Numbers and Language Differences Agencies: H&SS

		Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	ррт	TMP
Behavioral Health		COTUMIT	<u>ıype</u>			<u> </u>	501 11003		<u>oucluy</u>		11130			
Behavioral Health Treatment and	Recovery Gran	nts												
AMD: Achieve Savings by Reviewing DHSS Grants and by Expanding Med Some Clients	Level of	16GovAmd	Dec	-1,558.7	0.0	0.0	0.0	0.0	0.0	-1,558.7	0.0	0	0	0
The division will implement cu	its to agencies bas	sed on lapsed	d funds for	the previous yea	r and the success	of								
agencies in efficiently using th														
receiving Consortium for Beha						9								
Distribution (GED). Agencies														
(efficiently and effectively), an														
this is a reduction in expenditu through Medicaid expansion.														
eligible and will transition out						come								
1037 GF/MH (UGF) -1,55			er vices at	Too percent leder	ai maton.									
Replace \$3 million of UGF with Alcoh		House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Other Drug Abuse Treatment & Preve	ention		0											
Funding														
1004 Gen Fund (UGF) -3,00														
1180 A/D T&P Fd (DGF) 3,00	0.0			1 550 7	0.0	0.0	0.0	0.0	0.0	1 550 7	0.0			
* Allocation Difference *				1,558.7	0.0	0.0	0.0	0.0	0.0	1,558.7	0.0	0	0	0
Alcohol Safety Action Program (A Replace UGF with GF/Prgm Receipts 1004 Gen Fund (UGF) -1,2(1005 GF/Prgm (DGF) 1,2(3 03.8	House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
* Allocation Difference *				0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Alaska Mental Health Board and A	Advisory Board	l on Alcoho	ol and D	rua Abuse										
Travel Reduction	aricory Douro	House CS	Dec	-50.0	0.0	-50.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1037 GF/MH (UGF) -{	50.0													
* Allocation Difference *				-50.0	0.0	-50.0	0.0	0.0	0.0	0.0	0.0	0	0	0
* * Appropriation Difference * *				1,508.7	0.0	-50.0	0.0	0.0	0.0	1,558.7	0.0	0	0	0
Children's Services Front Line Social Workers Add UGF and 3 PFT Positions to Hel Workload Issues	p Address	House CS	Inc	250.0	250.0	0.0	0.0	0.0	0.0	0.0	0.0	3	0	0
	50.0													
* Allocation Difference *				250.0	250.0	0.0	0.0	0.0	0.0	0.0	0.0	3	0	0
Family Preservation Reduce Grants by another \$330.5 (To Reduction is \$500.0 when combined Governor's reduction of \$169.5) 1004 Gen Fund (UGF)		House CS	Dec	-330.5	0.0	0.0	0.0	0.0	0.0	-330.5	0.0	0	0	0

Numbers and Language Differences Agencies: H&SS

	Column_	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	РРТ	TMP
Children's Services (continued) Family Preservation (continued)													
* Allocation Difference * ** Appropriation Difference * *			-330.5	0.0 250.0	0.0	0.0		0.0 0.0	-330.5 -330.5	0.0	0	0	0
Health Care Services			0015	200.0	0.0	0.0	0.0	0.0	000.0	0.0	0	0	0
AMD: Reduce UGF because Catastrophic & Chronic Illness Prgm Clients will be Eligible for Medicaid when Expanded In FY2014, 463 recipients were served by to of \$957.1 from a budget of \$1,471.0.	16GovAmd	Dec nd Chronie	-1,000.0 c Illness Assistan	0.0 ce program for a	0.0 total cost	0.0	0.0	0.0	-1,000.0	0.0	0	0	0
Catastrophic and Chronic Illness Assistanc inadequate or no health insurance, but who Assistance provides limited services to elig	o do not qualify for	Medicaid.	Catastrophic and	d Chronic Illness									
Terminal illness Cancer requiring chemotherapy Chronic diabetes or diabetes insipidus Chronic seizure disorder Chronic mental illness Chronic hypertension													
Covered services for those who qualify for	Catastrophic and	Chronic III	ness Assistance a	are limited to:									
Medical services provided by a physician, a office or an outpatient clinic Outpatient hospital services limited to chen Three (3) prescriptions per month and med	notherapy and rad	iology for i	the treatment of c		ctitioner's								
Catastrophic and Chronic Illness Assistanc other services that are mandatory under M		erage for i	inpatient hospitali	zation, transporta	tion, and								
This component was chosen because it is services provided under this program will b be implemented by the State on July 1, 20 1004 Gen Fund (UGF) -1,000.0	e absorbed by Me												
* Allocation Difference *			1,000.0	0.0	0.0	0.0	0.0	0.0	1,000.0	0.0	0	0	0
Health Facilities Licensing and Certification Replace UGF with GF/Program Receipts 1004 Gen Fund (UGF) -356.8 1005 GF/Prgm (DGF) 356.8	House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
* Allocation Difference *			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0

Numbers and Language Differences Agencies: H&SS

Agency: Department of Health and Social Services

		Column	Trans	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	РРТ	TMP
Health Care Services (continued														
Medical Assistance Administra AMD: Funding for 3 PFTs for Med Expansion Implementation		16GovAmd	Inc	410.0	351.0	2.0	28.2	28.8	0.0	0.0	0.0	3	0	0
Health Care Services proj Beginning with FY2016, th Assistance Administrator I IV positions (06-#104 and costs of the three positions Medical Assistant IV positi costs include benefits. Ao phones, and other contrac costs per FTE for office eq travel costs for all position	e division projects II (06-#103); and t 06-#105), along w s are \$351.0 (\$112 on). Each position ministrative costs tual costs; \$2.6 oper vuipment; \$2.0 per	s that it will need o two full-time, rangu vith associated ad 2.6 for the Medica a assumes hiring a a assumes \$9.4 pe ne-time costs per l	ne full-time e 21, Anch ministrative I Assistant at step C w er full time o FTE for col	e, range 20, Anc orage, Medical / e costs to suppo Administrator III ith a start date o equivalent (FTE, mputers and sof	horage, Medical Assistance Admir It the positions. T I, and \$119.2 for f July 1, 2015. Th annually for offic tware; \$5.0 one-t	istrator The initial each nese space, ime								
Personal services costs al increase for FY2017, one one percent salary increas used for FY2021. In additi has the appropriate step in government unit (GGU) er These costs have been pr FY2018 (\$114.9), and one	percent salary incl te has been used on to the appropria crease as well. The nployee. Djected out to inclu Medical Assistan	rease for FY2018, to project salaries ate percentage ac he step increase v ude the hiring of o t Administrator III	and a one for FY202 ross the bo vas project ne Medica in FY2020	e percent salary i 0, and a one per pard salary adjus ted using 3.7 per I Assistant Admi (\$118.3).	increase for FY2(rcent salary incre stments, each po rcent for a genera nistrator III positio	119. A ase was sition M Don in								
With the exception of one- percent inflation factor.	time costs, all oth	er non-personal se	ervices cos	sts have been pr	ojected out using	a one								
1002 Fed Rcpts (Fed)	205.0													
1092 MHTAAR (Other) * Allocation Difference * * * Appropriation Difference * *	205.0		_	-410.0 590.0	-351.0 -351.0	-2.0 -2.0	-28.2 -28.2	-28.8 -28.8	0.0 0.0	0.0 1,000.0	0.0 0.0	-3 -3	0 0	0 0
Juvenile Justice														
Youth Courts Decrement all Youth Courts Progr 1004 Gen Fund (UGF)	am funding -530.9	House CS	Dec	-530.9	-42.1	-19.4	-7.5	0.0	0.0	-461.9	0.0	0	0	0
* Allocation Difference * ** Appropriation Difference * *	-550.9			-530.9 -530.9	-42.1 -42.1	-19.4 -19.4	-7.5 -7.5	0.0 0.0	0.0 0.0	-461.9 -461.9	0.0 0.0	0 0	0 0	0 0
Public Assistance Public Assistance Field Servic AMD: Add 23 PFT Positions and A Costs to Support Medicaid Expan The costs associated with	Associated sion	16GovAmd or 23 permanent p	Inc ositions, o	2,771.3	1,908.3	0.0 The	432.9	430.1	0.0	0.0	0.0	23	0	0

division is hopeful to establish the positions in the classification system and fill the positions and train the staff in a very short time frame. Additional challenges associated with this request will be locating space for the incumbents

Numbers and Language Differences Agencies: H&SS

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services Co	ommodities	Capital Outlay	Grants	Misc	PFT	РРТ	тмр
Public Assistance (continued) Public Assistance Field Services (continue AMD: Add 23 PFT Positions and Associated Costs to Support Medicaid Expansion (continued) which will also include a one-time cost for critical to have a successful transition to M The division is requesting the following per One Office Assistant II One Office Assistant III One Research Analyst II	, purchasing and set Medicaid expansion.	ting up offi	ice furniture and	equipment. This v				¥					
Three Public Assistance Analyst I Two Public Assistance Analyst II Ten Eligibility Technician II Two Eligibility Technician III Two Eligibility Technician IV Two Eligibility Office Manager II Ongoing costs for lease space and gener 1002 Fed Rcpts (Fed) 1,385.6 1092 MHTAAR (Other) 1,385.7	al office supplies are	e included	in the services li	nes for the out yea	ars.								
Decrement funding to reflect possible savings resulting from AIRES coming on-line 1002 Fed Rcpts (Fed) -1,212.4 1003 G/F Match (UGF) -880.7 1004 Gen Fund (UGF) -220.5	House CS	Dec	-2,313.6	0.0	0.0	0.0	0.0	0.0	0.0	-2,313.6	0	0	0
* Allocation Difference * ** Appropriation Difference * *			-5,084.9 -5,084.9	-1,908.3 -1,908.3	0.0 0.0	-432.9 -432.9	-430.1 -430.1	0.0 0.0	0.0 0.0	-2,313.6 -2,313.6	-23 -23	0 0	0 0
Public Health Nursing Remove 5% of the \$16.1 million UGF increase between FY06 and FY16. 1004 Gen Fund (UGF) -402.5	House CS	Dec	-402.5	0.0	0.0	0.0	0.0	0.0	-402.5	0.0	0	0	0
* Allocation Difference *			-402.5	0.0	0.0	0.0	0.0	0.0	-402.5	0.0	0	0	0
Chronic Disease Prevention and Health Pro Eliminate School District Grants for Obesity Prevention and Control	Motion House CS	Dec	-892.2	0.0	0.0	0.0	0.0	0.0	-892.2	0.0	0	0	0
1004 Gen Fund (UGF)-892.2Reduce Fall Prevention Funding (This funding was added in FY14 to the Senior Community Based Grants allocation) 1004 Gen Fund (UGF)-150.0	House CS	Dec	-150.0	0.0	0.0	0.0	0.0	0.0	-150.0	0.0	0	0	0

Numbers and Language Differences Agencies: H&SS

	Column	Trans Type	Total 	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Public Health (continued)													
Chronic Disease Prevention and Health	Promotion (contine	ued)	1 040 0		0.0	0.0		0.0	1 040 0	0.0			
* Allocation Difference *			-1,042.2	0.0	0.0	0.0	0.0	0.0	-1,042.2	0.0	0	0	0
State Medical Examiner Remove 5% of the \$1,743.9 UGF Increase between FY06 and FY16 1004 Gen Fund (UGF) -87.2	House CS	Dec	-87.2	0.0	0.0	0.0	-87.2	0.0	0.0	0.0	0	0	0
* Allocation Difference *			-87.2	0.0	0.0	0.0	-87.2	0.0	0.0	0.0	0	0	0
* * Appropriation Difference * *			-1,531.9	0.0	0.0	0.0	-87.2	0.0	-1,444.7	0.0	0	0	0
Senior and Disabilities Services Senior and Disabilities Services Admini Additional Funding for Telehealth Service System Improvements 1037 GF/MH (UGF) 100.0 * Allocation Difference *	istration House CS	IncOTI .	100.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Allocation Difference			100.0	100.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Senior Community Based Grants Reduce Adult Day Services grants for twelve grantees across the state This reduction is just over 5% of the b		Dec nd leaves \$	-500.0 \$7,450.4 of UGF a	0.0 available.	0.0	0.0	0.0	0.0	-500.0	0.0	0	0	0
1004 Gen Fund (UGF) -500.0 Decrement Alaska Medicare Clinic funding n longer needed because the clinic was acquir by Alaska Regional Hospital 1004 Gen Fund (UGF) -860.0		Dec	-860.0	0.0	0.0	0.0	0.0	0.0	-860.0	0.0	0	0	0
* Allocation Difference *			-1,360.0	0.0	0.0	0.0	0.0	0.0	-1,360.0	0.0	0	0	0
Governor's Council on Disabilities and Reduction to the Travel Line 1037 GF/MH (UGF) -50.0 * Allocation Difference * * * Appropriation Difference * *	Special Education House CS	Dec .	-50.0 -50.0 -1,310.0	0.0 0.0 100.0	-50.0 -50.0 -50.0	0.0	0.0	0.0	0.0 0.0 -1,360.0	0.0	0	0	0
Departmental Support Services Public Affairs													
Reduce Portion of Public Outreach Efforts 1004 Gen Fund (UGF) -200.0	House CS	Dec	-200.0	0.0	0.0	-200.0	0.0	0.0	0.0	0.0	0	0	0
Replace UGF with I/A Receipts to Allow for Budgeted RSAs for Public Affairs Activities 1004 Gen Fund (UGF) -200.0 1007 I/A Rcpts (Other) 200.0	House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
* Allocation Difference *			-200.0	0.0	0.0	-200.0	0.0	0.0	0.0	0.0	0	0	0

Numbers and Language Differences Agencies: H&SS

Agency: Department of Health and Social Services

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Departmental Support Services (continued) Commissioner's Office													
AMD: Establish Project Manager (06-T055) to Manage Medicaid Expansion Team	16GovAmd	PosAdj	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	1
This full-time nonpermanent range 23 June design, planning and implementation of Me				process of manag	ging the								
Replace UGF with I/A Receipts to allow for Budgeted RSA's for Services Provided 1003 G/F Match (UGF) -500.0 1007 I/A Rcpts (Other) 500.0	House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Delete Funding for the Health Care Commission 1002 Fed Rcpts (Fed) -150.0 1004 Gen Fund (UGF) -350.0	House CS	Dec	-500.0	0.0	0.0	0.0	0.0	0.0	0.0	-500.0	-2	0	0
Decrement funding for PCN 06-T055 1004 Gen Fund (UGF) -64.0 1007 I/A Rcpts (Other) -64.0	House CS	Dec	-128.0	-128.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
* Allocation Difference *			-628.0	-128.0	0.0	0.0	0.0	0.0	0.0	-500.0	-2	0	-1
Administrative Support Services Replace UGF with I/A Rcpts to Provide Budget Authorization for Increased Charges to Various Divisions 1004 Gen Fund (UGF) -3,500.0	House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1007 I/A Rcpts (Other) 3,500.0 * Allocation Difference *			0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Information Technology Services Replace UGF with I/A Rcpts to Provide Budget Authorization for Increased Charges to Various Divisions	House CS	FndChg	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
1004 Gen Fund (UGF) -500.0 1007 I/A Rcpts (Other) 500.0													
* Allocation Difference * * * Appropriation Difference * *			0.0 -828.0	0.0 -128.0	0.0 0.0	0.0 -200.0		0.0 0.0	0.0 0.0	0.0 -500.0	0 -2	0 0	0 -1
Medicaid Services Behavioral Health Medicaid Services AMD: Medicaid Expansion The change request for Medicaid Expansio for FY2016 and an estimated number of pe						0.0	0.0	0.0	4,799.5	0.0	0	0	0

FY2016.

Below is the breakdown for estimates of the size of the expansion population and the average cost per potential new enrollee.

1. The Expansion Population.

Numbers and Language Differences Agencies: H&SS

			Trans	Total	Personal				Capital					
		Column	Туре	Expenditure	Services	Travel	Services	Commodities	Outlay	Grants	Misc	PFT	PPT	TMP
Behavio	Services (continued) ral Health Medicaid Services (continue Medicaid Expansion (continued)	d)												
	To estimate the number of persons newly eligit by the Division of Public Health through the Be		•											
	and 2013 and population estimates and projec	tions reported	by the Ala	ska Department	of Labor and Wor	kforce								
	Development (ADLWD). The BRFSS survey is household, and health-related information on A													
	number of other adults living in the home, the p and household income.			,		0 /								
	The primary enrollees of Medicaid expansion a													
	dependent children, are not disabled or pregna This group is currently not eligible for Medicaio													
	of other adults, 1964 years of age that do not Based on our analysis of the BRFSS data for 2					ono in								
	the Medicaid expansion population is 41,910 for													
	population are 34,833 and 48,988.													
	Approximately 43 percent of newly eligible adu													
	the most common forms of coverage are empl Another 3.4 percent did not know or refused to													
	with Medicare is not eligible for Medicaid throu	gh the expansi	ion.			-								
	According to the study only 63 percent of newl													
	we call it the "Take up Rate". Also, only 76 per enroll in the first year of the implementation, fo													
	year of implementation. In the study we call thi	0		0										
	(41,910 individuals) by 63 percent and multiply in the first year.	nng it again by	76 percen	it we get 20,066 i	individuais who w	iii enroli								
	2. Per-Enrollee Spending on Medicaid Service	s for Newly Elig	gible Popu	llation.										
	Because Alaska's Medicaid program does not													
	certainty how much expansion to the newly elig enrolled in the Medicaid program who are a go													
	enrollees are enrolled through the Family Med	icaid eligibility o	category, i	which is comprise	ed of non-disabled	l adults								
	who are eligible for Medicaid services due to b having dependent children, we believe these e					on of								
	Based on the analysis of data from the Departi					113								
	average spending per enrollee for adults in Fall	mily Medicaid g	grew on ar	n average annual	l basis by just one	percent								
	to \$6,712 in FY2013. Over this same period, a adults (growing from \$12,282 to \$12,374). The													
	the fact that the overall working-age population													

Numbers and Language Differences Agencies: H&SS

								Agono	y: Departm				
		Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	PPT TMP
Behavi	Services (continued) oral Health Medicaid Services (continue : Medicaid Expansion (continued) The estimated annual cost of Medicaid servic cost of service rises substantially from about \$ those between 55 and 64. For women, costs women under 35 to just under \$8,200 for wom	ed) es for the expa \$3,500 per enr do not vary sub	ansion popu ollees for th bstantially b	ulation varies by hose under 35 to	gender and age. just under \$7,20	For men, 0 for							<u></u>
	Distribution of the Expansion Population by G	ender and Age	Э.										
	The study shows that this group will be mostly males between the ages of 19 and 34. This is per-enrollee spending than all other gender-ag	important bec											
	We estimate that the average cost of services \$7,250, growing to \$8,400 by FY2021. Over the eligible, non-disabled adult Medicaid enrollee costs is due to the expansion population likely	his same perio s will be severa	d, we proje al hundred	ct that the per-p dollars less eacl	erson cost for cur n year. The differe	rently ence in							
	3. Estimated Costs of Medicaid Expansion.												
	The take-up rate (63 percent) was taken in co represents the proportion of newly eligible pop and the lag rate represents the percent of the rate are from the 2014 study conducted by the take-up rate is consistent with the few studies expansion.	oulation that wi take-up rate th e Lewin Group	ill ultimately hat will be a for the Sta	enroll through t achieved that yea te of Alaska. The	the Medicaid expa ar. Both the take-u e Lewin assumpti	ansion .ıp and lag							
	According to a study conducted in 2012 by the Health Insurance Policy Simulation Model (HI in 2012 Sommers et al estimated that Medica private insurance, with state-level estimates ra year.	PSM) average id participation	60.5 perce averaged	ent among newly 62.6 percent am	eligible people. S ong eligible adult	Similarly, s without							
	Based on the results of this study, the estimat 20,066 enrollees. The average cost per newly number of enrollees and the average cost per Medicaid Expansion in FY2016. Since in the f newly eligible population are going to be reim funds in this request are federal funds.	r eligible enrolle r enrollee it res irst years of im	ee is estima ults in \$14 plementati	ated to be \$7,24 5,438.4 of the to on of the Expan	8. By multiplying a tal funds needed a sion the spending	the for for the							
	Based on recent historical spending patterns a enrollees in Family Medicaid, 3.3 percent of th												

Numbers and Language Differences Agencies: H&SS

Agency: Department of Health and Social Services

	Column	Trans Type	Total Expenditure	Personal Services	Trave1	Services	Commodities	Capital Outlay	Grants	Misc	PFT	РРТ	TMP
Medicaid Services (continued)													
Behavioral Health Medicaid Services (continue													
Decrement an amount equal to the FY12 and	House CS	Dec	-4,611.0	0.0	0.0	0.0	0.0	0.0	-4,611.0	0.0	0	0	0
FY13 Average Lapsing Balances													
1037 GF/MH (UGF) -4,611.0													
* Allocation Difference *			-9,410.5	0.0	0.0	0.0	0.0	0.0	-9,410.5	0.0	0	0	0
Children's Medicaid Services													
Decrement an amount equal to the FY12 and	House CS	Dec	-1.596.1	0.0	0.0	0.0	0.0	0.0	-1,596.1	0.0	0	0	0
FY13 Average Lapsing Balances									,				
1037 GF/MH (UGF) -1,596.1													
* Allocation Difference *			-1,596.1	0.0	0.0	0.0	0.0	0.0	-1,596.1	0.0	0	0	0
Adult Preventative Dental Medicaid Services													
AMD: Medicaid Expansion	16GovAmd	Inc	5,381.2	0.0	0.0	0.0	0.0	0.0	5,381.2	0.0	0	0	0
The change request for Medicaid Expansion i	s calculated by	multinlvin	a the estimated n	umber of new enr	ollees								

The change request for Medicaid Expansion is calculated by multiplying the estimated number of new enrollees from the expansion population for FY2016 by an estimated number of per-enrollee costs of Medicaid services for

the expansion population in FY2016. Below is the breakdown for estimates of the size of the expansion population and the average cost per potential new enrollee.

1. The Expansion Population

To estimate the number of persons newly eligible for Medicaid expansion, the study relied on information collected by the Division of Public Health through the Behavioral Risk Factor Surveillance System (BRFSS) survey for 2012 and 2013 and population estimates and projections reported by the Alaska Department of Labor and Workforce Development (ADLWD). The BRFSS survey is a statewide household survey that collects detailed demographic, household, and health-related information on Alaskans. In this survey, adult respondents are asked their age, the number of other adults living in the home, the presence and ages of any dependent children living in the home, and household income.

The primary enrollees of Medicaid expansion are working-age adults 21--64 years of age who are not caring for dependent children, are not disabled or pregnant, and are at or below 138 percent of Federal Poverty Level (FPL). This group is currently not eligible for Medicaid in Alaska. In addition, Medicaid expansion affects a small number of other adults, 19--64 years of age that do not meet current income limits for Medicaid eligibility. Based on our analysis of the BRFSS data for 2012 and 2013, our midpoint estimate of the number of persons in the Medicaid expansion population is 41,910 for FY2016. Our lower and upper bound estimates of the expansion population are 34,833 and 48,988.

Approximately 43 percent of newly eligible adults do not have health insurance. Of those with health insurance, the most common forms of coverage are employer sponsored (19.6 percent) and partial coverage (29.3 percent). Another 3.4 percent did not know or refused to disclose if they had insurance. It is important to note that anyone with Medicare is not eligible for Medicaid through the expansion.

According to the study only 63 percent of newly eligible population will eventually enroll in Medicaid. In the study we call it the "Take up Rate". Also, only 76 percent of those that will eventually enroll in Medicaid will actually

Numbers and Language Differences Agencies: H&SS

								Agene	y. Departine	Sint Of Healt		Julia		003
		Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	РРТ	TMP
	- tative Dental Medicaid Services aid Expansion (continued)		<u> </u>											
enrol year (41,9	II in the first year of the implementation, of implementation. In the study we call 110 individuals) by 63 percent and multi a first year.	this "Lag Rate".	By multiply	ving estimated ex	, kpansion populati	ion								
2. Pe	er-Enrollee Spending on Medicaid Servi	ices for Newly El	igible											
certa enro enro who	use Alaska's Medicaid program does n inty how much expansion to the newly lled in the Medicaid program who are a llees are enrolled through the Family M are eligible for Medicaid services due to g dependent children, we believe these	eligible enrollees good proxy for tl edicaid eligibility b being low incor	will cost. ne expans category, ne with de	There are, howe on population. T which is compris pendent children	ver, working-age he majority of the ed of non-disable . With the except	adults ese ed adults								
avera to \$6 adult	d on the analysis of data from the Depa age spending per enrollee for adults in ,712 in FY2013. Over this same period is (growing from \$12,282 to \$12,374). T act that the overall working-age populat	Family Medicaid , average spend he substantial di	grew on a ing per eni fference ir	n average annua rollee was little cl n average spendi	I basis by just on hanged for all wo ng per enrollee is	e percent rking-age								
cost those	estimated annual cost of Medicaid serv of service rises substantially from abou e between 55 and 64. For women, cost en under 35 to just under \$8,200 for wo	t \$3,500 per enro s do not vary sub	ollees for ti stantially l	hose under 35 to	just under \$7,20	0 for								
Distr	ibution of the Expansion Population by	Gender and Age												
male	study shows that this group will be mos s between the ages of 19 and 34. This enrollee spending than all other gender-	is important beca												
\$7,23 eligik	estimate that the average cost of service 50, growing to \$8,400 by FY2021. Over ole, non-disabled adult Medicaid enrolle s is due to the expansion population like	this same period es will be severa	d, we proje I hundred	ect that the per-pe dollars less each	erson cost for cui n year. The differe	rrently ence in								
3. Es	timated Costs of Medicaid Expansion.													
repre rate from	take-up rate (63 percent) was taken in of esents the proportion of newly eligible the represents the percent of the take-up re the 2014 study conducted by the Lewin is consistent with the few studies we are	nat will ultimately ate that will be ac a Group for the S	enroll thro hieved tha tate of Ala	ough the Medicai It year. Both the ska. The Lewin a	d expansion and take-up and lag assumption of the	the lag rate are e take-up								

Numbers and Language Differences Agencies: H&SS

							• •	•					
	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services Com	modities	Capital Outlay	Grants	Misc	PFT	РРТ	тмр
Medicaid Services (continued) Adult Preventative Dental Medicaid Services AMD: Medicaid Expansion (continued)												<u> </u>	
According to a study conducted in 2012 by th Health Insurance Policy Simulation Model (H in 2012 Sommers et al estimated that Medic private insurance, with state-level estimates year.	IIPSM) average 6 aid participation a	0.5 percei veraged 6	nt among newly e 52.6 percent amo	eligible people. S ng eligible adults	imilarly, without								
Based on the results of this study, the estima 20,066 enrollees. The average cost per new number of enrollees and the average cost pe Medicaid Expansion in FY2016. Since in the newly eligible population are going to be rein funds in this request are federal funds.	ly eligible enrollee er enrollee it resul first years of impl	e is estima ts in \$145 lementatio	ited to be \$7,248 ,438.4 of the tota on of the Expansi	. By multiplying th I funds needed fo ion the spending t	ne or for the								
Based on recent historical spending patterns enrollees in Family Medicaid, 3.7 percent of resulting in \$5,381.2 in spending. 1002 Fed Ropts (Fed) 5,381.2													
Decrement an amount equal to the FY12 and FY13 Average Lapsing Balances 1004 Gen Fund (UGF) -184.8	House CS	Dec	-184.8	0.0	0.0	0.0	0.0	0.0	-184.8	0.0	0	0	0
* Allocation Difference *			-5,566.0	0.0	0.0	0.0	0.0	0.0	-5,566.0	0.0	0	0	0
Health Care Medicaid Services AMD: Medicaid Expansion The change request for Medicaid Expansion for FY2016 and an estimated number of per- FY2016. Below is the breakdown for estimates of the new enrollee.	enrollee costs of	Medicaid	services for the e	expansion popula	tion in	0.0	0.0	0.0	132,348.9	0.0	0	0	0
1. The Expansion Population.													
To estimate the number of persons newly eli by the Division of Public Health through the L and 2013 and population estimates and proje Development (ADLWD). The BRFSS survey household, and health-related information or number of other adults living in the home, the and household income. The primary enrollees of Medicaid expansion	Behavioral Risk F ections reported L is a statewide ho Alaskans. In this e presence and a	actor Surv by the Alas usehold s survey, a ges of any	veillance System ska Department o urvey that collect adult respondents / dependent chilo	(BRFSS) survey of Labor and Word ts detailed demog are asked their a dren living in the h	for 2012 kforce iraphic, age, the iome,								

Numbers and Language Differences Agencies: H&SS

		Column	Trans	Total Expenditure	Personal Services	Traval	Sonvioor	Commodition	Capital	Chante	Nico	DET	PPT TMP	
Modicaid	Services (continued)		Туре	Experiancure	Services	Travel	Jeivices	Commodities	Outlay	Grants	FIISC	PFT	<u>PPT TMP</u>	
	Care Medicaid Services (continued)													
	Medicaid Expansion (continued)													
,	dependent children, are not disabled or pregnant, and are at or below 138 percent of Federal Poverty Level (FPL).													
	This group is currently not eligible for Medica													
	of other adults, 1964 years of age that do n													
	Based on our analysis of the BRFSS data for	r 2012 and 2013,	our midpo	oint estimate of t	he number of per	sons in								
	the Medicaid expansion population is 41,910	for FY2016. OL	ır lower and	d upper bound e	stimates of the e	xpansion								
	population are 34,833 and 48,988.													
	Approximately 43 percent of newly eligible ad													
	the most common forms of coverage are em		· ·	· ·	,									
	Another 3.4 percent did not know or refused to disclose if they had insurance. It is important to note that anyone with Medicare is not eligible for Medicaid through the expansion.													
		bugn the expansi	on.											
	According to the study only 63 percent of new													
	we call it the "Take up Rate". Also, only 76 p													
	enroll in the first year of the implementation,													
	year of implementation. In the study we call t													
	(41,910 individuals) by 63 percent and multip in the first year.	olying it again by	76 percent	t we get 20,066 i	ndividuals who w	/iii enroii								
	in the first year.													
	2. Per-Enrollee Spending on Medicaid Service	es for Newly Elig	gible Popul	ation.										
	Because Alaska's Medicaid program does no	ot currently serve	the expan	sion population,	we do not know	with								
	certainty how much expansion to the newly e	ligible enrollees	will cost. T	here are, howev	er, working-age	adults								
	enrolled in the Medicaid program who are a													
	enrollees are enrolled through the Family Me													
	who are eligible for Medicaid services due to	•				on of								
	having dependent children, we believe these	enrollees are a	gooa proxy	for the expansion	on population.									
	Based on the analysis of data from the Depa	rtment's Medicai	d Budget G	Group, between l	FY2009 and FY2	013,								
	average spending per enrollee for adults in F	, ,	,	0		,								
	to \$6,712 in FY2013. Over this same period,	• •	• •		•									
	adults (growing from \$12,282 to \$12,374). Th			• •	• •	due to								
	the fact that the overall working-age populati	on includes indiv	iduais who	are disabled or	pregnant.									
	The estimated annual cost of Medicaid servio	ces for the expar	nsion popul	ation varies by g	ender and age. I	For men,								
	cost of service rises substantially from about													
	those between 55 and 64. For women, costs			y age, ranging fr	om about \$7,500	for								
	women under 35 to just under \$8,200 for wo	men between 45	and 54.											
	Distribution of the Expansion Population by C	Gender and Age.												
	The study shows that this group will be most	ly male (54 perce	ent) and tha	at about 21 perc	ent of this group	will be								
	males between the ages of 19 and 34. This i	s important beca	use this de	mographic grou	p has significantl	y lower								

Numbers and Language Differences Agencies: H&SS

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services	Commodities	Capital Outlay	Grants	Misc	PFT	РРТ	TMP	
Medicaid Services (continued) Health Care Medicaid Services (continued) AMD: Medicaid Expansion (continued) per-enrollee spending than all other gender-				<u> </u>		Jervices				<u> </u>	<u></u>			
\$7,250, growing to \$8,400 by FY2021. Over eligible, non-disabled adult Medicaid enrolle	We estimate that the average cost of services per newly eligible Medicaid enrollee for FY2016 will be about \$7,250, growing to \$8,400 by FY2021. Over this same period, we project that the per-person cost for currently eligible, non-disabled adult Medicaid enrollees will be several hundred dollars less each year. The difference in costs is due to the expansion population likely containing a relatively small number of persons with disabilities.													
3. Estimated Costs of Medicaid Expansion.	3. Estimated Costs of Medicaid Expansion.													
The take-up rate (63 percent) was taken in consideration when estimating the number of new enrollees and represents the proportion of newly eligible adults that will ultimately enroll through the Medicaid expansion and the lag rate represents the percent of the take-up rate that will be achieved that year. Both the take-up and lag rate are from the 2014 study conducted by the Lewin Group for the State of Alaska. The Lewin assumption of the take-up rate is consistent with the few studies we are aware of that were conducted prior to the CY2014 expansion.														
According to a study conducted in 2012 by t Health Insurance Policy Simulation Model (H in 2012 Sommers et al estimated that Medic private insurance, with state-level estimates year.	HPSM) average 6 aid participation a	0.5 percer averaged 6	nt among newly 2.6 percent amo	eligible people. ong eligible adul	Similarly, ts without									
Based on the results of this study, the estima 20,066 enrollees. The average cost per new number of enrollees and the average cost pe Medicaid Expansion in FY2016. Since in the newly eligible population are going to be reir funds in this request are federal funds.	ly eligible enrollee er enrollee it resul first years of imp	e is estima Its in \$145, Iementatio	ted to be \$7,248 ,438.4 of the tota n of the Expans	3. By multiplying al funds needed ion the spending	the for g for the									
Based on recent historical spending patterns enrollees in Family Medicaid, 91 percent of a spending through inpatient and outpatient ho related services that are under Health Care 1002 Fed Rcpts (Fed) 132,348.9	total spending on ospital care, physi	Expansior ician/practi	or \$132,348.9 itioner services a	will be contribute	ed by									
Decrement an amount equal to the FY12 and FY13 Average Lapsing Balances	House CS	Dec	-11,464.7	0.0	0.0	0.0	0.0	0.0	-11,464.7	0.0	0	0	0	
1004 Gen Fund (UGF) -11,464.7 Decrement the Projected Costs for	House CS	Dec	-173.2	0.0	0.0	0.0	0.0	0.0	-173.2	0.0	0	0	0	
Non-Mandatory Abortion Services in FY16 1004 Gen Fund (UGF) -173.2											-	-	-	
Decrement Funding for the Prescription Database Funding that is RSA'd to DCCED/CBPL	House CS	Dec	-85.0	0.0	0.0	-85.0	0.0	0.0	0.0	0.0	0	0	0	

Numbers and Language Differences Agencies: H&SS

Agency: Department of Health and Social Services

	Column	Trans Type	Total Expenditure	Personal Services	Travel	Services Com	nmodities	Capital Outlay	Grants	Misc	PFT	РРТ	TMP
Medicaid Services (continued) Health Care Medicaid Services (continued) Decrement Funding for the Prescription Database Funding that is RSA'd to DCCED/CBPL (continued) 1002 Fed Rcpts (Fed) -42.5 1004 Gen Fund (UGF) -42.5													
* Allocation Difference *		-	-144,071.8	0.0	0.0	-85.0	0.0	0.0	-143,986.8	0.0	0	0	0
Senior and Disabilities Medicaid Services AMD: Medicaid Expansion	16GovAmd	Inc	2,908.8	0.0	0.0	0.0	0.0	0.0	2,908.8	0.0	0	0	0

The change request for Medicaid Expansion is calculated by multiplying the estimated number of new enrollees for FY2016 and an estimated number of per-enrollee costs of Medicaid services for the expansion population in FY2016.

Below is the breakdown for estimates of the size of the expansion population and the average cost per potential new enrollee.

1. The Expansion Population.

To estimate the number of persons newly eligible for Medicaid expansion, the study relied on information collected by the Division of Public Health through the Behavioral Risk Factor Surveillance System (BRFSS) survey for 2012 and 2013 and population estimates and projections reported by the Alaska Department of Labor and Workforce Development (ADLWD). The BRFSS survey is a statewide household survey that collects detailed demographic, household, and health-related information on Alaskans. In this survey, adult respondents are asked their age, the number of other adults living in the home, the presence and ages of any dependent children living in the home, and household income.

The primary enrollees of Medicaid expansion are working-age adults 21--64 years of age who are not caring for dependent children, are not disabled or pregnant, and are at or below 138 percent of Federal Poverty Level (FPL). This group is currently not eligible for Medicaid in Alaska. In addition, Medicaid expansion affects a small number of other adults, 19--64 years of age that do not meet current income limits for Medicaid eligibility. Based on our analysis of the BRFSS data for 2012 and 2013, our midpoint estimate of the number of persons in the Medicaid expansion population is 41,910 for FY2016. Our lower and upper bound estimates of the expansion population are 34,833 and 48,988.

Approximately 43 percent of newly eligible adults do not have health insurance. Of those with health insurance, the most common forms of coverage are employer sponsored (19.6 percent) and partial coverage (29.3 percent). Another 3.4 percent did not know or refused to disclose if they had insurance. It is important to note that anyone with Medicare is not eligible for Medicaid through the expansion.

According to the study only 63 percent of newly eligible population will eventually enroll in Medicaid. In the study we call it the "Take up Rate". Also, only 76 percent of those that will eventually enroll in Medicaid will actually enroll in the first year of the implementation, followed by 88 percent in the second year and 100 percent in the third year of implementation. In the study we call this "Lag Rate". By multiplying estimated expansion population (41,910 individuals) by 63 percent and multiplying it again by 76 percent we get 20,066 individuals who will enroll in the first year.

Numbers and Language Differences Agencies: H&SS

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		Trans	Total	Personal				Capital					
Medicaid Services (continued) Senior and Disabilities Medicaid Services (c AMD: Medicaid Expansion (continued)	<u>Column</u> continued)	Туре	Expenditure	Services _	<u> Travel </u>	<u>Services</u>	<u>Commodities</u>	Outlay	<u> Grants </u>	Misc	PFT	<u>PPT</u>	<u>TMP</u>
2. Per-Enrollee Spending on Medicaid Ser	vices for Newly El	ligible Popu	lation.										
Because Alaska's Medicaid program does certainty how much expansion to the newly enrolled in the Medicaid program who are a enrollees are enrolled through the Family M who are eligible for Medicaid services due having dependent children, we believe the Based on the analysis of data from the Dep average spending per enrollee for adults in to \$6,712 in FY2013. Over this same perio adults (growing from \$12,282 to \$12,374). the fact that the overall working-age popula	y eligible enrollees a good proxy for the Medicaid eligibility to being low incor se enrollees are a coartment's Medicaid a Family Medicaid d, average spend. The substantial di	s will cost. 1 the expansion category, w me with dep a good proxy aid Budget (grew on an ling per enro lifference in	There are, howe on population. T which is compris sendent childrer y for the expans Group, between a average annue ollee was little c average spendi	ver, working-age The majority of thu- sed of non-disable . With the excep- sion population. FY2009 and FY. al basis by just or hanged for all wo ing per enrollee i	adults ase ed adults tion of 2013, ne percent orking-age								
The estimated annual cost of Medicaid ser cost of service rises substantially from abo those between 55 and 64. For women, cos women under 35 to just under \$8,200 for w	ut \$3,500 per enro ts do not vary sub	ollees for th bstantially b	ose under 35 to	just under \$7,20	00 for								
Distribution of the Expansion Population by	/ Gender and Age	9.											

The study shows that this group will be mostly male (54 percent) and that about 21 percent of this group will be males between the ages of 19 and 34. This is important because this demographic group has significantly lower per-enrollee spending than all other gender-age cohorts.

We estimate that the average cost of services per newly eligible Medicaid enrollee for FY2016 will be about \$7,250, growing to \$8,400 by FY2021. Over this same period, we project that the per-person cost for currently eligible, non-disabled adult Medicaid enrollees will be several hundred dollars less each year. The difference in costs is due to the expansion population likely containing a relatively small number of persons with disabilities.

3. Estimated Costs of Medicaid Expansion.

The take-up rate (63 percent) was taken in consideration when estimating the number of new enrollees and represents the proportion of newly eligible population that will ultimately enroll through the Medicaid expansion and the lag rate represents the percent of the take-up rate that will be achieved that year. Both the take-up and lag rate are from the 2014 study conducted by the Lewin Group for the State of Alaska. The Lewin assumption of the take-up rate is consistent with the few studies we are aware of that were conducted prior to the CY2014 expansion.

According to a study conducted in 2012 by the Kaiser Family Foundation, Medicaid participation rates in the Health Insurance Policy Simulation Model (HIPSM) average 60.5 percent among newly eligible people. Similarly,

Numbers and Language Differences Agencies: H&SS

Agency: Department of Health and Social Services

Medicaid Services (continued)	<u>Column</u>	Trans Type	Total Expenditure	Personal Services	Travel	Services (Commodities	Capital Outlay	Grants	Misc	PFT	PPT	TMP
Senior and Disabilities Medicaid Services (co	ontinued)												
AMD: Medicaid Expansion (continued)													
in 2012 Sommers et al estimated that Media private insurance, with state-level estimates year.													
Based on the results of this study, the estim 20,066 enrollees. The average cost per new number of enrollees and the average cost p Medicaid Expansion in FY2016. Since in the newly eligible population are going to be rei funds in this request are federal funds. Based on recent historical spending pattern enrollees in Family Medicaid, two percent o enrollees though Long-Term Care related s Component. 1002 Fed Rcpts (Fed) 2,908.8 Decrement an amount equal to the FY12 and	vly eligible enrolle er enrollee it resu e first years of imp imbursed by Fede s by the proxy gro f total spending ou	e is estima ilts in \$14 plementati eral govern pup which n Expansi	ated to be \$7,248. 5,438.4 of the tota on of the Expansion ment at 100 perconnection mostly consists of on or \$2,908.8 will	. By multiplying th I funds needed fo on the spending f ent match rate, al f current Medicaid Il used by newly e	ne or for the II the d eligible	0.0	0.0	0.0	-4,852.1	0.0	0	0	0
FY13 Average Lapsing Balances 1004 Gen Fund (UGF) -4,852.1													
* Allocation Difference *			-7,760.9	0.0	0.0	0.0	0.0	0.0	-7,760.9	0.0	0	0	0
* * Appropriation Difference * *			-168,405.3	0.0	0.0	-85.0	0.0	0.0	-168,320.3	0.0	0	0	0
Agency-wide Appropriation Agency-wide Unallocated Appropriation 20% Unallocated Travel Reduction The reduction was calculated based on the Non-formula Travel: \$6,619.2 Non-formula Total Funds: \$726,915.5 Non-formula UGF: \$378,201.1 (52% of Tota UGF attributable to Travel (52% X \$6,619.2 20% UGF Travel cut: \$688.4 1004 Gen Fund (UGF) -688.4	al)			0.0	-688.4	0.0	0.0	0.0	0.0	0.0	0	0	0
* Allocation Difference *			-688.4	0.0	-688.4	0.0	0.0	0.0	0.0	0.0	0	0	0
* * Appropriation Difference * * * * * Agency Difference * * *			-688.4 -176.361.2	0.0 -2.079.4	-688.4 -809.8	0.0 -753.6	0.0 -546.1	0.0 0.0	0.0 -169.358.7	0.0 -2,813.6	0 -25	0 0	0 -1
* * * All Agencies Difference * * * *			-176,361.2	-2,079.4	-809.8	-753.6	-546.1	0.0	-169,358.7	-2,813.6	-25	0	-1
-			-	-					-				

* * * *

Column Definitions

16GovAmd (FY16 Governor Amended) - FY16 Governor's Endorsed Budget (Includes Governor's Dec 15th budget and the Governor's Amendments submitted by the 30th day of session). House CS (House CS) - The operating budget bills (HB72 and HB 73) adopted by the House Finance Committee.