

ADDITIONAL REGULATION NOTICE INFORMATION
(AS 44.62.190(d))¹

1. Adopting agency: Department of Health and Social Services
2. General subject of regulation: General Relief Assisted Living Home Care
3. Citation of regulation (may be grouped): 7 AAC 47.465
4. Department of Law file number, if any: JU2015200978
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): Responsible fiscal and benefits management.
6. Appropriation/Allocation: Senior and Disabilities Services General Relief Temporary Assisted Living
7. Estimated annual cost to comply with the proposed action to:

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):

	Initial Year FY 2016	Subsequent Years
Operating Cost	\$ 0	\$ 0
Capital Cost	\$ 0	\$ 0
1002 Federal receipts	\$ 0	\$ 0
1003 General fund match	\$ 0	\$ 0
1004 General fund	\$ 0	\$ 0
1005 General fund/ program	\$ 0	\$ 0
Other (identify)	\$ 0	\$ 0

9. The name of the contact person for the regulation:

Name: Kelda Barstad

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

☐ Other (identify): _____

11. Date: 12/14/15

Prepared by: _____

[signature]

Name (printed): Kelda Barstad

Title (printed): Health Program Manager III

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