

**Department of Health
FY25 Midyear Status Report**

Item No.	Appropriation / Allocation	Description	Amount / Fund Source	LFD Questions
1	Behavioral Health / Behavioral Health Treatment and Recovery Grants	Federal Receipt Authority to Support Behavioral Health Programs	\$3,000.0 Fed Rcpts (Fed) Inc	The Department previously reported that this Increment would allow for full expenditure of new and prior year federal grants related to the Community Mental Health Initiative, the Alaska State Opioid Response, and Alaska's 988 Crisis Coordination Project. Please provide the current expected duration of the federal grants related to this Increment.
<p>Agency Response The increase of \$3,000.0 in Federal Authority allowed the Division of Behavioral Health (DBH) to expend funds that were unable to be spent in prior years. DBH anticipates fully spending the prior year funds related to these federal grants by 6/30/2025.</p> <ul style="list-style-type: none"> - Community Mental Health Initiative \$1,959,116 9/30/2023- 9/29/2024 - Alaska's 988 Crisis Coordination Project \$187,865 9/30/2023-9/29/2024 - State Opioid Response \$1,257,333 9/30/2022- 9/29/2023. 				
2	Health Care Services / Catastrophic and Chronic Illness Assistance (AS 47.08)	Remove Funding for Catastrophic and Chronic Illness Assistance	(\$153.9) Gen Fund (UGF) Dec	Has the Department encountered any issues related to the defunding of this allocation, or been unable to provide assistance to an Alaskan as a result?
<p>Agency Response The Department has not encountered any issues related to the defunding of this allocation. Furthermore, no Alaskans have applied for assistance under this program.</p>				
3	Health Care Services / Residential Licensing	Add Four Positions to Process Increase in Background Checks	Total: \$343.8 \$171.9 Fed Rcpts (Fed) \$171.9 GF/Prm (DGF) 4 PFT Positions Inc	Have all four positions been established and advertised for recruitment? If a position has been filled, please provide a date of hire. Recognizing that the positions have only been authorized for a brief period, there may not be sufficient data to determine the impact of the additional positions on reducing processing times. If data is available, please provide an update.
<p>Agency Response All four positions are filled effective 9/23/24, 9/9/24, 9/9/24, and 10/9/24. Applications are being approved within 3 business days on average.</p>				

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4	Public Assistance / Child Care Benefits	Child Care Grant Program Funding for Place-based and Home-based Child Care Centers	\$7,500.0 Gen Fund (UGF) IncOTI	The legislature provided \$7,500.0 One-Time Increments in both FY24 and FY25. Will the Department's FY25 grant disbursement align with how the funding was expended in FY24, or has the Department made adjustments?
<p>Agency Response The department followed the FY2025 legislative intent which was different from the FY2024 legislative intent. The FY2024 funds were distributed to the workforce per FY2024 legislative intent through ROOTS (Retaining Our Outstanding Teachers) Awards to 1,599 individuals working in a licensed or approved child care program and in the System for Early Education Development (SEED) registry. For FY2025, the department will be distributing funds directly from the Child Care Program Office based on Licensed Child Care Providers' child attendance reports. Funds will be distributed in February 2025.</p>				
5	Public Assistance / General Relief Assistance	Provide Support to Alaskan Food Banks and Pantries to Promote Food Security	\$1,500.0 Gen Fund (UGF) IncOTI	The Department's amended Request for Proposals for a grantee for the full \$1.5 million closed on November 27th, 2024. Please provide the total number of applicants (please note the number of unqualified applicants, if applicable) and an update on the Department's timeline for the project start date if it has move from February 1, 2025.
<p>Agency Response This is still an active and competitive solicitation. The anticipated start date is still February 1, 2025.</p>				
6	Public Assistance / Public Assistance Field Services	Add Funding and Authority for 20 Full-Time Eligibility Technician Positions to Maintain Capacity and Prevent Backlog	Total: \$1,759.7 \$897.4 Fed Rcpts (Fed) \$862.3 GF/Match (UGF) 20 PFT Positions Inc	Of the 20 now-permanent positions, how many are currently filled? If a position was filled on or after July 1, 2024, please provide the date of hire. In addition to these specific 20 permanent full-time (PFT) positions, please provide the total number of PFT Eligibility Technicians in the allocation and how many are currently filled.

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<p>Agency Response Of the 20 positions, 14 were filled as of 11/15/2024. The following positions were vacant and filled or in recruitment after July 1, 2024:</p> <ul style="list-style-type: none"> •068055 Eligibility Technician 2 – filled on 12/2/24. •068245 Eligibility Technician 2 - filled between 2/11/21 - 7/8/24 and currently in recruitment. •068435 Eligibility Technician 2 – filled on 11/18/24. •068478 Eligibility Technician 2 - filled 3/10/21 - 2/29/24 and will be filled on 1/14/25. <p>Public Assistance Field Services has 272 PFT Eligibility Technician positions. As of 11/15/24, 213 were filled.</p>				
7	Public Assistance / Public Assistance Field Services	Sec 17(a), HB268 - Recruitment Program to Address the Supplemental Nutrition Assistance Program Backlog (FY24-25)	Total: \$8,829.2 \$2,751.0 Fed Rcpts (Fed) \$6,078.2 GF/Match (UGF) 30 TMP Positions MultiYr	<p>Please provide an explanation of the recruitment program within the Division to improve recruitment and retention as a result of this appropriation, and provide data, if available, regarding the efficacy of the program.</p> <p>Have all 30 temporary positions been established and advertised for recruitment? If a position has been filled, please provide a date of hire.</p> <p>Recognizing that the positions have only been authorized for a brief period, there may not be sufficient data to determine the impact of the additional positions on reducing processing times. Please provide an update, if available.</p>

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<p>Agency Response</p> <p>The division centralized its recruitment program to improve hiring and retention by implementing streamlined processes and using a workload management tool to track position control numbers (PCNs) and recruitment statuses. This approach enhances transparency and ensures alignment with organizational goals. In response to staff feedback on retention, the division evaluated its framework and restructured the Training Unit to better address employee needs. Key improvements included expanding the training team, equipping trainers with expertise in adult learning theory, and adopting a new model that eliminates onboarding delays. These changes have significantly improved preparedness and support for new hires, fostering long-term engagement. These changes have significantly improved preparedness and support for new hires, fostering long-term engagement. Notably, training for two public assistance programs was reduced from six months to 10 weeks. Supervisors appreciate the new training timeframes and learning curriculum which will contribute to improved retention.</p> <p>The 30 positions were established but not posted for recruitment as the department prioritized filling older positions first. Due to the timing the multi-year appropriation, the status of the backlog, the critical status of getting benefits to qualified Alaskans, and to mitigate federal and state non-compliance, the division engaged a contractor to support staff in processing applications. The contractor provides critical services through the Virtual Contact Center, including answering inquiries and updating client information.</p>				
8	Senior Benefits Payment Program / Senior Benefits Payment Program	Extension of the Senior Benefits Payment Program	\$23,542.3 Gen Fund (UGF) FisNot	Now that the Department has amended its regulations to pay the highest-earning cohort of eligible seniors the full benefit amount, has the Department seen any trends in applications for the program, or in the distribution spread amongst the three cohorts?
<p>Agency Response</p> <p>There has not been a significant increase in applications since the increase to \$125 was implemented. Additionally, the distribution among the three payment tiers remains similar to previous years.</p>				

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9	Public Health / Emergency Programs	Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) (FY22-FY25)	\$24,335.7 CSLFRF (Fed) MultiYr	<p>In correspondence dated January 4, 2024 the Department confirmed that it expected to fully expend CSLFRF funding, and would obligate all funds prior to the December 31, 2024 deadline for funds to be obligated. Preliminary FY25 Authorized budget data indicates that over \$24 million remained unexpended after FY24.</p> <p>Please provide the current unexpended and unobligated balance of the CSLFRF, as well as highlight examples of the items that the funds are currently obligated for.</p>
<p>Agency Response</p> <p>Current Anticipated Obligations to the fund by 12/31/24: \$40,000,000 Current Unencumbered but anticipated by 12/31/24: \$5,305,888.15</p> <p>Examples of Current Obligations Include:</p> <ul style="list-style-type: none"> • Updated/Improved Department of Health Website • Seniors and Disabilities grantee program - Older Americans Act Title III Continuity of Operations Plan • Laboratory Modernization - Steris Corporation and TEKsystems • Data Modernization Nursing Electronic Health Record System (EHR) and Department of Corrections EHR updates • Community Care Hub contract - provide technical assistance, training, and clinical oversight support to allow Community Based Organizations to engage in the Health Care System with streamlined referral processes, data collection and reimbursement for services. • Alaska Hospital Association contract - assessment of the healthcare workforce and provide trainings to increase the efficiency of the workforce 				

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10	Public Health / Chronic Disease Prevention and Health Promotion	Utilize the Opioid Settlement to Combat the Opioid Epidemic (FY2025-FY2040)	\$4,390.0 Stat Desig (Other) 1 PFT Position IncT	<p>Please explain the approach that the Office of Substance Misuse and Addiction Prevention is taking to ensure that these funds are allocated to toward public health strategies as recommended by the Governor's Advisory Council on Opioid Remediation in areas like prevention, harm reduction, and improved access to treatment and recovery services.</p> <p>Is the Department focusing primarily on grants to non-State entities, or are there opportunities for new and expanded programs within the Department or other State agencies that are being pursued?</p> <p>Please provide an explanation of how prior appropriations of funding were used in FY24, and for FY25 if expenditures have occurred.</p>
<p>Agency Response</p> <p>In response to the Governor's Advisory Council on Opioid Remediation (GACOR) recommendations, the Department of Health (DOH) organized a smaller Opioid Settlement Steering Committee (OSSC), co-chaired by the Directors of Public Health and Behavioral Health, the two divisions that house the majority of the opioid response programs in the state. Per the GACOR recommendations, the OSSC is made up of 50 percent state government and 50 percent local municipalities and provide feedback and recommendations on the settlement dollars to the department through the chairs.</p> <p>In FY2024 DOH issued an RFP for FY2025 funds.</p> <p>In FY2025, approximately 77 percent of the funding is supporting grants to non-state entities, and about 22 percent is reserved to enhance or expand existing state agency programs and efforts, including but not limited to statewide communications, Prescription Drug Monitoring Program (PDMP) enhancements, Department of Corrections (DOC) treatment and reentry support for individuals with opioid use disorder (OUD). Eighteen Settlement grantees were awarded across the Public Health regions based on applications that met the GACOR recommendations. One statewide grantee was also awarded to ensure consistency across the regional grants with ongoing support to identify evidence-based strategies and create peer to peer learning opportunities.</p>				

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11	Public Health / Epidemiology	Support Efforts to Eliminate Tuberculosis and Congenital Syphilis	\$2,047.0 GF/Match (UGF) Inc	Please provide an update on the Department's efforts to combat both congenital syphilis and tuberculosis in Alaska, including the projected FY25 distribution of funding from this appropriation for each distinct purpose. The last major Epidemiology bulletins for CS and TB were in January of 2024 and January of 2023, respectively. Is the Department planning to release updated trends that cover the time period since funding was appropriated?
<p>Agency Response</p> <p>The Division of Public Health was allocated \$2,047.0 in the FY25 budget to bolster strategies and activities to reduce the burden of tuberculosis and congenital syphilis. Division staff continue to focus on activities with broad reach like clinician education, statewide coordination, and core functions like case investigation, testing, and treatment.</p> <p>Approximately 68 percent of the budget is dedicated to congenital syphilis activities, and 32 percent to tuberculosis. Below is the anticipated funding distribution:</p> <ul style="list-style-type: none"> • Personnel to support the expanded programs • Ongoing expansion of syphilis testing in the Department of Corrections • Treatment adherence • Communications • Tuberculosis grants to community partners • Laboratory supplies to support expanded testing <p>The Division of Public Health plans to update trends for congenital syphilis in early 2025 when preliminary 2024 counts are available. Tuberculosis summaries are published annually in summer/fall.</p>				

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12	Senior and Disabilities Services / General Relief/Temporary Assisted Living	Increase Daily Rate for General Relief/Temporary Assisted Living Payments	\$500.0 Gen Fund (UGF) Inc	<p>The Governor partially vetoed the legislature's original appropriation of \$821.5 for this purpose, without any justification. Accompanying intent language directed the Department to use the additional funding to increase the daily rate from \$104.30 to \$112.55 to align with the increase to other Medicaid waiver payment rates.</p> <p>Is the Department paying a daily rate of \$112.55 for qualified persons? How does the Department project expected utilization of the program, and has that projection model changed based on the increase of funding to align the rates?</p> <p>Based on current projections, is the reduced funding sufficient to support this rate increase through FY25 and beyond?</p>
<p>Agency Response</p> <p>The Governor's justification for the partial veto for this legislative appropriation was to preserve general fund for savings and fiscal stability. \$500.0 of the appropriation was retained and provided for the daily rate to be adjusted accordingly to \$109.32 (implemented on July 1, 2024). The department projects spending for this program based on the actual number of applicants authorized to participate in the General Relief program and the number of days remaining in the fiscal year. Expected utilization of the program is based off the percentage of realized usage of authorized amounts from prior years. The department's projection model has not changed based on the increase of funding, as the prior years' model is still relevant and is enabling the department to meet the needs for utilization of the program according to current procedures. The department believes the rate increases in 2022 and 2024 have helped stabilize the provider base for this program and appears to be increasing the number of assisted living home providers who serve recipients of general relief.</p>				

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13	Medicaid Services / Medicaid Services	Second Year of Medicaid Eligibility Postpartum Mothers Fiscal Note (Ch16 SLA2023 (SB58))	Total: \$14,388.7 \$10,237.6 Fed Rcpts (Fed) \$4,151.1 GF/Match (UGF) Inc	Please briefly provide an update about how this extended coverage has impacted postpartum persons based off of utilization data (improved the consistency of postpartum check ups, utilization of other resources such as mental health or physical therapy, etc.) or other relevant data. If compared to any prior-year data (since the extended coverage began as a pandemic-era policy), has the Department noted any trends either directly related or tangentially related to postpartum health outcomes?
<p>Agency Response</p> <p>Health Care Services is able to pull a claims analysis. The department does not currently have the ability to review health outcomes other than reporting utilization of this service as compared to prior years.</p> <p>For the 3,282 persons who gave birth, during the 12-month postpartum period:</p> <ul style="list-style-type: none"> • 1,255 or 38 percent had a postpartum visit (with a diagnosis code of Z39.2 or procedure code of 59430) • 2,470 or 75 percent had professional or outpatient services • 2,256 or 69 percent had a pharmacy claim • 264 or 8 percent had mental health services • 783 or 24 percent had dental services 				
14	Medicaid Services / Medicaid Services	Medicaid Utilization and Inflation Due to the Public Health Emergency Wind Down	\$7,576.6 GF/Match (UGF) Suppl	Please provide an update on the Department's continued efforts to complete the 'unwinding' of pandemic-era Medicaid enrollment requirements, including the progress made toward submitting verification of compliance with longstanding Medicaid renewal requirements that must be submitted to the Centers for Medicare & Medicaid Services by December 31, 2024.

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<p>Agency Response</p> <p>The Department continues to make significant progress in completing the "unwinding" of pandemic-era Medicaid enrollment requirements. Regular meetings with the Centers for Medicare and Medicaid Services (CMS) ensure alignment and compliance with Medicaid renewal requirements. While the department is currently in compliance with ex parte processing, certain deficiencies were identified and are addressed through a robust compliance plan.</p> <p>All Medicaid renewals have been initiated. Previously, the department temporarily paused procedural closures due to a system limitation that prevented determinations at the individual level. This issue has since been resolved, and procedural closures—occurring when an individual does not return their renewal form—have resumed.</p> <p>The department anticipates completing all unwinding-related renewals by the second quarter of calendar year 2025.</p>				
15	Medicaid Services / Medicaid Services	Medicaid Rate Rebasing for Developmental Disability and Personal Care Services	Total: \$10,000.0 \$5,000.0 Fed Rcpts (Fed) \$5,000.0 GF/Match (UGF) Inc	What is the status of the intended rate rebasing for direct service providers in these sectors? Is the Department continuing to inform providers of the intended use of these funds (increasing worker wages), like in FY24?
<p>Agency Response</p> <p>This legislative appropriation enables the department to raise rates for all Medicaid long-term services and support types. This was not rate rebasing, which is a scheduled, regulated process through which rates are analyzed and adjusted based on cost reports from providers and other factors. Rates for these services increased by 3.9 percent and were coupled with an inflationary adjustment of 3.2 percent for an overall rate increase of 7.1 percent that went into effect on July 1, 2024. The department informed providers that the intent of the increase was for agencies to increase worker wages through its e-alert system and has reiterated that in various forums and presentations for providers and other stakeholders in the months since.</p>				