

**2013 Legislature - Operating Budget  
Transaction Compare - Governor Structure  
Between Adj Base and Gov Amd**

<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Alaska Pioneer Homes</b>													
<b>Pioneer Homes</b>													
Align Fund Authorization With Actual Collections	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<p><i>In FY2012, the Pioneer Homes component collected \$244.1 more in federal receipts than the federal receipt authorization. The federal receipts are federal per-diem payments to qualifying veterans living in the Veterans and Pioneer Home in Palmer. During this same time period, the division under collected its general fund program receipt authority by \$325.9. The general fund program receipts are from payments the residents make towards their room, board, and monthly care.</i></p> <p><i>While this fund change does not completely cover the under collection of federal program receipts, it moves the division closer to the actual collections realized in FY2012. Resident payments fluctuate annually based on the composition and income status of seniors residing in the Pioneer Home system.</i></p>													
1002 Fed Rcpts (Fed)			225.0										
1005 GF/Prgm (DGF)			-225.0										
Replace Uncollectible Fund Sources for Personal Services Increases	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<p><i>The Pioneer Homes component is currently under collecting general fund program receipts and interagency receipts authority. It is anticipated that this will continue in FY2014.</i></p> <p><i>The division is unable to pay their expenditures with the current personal services increases unless extra general fund program and interagency receipt authorizations are replaced with general funds.</i></p>													
1004 Gen Fund (UGF)			57.2										
1005 GF/Prgm (DGF)			-34.4										
1007 I/A Rcpts (Other)			-22.8										
AMD: Pioneer Homes Operational Costs for Contractual Increases	Gov Amd	Inc	460.0	0.0	0.0	460.0	0.0	0.0	0.0	0.0	0	0	0
<p><i>This request provides funding needed as a result of increases in the food, housekeeping, and laundry services contract that became effective July 1, 2012.</i></p> <p><i>The division solicited for these services in late 2011. Only one organization came forward with an interest and their price increase was substantial.</i></p> <p><i>The amount requested is based on the increased costs using the FY2013 daily rates and FY2012 average occupancy less the amount the division projects can be absorb. Food costs are based on breakfast, lunch and dinner at each location. The daily increase rates for those meals are different for each Pioneer Home. Likewise, the occupancy rates are also different for each home, so the calculations were done for each home and added to determine a total increase.</i></p> <p><i>This amendment provides FY2014 funding based on a FY2013 supplemental request for \$460.0.</i></p>													
<p><i>FY2014 December Budget: \$59,926.6</i></p> <p><i>FY2014 Total Amendments: \$460.0</i></p> <p><i>FY2014 Total: \$60,386.6</i></p>													
1004 Gen Fund (UGF)			460.0										

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<b>Alaska Pioneer Homes (continued)</b>													
<b>Pioneer Homes (continued)</b>													
AMD: Maintain Current Service Levels at the Pioneer Homes	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>This request provides funding needed as a result of uncollectible general fund program receipts and interagency receipts for Medicaid Waivers.</i>													
<i>Since FY2010, increases in the division's general fund program receipt and inter-agency receipt authority for salary, benefits, fund changes and fiscal notes amounted to \$823.0 and \$289.7, respectively. These increases were the result of actions outside the division's control.</i>													
<i>Although the division has been able to absorb these increases in the past, beginning in FY2013 this is no longer the case. Actual collections are not growing to the extent of the authority increases.</i>													
<i>The general fund program receipt authority (resident payments) increased 22.9% between FY2007 and FY2012 while the actual collections increased only 17.57%. The FY2011 authorization of \$15,554.3 was very close to actual collections of \$15,540.1. However, since that time the authority increased another \$774.0. The FY2013 projected collections as of November 30, 2012 are \$710.6 below the program receipt authorization.</i>													
<i>The interagency receipt of Medicaid Waiver collections for the past two fiscal years averaged \$5,577.0. The FY2013 projected Medicaid collections are \$5,652.7. The authorization for these receipts is \$5,690.1 or \$37.4 more than November 30, 2012 projected collections. The division has worked with families and responsible parties to move all qualifying residents to the Medicaid Waiver program. With the majority of this work complete, growth in this funding source will be minimal if at all.</i>													
<i>This amendment provides FY2014 funding based on a FY2013 supplemental request in the same amount.</i>													
<i>FY2014 December Budget: \$59,926.6</i>													
<i>FY2014 Total Amendments: \$460.0</i>													
<i>FY2014 Total: \$60,386.6</i>													
1004 Gen Fund (UGF)			750.0										
1005 GF/Prgm (DGF)			-712.0										
1007 I/A Rcpts (Other)			-38.0										
<b>* Allocation Difference *</b>			460.0	0.0	0.0	460.0	0.0	0.0	0.0	0.0	0	0	0
<b>** Appropriation Difference **</b>			460.0	0.0	0.0	460.0	0.0	0.0	0.0	0.0	0	0	0

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Behavioral Health</b>													
<b>Alcohol Safety Action Program (ASAP)</b>													
Fund change to reflect the transfer of the Oversight of Therapeutic Court programs to the AK Court System	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>In FY2011, through legislative action, the funding and administrative oversight of the Therapeutic Court programs was centralized under the Alaska Court System (ACS). The Alcohol Safety Action Program (ASAP) component continued to employ the ASAP probation officers, and the division was reimbursed for expenditures through reimbursable service agreements (RSAs) with ACS. In the first year, the majority of the RSA revenue for personal</i>													

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<b>Behavioral Health (continued)</b>													
<b>Alcohol Safety Action Program (ASAP) (continued)</b>													
Fund change to reflect the transfer of the Oversight of Therapeutic Court programs to the AK Court System (continued)													
<i>services came to Behavioral Health as capital improvement project (CIP) receipts. Since then, ACS has transitioned to interagency receipts for personal services.</i>													
<i>The division does not have interagency receipt authority is available for transfer to ASAP. This fund change will allow the division to collect interagency receipts, should they be needed for the Therapeutic Court program in FY2014.</i>													
			1007 I/A Rcpts (Other)	213.6									
			1061 CIP Rcpts (Other)	-213.6									
<b>* Allocation Difference *</b>			<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Behavioral Health Grants</b>													
	Gov Amd	IncM	MH Trust: Housing - Grant 1377.06 Assisted Living Home Training and Targeted Capacity for Development	100.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0
<i>The Assisted Living Home Training Project, managed by Division of Behavioral Health Seriously Mentally Ill Treatment Unit, improves the quality of training available for assisted living home providers and selected supported housing providers serving individuals with serious mental illness and other conditions such as chronic addictions, traumatic brain injury and developmental disabilities.</i>													
<i>The Department of Health and Social Services Behavioral Health General Relief Adult Residential Care (ARC) program funds assisted living costs for approximately 142 indigent individuals with severe mental health disabilities statewide. The assisted living home program and the supported housing programs are intended to prevent homelessness and to improve daily functioning for very impaired beneficiaries. This project supports these goals by providing training to assisted living home and supported housing caregivers, which increases the capacity of these providers to house individuals with intensive behavioral health needs. The project is granted to the Trust Training Cooperative to perform the training in collaboration with the division.</i>													
			1092 MHTAAR (Other)	100.0									
	Gov Amd	Inc	MH Trust: Housing - Grant 1377.06 Assisted Living Home Training and Targeted Capacity for Development	100.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0
<i>The Assisted Living Home training project, managed by Division of Behavioral Health Seriously Mentally Ill Treatment unit, improves the quality of training available for assisted living home providers and selected supported housing providers serving individuals with serious mental illness and other conditions such as chronic addictions, traumatic brain injury and developmental disabilities.</i>													
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<b>Behavioral Health (continued)</b>													
<b>Behavioral Health Grants (continued)</b>													
MH Trust: Housing - Grant 1377.06 Assisted Living Home Training and Targeted Capacity for Development (continued)													
<i>capacity of these providers to house individuals with intensive behavioral health needs. The project is granted to the Trust Training Cooperative to perform the training in collaboration with the division.</i>													
			1037 GF/MH (UGF)	100.0									
			MH Trust: Dis Justice - Grant 2819.04	100.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0
Pre-Development for Sleep Off Alternatives in Targeted Communities (Nome)													
<i>FY2014 funds will be used to support the Division of Behavioral Health staff in pre-development and planning activities for substance abuse treatment services, a Wellness Center, for the Norton Sound region, inclusive of a system of service alternatives to incarcerating persons requiring protective custody under AS 47.37.170 in Nome, AK.</i>													
<i>Activities may include but are not limited to (1) maintaining a staff person to plan, develop, &amp; manage the implementation of the identified Wellness Center, (2) assessing the service capacity of existing programs &amp; facilities within the region, (3) developing a regional implementation plan for the needed identified treatment services, &amp; (4) securing support (fiscal &amp; otherwise) for the identified treatment services &amp; any physical facilities needed for the provision of the treatment services at the Wellness Center.</i>													
<i>This project was started with MHTAAR funding in FY2010. This FY2014 MHTAAR increment maintains the FY2013 funding level and momentum of effort.</i>													
			1092 MHTAAR (Other)	100.0									
			MH Trust: Cont - Grant 3736.02 Behavioral Health Follow-up Survey	119.2	0.0	0.0	119.2	0.0	0.0	0.0	0	0	0
<i>Initiated in FY2012, this increment will continue a pilot behavioral health survey of clients measuring their levels of recovery at four month intervals up to one year after treatment. The Division will utilize an experienced contractor to ensure a sufficient survey response rate for statistical validity. This survey has important policy implications for improving treatment quality and could also help document important cost savings related to increased efficiency. If survey information is found to be helpful, it is the intent to repeat this survey every four-to-five years.</i>													
			1092 MHTAAR (Other)	119.2									
			Telehealth Strategic Capacity Expansion, Phase II	200.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
<i>The "TeleHealth Strategic Capacity Expansion" advances the concept of tele-health from an agency dependent model to an in-home service delivery model. This model is not about consultation with psychiatry. Rather, technology (a PC) goes with the direct service provider/behavioral health aide to where ever the person in need of services is, and then connects with the clinician/supervisor. This model will increase timely access to behavioral health professionals, critical to the need for responsiveness to victims of domestic violence/sexual assault, Domestic Violence and Sexual Assault (DVSA) partner agencies, courts and other requests for services. Victims of DVSA could be linked to BH services without leaving the safety of a shelter environment.</i>													
<i>The current capacity for "Telehealth" services is centralized and limited to the Alaska Psychiatric Institute (API). The API "Telebehavioral Health Care Services Initiative" has successfully developed a statewide network using a "hub-based" model. A link between a local agency and API allows for real-time videoconference with</i>													

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<b>Behavioral Health (continued)</b>													
<b>Behavioral Health Grants (continued)</b>													
Telehealth Strategic Capacity Expansion, Phase II (continued)													
<i>psychiatrists, psychologists and social workers at API. Services include:</i>													
<i>- Alaska Partnership Line (A-PAL) Youth Medication Consultation Line -- A free consultation service for primary care providers. Practitioners use a toll-free line to discuss evidence-based medication management with a child and adolescent psychiatrist during designated hours.</i>													
<i>- API Telebehavioral Health Clinic -- This virtual clinic primarily serves the larger health care centers around the state. These facilities enter into a long-term formal agreement, usually renewed annually, to access API staff expertise via telemedicine during designated hours.</i>													
<i>- Frontline Remote Access Behavioral Health Clinic -- This "walk-in" virtual clinic allows primary care and behavioral health providers in small, remote communities to access behavioral health consultation and patient treatment as needed. Paperwork is limited to a one-page fee-for-service agreement.</i>													
<i>- Frontline Behavioral Health Talks -- A lecture series on behavioral health topics of interest to mid-level primary care and behavioral health practitioners, such as suicide risk assessment, how/whether to request patient admission to API, and prescribing medications for mental health.</i>													
<i>The API Telebehavioral Health Services project has grown over time: discreet service counts have increased from 110 (2005), 602 (2009), to 950 in 2011. At present, the program is in a "no growth" pattern, with limited resources at this time.</i>													
<i>Additional benefits include: decreased travel costs for treatment and court appearances; increased integration with primary care; and increased staff productivity.</i>													
			1002 Fed Rcpts (Fed)	100.0									
			1004 Gen Fund (UGF)	100.0									
<b>* Allocation Difference *</b>				<b>619.2</b>	0.0	0.0	119.2	0.0	0.0	500.0	0.0	0	0
<b>Behavioral Health Administration</b>													
MH Trust: Housing - Grant 383.09 Office of Integrated Housing	Gov Amd	IncM	225.0	225.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>This is an ongoing project through the Department of Health and Social Service Behavioral Health for technical assistance to develop supported housing for Trust beneficiaries. Recognizing the affordable-and-supported-housing crisis in Alaska, the Trust and Behavioral Health advocated for the integration of supported housing - now the 'Supported Housing Office' - to develop housing and support opportunities for consumers struggling with mental illness and/or substance abuse. The stated mission of this office is to aggressively develop the expansion and sustainability of supported housing opportunities statewide for Behavioral Health consumers in safe, decent, and affordable housing in the least restrictive environment of their choice that is supportive of their rehabilitation process and to receive individualized community services and supports. This project has been funded with Trust and GF/MH funds dating back to FY2001.</i>													
			1092 MHTAAR (Other)	225.0									
MH Trust Continuing - Sustaining Alaska 2-1-1	Gov Amd	Inc	50.0	0.0	0.0	50.0	0.0	0.0	0.0	0.0	0	0	0

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<b>Behavioral Health (continued)</b>													
<b>Behavioral Health Administration (continued)</b>													
MH Trust Continuing - Sustaining Alaska 2-1-1 (continued)													
<i>Alaska 2-1-1 is an information and referral system for health and human services resources throughout Alaska. The call center is staffed weekdays from 8:30am - 5pm for callers to receive personalized attention and a website available to all 24/7.</i>													
1037 GF/MH (UGF)			50.0										
Three-year Federal Tobacco Enforcement Contract to conduct tobacco vendors compliance investigations (FY14-FY16)	Gov Amd	IncT	650.0	216.7	54.2	352.5	26.6	0.0	0.0	0.0	0	0	0
<i>The Department of Health and Social Services, Division of Behavioral Health requests additional federal receipt authority for a three-year contract with the U.S. Food and Drug Administration to conduct compliance investigations to ensure that the tobacco vendors comply with the Federal Food, Drug and Cosmetic Act as amended by the Tobacco Control Act. This will, in conjunction with enforcement of Alaska State Law, strive to prevent the sale of tobacco products to persons under 19 years of age, assure that tobacco advertising in the retail environment does not lead to the initiation of youth smoking, labeling of tobacco complies with restrictions on the use of deceptive modifiers, and that flavored cigarettes have been removed from the market. The contract is reimbursement based.</i>													
<i>The proposed budget includes funding for personal services, supplies, contractual and travel expenditures. Through this contract, it is estimated that approximately 230 additional investigations will be conducted annually, above and beyond the current Synar investigations. The investigation team for youth access inspections will consist of a minimum of two adults and two student interns. The three existing investigators will not be able to extend their work to conduct the required investigations. A reimbursable service agreement will be pursued if a new position is unavailable. The terms of the contract require that anyone working on the project be paid from the contract, so personal services for ancillary staff are also included in the increment.</i>													
<i>Through this project, state tobacco enforcement efforts will be enhanced and will guarantee the state is in compliance with federal laws.</i>													
<i>Without this increment, the division will have insufficient federal authority to carry out the requirements as stated in the Federal Food, Drug and Cosmetic Act as amended by the Tobacco Control Act.</i>													
1002 Fed Rcpts (Fed)			650.0										
LFD Reconciliation: Restores OTI for Workforce Competency-Curriculum Development (DELETE IN SUBCOMMITTEE)	Gov Amd	Inc	45.0	0.0	0.0	45.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH (UGF)			45.0										
<b>* Allocation Difference *</b>			<b>970.0</b>	<b>441.7</b>	<b>54.2</b>	<b>447.5</b>	<b>26.6</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Psychiatric Emergency Services</b>													
Add/Delete Pair: Transfer to Designated Evaluation and Treatment for Hospital and Transport Rate Increases	Gov Amd	Dec	-129.9	0.0	0.0	-129.9	0.0	0.0	0.0	0.0	0	0	0
<i>In recent fiscal years the services line in the Psychiatric Emergency Service component has been underutilized. A transfer of authority to the Designated Evaluation and Treatment component is necessary to defray a 14--15%</i>													

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<b>Behavioral Health (continued)</b>													
<b>Psychiatric Emergency Services (continued)</b>													
Add/Delete Pair: Transfer to Designated Evaluation and Treatment for Hospital and Transport Rate Increases (continued)													
<i>increase to the Medicaid daily rates for the two Designated Evaluation and Treatment hospitals (Bartlett Regional Hospital and Fairbanks Memorial Hospital) and the increased transport rates for the statutorily required Title 47 transports.</i>													
	1037 GF/MH (UGF)		-129.9										
	<b>* Allocation Difference *</b>		<b>-129.9</b>	0.0	0.0	-129.9	0.0	0.0	0.0	0.0	0	0	0
<b>Services to the Seriously Mentally Ill</b>													
	MH Trust: Housing - Grant 575.08 Bridge Home Program & Expansion	Gov Amd	IncM	750.0	0.0	0.0	0.0	0.0	750.0	0.0	0	0	0
<i>This project replicates successful transition programs in other states for individuals 'cycling' through emergency and institutional settings. The focus locations for the project will ultimately expand to include Anchorage, Juneau and possibly other locations where Alaska Housing Finance Corporation administers rental subsidies. Institutions targeted for re-entry include: Alaska Psychiatric Institution, Department of Corrections' facilities, hospital emergency services and other high-cost social service and health programs. The project allows for up to 100 individuals to receive less expensive, continuous services, including a rental subsidy (estimate based on charging the tenant 30% of income) in order to 'bridge' from institutional discharge onto the U.S. Department of Housing and Urban Development Housing Choice voucher program (formerly known as the Section 8 housing voucher program) paired with intensive in-home support services. This pairing of resources for beneficiaries has proven successful in other states in reducing recidivism and impacts on service systems. Alaska's success rates have been demonstrated in reduction of return to Corrections and in use of emergency level services in the initial years of the project. This request allows for expansion of the program in other critical parts of the state outside of Anchorage and assists in increasing the intensity of services for people with more complex service delivery needs.</i>													
	1092 MH TAAR (Other)		750.0										
	MH Trust: Housing - Grant 575.08 Bridge Home Program & Expansion	Gov Amd	Inc	200.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
<i>This project replicates successful transition programs in other states for individuals 'cycling' through emergency and institutional settings. The focus locations for the project will ultimately expand to include Anchorage, Juneau and possibly other locations where Alaska Housing Finance Corporation administers rental subsidies. Institutions targeted for re-entry include: Alaska Psychiatric Institution, Department of Corrections' facilities, hospital emergency services and other high-cost social service and health programs. The project allows for up to 100 individuals to receive less expensive, continuous services, including a rental subsidy (estimate based on charging the tenant 30% of income) in order to 'bridge' from institutional discharge onto the U.S. Department of Housing and Urban Development Housing Choice voucher program (formerly known as the Section 8 housing voucher program) paired with intensive in-home support services. This pairing of resources for beneficiaries has proven successful in other states in reducing recidivism and impacts on service systems. Alaska's success rates have been demonstrated in reduction of return to Corrections and in use of emergency level services in the initial years of the project. This request allows for expansion of the program in other critical parts of the state outside of Anchorage and assists in increasing the intensity of services for people with more complex service delivery needs.</i>													
	1037 GF/MH (UGF)		200.0										
	MH Trust: Housing - Grant 604.08 Department of Corrections Discharge Incentive Grants	Gov Amd	IncM	100.0	0.0	0.0	0.0	0.0	100.0	0.0	0	0	0

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<b>Behavioral Health (continued)</b>													
<b>Services to the Seriously Mentally Ill (continued)</b>													
MH Trust: Housing - Grant 604.08 Department of Corrections Discharge Incentive Grants (continued)													
<i>This project is a joint strategy in the Trust's Affordable Housing Initiative and the Disability Justice workgroups. It is consistent with the Housing focus on 'community re-entry' by targeting beneficiaries exiting Department of Corrections settings who are challenging to serve and who require extended supervision and support services to prevent repeat incarceration and becoming a public safety concern. These funds will be administered by the Division of Behavioral Health as Assisted Living Home vouchers or support service resources. Resources will also be targeted to increase the skill level and capacity for assisted living providers to successfully house this population.</i>													
1092 MHTAAR (Other)			100.0										
MH Trust: Housing - Grant 604.08 Department of Corrections Discharge Incentive Grants	Gov Amd	Inc	200.0	0.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
<i>This project is a joint strategy in the Trust's Affordable Housing Initiative and the Disability Justice workgroups. It is consistent with the Housing focus on 'community re-entry' by targeting beneficiaries exiting Department of Corrections settings who are challenging to serve and who require extended supervision and support services to prevent repeat incarceration and becoming a public safety concern. These funds will be administered by the Division of Behavioral Health as Assisted Living Home vouchers or support service resources. Resources will also be targeted to increase the skill level and capacity for assisted living providers to successfully house this population.</i>													
1037 GF/MH (UGF)			200.0										
<b>* Allocation Difference *</b>			<b>1,250.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>1,250.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Designated Evaluation and Treatment</b>													
Add/Delete Pair: Transfer from Psychiatric Emergency Services for Hospital and Transport Rate Increases	Gov Amd	Inc	129.9	0.0	0.0	0.0	0.0	0.0	129.9	0.0	0	0	0
<i>In recent fiscal years the services line in the Psychiatric Emergency Service component has been underutilized. A transfer of authority to the Designated Evaluation and Treatment component is necessary to defray a 14--15% increase to the Medicaid daily rates for the two Designated Evaluation and Treatment hospitals (Bartlett Regional Hospital and Fairbanks Memorial Hospital) and the increased transport rates for the statutorily required Title 47 transports.</i>													
1037 GF/MH (UGF)			129.9										
<b>* Allocation Difference *</b>			<b>129.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>129.9</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Services for Severely Emotionally Disturbed Youth</b>													
MH Trust: BTKH - Grant 2463.03 Evidence Based Family Therapy Models	Gov Amd	Inc	270.0	0.0	0.0	270.0	0.0	0.0	0.0	0.0	0	0	0
<i>This increment will provide \$400.0 MHTAAR and \$270.0 GF to sustain the evidence based family therapy projects and support the system investment that has been developed for their training and ongoing supervision, deploying it strategically to the cases for which it is most beneficial, and to develop an in-state owned and directed family clinic component for statewide application. During FY2014, Health &amp; Social Services will be turning to more cost effective means to expand family services statewide.</i>													
1037 GF/MH (UGF)			270.0										



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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Behavioral Health (continued)</b>													
<b>Services for Severely Emotionally Disturbed Youth (continued)</b>													
MH Trust: BTKH - Grant 2463.03 Evidence Based Family Therapy Models (Sustain Parenting w/Love & Limits Project)	Gov Amd	IncM	200.0	0.0	0.0	50.0	0.0	0.0	150.0	0.0	0	0	0
<i>This increment will provide \$400.0 MHTAAR and \$600.0 GF to sustain the current Parenting with Love and Limits projects and support the system investment that has been developed for their training and ongoing supervision, deploying it strategically to the cases for which it is most beneficial, and to develop an in-state owned and directed family clinic component for statewide application. For FY2014, Health &amp; Social Services is requesting to continue the funding for the current, successful Parenting with Love and Limits project and to fund a new more cost effective pilot project to expand family services statewide.</i>													
1092 MHTAAR (Other)			200.0										
MH Trust: BTKH - Grant 2463.03 Evidence Based Family Therapy Models (Expand Family Services Statewide)	Gov Amd	Inc	200.0	0.0	0.0	50.0	0.0	0.0	150.0	0.0	0	0	0
<i>This increment will provide \$400.0 MHTAAR and \$600.0 GF to sustain the current Parenting with Love and Limits projects and support the system investment that has been developed for their training and ongoing supervision, deploying it strategically to the cases for which it is most beneficial, and to develop an in-state owned and directed family clinic component for statewide application. For FY2014, Health &amp; Social Services is requesting to continue the funding for the current, successful Parenting with Love and Limits project and to fund a new more cost effective pilot project to expand family services statewide.</i>													
1092 MHTAAR (Other)			200.0										
MH Trust: BTKH - Grant 2466.04 Transitional Aged Youth	Gov Amd	IncM	200.0	0.0	0.0	0.0	0.0	0.0	200.0	0.0	0	0	0
<i>This increment will provide \$200.0 MHTAAR for FY2014 for the Transition to Independence Process (TIP). This will maintain stable funding between FY2014 and FY2013 and allow expansion to additional sites as the funding for earlier sites decreases and they shift towards sustaining TIP through Medicaid, insurance and other resources to the extent possible. In addition, during FY2013 and FY2014, we will continue to invest in developing in-state trainers and train-the-trainer capacity to improve the sustainability of TIP services.</i>													
1092 MHTAAR (Other)			200.0										
<b>* Allocation Difference *</b>			<b>870.0</b>	<b>0.0</b>	<b>0.0</b>	<b>370.0</b>	<b>0.0</b>	<b>0.0</b>	<b>500.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Alaska Psychiatric Institute</b>													
MH Trust Cont - Grant 2467.04 Impact Model of Treating Depression	Gov Amd	IncM	75.0	0.0	0.0	75.0	0.0	0.0	0.0	0.0	0	0	0
<i>The Alaskan IMPACT project is using the IMPACT model (Improving Mood - Promoting Access to Collaborative Treatment), a collaborative model for treating depression in adults, to establish protocols for identifying and intervening with depressed Alaskans within the primary care setting, where people feel most comfortable. This tested model relies on regular contact with a depression care manager and psychiatrist, with an emphasis on identifying manageable steps toward positive lifestyle changes, and working closely with primary care physicians providing patient education and support for the antidepressant medication when needed.</i>													
<i>This increment will support use of telehealth equipment and other technology for a psychiatrist from API to provide weekly consultation to participating clinics providing integrated care and using the IMPACT model in the treatment of depression.</i>													
1092 MHTAAR (Other)			75.0										

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Behavioral Health (continued)</b>													
<b>Alaska Psychiatric Institute (continued)</b>													
AMD: Hospital Medicare Rate Increase	Gov Amd	Inc	350.0	0.0	0.0	350.0	0.0	0.0	0.0	0.0	0	0	0
<i>The division of Behavioral Health requests additional statutory designated program receipt authority. The Alaska Psychiatric Institute receives statutory designated program receipt revenue from Medicare receipts. The division is projecting a 6.5% increase in statutory designated program receipt revenue at Alaska Psychiatric Institute due to an increase in the hospital cost report that sets the hospital daily rate for Medicare. In FY2012, actual statutory designated program receipt collections at the hospital exceeded authority by \$697.9. The division is projecting statutory designated program receipt collection in FY2014 equal to the \$7,180.0 collected in FY2012.</i>													
<i>This is a new request for FY2014. This request was not included in the FY2014 Governor's budget as evaluation of the need was ongoing.</i>													
<i>FY2014 December Budget: \$32,411.5 FY2014 Total Amendments: \$350.0 FY2014 Total: \$32,761.5</i>													
1108 Stat Desig (Other)			350.0										
<b>* Allocation Difference *</b>			425.0	0.0	0.0	425.0	0.0	0.0	0.0	0.0	0	0	0
<b>Alaska Mental Health Board and Advisory Board on Alcohol and Drug Abuse</b>													
MH Trust: Cont - Grant 605.08 ABADA/AMHB	Gov Amd	Inc	448.6	289.6	87.0	60.3	11.7	0.0	0.0	0.0	0	0	0
Joint Staffing													
<i>This Trust funding provides a supplement to the basic operations of the merged staff of Advisory Board on Alcoholism and Drug Abuse (ABADA) and Alaska Mental Health Board (AMHB) and requires the boards to meet the data, planning and advocacy performance measures negotiated with the Trust.</i>													
1092 MHTAAR (Other)			448.6										
<b>* Allocation Difference *</b>			448.6	289.6	87.0	60.3	11.7	0.0	0.0	0.0	0	0	0
<b>** Appropriation Difference **</b>			4,582.8	731.3	141.2	1,292.1	38.3	0.0	2,379.9	0.0	0	0	0
<b>Children's Services</b>													
<b>Front Line Social Workers</b>													
Social Worker Class Study Implementation	Gov Amd	Inc	1,500.0	1,500.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>At the request of the Alaska State Employees Association (ASEA) union, the Department of Administration, Division of Personnel and Labor Relations conducted a job classification study of the social worker job class. The study affected 288 caseworkers within the Office of Children's Services. The focus of the study was to identify and correct inequity in like-pay for like-work, which is the basis of the state's classification system.</i>													
<i>The case workers were in a dual job class structure; Children's Services Specialist (CSS) and Social Workers (SW). Because of having and maintaining a social work license, the SWs were paid at higher ranges than CSSs. As the study progressed, the children's services manager and staff manager job class series were added to the study to ensure the entire scope of the work was identified and appropriately classified.</i>													
<i>The study determined that licensure was not a requirement to perform the case work, and a single protective services job class series was developed. Ranges were assigned to the new series based on classification principles.</i>													



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**Agency: Department of Health and Social Services**

Children's Services (continued)	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Front Line Social Workers (continued)</b>													
* Allocation Difference *			1,750.0	1,500.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
<b>Family Preservation</b>													
Provide Needed Level of Service at 10 Existing Child Advocacy Centers Due to Growing Caseloads	Gov Amd	Inc	400.0	0.0	0.0	0.0	0.0	0.0	400.0	0.0	0	0	0
<p><i>The division's base budget for support of the ten existing Child Advocacy Centers is \$2,538.4. Support levels have not changed since program inception. Grantees are struggling to provide the needed level of service, as referrals to Child Advocacy Centers are growing up to 70% in some communities. This makes it difficult for the Child Advocacy Centers to adequately respond to the complex and growing needs of those served.</i></p> <p><i>Increased funding would support the ten centers' existing level of service and allow them to expand to meet the increasing demands for services in the communities served and ensure the needed resources are available locally for families served.</i></p> <p><i>This increment is part of the Governor's Domestic Violence Sexual Assault initiative.</i></p>													
1004 Gen Fund (UGF)			400.0										
Strengthening Families Through Early Care and Education	Gov Amd	Inc	250.0	0.0	0.0	250.0	0.0	0.0	0.0	0.0	0	0	0
<p><i>Strengthening Families is a proven, cost-effective research-based strategy to prevent child abuse and neglect, reduce adverse childhood experiences, strengthen families, and support optimal child development. The strategy involves child and family-serving organizations working together to build protective factors around children by supporting family strengths and resiliency. The strategy embeds the protective factors framework in already existing early childhood, youth, and family support programs, schools, and communities across the state.</i></p> <p><i>As a comprehensive approach to working with families, Strengthening Families is intended to be adapted to different contexts, programs and service systems. This allows each partner to apply the Protective Factors Framework within the context of their own work with children and families -- whether that is domestic violence services, family child care, services for children with special needs, as well as others. It can be implemented through low-cost and no-cost innovations, and has helped agencies shape existing resources around common goals.</i></p> <p><i>Funded activities:</i></p> <ul style="list-style-type: none"> <li>-Ensure the sustainability of gains to date by providing continued support for the child and family programs and Division offices currently implementing Strengthening Families Alaska</li> <li>-Recruit and support ten new programs to embed the Strengthening Families Protective Factors Framework in their work.</li> <li>-Provide community-wide training and stakeholder meetings in four to eight communities to enhance collaboration focused on reducing adverse childhood experiences and implementing Strengthening Families Alaska</li> <li>-Provide "Learning Network" for Strengthening Families Programs across the state</li> <li>-Facilitate a systematic and coordinated approach to implementing Strengthening Families Alaska by working with key partners such as the CHOOSE RESPECT campaign, the Alaska Children's Trust, The Alaska Mental Health Trust, The Alaska Mental Health Board, the University of Alaska, key programs in the Department of Health &amp; Social Services and the Department of Education and Early Development, United Way of Anchorage, parents,</li> </ul>													

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Children's Services (continued)</b>													
<b>Family Preservation (continued)</b>													
Strengthening Families Through Early Care and Education (continued)													
community members, etc.													
-Support continued data collection, monitoring and reporting.													
This increment is part of the Governor's Domestic Violence Sexual Assault initiative.													
	1004 Gen Fund (UGF)		250.0										
<b>* Allocation Difference *</b>			650.0	0.0	0.0	250.0	0.0	0.0	400.0	0.0	0	0	0
<b>Foster Care Base Rate</b>													
	Social Security Income for Children in State Custody	Gov Amd	Inc	900.0	0.0	0.0	0.0	0.0	900.0	0.0	0	0	0
This is Social Security Income and child support receipts for children in the Office of Children's Services (OCS) protective custody. The division will apply for and collect these Social Security Income receipts for eligible children in custody and use this revenue to offset cost-of-care. The division of Child Support Enforcement Division receive Child Support receipts for children in state custody. This income supplants Title IV-E and state general funds. Currently, collections exceed available authority. The component's general fund program receipt authority is currently \$2,100.0. In FY2012, collections totaled \$2,759.7 and in FY2011, \$2,658.4. Without this increment, the division is unable to fully utilize Social Security Income and child support collections to offset the cost of care for children in protective custody.													
	1005 GF/Prgm (DGF)		900.0										
	AMD: Foster Care Rate Adjustment	Gov Amd	Inc	2,600.0	0.0	0.0	0.0	0.0	2,600.0	0.0	0	0	0
In recent years, the federal cost of care guidelines, interpreted by states, have come under increased scrutiny at the national level. One concern expressed is that states are not meeting the full costs of care for children in foster care custody. In some instances, states have engaged in cost of care rate studies to determine a methodology for establishing and maintaining costs of care for foster care. The state of Indiana, in response to litigation and as part of a settlement, engaged in a rate study to define current foster care rates.													
In other instances, states have experienced litigation to determine if the foster care costs of care are meeting the full costs of caring for a child. Most recently, the Ninth Circuit Court of Appeals ruled against the state of California in their rate structure and methodology in California Alliance of Child and Family Services vs. Allenby, 589 F 3d 1017 (9th Cir 2009). This decision was issued in early 2011 and became the basis for litigation in Alaska in the Mulgrew vs. State of Alaska matter. In the Mulgrew matter, the court determined that, while the basic structures of how the Office of Children's Services division established foster care rates has merit, the application of the 2003 federal poverty guidelines and 1986 geographic differentials were dated and the use of age and percentages to adjust the base rates were arbitrary because they were not based on a solid methodology.													
The Office of Children's Services recently completed a foster care rate study. This study was tasked with examining whether the division's rates are sufficient to support the costs of caring for children in foster care, updating the division's current methodology, and providing alternatives to the division's rate structure. Through the study, it was determined that most states use the US Department of Agriculture's (USDA) report of Expenditures on Children by Families data to develop the reimbursable rates for basic foster care maintenance.													
Based on the findings of the foster care rate study, the request for the Office of Children's Services, Foster Care													



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**Agency: Department of Health and Social Services**

Children's Services (continued)	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
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**Subsidized Adoptions & Guardianship (continued)**

AMD: Title IV-E Participation and Calculation

Rate Change Mandate (continued)

*The Federal Child Welfare Policy Manual mandated changes to the way states calculate their federal Title IV-E foster care participation rate methodology. With this mandate the federal participation rate is decreased by 5%. Each percentage point reduction equates to approximately \$500.0 in lost federal receipts annually.*

*This is a new request for FY2014. This request was not included in the FY2014 Governor's budget as evaluation of the need was ongoing.*

FY2014 December Budget: \$23,431.6

FY2014 Total Amendments: \$1,850.0

FY2014 Total: \$25,281.6

1002 Fed Rcpts (Fed) -2,500.0

1004 Gen Fund (UGF) 2,500.0

AMD: Foster Care Rate Adjustment	Gov Amd	Inc	1,850.0	0.0	0.0	0.0	0.0	0.0	1,850.0	0.0	0	0	0
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*In recent years, the federal cost of care guidelines, interpreted by states, have come under increased scrutiny at the national level. One concern expressed is that states are not meeting the full costs of care for children in foster care custody. In some instances, states have engaged in cost of care rate studies to determine a methodology for establishing and maintaining costs of care for foster care. The state of Indiana, in response to litigation and as part of a settlement, engaged in a rate study to define current foster care rates.*

*In other instances, states have experienced litigation to determine if the foster care costs of care are meeting the full costs of caring for a child. Most recently, the Ninth Circuit Court of Appeals ruled against the state of California in their rate structure and methodology in California Alliance of Child and Family Services vs. Allenby, 589 F 3d 1017 (9th Cir 2009). This decision was issued in early 2011 and became the basis for litigation in Alaska in the Mulgrew vs. State of Alaska matter. In the Mulgrew matter, the court determined that, while the basic structures of how the Office of Children's Services division established foster care rates has merit, the application of the 2003 federal poverty guidelines and 1986 geographic differentials were dated and the use of age and percentages to adjust the base rates were arbitrary because they were not based on a solid methodology.*

*The Office of Children's Services recently completed a foster care rate study. This study was tasked with examining whether the division's rates are sufficient to support the costs of caring for children in foster care, updating the division's current methodology, and providing alternatives to the division's rate structure. Through the study, it was determined that most states use the US Department of Agriculture's (USDA) report of Expenditures on Children by Families data to develop the reimbursable rates for basic foster care maintenance.*

*Based on the findings of the foster care rate study, the request for the Office of Children's Services, Subsidized Adoptions and Guardianship is \$1,850.0 and is comprised of:*

*\$525.0 for increasing the foster care base rate*

*\$725.0 for adjusting geographic differentials from the current system to the 2008 regional differentials currently used by Medicaid*





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	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Children's Services (continued)</b>													
<b>Infant Learning Program Grants (continued)</b>													
MH Trust: BTKH - Grant 2550.04 Early Intervention for Young Children (Maintenance of Services) (continued)													
<i>(BTKH) program is completed.</i>													
<i>The FY2014 funding will support:</i>													
<i>-Eight additional Social Emotional Pyramid Model sites (21 total sites across Alaska).</i>													
<i>-A Family Preservation project focused on preventing young children in the child protection system from being removed from their homes by providing crisis intervention and support services to their families.</i>													
<i>-Two additional Early Childhood Mental Heal Consultation Learning Network pilot projects (five total). In addition to professional development, case consultation and Reflective Facilitation Groups, these Networks will build a "system of care" with Community Mental Health, Infant Learning and Office of Children Services Child Protective Services at the core of these efforts. Additionally, Head Start/Early Head Start, family support agencies, early care and learning programs, medical providers, and other community partners will be included.</i>													
	1092 MHTAAR (Other)		175.0										
	MH Trust: BTKH - Grant 2550.04 Early Intervention for Young Children (Expansion of Services)	Gov Amd	25.0	0.0	0.0	0.0	0.0	0.0	25.0	0.0	0	0	0
<i>This increment provides \$200.0 Mental Health Trust Authority Authorized Receipts (MHTAAR) + \$400.0 general fund to expand early intervention efforts for young children and to maintain them after Bring The Kids Home (BTKH) program is completed.</i>													
<i>The FY2014 funding will support:</i>													
<i>-Eight additional Social Emotional Pyramid Model sites (21 total sites across Alaska).</i>													
<i>-A Family Preservation project focused on preventing young children in the child protection system from being removed from their homes by providing crisis intervention and support services to their families.</i>													
<i>-Two additional Early Childhood Mental Heal Consultation Learning Network pilot projects (five total). In addition to professional development, case consultation and Reflective Facilitation Groups, these Networks will build a "system of care" with Community Mental Health, Infant Learning and Office of Children Services Child Protective Services at the core of these efforts. Additionally, Head Start/Early Head Start, family support agencies, early care and learning programs, medical providers, and other community partners will be included.</i>													
	1092 MHTAAR (Other)		25.0										
	Child Abuse Prevention and Treatment Act Integration	Gov Amd	1,500.0	0.0	0.0	0.0	0.0	0.0	1,500.0	0.0	0	0	0
<i>The Child Abuse Prevention and Treatment Act (CAPTA) is federal legislation requiring all children under the age of three with substantiated reports of harm be referred to the Infant Learning Program (Part C of the Individuals with Disabilities Act) for evaluation and therapeutic and/or educational services.</i>													

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Children's Services (continued)	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
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**Infant Learning Program Grants (continued)**

Child Abuse Prevention and Treatment Act

Integration (continued)

*This request will cover the costs of 625 evaluations of children between ages birth to three where an incident of substantiated maltreatment has occurred. The funding will also cover the cost of therapeutic and educational services for 500 children (120 currently being served plus an anticipated additional 380 in FY2014), identified through multi-disciplinary evaluations, who meet our eligibility criteria.*

*Cost Breakdown per Child*

*625 evaluations @ \$600 per = \$375,000*

*500 children receiving services (120 currently served + 380 additional Part C eligible children)*

*@ Cost per child of \$5500 = \$2,750,000*

*This increment is part of the Governor's Domestic Violence Sexual Assault initiative.*

1037 GF/MH (UGF) 1,500.0

MH Trust: Gov Cncl - 1207.06 Early

Gov Amd IncM

80.0

0.0

0.0

80.0

0.0

0.0

0.0

0.0

0

0

0

Intervention/Infant Learning Pgm Positive

Parenting Training

*According to the Center on the Social and Emotional Foundations for Early Learning, the prevalence rate of challenging behaviors among young children in childcare and classroom settings is 10 to 30%. Childhood ratings of behavior problems at age 3 and 5 are the best predictors of later antisocial outcomes. Around 48% of children with problem behaviors in kindergarten have been placed in special education by the 4th grade. Over 65% of students identified with emotional and behavioral disorders drop out of school, which ultimately leads to poor job outcomes, limited income, and patterns of failure that may persist into adulthood. [Fox, L. and Smith, B., Policy Brief: Promoting Social, Emotional and Behavioral Outcomes of Young Children Served Under IDEA, January 2007.]*

*While many approaches and methods have been used in various early childhood settings, the "Teaching Pyramid" is an evidence based research model for "supporting social competence and preventing challenging behavior in young children." [National Association for the Education of Young Children, Young Children, July 2003]. The model addresses challenging behaviors of young children through a comprehensive and systematic process. The "pyramid" framework starts at the lower level of intervention and moves upward: 1) positive relationships with children, families, and providers; 2) home childcare and classroom preventive practices; 3) social and emotional teaching strategies; and 4) intensive individualized interventions. Implementing the teaching pyramid training component for families interested in reducing challenging behavior truly works.*

*Training will be provided to foster and biological families on the following six (3-hour) modules:*

- 1) "Making a Connection: Building Positive Relationships with Children"
- 2) "Making It Happen: The Power of Encouragement"
- 3) "Why Children Do What They Do: Determining the Meaning of Behavior"
- 4) "Teach Me What to Do: Making Expectations Clear and Consistent"
- 5) "Facing the Challenge -- Part 1: Strategies to Promote Positive Child Behavior in Home & Community Settings"
- 6) "Facing the Challenge -- Part 2: Developing and Using an Individualized Positive Behavioral Support Plan"



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<b>Health Care Services (continued)</b>													
<b>Health Facilities Licensing and Certification (continued)</b>													
Health Facilities Licensing and Certification (continued)													
<i>the Centers for Medicare and Medicaid Services for those facilities that take part in the federal Medicare and state Medicaid programs. The Centers for Medicare and Medicaid Services mandate strict timeframes of when inspections are to be completed.</i>													
<i>The Health Facilities Licensing and Certification section inspects not only the above facilities, but is also responsible for conducting an increasing number of complaint investigations at these facilities to ensure quality of care and the safety of vulnerable Alaskans. Surveyors are often required to be onsite in as little as 48 hours when an urgent situation arises. These complaint investigations are scheduled in addition to a full survey schedule and are very costly to conduct.</i>													
<i>FY 2013 approved increment (if any): \$0.0</i>													
<i>FY 2013 total authority: \$2,189.2</i>													
<i>FY 2013 supplemental request: \$0.0</i>													
<i>FY 2014 increment request: \$457.0</i>													
1003 G/F Match (UGF)			457.0										
Reduce Authority Interagency Receipt Authority	Gov Amd	Dec	-80.7	0.0	0.0	-80.7	0.0	0.0	0.0	0.0	0	0	0
<i>Health Care Services requests approval to decrement \$80.7 of interagency receipt authorization from Health Facilities Licensing and Certification. At this time, there is no realistic expectation that Health Facilities Licensing and Certification will collect these receipt. The need for this authorization within the Certification and Licensing component in anticipation of additional background check fees from divisions in Health and Social Services as well as other state agencies will be addressed in the Governor's Amended Budget.</i>													
1007 IA Rcpts (Other)			-80.7										
Maintain Civil Penalties Receipts	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>Health Facilities Licensing and Certification may impose civil money penalties for nursing homes for the Centers for Medicare and Medicaid Services, per 42 Code of Federal Regulations--Part 488. Civil money penalties collected by the state must be applied to the protection of the health or property of residents of facilities that the state or the Centers for Medicare and Medicaid Services finds noncompliant. These activities must be approved by the Centers for Medicare and Medicaid Services.</i>													
<i>Health Facilities Licensing and Certification currently has an authorized budget of \$60.0 in general fund program receipts. It has been determined that these receipts are more appropriately recorded as statutory designated program receipts rather than general fund program receipts.</i>													
<i>Due to the restricted requirement of the expenditure of these funds, any unexpended civil money penalties are not eligible for fund sweeps.</i>													
<i>Any unexpended portion of these funds must be rolled forward at the end of each fiscal year.</i>													
1005 GF/Prgm (DGF)			-60.0										
1108 Stat Desig (Other)			60.0										
<b>* Allocation Difference *</b>			<b>376.3</b>	<b>437.0</b>	<b>0.0</b>	<b>-60.7</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Health Care Services (continued)</b>													
<b>Certification and Licensing</b>													
Delete Federal Receipt Authorization	Gov Amd	Dec	-500.0	-100.0	0.0	-400.0	0.0	0.0	0.0	0.0	0	0	0
Transferred from Public Health in FY2012													
<i>Health Care Services requests a decrement of \$500.0 excess federal authorization from the Certification and Licensing component. This component was transferred from the Division of Public Health with excess federal receipts authorization in the FY2012 budget cycle. There is no realistic expectation of collecting these receipts. Therefore, the Division of Health Care Services requests this decrement to place the FY2014 federal receipts budget at a more realistic level.</i>													
1002 Fed Rcpts (Fed)			-500.0										
* Allocation Difference *			-500.0	-100.0	0.0	-400.0	0.0	0.0	0.0	0.0	0	0	0
** Appropriation Difference **			-123.7	337.0	0.0	-460.7	0.0	0.0	0.0	0.0	0	0	0

**Juvenile Justice**

**McLaughlin Youth Center**

Health Services for Youth in Juvenile Justice Facilities	Gov Amd	Inc	400.0	0.0	0.0	183.0	0.0	0.0	217.0	0.0	0	0	0
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*Medical costs within the Division of Juvenile Justice continue to rise. As contracts with providers are renewed, we are consistently seeing an increase in the cost to obtain services. For the last several years, the division has required supplemental funding to cover the cost of medical services that youth in our secure, locked facilities require. In FY2010, the division requested and received \$136.0 to cover medical costs above what was budgeted. In FY2011, the amount requested and received was \$450.0 and in FY2012, the amount requested and received was \$627.5.0*

*The division is requesting an increment in the amount of \$400.0 to fund medical expenses that are above and beyond what is budgeted. The division is in the process of implementing a procedure to ensure that insurance information is collected at the time youth enter our secure facilities. That way, if a youth needs medical attention, the family's insurance will be billed as primary and the division will cover any remaining costs. The division anticipates that some costs will be covered by a family's insurance, but the amount is unknown at this time and will remain that way until the division directive is in place. And of course there are many unknowns from year to year as to who will have health insurance. The division expects that between the additional fees that will be covered by family insurance and the \$400.0 increment, the division's costs for various medical, dental, and psychiatric services will be appropriately funded for FY2014 and beyond.*

*The division is not required by statute to provide medical, dental, and psychiatric needs to youth in our facilities and the federal Medicaid laws do not allow youth that are incarcerated to be covered by Medicaid; so the division is required to pick up these costs. If this increment is not funded, then the division will continue to request supplemental funding on an annual basis.*

*The division's core services impacted by this request are: short-term secure detention and court ordered institutional treatment for juvenile offenders.*

*For the last several years, the Division of Juvenile Justice has required supplemental authority to cover the cost of health (medical, psychiatric, dental, etc.) services that youth in our secure, locked facilities require. The division has looked at the average cost for the last three years for each facility and what is currently in the budget to cover these costs. Below is the anticipated amount needed for the McLaughlin Youth Center component to cover health*



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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Juvenile Justice (continued)</b>													
<b>Probation Services (continued)</b>													
MH Trust: Dis Justice - Grant 4688 Div Juvenile Justice Trauma Informed Care (continued)													
<i>This will result in a decrease in youth requiring a restraint and/or room confinement, an overall increase in safety for staff and youth and overall more positive outcomes for DHSS-DJJ involved youth.</i>													
<i>The FY14 increment support DHSS-DJJ efforts to become a trauma informed organization.</i>													
	1092 MHTAAR (Other)		75.0										
	MH Trust: Dis Justice - 4302.01 Mental Health Clinician Oversight In Youth Facilities	Gov Amd	IncM	152.9	152.9	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>The MH Trust: Dis Justice - Mental Health Clinician Oversight in the Division of Juvenile Justice (DJJ) Youth Facilities is a position that provides supervisory oversight to mental health clinicians (MHCs) in areas such as clinical service delivery, case consultation, development of training plans, and expertise related to confidentiality and ethical issues. In addition, this position works with DJJ senior management to further the integration and development of statewide behavioral health services within the 24/7 secure facilities as well as the probation services of DJJ. Currently, DJJ mental health clinical staff is located in six locations and provides services in eight juvenile facilities and two probation offices statewide.</i>													
<i>This project is a critical component of the Disability Justice Focus Area plan by ensuring there are quality mental health services available to Alaskan youth involved in the juvenile justice system statewide. The FY14 MHTAAR increment maintains the FY13 momentum of effort to perform the aforementioned services.</i>													
	1092 MHTAAR (Other)		152.9										
	MH Trust: Dis Justice - Grant 3504.02 Div Juvenile Justice Rural Re-entry Specialist	Gov Amd	IncM	110.9	110.9	0.0	0.0	0.0	0.0	0.0	0	0	0
<i>This project maintains a key component of the Disability Justice Focus Area by proactively engaging the local communities, treatment providers and natural supports in rural communities in a planning process to assist youth returning to their rural home communities. The project will assist rural communities in developing prevention and/or early intervention activities, make recommendations for training efforts, etc. to reduce the risk of local youth contact with the juvenile justice system, which in turn will decrease the risk of recidivism and the associated high costs of care within the juvenile justice system or out-of-home placement.</i>													
<i>The FY14 MHTAAR increment maintains the FY13 momentum of effort to perform the aforementioned services.</i>													
	1092 MHTAAR (Other)		110.9										
<b>* Allocation Difference *</b>				<b>413.8</b>	<b>263.8</b>	<b>0.0</b>	<b>150.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>** Appropriation Difference **</b>				<b>813.8</b>	<b>263.8</b>	<b>0.0</b>	<b>333.0</b>	<b>0.0</b>	<b>0.0</b>	<b>217.0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>
<b>Public Assistance</b>													
<b>Alaska Temporary Assistance Program</b>													
	Alaska Temporary Assistance Program Growth	Gov Amd	Inc	3,850.0	0.0	0.0	0.0	0.0	3,850.0	0.0	0	0	0
<i>Alaska Temporary Assistance Program (ATAP) provides temporary financial assistance to needy families with children, while adults work to become self-sufficient. The costs associated with this program are supported by the federal Temporary Assistance for Needy Families block grant. The demand for this program has increased resulting in the need for additional federal authority.</i>													
	1002 Fed Rcpts (Fed)		3,850.0										

**2013 Legislature - Operating Budget  
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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Public Assistance (continued)</b>													
<b>Alaska Temporary Assistance Program (continued)</b>													
* Allocation Difference *			3,850.0	0.0	0.0	0.0	0.0	0.0	3,850.0	0.0	0	0	0
<b>Adult Public Assistance</b>													
Adult Public Assistance Program Growth	Gov Amd	Inc	2,284.0	0.0	0.0	0.0	0.0	0.0	2,284.0	0.0	0	0	0
<i>Enrollment in the Adult Public Assistance (APA) Program is increasing, particularly in the Aid to the Disabled &amp; Blind category. This growth is similar to that experienced by the Supplemental Security Income (SSI) program in Alaska. Both the APA and SSI programs have seen a 4% increase in the recipients who are disabled or blind. Based on demographic trends for Alaska, it is anticipated that the old age population will also increase in coming years. As a result, expenditures for the program are expected to increase. Overall, the number of individuals served by the program is expected to continue to increase by over 5% a year. Current funding levels are inadequate to meet projected expenditures.</i>													
1004 Gen Fund (UGF)			2,244.0										
1007 I/A Rcpts (Other)			40.0										
* Allocation Difference *			2,284.0	0.0	0.0	0.0	0.0	0.0	2,284.0	0.0	0	0	0
<b>General Relief Assistance</b>													
General Relief Growth	Gov Amd	Inc	1,140.0	0.0	0.0	0.0	0.0	0.0	1,140.0	0.0	0	0	0
1004 Gen Fund (UGF)			1,140.0										
* Allocation Difference *			1,140.0	0.0	0.0	0.0	0.0	0.0	1,140.0	0.0	0	0	0
<b>Permanent Fund Dividend Hold Harmless</b>													
Permanent Fund Dividend Hold Harmless Program Growth	Gov Amd	Inc	650.0	0.0	0.0	0.0	0.0	0.0	650.0	0.0	0	0	0
<i>As the public assistance caseload grows, there is increased need for Permanent Fund Dividend (PFD) Hold Harmless payments required by state law. The law mandates that recipients of public assistance programs not lose benefits due to receipt of the Alaska Permanent Fund Dividend. Current funding is not sufficient to cover the amount of hold harmless payments required due to the growth of the Supplemental Security Income (SSI), Food Stamp, and the Adult Public Assistance (APA) programs. The SSI and APA programs have grown by over 4% in recent years, and this trend is expected to continue. The Food Stamp program caseload grew over 16% between FY2010 and FY2011 and we expect the program to continue to grow at a rate of 16% in FY2012.</i>													
<i>The immediate need for this funding increase is \$600.0. However, based on current FY2012 funding it could be as high as \$1,400.0 by FY2014 depending on the amount of the PFD and whether caseloads grow as projected.</i>													
<i>If funding is not increased, there will not be sufficient funds for the PFD Hold Harmless program and general funds will need to be used to meet the state requirement. Failure to fund the FY2013 increment request would mean a potential short fall of \$1,400.0 in FY2014.</i>													
1050 PFD Fund (DGF)			650.0										
LFD Reconciliation: Replace Correct Fund (PFD Fund) with GF/Prgm to match the Governor Budget (DO NOT CHOOSE)	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1005 GF/Prgm (DGF)			650.0										
1050 PFD Fund (DGF)			-650.0										



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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Public Assistance (continued)</b>													
<b>Permanent Fund Dividend Hold Harmless (continued)</b>													
* Allocation Difference *			650.0	0.0	0.0	0.0	0.0	0.0	650.0	0.0	0	0	0
<b>Energy Assistance Program</b>													
L	Reverse Energy Assistance Funding Sec15(a) Ch15 SLA2012 P76 L17-23 (HB284)	Gov Amd	-3,385.8	0.0	0.0	0.0	0.0	0.0	-3,385.8	0.0	0	0	0
<i>If the amount appropriated in section 1 chapter 15 SLA 2012 is not sufficient to pay assistance payments under AS 47.25.621-47.25.626 without proration, the amount necessary to make payments under AS 47.25.621-47.25.626 without proration, estimated to be \$11,150,300 (Add'l enacted estimate with increased CHP), is appropriated from the general fund to the Department of Health and Social Services, Public Assistance, Energy Assistance Program, for the purpose of making payments under AS 47.25.621 - 47.25.626, for the fiscal year ending June 30, 2013.</i>													
	1004 Gen Fund (UGF)		-3,385.8										
L	Reverse Energy Assistance Funding Sec15(b) Ch15 SLA2012 P76 L17-23 (HB284)	Gov Amd	-5,000.0	0.0	0.0	0.0	0.0	0.0	-5,000.0	0.0	0	0	0
	1004 Gen Fund (UGF)		-5,000.0										
	Add Energy Assistance in Numbers Section to Replace Sec15(a) Language	Gov Amd	3,629.0	0.0	0.0	0.0	0.0	0.0	3,629.0	0.0	0	0	0
<i>Replace FY2013 contingency authorization provided in the language section with a FY2014 number section appropriation to include in the base budget and fully fund the estimated Energy Assistance program costs.</i>													
<i>The total projected expenditures for FY2014 is approximately \$26.8 million. Contingency language, estimated to be zero, is also proposed to ensure all funding needed for the program is available.</i>													
<i>FY2013 Language Appropriation (Sec 15(a) Ch15 SLA2012 P76 L17):</i>													
<i>If the amount appropriated in section 1, chapter 15, SLA2012 is not sufficient to pay assistance payments under AS 47.25.621-47.25.626 without proration, the amount necessary to make payments under AS 47.25.621-47.25.626 without proration, estimated to be \$11,150,300 (additional enacted estimate with increased CHP), is appropriated from the general fund to the Department of Health and Social Services, Public Assistance, Energy Assistance Program, for the purpose of making payments under AS 47.25.621 - 47.25.626, for the fiscal year ending June 30, 2013.</i>													
	1004 Gen Fund (UGF)		3,629.0										
	Add Energy Assistance in Numbers Section to Replace Sec15(b) Language	Gov Amd	5,000.0	0.0	0.0	0.0	0.0	0.0	5,000.0	0.0	0	0	0
<i>Replace one-time authorization provided in the language section for FY2013 in Sec 15(b) Ch15 SLA2012 P76 L24-26 in the FY2014 number section and base budget to fully fund the Energy Assistance program.</i>													
<i>For FY2013, the one-time funding was provided in the following language: The sum of \$5,000,000 is appropriated from the general fund to the Department of Health and Social Services, public assistance, energy assistance program, for the purpose of making payments under AS 47.25.621 - 47.25.626, for the fiscal year ending June 30, 2013.</i>													
<i>The total projected expenditures for FY2014 is approximately \$26.8 million. Contingency language, estimated to be zero, is also proposed to ensure all funding needed for the program is available.</i>													

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Public Assistance (continued)</b>													
<b>Energy Assistance Program (continued)</b>													
Add Energy Assistance in Numbers Section to													
Replace Sec15(b) Language (continued)													
			1004 Gen Fund (UGF)	5,000.0									
	Gov Amd	Dec	Reduce Authority No Longer Available for Energy Assistance Funding	-3,000.0	0.0	0.0	0.0	0.0	-3,000.0	0.0	0	0	0
			<i>Reduce uncollectible federal authorization.</i>										
			1002 Fed Rcpts (Fed)	-3,000.0									
			<b>* Allocation Difference *</b>	-2,756.8	0.0	0.0	0.0	0.0	-2,756.8	0.0	0	0	0

**Public Assistance Field Services**

AMD: Transfer Positions from DOLWD	Gov Amd	ATrIn	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	32	0	0
Employment Security RDU, Work Services Component													

*Work Services program positions are being transferred out of the Work Services component of the Department of Labor and Workforce Development (DOLWD) and into the Public Assistance Field Services component of the Department of Health and Social Services (DHSS). It is anticipated that this change will lead to program efficiencies and increased transparency within the state's budget. The Work Services program is currently funded by the federal Temporary Assistance to Needy Families grant through a reimbursable services agreement (RSA) with DHSS.*

*During the Governor's budget process it was thought that breaking the Work Services program into a new component within DOLWD would help provide clarification on the positions and expenses related to the program for RSA negotiation. After further discussions, it has been determined that moving the program to DHSS will result in efficiencies such as reduced overhead. Also, it is anticipated that the program will benefit from being managed by the department most familiar with the federal grant funding the program. Service delivery to Alaskans will not change significantly as in most instances program staff will continue providing services from their existing locations and offices. Without this change the state will be unable to realize efficiencies.*

*The following 29 positions are being transferred from the DOLWD Work Services component:*

- 05-8711, Employment Security Specialist II, range 15, Seward*
- 07-5031, Program Coordinator II, range 20, Juneau*
- 07-5202, Employment Security Specialist IA, range 13, Wasilla*
- 07-5216, Employment Security Specialist II, range 15, Fairbanks*
- 07-5234, Employment Security Specialist IV, range 17, Fairbanks*
- 07-5268, Employment Security Specialist IB, range 14, Anchorage*
- 07-5365, Employment Security Specialist IB, range 14, Anchorage*
- 07-5421, Employment Security Specialist II, range 15, Kenai*
- 07-5434, Employment Security Specialist IB, range 14, Ketchikan*
- 07-5530, Employment Security Specialist IV, range 17, Anchorage*
- 07-5591, Employment Security Specialist II, range 15, Kodiak*
- 07-5789, Employment Security Specialist IB, range 14, Wasilla*
- 07-5830, Employment Security Specialist II, range 15, Fairbanks*
- 07-5971, Employment Security Specialist II, range 15, Nome*
- 07-5972, Employment Security Specialist II, range 15, Nome*

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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Public Assistance (continued)</b>													
<b>Public Assistance Field Services (continued)</b>													
AMD: Transfer Positions from DOLWD													
Employment Security RDU, Work Services													
Component (continued)													
07-5973, Employment Security Specialist II, range 15, Nome													
07-5974, Employment Security Specialist II, range 15, Fairbanks													
07-5976, Employment Security Specialist II, range 15, Nome													
07-5977, Employment Security Specialist IV, range 17, Kenai													
07-5978, Employment Security Specialist III, range 16, Nome													
07-5979, Employment Security Specialist II, range 15, Kenai													
07-5980, Employment Security Specialist II, range 15, Kenai													
07-5981, Employment Security Specialist II, range 15, Kenai													
07-5982, Employment Security Specialist II, range 15, Kenai													
07-5983, Employment Security Specialist II, range 15, Homer													
07-5985, Administrative Assistant II, range 14, Juneau													
07-5999, Employment Security Specialist IA, range 13, Wasilla													
07-6029, Employment Security Specialist II, range 15, Fairbanks													
21-3046, Community Development Specialist III, range 18, Nome													
<i>The Food Stamp Work Services program positions are being transferred out of the Employment and Training Services component of the Department of Labor and Workforce Development (DOLWD) and into the Public Assistance Field Services component of the Department of Health and Social Services (DHSS). It is anticipated that this change will lead to program efficiencies and increased transparency within the state's budget.</i>													
<i>The Food Stamp Work Services program is currently funded by the federal Supplemental Nutrition Assistance Program (a.k.a. Food Stamps) through an RSA with DHSS. It was recently determined that moving this program to DHSS will result in efficiencies such as reduced overhead. Also, it is anticipated that the program will benefit from being managed by the department most familiar with the federal grant funding the program. Service delivery to Alaskans will not change significantly. Without this change the state will be unable to realize efficiencies.</i>													
<i>The following three positions are being transferred from the DOLWD Employment Security component:</i>													
<i>07-5205, Employment Security Specialist IB, range 14, Anchorage</i>													
<i>07-5733, Community Development Specialist I, range 13, Bethel</i>													
<i>07-6000, Employment Security Specialist IB, range 14, Dillingham</i>													
<i>This is a new request for FY2014. This request was not included in the FY2014 Governor's budget as evaluation of the need was ongoing.</i>													
<i>FY2014 December Budget: \$40,588.8</i>													
<i>FY2014 Total Amendments: \$0.0</i>													
<i>FY2014 Total: \$40,588.8</i>													
* Allocation Difference *			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	32	0	0
** Appropriation Difference **			5,167.2	0.0	0.0	0.0	0.0	0.0	5,167.2	0.0	32	0	0

**2013 Legislature - Operating Budget  
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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Public Health</b>													
<b>Health Planning and Systems Development</b>													
MH Trust Workforce Dev - Grant 1383.06 Loan Repayment	Gov Amd	IncM	200.0	0.0	0.0	200.0	0.0	0.0	0.0	0.0	0	0	0
<i>This request for \$200.0 is for use as one component of the required "non-federal match-funding." For FY2014, this proposed continuation of SHARP will field another estimated 16-22 program practitioners, via the following resources: DHSS \$200.0; AMHTA \$200.0. The entire amount is for practitioner loan repayments, with none requested for administration.</i>													
1092 MHTAAR (Other)			200.0										
<b>* Allocation Difference *</b>			200.0	0.0	0.0	200.0	0.0	0.0	0.0	0.0	0	0	0

**Women, Children and Family Health**

MH Trust: Gov Cncl - Grant 3505.02 Autism Workforce Development Capacity Building	Gov Amd	IncM	75.0	0.0	0.0	75.0	0.0	0.0	0.0	0.0	0	0	0
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*National standards projects have identified Applied Behavior Analysis (ABA) as the primary evidence-based intervention that is most likely to improve the quality of life for children and families experiencing autism spectrum disorders (ASD), provided by a nationally certified Board Certified Behavior Analyst (BCBA). Alaska currently has 7 BCBA's (3 certified within the last month). This project has recruited 12 individuals who are currently halfway through their post master's degree course work and have begun the 1,500 hour supervised field experience component. This project will increase the number of BCBA's and form a group that will supervise future cohorts of students. Other activities to increase workforce capacity include the implementation of an entry-level (degreed and paraprofessional) workforce development structure that is responsive to the direct service provider role for services that support children and youth with ASD and to continue the delivery of the annual ASD Summer Institute that includes two tracks: 1) Early Intensive Behavioral Interventions (EIBI) and 2) Autism and the Transition to Adulthood.*

*Becoming a Board Certified Behavior Analyst is a long, difficult, and expensive process that includes completing a 15-credit post master's degree Behavior Analyst Certification Board (BACB) approved curriculum and a 1,500 hour supervised field experience. The capacity building program has already doubled the number of BCBA's that are in the pipeline for certification by FY13/FY14. In addition to the time commitment and expense, the lack of homegrown BCBA's requires students to contract with out-of-state supervisors. This increases the burden, time and expense on the student. The current autism workforce development capacity building program will use the existing cohort of students as supervisors once they complete their certification, thereby increasing opportunities for others to follow in their footsteps and decreasing the expense of the program. In short, the more BCBA's that we can produce the more we will be able to produce.*

*Funding will be used for the following activities:*

- 1. Student recruitment - Continue recruitment efforts to sufficiently increase in-state professionals. Current activities include educating the larger service community and developing a pool of interested candidates. Continuation of this structure will further the workforce capacity development in Alaska.*
- 2. Student financial support - Student expenses for the completion of the BCBA can run from \$20.0 - \$30.0. This is a deterrent to increasing the number of individuals who have this certification. By providing partial support the number of Alaskans willing to participate in this program has increased. In return for this financial support all students have agreed to provide supervision services to other Alaskans seeking BCBA certification at no cost.*

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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Public Health (continued)</b>													
<b>Women, Children and Family Health (continued)</b>													
MH Trust: Gov Cncl - Grant 3505.02 Autism													
Workforce Development Capacity Building													
(continued)													
<i>This will result in a "snowball effect" increasing the number of qualified professionals at no further expense to the program.</i>													
3. <i>Student field coordination support - Coordination of the field experience component of this certification is another important strategy for increasing the number of BCBA's in Alaska. In the first 2 years of this program, a distance-based supervision curriculum has been developed and is being used to guide the first cohort of students. This system will be available to future cohorts and supervisors to guide their efforts and help to ensure a highly qualified workforce. Additionally, due to Alaska's geographic realities this distance based system will continue to be useful even if Alaska has a sufficient number of homegrown BCBA's to provide supervision services in-state.</i>													
	1092 MHTAAR (Other)		75.0										
<b>* Allocation Difference *</b>			<b>75.0</b>	0.0	0.0	75.0	0.0	0.0	0.0	0.0	0	0	0
<b>Bureau of Vital Statistics</b>													
Replace Lost Revenue from Issuing Free Death Certificates for Deceased Veterans (HB129)													
<i>The HB 129 Fiscal note for HSS for \$75.0 GF and (\$75.0) GF/Prgm, was not included in Section 2 so was not received by the Department.</i>													
<i>This request is to replace the lost revenues from issuing free death certificates to veterans as a result of the passage of HB129 in the 27th Legislature. The fiscal note estimated the fiscal impact will be approximately \$75.0 for the first year the legislation is in effect (\$25 x 3,000 certified copies, assuming just 750 families will request on average of four certificates each in the first year), increasing to \$100.0 by year 5 (\$25 x 4,000 certified copies) as more people become aware of the new benefit provided by this law. The Bureau will experience a greater loss of revenue if this bill generates more than four requests per death, or if the number of decedents who are veterans exceeds 1000 in a year.</i>													
<i>&lt;note by Amanda Ryder on Wed Dec 19 17:25:39 -0900 2012 &gt; My recollection is that LFD found it extremely difficult to justify this increase.</i>													
	1004 Gen Fund (UGF)		75.0										
<b>* Allocation Difference *</b>			<b>75.0</b>	0.0	0.0	75.0	0.0	0.0	0.0	0.0	0	0	0
<b>** Appropriation Difference **</b>			<b>350.0</b>	0.0	0.0	350.0	0.0	0.0	0.0	0.0	0	0	0
<b>Senior and Disabilities Services</b>													
<b>Senior and Disabilities Services Administration</b>													
MH Trust: Housing - Grant 68.10 Rural Long Term Care Development													
	Gov Amd	IncM	140.0	111.6	21.6	6.5	0.3	0.0	0.0	0.0	0	0	0
<i>This project has been a technical assistance resource through DHSS Senior and Disabilities Services for several years. It has successfully worked with rural communities to analyze long-term care needs and locate resources to meet those needs. The Division will continue to provide outreach, education and intensive community-based work to assist in meeting the needs of people with Alzheimer's Disease and Related Dementias and other cognitive disability conditions in rural regions of the state. Activities include participation in the Aging and Disability</i>													

**2013 Legislature - Operating Budget  
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**Numbers and Language  
Differences  
Agencies: H&SS**

**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Senior and Disabilities Services (continued)</b>													
<b>Senior and Disabilities Services Administration (continued)</b>													
MH Trust: Housing - Grant 68.10 Rural Long Term Care Development (continued)													
<i>Resource Center project and ongoing technical assistance for development and operational issues, to ensure successful feasibility analysis of projects and to result in an increase in home- and community-based service delivery capacity in rural Alaska.</i>													
	1092 MHTAAR (Other)		140.0										
	MH Trust: Brain Injury - Grant 3178.03 Acquired & Traumatic Brain Injury Pgm Research Analyst & Registry Support	Gov Amd	IncM	136.0	62.0	5.0	68.0	1.0	0.0	0.0	0.0	0	0
<i>Managed by DHSS/Senior and Disabilities Services, this increment will continue to fund a Research Analyst III as lead staff for all data development, collection, analysis and reporting activities associated with the planning and implementation of the Alaska Acquired and Traumatic Brain Injury (ATBI) program. The increment will be maintained at \$136.0 MHTAAR. The passage of SB 219 in 2010 established an Acquired/ Traumatic Brain Injury program and registry within the Department. This has given DHSS statutory and regulatory authority to address the many service gaps. Funding, staffing, planning infrastructure, and development expertise, are imperative to successfully meet the requirements of SB 219. These requirements will provide the foundation to then work (collaboratively) to reduce the incidence of brain injury and minimize the disabling conditions through the expansion of services and supports for ATBI survivors and their families.</i>													
	1092 MHTAAR (Other)		136.0										
<b>* Allocation Difference *</b>			<b>276.0</b>	173.6	26.6	74.5	1.3	0.0	0.0	0.0	0	0	0
<b>Senior Community Based Grants</b>													
	MH Trust: Brain Injury-Traumatic/Acquired Brain Injury Program	Gov Amd	Inc	300.0	0.0	0.0	0.0	0.0	300.0	0.0	0	0	0
<i>Senior and Disability Services proposes to expand multiple year grants to nonprofit organizations and agencies in the Northwest Alaska region to provide person-centered, goal-oriented case management services with innovative programs/training to improve independence and vocational outcomes for people with acquired and/or traumatic brain injury (TABI). This increment will add \$300.0 GF/MH to the current \$300.0 baseline GF/MH. This project may emphasize special populations such as veterans and other residents living in rural areas. In addition, there are service members returning home with TBI who may be served. This increment will allow SDS to serve an additional 100 individuals, doubling the state's capacity to serve Alaskans with TBI.</i>													
	1037 GF/MH (UGF)		300.0										
	MH Trust: ACoA - Alzheimer's Disease & Related Dementia Education & Support Program (ADRD-ESP)	Gov Amd	Inc	230.0	0.0	0.0	0.0	0.0	230.0	0.0	0	0	0
<i>The increment will build capacity in ADRD education, training and supports for ADRD-persons, family caregivers, and professional caregivers by increasing current service levels annually (10%) and adding new services.</i>													
<i>- Increase statewide ADRD education, training, consultation and supports, targeting rural and underserved areas, to enhance ADRD understanding, promote education about brain healthy behaviors, and reduce stigma.</i>													
<i>- Increase the number of consultations/supports to ADRD individuals and families, focusing on personalized plans of care and interventions.</i>													
<i>- Increase availability of memory screenings statewide.</i>													
<i>- Expand education and peer support to improve understanding, reduce depression, and encourage future planning for individuals newly diagnosed.</i>													

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Senior and Disabilities Services (continued)</b>													
<b>Senior Community Based Grants (continued)</b>													
MH Trust: ACoA - Alzheimer's Disease & Related Dementia Education & Support Program (ADRD-ESP) (continued)													
<ul style="list-style-type: none"> <li>- Increase training to service providers to strengthen the ADRD workforce and improve understanding/care of ADRD persons for direct care workers, assisted living, nursing homes, and supervisors.</li> <li>- Enhance technical assistance to strengthen dementia-care. Introduce "dementia-care mapping" to assisted living/nursing homes (new).</li> <li>- Translate educational materials for dissemination to diverse cultural communities (new).</li> <li>- Increase statewide information/referral/assistance services through in-person and "warm-line" telephone support.</li> </ul>													
Enhanced ADRD services will increase ADRD public awareness, reduce stigma in addition to improving quality of care and decreasing risk of injury/harm from trained/supported ADRD family caregivers and professional ADRD workforce.													
1037 GF/MH (UGF)			230.0										
MH Trust: ACoA - Health Promotion, Disease Prevention for Older Alaskans (HPDP): "Senior Fall Prevention"	Gov Amd	Inc	150.0	0.0	0.0	0.0	0.0	0.0	150.0	0.0	0	0	0
<ul style="list-style-type: none"> <li>Factors contributing to the risk of falling include pre-existing medical conditions, inaccessible living environments, residence in assisted living/nursing home facilities, alcohol use, medication complications, and physical/physiological changes associated with aging. This project aims to reduce the fear of falling and senior fall rate by providing HPDP grants to providers who serve seniors using the following evidence-based interventions:</li> <li>- Promote public awareness about senior falls emphasizing risk factors and strategies to prevent them.</li> <li>- Encourage health providers to recognize senior fall risks and screen for falls (balance, vision, hearing)</li> <li>- Increase availability of evidence-based falls prevention senior exercise programs at senior centers, adult day centers, etc. to improve balance, strength and mobility. Research shows that exercise alone can reduce fall risk from 31%-68% among older adults.</li> <li>- Encourage health providers to regularly review all prescription and over-the-counter drugs to identify medication complications that can lead to falls.</li> <li>- Strengthen medication management education targeting seniors.</li> <li>- Increase availability of "white cane" training and low-vision clinics.</li> <li>- Enhance home hazard reduction programs that include home safety assessments and assistance to seniors to find resources to make appropriate accessibility improvements.</li> <li>- Incorporate evidence-based falls prevention intervention as part of hospital discharge programs.</li> </ul>													
1037 GF/MH (UGF)			150.0										
MH Trust: ACoA - Grant 1927.05 Aging and Disability Resource Centers	Gov Amd	IncM	125.0	0.0	0.0	0.0	0.0	0.0	125.0	0.0	0	0	0
<ul style="list-style-type: none"> <li>Older Alaskans, persons with disabilities, and family caregivers require a reliable source for information and referral on how to access a wide range of services (related to health, home care, financial support, housing, transportation, equipment and other needs) which is critical to help individuals through a crisis or change in circumstance. With the rapidly increasing number of older Alaskans, demand for access to this information is growing, while the current Aging and Disability Resource Centers (ADRCs) are minimally funded and staffed. ADRCs are federally mandated as the entrance into the state's long-term care services delivery system and are identified as a strategy under the Department of Health and Social Services' priority for long-term care. The Alaska</li> </ul>													

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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Senior and Disabilities Services (continued)</b>													
<b>Senior Community Based Grants (continued)</b>													
MH Trust: ACoA - Grant 1927.05 Aging and Disability Resource Centers (continued)													
<i>Commission on Aging recommends an increment to SDS's budget to continue the ADRCs and to build their capacity to provide formalized options counseling, eligibility screening, assessment procedures, and to expand services into an area not covered by the existing ADRCs.</i>													
	1092 MHTAAR (Other)		125.0										
<b>* Allocation Difference *</b>			805.0	0.0	0.0	0.0	0.0	0.0	805.0	0.0	0	0	0
<b>Community Developmental Disabilities Grants</b>													
MH Trust: Benef Projects - Grant 124.09 Mini Grants for Beneficiaries with Disabilities													
<i>The Mini-grants for Beneficiaries with Disabilities program has been funded by the Trust since FY99 and is administered through Senior and Disabilities Services grantees under the Short Term Assistance and Referral projects. Mini-grants provide Trust beneficiaries with a broad range of equipment and services that are essential to directly improving quality of life and increasing independent functioning. These can include, but should not be limited to, therapeutic devices, access to medical, vision and dental, and special health care, and other supplies or services that might remove or reduce barriers to an individual's ability to function in the community and become as self-sufficient as possible.</i>													
<i>The FY13 MHTAAR increment facilitates the momentum of effort to provide these services.</i>													
	1092 MHTAAR (Other)	Gov Amd	IncM	250.3	0.0	0.0	0.0	0.0	250.3	0.0	0	0	0
<b>* Allocation Difference *</b>			250.3	0.0	0.0	0.0	0.0	0.0	250.3	0.0	0	0	0
<b>Commission on Aging</b>													
MH Trust: Cont - Grant 151.09 ACOA Planner (06-1513)													
<i>This project funds one of the two Alaska Commission on Aging (ACOA) planner positions. The planner is responsible for supporting the Executive Director in coordination between the ACOA and the Trust, including gathering data for reporting, coordination of advocacy and planning, and preparing ongoing grant progress reports to the ACOA and the Trust. The planner also works with staff to maximize other state and federal funding opportunities for MHTAAR projects and to ensure effective use of available dollars. In addition, the planner position acts as liaison with the other beneficiary boards, including participating in the development of state plans, working on collaborative projects, and other duties. Outcomes and reporting requirements are negotiated with the Trust annually.</i>													
	1092 MHTAAR (Other)	Gov Amd	IncM	114.1	106.0	4.0	4.1	0.0	0.0	0.0	0	0	0
<b>* Allocation Difference *</b>			114.1	106.0	4.0	4.1	0.0	0.0	0.0	0.0	0	0	0
<b>Governor's Council on Disabilities and Special Education</b>													
MH Trust: Benef Projects - Grant 200.10 Microenterprise Capital													
<i>The Trust Microenterprise fund has provided beneficiaries with a unique avenue to access startup funding for microenterprises. The fund was designed to provide an option for beneficiaries that might not be eligible for startup funding assistance through traditional paths including banks, credit unions and other traditional lending sources. This project provides resources for small business technical assistance and development to provide ongoing</i>													



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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Senior and Disabilities Services (continued)</b>													
<b>Governor's Council on Disabilities and Special Education (continued)</b>													
MH Trust: Benef Projects - Grant 200.10													
Microenterprise Capital (continued)													
<i>support to individuals with a disability establishing small businesses and self-employment. The Governor's Council on Disabilities and Special Education will administer this grant. Microenterprise is a component of services being developed under the Trust's Beneficiary Projects Initiative that will provide alternative and innovative resources, and greater options for beneficiary self-employment and economic independence. Due to the success of this program, FY2012 funding recommendation is increasing to allow for more beneficiary small business start-up grants.</i>													
1037 GF/MH (UGF)			25.0										
MH Trust: Dis Justice - Grant 4303.01 AK	Gov Amd	IncM	150.0	0.0	0.0	150.0	0.0	0.0	0.0	0.0	0	0	0
Safety Planning & Empowerment Network (ASPEN)													
<i>This project is a collaborative effort between the Alaska Network on Domestic Violence and Sexual Assault (DVSA), the Governor's Council on Disabilities and Special Education, the Alaska Native Justice Center and the UAA Center for Human Development. The effort seeks to build capacity of the service delivery system in targeted communities by (1) resolving barriers to safety, empowerment, access to non-judgmental services provided by disability and DVSA service providers, (2) fostering local collaborations to link survivors with services and resources, (3) providing cross-training and technical assistance, and (4) developing policies and procedures designed to prioritize safety, empowerment, and access.</i>													
<i>The FY14 MHTARR increment for this project builds upon the Governor's Domestic Violence and Sexual Assault Initiative.</i>													
1092 MHTAAR (Other)			150.0										
MH Trust: Cont - Grant 105.09 Research Analyst III (06-0534)	Gov Amd	IncM	120.0	112.0	4.0	4.0	0.0	0.0	0.0	0.0	0	0	0
<i>The Research Analyst III is a continuing project to provide the Governor's Council on Disabilities &amp; Special Education with information about the needs of individuals with developmental disabilities. The position and associated travel and operating funds help ensure Council activities are conducted within the framework of the Mental Health Trust Authority's guiding principles while still meeting Congressional requirements. The Research Analyst is a staff member of the Governor's Council and funds go directly to the Council.</i>													
<i>The Council is federally funded to fulfill specific roles mandated by Congress. It is an expectation of the Trust that the Council will participate in planning, implementing and funding a comprehensive integrated mental health program that serves people with developmental disabilities and their families. The position enables the Council to provide up-to-date, valid information to the Trust on consumer issues, identify trends, participate in Trust activities, enhance public awareness, and engage in ongoing collaboration with the Trust and partner boards.</i>													
<i>Included in this component is an increment maintaining the FY2012 funding level (\$110.0). This FY2013 increment facilitates the momentum of effort.</i>													
1092 MHTAAR (Other)			120.0										
MH Trust: Benef Projects - Grant 200.10	Gov Amd	IncM	125.0	0.0	0.0	125.0	0.0	0.0	0.0	0.0	0	0	0
Microenterprise Capital													
<i>The Trust Microenterprise fund has provided beneficiaries with a unique avenue to access startup funding for microenterprises. The fund was designed to provide an option for beneficiaries that might not be eligible for startup</i>													

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	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Senior and Disabilities Services (continued)</b>													
<b>Governor's Council on Disabilities and Special Education (continued)</b>													
MH Trust: Benef Projects - Grant 200.10													
Microenterprise Capital (continued)													
<i>funding assistance through traditional paths including banks, credit unions and other traditional lending sources. This project provides resources for small business technical assistance and development to provide ongoing support to individuals with a disability establishing small businesses and self-employment. The Governor's Council on Disabilities and Special Education will administer this grant. Microenterprise is a component of services being developed under the Trust's Beneficiary Projects Initiative that will provide alternative and innovative resources, and greater options for beneficiary self-employment and economic independence. Due to the success of this program, FY2012 funding recommendation is increasing to allow for more beneficiary small business start-up grants.</i>													
	1092	MHTAAR (Other)	125.0										
<b>* Allocation Difference *</b>			420.0	112.0	4.0	304.0	0.0	0.0	0.0	0.0	0	0	0
<b>** Appropriation Difference **</b>			1,865.4	391.6	34.6	382.6	1.3	0.0	1,055.3	0.0	0	0	0
<b>Departmental Support Services</b>													
<b>Administrative Support Services</b>													
Department of Administration Core Services													
	Gov Amd	Inc	764.6	0.0	0.0	764.6	0.0	0.0	0.0	0.0	0	0	0
Rates													
<i>Rates for core services provided by the Department of Administration, including Risk Management, Personnel, Information Technology Services, and Public Building Fund, are estimated to be \$7.2 million higher in FY2014. Funding in the amount of \$4 million is being provided to departments.</i>													
	1004	Gen Fund (UGF)	764.6										
	Gov Amd	Inc	115.0	0.0	0.0	115.0	0.0	0.0	0.0	0.0	0	0	0
In/Dec Pair: Transfer from Pioneer Homes													
Facil Mntnce to Provide Additional Authority for													
(06-4823) Program Coordinator													
<i>A full-time Juvenile Justice Officer (06-4823), range 11, Anchorage, was transferred to the Administrative Support Services component from the Division of Juvenile Justice, McLaughlin Youth Center component. It will be reclassified to a Program Coordinator, range 20, Juneau, to deliver core training and oversee efforts to achieve more coordination and effective use of department-wide training resources for the maximum benefit of department staff. This position will perform an assessment of department training and convene a committee of division subject matter experts to make recommendations to DHSS leadership. The focus of this committee will be to look for areas in which the Department might collaborate to improve training and better provide department-wide training.</i>													
<i>Transfer excess interagency receipt authority from the Pioneer Homes Maintenance component to cover personal services for this position, funded by a reimbursable services agreement.</i>													
	1007	I/A Rcpts (Other)	115.0										
<b>* Allocation Difference *</b>			879.6	0.0	0.0	879.6	0.0	0.0	0.0	0.0	0	0	0
<b>Facilities Management</b>													
	Gov Amd	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Replace Uncollectible Federal Receipts with CIP Receipts													
<i>This fund source change of uncollectible federal receipt authority for capital improvement project receipt authority</i>													

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<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Departmental Support Services (continued)</b>													
<b>Facilities Management (continued)</b>													
Replace Uncollectible Federal Receipts with CIP Receipts (continued)													
<i>is critical to the day-to-day operations of the Facilities Management component as the component has no mechanism to collect federal revenues, leaving the component underfunded year-to-year.</i>													
			1002 Fed Rcpts (Fed)	-124.8									
			1061 CIP Rcpts (Other)	124.8									
<b>* Allocation Difference *</b>			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

**Information Technology Services**

Health Information Security/Privacy Compliance and Remediation	Gov Amd	Inc	850.0	0.0	10.0	810.0	30.0	0.0	0.0	0.0	0	0	0
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*Problem Statement*

*DHSS and other health entities nationwide are facing an increasingly aggressive regulatory oversight environment. This became evident when the Office of Civil Rights (OCR) sanctioned DHSS for insufficient compliance with the safeguarding of Protected Health Information. The Office of Civil Rights imposed a \$1.7 million penalty and placed the department on a Correction Action Plan that mandates a Risk Assessment and Remediation Plan to be completed by January 2013. It is anticipated that the Office of Civil Rights will require DHSS to begin security remediation immediately following the assessment which will result in a supplemental request in FY2013 to begin the work prior to any FY2014 funding being available.*

*Proposal*

*This request addresses the resources needed to comply with regulatory requirements not currently being fully addressed. The complexity of the department's information systems continues to grow, with over three hundred servers, a hundred applications, sixty terabytes of data and dozens of critical information systems required for the everyday work within the department. To ensure compliance with a multitude and growing number of federal and State legal requirements contractual services, task orders, tools, training, travel, and legal advice, such as the below, are required to reasonably and appropriately safeguard the department's information, while meeting regulatory requirements and reducing the likelihood and cost of public breach notification.*

- Manage effective security measurements
- Security awareness & education
- Maintain and implement security policies, procedures & guidelines
- Schedule and provide system and application assessments
- Remediate ongoing identified security risks to DHSS systems
- Manage & remediate security incidents
- Test and certify systems and applications
- Audit and direct security & compliance controls
- Provide timely reporting of corrective action progress
- Provide preventative and proactive accountability to executive management.
- Assessment, auditing and reporting tools
- Legal services from Department of Law
- Security software/hardware

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Departmental Support Services (continued)</b>													
<b>Information Technology Services (continued)</b>													
Health Information Security/Privacy Compliance and Remediation (continued)													
- Encryption													
- Firewall management													
- Mobile & device management													
- Technical security training for 100 IT staff													
- Contractual security services and tasks orders													
Consequences if Not Funded													
<i>DHSS will remain in non-compliance which the corrective action plan monitor is required to report to the federal Office of Civil Rights. The department will risk formal enforcement, including civil monetary penalties, enhanced scrutiny, investigations and regulatory oversight by the Office of Civil Rights. DHSS will continue to be sanctioned. Mandated compliance directives from the Office of Civil Rights have cost various entities, such as Providence Hospital, millions of dollars annually.</i>													
<i>Without the accountability and preventative focus provided by a security team, the number of public breach notifications mandated by the Health Insurance Portability and Accountability Act (HIPAA)/Health Information Technology for Economic and Clinical Health (HITECH) and Alaska Personal Information Protection Act (APIPA) may continue to grow. These breach notifications could impact the confidence providers have in participating in a health information exchange.</i>													
			1002 Fed Rcpts (Fed)	255.0									
			1004 Gen Fund (UGF)	595.0									
<b>* Allocation Difference *</b>				850.0	0.0	10.0	810.0	30.0	0.0	0.0	0.0	0	0
<b>Pioneers' Homes Facilities Maintenance</b>													
			Inc/Dec Pair: Transfer to Admin Support Svcs to Provide Additional Authority for (06-4823)										
			Program Coordinator										
				-115.0	0.0	0.0	-115.0	0.0	0.0	0.0	0.0	0	0
<i>A full-time Juvenile Justice Officer (06-4823), range 11, Anchorage, was transferred to the Administrative Support Services component from the Division of Juvenile Justice, McLaughlin Youth Center component. It will be reclassified to a Program Coordinator, range 20, Juneau, to deliver core training and oversee efforts to achieve more coordination and effective use of department-wide training resources for the maximum benefit of department staff. This position will perform an assessment of department training and convene a committee of division subject matter experts to make recommendations to DHSS leadership. The focus of this committee will be to look for areas in which the Department might collaborate to improve training and better provide department-wide training.</i>													
<i>Transfer excess interagency receipt authority from the Pioneer Homes Maintenance component to cover personal services for this position, funded by a reimbursable services agreement.</i>													
			1007 I/A Rcpts (Other)	-115.0									
<b>* Allocation Difference *</b>				-115.0	0.0	0.0	-115.0	0.0	0.0	0.0	0.0	0	0
<b>** Appropriation Difference **</b>				1,614.6	0.0	10.0	1,574.6	30.0	0.0	0.0	0.0	0	0

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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Medicaid Services</b>													
<b>Adult Preventative Dental Medicaid Services</b>													
Increased Utilization, Adult Preventative Dental Medicaid Services	Gov Amd	Inc	3,889.9	0.0	0.0	0.0	0.0	0.0	3,889.9	0.0	0	0	0
<i>The Adult Preventative Dental Medicaid Services component provides preventative and restorative dental services for eligible adults.</i>													
<i>This request will support projected growth in utilization of Adult Preventative Dental Medicaid Services. The estimate of cost increases is based on analysis of five methods of cost projections for FY2014, looking back across programmatic cost changes by service type within the component since the program's inception in FY2008.</i>													
1002 Fed Rcpts (Fed)			2,191.6										
1003 G/F Match (UGF)			1,698.3										
<b>* Allocation Difference *</b>			<b>3,889.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>3,889.9</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Health Care Medicaid Services</b>													
Anticipated 'Woodwork' Effect as of January 2014 Affordable Care Act Implementation	Gov Amd	Inc	7,385.3	0.0	0.0	0.0	0.0	0.0	7,385.3	0.0	0	0	0
<i>The Health Care Medicaid Services component supports a wide variety of medical and health care services for eligible individuals - inpatient and outpatient hospital services; physician, pharmacy, transportation, dental, vision laboratory and x-ray services; physical/occupational/speech therapy; chiropractic services, etc.</i>													
<i>This request will support projected growth in utilization of Medicaid services across all components, based on the anticipated 'woodwork' effect as elements of the Affordable Care Act are implemented effective January 2014. As of that date, individuals will be required to have secured health insurance coverage, and individuals currently eligible for Medicaid under existing rules, but not yet enrolled, are anticipated to enroll. Current projections are for a resulting additional 1,500 Alaska enrollees.</i>													
<i>Cost projections are based on the FY2012 per recipient average cost of Medicaid services provision across all components, for 1,500 new participants for one half fiscal year.</i>													
1002 Fed Rcpts (Fed)			4,567.1										
1003 G/F Match (UGF)			2,818.2										
Reduce General Fund/Program Receipt Authority	Gov Amd	Dec	-550.0	0.0	0.0	0.0	0.0	0.0	-550.0	0.0	0	0	0
<i>Based on a comparison of FY2012's final authority to actual by line item, fund source, and component, the Medicaid program is requesting a reduction in GF/Program Receipt authority in grants for the Health Care Medicaid Services component.</i>													
1005 GF/Prgm (DGF)			-550.0										
Reduce Interagency Receipt Authority	Gov Amd	Dec	-4,190.0	0.0	0.0	0.0	0.0	0.0	-4,190.0	0.0	0	0	0
<i>Based on a comparison of FY2012's final authority to actual by line item, fund source, and component, the Medicaid program is requesting a reduction in interagency receipt (I/A) authority in services for the Health Care Medicaid Services component.</i>													
1007 I/A Rcpts (Other)			-4,190.0										
<b>* Allocation Difference *</b>			<b>2,645.3</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>2,645.3</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**2013 Legislature - Operating Budget  
Transaction Compare - Governor Structure  
Between Adj Base and Gov Amd**

<b>Numbers and Language Differences Agencies: H&amp;SS</b>
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**Agency: Department of Health and Social Services**

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
<b>Medicaid Services (continued)</b>													
<b>Senior and Disabilities Medicaid Services</b>													
Waiver and Personal Care Assistance Program Growth	Gov Amd	Inc	13,169.9	0.0	0.0	0.0	0.0	0.0	13,169.9	0.0	0	0	0
<i>The Senior and Disabilities Medicaid Services component supports nursing home and personal care services, as well as a variety of home- and community-based waiver programs for children with complex medical conditions, individuals with mental retardation or developmental disabilities, adults with disabilities, and older Alaskans.</i>													
<i>This request will support projected growth in utilization of both the Mental Retardation and Developmental Disabilities waived community-based services and the Personal Care Assistance Program. The estimate of cost increases is based on analysis of five methods of cost projections, looking back across programmatic cost changes by service type within the component for FY2004-2012.</i>													
1002 Fed Rcpts (Fed)			6,685.0										
1003 G/F Match (UGF)			6,484.9										
Reduce Interagency Receipt Authority	Gov Amd	Dec	-2,033.8	0.0	0.0	-2,033.8	0.0	0.0	0.0	0.0	0	0	0
<i>Based on a comparison of FY2012's final authority to actual by line item, fund source, and component, the Medicaid program is requesting a reduction in interagency receipt (I/A) authority in services for the Senior and Disabilities Medicaid Services component.</i>													
1007 I/A Rcpts (Other)			-2,033.8										
<b>* Allocation Difference *</b>			<b>11,136.1</b>	0.0	0.0	-2,033.8	0.0	0.0	13,169.9	0.0	0	0	0
<b>** Appropriation Difference **</b>			<b>17,671.3</b>	0.0	0.0	-2,033.8	0.0	0.0	19,705.1	0.0	0	0	0
<b>*** Agency Difference ***</b>			<b>42,631.4</b>	3,223.7	185.8	2,477.8	69.6	0.0	36,674.5	0.0	32	0	0
<b>**** All Agencies Difference ****</b>			<b>42,631.4</b>	3,223.7	185.8	2,477.8	69.6	0.0	36,674.5	0.0	32	0	0

## Column Definitions

**Adj Base (FY14 Adjusted Base)** - FY2013 Management Plan less one-time items, plus FY2014 adjustments for position counts, funding transfers, line item transfers, temporary increments (IncT) from prior years, and additions for statewide items (risk management and most salary and benefit increases). The Adjusted Base is the "first cut" of the FY2014 budget; it is the base to which the Governor's and the Legislature's increments, decrements, and fund changes are added.

**Gov Amd (FY14 Governor Amended)** - FY14 Governor's Amended Budget (Includes Governor's Dec 15th budget and the Governor's Amendments submitted on February 17th)