage.

7) INCREASE THE AMOUNT OF FAMILY, HOSPITAL AND COMMUNITY INTERACTION

- Work to maximize family and friend involvement in patient treatment
- As a part of normalizing the hospital environment, continue to make the present facility available for recreational, educational, and business purposes

Key Component Issues for FY2001 – 2002

- Retain API's JCAHO accreditation during JCAHO's survey of the hospital in December of 2000
- Resolution of the API 2000 Project goal: find a replacement facility solution for Old API by focusing on the original option of building a new replacement facility on the present API site
- Find a solution to API's use of mandatory overtime in the Nursing Department in order to adequately staff hospital patient units at a safe and therapeutic level; API management believes it is vitally necessary to greatly reduce or eliminate the use of mandatory overtime because of staff burnout and safety concerns
- In the face of both significant cost increases within the healthcare industry and a 56% increase in admissions since FY95, work to be able to continue to provide quality inpatient services within the present inadequate budget and staffing levels
- Work to hire and retain competent clinical healthcare staff at API, in the face of significantly higher wages in the private sector
- Coordinate closely with the Community Mental Health/API 2000 Project in implementation of the new and enhanced community-based mental health services for the community of Anchorage, to assist in attempting to reduce the bed demand at API
- API's ability to maintain an aging facility functional and safe for its mission of providing inpatient psychiatric care

Major Component Accomplishments for FY2000

- Maintained an increase in the quality of services while facing at 10% increase in patient admission during FY00
- Reduced API's patient elopement (a/k/a AWOL) rate by 79.9% in just one year
- Reduced the use rate of hours in seclusion by 50% in one year
- Completed implementation of a hospital-wide performance improvement system using teams made up of staff from all departments and all levels within the hospital
- Substantially rewrote the bylaws of the API Governing Body, and added additional consumer representation to the Governing Body

Statutory and Regulatory Authority

Statutes and Regulations

AS 12.47.010-130 Insanity and Competency to Stand Trial
AS 47.30.655-915 State Mental Health Policy (Hospitalization of Clients)
AS 18.20.010-390 Hospital (Regulations)
AS 08.86.010-230 Psychologists and Psychological Associates
AS 18.70.010-900 Fire Protection
AS 08.68.010-410 Nursing
AS 08.64.010-380 State Medical Board
AS 08.95.010-990 Clinical Social Workers
AS 08.84.010-190 Physical Therapists and Occupational Therapists

Alaska Psychiatric Institute
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	13,193.0	13,942.0	14,329.3
72000 Travel	51.1	50.8	50.8
73000 Contractual	1,030.9	983.9	1,086.1
74000 Supplies	1,157.1	1,102.3	1,050.1
75000 Equipment	355.4	97.0	97.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	122.4	70.2	70.2
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	15,909.9	16,246.2	16,683.5
Funding Sources:			
1004 General Fund Receipts	0.0	4.1	0.0
1005 General Fund/Program Receipts	1,763.2	0.0	0.0
1007 Inter-Agency Receipts	13,739.2	8,068.4	7,376.3
1037 General Fund / Mental Health	260.3	4,435.7	6,325.8
1061 Capital Improvement Project Receipts	147.2	150.7	227.0
1092 Mental Health Trust Authority Authorized Receipts	0.0	1,326.3	491.5
1108 Statutory Designated Program Receipts	0.0	2,261.0	2,262.9
Funding Totals	15,909.9	16,246.2	16,683.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	13,739.2	8,068.4	8,675.6	7,376.3	5,906.4
General Fund Program Receipts	51060	1,763.2	0.0	0.0	0.0	0.0
Statutory Designated Program Receipts	51063	0.0	2,261.0	2,200.0	2,262.9	2,200.0
Capital Improvement Project Receipts	51200	147.2	150.7	147.2	227.0	147.2
Mental Health Trust Authority Auth.Rec.	51410	0.0	1,326.3	1,326.3	491.5	0.0
Restricted Total		15,649.6	11,806.4	12,349.1	10,357.7	8,253.6
Total Estimated Revenues		15,649.6	11,806.4	12,349.1	10,357.7	8,253.6

Alaska Psychiatric Institute

Proposed Changes in Levels of Service for FY2002

In FY 1994 the Administration and the Legislature agreed to have the Alaska Psychiatric Institute participate in a federal Medicaid program called "Medicaid Disproportionate Share" (DSH). Under the normal Medicaid program, API can only collect Medicaid for children (up to age 21) and elderly (over 65). The DSH program allowed the federal Medicaid program to make payments to API because the hospital served a disproportionate share of low-income patients (85%).

The new revenue stream supported a great portion of API's operating budget, and allowed the legislature to cut \$7.0 Million in general funds from API on an annual basis starting in FY 1994. From FY 1994 to FY 2000, the State of Alaska has saved \$49 million in general funds with API's participation in the DSH program.

However, in 1997 Congress passed legislation to change the DSH program gradually across FY 2001 - FY 2003, reducing the federal government's participation by a total of 66%.

The Department of Health and Social Services has worked with the Alaska Mental Health Trust Authority over the last several years to develop a budget plan that would minimize the impact on API and the State general fund as the disproportionate share payment interagency revenue stream decreases. There are several adjustments in API's FY2002 budget which allow API to maintain services without substantially increasing the drain on the state general fund.

Increased Admissions Contrasted with Reduced Bed Capacity

The treatment services that API provides are invaluable to the State. In FY00, 50% of the patients admitted to API were admitted for the first time, while the total admissions increased to 1,480 (as compared with 975 admitted in FY95). The length of stay (LOS) at API has been dramatically impacted by this increase in the number of admissions when compared to the number of beds available.

In order for API staff to meet the challenge of an increased admission rate and a static or reduced number of beds, it must work to treat patients quickly and effectively. To do otherwise would mean that API would quickly exceed its bed capacity on a regular basis. Therefore, in FY00, 25% of all admissions were discharged within 24 hours, while another 22% were discharged within two or three days, meaning that 47% of all persons admitted to API were discharged within 3 days of admission. However, this remarkable figure is of concern to API clinicians and community mental providers, as well, as API treatment teams increasingly hear from providers and family members that they believe that patients are often discharged too soon from our hospital. API will continue to struggle with this issue, as we work to be able to serve the numbers admitted as our bed capacity is reduced. The tension between these two factors will only increase.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	4,439.8	0.0	11,806.4	16,246.2
Adjustments which will continue current level of service:				
-Return of DSH Match from DMA	532.5	0.0	0.0	532.5
-Transfer from MH/DD Administration for Personal Service's Needs	74.2	0.0	0.0	74.2
-Year 2 Labor Costs - Net Change	30.1	0.0	-11.6	18.5

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
from FY2001				
Proposed budget decreases:				
-DSH Loss, Pharm RSA & Med Direct Billing Increases	0.0	0.0	-686.8	-686.8
Proposed budget increases:				
-Offsetting DSH Revenue Loss	1,249.2	0.0	-825.3	423.9
-Increased Nursing Capacity and Support Staff	0.0	0.0	75.0	75.0
FY2002 Governor	6,325.8	0.0	10,357.7	16,683.5

Alaska Psychiatric Institute
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	236	242	Annual Salaries	10,495,678
Part-time	2	2	COLA	163,532
Nonpermanent	8	20	Premium Pay	840,899
			Annual Benefits	3,907,730
			<i>Less 7.00% Vacancy Factor</i>	(1,078,549)
			Lump Sum Premium Pay	0
Totals	246	264	Total Personal Services	14,329,290

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant IV	1	0	0	0	1
Accounting Clerk II	3	0	0	0	3
Accounting Spvr II	1	0	0	0	1
Accounting Tech II	1	0	0	0	1
Administrative Assistant	1	0	0	0	1
Administrative Clerk II	11	0	0	0	11
Administrative Clerk III	6	0	0	0	6
Analyst/Programmer IV	1	0	0	0	1
Analyst/Programmer V	1	0	0	0	1
Assistant Medical Director	1	0	0	0	1
Asst Nurse Director	1	0	0	0	1
Chaplain	1	0	0	0	1
Correspondence Sec III	6	0	0	0	6
Custodial Services Spvr	1	0	0	0	1
Director Of API	1	0	0	0	1
Enviro Services Journey I	7	0	0	0	7
Enviro Services Journey II	8	0	0	0	8
Facilities Manager I	1	0	0	0	1
Food Service Journey	2	0	0	0	2
Food Service Lead	3	0	0	0	3
Food Service Sub Journey	7	0	0	0	7
Food Service Supervisor	1	0	0	0	1
Health Practiitioner I	1	0	0	0	1
Health Practitioner I	1	0	0	0	1
Maint Gen Journey	2	0	0	0	2
Maint Gen Sub - Journey II	1	0	0	0	1
Maint Spec Bfc Journey I	2	0	0	0	2
Maint Spec Bfc Jrny II/Lead	1	0	0	0	1
Maint Spec Etrician Journey II	1	0	0	0	1
Maint Spec Plumb Jrny II	1	0	0	0	1
Medical Assist Admin I	1	0	0	0	1
Medical Officer	1	0	0	0	1
Medical Record Admin	1	0	0	0	1
Micro/Network Spec I	1	0	0	0	1
Micro/Network Spec II	1	0	0	0	1
Mntl Hlth Clinician II	5	0	0	0	5
Mntl Hlth Clinician III	5	0	0	0	5
Mntl Hlth Clinician IV	2	0	0	0	2
Nurse I	4	0	0	0	4

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Nurse II (Psych)	34	0	0	0	34
Nurse III (Psych)	10	0	0	0	10
Nurse IV (Psych)	2	0	0	0	2
Nursing Director	1	0	0	0	1
Occ Therapist I	2	0	0	0	2
Occ Therapist II	1	0	0	0	1
Personnel Asst I	1	0	0	0	1
Pharmacist	1	0	0	0	1
Pharmacy Assistant	1	0	0	0	1
Procurement Spec II	1	0	0	0	1
Psych Nurse Asst I	1	0	0	0	1
Psych Nurse Asst I	20	0	0	0	20
Psych Nurse Asst II	6	0	0	0	6
Psych Nurse Asst III	56	0	0	0	56
Psych Nurse Asst IV	8	0	0	0	8
Public Health Spec I	1	0	0	0	1
Public Health Spec II	1	0	0	0	1
Recreation Therapist I	3	0	0	0	3
Recreational Therapist II	1	0	0	0	1
Rehab Therapy Coordinator	1	0	0	0	1
Secretary	1	0	0	0	1
Security Guard I	3	0	0	0	3
Staff Psychiatrist	7	0	0	0	7
Stock & Parts Svcs Sub Journey	2	0	0	0	2
Supply Technician II	1	0	0	0	1
Word Proc Cen Spvr	1	0	0	0	1
Totals	264	0	0	0	264

Component: Federal Mental Health Projects

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Division is to plan with and provide appropriate prevention, treatment and support for families impacted by mental disorders or developmental disabilities, while maximizing self-determination.

Component Services Provided

The Federal Mental Health Projects component has provided authority to receive federal and interagency funds to benefit the citizens of Alaska who experience mental illness. Some specific uses of the federal funds include: Permanent housing projects for the mentally ill homeless; Mental Health Block Grant, granted to community mental health grantees to enhance service to adults and children with severe or chronic mental illness; projects for assistance in transition from homelessness; and other federal grants that come available for services to persons with mental illness. Uses of the interagency funds include providing grants to community mental health centers for clinicians to work directly with Division of Family and Youth Services Regional offices; and to provide funds for unexpected and/or crisis situations which require one-time support and funding.

Component Goals and Strategies

The Division will continue to maximize the use of federal funding in the provision of services to Alaskans impacted by mental disorders or developmental disabilities.

Key Component Issues for FY2001 – 2002

All authority is being transferred out and the component will be deleted for FY 2002.

Major Component Accomplishments for FY2000

This component is a repository for federal funds used in conjunction with state funds to provide community mental health services to people in crisis or with a high need for on-going services.

In the Psychiatric Emergency Services component, federal mental health block grant funds are combined with state general funds to provide an emergency outreach team in Anchorage. The block grant funds also provide outreach mental health service from Juneau to two Southeast villages.

In the Services to the Chronically Mentally Ill component, federal mental health block grant funds are combined with state general funds to provide intensive case management and support services to adults with severe mental illnesses in Fairbanks. Federal Projects for Assistance in Transitioning from Homelessness (PATH) funds support a drop-in center and support services for homeless mentally ill adults in Anchorage. Federal Dept. of Housing and Urban Development funds support transitional and permanent housing programs for adults with mental illnesses in Anchorage, Kenai, and Wasilla.

In the Services to Severely Emotionally Disturbed (SED) Youth component, federal mental health block grant funds are combined with state general funds to provide individualized wrap-around services in the Alaska Youth Initiative program. The block grant funds also support two clinicians based at DFYS to help assess the needs of SED youth in their custody.

Statutory and Regulatory Authority

AS 47.30.520-620	Community Mental Health Services Act
7AAC 78.010-310	Grant Programs (Regulations)
7AAC 71.010-300	Community Mental Health Services (Regulations)

**Federal Mental Health Projects
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	1.7	10.0	0.0
73000 Contractual	440.4	197.1	0.0
74000 Supplies	0.2	5.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	1,419.1	2,013.5	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,861.4	2,225.6	0.0
Funding Sources:			
1002 Federal Receipts	1,540.3	2,048.5	0.0
1007 Inter-Agency Receipts	321.1	177.1	0.0
Funding Totals	1,861.4	2,225.6	0.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,540.3	2,048.5	1,361.8	0.0	0.0
Interagency Receipts	51015	321.1	177.1	0.0	0.0	0.0
Restricted Total		1,861.4	2,225.6	1,361.8	0.0	0.0
Total Estimated Revenues		1,861.4	2,225.6	1,361.8	0.0	0.0

Federal Mental Health Projects**Proposed Changes in Levels of Service for FY2002**

All authority is being transferred out and the component is being deleted for FY 2002.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	2,048.5	177.1	2,225.6
Adjustments which will continue current level of service:				
-Transfer Medicaid Disproportionate Share Indirect to MH/DD Administration (RP06-1-0002)	0.0	0.0	-177.1	-177.1
-Transfer Out All Fed	0.0	-2,048.5	0.0	-2,048.5
FY2002 Governor	0.0	0.0	0.0	0.0

Mental Health Trust Boards Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

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BRU Mission

To act as the state planning and coordinating agencies for persons experiencing mental illness and serious emotional disorders, substance abuse use disorders, developmental disabilities and students in special education.

BRU Services Provided

Advocacy
Strategic Planning
Program review and evaluation
Budget recommendations
Integration and collaborative service delivery when appropriate
Best practices for treatment and service provision

BRU Goals and Strategies

Collaborative strategies - multi beneficiary service integration for persons with co-occurring disorders, collaborative budget strategies, resource sharing, ongoing development of the Comprehensive Integrated Mental Health Plan.

Key BRU Issues for FY2001 – 2002

Identify efficiencies, leverage existing resources, ensure long term budget planning that will ensure adequate resources for:

Substance Use Disorders;
Persons with Mental Illnesses and Serious Emotional Disorders; and
the Developmentally Disabled and Students in Special Education.

Three priorities endorsed by the three beneficiary boards are:

Meeting basic life needs of beneficiaries
Collaborative strategies housing capacity expansion for beneficiaries; and
Long range budget development to ensure sufficient resources to accomplish these and other priorities on behalf of persons served by the three boards.

Major BRU Accomplishments for FY2000

Annual Collaboration meeting of all beneficiary board representatives to address common goals.
Agreed upon service priority issues that affect all beneficiaries.
Funding for collaborative proposals approved for FY 2001 by Alaska Mental Health Trust Authority.
Continued involvement in API 2000 planning and implementation.
Initiation of coordinated mental health and substance use disorders services planning process.
Increased collaboration through Rural Outreach Project with organizations providing health care services in rural Alaska to develop funding and partnering opportunities.

**Mental Health Trust Boards
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
Alaska Mental Health Board	328.9	0.0	136.8	465.7	346.1	0.0	173.8	519.9	402.9	0.0	131.5	534.4
Governor's Cncl/Disabilities Board on	10.0	863.9	597.2	1,471.1	10.0	1,085.8	664.5	1,760.3	10.0	1,635.3	624.7	2,270.0
Alcohol. & Drug Abuse	282.5	0.0	0.0	282.5	292.9	0.0	33.0	325.9	292.2	0.0	33.0	325.2
Totals	621.4	863.9	734.0	2,219.3	649.0	1,085.8	871.3	2,606.1	705.1	1,635.3	789.2	3,129.6

Mental Health Trust Boards

Proposed Changes in Levels of Service for FY2002

In FY 2002, there will be a increase to the Board's components for Alaska Mental Health Trust Authority projects. Projects will enhance rural planning and program development; create advocates among individuals with disabilities; recruit and support direct service workers by addressing challenges facing Trust beneficiaries; provide training and support to individuals to help own their own businesses and enable the board to continue advocacy efforts integral to Trust litigation.

Mental Health Trust Boards

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	649.0	1,085.8	871.3	2,606.1
Adjustments which will continue current level of service:				
-Alaska Mental Health Board	56.8	0.0	-57.3	-0.5
-Governor's Cncl/Disabilities	0.0	-0.5	0.2	-0.3
-Board on Alcohol. & Drug Abuse	-0.7	0.0	0.0	-0.7
Proposed budget decreases:				
-Governor's Cncl/Disabilities	0.0	0.0	-40.0	-40.0
Proposed budget increases:				
-Alaska Mental Health Board	0.0	0.0	15.0	15.0
-Governor's Cncl/Disabilities	0.0	550.0	0.0	550.0
FY2002 Governor	705.1	1,635.3	789.2	3,129.6

Component: Alaska Mental Health Board

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

The mission of the Alaska Mental Health Board is to ensure an integrated, comprehensive mental health program for persons with mental disorders in Alaska. The Board is the state planning and coordinating agency for purposes of federal and state laws relating to the mental health program of the state.

Component Services Provided

By state statute, the Board is required to accomplish the following:

- Prepare and maintain a comprehensive plan for state mental health services. This plan is known as A Shared Vision II.
- Propose an annual implementation plan for A Shared Vision II based on findings from the evaluation of existing programs.
- Provide a public forum to discuss mental health service issues for which the board has planning and coordinating responsibility.
- Advocate for the needs of Alaskans with mental disorders before the governor, executive agencies, the legislature and the public.
- Advise the legislature, the governor, the Alaska Mental Health Trust Authority, and other state agencies in matters affecting Alaskans with mental disorders. This includes, but is not limited to:
 - developing necessary services for diagnosis, treatment and rehabilitation;
 - evaluating the effectiveness of programs in the states providing diagnosis, treatment and rehabilitation;
 - legal processes that affect screening, diagnosis, treatment and rehabilitation.
- Provide to the Alaska Mental Health Trust Authority recommendations concerning the integrated, comprehensive mental health program for persons with mental disorders and the use of money in the mental health trust income account.
- Report periodically regarding its planning, evaluation, advocacy and other activities.

Component Goals and Strategies

The Board continues to identify four critical need areas in which to focus its planning, advocacy and evaluation efforts. Major goals and strategies for FY2001 in these critical need areas include the following:

1. **Community Services to Support a Smaller Alaska Psychiatric Institute (API):** Participate on the Community Mental Health/API 2000 Policy Committee which is overseeing: securing a new facility for API; implementing community-based services to allow API to function at a lower census level; and quality assurance improvements at API; and implementing bore quality assurance improvements at API.
2. **Decriminalization of Mental Illness:** Advocate for community based alternatives to incarceration of persons with mental illness including: continuation of the "mental health court" and jail diversion projects in Anchorage, and structured housing and support services for people with co-occurring mental and substance abuse disorders.
3. **Rural Services:** Improve rural mental health services by leading initiatives in such areas as enhanced clinical consultation, use of telepsychiatry, integrated mental health/substance abuse interventions and increased training opportunities.
4. **Children's Services:** Staff and participate in several efforts to improve children's mental health services including: enhanced residential treatment services; increased collaboration between statewide education and mental health system; and developing a more "unified system of care" for children with mental health needs.

Key Component Issues for FY2001 – 2002

The Board is taking a leadership role in advancing the following initiatives in FY 2001 and FY 2002.

1. Performance Measures Project: Continue leadership of a statewide project to develop common performance measures for the state's public mental health system.
2. Mental Health Parity: Continue to advocate for state legislation to ensure equal treatment in health insurance policies for persons with mental and substance abuse disorders, in comparison to coverage for physical disorders.
3. Quality Assurance: Participate in several activities designed to evaluate and improve the quality of services in both outpatient and inpatient settings.
4. Consumer Leadership: Advocate for a more consumer-centered mental health system including promoting greater consumer involvement in grantee operations and development of a statewide consumer grievance redress system.
5. Basic Living Needs: Advocate for programs and services that help mental health consumers meet their basic living needs in areas such as employment, housing and economic security.

Major Component Accomplishments for FY2000

Examples of the Board's major accomplishments for FY 2000 include the following:

1. Performance Measures: Published a report recommending a set of common performance measures for community mental health programs and initiated a broad-based process involving consumers, providers and State representatives to begin development of an operational framework for the performance measure system.
2. Rural Service Enhancements: Sponsored the first-ever rural mental health conference and completed a review that will lead to increased consultation and support services to rural communities.
3. Integrated Mental Health and Substance Abuse Services: Initiated a joint steering committee process with the Advisory Board on Alcoholism and Drug Abuse to increase collaboration in serving persons with co-occurring mental health and substance abuse disorders.
4. Emergency Services: Helped spearhead an effort to review and enhance emergency mental health services in Fairbanks and to develop statewide standards for community mental health grantee emergency services.
5. Community-Based Quality Assurance: Critiqued the first year's operation of the newly formed Integrated Quality Assurance system for community mental health programs and advocated for several improvements in this system.
6. Inpatient Mental Health Standards: Took a lead role in developing consumer-based quality assurance standards for hospitals providing designated evaluation and treatment services to person with mental illness.
7. Joint Committee on Mental Health and Aging: Collaborated with the Alaska Commission on Aging to form a joint committee on mental health and aging. This committee will advocate for a more intensive focus on addressing the mental health needs of the elderly.
8. Mental Health Court: Supported and helped guide the creation of the Mental Health Court in Anchorage, designed to divert mentally ill misdemeanants from incarceration to community-based treatment and support services.
9. Basic Supports Coalition: Played a key role in the establishment of the Basic Supports Coalition, a group of over 120 organizations throughout the state working to preserve essential state support programs for disabled and vulnerable Alaskans.
10. Public Education Campaign: Building on the themes of the December, 1999 U. S. Surgeon General's Report on Mental Health, launched a public awareness campaign designed to educate policy makers, business leaders and the general public about critical issues pertaining to mental health and mental illness.

Statutory and Regulatory Authority

AS 47.30.661-666 Welfare, Social Services & Institutions, Mental Health, Alaska Mental Health Board

Key Performance Measures for FY2002

Measure: Hold at least four Mental Health Board meetings and at least 4 other public forums on mental health issues throughout the year.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, the Board held four in-person Board meetings and four other public forums through the Mental Health Parity Task Force.

Measure: To define and collect statewide data on at least ten common performance measures for community based mental health services.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, we have defined more than 10 common performance measures for community based mental health services.

Measure: To develop at least six major publications or reports for consideration by policy makers regarding elements of public mental health services and funding.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, the Board wrote or contracted to have written six reports or publications.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> Hold at least four Mental Health Board meetings and at least 4 other public forums on mental health issues throughout the year. 		X			
<ul style="list-style-type: none"> To define and collect statewide data on at least ten common performance measures for community based mental health services. 		X			
<ul style="list-style-type: none"> To develop at least six major publications or reports for consideration by policy makers regarding elements of public mental health services and funding. 		X			

Alaska Mental Health Board
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	335.4	364.2	363.7
72000 Travel	62.0	69.0	69.0
73000 Contractual	63.4	82.4	97.4
74000 Supplies	4.3	4.3	4.3
75000 Equipment	0.6	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	465.7	519.9	534.4
Funding Sources:			
1007 Inter-Agency Receipts	136.8	20.5	20.5
1037 General Fund / Mental Health	328.9	346.1	402.9
1092 Mental Health Trust Authority Authorized Receipts	0.0	153.3	111.0
Funding Totals	465.7	519.9	534.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	136.8	20.5	20.0	20.5	20.0
Mental Health Trust Authority Auth.Rec.	51410	0.0	153.3	153.3	111.0	42.0
Restricted Total		136.8	173.8	173.3	131.5	62.0
Total Estimated Revenues		136.8	173.8	173.3	131.5	62.0

Alaska Mental Health Board

Proposed Changes in Levels of Service for FY2002

In FY 2002, there is a increase in the Board's component for Alaska Mental Health Trust Authority projects. Projects will enhance rural planning and program development and enable the board to continue advocacy efforts integral to Trust litigation.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	346.1	0.0	173.8	519.9
Adjustments which will continue current level of service:				
-AMHB Statewide Children's Coordinator	56.5	0.0	-56.5	0.0
-Year 2 Labor Costs - Net Change from FY2001	0.3	0.0	-0.8	-0.5
Proposed budget increases:				
-Alaska Mental Health Trust Authority Projects for the AMHB	0.0	0.0	15.0	15.0
FY2002 Governor	402.9	0.0	131.5	534.4

Alaska Mental Health Board

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	4	5	Annual Salaries	275,854
Part-time	1	0	COLA	4,863
Nonpermanent	0	0	Premium Pay	2,802
			Annual Benefits	88,590
			<i>Less 2.26% Vacancy Factor</i>	(8,409)
			Lump Sum Premium Pay	0
Totals	5	5	Total Personal Services	363,700

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Coordinator	0	1	0	0	1
Exec Dir AK Men Hthl Bd	0	0	1	0	1
Hlth & Soc Svcs Plnr II	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Totals	0	1	4	0	5

Component: Governor's Council on Disabilities and Special Education

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

Create change that improves the independence, productivity, and inclusion in the community for people with developmental disabilities and students in special education.

Component Services Provided

Collect and analyze data about people with developmental disabilities and students in special education.

Review other state's programs.

Evaluate programs for consumer satisfaction, efficiency, and effectiveness.

Solicit public comments about public policy and state funded programs.

Submit findings and recommendations to policymakers in administration and legislature.

Assist the public to speak on their own behalf in the development of regulation and legislation.

Component Goals and Strategies

Gain information through research and public input.

Coordinate services by conducting interagency task forces that produce joint action plans.

Improve leadership among people with disabilities and their families through training.

Change attitudes about people with disabilities through public awareness and education.

Improve the quality of services by evaluating programs and measuring consumer satisfaction.

Increase services by identifying efficiencies and writing grants.

Key Component Issues for FY2001 – 2002

Implement the activities listed in the 5-year strategic plan for the delivery of Developmental Disability (DD) services.

Make DD Services work better for Alaskans by addressing the issues of the Waitlist and the Home and Community Based Waivers.

Enhance teacher preparation and paraprofessional development in elementary and secondary education and early intervention through collaboration with DEED and the State Improvement Grant.

Explore the use of the IEP team, and Employability Standards and the Alternate Assessments as methods to recognize the achievements of students in Special Education.

Promote a smooth transition of students between early intervention and preschool and for students leaving special education into adult services and employment.

Develop incentives for people with disabilities to find and keep jobs.

Improve the delivery of Personal Assistance Services.

Support a program of Donated Dental Care.

Participate in developing the AHFC 5 year Strategic Housing Plan.

Major Component Accomplishments for FY2000

Produced a public policy study of the barriers to employment of Alaskans with Disabilities.

Created economic development programs for people with disabilities in Juneau and Kodiak.

Initiated an employment incentive project in Juneau that created 23 new jobs.

Provided self-employment training for 10 people to own and operate their own businesses.

Compiled and distributed a report on the status of Alaskans with Developmental Disabilities with Budget Recommendations for the Alaska Mental Health Trust Authority.

Completed a study of the Developmental Disability Home and Community Waiver System.

Collaborated with UAA/UAP to create a program to train people in grants management and writing.

Coordinated the delivery of a course in personnel preparation called Earn as You Learn for DD programs through UAA.

Facilitated the submission of a proposal for federal funds to coordinate training for family support services.

Completed a survey of special education in Youth Correctional Facilities.

Collaborated with the Department of Corrections in developing a plan for DD inmates.

Participated in conducting Quality Assurance Reviews of DD and infant learning programs.

Facilitated a Donated Dental Care program that earned \$60,000 in treatment for 35 people.

Reported the Salary and Retention issues of direct care staff in DD and Infant Learning programs.

Statutory and Regulatory Authority

PL 104-183	Public Law
PL 102-569	Public Law
PL 105-17 Part B and C	Public Law
AS 14.30.231	Education, Libraries, and Museums, Advisory Committee
AS 14.30.610	Education, Libraries, and Museums, Governing Board
AS 47.80.030-090	Welfare, Social Services & Institutions, Persons with Disabilities

Key Performance Measures for FY2002

Measure: The Council will expand community participation by 100% and expand to 8 communities.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, the Council conducted 10 community forums in which over 150 people participated.

Measure: The Council will coordinate the preparation of 3 public documents that describe the use of the Developmentally Disabled Waitlist and Developmentally Disabled Home and Community Based Waivers.

(Not yet addressed by Legislature.)

Current Status:

In FY 2000, we prepared 3 public documents to inform the public about the Waitlist procedures or the use of Developmentally Disabled Waiver. As a result the Legislature passed HB 346 which requires routine reports from the department on the waitlist.

Measure: Sixteen people will enroll in the Business Development Training and twelve will submit business plan.

(Not yet addressed by Legislature.)

Current Status:

In FY 2000, ten people participated in the Council supported Business Development Training. Of these, six completed the course and submitted business feasibility plans.

Measure: Implementing the Council's Employment Incentives project, there will be a 300% increase in the use of Plan to Achieve Self-Sufficiency (PASS Plans).

(Not yet addressed by Legislature.)

Current Status:

In FY 2000, only 3 new people had plans to achieve self support (PASS Plans).

Measure: The Council will produce 13 public policy documents to assist policymakers in making changes that improves the lives of people with disabilities.

(Not yet addressed by Legislature.)

Current Status:

In FY 2000, the Council developed 15 public policy documents used as tools for change in five life domains of employment, community living, health, education and housing.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> The Council will expand community participation by 100% and expand to 8 communities. 		X			
<ul style="list-style-type: none"> The Council will coordinate the preparation of 3 public documents that describe the use of the Developmentally Disabled Waitlist and Developmentally Disabled Home and Community Based Waivers. 		X			

Component — Governor's Council on Disabilities and Special Education

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Sixteen people will enroll in the Business Development Training and twelve will submit business plan. • Implementing the Council's Employment Incentives project, there will be a 300% increase in the use of Plan to Achieve Self-Sufficiency (PASS Plans). • The Council will produce 13 public policy documents to assist policymakers in making changes that improves the lives of people with disabilities. 		X			

**Governor's Council on Disabilities and Special Education
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	327.5	330.8	407.7
72000 Travel	138.6	174.3	189.3
73000 Contractual	952.7	1,240.2	1,655.0
74000 Supplies	12.4	10.0	13.0
75000 Equipment	39.9	5.0	5.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,471.1	1,760.3	2,270.0
Funding Sources:			
1002 Federal Receipts	863.9	1,085.8	1,635.3
1007 Inter-Agency Receipts	152.6	169.5	169.7
1037 General Fund / Mental Health	10.0	10.0	10.0
1092 Mental Health Trust Authority Authorized Receipts	444.6	495.0	455.0
Funding Totals	1,471.1	1,760.3	2,270.0

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
General Fund Mental Health	68520	0.0	10.0	10.0	10.0	10.0
Unrestricted Total		0.0	10.0	10.0	10.0	10.0
Restricted Revenues						
Federal Receipts	51010	863.9	1,085.8	1,078.8	1,635.3	971.5
Interagency Receipts	51015	152.6	169.5	168.0	169.7	168.0
Mental Health Trust Authority Auth.Rec.	51410	444.6	495.0	495.0	455.0	500.0
Restricted Total		1,461.1	1,750.3	1,741.8	2,260.0	1,639.5
Total Estimated Revenues		1,461.1	1,760.3	1,751.8	2,270.0	1,649.5

Governor's Council on Disabilities and Special Education

Proposed Changes in Levels of Service for FY2002

In FY 2002, there will be a increase to the Board's federal authority for the Infastructure Project. This is a federal grant and the grant was increased for FY 2001.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	10.0	1,085.8	664.5	1,760.3
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	0.0	-0.5	0.2	-0.3
Proposed budget decreases:				
-Alaska Mental Health Trust Authority Projects for GCDSSED	0.0	0.0	-40.0	-40.0
Proposed budget increases:				
-GCSED Infastructure Federal Grant	0.0	550.0	0.0	550.0
FY2002 Governor	10.0	1,635.3	624.7	2,270.0

Governor's Council on Disabilities and Special Education

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	5	6	Annual Salaries	306,670
Part-time	0	0	COLA	4,743
Nonpermanent	1	2	Premium Pay	2,527
			Annual Benefits	106,376
			<i>Less 3.00% Vacancy Factor</i>	(12,609)
			Lump Sum Premium Pay	0
Totals	6	8	Total Personal Services	407,707

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	1	0	0	0	1
College Intern I	1	0	0	0	1
Ex Dir Gov Coun Dis/Spec Ed	1	0	0	0	1
Graduate Intern I	1	0	0	0	1
Hlth & Soc Svcs Plnr II	1	0	0	0	1
Project Asst	1	0	0	0	1
Project Coord	2	0	0	0	2
Totals	8	0	0	0	8

Component: Advisory Board on Alcoholism and Drug Abuse

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

In partnership with the public, the Advisory Board on Alcoholism and Drug Abuse plans and advocates for policies, programs and services that help Alaskans achieve healthy and productive lives, free from the devastating effects of the abuse of alcohol and other substances.

(adopted August 1997)

Component Services Provided

- Provide adequate staff support and facilities to maximize the effectiveness of the Advisory Board's work.
- Provide advice to the Governor, Legislature and Departments within the State on alcohol and drug related issues.
- Monitor the effectiveness of state-funded programs and services.
- Develop and monitor a strategic plan for delivery of alcohol and drug abuse services.
- Assist the Department of Health and Social Services in the development of the Comprehensive Integrated Mental Health Plan.
- Provide recommendations for service delivery and funding to beneficiaries of the Alaska Mental Health Trust.
- Collect and analyze data on the negative impacts of substance abuse that affect Alaskans and their communities.
- Advocate for the development of community-based solutions to these problems.

Component Goals and Strategies

1. The Advisory Board will continue to educate and advocate for implementation of the strategies identified in "Results Within Our Reach." The overarching emphasis is on partnership development across agencies, communities, nonprofit organizations and the private sector.
2. The Advisory Board will continue to pursue its legislative agenda, emphasizing the benefits and cost effectiveness of early intervention, treatment and post-treatment support activities.
3. The Advisory Board will seek to respond, within its available resources, to a recommendation from the Legislative Audit Agency that the Advisory Board assume responsibility for the data gathering and analysis of all funds expended on alcohol and other drug services statewide.
4. Standing Committee work plans emphasize efforts to achieve the most effective range of services for all Alaskans, including the special needs of beneficiaries of the Alaska Mental Health Trust Authority.
5. A statewide initiative to raise community and provider awareness of the appropriate use of involuntary commitment to forestall life-threatening health complications or death.

Key Component Issues for FY2001 – 2002

1. The alignment of service delivery to high-risk target populations with the capacity necessary to provide treatment. This requires wait list reduction for chronic alcoholics with psychosis, women with children, and youth and adolescents both in and out of the juvenile justice system.
2. Accountability and treatment efficacy that is driven by adequate funding to achieve desired results. This includes timely entry to treatment and sustained post treatment support including transitional housing when required.

Major Component Accomplishments for FY2000

1. The Advisory Board continues its efforts to raise community awareness and build coalitions to address substance abuse problems. These efforts have been supported by requests for and distribution of nearly 4,000 state plans, annual reports and the Board's new guide for involuntary commitments of seriously impaired individuals.
2. The Advisory Board's rural outreach initiative resulted in a full board meeting in Kotzebue with a side trip to Selawik courtesy of NANA. The initiative also included teams of board members and staff visiting community leaders in Barrow and Nome in April 2000. In a four-day period the teams heard from more than 150 elders, community leaders, service providers, clients and other interested parties about the negative consequences of alcohol and other drugs in their communities.
3. The Advisory Board significantly changed its process for making funding recommendations to the AMHTA and the Governor to reflect the major themes and concerns expressed in visits to rural communities as well as the strategies in the state plan for services.
4. The Advisory Board's commitment to expanding treatment services within the Department of Corrections system was supported by passage of HCR 11 which calls for assessment and treatment of inmates with chemical dependency before their release back to the community.
5. The Advisory Board continues to value collaboration in meeting the needs of beneficiaries with co-occurring disorders or disabilities. 38% of the Board's funding recommendations included collaboration with other beneficiary boards.

Statutory and Regulatory Authority

AS 47.30.470-500
AS 47.37

Welfare, Social Services & Institutions, Mental Health
Welfare, Social Services & Institutions, Uniform Alcoholism and Intoxication Treatment Act

Key Performance Measures for FY2002

Measure: Continued distribution of State Plan for Service Delivery

(Not yet addressed by Legislature.)

Current Status:

The Advisory Board continues to distribute the State Plan for Service Delivery to stakeholders throughout Alaska, using a variety of distribution channels including exhibits at conferences and the identification of new stakeholders in addressing Alaska's number one health problem.

Measure: Incorporation of State Plan desired results into Advisory Board legislative agenda.

(Not yet addressed by Legislature.)

Current Status:

The Advisory Board tracked 48 pieces of legislation basing its level of support or opposition on the guiding principles and strategies of the State Plan for Service Delivery.

Measure: Fulfillment of Board's statutory responsibility to monitor and review evaluation of state-funded programs.

(Not yet addressed by Legislature.)

Current Status:

In the Advisory Board quarterly meetings the status of program monitoring and evaluation was reviewed for all state funded programs visited by Division of Alcoholism and Drug Abuse site surveyors.

Measure: Use of State Plan indicators, strategies and performances measures as criteria for funding recommendations.

(Not yet addressed by Legislature.)

Current Status:

Division RFP's and the Advisory Board's funding recommendations required alignment with the State Plan. These core principles for sound service delivery were fundamental to evaluation and decision making for both the Division and the Advisory Board.

Measure: Emphasis on collaboration and leveraging funding in requests forwarded to the AMHTA.

(Not yet addressed by Legislature.)

Current Status:

38% of the requests made to the Alaska Mental Health Trust Authority for FY2002 and FY2003 involved collaboration with other AMHTA advocacy boards/commission.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Continued distribution of State Plan for Service Delivery		X			
• Incorporation of State Plan desired results into Advisory Board legislative agenda.		X			
• Fulfillment of Board's statutory responsibility to monitor and review evaluation of state-funded programs.		X			
• Use of State Plan indicators, strategies and performances measures as criteria for funding recommendations.		X			
• Emphasis on collaboration and leveraging funding in requests forwarded to the AMHTA.		X			

**Advisory Board on Alcoholism and Drug Abuse
Component Financial Summary**

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	185.1	195.0	195.1
72000 Travel	55.0	61.4	61.4
73000 Contractual	27.2	57.0	56.2
74000 Supplies	9.1	6.5	6.5
75000 Equipment	6.1	6.0	6.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	282.5	325.9	325.2
Funding Sources:			
1037 General Fund / Mental Health	282.5	292.9	292.2
1092 Mental Health Trust Authority Authorized Receipts	0.0	33.0	33.0
Funding Totals	282.5	325.9	325.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Mental Health Trust Authority Auth.Rec.	51410	0.0	33.0	33.0	33.0	50.0
Restricted Total		0.0	33.0	33.0	33.0	50.0
Total Estimated Revenues		0.0	33.0	33.0	33.0	50.0

Advisory Board on Alcoholism and Drug Abuse

Proposed Changes in Levels of Service for FY2002

In FY 2002, there will be a increase to the Advisory Board's components for Alaska Mental Health Trust Authority projects. Projects will enhance rural planning and program development and enable the board to continue advocacy efforts integral to Trust litigation.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	292.9	0.0	33.0	325.9
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-0.7	0.0	0.0	-0.7
FY2002 Governor	292.2	0.0	33.0	325.2

Advisory Board on Alcoholism and Drug Abuse

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	3	3	Annual Salaries	147,190
Part-time	0	0	COLA	2,484
Nonpermanent	0	0	Premium Pay	1,401
			Annual Benefits	50,055
			<i>Less 3.00% Vacancy Factor</i>	(6,034)
			Lump Sum Premium Pay	0
Totals	3	3	Total Personal Services	195,096

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Exec Dir Gab/ADA	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Totals	0	0	3	0	3

Administrative Services Budget Request Unit

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BRU Mission

To provide quality administrative services that support the Department's programs.

BRU Services Provided

The Commissioner's Office component funds upper level management and policy development for the entire department.

The Personnel and Payroll component funds personnel/payroll activities including labor relations, classification, worker safety, application examining and Workplace Alaska.

The Administrative Support Services component funds an array of financial, budget, procurement, grant administration, data warehousing and information services.

The Health Planning and Facilities Management component includes the administration of the Alaska Certificate of Need Program, Comprehensive Integrated Mental Health Plan, data integration, and provides management of the department's capital program.

The Audit component's focus is to conduct audits on department programs and grantees, special reviews, state and federal single audit reviews and provide assistance to Legislative Audit during the Federal single audit of the Department.

The COMPASS Community Grants component improves the safety and well-being of children and families and ensure that all children are ready to start school and be successful.

BRU Goals and Strategies

To assist the Department in meeting its fiduciary responsibilities.

To provide efficient and effective service.

To coordinate administrative processes and the efficient use of state resources.

Identify and implement innovative management initiatives.

Key BRU Issues for FY2001 – 2002

A key issue for the Division as well as the Department of Health & Social Services is the significant problems we are facing with recruiting and retaining qualified staff. More and more, the department is finding it impossible to recruit people into positions in State government. Most state positions are not keeping up with inflation in wages, benefits and flexibility, making state positions less desirable and harder to fill.

Other Key Issues are:

General fund resources in the division have declined, increasing reliance on other funds through the department's cost allocation plan, making fiscal management more complex.

Central services have been delegated, requiring more work in the Division of Administrative Services and all divisions in DHSS.

Federal requirements for reports and compliance continue to increase.

The complexity of rules, regulations, and policies that the department must comply with has increased in all areas (i.e., Family Medical Leave, Americans with Disabilities Act, etc.)

Major BRU Accomplishments for FY2000

- *Continued performance measure process for the Division of Administrative Services.
- *Met all critical accounting and budget deadlines on time.
- *Continued training programs for procurement, personnel and labor relations.
- *Completed several construction projects on time and within budget (MYC - 30 bed, Mat-Su)
- *Initiated grant reform project to streamline process for all DHSS grantees.
- *Successfully transferred management of Designated BRU's to Division of Administrative Services.
- *Initiated update to Certificate of Need regulations to implement provisions of law.
- *Successfully coordinated and completed Y2K preparation for the entire department.
- *Completed on-line procurement system.
- *Completed building construction audits on all DHSS owned facilities and established Maintenance Management System.

Key Performance Measures for FY2002

Measure: Cost of Administrative Services Personnel vs. Cost of Department Personnel.
(Added by Legislature in FY2000 version.)

Current Status:

	Includes Comm. Office	Total	
	DAS	DEPARTMENT	PERCENTAGE
FY00	\$5,207.2	\$121,253.9	4.29%

Measure: Percentage of Grievance/Complaints Resolved without Arbitration.
(Added by Legislature in FY2000 version.)

Current Status:

FY 2000 = 98%

Measure: Average Number of Days for Vendor Payments.
(Added by Legislature in FY2000 version.)

Current Status:

FY 2000 = 34 days

Measure: Percentage of Audit Exceptions that are resolved.
(Added by Legislature in FY2000 version.)

Current Status:

In FY99 a total of 8 audit exceptions occurred, all of which will be resolved by 6/30/2001.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Cost of Administrative Services Personnel vs. Cost of Department Personnel.		X			
• Percentage of Grievance/Complaints Resolved without Arbitration		X			
• Average Number of Days for Vendor Payments		X			
• Percentage of Audit Exceptions that are resolved.		X			

Administrative Services
BRU Financial Summary by Component

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
Commissioner's Office	316.5	313.2	386.3	1,016.0	316.7	348.6	266.0	931.3	316.8	349.1	266.0	931.9
Personnel and Payroll	677.9	243.1	319.9	1,240.9	737.0	224.9	353.8	1,315.7	734.6	277.8	352.3	1,364.7
Administrative Support Svcs	2,030.7	1,007.8	381.3	3,419.8	2,026.8	1,195.4	278.0	3,500.2	1,988.3	1,222.4	391.2	3,601.9
Health Plan. & Facilities Mgmt	192.4	104.7	594.7	891.8	182.5	93.8	722.7	999.0	217.1	118.4	721.7	1,057.2
Audit	0.0	0.0	0.0	0.0	106.4	0.0	95.2	201.6	106.3	63.7	107.5	277.5
COMPASS Community Grants	25.0	0.0	0.0	25.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Totals	3,242.5	1,668.8	1,682.2	6,593.5	3,369.4	1,862.7	1,715.7	6,947.8	3,363.1	2,031.4	1,838.7	7,233.2

Administrative Services**Proposed Changes in Levels of Service for FY2002**

In FY2002 we plan to add a Data Processing Manager II to coordinate the department's large information systems projects, insuring that they are all integrated and linkages are available. Currently there are 4 projects (MMIS, DD, DFYS, OCRA, and DJJ-JOMIS) that have been funded. The source is CIP Receipts.

Administrative Services**Summary of BRU Budget Changes by Component****From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	3,369.4	1,862.7	1,715.7	6,947.8
Adjustments which will continue current level of service:				
-Commissioner's Office	0.1	0.5	0.0	0.6
-Personnel and Payroll	-2.4	-1.1	-1.5	-5.0
-Administrative Support Svcs	-38.5	-91.2	0.8	-128.9
-Health Plan. & Facilities Mgmt	34.6	24.6	-1.0	58.2
-Audit	-0.1	63.7	-0.2	63.4
Proposed budget increases:				
-Personnel and Payroll	0.0	54.0	0.0	54.0
-Administrative Support Svcs	0.0	118.2	112.4	230.6
-Audit	0.0	0.0	12.5	12.5
FY2002 Governor	3,363.1	2,031.4	1,838.7	7,233.2

Component: Commissioner's Office

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

The mission of the Office of the Commissioner is to promote and protect the health and well-being of Alaskans by investing in families and communities.

Component Services Provided

The Office of the Commissioner advises and represents the Governor and provides executive leadership for the principal department of state government on health and social services issues. The Office reviews and approves all department policies, regulations, significant contract or grant awards and appeals, budgets, fiscal notes and various other financial documents. The Office initiates and participates in numerous public forums, responds to inquiries from the press and general public, and provides direct testimony as well as coordinates the testimony of other department employees before the Legislature on health and social services matters.

Component Goals and Strategies

To provide policy analysis and recommendations to the Governor and Legislature which promote the health and well being of all Alaskans. To ensure that health and social services policies are implemented by providing for the effective management of the department, taking a leadership role in fostering public education and debate, and providing for the coordination of policy and service delivery between federal, state, local and private agencies.

Long Term Goals:

- Focus on helping children and families stay healthy and safe.
- Increase the incentives and opportunities for communities to collaborate with the department to improve results for children and families.
- Help Alaskans live healthier and have access to basic health care, resulting in reduced chronic and preventable disease.
- Assist Alaskans, who are elderly or have disabilities, to live with independence and remain economically secure.
- Move more Alaskans from welfare into jobs so they can support their families.
- Establish an integrated statewide system for data collection, analysis, and reporting which improves services to Alaskans.

Key Component Issues for FY2001 – 2002

Child Abuse and Neglect:

- Continue to increase the availability of out of home placements to meet the needs of children in state custody;
- Implement Title IV-E pass-through funding support for Tribal organizations; and
- Continue efforts to achieve permanent homes for children in state custody.

Welfare Reform: Refine strategies to address welfare reform 60-month time limit.

Early Childhood Development:

- In collaboration with the Department of Education and Early Development increase the capacity to serve young children through the Building Blocks initiative;
- Develop and implement behavioral health programs for infants and toddlers; and
- Complete implementation of the three-year plan for improving services to special needs children.

Fetal Alcohol Syndrome/Fetal Alcohol Effects: Continue development of a system for surveillance, screening, diagnosis, prevention and treatment of Fetal Alcohol Syndrome and Fetal Alcohol Effect.

State Health Plan: Develop a State Health Plan incorporating products from and coordinating with the Public Health Improvement Plan and the Healthy Alaskans 2010 health status assessment effort.

Rural Health: Assist in the development of Alaska's rural health infrastructure to improve access to health care.

Immunizations: Implement strategies to reach full immunization of 90% of all two-year olds.

Comprehensive Integrated Mental Health Plan: Refine the comprehensive plan working with all stakeholders.

Adults with Disabilities: Promote work and self-sufficiency for adults with disabilities.

API/Community Solutions: Replace aging API facility, improve the quality of treatment services at API and strengthen community services to prevent inappropriate hospitalization.

Help Vulnerable Adults Stay Safe: Improve the system for licensing adult residential facilities and monitoring the safety of residents.

Implement the new law authorizing Native Temporary Assistance programs.

Maximize Federal Medicaid Revenue: Continue collaboration with the Yukon-Kuskokwim Health Corporation managed care program, and others, on service integration projects to maximize Medicaid revenues.

Reform Department grant process: Review and revise the framework and processes for awarding grants to improve planning, foster service integration, improve and increase accountability of service outcomes and streamline administrative processes.

Intergration of mental health and alcohol services: Develop mechanisms to overcome barriers to integrating mental health and alcohol services at the community level.

Training/Staff Development: Identify and develop effective mechanisms for developing the skills of mid-managers within the department to assure continuity of effective management in the face of the projected loss of long-time managers.

Basis Infrastructure: Systematically identify and remedy deficiencies in basic infrastructure, primarily building maintenance, that impede employee efficiency and effectiveness.

Document/Celebrate Success: Identify, document and communicate internal department successes highlighting staff contributions essential to the success.

Communication Improvements: Improve processes for internal and external communication with a primary focus on expansion and improvement of the department's web site.

Major Component Accomplishments for FY2000

Continued reform of the child welfare system by improving the response to reports of harm; enhancing employee performance through better training; recruiting additional foster parents and funding additional residential placements; and placing additional children in permanent homes.

Continued development of new management information systems to support the child protection, juvenile justice and medical assistance programs.

Consistent with the 6-year master plan for youth facilities opened a new youth facility in the Mat-Su Borough and a new unit a McLaughlin Youth Center, broke ground for a new Ketchikan facility and continued planning for a facility on the Kenai Peninsula.

Working on the new state-of-the-art Public Health Laboratory in Anchorage which will significantly improve the State's ability to respond to and control the outbreak and control of disease.

Statutory and Regulatory Authority

AS 18 Health, Safety and Housing
 AS 47.05 Welfare, Social Services and Institutions, Administration of Welfare, Social Services and Institutions

Key Performance Measures for FY2002

Measure: Provide timely review and adoption of regulations.
(Not yet addressed by Legislature.)

Current Status:
 Regulations filed with Lieutenant Governor within the time frame specified by law.

Measure: Provide for the timely notification of approval or denial of appeals by grantees and contractors.
(Not yet addressed by Legislature.)

Current Status:
 Notification provided within the time frame specified by law.

Measure: To improve program coordination and consistency between Department divisions and between other state agencies.
(Not yet addressed by Legislature.)

Current Status:
 Participate in Children's Cabinet and Welfare Reform Task Team. Form workgroups to accomplish department objectives.

Measure: To effectively communicate information on Department policies and programs to the general public.
(Not yet addressed by Legislature.)

Current Status:
 Timely response to Governor's Office constituent inquiries through the Correspondence Tracking System. Increase timeliness of direct response to correspondence through monitoring of internal log.

Measure: Percent of Divisions that meet assigned performance measures.
(Added by Legislature in FY2000 version.)

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Provide for the timely review and adoption of Department regulations.		X			
• Provide for the timely notification of approval or denial of appeals by grantees and contractors.		X			
• To improve program coordination and consistency between Department divisions and between other state agencies.		X			

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> To effectively communicate information on Department policies and programs to the general public. Percent of divisions that meet assigned performance measures. 		X	X		

Commissioner's Office
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	820.9	814.7	815.3
72000 Travel	82.1	77.2	77.2
73000 Contractual	85.0	31.0	31.0
74000 Supplies	18.4	8.4	8.4
75000 Equipment	9.6	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,016.0	931.3	931.9
Funding Sources:			
1002 Federal Receipts	313.2	348.6	349.1
1003 General Fund Match	228.2	229.7	234.6
1004 General Fund Receipts	88.3	82.1	82.2
1007 Inter-Agency Receipts	381.9	261.5	261.5
1053 Investment Loss Trust Fund	0.0	4.9	0.0
1061 Capital Improvement Project Receipts	4.4	4.5	4.5
Funding Totals	1,016.0	931.3	931.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	313.2	348.6	348.6	349.1	350.0
Interagency Receipts	51015	381.9	261.5	217.0	261.5	263.5
Capital Improvement Project Receipts	51200	4.4	4.5	4.5	4.5	4.5
Restricted Total		699.5	614.6	570.1	615.1	618.0
Total Estimated Revenues		699.5	614.6	570.1	615.1	618.0

Commissioner's Office**Proposed Changes in Levels of Service for FY2002**

There are no changes from FY01 to FY02.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	316.7	348.6	266.0	931.3
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	0.1	0.5	0.0	0.6
FY2002 Governor	316.8	349.1	266.0	931.9

Commissioner's Office
Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	10	10	Annual Salaries	634,992
Part-time	0	0	COLA	13,511
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	192,012
			<i>Less 3.00% Vacancy Factor</i>	(25,215)
			Lump Sum Premium Pay	0
Totals	10	10	Total Personal Services	815,300

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Assistant	0	0	1	0	1
Commissioner	0	0	1	0	1
Dep Commissioner	0	0	2	0	2
Exec Secretary III	0	0	1	0	1
Information Officer I	1	0	0	0	1
Secretary	0	0	1	0	1
Spec Asst To The Comm II	0	0	2	0	2
Special Staff Assistant	1	0	0	0	1
Totals	2	0	8	0	10

Component: Personnel and Payroll

Contact: Janet Clarke, Director, Administrative Services

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Component Mission

To provide quality administrative services that support the department's programs.

Component Services Provided

Provide one-on-one counseling or training in labor relations matters, discrimination policy, entitlement programs, timely and accurate processing of payroll documents, provide classification support to divisions, provide interpretation on bargaining unit contracts, personnel rules, statutes, etc., to directors and supervisors. The Risk Management unit has broad responsibilities for the promotion and implementation of work site safety and loss control programs for the purpose of reducing worker's compensation insurance costs. Significant one-on-one training on safe work practices by employees has continued to be the focus this past year as well as continued investigation of workplace accidents, unsafe or unhealthy working conditions and comprehensive review of worker's compensation claims. The Examining unit in conjunction with Personnel & Payroll unit have continued its work on the state hiring system - Workplace Alaska and responsibility for assisting hiring managers to ensure legal hires are made through appropriate consideration of all applicants. The Labor Relations unit has responsibilities to provide advice, guidance and training programs to limit liability by supporting DHSS managers and educating them on dispute resolutions and Ethics Law. The Classification unit provides a comprehensive program of position review, analysis, classification, and status changes, which is both responsive to management's needs, and consistent with classification and pay equity principles as delegated under AS 39.25.153. The Fair Employment Practice unit has responsibilities for educating supervisors on employment discrimination policy (Administrative Orders #75 & #81), Executive Branch 1998 Affirmative Action Plan and entitlements under Americans with Disabilities Act and Family Medical Leave.

Component Goals and Strategies

To provide quality human resource services by making sound decisions in accordance with rules, regulations, and statutes. Interpret laws and bargaining unit agreements governing activities in the area of personnel and payroll, labor relations, risk management, equal employment opportunity, affirmative action, classification, recruitment and examining. To provide a pool of qualified candidates for filling vacant positions. To ensure legal hires and to compensate employees timely and accurately. To promote affirmative action and better education on discrimination policy and entitlements under Family Medical Leave Act and Americans with Disability Act. To ensure timely classification actions for filling positions and/or promotion of the incumbent.

Key Component Issues for FY2001 – 2002

Adjusting to increased delegated authority from Department of Administration, Division of Personnel. Also, the entire Department is having problems recruiting and retaining qualified staff.

Major Component Accomplishments for FY2000

1. Updated job class designation Class 1 and 2 employees and sent to Division of Personnel.
2. Finalized the department's Equal Employment Opportunity Plan (Short Form) and received approval from the Office of Justice Programs, U.S. Department of Justice.
3. Specialized Non-Violent Crises Intervention training continued with Division Certified Instructors participating.
4. Form on Website provide easy access and retrieval for use by Department employees.

5. Trained managers and did timely approvals of hire requests as well as job offers.
6. Developed payroll process training using Power Point presentation for DHSS Personnel and Payroll contacts in department divisions.
7. Continued to provide regular training in Labor Relations, Family Medical Leave and on the Workplace Alaska Hiring System.

Statutory and Regulatory Authority

AS 39.25.153 Public Officers and Employees, State Personnel Act, Departmental Personnel Officers
 AS 39.52 Public Officers and Employees, Alaska Executive Branch Ethics Act
 AS 18.60 Health, Safety and Housing, Safety
 8 AAC 61 Labor, Occupational Safety and Health
 Administrative Order 75, Policy of Executive Branch Public Employees for EEO
 Administrative Order 81, Policy Statement on Discriminatory Harrassment
 Executive Brance 1998 Affirmative Action Plan
 Americans with Disabilities Act
 Alaska and Federal Medical Leave Act
 Occupational Safety & Health Regulations

Key Performance Measures for FY2002

Measure: Anticipate 50% of Classification Actions finalized within 10 work days.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, there were 450 classification actions. 44% of classification actions were finalized within 10 work days.

Measure: Anticipate 94% of Personnel Actions processed within 15 work days.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, 5,408 Personnel Actions were processed. 86% processed within 15 work days.

Measure: Anticipate 95% applicant profile approvals made within 3 work days.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, 7,513 applicant profiles were received. 100% of approvals were made within 4 work days.

Measure: Anticipate increasing training workshops in Worker's Comp for department employees by 5%.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, six training sessions were held for 117 employees. In FY2000, the Total Claims Reported was 121. 82 in Minor Claims and 39 in Lost Time Claims.

Status of FY2001 Performance Measures

<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
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	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Anticipate 50% of Classification Actions finalized within 10 work days. • Anticipate 94% of Personnel Actions processed within 15 work days. • Anticipate 95% applicant profile approvals made within 3 work days. • Anticipate increasing training workshops in Worker's Comp for department employees by 5%. 		X			
		X			
		X			
		X			

Personnel and Payroll
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	1,176.2	1,240.9	1,259.9
72000 Travel	10.1	15.0	20.0
73000 Contractual	44.8	43.0	63.0
74000 Supplies	9.6	11.7	16.7
75000 Equipment	0.2	5.1	5.1
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	1,240.9	1,315.7	1,364.7
Funding Sources:			
1002 Federal Receipts	243.1	224.9	277.8
1003 General Fund Match	146.4	147.3	149.7
1004 General Fund Receipts	531.5	583.2	584.9
1007 Inter-Agency Receipts	316.4	350.2	348.7
1053 Investment Loss Trust Fund	0.0	6.5	0.0
1061 Capital Improvement Project Receipts	3.5	3.6	3.6
Funding Totals	1,240.9	1,315.7	1,364.7

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	243.1	224.9	224.9	277.8	250.0
Interagency Receipts	51015	316.4	350.2	350.2	348.7	350.2
Capital Improvement Project Receipts	51200	3.5	3.6	3.6	3.6	3.6
Restricted Total		563.0	578.7	578.7	630.1	603.8
Total Estimated Revenues		563.0	578.7	578.7	630.1	603.8

Personnel and Payroll**Proposed Changes in Levels of Service for FY2002**

There are no changes from FY01 to FY02.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	737.0	224.9	353.8	1,315.7
Adjustments which will continue current level of service:				
-Year 2 Labor Costs - Net Change from FY2001	-2.4	-1.1	-1.5	-5.0
Proposed budget increases:				
-Increase for Federal Authority	0.0	54.0	0.0	54.0
FY2002 Governor	734.6	277.8	352.3	1,364.7

Personnel and Payroll**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	22	22	Annual Salaries	925,434
Part-time	0	0	COLA	20,453
Nonpermanent	0	0	Premium Pay	7,400
			Annual Benefits	334,939
			<i>Less 2.20% Vacancy Factor</i>	(28,332)
			Lump Sum Premium Pay	0
Totals	22	22	Total Personal Services	1,259,894

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	1	0	2	0	3
Administrative Clerk III	1	0	1	0	2
Human Resources Mgr III	0	0	1	0	1
Labor Rel Specialist II	0	0	1	0	1
Personnel Asst I	3	0	3	0	6
Personnel Asst II	1	0	0	0	1
Personnel Officer I	1	0	1	0	2
Personnel Officer II	1	0	1	0	2
Personnel Specialist I	1	0	2	0	3
Risk Mgmt Officer III	0	0	1	0	1
Totals	9	0	13	0	22

Component: Administrative Support Services

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

To provide quality administrative services that support the department's programs.

Component Services Provided

The finance staff of the Administrative Support Services component provides department employees with current guidelines to comply with State and Federal financial and reporting requirements. The fiscal staff provides timely and accurate vendor payments. The revenue staff maximizes Federal claims of approximately \$460 million of appropriated federal funds and \$650 thousand in unrestricted revenues annually, maintains adequate cash management and transmits federal reports on schedule. The procurement staff provides a full range of purchasing services: processing contracts, managing leases and commodity purchases. The data processing staff supports WAN and LAN management, the data warehouse and telecommunications policy. The Budget section coordinates development of the operating budget including processing revised programs, fiscal notes and legislative requests. The Grants Section coordinates all departmentwide grant activity.

Component Goals and Strategies

To assist the Department in meeting its fiduciary responsibilities and to provide efficient and effective service to divisions that promote the delivery of health care and social services. To coordinate administrative processes and the efficient use of state resources and to identify and implement innovative management initiatives.

Key Component Issues for FY2001 – 2002

The staff of the component have struggled to comply with all required deadlines for federal reporting, accounting and budget with limited resources.

Major Component Accomplishments for FY2000

Budget Section:

- * Completed the FY2001 operating budget submission on time.
- * Mental Health Trust Authority budget integration efforts continued.
- * Efforts will continue in performance reporting throughout FY2001.

Finance Section:

- * The section processed payments and federal reports timely within accepted measures.
- * Changes of drawdown clearance pattern were implemented on major federal programs
- * Complied with the submission of required report on the status of prior period audit findings to the Department of Administration and Legislative Audit .
- * Budget restrictions were all completed on time. Expenditure restrictions and revenue deferrals were submitted on time to the Department of Administration, Division of Finance.
- * Full implementation of Central Bill/Central Pay for Corporate Mastercard program for all Public Health staff.

Information Systems:

* Staff will continue to make application training materials, equipment and trainers available to the department. The IS staff themselves will attend technical training to ensure that they can continue to support the Department's IT infrastructure.

* Staff will continue to assist, prepare and track Telephone Service Requests for the Department of Health and Social Services.

Data Warehouse:

* Build Population data base using data from the Department of Labor.

* Data Warehouse has been made available for adhoc and production reports. Enhancements are continuing to be made.

* Hardware and software upgrades have been completed. Additional memory, disk and processors have been added. The upgrade to the 64bit Operating System and 64bit Database is ongoing.

* The match process is still being accomplished with the original software design.

Procurement:

* Continue in the consolidation effort of non-store front operations in Anchorage.

* Continue to modify and update new electronic procurement system.

* Prepare department staff for DOA/DGS Certification program.

* Review the department's Field Purchase Order process.

* Continue to provide Professional Service and Commodities training to divisions.

Grants Administration:

* Completed FY 2000 version of Department Grants Booklet.

* Outlined process and developed timeline to draft new grant regulations.

* Developed step by step guidelines for the proposal evaluation process.

* Refine Grants Database and incorporate past grant data into expanded database..

* Reviewed grant recommendations from seven divisions.

* Evaluated grant procurement issues related to appeals and complaints; made recommendations and composed responses for Commissioner's signature

Statutory and Regulatory Authority

AS 37.05 Public Finance, Fiscal Procedures Act

AS 37.07 Public Finance, Executive Budget Act

AS 37.10 Public Finance, Public Funds

AS 36.30 Public Contracts, State Procurement Code

Key Performance Measures for FY2002

Measure: Anticipate 92% of payments processed within 5 work days

(Not yet addressed by Legislature.)

Current Status:

In FY 2000, there were 84,000 payments made and 2,242 Agency Receipts processed. Out of those, we processed 92% of payments/receipts within 5 work days of receipt of invoice.

Measure: Anticipate submitting 90% of Federal reports on time

(Not yet addressed by Legislature.)

Current Status:

In FY 2000, 188 federal reports were submitted. Of those, 70% were processed on time and 30% processed 1-50 days late.

Measure: Anticipate turnaround time for Purchase Requisitions within average of 3 work days
(Not yet addressed by Legislature.)

Current Status:

In FY 2000 there were 818 Purchase Requisitions (PRs) received. Action was taken on 100% of Purchase Requisitions within 3 work days.

Measure: Anticipate processing 92% of all grant waivers and amendments within 3 work days and 8% within 5 work days.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, we received 102 requests from 246 grantees. 92% of Grant waivers and recommendations were processed within 3 work days and 8% within 7 work days.

Measure: Anticipate processing 85% of Revised Programs within 3 work days.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, there were 550 Revised Programs logged. 440 processed within 3 work days or 80%; the average processing time for Revised Programs was 2.1 days.

Measure: Anticipate processing 93% of Legislative Inquiries within 5 work days
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, there were 104 Legislative requests processed. Average processing time for Legislative inquiries was 5.6 work days.

Measure: Anticipate network up and running 99% of the time
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, network was up and running 8,736.5 hours during the year (or 99.7%).

Measure: Keep reported Email failures to less than 1% of volume of Email
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, zero percent - no lost Email.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Anticipate 92% of payments processed within 5 work days		X			
• Anticipate submitting 90% of Federal reports on time		X			
• Anticipate turnaround time for Purchase Requisitions within average of 3 work days		X			
• Anticipate processing 92% of all grant waivers and amendments within 3 work days and 8% within 5 work days.		X			

Component — Administrative Support Services

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Anticipate processing 85% of Revised Programs within 3 work days. • Anticipate processing 93% of Legislative Inquiries within 5 work days • Anticipate network up and running 99% of the time • Keep reported Email failures to less than 1% of volume of Email 		X			

Administrative Support Services

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	2,457.4	2,902.6	2,904.3
72000 Travel	16.9	21.3	21.3
73000 Contractual	618.9	494.8	594.8
74000 Supplies	204.1	43.5	43.5
75000 Equipment	104.1	38.0	38.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	18.4	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	3,419.8	3,500.2	3,601.9
Funding Sources:			
1002 Federal Receipts	1,007.8	1,195.4	1,222.4
1003 General Fund Match	552.6	562.8	572.8
1004 General Fund Receipts	1,478.1	1,444.7	1,415.5
1007 Inter-Agency Receipts	329.4	224.9	257.0
1053 Investment Loss Trust Fund	0.0	19.3	0.0
1061 Capital Improvement Project Receipts	51.9	53.1	134.2
Funding Totals	3,419.8	3,500.2	3,601.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	1,007.8	1,195.4	1,195.4	1,222.4	1,250.0
Interagency Receipts	51015	329.4	224.9	224.9	257.0	267.0
Capital Improvement Project Receipts	51200	51.9	53.1	53.1	134.2	150.0
Restricted Total		1,389.1	1,473.4	1,473.4	1,613.6	1,667.0
Total Estimated Revenues		1,389.1	1,473.4	1,473.4	1,613.6	1,667.0

Administrative Support Services**Proposed Changes in Levels of Service for FY2002**

In FY2002 we plan to add a Data Processing Manager II to coordinate the department's large information systems projects, insuring that they are all integrated and linkages are available. Currently there are 4 projects (MMIS, DD, DFYS, OCRA, and DJJ-JOMIS).

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	2,026.8	1,195.4	278.0	3,500.2
Adjustments which will continue current level of service:				
-Transfer \$63.0 to Audit with PCN 06-?022 RP6-1-0002	0.0	-63.0	0.0	-63.0
-Transfer \$58.8 to Health Planning with PCN 06-0497 RP6-1-0002	-34.3	-24.5	0.0	-58.8
-Year 2 Labor Costs - Net Change from FY2001	-4.2	-3.7	0.8	-7.1
Proposed budget increases:				
-Increase Interagency Receipts for Publications Specialist	0.0	0.0	32.0	32.0
-Additional Federal Authority for Cost Allocations	0.0	118.2	0.0	118.2
-Increase CIP receipts to support integration of DHSS computer systems	0.0	0.0	80.4	80.4
FY2002 Governor	1,988.3	1,222.4	391.2	3,601.9

Administrative Support Services**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	50	50	Annual Salaries	2,224,677
Part-time	0	0	COLA	36,497
Nonpermanent	0	0	Premium Pay	8,243
			Annual Benefits	787,754
			<i>Less 5.00% Vacancy Factor</i>	<i>(152,859)</i>
			Lump Sum Premium Pay	0
Totals	50	50	Total Personal Services	2,904,312

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accountant II	0	0	1	0	1
Accountant III	0	0	2	0	2
Accountant IV	0	0	2	0	2
Accountant V	0	0	1	0	1
Accounting Clerk II	1	0	4	0	5
Accounting Spvr I	1	0	0	0	1
Accounting Spvr II	0	0	1	0	1
Accounting Tech I	2	0	3	0	5
Accounting Tech III	0	0	2	0	2
Administrative Assistant	0	0	1	0	1
Administrative Clerk II	0	0	2	0	2
Administrative Clerk III	1	0	0	0	1
Administrative Manager III	0	0	1	0	1
Analyst/Programmer V	0	0	1	0	1
Customer Services Officer	0	0	1	0	1
Data Processing Mgr II	0	0	1	0	1
Data Processing Mgr III	0	0	1	0	1
Database Specialist II	0	0	1	0	1
Division Director	0	0	1	0	1
Grants Administrator I	0	0	1	0	1
Grants Administrator III	0	0	1	0	1
Mail Clerk Carrier II	1	0	1	0	2
Micro/Network Spec II	1	0	1	0	2
Micro/Network Tech II	0	0	1	0	1
Procurement Spec I	1	0	1	0	2
Procurement Spec II	1	0	0	0	1
Procurement Spec III	0	0	1	0	1
Procurement Spec IV	0	0	1	0	1
Procurement Spec V	0	0	1	0	1
Program Budget Analyst III	0	0	3	0	3
Program Budget Manager	0	0	1	0	1
Publications Spec III	0	0	1	0	1
Secretary	0	0	1	0	1
Totals	9	0	41	0	50

Component: Health Planning & Facilities Management

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

To provide quality administrative services that support the department's programs.

Component Services Provided

The staff in this component develop efficient, timely and defensible certificate of need findings and recommendations; respond to departmental and public inquiries about health planning issues; coordinate the development of the Comprehensive Integrated Mental Health Plan (CIMHP). They also develop and manage cost effective efficient capital plans, develop and manage programs and projects for the department, oversee and manage capital accounts, comprehensively assess and address the current and ongoing need for capital improvement investment through the department's annual capital budget and Capital Funding Association Plan, manage department capital named recipient and competitive grants, provide professional advice on facility construction, renovation, repair, deferred maintenance and equipment need for the department.

Component Goals and Strategies

In support of departmental priorities and programs, to coordinate the development of the Capital Budget. To prepare, oversee and manage the design and construction of major departmental capital projects. To protect the Department's facility infrastructure by managing deferred maintenance and renovation and repair capital projects. To assist Departmental grantees in carrying out their mission and protect their facility infrastructure by managing capital grants. To meet the Department's statutory responsibility to assure quality health care delivery, and health-care cost containment by administering the Certificate of Need program. To assist the Alaska Mental Health Trust Authority and the Department in improving services to Trust beneficiaries by coordinating the development of the Comprehensive Integrated Mental Health Plan (Comprehensive Plan). To provide statewide health planning policy development through coordination with other divisions.

Key Component Issues for FY2001 – 2002

Manage Certificate of Need (CON) workload.

Manage numerous capital projects to completion

Produce useful data analysis from the Data Warehouse.

Major Component Accomplishments for FY2000

Completed 10 major capital projects in FY2000. Major highlights include: completing the Mat-Su 15 Bed Youth Facility, the McLaughlin Youth Facility 30 Bed Addition, awarding the construction contract for the Ketchikan 10 Bed Youth Facility, and making significant progress toward completion of construction on a Public Health laboratory in Anchorage.

5 CON application reviews completed; Draft regulations for the Certificate of Need program were completed with a special section designed to complement the new Alaska statute controlling nursing home bed growth that will help save State General Funds for Medicaid.

Implemented Phase II of the Computerized Maintenance Management System (CMMS) completing installation and staff training. CMMS now operational.

Established a data unit to provide comprehensive, useful data analysis from the Data Warehouse. Re-classed an existing Research Analyst to work on this data analysis.

Developed a work plan for the Comprehensive Integrated Mental Health Plan. Progressed toward completion of next version of Comp Plan. Put the Comprehensive Plan on a more realistic schedule to update it every 2 years, instead of once per year.

Coordinated Y2K process for DHSS. This included: working with all DHSS Divisions to make sure all mission critical computer systems were Y2K compliant, coordinating Monthly Status reports to the Year 2000 Project Office of DOA; assisting DHSS Divisions, Facilities and Grantees with preparation of Business Contingency Plans for Y2K and other emergencies.

Coordinated Information disbursement to Department employees and the public for the 2000 US Census.

Provided back up to Governors Office & Legislature throughout the Legislative Session on capital projects.

34 new capital grants awarded in FY2000 and 55 closed out.

Statutory and Regulatory Authority

AS 18.07 Health, Safety and Housing, Certificate of Need Program
AS 18.20.140 Health, Safety and Housing, Alaska Hospital & Medical Facilities Survey and Construction Act
AS 18.20 Health, Safety and Housing, Hospitals
AS 18.25 Health, Safety and Housing, Assistance to Hospitals and Health Facilities
AS 37.05.318 Public Finance, Fiscal Procedures Act, Further Regulations Prohibited
AS 37.07.062 Public Finance, Executive Budget Act, Capital Budget
AS 47.30.660 Welfare, Social Services and Institutions, Mental Health, Alaska Mental Health Board
7 AAC 9/12 Health & Social Services, Design and Construction of Health Facilities
7 AAC 13 Health & Social Services, Assistance for Community Health Facilities
7 AAC 07.010 Health & Social Services, Certificate of Need

Key Performance Measures for FY2002

Measure: Anticipate completing Certificate of Need (CON) reviews within 120 day statutory limit.
(Not yet addressed by Legislature.)

Current Status:

In FY2000, five Certificate of Need's were received. 100% were completed within 120 days.

Measure: Process 100% of grant payments within 15 days from receipt; close 93% grants within 90 days from completion.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, we received 55 active grants valued at \$5.2 million including 36 new grants at \$2.4 million. 94% of grant payments were made within 15 days; 100% of all grant agreements were closed out within 90 days of completion.

Measure: Anticipate 80% of capital projects completed on time and within budget.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, 16 capital projects were scheduled to be completed. 63%, 10 capital projects, were completed on time and on budget.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
<ul style="list-style-type: none"> • Anticipate completing Certificate of Need (CON) reviews within 120 day statutory limit. • Process 100% of grant payments within 15 days from receipt; close 93% grants within 90 days from completion. • Anticipate 80% of capital projects completed on time and within budget. 		X			
		X			
			X		

Health Planning & Facilities Management

Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	752.6	759.4	827.9
72000 Travel	28.0	38.6	38.6
73000 Contractual	89.5	168.4	158.1
74000 Supplies	6.9	12.5	12.5
75000 Equipment	14.8	20.1	20.1
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	891.8	999.0	1,057.2
Funding Sources:			
1002 Federal Receipts	104.7	93.8	118.4
1003 General Fund Match	13.2	0.0	0.0
1004 General Fund Receipts	179.2	181.6	217.1
1007 Inter-Agency Receipts	172.9	121.0	120.6
1053 Investment Loss Trust Fund	0.0	0.9	0.0
1061 Capital Improvement Project Receipts	391.3	551.7	551.1
1092 Mental Health Trust Authority Authorized Receipts	30.5	50.0	50.0
Funding Totals	891.8	999.0	1,057.2

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	104.7	93.8	93.8	118.4	93.8
Interagency Receipts	51015	172.9	121.0	121.0	120.6	121.0
Capital Improvement Project Receipts	51200	391.3	551.7	551.7	551.1	560.0
Mental Health Trust Authority Auth.Rec.	51410	30.5	50.0	50.0	50.0	50.0
Restricted Total		699.4	816.5	816.5	840.1	824.8
Total Estimated Revenues		699.4	816.5	816.5	840.1	824.8

Health Planning & Facilities Management

Proposed Changes in Levels of Service for FY2002

There are no changes from FY01 to FY02.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	182.5	93.8	722.7	999.0
Adjustments which will continue current level of service:				
-Transfer in PCN 06-0497 with \$58.8 from Adm Support Svcs RP6-1-0002	34.3	24.5	0.0	58.8
-Year 2 Labor Costs - Net Change from FY2001	0.3	0.1	-1.0	-0.6
FY2002 Governor	217.1	118.4	721.7	1,057.2

Health Planning & Facilities Management**Personal Services Information**

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	11	12	Annual Salaries	642,828
Part-time	0	0	COLA	8,575
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	210,122
			<i>Less 3.90% Vacancy Factor</i>	(33,580)
			Lump Sum Premium Pay	0
Totals	11	12	Total Personal Services	827,945

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Accounting Tech III	0	0	1	0	1
Administrative Assistant	1	0	0	0	1
Building Mgmt Specialist	1	0	0	0	1
Facilities Manager I	1	0	1	0	2
Grants Administrator II	0	0	1	0	1
Hlth & Soc Svcs Plnr II	0	0	2	0	2
Planner II	0	0	1	0	1
Planner IV	0	0	1	0	1
Research Analyst III	0	0	1	0	1
Research Analyst IV	0	0	1	0	1
Totals	3	0	9	0	12

Component: Audit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** janet_clarke@health.state.ak.us

Component Mission

To provide professional audit services to the Department.

Component Services Provided

Services Provided

- * Perform independent fiscal and compliance audits of the Department's grantees that fall within the state single audit requirement.
- * Monitor single audits of the Department's grantees performed by outside CPA firms, to reconcile these audits to division records; and bill grantees for refunds due DHSS.
- * Undertake special reviews and audits as requested.
- * Assist Legislative Audit with annual federal single audit of Department.

Component Goals and Strategies

Enable the Department and Division to effectively provide program services to the people of the State of Alaska.

Key Component Issues for FY2001 – 2002

The audit component was streamlined and transferred in the FY 2001 budget to the Division of Administrative Services. The transfer is intended to focus the mission of these auditors on department and grantee audits.

Major Component Accomplishments for FY2000

2 special audits and 4 special reviews performed
95 state and federal single audit reports reviewed
325 department grants reviewed
310 staff hours provided to Legislative Audit during the federal single audit of Department

Statutory and Regulatory Authority

Alaska Statutes:
AS 37.05 Public Finance, Fiscal Procedures Act

Administrative Code:
2 AAC 45.010 Audit Requirements

Single Audit Act of 1984, P.L. 98-502 as amended Single Audit Act Amendments of 1996, P.L. 104-156
OMB Circular A-133

Key Performance Measures for FY2002

Measure: Anticipate settling 100% of grants covered by State Single Audits.
(Not yet addressed by Legislature.)

Current Status:

FY99; Audit Reports Received were 85, Grants Covered were 289 with a dollar value of \$73,654,328; Grants Settled were 109 for 37.7%.

Measure: Follow up on 100% of Federal findings and questioned costs within 6 months.
(Not yet addressed by Legislature.)

Current Status:

In FY2000, we received 36 FY99 Federal Single Audit Reports. Of those, 90% were reviewed and settled within 6 months.

Measure: Anticipate providing Legislative Audit assistance with fieldwork.
(Not yet addressed by Legislature.)

Current Status:

In FY2000, we completed the fieldwork tasks assigned by Legislative Audit in 310 hours.

Measure: Anticipate completing 100% of special reviews within 90 days of request.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, 2 audits and 4 special reviews were requested. 100% were completed within 90 days.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Anticipate settling 100% of grants covered by State Single Audits.		X			
• Follow up on 100% of Federal findings and questioned costs within 6 months.		X			
• Anticipate providing Legislative Audit assistance with fieldwork.	X				
• Anticipate completing 100% of special reviews within 90 days of request.	X				

Audit
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	477.3	193.8	263.2
72000 Travel	5.2	4.0	6.0
73000 Contractual	32.9	2.0	6.0
74000 Supplies	0.7	1.8	2.3
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	516.1	201.6	277.5
Funding Sources:			
1002 Federal Receipts	148.0	0.0	63.7
1003 General Fund Match	219.1	0.0	0.0
1004 General Fund Receipts	60.4	105.8	106.3
1007 Inter-Agency Receipts	88.6	95.2	107.5
1053 Investment Loss Trust Fund	0.0	0.6	0.0
Funding Totals	516.1	201.6	277.5

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	148.0	0.0	0.0	63.7	0.0
Interagency Receipts	51015	88.6	95.2	95.2	107.5	100.0
Restricted Total		236.6	95.2	95.2	171.2	100.0
Total Estimated Revenues		236.6	95.2	95.2	171.2	100.0

Audit**Proposed Changes in Levels of Service for FY2002**

There are no service level changes from FY01 to FY02.

**Summary of Component Budget Changes
From FY2001 Authorized to FY2002 Governor**

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	106.4	0.0	95.2	201.6
Adjustments which will continue current level of service:				
-Transfer in PCN 06-?022 with \$63.0 from Adm Support Svcs RP6-1-0002	0.0	63.0	0.0	63.0
-Year 2 Labor Costs - Net Change from FY2001	-0.1	0.7	-0.2	0.4
Proposed budget increases:				
-Increase I/A Receipts	0.0	0.0	12.5	12.5
FY2002 Governor	106.3	63.7	107.5	277.5

Audit

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	3	4	Annual Salaries	201,454
Part-time	0	0	COLA	2,410
Nonpermanent	0	0	Premium Pay	0
			Annual Benefits	67,520
			<i>Less 3.00% Vacancy Factor</i>	(8,142)
			Lump Sum Premium Pay	0
Totals	3	4	Total Personal Services	263,242

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
Administrative Clerk II	0	0	1	0	1
Internal Auditor III	0	0	2	0	2
Internal Auditor IV	0	0	1	0	1
Totals	0	0	4	0	4

Component: Unallocated Reduction

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

No mission statement.

Component Services Provided

The unallocated reduction component was added by the Legislature during the FY 2000 budget to document General Funds cuts of \$2.0 million.

Component Goals and Strategies

No goals and strategies.

Key Component Issues for FY2001 – 2002

No key issues.

Major Component Accomplishments for FY2000

No major accomplishments.

Statutory and Regulatory Authority

No statutes and regulations.

Unallocated Reduction
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	0.0	0.0
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	0.0	0.0	0.0
Funding Sources:			
None.			
Funding Totals	0.0	0.0	0.0

Unallocated Reduction

Proposed Changes in Levels of Service for FY2002

No service changes.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	0.0	0.0	0.0
FY2002 Governor	0.0	0.0	0.0	0.0

Unallocated Reduction

Personal Services Information

Authorized Positions			Personal Services Costs	
	FY2001 Authorized	FY2002 Governor		
Full-time	0	0	Annual Salaries	0
Part-time	0	0	Premium Pay	0
Nonpermanent	0	0	Annual Benefits	0
			<i>Less % Vacancy Factor</i>	()
			Lump Sum Premium Pay	0
Totals	0	0	Total Personal Services	

Position Classification Summary

Job Class Title	Anchorage	Fairbanks	Juneau	Others	Total
No personal services.					
Totals	0	0	0	0	0

Facilities Maintenance Budget Request Unit

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

BRU Mission

To provide cost effective, professional building maintenance support services to occupants of all DHSS state owned and operated facility assets.

BRU Services Provided

Collect costs for facilities operations, maintenance and repair, renewal and replacement as defined in HB 315 (Chapter 90, SLA 98). Pay rent fees for Rent Pilot project.

BRU Goals and Strategies

Enhance facilities operations through timely and prudent maintenance and upkeep of Department of Health and Social Services facilities.

Key BRU Issues for FY2001 – 2002

Complete implementation of Computerized Maintenance Management System (CMMS). Train staff in the use of CMMS and gather data for management reports. Develop energy saving routines with Direct Digital Control (DDC) systems which decrease energy consumption and result in reduced operating costs. Complete detailed Building Condition Audit (BCA) Report in support of budget request for deferred maintenance, renovation and repair funding. Bring all our facilities up to the highest fire and life safety standards recognized by current building codes. Participate in Rent Pilot project.

Major BRU Accomplishments for FY2000

Completed DDC implementation in several older facilities and all new facilities now in design and construction. Maintain BCA in all DHSS facilities establishing a statewide database for our maintenance efforts. Implemented Phase Two of the Computerized Maintenance Management System (CMMS) Program completing training and installation. CMMS is now operational.

**Facilities Maintenance
BRU Financial Summary by Component**

All dollars in thousands

	FY2000 Actuals				FY2001 Authorized				FY2002 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures None.												
Non-Formula Expenditures												
Facilities Maintenance	0.0	0.0	0.0	0.0	0.0	0.0	2,584.9	2,584.9	0.0	0.0	2,584.9	2,584.9
HSS State Facilities Rent	0.0	0.0	0.0	0.0	449.3	175.7	0.0	625.0	452.2	237.2	0.0	689.4
Totals	0.0	0.0	0.0	0.0	449.3	175.7	2,584.9	3,209.9	452.2	237.2	2,584.9	3,274.3

Facilities Maintenance

Proposed Changes in Levels of Service for FY2002

In FY 2002 we are adding the Juneau Community Building to the Rent component of this BRU.

Facilities Maintenance

Summary of BRU Budget Changes by Component

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	449.3	175.7	2,584.9	3,209.9
Adjustments which will continue current level of service:				
-HSS State Facilities Rent	2.9	0.0	0.0	2.9
Proposed budget increases:				
-HSS State Facilities Rent	0.0	61.5	0.0	61.5
FY2002 Governor	452.2	237.2	2,584.9	3,274.3

Component: Facilities Maintenance

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

To provide cost effective, professional building maintenance support services to occupants of all DHSS state owned and operated facility assets.

Component Services Provided

Collect costs for facilities operations, maintenance and repair, renewal and replacement as defined in HB 315 (Chapter 90, SLA 98).

Component Goals and Strategies

Enhance facilities operations through timely and prudent maintenance and upkeep of Department of Health and Social Services facilities.

Key Component Issues for FY2001 – 2002

Complete implementation of Computerized Maintenance Management System (CMMS). Train staff in the use of CMMS and gather data for management reports. Develop energy saving routines with Direct Digital Control (DDC) systems which decrease energy consumption and result in reduced operating costs. Complete detailed Building Condition Audit (BCA) Report in support of budget request for deferred maintenance, renovation and repair funding. Bring all our facilities up to the highest fire and life safety standards recognized by current building codes.

Major Component Accomplishments for FY2000

Completed Direct Digital Controls (DDC) implementation in several older facilities and all new facilities now in design and construction. Implemented Phase Two of the Computerized Maintenance Management System (CMMS) Program completing installation and training. CMMS now operational.

Facility	Facility Oper.	Maint. & Repair	Renewal & Replace.	Total	
Alaska Psychiatric Institute		824.5	54.7	0.0	879.2
ASETS	0.0	0.0	0.0	0.0	
Fahrenkamp/Denardo Center	0.0	95.6	0.0	95.6	
Ft Yukon Maint & Repair		0.0	0.0	0.0	0.0
Bethel RDT	0.0	0.0	0.0	0.0	
Mclaughlin Youth Center		411.5	197.7	24.1	633.3
Fairbanks Youth Facility	89.6	81.0	13.2	183.8	
Nome Youth Facility	54.6	51.8	10.7	117.1	
Johnson Youth Center	668.0	6.8	0.0	674.8	
Bethel Youth Facility	66.9	66.4	11.3	144.6	
Mat-su Youth Facility	1.2	0.0	0.0	1.2	
Dillingham Health Center		13.5	1.7	0.0	15.2
Glenallen Health Center	5.8	0.0	0.0	5.8	
Juneau Health Center	30.9	7.6	0.0	38.5	
Kodiak Health Center/Griffin		0.0	4.2	0.0	4.2
Sitka Health Center	5.8	0.3	0.0	6.1	

Tok Health Center	0.0	0.1	0.0	0.1
Ketchikan Health Center	26.6	0.0	0.0	26.6
King Salmon Trailer	0.0	0.0	0.0	0.0
Yukon Flats Care Center	0.0	0.0	0.0	0.0
Health Facilities Management	0.0	0.0	0.0	0.0
Total	2,198.9	567.9	59.3	2,826.1

Statutory and Regulatory Authority

HB 315 (Chapter 90, SLA 98).

Key Performance Measures for FY2002

Measure: Conduct Building Condition Audits in support of programs.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, building condition audits were completed for all DHSS facilities which showed specific building deferred maintenance totalling \$7.8 million.

Measure: Implement Direct Digital Control (DDC) into all DHSS facilities.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, Direct Digital Control (DDC) implemented into 60% of DHSS facilities.

Measure: Implement Computerized Maintenance Management System (CMMS) in all DHSS facilities.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, 80% of DHSS facilities had Computerized Maintenance Management System (CMMS) implemented. Project on-going.

Measure: Implement new fire alarm systems in all DHSS facilities.
(Not yet addressed by Legislature.)

Current Status:

In FY 2000, new fire alarm systems were installed in two of DHSS facilities.

Status of FY2001 Performance Measures

	<i>Achieved</i>	<i>On track</i>	<i>Too soon to tell</i>	<i>Not likely to achieve</i>	<i>Needs modification</i>
• Conduct Building Condition Audits in support of programs.	X				
• Implement Direct Digital Control (DDC) into all DHSS facilities.		X			
• Implement Computerized Maintenance Management System (CMMS) in all DHSS facilities.		X			
• Implement new fire alarm systems in all DHSS facilities.		X			

Facilities Maintenance
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	2,584.9	2,584.9
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	0.0	2,584.9	2,584.9
Funding Sources:			
1007 Inter-Agency Receipts	0.0	2,584.9	2,584.9
Funding Totals	0.0	2,584.9	2,584.9

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Interagency Receipts	51015	0.0	2,584.9	2,584.9	2,584.9	2,584.9
Restricted Total		0.0	2,584.9	2,584.9	2,584.9	2,584.9
Total Estimated Revenues		0.0	2,584.9	2,584.9	2,584.9	2,584.9

Facilities Maintenance

Proposed Changes in Levels of Service for FY2002

There are no changes from FY 01 to FY 02.

Summary of Component Budget Changes

From FY2001 Authorized to FY2002 Governor

All dollars in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	0.0	0.0	2,584.9	2,584.9
FY2002 Governor	0.0	0.0	2,584.9	2,584.9

Component: HSS State Facilities Rent

Contact: Janet Clarke, Director, Administrative Services

Tel: (907) 465-1630 **Fax:** (907) 465-2499 **E-mail:** Janet_Clarke@health.state.ak.us

Component Mission

To fund necessary maintenance and help prevent future deferred maintenance problems in the eight buildings in the new state facilities rent pool.

Component Services Provided

Implement the first year of the State Facilities Rent Structure.

Component Goals and Strategies

Improve the condition of state buildings and help prevent future deferred maintenance problems by implementing the first year phase of a state facilities rent structure.

Key Component Issues for FY2001 – 2002

The Department of Health & Social Services will participate in the Rent Pilot Project in FY 2001 for three buildings (the Alaska Office Building, the Court Plaza Building and the Fairbanks Regional Office Building). During years of budget constraints, state buildings have not been adequately maintained, resulting in a serious and expensive deferred maintenance backlog. By implementing a rent structure, the state will be able to recover an estimated \$1.5 million (statewide) in federal and other non-general funds for space occupied in state buildings. General funds now spent on building maintenance and operations by the Department of Transportation and Public Facilities (DOT/PF) for seven state buildings and by the Department of Administration (DOA) for the Atwood Building in Anchorage are being transferred from DOT/PF and DOA to the agencies occupying the buildings in the facilities rent pool. The agencies will pay rent, using these transferred general funds to pay for space occupied by general fund programs and collecting rent from non-general fund sources as appropriate.

Major Component Accomplishments for FY2000

Not applicable.

Statutory and Regulatory Authority

No statutes and regulations.

HSS State Facilities Rent
Component Financial Summary

All dollars in thousands

	FY2000 Actuals	FY2001 Authorized	FY2002 Governor
Non-Formula Program:			
Component Expenditures:			
71000 Personal Services	0.0	0.0	0.0
72000 Travel	0.0	0.0	0.0
73000 Contractual	0.0	625.0	689.4
74000 Supplies	0.0	0.0	0.0
75000 Equipment	0.0	0.0	0.0
76000 Land/Buildings	0.0	0.0	0.0
77000 Grants, Claims	0.0	0.0	0.0
78000 Miscellaneous	0.0	0.0	0.0
Expenditure Totals	0.0	625.0	689.4
Funding Sources:			
1002 Federal Receipts	0.0	175.7	237.2
1004 General Fund Receipts	0.0	449.3	452.2
Funding Totals	0.0	625.0	689.4

Estimated Revenue Collections

Description	Master Revenue Account	FY2000 Actuals	FY2001 Authorized	FY2001 Cash Estimate	FY2002 Governor	FY2003 Forecast
Unrestricted Revenues						
None.		0.0	0.0	0.0	0.0	0.0
Unrestricted Total		0.0	0.0	0.0	0.0	0.0
Restricted Revenues						
Federal Receipts	51010	0.0	175.7	175.7	237.2	250.0
Restricted Total		0.0	175.7	175.7	237.2	250.0
Total Estimated Revenues		0.0	175.7	175.7	237.2	250.0

HSS State Facilities Rent**Proposed Changes in Levels of Service for FY2002**

In FY 2001, the Facilities Rent Pilot Project was added to this component for Health & Social Services. The pilot project included three buildings that Health & Social Services occupies: the Fairbanks Regional Office Building, the Alaska Office Building, and the Court Plaza Building. Rent for these buildings was transferred in from Department of Administration and Risk Management costs will transferred in from the various Divisions in Health & Social Services who occupy these buildings. In FY 2002, the Community Building will be added.

Summary of Component Budget Changes**From FY2001 Authorized to FY2002 Governor***All dollars in thousands*

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2001 Authorized	449.3	175.7	0.0	625.0
Adjustments which will continue current level of service:				
-Transfer \$2.9 from DOA for Community Building	2.9	0.0	0.0	2.9
Proposed budget increases:				
-Increase for Rent Project to add Community Building	0.0	61.5	0.0	61.5
FY2002 Governor	452.2	237.2	0.0	689.4