



# ALASKAN WELL-BEING

*REPORT ON 2008 LEGISLATIVE HEALTH CAUCUS FORUMS*

*Co-Chairs:*

*Representative Sharon Cissna*

*Senator Donny Olson*

**Summaries of the 2008 Forums**

**with Conclusions and Recommendations discussed.**

**First Annual Report on the State of Alaska's Health and Well-Being**

**for the**

**Legislature of the State of Alaska**

**December 3, 2008**

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HOW		+		=		SERVICES FOR THE PEOPLE OF ALASKA
	<b>PUBLIC SYSTEMS</b>		<b>HEALTH SERVICES</b>		<b>ALASKANS</b>	

# INTRODUCTION TO THE HEALTH CAUCUS FORUMS FOR VITAL HEALTH INFORMATION

How can the State of Alaska balance health concerns with all its other responsibilities to Alaskans? Throughout the State government budget process it is difficult to meet the myriad of justified funding requests while also satisfying the need for adequate protective infrastructure to ensure public mental and physical health. Public health successes have been achieved by preventing diseases and health conditions that were killers of the past. Too often, however, the success of preventative measures is forgotten once the problem no longer fills the headlines. This is especially true when it comes to addressing behavioral and mental illness, which are even harder than physical health to quantify.

The benefits of improved mental health and healthier habits often elude raw data collection. Even on the personal level it can be hard to find compelling reasons to budget for maintenance of your own health. It has been noted by a few of our guests that folks are often more concerned with keeping their car maintained than in their own health. Feeling and being in good shape is easy to enjoy after a sickness or injury, but more easily taken for granted once attained. We are proud to be healthy and, often in competitive situations claim to be better than we actually feel.

This dynamic pervades social thinking, and as a result, affects public policy as well. Policy is formed to meet the needs of the public, a lesson from Brian Saylor's discussion in our first Health Caucus of the year. Scientific findings do not instantly become legislation. What we learn through investigation becomes policy after the public embraces those findings and is willing to elect people that will make that policy choice, within the limits of the budget.

The Alaska Legislative Health Caucus has endeavored during its many forums to present the serious, often crisis-level health and social services needs across the state.

Alaska's budget process has been through tight financial tests. Financial decisions are reasonably made to maximize service to the public at the least cost. As an example of why such decisions can have unexpected consequences, in Fiscal Year (FY) 2003 the strategic decision was made to shift behavioral health services to Medicaid as a way to capture additional federal dollars.

Increased Federal funding justified saving general fund dollars that decreased oil revenues had reduced. That limitation of available funding also prompted cutting back on state funded

Alaska's Newspaper

## Alaska Medicare patients rejected

**MONEY AND RULES:** Federal system drives most doctors away.

By GEORGE BRYSON  
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Alaskans who've paid a lifetime of payroll taxes toward Medicare on a promise they'll receive no-cost health insurance in their retirement years are "frustrated," "resentful" and "really angry" that local family doctors increasingly refuse to accept them as patients.

That's the message senior citizen advocates delivered to legislators this month at a forum on local Medicare problems.

### BACK PAGE

**BANK:** How Alaska stacks up with the nation on nonfederal physicians.

"We tell people, 'You know, you're probably not going to find a physician, and you should look for a nurse practitioner instead,'" AARP Alaska director Patrick Luby told the Anchorage hearing attended by legislators, doctors and hospital representatives.

Unfortunately, family care doctors have solid reasons for refusing to see patients covered by Medicare, said Dr. Bruce Klesling, whose practice does not accept it.

Federal reimbursements that are far lower than he normally charges combined with the bureaucracy's "onerous oversight" led him and other doctors at Primary Care Associates — the largest family practice in Alas-

See Back Page, MEDICARE

grants to private sector providers. This scenario has been pointed to as the trigger that led many problems to a crisis point. The choice was to save State funding and get a better bargain through Federal funds. The outcomes must be dealt with wisely.

The nine forums presented within this report's pages point to some of the outcomes that result from Alaska's policy choices. We came to observe a pattern in the cumulative information gained through the expertise and first hand experiences of Alaskans throughout the state.

This is the reason for the layout of the Table of Contents. The progression of topics, and the growing knowledge on the subject areas led progressively through the year to suggested lessons that demand attention.

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## SECTION I

### ***POLICY TOOLS FOR HEALTH***

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What are the tools we have at hand? In Section I, we examine our constitutional guidance and wisdom; and the enormous benefit of current technology.

## SECTION II

### ***CAUTIONARY CONDITIONS***

“True stories” presented by three remarkable healed healers, cover three of the state's most troubling records. Substance addiction, domestic and personal violence, and mental health each point to conditions found in our state that do not allow our own residents the protective and healing services available in all other states.

The Health Caucus' 6th annual “Cover-the-Uninsured Week” forum was able to discuss with greater understanding our state resident's plight, but with no solid plan yet created for its solution.

The last cautionary forum was unexpected and came as a result of the state's enormous absorption in oil and gas, specifically a gas line. Lessons learned throughout the world in mega-project impacts and the efforts of communities and states world-wide have harnessed the growing knowledge of potential negative outcomes for those in the path of gigantic wealth-making projects. The same lessons have applied to accidents that demonstrate poor planning for probable complications.



## SECTION III

### *CRISIS FOR ALASKANS*

Crisis – The last four forums began with an effort to learn what health responsibilities were located outside of the Department of Health and Social Services in the State of Alaska. Our first two choices, Department of Public Safety and Department of Corrections, introduced enormous cost driving tragedies that exist as a government responsibility but outside of the formal health and social services departmental oversight and networks. Imprisonment of the mentally ill should be relegated back to texts on the Middle-Ages.

The Department of Public Safety's has a unique window into the hidden world of domestic and personal violence, problems Alaska leads the nation in. It can be argued that the present separation of mental health services from the other arms of health services masks potential creation of integrated and cost effective solutions. These issues have unintended impacts on every person in the state.

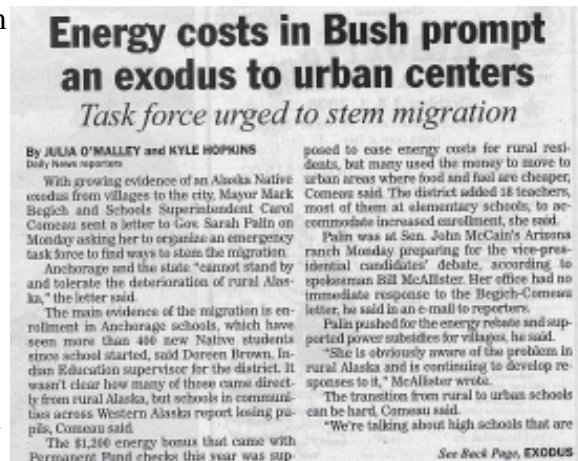
Weathering Winter '08-09 featured testimony from rural and remote communities throughout the state. With the guidance of the Department of Commerce, Community and Economic Development the forum was introduced to a host of life and health conditions faced by those communities this winter.

The last forum of the year was for many in our audience who honor elders, one of the most serious crises in the state. Seniors in Alaska face a situation not duplicated in any other state to the degree our Seniors face: that of uniformly being forced to rely on Medicare as a form of payment for health care, yet having few doctors who will accept that form of payment.

The final chapter in our report provides a compilation of recommendations and discussed solutions from each of the nine forums looking at the expressions of needs and solutions. As Alaska prepares to commemorate its 50<sup>th</sup> birthday, the challenges and resources presented at this year's Health Caucuses warrant thoughtful attention and renewed focus. Our celebration of statehood and the document that we lawmakers vow to uphold is a fitting moment to return to constitutional fidelity of our founder's edict to promote and protect public health.

*Sharon M. Cissna, CoChair, Legislative Health Caucus*

6 | [www.akhealthcaucus.org](http://www.akhealthcaucus.org)



## SECTION IV

### *Conclusions & Recommendations*

The Alaska Joint Legislative Health Caucus was formed during the 2004 Legislative Session to provide a summary of critical statewide information on current health issues to Legislators, their staff and interested Alaskans. Monthly forums are held each Legislative session in Juneau, and frequent forums during each interim. They are teleconferenced from the host site. Most of the forums have a Power Point that can be downloaded from the website at: [www.akhealthcaucus.org](http://www.akhealthcaucus.org), and a link to the KTOO Gavel-to-Gavel audio recording. For additional information in Alaska, call: 1-800-922-3875, or 907-269-0190. Topics of the five years of Health Caucus forums are listed below:

## **2004**

*Individual Seniors and Health Care.* February 24  
*Does Alaska's Health Training Make the Grade?*

March 9

*Can Alaska Afford its Next Drink?* April 5

*Targeting Access, Week of the Uninsured.*

April 29

*The Many Ways Alaskans Insure for Health.*

May 9

*Injured Alaskan's Back on the Job.* June 23

## **2005**

*Health Research in Alaska.* Jan. 26

*From Tooth Decay to Social Decay: Prevention.*

February 23

*Medicaid Made Easy.* March 9

*It's Your Life! Emergency Services in Alaska.*

March 23

*Hi-Tech Health.* April 6

*Cover the Uninsured Week.* May 2

## **2006**

*Alcoholism, the Great Destroyer.* January 18

*Helping People, Beyond Roads.* February 1

*Getting to the Heart of Prescription Drugs.*

February 15

*Black Holes in the Health Universe.* March 1

*Prevention — Whole Body Health.* March 29

*Week of the Uninsured, a Statewide Emergency.*

May 1

*Obesity: The Cost of Weight.* July 19

*Telemedicine, Changing health Care in Alaska.*

August 16

*Economics of Prevention.* September 20

*Mental Health: Institutionalization, Community Care.*

October 17

*Workforce Health.* November 15

## **2007**

*Filling the Need: Doctors, Dentists & Psychiatrists.* January 24

*Filling the Need: Mid-Level Health Providers.*

February 21

*Filling the Need: Complementary Medicine Workforce.* March 21

*Filling the Need: Traditional Alaskan Healers.*

April 11

*Week of the Uninsured: Alaska's Workforce.*

May 2

*Health + People = Successful Business.*

July 18

*Tools to Stay Healthy: Movement.* August 15

*Tools to Stay Healthy: Nutrition.*

September 12

*Tools to Stay Healthy: Environment.*

October 17

*Tools to Stay Healthy: Health, Education and Literacy.* November 14

*Social Determinates of Health.* December 4

## **2008**

*The Constitution: Protecting Public Health.*

February 6

*Maximizing Access through Technology.* March 5

*True Stories.* April 2

*Week of the Uninsured.* April 28

*Mega-Project Impacts.* June 13

*Public Safety and Domestic Violence.* June 18

*Health Beyond Hospitals.* July 18

*Weathering Winter '08-'09.* August 20

*Senior Crisis.* October 22