

ADDITIONAL REGULATION NOTICE INFORMATION  
(AS 44.62.190(d))

1. Adopting agency: Department of Health & Social Services
2. General subject of regulation: Fees to administer the AK SHARP-1 State Health Care Practitioner Loan Repayment Program.
3. Citation of regulation (may be grouped): 7 AAC 80.030
4. Department of Law file number, if any: 2020200348

5. Reason for the proposed action:  
 Compliance with federal law or action (identify): \_\_\_\_\_  
 Compliance with new or changed state statute  
 Compliance with federal or state court decision (identify): \_\_\_\_\_  
 Development of program standards  
 Other (identify): \_\_\_\_\_

6. Appropriation/Allocation: N/A

7. Estimated annual cost to comply with the proposed action to: None.  
A private person: \$0.  
Another state agency: \$0.  
A municipality: \$0.

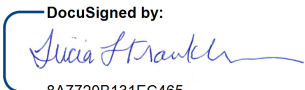
8. Cost of implementation to the state agency and available funding (in thousands of dollars): None.

	Initial Year	Subsequent
	FY _____	Years
Operating Cost	\$ _____	\$ _____
Capital Cost	\$ _____	\$ _____
1002 Federal receipts	\$ _____	\$ _____
1003 General fund match	\$ _____	\$ _____
1004 General fund	\$ _____	\$ _____
1005 General fund/ program	\$ _____	\$ _____
Other (identify)	\$ _____	\$ _____

9. The name of the contact person for the regulation:  
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Title: Health Program Manager III  
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10. The origin of the proposed action:  
 Staff of state agency  
 Federal government  
 General public  
 Petition for regulation change<sup>7</sup>  
 Other (identify): Fees to offset costs of administering the program.

11. Date: 5/8/2020

Prepared by:   
DocuSigned by:  
Tricia Franklin  
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[signature]

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