

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes	
FY05-FY18 Formula Growth is broken into the following SIX categories:												
The following categories were calculated based on a download of all formula transactions contained in the "05-13Inc/Decs" column and all supplemental formula transactions + FY14-FY18 additions for Medicaid. The transactions in these columns are standard non-adjusted base formula transactions (i.e., increments, decrements, fund changes, fiscal notes, etc.). Because salary adjustments, one-time items, inter- and intra-agency transfers and other standard "Adjusted Base" transactions are not included, a straight comparison of the total budget changes and the numbers in this spreadsheet is not possible.												
1	Cat 1	MEDICAID	Medicaid Services Appropriation	F	Medicaid Growth/Reform - FY17Supplemental and FY18 Budget	<p>FY17 Supplementals - \$26.8 million UGF (numbers) - \$31.3 million UGF (language) verify precise amount of \$31.3 when Gov budget transmitted -\$277.8 million Federal</p> <p>FY18 Budget -(\$17,261.1) UGF -\$42.5 DGF - \$21.8 million Federal Receipts</p> <p>FY18 RPL #06-08-0367 \$108 million Federal Receipts for non-expansion (the remaining \$417 million of federal receipts was requested for the Medicaid Expansion population, see item 3)</p>	40,872.5	42.5		407,610.4	448,525.4	<p>FY17 Supplemental for Additional Federal Claiming and FY16 Provider Payments Paid in FY17</p> <p>- \$26.8 million UGF for FY16 provider payments paid in FY17 in order to stop the cycle of delaying payments until the following fiscal year - \$31.3 million UGF (language supplemental) to address a backlog of provider payments and ensure FY17 were not carried forward into FY18 (verify actual amount when Governor's budget is transmitted) - \$277,824.8 Federal Receipts for additional federal claiming.</p> <p><u>FY18 Budget</u> -(\$17,261.1) UGF and \$21.8 million Federal Receipts associated with year two of Medicaid Reform , Ch.25, SLA16 (SB 74)</p> <p><u>FY18 RPL #06-8-0367</u> -\$108 million Federal Receipts due to Medicaid growth (non-expansion).</p>
2	Cat 2	MEDICAID	Medicaid Services Appropriation	F	Medicaid Growth FY05-FY17 Budget	<p>FY05-FY17 Budget - Total Medicaid Growth was about \$456 million of UGF when supplemental appropriations are included.</p> <p>FY05MP-FY13Budget: \$312.5 million GF FY05-FY11 Supplementals: \$141.1 GF FY14: \$8.2 million UGF FY15: \$26.1 million UGF FY16: (\$31.6) million UGF</p>	456,244.3		-37,625.1	601,998.6	1,020,617.8	<p>Medicaid growth is attributable to changes in the number of clients and costs.</p> <p>FY16: The legislature decremented \$31.6 million UGF (74% of the FY12 & FY13 average lapsing balances).</p>

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3	Cat 3	MEDICAID	Medicaid Services & Health Care Services	F	Medicaid Expansion	Funding to Implement Medicaid Expansion FY17 Budget - \$173,692.1 Federal Receipts and (\$6,108.6) UGF FY18 Budget - (\$3,880.0) UGF FY18 RPL #06-08-0367 - \$417 million Federal Receipts	-9,988.6			590,692.1	580,703.5	Medicaid Expansion. Although the legislature rejected the Governor's budget request to implement Medicaid Expansion in FY16, Governor Walker submitted RPLs to the LB&A Committee (totaling \$145,438.4 million of federal funds and \$1,590.6 MHTAAR Rcpts) and announced that Medicaid Expansion would begin on September 1, 2015.
4	Cat 4	MEDICAID	Medicaid Services Appropriation	F	FairShare/Proshare	Total GF Growth due to FairShare and ProShare was about \$134.8 million when supplementals are included. FY05-FY12 MP: \$44.8 million GF FY05-FY11 Supplementals: \$90 million GF	134,832.4		-49,000.0	-69,071.4	16,761.0	The ProShare program refers to payments to refinance grants to public and private hospitals. The FairShare program refers to payments made to tribal hospitals. For several years the state realized significant Medicaid savings by accessing a loophole in federal law that allowed the use of a large percentage of Disproportionate Share Hospital (DSH) and Private Hospital Proportionate Share (PHPS) grant payments that were sent to hospitals to be returned to the state (as SDPR) to match federal Medicaid dollars. The ability to use the already matched grants as match leveraged a large amount of federal dollars. When the use of these "recycled" federal and SDPR dollars was disallowed by the Feds in the mid-2000s, the state had to backfill with general funds.
5	Cat 5	MEDICAID	Medicaid Services Appropriation	F	Cost Containment/ Reform Efforts	Cost Containment/ Reform Efforts FY05-FY12MP: (\$13.4) million GF FY05-FY11 Supplementals: \$15.9 million GF (Unrealizable) FY16: (\$20) million FY17: --\$46.3 million to reflect various reform efforts --\$20.3 million UGF to reflect CMS Tribal Travel Changes	-69,410.1		0.0	-14,643.0	-84,053.1	Although the Department and the legislature implemented a number of cost containment measures over the years, a number of the funding reductions were unachievable and the reductions were reversed between FY05 and FY11. FY16: The legislature accepted the Governor's requested \$20 million UGF decrement reflecting the department's cost containment efforts.

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6	Cat 6	Non-Medicaid DHSS Formula Programs	All Formula Appropriations/Allo cations	F	Other Formula Programs	Other Formula Program Appropriations FY05FnlBud-FY18 Budget Total increase: \$30.5 million (12.7%) UGF Increase: \$21.5 million (18.9%) DGF Decrease: (\$10.4) million (63.1%) Other Increase \$5.7 million (24%) Federal: \$13.7 million (16.2%)	21,523.8	-10,417.4	5,668.8	13,686.9	30,462.1	Significant Non-Medicaid formula changes are listed below in the "Significant Budget Changes (Non-Medicaid Formula and Non-Formula)" section.
Significant Budget Changes (Non-Medicaid Formula and Non-Formula)												
7	FY16	Departmentwide Unallocated Reduction			DHSS's portion of the \$29.8 million Branch- wide Unallocated Reduction		-5,864.3				-5,864.3	Where the department has allocated the Unallocated Reduction is unavailable (as of 10/30/15)
8	FY06	Children's Services	Subsidized Adoptions & Guardianship	F	Transfer		-3,700.0			3,700.0	0.0	Because federal funding from a Social Services Block Grant was received, \$3.7 million of Fed Repts was transferred from FLSW to this allocation, and \$3.7 million of UGF was transferred to Front Line Social Workers (FLSW).
9	FY14	Children's Services	Subsidized Adoptions & Guardianship	F	Rate Rebasing	Foster Care Base Rate Adjustment	1,110.0			740.0	1,850.0	To address increased federal concern that states are not meeting the full costs of care for children in foster care custody, OCS completed a foster care rate study. Based on the findings of the study, additional funding was needed to: --increase the foster care base rate; --Adjust geographic differentials from the current system to the 2008 regional differentials used by Medicaid; and --adjust the foster care augmented rates to better cover the cost of care for special needs children, in out-of-home placements.
10	FY17	Children's Services	Subsidized Adoptions & Guardianship	F	Caseload Growth	Growing number of children	1,110.0			740.0	1,850.0	Caseloads have grown by 4.5% while annual costs have increased by 7.7% since 2012.

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11	FY09 & FY14	Children's Services	Foster Care Base Rate	F	Rate Rebasing	Foster Care Base Rate Increase	4,896.9			868.6	5,765.5	This funding was needed to increase rates paid to foster parents. FY91--based on 1989 poverty guidelines: \$20.49 FY92--Based on 1990 poverty guidelines: \$21.48 FY99--Based on 1993 poverty guidelines: \$23.84 FY09--Based on 2007 poverty guidelines: \$34.98 (\$2,786.9 UGF and \$378.6 Fed Rcpts) FY14--Based on 2011 poverty guidelines: \$38.27 (\$2,110.0 UGF and \$490.0 Fed Rcpts)
12	FY09	Children's Services	Foster Care Base Rate	F	Caseload Growth	Increased Cost for Foster Parent Payment due to Caseload Growth	2,770.6	200.0		414.0	3,384.6	
13	FY17	Children's Services	Foster Care Base Rate	F		Replace UGF with Federal Receipts to reflect savings from separating foster care licensing from residential care licensing.	-2,326.5			2,326.5	0.0	
14	FY18	Children's Services	Foster Care Base Rate and Foster Care Special Need	F	Increased Capacity for Federal Reimbursement	Replace UGF With Federal Receipts to Reflect Increased Efforts by OCS to Collect Title IV-E Fed	-1,460.0			1,460.0	0.0	The net-zero fund change was allocated as follows: -\$860.0 in the Foster Care Base Rate allocation -\$600.0 in the Foster Care Special Need allocation.
15	FY06	Public Assistance	Senior Benefits Payment Program	F		Fiscal Note for HB 106. Continuation of the Senior Care program.		6,614.4			6,614.4	FY06 Total Funding was \$14.3 million This bill authorized the continuation of the SeniorCare program, which provides a cash or drug benefit to eligible seniors age 65 or older. It also changes the drug benefit to a State Pharmaceutical Assistance Program, to cover the premiums and deductibles of the new Medicare Part D prescription drug coverage that begins January 1, 2006. This bill would allow seniors with incomes below 135% of the federal poverty guideline and countable assets below \$6,000 (\$9,000 for couples) to continue to be eligible for the \$120 monthly cash payment. Seniors with incomes below 175% of the federal poverty guideline and countable assets below \$50,000 (\$100,000 for couples) would be eligible to have their premiums and deductibles for Medicare Part D, or other similar prescription drug coverage, paid for by the new SeniorCare drug benefit. The program sunseted on 6/30/07.

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16	FY08 & FY09	Public Assistance	Senior Benefits Payment Program	F		Senior Benefits Program Reauthorization Added 6 PFT positions in FY09	22,453.4				22,453.4	<p>FY08 Supplemental Funding: \$18.5 million FY09 Total Funding was \$20.3 million FY12 Total Funding: \$22.5 million</p> <p>Ch 1 FSSLA 07 (SB 4): The new Senior Benefits Payment Program that started in August of 2007 was authorized in Ch 1 FSSLA 07 (SB 4). Monthly benefit payments were \$125 to \$250 (as opposed to the previous \$120/month maximum payment). In addition, the maximum qualifying income levels were raised to \$22,347 for individuals and \$29,960 for couples. The program sunseted on 6/30/07.</p> <p>Ch 6, SLA 11 (HB 16) and Ch 113, SLA 14 (HB263): Reauthorized the Senior Benefits Payment Program and allows certain nursing home residents to keep between \$75 and \$200/month for personal needs. This program sunsets on 6/30/18.</p>
17	FY16	Public Assistance	Senior Benefits Payment Program	F		Realignment of funding and responsibilities and decrement \$2,291.6 UGF	-3,065.7			-5.5	-3,071.2	<p>FY16 Trout: \$771.1 UGF and \$5.5 Fed Rcpts was transferred to Public Assistance Field Services to reflect a shift from program-specific eligibility determinations to generalized staffing. Staff will now make eligibility determinations for all programs supported by the division. FY16 Decrement: (\$2,291.6) UGF</p>
18	FY06	Public Assistance	Permanent Fund Dividend Hold Harmless	F		Reduction due to federal policy change					-3,065.2	<p>The PFD Hold Harmless program provides replacement funding for the loss of benefits due to client ineligibility or benefit reduction in the Alaska Temporary Assistance Program (ATAP), Food Stamps, SSI, or Medicaid programs due to the receipt of the Alaska Permanent Fund Dividend.</p> <p>The decrease represents the net reduction in public assistance formula caseloads and a policy change in the way the PFD is counted in the federal food stamp program. This change results in fewer households losing eligibility for food stamps.</p>

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19	FY12	Public Assistance	Permanent Fund Dividend Hold Harmless	F		Program Funding Increase due to Caseload Growth		2,700.0			2,700.0	The Food Stamp program grew by more than 20 percent between FY09 and FY10 and the department expected a growth rate of 10 percent in FY11.
20	FY16	Public Assistance	Public Assistance Field Services			Decrement funding to reflect possible savings resulting from ARIES coming on-line	-1,101.2			-1,212.4	-2,313.6	According to the department, this reduction will impact the division's ability to fund overtime efforts needed to address backlogged applications. Additionally, ARIES will not be fully functional to determine all program eligibility in FY16.
21	FY16	Public Assistance	Public Assistance Field Services			Transfer funding to Public Assistance Field Services to align funding with historical administrative expenditures. Funding was transferred from the Work Services allocation and from the Senior Benefits Payment Program allocation.	1,974.1			5.5	1,979.6	Funding transferred to Public Assistance Field Services from the following allocations: --Work Services: \$1.2 million UGF --Senior Benefits Payment Program: \$774.1 UGF and \$5.5 Fed
22	FY16	Public Assistance	Public Assistance Field Services		Medicaid Expansion	FY16 RPLs: Federal and MHTAAR Receipts to implement Medicaid Expansion --Public Assistance: \$1,385.6 FF and \$1,385.7 MHTAAR			1,385.7	1,385.6	2,771.3	FY16 Medicaid Expansion. Although the legislature rejected the Governor's budget request to implement Medicaid Expansion, Governor Walker submitted RPLs to the LB&A Committee (totaling \$148.6 million and announced that Medicaid Expansion would begin on September 1, 2015. The LB&A Committee did not address the Governor's RPLs and the Governor moved forward with the expansion.
23	FY16	Public Assistance	Work Services			Transfer funding to Public Assistance Field Services to align funding with historical administrative expenditures.	-1,200.0				-1,200.0	This transfer aligns the funding with historical administrative expenditures. It "trues up" the budget.
24	FY06	Alaska Pioneer Homes	Pioneer Homes		Provider Payments	Increase I/A Authorization for Medicaid Provider Payments			1,344.8		1,344.8	Due to a change in federal policy, Pioneer Home residents became eligible to receive Medicaid coverage. Because Pioneer Homes are eligible to be licensed as Medicaid Providers, this I/A funding (from Health Care Services and Senior and Disabilities Services) will reduce the state's subsidy. <i>Note: No decrement of GF match was requested because GF match payments (totaling \$1,265.7 in FY06) came from the existing budget.</i>

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25	FY06	Alaska Pioneer Homes	Pioneer Homes		Pharmaceutical Costs	Pioneer Home Pharmaceutical Costs and Receipts from Residents			1,500.0		1,500.0	Increased SDPR authorization was needed in order to accept payments from residents to for prescriptions filled at the Pioneer Homes Pharmacy.
26	FY07	Alaska Pioneer Homes	Pioneer Homes		Pharmaceutical Costs	Increased Medication Costs due to the increased number of residents and to allow the pharmacy to buy, package, and dispense medications			1,966.4		1,966.4	The FY06 & FY07 costs are expected to increase by more than 46% over the \$1.63 million spent in FY05. <i>Note: The transition from Medicaid and other third party insurance to Medicare Part D made it difficult to predict the amount of SDPR that was needed. A FY06 increment of \$1.5 million was based on FY04 costs.</i>
27	FY06- FY07	Alaska Pioneer Homes	Pioneer Homes		Safety & Security	Increased Staffing for Resident Safety and Security FY06: Added 3 PFT positions FY07: Added 14 PFT positions	757.5	300.0			1,057.5	The percentage of Pioneer Home residents needing the highest level of care rose from 25% to 59% over the prior 10 years. Funding and positions were added in FY06 and FY07 to meet this need. FY06: \$150.0 UGF for 3 CNAs in the homes with the highest occupancy levels (Juneau Fairbanks & Ketchikan). FY07: \$607.5 UGF and \$300.0 DGF for increased staffing at all Pioneer Homes
28	FY07	Alaska Pioneer Homes	Pioneer Homes		Veterans' Home	Remodel/upgrade Palmer Pioneer Home to meet federal requirements to be certified as Veterans' Home with 18 beds (completion date is spring 2006) Added 7 PFT positions Added 3 PPT positions	540.7	102.0		61.3	704.0	
29	FY08	Alaska Pioneer Homes	Pioneer Homes		Veterans' Home	Annualize operating costs needed to accommodate the addition of 18 beds for Veterans in the Palmer Veterans & Pioneer Home. Added 3 PFT positions	162.5	162.5			325.0	The Palmer Pioneer Home opened 18 additional beds for veterans in the spring of 2006.

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30	FY08	Alaska Pioneer Homes	Pioneer Homes			Replace UGF due to increased Medicaid Waiver Receipts	(784.3)		1,500.0		715.7	The \$1.5 million of I/A Rcpts is the estimated amount of Medicaid funding that will come from the Division of Senior and Disabilities Services.
31	FY10	Alaska Pioneer Homes	Pioneer Homes			Additional Direct-Care staff funded by a rate increase		600.0			600.0	This funding was generated by increased rates and was requested to fund 2 Nurses and 7 Certified Nurse Aides.
32	FY12	Alaska Pioneer Homes	Pioneer Homes			Additional funding to meet Medicaid documentation requirements		400.0			400.0	The Pioneer Home system requests funding to pay for additional staff time to meet the documentation requirements mandated by the Home and Community Based Waiver program.
33	FY14	Alaska Pioneer Homes	Pioneer Homes			Maintain current service levels at the Pioneer Homes	750.0	(712.0)	(38.0)		0.0	The funding was requested to avoid service reductions. The legislature also approved a FY13 supplemental request for the same amount.
34	FY14	Alaska Pioneer Homes	Pioneer Homes			Pioneer Homes operational costs for contractual increases	460.0				460.0	The Pioneer Homes contract with 3rd party vendors for food, housekeeping, and laundry services increased. Only one contractor responded to the solicitation for services and the contract price. The legislature also approved a FY13 supplemental request for the same amount.
35	FY15	Alaska Pioneer Homes	Pioneer Homes		Veterans' Home	Increased ratio of veterans served in the Palmer home	(100.0)			100.0	0.0	The Pioneer Homes contract with 3rd party vendors for food, housekeeping, and laundry services increased. Only one contractor responded to the solicitation for services and the contract price. The legislature also approved a FY13 supplemental request for the same amount.

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36	FY16	Alaska Pioneer Homes	Pioneer Homes			Reduce Pioneer Homes' (PH) direct service staff, non-essential services and supplies AND Add funding received from increasing PH rates by 8.5%	(1,673.4)	1,300.0	434.3		60.9	Reduced UGF with plans to increase DGF by increasing the rates 8.5%. If planned GF/Prgm Receipts are not forthcoming, DHSS anticipates that the \$1,673.4 reduction in UGF may have the following impacts: (1) longer waiting periods for prospective residents to gain entrance into a home, (2) a reduction in the number of residents who can receive higher levels of care within the homes (e.g., memory care), (3) a reduction in licensed bed counts, (4) longer response times from staff, and (5) compromising resident safety due to low staffing ratios.
37	FY17	Alaska Pioneer Homes	Pioneer Homes			Reduce Pioneer Homes Staffing, Supplies & Cable Television Services (11) PFT Positions (3) PPT Positions	(991.1)				(991.1)	\$970.0 of UGF for eleven PFT positions and 3 PPT positions were cut. \$21.1 of UGF will eliminate cable TV in Juneau and Sitka.
38	FY17	Behavioral Health	Behavioral Health Treatment & Recovery Grants		Structure Change	Structure change: Funding from several allocations was transferred to this new Behavioral Health Treatment & Recovery Grants allocation	47,131.8	15,937.7	2,242.3	5,835.5	71,147.3	To promote efficiencies, the legislature accepted the Governor's request to consolidate several allocations. Funding from the various allocations below was transferred to the new BH Treatment and Recovery Grants allocation: --Behavioral Health Grants: \$28,983.0 --Psychiatric Emergency Services: \$7,633.7 --Services to the Seriously Mentally Ill: \$19,189.8 --Services for Severely Emotionally Disturbed Youth: \$15,340.8
39	FY17- FY18	Behavioral Health	Behavioral Health Treatment & Recovery Grants		Medicaid Expansion	Transition BH Treatment & Recovery Grants from UGF to Federal Receipts due to Medicaid Expansion	(8,779.6)				(8,779.6)	FY17 - (\$5,779.6) FY18 - (\$3,000.0)
40	FY09	Behavioral Health	Alcohol Safety Action Program			Underage Drinking Initiative	740.0				740.0	\$240.0 UGF - Increased Juvenile ASAP Grants, \$500.0 UGF - Increased Juvenile ASAP Capacity.
41	FY10	Behavioral Health	Alcohol Safety Action Program			Maintain Support to 235 Participants in Nine Therapeutic Courts <i>Legislative Addition</i>	653.0				653.0	

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42	FY07	Behavioral Health	Behavioral Health Grants		BH Grants	Replace UGF with Alcohol Treatment & Prevention Funding <i>Legislative Addition</i>	-1,691.4	1,691.4			0.0	
43	FY08	Behavioral Health	Behavioral Health Grants		BH Grants	Various Behavioral Health Grants <i>Because budgeting is not done by line items, the GF/Other/Fed funding summary is the total difference in the various funding sources from the prior year's Management Plan.</i>	2,703.2		-954.6		1,748.6	The grants line increased from \$17.0 million in FY07 to \$18.8 million in FY08 (by \$1.8 million) in FY08. Significant changes are: --\$2,203.2 UGF to restore grants to FY07 continuation levels --\$500 GF/MH for Enhanced Detoxification and Dual Diagnosis --(\$954.6) Reduction of MHTAAR grant funding
44	FY09	Behavioral Health	Behavioral Health Grants		FairShare/Proshare	General funds needed due to Elimination of ProShare Financing	4,269.1				4,269.1	
45	FY09	Behavioral Health	Behavioral Health Grants		BH Grants	Various Behavioral Health Grants <i>Because budgeting is not done by line items, the GF/Other/Fed funding summary is the total difference in the various funding sources from the prior year's Management Plan.</i>	2,300.0				2,300.0	The Grants line increased from \$18.8 million in FY08 to \$25.2 million in FY09 (\$6.6 million or 35.2%) in FY09. Significant changes are: --\$750.0 UGF for Substance Abuse Provider Rate Increases --\$750.0 UGF for Substance Abuse Treatment --\$500.0 UGF for Community-Based, Wrap-Around Prevention services --\$300.0 UGF for Senior Outreach, Assessment & Referral Project (SOAR)
46	FY10	Behavioral Health	Behavioral Health Grants		BH Grants	Various Behavioral Health Grants <i>Because budgeting is not done by line items, the GF/Other/Fed funding summary is the total difference in the various funding sources from the prior year's Management Plan.</i>	3,169.2				3,169.2	The FY10 budget included grant increments totaling \$3.1 million. In addition to a number of smaller grants, the following grants were approved: --\$1 million UGF for Community Behavioral Health Services; --\$1.25 million UGF for Community Based Substance Abuse Services; --\$500.0 UGF for Fairbanks Enhanced Detox Facility; and --\$419.2 UGF for Grantee Cost Increases
47	FY10	Behavioral Health	Behavioral Health Grants			Replace UGF with Alcohol & Drug Treatment & Prevention Funding <i>Legislative Addition</i>	-1,000.0	1,000.0			0.0	

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48	FY11	Behavioral Health	Behavioral Health Grants		BH Grants	<p>Various Behavioral Health Grants</p> <p><i>Because budgeting is not done by line items, the GF/Other/Fed funding summary is the total difference in the various funding sources from the prior year's Management Plan.</i></p> <p>Partial Legislative Addition: \$300.0 for Alternatives to Protective Custody Holds</p>	1,753.3			0.0	1,753.3	<p>The FY11 budget included grant increments totaling \$2.5 million. In addition to a number of smaller grants (and the \$1.2 million for the Clitheroe Center), the following grants were approved:</p> <p>--\$818.3 UGF for Dis Justice - Detox and Treatment Capacity as alternatives to protective custody holds; (\$500.0 requested by MH Trust & \$300.0 added by the legislature)</p> <p>--\$500.0 UGF for Substance Abuse Treatment for Pregnant Women</p> <p>--\$275.0 UGF for Soteria House</p> <p>--\$160.0 UGF for Methadone Services in Anchorage & Fairbanks</p>
49	FY11	Behavioral Health	Behavioral Health Grants		BH Grants	MH Trust: Dis Justice - Specialized Treatment Unit (Clitheroe)	1,200.0		0.0	0.0	1,200.0	Per CH 59, SLA07 (SB 100), this increment sustains a pilot project started in FY10 to provide detoxification and residential substance abuse treatment services for adult chronic inebriates who are referred through AS 47.37.180-205 Emergency Commitment or individuals who are eligible for a non-voluntary commitment to treatment. The detoxification component has four available beds and the treatment unit has eight beds for clients who have completed detoxification and who are able to begin treatment.
50	FY12	Behavioral Health	Behavioral Health Grants		BH Grants	MH Trust: Dis Justice - Sobering Center Operations - Alternatives to T47 Protective Custody Holds (Bethel)	350.0				350.0	The Bethel Sobering Center received funding to address the needs of chronic inebriates who are a danger to themselves or others as a result of chronic alcoholism or the abuse of other drugs. This increment provided the additional ongoing funding needed to provide a full year (totaling \$818.0) of operating costs for FY12.
51	FY12	Behavioral Health	Behavioral Health Grants		BH Grants	<p>Rural Peer Support Services</p> <p>Legislative Addition</p>	225.0				225.0	

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52	FY13- FY15	Behavioral Health	Behavioral Health Grants		BH Grants	Funding for grants in an amount equal to the undesignated 50% of FY11 alcohol tax receipts (not to exceed \$9 million) Multi-year appropriation: FY13-FY15	3,000.0				3,000.0	The 2012 legislature appropriated up to \$19.2 million for BH grants for FY13-FY15. <i>The Governor vetoed all but \$9 million of this request--leaving \$9 million.</i> <i>In the 2013 session, the legislature reappropriated up to \$6 million of the \$9 million FY13 appropriation to the Behavioral Health Medicaid allocation (See Sec. 23, CH 17, SLA 12). This allowed for a \$6 million UGF reduction in BH Medicaid in FY14 and is not expected to impact services in FY14.</i>
53	FY13	Behavioral Health	Behavioral Health Grants			Trauma Informed Care	360.0				360.0	Trauma-informed care is an approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives. This increment expands access to trauma-informed behavioral health services for victims of domestic violence, sexual assault, and other forms of interpersonal violence.
54	FY13	Behavioral Health	Behavioral Health Grants			MH Board/Advisory Board on Alcohol and Drug Abuse: Substance Abuse Treatment for Unresourced Individuals	405.0				405.0	Expands capacity to provide medical detox, residential, and/or intensive outpatient substance abuse treatment--followed by aftercare--to unresourced adults.
55	FY17	Behavioral Health	Behavioral Health Prevention and Early Intervention Grants		BH Grants	Replace UGF with Alcohol Treatment & Prevention Funding	-2,000.0	2,000.0			0.0	
56	FY07	Behavioral Health	Behavioral Health Administration		Technology/Database	Expand Alaska Automated Information Management System (AKAIMS) Support Added 2 PFT positions	170.0				170.0	AKAIMS offers one standard and consolidated BH information collection and delivery system serving approximately 90 BH provider agencies & hundreds of users. It will generate reports per federal and state regulation, including full HIPAA compliance. This increment allows for 2 PFT Program Support positions, help-desk capability, 2 PFT training/implementation staff, and travel funds for an itinerant trainer.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
57	FY08	Behavioral Health	Behavioral Health Administration		Bring the Kids Home (BTKH)	Various Bring the Kids Home Increments	405.0				405.0	Several Bring the Kids Home Increments were approved in FY08: --BTKH Residential Aide Training: \$105.0 UGF --BTKH Training Academy: \$200.0 UGF --BTKH Level of Care Licensing: \$100.0 UGF
58	FY09	Behavioral Health	Behavioral Health Administration			Secured Detoxification and Treatment for Involuntary Substance Abuse Commitment IncOTI Added 2 PFT positions One of the positions was deleted in FY2011	722.3				722.3	This increment was appropriated to operate a secure 24-hour detoxification and treatment center for persons who are involuntarily committed under AS 47.37.190
59	FY09	Behavioral Health	Behavioral Health Administration			Add General Funds for Planning and Design for Clitheroe Center Replacement IncOTI Legislative Addition	500.0				500.0	Legislative Addition. No description is available.
60	FY09	Behavioral Health	Behavioral Health Administration		Technology/Database	Funding for AKAIMS Development and Maintenance of Performance Based Funding Data	150.0		150.0		300.0	No description is available.
61	FY09	Behavioral Health	Behavioral Health Administration			Transfer in Medicaid Mental Health Prior Authorization Contract from Behavioral Health Medicaid	810.0		0.0	810.0	1,620.0	This transfers the authorization for the Medicaid mental health utilization review and care coordination contract out of the Behavioral Health Medicaid Services component and into the Behavioral Health Administration component. This contract was an administrative cost, not a direct medical service, and did not belong in the Medicaid services component.
62	FY10	Behavioral Health	Behavioral Health Administration			GF decreased in FY10 (from FY09) due the reversal of a number of one-time increments	-1,756.1		150.0		-1,606.1	FY09 One-Time GF increments reversed in FY10: --Secured Detox & Treatment Involuntary Substance Abuse Commitment: -\$722.3 UGF --Bethel Community Service Patrol: -\$333.8 UGF --Planning & Design for Clitheroe Center Replacement: \$500.0 UGF

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
63	FY11	Behavioral Health	Behavioral Health Administration			Transfer in of Medicaid Utilization Review contract from BH Grants	1,702.4		0.0	0.0	1,702.4	Transfer contractual authority for the Medicaid utilization review contract and the FASD Demo RSA from BH Grants component to BH Administration component where the division consolidates its Medicaid administrative claiming.
64	FY14	Behavioral Health	Behavioral Health Administration			Three-year Federal Tobacco Enforcement Contract to conduct tobacco vendors compliance investigations IncT (FY14-FY16)	0.0		0.0	650.0	650.0	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 prevent the sale of tobacco products to persons under 19 years of age and to prevent tobacco advertising & labeling in retail facilities from leading to the initiation of youth smoking.
65	FY15	Various Appropriations	Various Allocations		Generic Reductions	Deletions of Long-Term Vacant Positions	-647.1		-152.3	-554.1	-1,353.5	As occurred in many departments, the Department of Health and Social Services deleted several long-term vacant positions and the funding associated with those positions. The deleted positions and associated funding for each appropriation are highlighted below: --Health Care Services: \$262.3 total funding and 2 PFT pcns --Public Assistance: \$99.7 total funding and 1 PFT pcn --Public Health: \$691.2 total funding and 5 PFT and 3 Temp pcns --Senior and Disabilities Services: \$27.9 total funding and 1 PPT pcn --Departmental Support Services: \$272.4 total funding and 3 PFT pcns
66	FY16	Behavioral Health	Behavioral Health Prevention and Early Intervention Grants		Structure Change	Structure change: Funding from several allocations was transferred to this newly created allocation	4,411.6	2,186.8	200.0	4,064.0	10,862.4	To promote efficiencies, the legislature accepted the Governor's request to consolidate several allocations. Funding from the various allocations below was transferred to the new BH Treatment and Recovery Grants allocation: --Behavioral Health Grants: \$28,983.0 --Psychiatric Emergency Services: \$7,633.7 --Services to the Seriously Mentally Ill: \$19,189.8 --Services for Severely Emotionally Disturbed Youth: \$15,340.8

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
67	FY12- FY13	Behavioral Health	Community Action Prevention & Intervention Grants (CAPI)		DVSA	Multi-disciplinary Rural Community Pilot Project - Year Two - DVSA Initiative RSA from Governor's Office IncOTI in FY12 IncM in FY13			1,400.0		1,400.0	In an effort to reduce domestic violence, sexual assault, and substance abuse in rural Alaska, this funding was to be used to establish one or more rural community pilot projects to develop innovative, multi-disciplinary, collaborative approaches to domestic violence and sexual assault early intervention and prevention. This I/A Receipts funding is from the Governor's Office and is associated with the Governor's Domestic Violence and Sexual Assault Prevention Initiative.
68	FY09	Behavioral Health	Psychiatric Emergency Services		FairShare/Proshare	Discontinue Private ProShare Refinancing	3,346.0				3,346.0	
69	FY09	Behavioral Health	Services to the Seriously Mentally Ill		FairShare/Proshare	Discontinue Private ProShare Refinancing	4,123.6				4,123.6	
70	FY10	Behavioral Health	Services to the Seriously Mentally Ill			Transfer in funding from BH Grants to align funding with the core services of this component	1,000.0				1,000.0	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
71	FY12- FY15	Behavioral Health	Services to the Seriously Mentally Ill			Alaska Complex Behavior Collaborative	525.0				525.0	<p>Using a pool of identified experts (both local and from out-of-state), the Alaska Complex Behavior Collaborative provides comprehensive assessment and diagnostic services to seriously mentally ill individuals. Intensive consultative services are offered to families and programs serving individuals at high risk of being moved to more costly out-of-state or institutional placements due to difficult to manage behaviors. According to the department, this project has demonstrated success in reducing long-term general fund costs by keeping these Alaskans in their homes and current placements.</p> <p>The department received the following funding for this project: FY12: \$325.0 GF/MH (This was half a year, one-time funding for this project.) FY13: \$325.0 GF/MH and \$325.0 MHTAAR one-time funding FY14: \$450.0 GF/MH one-time increment to allow enough time to determine the effectiveness of this program. FY15: Although the Governor did not request funding in FY15, the legislature added \$525.0 GF/MH to the FY15 base budget.</p>
72	FY13	Behavioral Health	Services to the Seriously Mentally Ill			Bridge Home Program Expansion	270.0		750.0		1,020.0	<p>This program allows for 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 to the U.S. Dpt of Housing & Urban Development Housing Choice voucher program.</p>

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
73	FY06- FY14	Behavioral Health	Services for Severely Emotionally Disturbed Youth		Bring the Kids Home (BTKH)	Bring the Kids Home Increments	7,999.0				7,999.0	Bring the Kids Home Increments (<i>The MHTAAR is the total for that year and should not be summed across fiscal years.</i>) FY06: \$135.0 GF & \$2,020.5 MHTAAR FY07: \$870.0 GF & (\$260.5) MHTAAR FY08: \$2,084.0 GF & (\$10.0) MH TAAR FY09: \$950.0 GF & \$1,350.0 MHTAAR FY10: \$1,100.0 GF & \$1,200.0 MHTAAR FY11: \$1,200.0 GF & \$1,075.0 MHTAAR FY12: \$805.0 GF & \$875.0 MHTAAR FY13: \$585.0 GF & \$1,275.0 MHTAAR FY14: \$270.0 GF & \$600.0 MHTAAR
74	FY10	Behavioral Health	Services for Severely Emotionally Disturbed Youth			Grants to community behavioral health centers for innovative programs and training	1,100.0				1,100.0	Legislative Addition. No description is available.
75	FY11	Behavioral Health	Services for Severely Emotionally Disturbed Youth			Additional Peer Navigator Program Funding	275.0				275.0	Peer navigators run parenting skills training, peer support groups, provide assistance, resources and information and advocate for family needs. This increment adds \$275.0 to \$300.0 of GF in the base budget.
76	FY13	Behavioral Health	Services for Severely Emotionally Disturbed Youth			MH Trust: Early childhood screening & brief behavioral services	360.0				360.0	Standardization of early childhood screening (i.e., EPSDT) to identify and intervene with early childhood behavioral and developmental concerns will help to connect children and families to services needed to promote healthy development. This increment funds outreach, training, and technical assistance to encourage more providers to administer EPSDT screenings.
77	FY13	Behavioral Health	Services for Severely Emotionally Disturbed Youth			Generic UGF Reduction	-250.0				-250.0	The Governor's FY15 budget contained "generic" reductions in various allocations.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
78	FY10	Behavioral Health	Designated Evaluation and Treatment			MH Trust: AMHB/Advisory Board on Alcoholism & Drug Abuse (ABADA) request -- Psychiatric Emergency Services: Designated Evaluation and Treatment (DET) and DES Expansion	950.0		300.0		1,250.0	AS 47 requires DBH to respond to psychiatric emergencies statewide, providing transportation, evaluation, and hospitalization for individuals at imminent risk of harming themselves or others, or gravely disabled by mental illness. To address a shortage of these services in rural communities, the legislature appropriated funding for this purpose.
79	FY16-18	Behavioral Health	Designated Evaluation and Treatment			Funding for hospital, physician and transport costs associated with indigent patients.	-295.9				-295.9	FY16 - \$567.0 - Additional authority was approved in the Designated Evaluation and Treatment component to fund hospital, physician, and transport costs resulting from involuntary commitments. FY18 - (\$862.9) - Medicaid Expansion has lessened the burden of uncompensated care to hospitals, resulting in a decline in Disproportionate Share Hospital (DSH) payments.
80	FY09	Behavioral Health	Services for Severely Emotionally Disturbed Youth		FairShare/Proshare	Add GF due to discontinuation of ProShare	1,113.0				1,113.0	
81	FY11	Behavioral Health	Alaska Psychiatric Institute		Medicaid Growth	Reflect Interagency Receipts for Medicaid-Eligible Clients			3,900.0		3,900.0	I/A Receipt collections increased due to increases in the Disproportionate Share Hospital (DSH) allotments and Medicaid rates. This increment more accurately reflects API's Medicaid expenditures.
82	FY18	Behavioral Health	Various		Substance Abuse	Opioid Addiction and Substance Abuse Prevention and Treatment Grants				3,000.0	3,000.0	Funding was appropriated in the following allocations: -\$1,185.0, Behavior Health Treatment and Recovery Grants; -\$280.0, Alcohol Safely Action Program (ASAP); - \$130.0, BH Administration; -\$1,405.0, BH Prevention and Early Intervention.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
83	FY06- FY10	Children's Services	Front Line Social Workers		Front Line Workload Study Recommendations	Front Line Social Work Expansion and Title IV-E Foster Care Realignment PCNs: A total of 52 PCNs were added FY06: 31 PFT positions added FY08: 6 PFT positions added FY09: 10 PFT positions added FY10: 5 PFT positions added	2,258.1		0.0	2,723.6	4,981.7	A 2002 federal review highlighted inadequacies ensuring the safety of children, finding children permanent homes and making sure their health, education and mental health needs were met. Much of this was attributed to high caseloads. A total of 52 PCNs and associated funding was added from FY06- FY10. The amount appropriated in FY10 fully implemented the study's recommendations. FY06: \$830.5 GF & \$2.2 million FF FY08: \$516.7 GF & 172.2 FF FY09: \$600.0 GF & \$260.9 FF FY10: \$310.9 GF & \$92.9 FF
84	FY07	Children's Services	Front Line Social Workers			Additional funding needed due to the Rosales Reversal - Ninth Circuit Court of Appeals Decision	1,301.0			-1,301.0	0.0	
85	FY08	Children's Services	Front Line Social Workers		ARRA	Replace shortfall of federal funding associated with the Federal Deficit Reduction Act with general funds	1,872.6			-1,872.6	0.0	
86	FY08	Children's Services	Front Line Social Workers			Implement Targeted Case Management for Foster Care Administration (Reg Change)	-800.7			800.7	0.0	Alaska received a Medicaid State Plan Amendment (SPA) for approval to reimburse the Office of Children's Services (OCS) for targeted case management services provided to Medicaid eligible children who are in state custody and under the age of 21 years.
87	FY12	Children's Services	Front Line Social Workers		Workload	Increase Staff Support in Line with Workload - Citizen's Review Panel Recommendation	766.7			168.3	935.0	This funding was approved for 11 positions in Wasilla to meet workload needs. This office serves Mat-Su, Kenai, Homer, King Salmon, Kodiak, Seward, Glennallen, and Valdez. According to the department, the Southcentral office was working at an estimated 140% capacity--meaning with all case-carrying positions filled, the workload exceeded levels recommended by the Child Welfare League of America (CWLA) by 40%.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
88	FY12	Children's Services	Front Line Social Workers			Social Worker Class Study Implementation	1,185.0			315.0	1,500.0	At the request of the ASEA union, DOA conducted a job classification study of the social worker job class. The study affected 288 caseworkers and focused on identifying and correcting inequities in like-pay for like-work. The case workers were in a dual job class structure: Children's Services Specialist (CSS) and Social Workers (SW). Social Workers were paid at a higher range because they were licensed. The study determined that licensure was not a requirement and a single protective services job class series was developed and implemented on July 1, 2012. The implementation resulted in a one- to two- range increase in many positions. This funding is needed to pay for the increased ranges.
89	FY18	Children's Services	Front Line Social Workers			Add Funding to Reduce Caseloads and Increase Training 31 PFT Positions	2,425.7			1,435.5	3,861.2	The legislature added a portion of the funding needed in FY18 to reduce caseloads and increase training. A request for full funding (864.7 UGF and \$246.1 Federal) is anticipated in FY19.
90	FY06	Children's Services	Family Preservation		Child Advocacy Centers	Federal Authorization for Child Abuse Prevention & Training Act/Children's Justice Act (CAPTA/CJA) award				1,000.0	1,000.0	Federal awards for Child Abuse Prevention and Training Act/Children's Justice Act (CAPTA/CJA) doubled beginning October 2005. DHSS granted the funding to subawardees to enhance ongoing advocacy/justice activities.
91	FY09	Children's Services	Family Preservation		Child Advocacy Centers	Continued Support for Child Advocacy Centers	1,300.0			-1,872.6	-572.6	
92	FY10	Children's Services	Family Preservation		Child Advocacy Centers	Replace Federal Funds for Alaska Child Advocacy Centers -- Final Phase	1,123.8			-1,123.8	0.0	
93	FY11	Children's Services	Family Preservation		Curyung Lawsuit (Judgments and Settlements)	Judgments and Settlements Against the State for FY11 (Curyung lawsuit)	1,200.0				1,200.0	This appropriation is the FY11 portion of the settlement costs of a lawsuit filed by four Alaska Native tribes. The Curyung, Ekwok, Kwinhagak, and Chevak tribes alleged that the state violated provisions of the federal Indian Child Welfare Act (ICWA) when it (1) failed to notify the tribe when it took custody of a young tribal member; and (2) failed to meet placement preferences under ICWA; and (3) failed to provide proper and timely notice of placement changes for children (who are tribal members) that were taken from their parents due to abuse or neglect. (continued)

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
												<i>A settlement was reached between the tribal organizations and the state that mandates that the state pay \$1.2 million per year for FY10-FY12. An FY09 appropriation of \$1.3 million GF to the Department of Law was used to pay the FY10 amount. To be consistent with other judgments and settlements, the \$1.2 million UGF appropriated in FY12 was placed in the "Judgments, Claims & Settlements" allocation under the "Special Appropriations" pseudo-agency.</i>
94	FY16	Children's Services	Family Preservation			Federal TANF Funding is available to fund the Child Advocacy Centers. Replace UGF with I/A Repts from Public Assistance	-2,938.4		2,938.4		0.0	Because the OCS plans to partner with the Division of Public Assistance to use available federal TANF grants to provide funding for Child Advocacy Centers, the legislature removed the UGF and replaced this funding with I/A Receipts.
95	FY17	Children's Services	Family Preservation		Increase for Family Reunification and Retention Grants		1,725.0				1,725.0	
96	FY10	Children's Services	Infant Learning Program Grants		Early Childhood Intervention/Learning	Early Intervention/Infant Learning Program	1,000.0				1,000.0	Funds provider rate increases. The intent of the funding is to adjust for inflation from 2003 for increases in therapy services, travel, fuel and personnel costs. The funding was expected to recover up to 20 providers and one training coordinator.
97	FY13	Children's Services	Infant Learning Program Grants		Early Childhood Intervention/Learning	Early Intervention for Young Children (Expansion of Services)	350.0		75.0		425.0	This increment expanded early childhood mental health consultation (ECMHC) services for young children (birth to five) with behavioral health challenges. Services to young children focus on the family system, on building protective factors, and improve outcomes for the whole family. Because the Anchorage early childhood therapeutic pre-school was full and had a waiting list, there had been requests to expand into Matsu. Most areas of the state do not yet have an ECMHC program.
98	FY10	Health Care Services	Health Facilities Licensing and Certification		Structure Change	Transfer 12 Health Facility Surveyor PCNs and funding from the Division of Public Health to Health Care Services	206.7			1,260.1	1,466.8	This transfer was done to align Medicaid/Medicare compliance with overall Medicaid/Medicare health care services and to allow for better coordination with the providers.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
99	FY14	Health Care Services	Health Facilities Licensing and Certification			Health Facilities Licensing and Certification	457.0				457.0	This funding was approved to allow for follow up investigations resulting from a significant increase in the number of complaints about services provided in residential living facilities. The investigations are needed to ensure the health, welfare and safety of over 5,000 Alaskans receiving services in approximately 686 resident living facilities.
100	FY09	Health Care Services	Residential Licensing			Background Check Unit	1,000.0				1,000.0	FY09 - \$1 million - Inceec of the Residential Licensing Section is to conduct licensure activities for all assisted living homes and children's residential facilities and performs background check processing for all licensed and certified programs. Due to regulatory and statutory changes, there was a significant increase in workload--hence the increment.
101	FY06	Health Care Services	Medical Assistance Administration		Structure Change	To reflect the reorganization of functions, several transfers of funding and positions occurred in FY06	6,190.6		-385.0	17,110.0	22,915.6	The two largest transfers were: --Consolidate Health Purchasing Group in MAA: \$4.3 million GF & \$11.7 million Fed Rcpts --Transfer Contract funds from Medicaid Services: \$2.9 million GF & \$6.8 million Fed Rcpts
102	FY12	Health Care Services	Medical Assistance Administration		Structure Change	Transfer funding from MAA to HCS Medicaid Services	-5,929.1			-15,314.9	-21,244.0	The transfers were made to streamline Medicaid funding by placing contractual items that directly affect Medicaid Services into the Medicaid Services RDU since HCS Medicaid Services no longer resides in the Health Care Services RDU.
103	FY12	Health Care Services	Medical Assistance Administration		Structure Change	Transfer funding from Medicaid Services for Increased Costs of the Affiliated Computer Services Contract	1,058.6			1,058.6	2,117.2	Transfer funding to pay for increased costs associated with the Affiliated Computer Services (ACS) contract. ACS is the division's third party payer for all Medicaid claims. The ACS contract had a cost escalation provision that was not previously built into the budget, and that the MAA component was unable to absorb. This transfer was necessary to continue the contract and to assure that providers receive payment for Medicaid services provided.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
104	FY13	Health Care Services	Medical Assistance Administration		Patient-Centered Medical Homes	Patient-Centered Medical Homes with Integrated Services IncOTI			500.0		500.0	Existing programs were insufficient to address growing concerns of the Medicaid population with mental health and substance abuse disorders. It was believed that primary care providers could help fill the gap. This MHTAAR funding was planned to be expended as follows: --\$200.0: Strategic integration plan development contract; and --\$300.0 for a one-time competitive grant for up to four pilot programs for medical home infrastructure development.
105	FY16	Health Care Services	Medical Assistance Administration		Medicaid Expansion	FY16 RPL: Federal and MHTAAR Receipts to implement Medicaid Expansion --Health Care Services: \$205.0 FF and \$205.0 MHTAAR			205.0	205.0	410.0	FY16 Medicaid Expansion. Although the legislature rejected the Governor's budget request to implement Medicaid Expansion, Governor Walker submitted RPLs to the LB&A Committee (totaling \$148.6 million and announced that Medicaid Expansion would begin on September 1, 2015. Although the LB&A Committee did not address the Governor's RPLs, the Governor moved forward with the expansion. --Medicaid Services: \$145,438.4 Fed Repts --Health Care Services: \$205.0 FF and \$205.0 MHTAAR (and enough funding for 3 permanent full-time positions) --Public Assistance: \$1,385.7 FF and \$1,385.7 MHTAAR (and enough funding for 23 permanent full-time positions)
106	FY13	Health Care Services	Rate Review		Rate Rebasing	Acuity Rate Measurement Systems IncOTI	320.0			320.0	640.0	Behavioral Health Outpatient Rate Setting and Acuity Measurement System \$100.0 (\$50.0 Federal/\$50.0 GF); Home Health Rate Setting and Acuity Measurement System \$100.0 (\$50.0 federal/\$50.0 GF); Home and Community Based Services Acuity Measurement System \$300.0 (\$150.0 Federal/\$150.0 GF); Tribal Dental and Behavioral Health Encounter Rate Settlement Calculations \$140.0 (\$70.0 Federal/\$70.0 GF)
107	FY09	Juvenile Justice	Various Youth Facilities Allocations		FairShare/Proshare	General Funds Required due to Elimination of ProShare funding	650.0				650.0	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
108	FY09- FY10	Juvenile Justice	Various Youth Facilities Allocations			Front Line Staffing	1,034.5				1,034.5	FY09: McLaughlin -- \$439.0 (6 PFTs) FY10: Fairbanks -- \$186.6 (2 PFTs) FY09: Bethel -- \$95.0 (1 PFT) FY10: Bethel -- \$98.7 FY09: Johnson -- \$70.0 (1 PFT) FY10: Johnson -- \$75.2 (1 PFT) FY09: Ketchikan -- \$70.0 (1 PFT)
109	FY09- FY10	Juvenile Justice	Various Youth Facilities Allocations			Staffing for Safety and Security Note: Many McLaughlin increments are spread throughout the DJJ facilities.	1,911.4				1,911.4	FY08: McLaughlin -- \$282.1 (5 PFTs) FY09: McLaughlin -- \$1,016.5 FY13: McLaughlin -- \$300.0 (3 PFTs (Grave Shift Coverage)) FY08: Johnson -- \$56.4 (1 PFT) FY13: Johnson -- \$200.0 (2 PFTs) FY08: Ketchikan -- \$56.4 (1 PFT)
110	FY08- FY12	Juvenile Justice	McLaughlin			Mental Health Clinicians and/or MH Clinical Capacity Added 6 PFT Positions Note: Many McLaughlin increments are spread throughout the DJJ facilities.	572.3				572.3	□ FY08: McLaughlin – MH Clinicians for McLaughlin and Fairbanks: \$83.9 UGF (and \$189.2 MHTAAR) (3 PFTs) □ FY09: McLaughlin – MH Clinical Capacity Expansion: \$288.4 UGF (and \$189.2 MHTAAR) (3 PFTs) (approved as one-time in FY08 & FY09 but put in base in FY10) □ FY12: McLaughlin – MH Clinical Capacity: \$189.2 UGF (replaces MHTAAR Funding) □ FY12: McLaughlin – Mental Health Capacity Expansion: \$10.8 UGF
111	FY07	Juvenile Justice	McLaughlin			Fixed cost increases	314.3				314.3	
112	FY12	Juvenile Justice	McLaughlin			Decrease vacancy factors for Juvenile Justice Facilities to account for low turnover	500.0				500.0	
113	FY06- FY10	Juvenile Justice	Nome Youth Facility		Youth Facility Expansion	Nome Youth Facility Expansion from 6 to 14 bed capacity	551.8				551.8	Costs Associated with the Expansion FY06: \$451.8 GF--Expansion to 14 bed capacity FY10: \$100.0 GF--Overhead associated with new building and increased costs for food

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
114	FY16	Juvenile Justice	Ketchikan Regional Youth Facility			Reprogram Ketchikan Regional Youth Facility to a Dually Diagnosed Treatment Facility serving statewide youth	-998.0		1,000.0	-2.0	0.0	The Division of Juvenile Justice plans to reprogram the Ketchikan Regional Youth Facility from a detention facility to a residential facility that provides substance abuse treatment to dually diagnosed (mental health and substance abuse) youth. By changing the purpose of the facility, the division will become a Medicaid provider and be reimbursed for the services provided to youth (reducing UGF). The Johnson Youth Center (in Juneau) has the capacity and will be able to accommodate detention youth from the Ketchikan facility.
115	FY18	Juvenile Justice	Ketchikan Regional Youth Facility			Closure of Ketchikan Youth Facility Deleted 15 PFTs, 1 PPT, and 2 Temp Positions	0.0		-1,025.7	0.0	-1,025.7	In September 2016, DJJ closed the Ketchikan Regional Youth Facility and transferred funding and needed positions to other DJJ allocations. Additionally, unnecessary I/A Receipt authorization was deleted.
116	FY06	Juvenile Justice	Probation Services			Increase Efforts to Address Juvenile Crime Added 11 PFT positions (4 PFT PCNs were deleted in FY08-- along with \$229.1 UGF)	1,070.0				1,070.0	This funding was appropriated to address juvenile crime by promoting accountability, public safety and skill development. This was to be done through the Youth Level Services-Case Management Inventor risk need assessment process research-based approach to managing juvenile cases.
117	FY07	Juvenile Justice	Probation Services			Public Safety and Security through Offender Accountability	933.3				933.3	Juvenile Probation Officers (JPOs) ensure that juvenile offenders are supervised, pay restitution, perform community work service and develop the skill required to reduce the likelihood of re-offense. This increment was approved to avoid layoffs of up to eight JPOs.
118	FY08	Juvenile Justice	Probation Services			Federal Funds replaced General Funds for Targeted Case Management Receipts	-600.0			400.0	-200.0	Temporary federal Medicaid revenue was available for Targeted Case Management claims for case management work that probation Officers were doing with Medicaid eligible youth during FY07. This revenue is not available in FY09 so will need to be replaced with GF.
119	FY09	Juvenile Justice	Probation Services			General Funds replaced Federal Funds for Targeted Case Management Receipts	600.0			-600.0	0.0	Federal Medicaid funds for Targeted Case Management is not available in FY09.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
120	FY10	Juvenile Justice	Probation Services			Probation Services Aftercare, Mental Health and Support Needs Added 2 PFT positions Added 1 PPT position	273.6				273.6	This increment funds a Juvenile Probation Officer in Bethel, a Mental Health Clinician in Anchorage, and a part-time Social Services Associate in Valdez.
121	FY10	Juvenile Justice	Probation Services			Base funding for Guard Hires for Escorts, Travel for Juveniles who are not Medicaid-Eligible and Other Services	225.0				225.0	
122	FY06 & FY16	Public Assistance	Alaska Temporary Assistance Program	F		Caseload reductions	-1,072.6		-187.9	-2,312.1	-3,572.6	FY06: (\$187.9) Other and (\$2,312.1) Fed Rcpts FY16: (\$1,072.6) UGF--(a 7.2% reduction from the FY15 MP)
123	FY17- FY18	Public Assistance	Alaska Temporary Assistance Program	F		Reduce/Replace UGF in Hopes of Counting AHFC's Homeless Assistance Program, PCE Program and other Possible Programs against the TANF Maintenance of Effort (MOE) <i>Legislative Deletion</i>	-10,000.0			2,000.0	-8,000.0	FY17: (\$7,000) UGF FY18: (\$3,000) UGF
124	FY17- FY18	Public Assistance	Adult Public Assistance	F		Align Budget to Anticipated Need <i>Legislative Deletion</i>	-3,290.4				-3,290.4	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
125	FY09- FY16	Public Assistance	Energy Assistance Program	F		Heating Assistance for Low Income Households	9,174.3			14,183.6	23,357.9	<p>The legislature established a new state heating assistance program to provide financial assistance for home heating costs of low-income households (SB 221). This program provides expanded eligibility coverage for Alaska residents for home heating costs assistance beyond the current federal Low-Income Home Energy Assistance Program (LIHEAP).</p> <p>The \$10 million GF will be used first to fund the new state program. Any remaining funds will be used to supplement grants to households that qualify under the federally-funded LIHEAP.</p> <p>General Funds for this program are as follows: FY09: \$10 million GF FY10: \$5 million GF FY11: \$5 million GF FY12: \$13 million GF FY13: \$13.4 million GF FY14: \$13.7 million GF FY15: \$12.7 million GF FY16: \$9.2 million GF (a decrease of \$3.5 million UGF, a 27.6% reduction from the FY15 MP)</p>
126	FY17- FY18	Public Assistance	Child Care Benefits	F		Governor's Veto Reduced Child Care Benefits by \$1 million	-1,500.0				-1,500.0	<p>FY17 - (\$1,000.0) FY18 - (\$500.0)</p>
127	FY17	Public Assistance	General Relief Assistance	F		Decrease burial assistance program through reform and efficiencies	-1,700.0				-1,700.0	<p>While regulations require the state to pay vendors a maximum of \$1,250 for basic funeral and burial services for each deceased person, the department plans to save money by revising regulations for other burial expenses, such as the costs of the burial plot; cremation; opening and closing a grave; oversized casket costs, clothing and storage as a result of extraordinary circumstances and transportation of the deceased.</p>
128	FY06	Public Assistance	Quality Control			Implement New Federal Mandate "Payment Error Rate Measurement" (PERM) Added 7 PFT positions	281.9			281.9	563.8	<p>In October 2005, CMS started requiring that states sample payments on Medicaid claims. To meet the requirements DPA had to increase staff.</p>

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
129	FY13	Public Health	Health Planning and Systems Development			Fiscal Note for HB 78 (Ch. 25, SLA 2012) Incentives for Certain Medical Providers	2,164.2	678.7			2,842.9	This bill created a loan repayment program and an employment incentive program for certain health care professionals employed in the state. A maximum of 90 health care professionals must meet eligibility criteria, and they must be engaged in qualified employment for a minimum contract of 3 years. The intent of the legislation is to address the worsening shortage of certain health care professionals in the state by increasing the number and improving the distribution of health care professionals who provide direct patient care.
130	FY10	Public Health	Nursing			PH Nursing RSA and Medicaid Claim Reduction	4,000.0		-4,000.0		0.0	Because the Medicaid approved cost allocation methodology wasn't followed, Medicaid claims were overstated by approximately 25 percent. I/A Receipts from Medicaid Services had to be replaced with GF. <i>An identical FY09 appropriation correcting the fund sources was approved in the FY09 supplemental budget.</i>
131	FY11- FY13	Public Health	Nursing		Public Health Nursing Grantees	Stabilize Funding to Public Health Nursing Grantees	3,740.0			110.0	3,850.0	The Division of Public health provides direct public health nursing services to all communities in Alaska except those served by the Maniilaq Association, the NS Borough, the Municipality of Anchorage and (until the end of FY11) the Norton Sound Health Corporation. Because the prior grant amounts were insufficient to support services on par with services provided to the rest of the state, the legislature provided additional funding to these grantees in the following amounts: FY11: \$1 million GF FY12: \$1.75 million GF FY13: \$990.0 GF and \$110.0 Fed Rcpts
132	FY12	Public Health	Nursing		Public Health Nursing Grantees	Transfer Public Health Nursing Services from Norton Sound Health Corporation to the Division of Public Health	420.0				420.0	The Norton Sound Health Corporation chose to transfer public health services back to the state. This provides the funding necessary to cover the additional costs for DPH to assume provision of all PH services for the Nome/Bering Strait region on 7/1/11.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
133	FY12	Public Health	Nursing			Reduce the vacancy factor to increase the number of authorized positions that can be filled	1,750.0				1,750.0	Successful recruitment efforts for PH nurses resulted in a decrease in the vacancy factor from 16% in July 2006 to 11% in May 2010. Because many of the federal funds allocated to positions was uncollectible, GF was needed to fill the positions. This increment was expected to bring the vacancy factor down to 6.8%.
134	FY16	Public Health	Nursing			Close one public health center, reduce Public Health Nursing Grants and delete staff Delete (8) PFT Positions Delete (1) PPT Position	-1,400.1				-1,400.1	The Department plans to implement the following reductions: --Close the Seward Public Health Center. DPH will partner with the new qualified health center clinic for reproductive services and utilize an itinerant nurse from Kenai to provide services to Seward. --Delete a number of vacant positions (or positions with retiring incumbents) in various locations.
135	FY16	Public Health	Nursing			Remove 5% of the \$16.1 million UGF increase between FY06 and FY16. <i>Legislative Deletion</i>	-402.5				-402.5	The legislature removed a portion (5%) of the UGF increase between FY06 and FY16. Combined with the Governor's requested \$1.4 million UGF reduction UGF was reduced by 4.5% from the FY15 MgtPln (and by 3.5% total funds). The department reduced grants for the three public health nursing clinics (Maniilaq, North Slope and Municipality of Anchorage).
136	FY17	Public Health	Nursing			Decrement funding for positions and add GF/Prgm Rcpts (4) PFT Positions	-3,731.9	1,000.0			-2,731.9	A total of \$1 million GF/Prgm Receipts (DGF) was added to enable PH Nursing to expend receipts they collect from 3rd parties. PH Nursing does not believe these receipts will be forthcoming.
137	FY18	Public Health	Nursing			Phase out 5% of UGF base funding to encourage collaboration with other Health Care Providers <i>Net Zero</i>	0.0				0.0	Phased funding includes: - (\$1,136.8) UGF - \$378.9 UGF IncOTI - \$757.9 UGF IncTs (FY18-FY20)
137	FY07	Public Health	Women, Children and Family Health			Partial continuation funding for breast/cervical health care <i>Legislative Addition</i>	250.0				250.0	In FY06, the legislature added one-time funding of \$500.0 UGF to replace federal funds no longer available. Base funding of \$250.0 UGF was added in FY07.
138	FY08	Public Health	Women, Children and Family Health			AMHTA recommendations for Disabilities Council on Autism <i>Legislative Addition</i>	250.0		250.0		500.0	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
139	FY10	Public Health	Women, Children and Family Health			Expanded Autism Diagnostic Clinic, Autism Capacity Building, and a Birth Defects Registry	530.3		125.0		655.3	Expanded Autism Diagnostic Clinic: \$125.0 UGF MH Trust Workforce Dev - Autism capacity building: \$125.0 UGF and \$125.0 MHTAAR Birth Defects Registry : \$280.3 UGF
140	FY11	Public Health	Women, Children and Family Health			Replace unrealizable interagency receipts due to the loss of Medicaid School Based Claims funding	347.8		-347.8		0.0	
141	FY13	Public Health	Women, Children and Family Health			Increased demand for newborn screening		350.0			350.0	Funding source is GF/Program Repts.
142	FY15	Various Appropriations	Various Allocations		Generic Reductions	Generic Reductions in Expenditure Levels	-1,732.8			-121.3	-1,854.1	The Governor's budget contained "generic" funding reductions in various departments that did not identify specific impacts of these reductions.
143	FY13	Public Health	Epidemiology			State Immunization Funding Program	5,126.0			70.0	5,196.0	
144	FY07	Public Health	State Medical Examiner			Public Health Protection - Medical Examiner: support staffing and safety/operation improvements in Anchorage facility Added 2 PFT positions	500.0				500.0	
145	FY11	Public Health	State Medical Examiner			Phase I (of 3) of State Medical Examiner's Office reforms to maintain services	300.0				300.0	
146	FY12	Public Health	State Medical Examiner			Increased freight costs and portion of increased workload for Phase I improvements of State ME Office	400.0				400.0	
147	FY07	Public Health	Public Health Laboratories			Public Health Protection: Infectious Disease Control and Emergency Preparedness Added 2 PFT positions	500.0				500.0	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
148	FY08	Public Health	Public Health Laboratories			Delete vacant positions Deleted 4 PFT positions and 1 Temporary position	-129.6			-207.4	-337.0	
149	FY09	Public Health	Public Health Laboratories			Fairbanks Virology Lab Pro-rated for Lab Opening - 1/2 year funding	395.0				395.0	
150	FY09	Public Health	Community Health Grants		Community Health Centers	Add One-Time Funding for Community Health Centers IncOTI <i>Legislative Addition</i>	1,000.0				1,000.0	This funding was one-time only and was removed in the FY10 budget.
151	FY09	Public Health	Community Health Grants			Transfer GF from Medicaid Services to Community Health Grants	279.4				279.4	With the elimination of ProShare financing, this transfer from Medicaid Services was necessary to continue services.
152	FY09	Public Health	Community Health Grants		FairShare/Proshare	Add GF due to discontinuation of ProShare	1,172.0				1,172.0	See item #6.
153	FY10	Public Health	Community Health Grants			Transfer Nursing and EMS Grants to Public Health Nursing and EMS components	-1,683.8				-1,683.8	To assist in better management of the grants, HCS transferred to following funding out of Community Health Grants: --\$491.1 UGF was transferred to Emergency Medical Services for grants to Maniilaq and Y-K Health Corporation. --\$1,192.3 UGF was transferred to PH Nursing for nursing grants.
154	FY06	Senior and Disabilities Services	Senior and Disabilities Services Administration		Transfer	Several transfers to realign funding to this allocation occurred	865.4			410.6	1,276.0	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
155	FY07	Senior and Disabilities Services	Senior and Disabilities Services Administration			Increase Medicaid Assessment contracts to manage Medicaid costs	300.0			600.0	900.0	<p>SDS contracts with private contractors to perform Medicaid assessments for beneficiaries receiving services under the PCA program and the four Medicaid waivers in SDS. These assessments determine the client's Medicaid eligibility, help determine the level of care required by that individual and indicate what services are required to improve their quality of life.</p> <p>The contractors costs were rising due to fuel, travel, nurses raises, and about 3 times the number of assessments are required because of regulation changes.</p> <p><i>In FY08, SDS decided not to contract for these activities and the funding was removed.</i></p>
156	FY08	Senior and Disabilities Services	Senior and Disabilities Services Administration			Improve Medicaid Assessment and Reduce Unnecessary Contracts	-325.0			-325.0	-650.0	<p>The division phased out the contract that was completing medical assessments for beneficiaries that apply for Medicaid services. This gave the division more control over completion of the assessments and helped to ensure that they were completed in a timely and consistent manner.</p> <p><i>This increment removed funding approved in FY07.</i></p>
157	FY11- FY12	Senior and Disabilities Services	Senior and Disabilities Services Administration		Corrective Action Plan (CAP)	Waiver Corrective Action Plan Recovery and Program Stabilization FY11: \$1,018.0 GF & \$924.0 FF (1 PPT position) FY12: \$1,450 GF & \$500.0 FF	2,468.0		0.0	1,424.0	3,892.0	<p>SDS is required to conduct annual face-to-face assessments, level of care determinations, and plan of care reviews in order to comply with federal requirements. SDS had not been in compliance resulting in the June 2009 moratorium that prevented placing Alaskans on any of the four Medicaid waiver programs managed by SDS. Through negotiations with CMS, the moratorium was lifted but SDS was required to develop a CAP and assure that SDS will maintain timely assessments.</p>
157	FY12	Senior and Disabilities Services	Senior and Disabilities Services Administration		Personal Care Assistance (PCA)	Personal Care Assistance Staff and Program Stabilization	750.0			200.0	950.0	<p>To be compliant with federal requirements, individuals in the PCA program must have an annual face-to-face eligibility assessment in their homes. This funding was appropriated to address assessment and reassessment needs to tackle burgeoning document management requirements.</p>

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
158	FY18	Senior and Disabilities Services	Senior and Disabilities Services Administration		Medicaid Reform Chapter 25, SLA 2016 (SB 74)	Year Two Funding Associated with Increased Eligibility Assessments	226.2			226.2	452.4	Section 38(d)(1) and (2) of SB74 directs the state to apply to the Center for Medicare and Medicaid Services (CMS) to develop the 1915 options. The state will realize savings in the provision of home and community based services because it allows for the services to be funded with 50% Federal Receipts and 50% UGF (instead of 100% UGF)
159	FY11	Senior and Disabilities Services	General Relief/Temporary Assisted Living			Additional Funds to Account for Caseload Projections	3,800.0				3,800.0	An identical amount (\$3.8 million GF) was approved in the FY10 supplemental budget.
160	FY16	Senior and Disabilities Services	General Relief/Temporary Assisted Living			Reduce individual benefits under the General Relief Temporary Assisted Living Program: (\$789.8 UGF) FY16 RPL: \$175.0 MHTAAR Funding to do	-789.8			175.0	-614.8	The legislature accepted the Governor's FY16 decrement request for \$789.8 UGF (a 9.7 percent decrease from FY15). Based on an RPL approved on 10/7/15, it appears that the \$789.8 reduction was too great. FY16 RPL (10-7-15): To help offset a portion of the reduction, SDS believes up to 60 clients of the GRA clients may be eligible for housing under an AHFC 811 housing grant in FY16 (and additional clients in future fiscal years). DHSS received \$175.0 MHTAAR funding to do initial assessments for all GRA clients in order to determine eligibility for the AHFC 811 housing grant (and perhaps other programs that can reduce GF costs). Anticipated savings in FY16 is \$566.2 UGF. The initial cost of the assessments is one-time and the department expects to absorb the costs on ongoing assessments.
161	FY06	Senior and Disabilities Services	Senior Community Based Grants		Structure Change	The following allocations were consolidated into the Senior Community Based Grants allocation: --Home and Community Based Care --Nutrition, Transportation and Support Services	1,750.0				1,750.0	
162	FY09	Senior and Disabilities Services	Senior Community Based Grants			Adjust rates for caregivers, nutrition, transportation and support <i>Legislative Addition</i>	1,000.0				1,000.0	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
163	FY10	Senior and Disabilities Services	Senior Community Based Grants			Maintain the current level of senior grants and services available in most regions of the state	609.9				609.9	Aging and Disability Resource Centers (ADRC) serve as a place for people to get information and assistance with accessing services that support them in the community. This funding will result in the establishment of two additional ADRCs in locations not currently serviced by the existing centers. Potential locations include Fairbanks/Interior Alaska, Northwest Alaska region and Southwest Alaska region.
164	FY13	Senior and Disabilities Services	Senior Community Based Grants			MH Trust: ACoA - Adult Day Services	202.5				202.5	This funding will increase multiple year grants to Adult Day Service (ADS) Providers to serve additional older Alaskans with Alzheimer's Disease and Related Dementia, those with physically disabling conditions, and older persons with other cognitive impairments who are not safe staying alone unsupervised; provide critical respite for unpaid family caregivers; and provide start-up funds for one new program in an underserved area. Twelve grant-funded ADS programs served 472 seniors in FY2010 of whom 56% have dementia. ADS activities include age-appropriate structured activities including exercises, games, art projects, outings, assistance with personal care, and lunch/snacks. This increment will add \$225.0 GF/MH (\$125.0 GF) to the \$1,555.0 baseline.
165	FY13	Senior and Disabilities Services	Senior Community Based Grants			MH Trust: ACoA - Senior In-Home Services \$250.0 requested by the Governor <i>Legislative addition: \$175.0</i>	425.0				425.0	\$250.0 of this increment was requested by the Governor to increase grants to provide care coordination, chore, and respite services to address growing waitlists for SIH services. This project targets adults with Alzheimer's disease and related dementia who are at risk for institutionalization; older persons having greatest social and economic need; Alaska Native elders; and older Alaskan's living in rural areas. Another \$175.0 was added by the legislature.
166	FY14	Senior and Disabilities Services	Senior Community Based Grants			MH Trust: ACoA - Alzheimer's Disease Education & Support Program (ADRD-ESP)	230.0				230.0	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.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
167	FY14	Senior and Disabilities Services	Senior Community Based Grants			Alaska Medicare Clinic: Help Address Shortage of Primary Care Services for the Underserved Medicare Population <i>Legislative addition</i>	861.7				861.7	
167	FY09	Senior and Disabilities Services	Community Developmental Disabilities Grants		FairShare/Proshare	General funds needed due to Elimination of ProShare Financing	5,963.8				5,963.8	
168	FY18	Senior and Disabilities Services	Community Developmental Disabilities Grants		Medicaid Reform Chapter 25, SLA 2016 (SB 74)	Savings from Implementation of 1915 Medicaid Option	-5,817.9				-5,817.9	Using separate Medicaid authority under a 1915(c) waiver (not the 1915(i) waiver which is a state entitlement program), DHSS was able to shift eligible recipients from the 100% general funded Community Developmental Disabilities Grant Program (CDDG) to the 50% federal/50% general funded 1915(c) Medicaid option.
169	FY08	Departmental Support Services	Commissioner's Office			Multi-year (FY07-FY09) appropriation for designing, planning, and implementing the Legislative Medicaid Program Review Report (Sec. 5(a), Ch. 10, SLA 2007 (SB61)	1,132.5			1,182.5	2,315.0	
170	FY17	Departmental Support Services	Commissioner's Office			Create a Tribal Federal Liaison Section to Implement New CMS Travel Policies 4 PFT Positions	275.9			275.9	551.8	
171	FY07	Departmental Support Services	Administrative Support Services			Salary Increases for DHSS Nurses This funding was distributed to various DHSS division in FY07.	2,115.3				2,115.3	Funding to provide a wage increase for HSS Nursing positions was appropriated to Admin Support Services and, after working the DOA's Division of Personnel on alternative salary increase mechanisms, were distributed to respective divisions in FY07.
172	FY10	Departmental Support Services	Administrative Support Services		Transfer	The department consolidated administrative functions into a centralized unit beginning in FY05. The HSS management determined that the consolidation did not achieve the desired results and the positions should be returned to the originating divisions. PCNs transferred: 78 PFT positions	-2,727.9		-1,102.0	-2,726.5	-6,556.4	

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
173	FY10	Departmental Support Services	Administrative Support Services			AMD: Public Health Nursing RSA and Medicaid Claims Reduced	800.0			-800.0	0.0	The Medicaid claim generated by Public Health Nursing's RSA was overstated because the approved cost allocation methodology wasn't followed. Because the time study results were overstated, the division had budgeted excess federal receipts and needed to replace them with general funds.
174	FY11	Departmental Support Services	Administrative Support Services			Replace unrealizable interagency receipts due to the loss of Medicaid School Based Claims funding	700.0				700.0	
175	FY14	Departmental Support Services	Administrative Support Services			Department of Administration Core Services Rates	764.6				764.6	Charges for core services provided by DOA-- including Risk Management, Personnel, IT Services, the Public Building Fund and the Working Reserve Account is \$1,234.3 million higher in FY14 than in FY13. Even with this \$764.6 increment, \$469.6 will have to be absorbed by the department.
176	FY15	Departmental Support Services	Administrative Support Services		Transfer	Transfer to Information Technology Services to support Enterprise Technology Services' computer services	-575.0				-575.0	This change will alleviate the need for transfers throughout the year and align anticipated authority within Information Technology Services.
177	FY06	Departmental Support Services	Information Technology Services		ORCA	Increase funding to convert Online Resources for Children of Alaska (ORCA) IT Positions from Capital to Operating	288.5		-577.0	288.5	0.0	
178	FY06	Departmental Support Services	Information Technology Services		Routine Replacement	FY06: Implement Routine Replacement Information Technology (IT) Hardware Program	400.0			-148.0	252.0	FY06: \$400.0 UGF a hardware refresh cycle for the department.
179	FY06	Departmental Support Services	Information Technology Services		ORCA	ORCA Programmer Support Added 2 PFT positions	134.0			44.6	178.6	This increment added two analyst programmer positions and funding to support the new ORCA system implemented for child protection services.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
180	FY07	Departmental Support Services	Information Technology Services			Provide Security and Training Enhancements to Department-wide Networks per Independent Assessment Added 1 PFT position	275.0				275.0	Based on recommendations in an independent assessment of the department's IT security, funding was requested to add a position, to conduct training, and for other IT security needs.
181	FY11	Departmental Support Services	Information Technology Services		Replace Unrealizable Funding	Replace Unrealizable Federal and I/A Receipts with GF	974.0			-975.0	-1.0	
182	FY11	Departmental Support Services	Information Technology Services			Fund cost increases for Software Maintenance, Systems and Eligibility Information System Billing	250.0				250.0	Funding was 50% of the Governor's request.
183	FY13 & FY16	Departmental Support Services	Information Technology Services			Establish Rural Information Technology Support	65.0			35.0	100.0	FY13: To address IT support in rural areas that was sporadic and emergency-based, this funding was appropriated to establish and IT rural support program to proactively address the needs of rural customers. A staggered replacement plan is as follows: --25% of the approximately 700 workstations are to be annually replaced. --Yearly network infrastructure upgrades for 28 sites (estimated to be \$10.0/site) --Travel: \$72.0 FY16: Reduce hardware support program due to expansion of the department Computer Refresh Program. Hardware refresh cycle funding eliminated--(\$362.5) UGF and (\$148.0) Fed Rcpts
184	FY15	Departmental Support Services	Administrative Support Services		Transfer	Transfer to from DHSS Admin Services to support Enterprise Technology Services' computer services	575.0				575.0	This change will alleviate the need for transfers throughout the year and align anticipated authority within Information Technology Services.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
185	FY15	Public Health	Chronic Disease Prevention and Health Promotion			Reduce Tobacco Education/Cessation funding in order to sustain long-term tobacco prevention and control efforts		-400.0			-400.0	<p>Since FY11, annual expenditures from the Tobacco Use Education and Cessation Fund have outpaced revenues, resulting in a drawdown of the balance. In FY14, the Tobacco Use Education and Cessation Fund appropriation was reduced by \$746.4 (6.7 percent of the \$11.1 million annual spending). This reduction was insufficient to create a sustainable fund balance.</p> <p>The Governor's request reduced spending by another \$1.6 million (17.4 percent). Because the Governor's requested reduction would have resulted in maintaining unnecessarily large surplus balances, the legislature opted for a more phased reduction approach that was recommended by the Tobacco Free Kids Coalition. The recommendation was as follows: FY15: (\$400.0) -- a 4.4 percent reduction from FY14 FY17: (\$375.0) FY19: (\$375.0) FY21: (\$200.0)</p>
186	FY15	Behavioral Health	Behavioral Health Grants			Reallocate funding by replacing residential treatment services with outpatient substance abuse treatment services	525.0				525.0	<p>The legislature reduced UGF by \$521.5 by reallocating funding for more expensive residential substance abuse treatment services to less expensive intensive outpatient substance abuse treatment services. This reallocation is expected to reduce residential treatment services for approximately 47 individuals while increasing intensive outpatient services for approximately 158 individuals--which may result in an expected net increase of services to 111 additional individuals.</p> <p><i>The \$521.5 of federal receipts added by the Conference Committee to replace the reduction in general funds is not expected to be collectible.</i></p>

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
187	FY15- FY16	Children's Services	Front Line Social Workers		Workload	Implement recommendations from the 2012 Office of Children's Services Workload Study	4,247.6			681.7	4,929.3	<p>The 2012 Hornby, Zeller and Associates study of the OCS Workload included a recommendation to add 44 positions in OCS. However, since that time, caseload growth has created a need for even more front line staff. Between legislative additions in FY15 and FY16, the legislature has added funding for a total of 41 PCNs. Of the positions added, 18 were based on the workload study and 23 were based on increased caseload. The details are as follows:</p> <p>FY15: \$1,497.6 UGF and 10 PFT pns to implement the Workload study. Although the increment was sufficient to fund fifteen positions, the legislature added 10 PFT positions with the expectation that DHSS could transfer existing PCNs to make up the difference.</p> <p>FY16: The legislature added 26 PFTs and \$3.4 million (\$2.75 million UGF and \$681.7 Fed Repts) to help address workload issues. OCS is experiencing record growth therefore, 23 PCN's were dedicated to address increased caseloads. 3 PCN's were associated with the 2012 Hornby, Zeller and Associates study of the OCS Workload.</p>
188	FY15	Juvenile Justice	Juvenile Justice Health Care (New Allocation)			Transfer funding budgeted for health care costs from various DJJ allocations STRUCTURE CHANGE	1,019.4				1,019.4	To segregate health care expenditures in DJJ (which vary significantly from year to year), the legislature created a new allocation called DJJ Health Care and transferred the amount DJJ had budgeted for health care (\$1,019.4 UGF) from various allocations to this new allocation.
189	FY15	Public Assistance	Tribal Assistance Programs			Increase Tribal Assistance Funding	500.0				500.0	The legislature added \$500.0 of GF/Match (UGF) for tribal assistance programs.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
190	FY15	Public Assistance	Energy Assistance Program			Replace \$1 million of UGF with Federal Receipts	-1,000.0			1,000.0	0.0	<p>The Energy Assistance Program provides home heating assistance to low income households and consists of two programs. The federal Low Income Home Energy Assistance Program (LIHEAP) block grant funding is used to serve households with income below 150% of the federal poverty limit in Alaska and is funded with 100% federal receipts. General funds support the Alaska Affordable Heating Program. The Alaska Affordable Heating Program is available for households with income between 151% and 225% of the federal poverty limit (FPL) (and increases to 250% of the FPL if the average price per barrel of oil reaches \$150 a barrel).</p> <p>The legislature replaced \$1 million of UGF with federal receipts.</p> <p>Legislative Fiscal Analyst Comment: Because the federal funding for the LIHEAP program is not expected to increase (and cannot be used for households above 150% of FPL), the reduction of UGF is likely to cut the Alaska Affordable Heating Program by 7.3 percent from FY14.</p>
191	FY17	Public Assistance	Energy Assistance Program			Eliminate the Alaska Affordable Heating Program	-9,174.3				-9,174.3	The Alaska Affordable Heating Program (AKHAP) was a state program established to provide expanded eligibility for Alaska residents for home heating assistance.
192	FY16	Public Health	Chronic Disease Prevention and Health Promotion		Obesity	Eliminate school district grants for obesity prevention and control <i>Legislative Reduction</i>	-892.2				-892.2	The department eliminated the K-12 Obesity Prevention School District UGF grant program. Some program activities were able to be covered with federal contracts and continue to be provided in the Mat-Su, North Slope, and Petersburg school districts.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
193	FY16	Public Health	Chronic Disease Prevention and Health Promotion			Reduce school districts' grants for obesity prevention, reduce travel, and hold positions vacant	-157.5				-157.5	The following items will be implemented to reduce spending: - Reduce Anchorage-Juneau in-state travel for supervision of Juneau staff from three trips to one. - Eliminate one out-of-state trip to the Council of State and Territorial Epidemiologists Conference. - Reduce by 150 the number of surveys conducted by the Behavioral Risk Factor Surveillance System. - Eliminate funds to procure a Cancer Registry contract. - Reduce Alaska Family Violence Prevention Project contractual funds by 50 percent. - Reduce seven of the grants to school districts in the Obesity Prevention program. - Hold positions vacant for additional time when vacancies occur.
194	FY15	Public Health	Epidemiology			Remove the temporary increment from the base for the Chlamydia Media Campaign, Testing, and Therapy (FY13-FY15)	-360.0				-360.0	In FY13, a temporary (FY13-FY15) increment of \$360.0 UGF was added for Chlamydia media campaign, testing and therapy. The increment funded Chlamydia testing; a media campaign aimed at educating the public of the risks of sexually transmitted diseases; provided printed supplies that were distributed by the Alaska Native Tribal Health Consortium with a message about safe sexual practices; and provided funding for Expedited Partner Therapy, where partners of individuals with a sexually transmitted disease were treated without an intervening medical evaluation or professional prevention counseling. The legislature decremented the full \$360.0 UGF (i.e., the entire amount of the temporary increment) from the FY15 budget.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
195	FY15	Public Health	Community Health Grants			Decrement funding for Community Health Aide Training and Supervision grants	-500.0			500.0	0.0	The legislature replaced \$500.0 UGF from the Community Health Aide Training and Supervision Grants with Fed Rcpt authorization. The needs and uses of this program have changed considerably since this program was established in 1984. The use of modern technology methods of training such as Tele-health and online training opportunities allow this program to continue with reduced funding. <i>There is no indication that collectible federal receipts will be available to replace general funds.</i>
196	FY15	Senior and Disabilities Services	Senior Community Based Grants			Add funding for the Nutrition, Transportation and Support Services Grant program	545.0				545.0	The legislature added funding for the Nutrition, Transportation, and Support Services Grants program. This program provides grants to non-profit agencies to provide meals (in groups and in private homes), nutrition and health education information to seniors, and transportation services. These grants support seniors' ability to maintain mobility and independence.
197	FY16	Senior and Disabilities Services	Senior Community Based Grants			Decrement Alaska Medicare Clinic funding no longer needed because the clinic was acquired by Alaska Regional Hospital	-860.0				-860.0	Funding was decremented for the Alaska Medicare Clinic because the clinic was acquired by Alaska Regional Hospital. There should be no impact on services because this funding is no longer needed.

**Highlights of Significant Budget Changes
(FY05 toFY18)**

DEPARTMENT OF HEALTH AND SOCIAL SERVICES												
	FY	Appropriation	Allocation	Formula/ NonForm	Category	Description	UGF	DGF	Other	Fed	Total Funds	Notes
198	FY15	Public Health	Epidemiology			Immunization Program; Vaccine Assessments Fiscal Note for SB 169 (Ch. 30, SLA 2014)	-4,000.0	22,488.6			18,488.6	<p>SB 169 established a statewide immunization program. The purpose of the program is to monitor, purchase, and distribute included vaccines to providers approved by the department who agree to provide those vaccines to state residents.</p> <p>The state will purchase included vaccines from the account where assessments are deposited and distribute the vaccines to "assessable entities" (i.e., providers, insurance companies, and others as set out in AS 18.09.990(3.))</p> <p>The program will be phased in over three years and is expected to cost \$22.5 million in FY15 (\$4 million of which will be UGF as transitional funding). In FY16 and beyond, the program will be funded with GF Program Receipts from the vaccine assessments. The \$4 million of UGF that will be deposited into the Vaccine Assessment Account in FY15 was included as temporary funding in Epidemiology's budget.</p>