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Alaska Children's Trust Convening DHSS REORGANIZATION QUESTIONS

1. *Will the FMS Grants Team be bifurcated as well?*

Yes. The grant team will be bifurcated to align with the divisions and services in both departments of Department of Health (DOH) and Department of Family and Community Services (DFCS).

2. *Will both new Departments use the current DHSS Background Check Unit?*

Both Departments will continue to use the current Background Check Unit which remains assigned to the Division of Health Care Services to process background checks. The statutes will be overseen and implemented by DOH. However, both departments shall have input into regulations related to the programs they oversee and the overall process including reconsideration and variances. OCS will continue to perform all federally required Adam Walsh checks.

As many providers know, an individual can apply to the department for a variance if they have a finding on a background check. We anticipate starting with one unified variance committee and further discussing with the variance committee if two separate committees are warranted. The current committee operates really well, and we want to ensure a smooth transition before we make any changes. Both Commissioner's offices will have delegated decision makers that will review variance requests pertaining to their department's divisions that are referred from the variance committee.

3. *Over the last few weeks, there has been strong bipartisan concern expressed about the timing of this executive order and the processes preceding it. Given the vocal concerns, would the administration be open to slowing down the timeline to allow for appropriate and intentional opportunities for public comment and stakeholder engagement prior to moving forward with the proposed restructure?*

The State of Alaska arrived at the decision to reorganize DHSS into two departments after over a year of analysis and dialog with our legal team and division directors. This decision was not made in haste or without significant time and consideration of how to address the needs of Alaskans without disrupting services and internal processes. This has been a topic discussed by previous administrations and legislatures for many years. DHSS is one of the only mega-agencies left in the United States.

Prior to putting forth the Executive Order (EO), meaningful engagement occurred with all division directors, who are the subject matter experts in DHSS programs and processes. These discussions informed the final decision to keep all divisions intact. This ensures divisions are able to conduct their business without significant change to their day-to-day operations.

The State is making every effort to provide transparency and meet concerns by participating in legislative hearings, town halls with all employees, meetings with union leadership, and meetings with external stakeholders.

The split into two separate departments will improve operations and delivery of services. This split will also allow each department to have commissioners with expertise in the work they oversee. It is impossible to find one commissioner with expertise in Medicaid, public health, child welfare, and running 24-hour facilities like API, Juvenile Justice, and the Pioneer Homes. The pandemic itself has highlighted the need for this change. Future potential changes to divisional structure or programs would take place separately from the departmental reorganization (for example, the current consultations regarding potential internal reorganization at OCS).

All initial meetings that the department had early on with stakeholders and federal partners have evolved into a continuous dialogue of what the reorganization of the department will mean for constituents and entities served by the department. The department is committed to an ongoing dialogue with all entities. As such, stakeholder engagement is a part of the department's transition plan.

Further, we have committed to establishing a stakeholder and outreach coordinator, that will facilitate continued engagement with entities through the transition and implementation period. This work will continue through the first year of the department split. (Thank you to Trevor for that idea!)

4. *State services for families already face challenges due to fragmentation and barriers related to data sharing, coordination and administrative processes. What has the department done since 2019 to engage in a comprehensive analysis of internal processes to identify internal improvements and opportunities for change prior to opting for bifurcation?*
 - *DHSS interpreted this to be about DHSS as a whole and not including programs like early education items at DEED.*

Senior and Disability Services/Infant Learning Program:

Several staff from DHSS' Child Care Program Office (CCPO), the section of Women, Children's & Family Health (WCFH), and SDS are regular, active members of advisory committees like the Alaska Early Childhood Coordinating Council (AECCC) and Interagency Coordinating Council (ICC) that have been looking at ways to integrate and enhance services to young children. (NOTE - In order for a State to operate a Part C IDEA program we must have an Interagency Coordinating Council (ICC). SDS pays the Gov Council to conduct this committee. It must have OCS, DEED, CCPO, parent, providers, insurance/Medicaid folks, etc.)

This includes active contributions to a strategic direction document, a few gap analyzes, and an environmental scan. Many DHSS members were able to build strong collaborations around the Pre-School Development Grant (PDG 0-5) that was initially awarded to DEED. Active participants of the governance group are seeking to address gaps, align standards and practices, and enhance services. Many DHSS staff worked/ contributed to the AK Comp plan and scoreboard and reviewed data sources to address gaps. None of this work will go away.

Additionally, many of the divisions have Memorandum of Understanding (MOU) and/or Memorandum of Agreement (MOA) and contributed information for site reviews, gap analysis, strategic direction documents, child outcomes, etc.

Infant Learning Program (ILP) has built a more direct communication line to OCS and currently a staff member attends bi-weekly meetings with ILP so we can effectively address issues around Child Abuse Prevention and Treatment (CAPTA) referrals. This work will not change with the reorganization. Internally we saw a need to have a more direct communication channel and it is helping to provide better services

Division of Public Assistance/Child Care Program Office (CCPO):

The Child Care Program Office (CCPO) is undergoing some internal alignment and to look for ways to improve on service delivery to provide consistent and comprehensive support to childcare providers and to low-income families participating in the child care assistance program.

Larger Systems work:

Additionally, the AECCC Early Childhood Governance work group is studying the best way to align all childcare related programs like those at the Department of Education such as Head Start and programs located within DHSS. We want that important and intentional process and recommendations to continue before making any changes to where programs are aligned.

5. *This plan being proposed as an executive order rather than a bill eliminates opportunities for formal public comment and stakeholder input prior to the drafting of the proposed plan, which is now essentially set-in stone. Why did the department opt for this route rather than engaging users and stakeholders (families and programs for example)?*

An executive order is the proper constitutional authority available to the Governor under Article III, Section 23 of the state constitution that is used to realign services. No statutes can be added or deleted through an executive order. It is simply a mechanism to better align departments for better services to constituents. Every statute referenced in EO 119 is current law, and the EO just points to which new department the statute will belong to. A bill would have been needed if we were proposing adding new services or deleting services, which we are not doing.

Because we are simply aligning the functions of current statutory programs and services into two departments, the Executive Order, appeared to be the best method to accomplish this. Had we proposed a more complicated approach – such as pulling and combining different functions and duties of many different divisions into new divisions, a piece of legislation may have been a better tool to use.

The Executive Order was referred to the Health and Social Services Committee and the Finance Committee in both the House and the Senate. Rep. Zulkosky has indicated that she will be hold public testimony on the Executive Order and we believe that the Senate Finance Committee will as well. Comments may be submitted to both committees to become part of the record for the Executive Order 119. As it has been part of formal legislative proceedings, documents will be part of the record for the Executive Order and will be archived as such.

DHSS has engaged with stakeholders and asked for their input. The Executive Order is the first step for improving outcomes for Alaskans. If the EO is approved, both DOH and DFCS will continue to engage with stakeholders as we work towards improving a variety of systems in both departments.

6. *Will the two departments have different policies, procedures procurement creating separate processes for community providers?*
- *DHSS interpreted this to relate to systems like grant making and procurement of services – if an organization gets funding from both departments, are they going to have to know two different systems?*

No, both departments will have the same policies, use the same grant regulations and the same procurement process through GEMS (Grant Electronic Management System). Policies and regulations related to procurement and grants are established at the State level through the Department of Administration and are consistent across departments.

7. *Will the DHHS FMS Grants team be bifurcated as well? Will both new departments use the current DHSS BCU?*

Answered above in questions 1 & 2

8. *How will you address planning/coordination needs across two departments serving the same individuals?*

DHSS currently has many different beneficiaries who receive services from different or multiple divisions. For example, all children who are in OCS custody are also eligible for Medicaid. OCS currently has eligibility technicians on staff in their division who coordinate Medicaid eligibility with Division of Public Assistance (DPA) staff for OCS youth. Communication and agreements between OCS and DPA will remain in place and the two divisions will continue their current collaborations in Medicaid and other program areas.

DHSS also works with other state departments to ensure beneficiaries receive services and are not dropped while moving between jurisdictions. One example is the Division of Juvenile Justice frequently works with the Department of Education & Early Development and local school districts to ensure that youth at DJJ facilities continue to receive an education.

DHSS is currently able to complete this work through a variety of mechanisms, including but not limited to:

- Current law – which is not being changed substantively under the EO – will continue to provide for the cooperation and coordination between divisions and departments. These provisions are in effect and will remain in effect should the EO be approved.
- Business associate agreements (BAA) are used when different departments and divisions need to share information to ensure beneficiaries receive services. When required, under HIPAA, DOH and DFCS will have these business associate agreements in place.
- Memorandums of agreement (MOA) and memorandums of understanding (MOU) are also currently used, which allow divisions to share information and collaborate on behalf of beneficiaries. When required, these will continue to be used to ensure there is no interruption in services to beneficiaries.
- Additional documents that will be used to assist in the continuation of services if the EO is approved include court orders and releases of information. While some of the releases may point to DHSS, most if not all are directed to individual divisions or programs and since those

names are not changing, there will be no need to update those documents prior to the change to the two departments.

Finally, the transition from one department to two was clearly considered in drafting the EO, and those considerations can be found in the transition provision at the end of the EO (see sections 131-145). The goal is to avoid any disruption to services and processes in the move from one department to two. Providers and recipients should see no difference in who they interact with in the department on June 30 to July 1. These transition provisions, which will allow for the transition and continuity of operations, include:

- a. Pending litigation
- b. Grants and contracts
- c. Pending applications or certifications
- d. Payments
- e. Continued eligibility for programs
- f. License applications and enforcement
- g. Federally approved state plans and waivers
- h. Alaska Tribal Child Welfare Compact
- i. Instructions to the revisors of statutes and regulations
- j. Employment
- k. Membership of boards and commissions
- l. Regulations
- m. Confidentially and information sharing