



CITY MANAGER REPORT

Reporting Period: November 19, 2020 to January 9, 2021

Prepared By: Phillip A. Zavadil, City Manager

Date: January 9, 2021

OUTREACH AND EDUCATION

In December 2020 another edition of the BeringS was mailed to each box holder. The next edition of the BeringS will be distributed in March/April 2021.

Monique and I worked with Agnew Beck to perform minor updates to the City's website (www.stpaulak.com).

COVID-19

Vaccine

On December 22, 2020, Saint Paul Island received 100 doses of the Moderna vaccine. On December 29, 2020 the SPIUC Vaccine Taskforce met to discuss the plan for distribution of the vaccine to community members and to discuss whether to administer the vaccine to 50 or 100 individuals.

The Saint Paul Health Center began administering the Moderna vaccine to Saint Paul Island resident in accordance with *attached DHSS COVID-19 Vaccine Allocation sheet*. As of January 8, 2021, a total of 85 residents have received their first dose the Moderna Vaccine.

For more information on the Moderna vaccine see the *attached information sheets*.

Education and Outreach

We have updated the COVID Response page to include numbers of residents vaccinated and all the Community/Workforce Protection Plans.

A public service announcement was posted prior to the new year outlining guidance for community members for the upcoming snow crab season (see attached).

Over the past couple weeks, we have been sending out NIXLEs regarding information about the Moderna vaccine.

On January 7, 2021, Dr. Cooper and I presented information on the Moderna vaccine on KUHB.



CARES Grant Relief Funding

CARES funding expenditure deadline has been extended to September 30, 2021. We are waiting for final invoicing and shipping of items and do not expect any new purchases.

We received are second payment.

Given the extension we will have to continue with the monthly reporting requirements even if we do not have new expenditures.

FEMA Reimbursement Funding

We will continue to submit separate projects month by month as the pandemic continues.

Saint Paul Island Unified Command

The Saint Paul Island Unified Command has been meeting bi-weekly except through the holidays. SPIUC met on the following dates:

November 23, 2020

At this meeting the team discussed and planned for the alternative Christmas Program, MEH students returning home and making Community/Workforce Protection Plans available to the public. The SPIUC decided to make CWPPs available to the public via <https://covid19.stpaulak.com>.

December 7, 2020

At this meeting the team received updates regarding the vaccine, discussed CDC quarantine options and reviewed our community risk indicator matrix. The SPIUC did not make any changes to the risk indicators and decided that the 14-day quarantine option is the safest route to take for our community.

January 4, 2021

At this meeting the team reviewed vaccine distribution guidelines and heard from Dr. Cooper on recommendations going forward. The team also reviewed City Emergency Ordinance 20-97 for potential changes. The team did not recommend major changes to the current protective measures.

Upcoming January 18, 2021

SPIUC will start working on goal setting at this meeting Some of the example goals that the team will review include:

- We want a summer tourism season
- We want tavern to open
- We want fundraisers, basketball games, dances, other
- We want halibut season

Each of these goals may require similar but somewhat different protective measures, or emphasis on some more than others. But they are helpful in communicating to the community where we may be headed. If we want x, then we need to do this. If we want y to be successful, then here's how to make that happen.

Public Radio Dish

All the supplies for replacing the dish are onsite and we are waiting for the Alaska Public Broadcasting engineer to come onsite for the installation.

City's Telephone System Upgrades

The week of January 4, 2021 LMJ techs were onsite to complete the installation of the new phone system. LMJ ran into some technical issues with old ACS equipment that was not compatible with the new phone equipment and was unable to install the new phones. We are working with ACS to provide an upgrade to some of their equipment so that the new phone system will be compatible. ACS will need to send out a service tech to complete this upgrade. We are hoping that can occur within the next 30-60 days. Once ACS equipment upgrade occurs, LMJ will send out a tech to complete the installation of the new phone system.

AIR TRANSPORTATION, CARGO, MAIL AND UPS

Ravn has been providing passenger service on a consistent basis. They have canceled a few times either due to weather or no inbound passengers.

Ravn is still looking at delivering mail and UPS.

On December 16, 2020, the City and Tribal Governments sent a letter (*see attached*) to Bob Barndt with Lynden regarding issues with UPS. Lynden holds the contract with UPS to deliver all UPS to rural communities that are off the road system.

On December 21, 2020, Amos Philemonoff and I met with representatives from Lynden Air Cargo to discuss our issues with on time and safe delivery of our UPS. The meet was informative, and Lynden was appreciative of us brining our concerns to them. Lynden committed to discussing improving service with ACE and APUN. We are scheduled to have a follow meeting with Lynden near the end of the January.

LOBBYING EFFORTS IN JUNEAU

Governor Dunleavy wants to pursue the attached bill next session to change the PERS contribution rates for state employers only. The purpose of the bill is explained as follows:

The proposed change to the PERS statutes will impact the State of Alaska as a PERS employer by lifting the 22 percent cap on the payroll contribution for the State of Alaska only. All other PERS and all TRS employers' rates will remain unchanged.

While this doesn't impact PERS employers other than the state or TRS employers, having a vehicle moving through the legislature offers opportunities to mess with current caps on annual contribution rates set up in 2008. Mark Hickey will monitor closely and report on developments. *Attached a copy of the draft bill and a summary explanation from the administration.*

AWARDS/GRANTS/DONATIONS/OPPORTUNITIES/AGREEMENTS

Economic Development Administration Grant for Harbor Feasibility Study

- R&M Consultants – R&M Consultants was selected to perform the Harbor Feasibility Study and a contract was completed and signed.
- Kickoff Meeting – On December 17, 2020 I had a kickoff meeting with the R&M team to discuss and plan out the project.
- Harbor Improvements Planning Team – The team will have its first meeting on January 22, 2021 to review and discuss:
 1. Fleet: The fleet is important to the planning of the harbor. We would like to define current local and transient fleet and potential future fleet.
 - a. There are 11 or 12 local vessels that are pulled out each year. Are other local vessels possible in the future? If so how many and what size?

- b. What is the largest vessel that uses the harbor and docks now?
- c. What are the primary fishing fleets that use the harbor? Crab and Pollack? What kind of vessels are associated with these fisheries?
2. Need for more moorage. Is there a need for additional moorage or dockage? If facilities were available would some of the fishing fleet over-season?
3. Need for modifications to existing infrastructure? Are there projects that would enhance the capabilities of the existing facilities?
4. Electrical utilities: Is there a need for more lighting? Is there a need for shore power to vessels? Would it be beneficial to have 3 phase shore power for vessel refers?
5. Need for new infrastructure to attract larger vessels; cruise ships, navy, USCG etc. What might this entail?
6. Need for port security, fencing, gates, lighting, cameras etc.

State of Alaska Village Safe Water Grant for Lift Stations

We are waiting on the State to proceed with this project.

State of Alaska Hazard Mitigation Grant for Emergency Sirens

Paperwork was submitted to the State for approval of purchasing the sirens. We are waiting on the State's approval.

STRATEGIC PLANNING

The City's Strategic Plan for 2021-2023 was distributed with the last BeringS. I will be working with Agnew Beck in the coming months to track progress on the plan and to develop and administer resident satisfaction survey.

CAPITAL IMPROVEMENT PLAN

I have been working on updating the City's Capitol Improvement plan based on discussion during the CIP Workshop with City Council last year.

ATAOAN AKUN EXECUTIVE PLANNING COMMITTEE

The Ataquan Akun Executive Planning Committee will meet on February 17, 2021 to review the current agreement and plan out projects to focus on in the coming year.

COVID-19 Vaccine Allocation: Phase 1b

The State of Alaska is using a phased approach to allocate the initial limited supply of COVID-19 vaccine to Alaskans. At the national level, allocation recommendations are being made by the Centers for Disease Control's [Advisory Committee on Immunization Practices \(ACIP\)](#). To suitably adapt the ACIP recommendations for Alaska, the COVID-19 Vaccine Task Force, in cooperation with the Alaska State Hospital and Nursing Home Association, convened the [Alaska Vaccine Allocation Advisory Committee \(AVAAC\)](#).

AVAAC includes representatives from the areas of emergency medicine, family medicine, infectious disease, EMS, long-term care, the American Association of Retired Persons, pharmacy, and medical ethics. AVAAC uses currently available science and guidance provided by DHSS, ACIP, the National Academy of Sciences, and other sources to inform its COVID-19 vaccine allocation recommendations to DHSS.¹⁻⁶ The AVAAC recommendations do not apply to Indian Health Service, Veterans Affairs, and Department of Defense COVID-19 vaccine allocations. AVAAC is guided by the following key elements designated in the [ACIP framework](#):

Science

- Maximize benefits and minimize harms
- Protect the population's health by reducing mortality and morbidity and preserving societal functioning

Implementation

- Assure feasibility of vaccine distribution
- Uphold community and individual values

Ethics

- Achieve equitable access for all Alaskans
- Ensure transparency and promote education on both the science and implementation

On Dec. 2, 2020, ACIP recommended that during Phase 1a, COVID-19 vaccine should be offered to health care personnel (HCP) and residents of long-term care facilities (LTCF). Phase 1a recommendations were reviewed by AVAAC, were adopted by the Department of Health and Social Services (DHSS), and are currently being implemented across Alaska. A more thorough description of the Alaskans who are included in Phase 1a is available [here](#).

On Dec. 20, 2020, ACIP recommended that during Phases 1b and 1c, the COVID-19 vaccine should be offered to the following groups:

- Phase 1b: persons aged ≥75 years, and frontline essential workers*
- Phase 1c: persons aged 65–74 years, persons aged 16–64 years with high-risk medical conditions, and other essential workers

To better guide the distribution of our limited COVID-19 vaccine supply, and after receiving input from the public and AVAAC, the State of Alaska will use the following four tiers to vaccinate Alaskans, as well as non-residents who provide education and healthcare in Alaska, in Phase 1b:

Phase 1b, Tier 1

- Persons aged 65 years and older

Phase 1b, Tier 2

- Frontline essential workers* who are aged 50 years and older and whose work-related duties must be performed on-site and involve being in close proximity (<6 feet) to the public or to coworkers:
 - Education (PreK–12 educators and school staff, childcare workers and support staff, including Indigenous language and culture educators);
 - First responders and public safety personnel, including state troopers, public safety officers, police, firefighters, and Office of Children’s Services staff and public health workers in direct contact with individuals and families not vaccinated in Phase 1a;
 - Food and agriculture (e.g., seafood, food distributors);
 - Grocery store workers;
 - Public transit workers, including rural** aviation workers serving communities defined as essential air services***, and rural cab service workers;
 - U.S. Postal Service workers and contract rural postal workers including mail planes;
 - Utility and power workers – rural communities**;
 - Water and wastewater – rural communities**
- People living or working in other congregate settings not covered in Phase 1a, such as:
 - Acute psychiatric facilities;
 - Correctional settings;
 - Group homes for individuals with disabilities, including serious mental illness, developmental and intellectual disabilities, physical disabilities, or substance use disorders;
 - Homeless and domestic violence shelters;
 - Substance misuse and treatment residential facilities; and
 - Transitional living homes

Phase 1b, Tier 3

- Persons aged 55–64 years
- All persons aged 16 and older living in “unserved communities”[±]
- Frontline essential workers* aged 16–50 years with two or more high-risk health conditions[§] whose work-related duties must be performed on-site and involve being in close proximity (<6 feet) to the public or to coworkers:
 - Education (PreK–12 educators and school staff, childcare workers and support staff, including Indigenous language and culture educators);
 - First responders and public safety personnel, including state troopers, public safety officers, police, firefighters, and Office of Children’s Services staff and public health workers in direct contact with individuals and families not vaccinated in Phase 1a;
 - Food and agriculture (e.g., seafood, food distributors);
 - Grocery store workers;
 - Public transit workers, including rural aviation workers serving communities defined as essential air services, ** and rural cab service workers;
 - U.S. Postal Service workers and contract rural postal workers including mail planes;

Updated 12/31/2020, 4:00 pm to address accidental omission.

- Utility and power workers – rural communities; and
- Water and wastewater – rural communities

Phase 1b, Tier 4

- Persons aged 50 years and older with two or more high-risk health conditions⁵
- Frontline essential workers* aged 16–50 years not covered in Tier 1–3 whose work-related duties must be performed on-site and involve being in close proximity (<6 feet) to the public or to coworkers:
 - Education (PreK–12 educators and school staff, childcare workers and support staff, including Indigenous language and culture educators);
 - First responders and public safety personnel, including state troopers, public safety officers, police, firefighters, and Office of Children’s Services staff and public health workers in direct contact with individuals and families not vaccinated in Phase 1a;
 - Food and agriculture (e.g., seafood, food distributors);
 - Grocery store workers;
 - Public transit workers, including rural aviation workers serving communities defined as essential air services,** and rural cab service workers;
 - U.S. Postal Service workers and contract rural postal workers including mail planes;
 - Utility and power workers – rural communities; and
 - Water and wastewater – rural communities

** Frontline essential workers are defined as people who are working in sectors essential to the functioning of society and are at substantially higher risk of exposure to SARS-CoV-2 because their work-related duties must be performed on-site and involve being in close proximity (<6 feet) to the public or to coworkers.*

Where sub-prioritization of frontline essential workers is needed due to limited vaccine supply, consider:

- *Workers in locations with limited access to health care and sanitation resources, such as people working in rural locations, off the road system, and/or in communities without piped water*
- *Workers in locations where high rates of transmission is occurring*
- *Workers who are at increased risk for severe illness based on age or underlying medical conditions (see: <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-20/03-COVID-Oliver.pdf>)*

*** Rural is defined as communities with a population less than 10,000 and off the road system. “Road System” is defined as any community connected by a road to the Steese, Elliot, Dalton, Seward, Parks, Klondike, Richardson, Sterling, Glenn, Haines, or Top of the World Highways.*

**** Essential air services as defined by the U.S. Department of Transportation. See:*

<https://www.transportation.gov/policy/aviation-policy/small-community-rural-air-service/essential-air-service>

± A served community is one in which ≥55% of homes are served by a piped, septic tank and well, or covered haul system. An unserved community is one where ≥45% homes have not been served either via pipe, septic tank and well, or covered haul system. See: <https://dec.alaska.gov/water/water-sewer-challenge/rural-communities/>

Updated 12/31/2020, 4:00 pm to address accidental omission.

^s Adults of any age with the following conditions are at increased risk for severe COVID-19–associated illness: cancer; chronic kidney disease; chronic obstructive pulmonary disease (COPD); Down Syndrome, heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies; immunocompromised state (weakened immune system) from solid organ transplant; obesity (body mass index [BMI] ≥ 30 kg/m² but < 40 kg/m²); severe obesity (BMI ≥ 40 kg/m²); sickle cell disease; smoking; type 2 diabetes mellitus; and pregnancy (https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html).

Additional Notes:

- Settings and roles within each tier should have equal priority.
- The list order within tiers does not imply priority group ranking.
- Persons with a documented SARS-CoV-2 infection in the preceding 90 days may choose to delay vaccination until near the end of the 90 day period in order to facilitate vaccination of those who remain susceptible to infection, as current evidence suggests reinfection is uncommon during this period after initial infection.

References:

1. CDC Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>
2. AK epidemiology mortality and morbidity reports highlighting Covid-19 health disparities stratified by age and high-risk conditions: http://www.epi.alaska.gov/bulletins/docs/b2020_13.pdf
http://www.epi.alaska.gov/bulletins/docs/b2020_12.pdf
3. Framework for Equitable Allocation of COVID-19 Vaccine. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25917>. Accessed at <https://www.nap.edu/catalog/25917/framework-for-equitable-allocation-of-covid-19-vaccine#resources>.
4. Evidence Table for COVID-19 Vaccines Allocation in Phases 1b and 1c of the Vaccination Program. <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19/evidence-table-phase-1b-1c.html>
5. CDC Phased Allocations slides: <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-11/COVID-04-Dooling.pdf>
6. CDC MMWR The Advisory Committee on Immunization Practices' Updated Interim Recommendation for Allocation of COVID-19 Vaccine — United States, December 2020. Available at: <https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm695152e2-H.pdf>

FACT SHEET FOR RECIPIENTS AND CAREGIVERS
EMERGENCY USE AUTHORIZATION (EUA) OF
THE MODERNA COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019
(COVID-19) IN INDIVIDUALS 18 YEARS OF AGE AND OLDER

You are being offered the Moderna COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Moderna COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19.

The Moderna COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Moderna COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Moderna COVID-19 Vaccine.

The Moderna COVID-19 Vaccine is administered as a 2-dose series, 1 month apart, into the muscle.

The Moderna COVID-19 Vaccine may not protect everyone.

This Fact Sheet may have been updated. For the most recent Fact Sheet, please visit www.modernatx.com/covid19vaccine-eua.

WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE

WHAT IS COVID-19?

COVID-19 is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

WHAT IS THE MODERNA COVID-19 VACCINE?

The Moderna COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19.

The FDA has authorized the emergency use of the Moderna COVID-19 Vaccine to prevent COVID-19 in individuals 18 years of age and older under an Emergency Use Authorization (EUA).

For more information on EUA, see the “**What is an Emergency Use Authorization (EUA)?**” section at the end of this Fact Sheet.

WHAT SHOULD YOU MENTION TO YOUR VACCINATION PROVIDER BEFORE YOU GET THE MODERNA COVID-19 VACCINE?

Tell your vaccination provider about all of your medical conditions, including if you:

- have any allergies
- have a fever
- have a bleeding disorder or are on a blood thinner
- are immunocompromised or are on a medicine that affects your immune system
- are pregnant or plan to become pregnant
- are breastfeeding
- have received another COVID-19 vaccine

WHO SHOULD GET THE MODERNA COVID-19 VACCINE?

FDA has authorized the emergency use of the Moderna COVID-19 Vaccine in individuals 18 years of age and older.

WHO SHOULD NOT GET THE MODERNA COVID-19 VACCINE?

You should not get the Moderna COVID-19 Vaccine if you:

- had a severe allergic reaction after a previous dose of this vaccine
- had a severe allergic reaction to any ingredient of this vaccine

WHAT ARE THE INGREDIENTS IN THE MODERNA COVID-19 VACCINE?

The Moderna COVID-19 Vaccine contains the following ingredients: messenger ribonucleic acid (mRNA), lipids (SM-102, polyethylene glycol [PEG] 2000 dimyristoyl glycerol [DMG], cholesterol, and 1,2-distearoyl-sn-glycero-3-phosphocholine [DSPC]), tromethamine, tromethamine hydrochloride, acetic acid, sodium acetate, and sucrose.

HOW IS THE MODERNA COVID-19 VACCINE GIVEN?

The Moderna COVID-19 Vaccine will be given to you as an injection into the muscle.

The Moderna COVID-19 Vaccine vaccination series is 2 doses given 1 month apart.

If you receive one dose of the Moderna COVID-19 Vaccine, you should receive a second dose of the same vaccine 1 month later to complete the vaccination series.

HAS THE MODERNA COVID-19 VACCINE BEEN USED BEFORE?

The Moderna COVID-19 Vaccine is an unapproved vaccine. In clinical trials, approximately 15,400 individuals 18 years of age and older have received at least 1 dose of the Moderna COVID-19 Vaccine.

WHAT ARE THE BENEFITS OF THE MODERNA COVID-19 VACCINE?

In an ongoing clinical trial, the Moderna COVID-19 Vaccine has been shown to prevent COVID-19 following 2 doses given 1 month apart. The duration of protection against COVID-19 is currently unknown.

WHAT ARE THE RISKS OF THE MODERNA COVID-19 VACCINE?

Side effects that have been reported with the Moderna COVID-19 Vaccine include:

- Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
- General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

There is a remote chance that the Moderna COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Moderna COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. Signs of a severe allergic reaction can include:

- Difficulty breathing
- Swelling of your face and throat
- A fast heartbeat
- A bad rash all over your body
- Dizziness and weakness

These may not be all the possible side effects of the Moderna COVID-19 Vaccine. Serious and unexpected side effects may occur. The Moderna COVID-19 Vaccine is still being studied in clinical trials.

WHAT SHOULD I DO ABOUT SIDE EFFECTS?

If you experience a severe allergic reaction, call 9-1-1, or go to the nearest hospital.

Call the vaccination provider or your healthcare provider if you have any side effects that bother you or do not go away.

Report vaccine side effects to **FDA/CDC Vaccine Adverse Event Reporting System (VAERS)**. The VAERS toll-free number is 1-800-822-7967 or report online to <https://vaers.hhs.gov/reportevent.html>. Please include “Moderna COVID-19 Vaccine EUA” in the first line of box #18 of the report form.

In addition, you can report side effects to ModernaTX, Inc. at 1-866-MODERNA (1-866-663-3762).

You may also be given an option to enroll in **v-safe**. **V-safe** is a new voluntary smartphone-based tool that uses text messaging and web surveys to check in with people who have been vaccinated to identify potential side effects after COVID-19 vaccination. **V-safe** asks questions that help CDC monitor the safety of COVID-19 vaccines. **V-safe** also provides second-dose reminders if needed and live telephone follow-up by CDC if participants report a significant health impact following COVID-19 vaccination. For more information on how to sign up, visit: www.cdc.gov/vsafe.

WHAT IF I DECIDE NOT TO GET THE MODERNA COVID-19 VACCINE?

It is your choice to receive or not receive the Moderna COVID-19 Vaccine. Should you decide not to receive it, it will not change your standard medical care.

ARE OTHER CHOICES AVAILABLE FOR PREVENTING COVID-19 BESIDES MODERNA COVID-19 VACCINE?

Currently, there is no FDA-approved alternative vaccine available for prevention of COVID-19. Other vaccines to prevent COVID-19 may be available under Emergency Use Authorization.

CAN I RECEIVE THE MODERNA COVID-19 VACCINE WITH OTHER VACCINES?

There is no information on the use of the Moderna COVID-19 Vaccine with other vaccines.

WHAT IF I AM PREGNANT OR BREASTFEEDING?

If you are pregnant or breastfeeding, discuss your options with your healthcare provider.

WILL THE MODERNA COVID-19 VACCINE GIVE ME COVID-19?

No. The Moderna COVID-19 Vaccine does not contain SARS-CoV-2 and cannot give you COVID-19.


KEEP YOUR VACCINATION CARD

When you receive your first dose, you will get a vaccination card to show you when to return for your second dose of the Moderna COVID-19 Vaccine. Remember to bring your card when you return.

ADDITIONAL INFORMATION

If you have questions, visit the website or call the telephone number provided below.

To access the most recent Fact Sheets, please scan the QR code provided below.

Moderna COVID-19 Vaccine website	Telephone number
www.modernatx.com/covid19vaccine-eua 	1-866-MODERNA (1-866-663-3762)

HOW CAN I LEARN MORE?

- Ask the vaccination provider
- Visit CDC at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Visit FDA at <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>
- Contact your state or local public health department

WHERE WILL MY VACCINATION INFORMATION BE RECORDED?

The vaccination provider may include your vaccination information in your state/local jurisdiction's Immunization Information System (IIS) or other designated system. This will ensure that you receive the same vaccine when you return for the second dose. For more information about IISs, visit: <https://www.cdc.gov/vaccines/programs/iis/about.html>.

WHAT IS THE COUNTERMEASURES INJURY COMPENSATION PROGRAM?

The Countermeasures Injury Compensation Program (CICP) is a federal program that may help pay for costs of medical care and other specific expenses of certain people who have been seriously injured by certain medicines or vaccines, including this vaccine. Generally, a claim must be submitted to the CICP within one (1) year from the date of receiving the vaccine. To learn more about this program, visit www.hrsa.gov/cicp/ or call 1-855-266-2427.

WHAT IS AN EMERGENCY USE AUTHORIZATION (EUA)?

The United States FDA has made the Moderna COVID-19 Vaccine available under an emergency access mechanism called an EUA. The EUA is supported by a Secretary of Health and Human Services (HHS) declaration that circumstances exist to justify the emergency use of drugs and biological products during the COVID-19 pandemic.

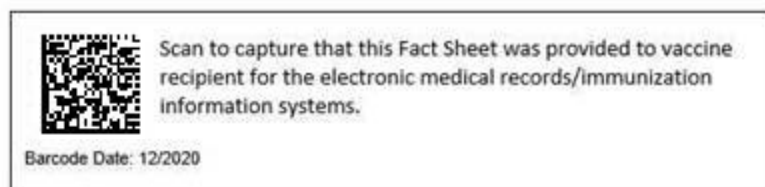
The Moderna COVID-19 Vaccine has not undergone the same type of review as an FDA-approved or cleared product. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, and available alternatives. In addition, the FDA decision is based on the totality of the scientific evidence available showing that the product may be effective to prevent COVID-19 during the COVID-19 pandemic and that the known and potential benefits of the product outweigh the known and potential risks of the product. All of these criteria must be met to allow for the product to be used during the COVID-19 pandemic.

The EUA for the Moderna COVID-19 Vaccine is in effect for the duration of the COVID-19 EUA declaration justifying emergency use of these products, unless terminated or revoked (after which the products may no longer be used).

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Patent(s): www.modernatx.com/patents

Revised: 12/2020



V-SAFE GUIDE

V-Safe is a smart-phone based monitoring program created by the CDC for after vaccination health checks.

V-Safe follows a self-registration process that allows vaccine recipients to report any side-effects or health impact events following the COVID-19 vaccination.

The mobile app program is monitored by the CDC and initiates follow up text messages checking in with the vaccine recipient daily for the first week, weekly through 6 weeks, then at 3, 6, and 12 months.

*Note the text messages will reset upon receipt of 2nd dose.

CDC is urging all providers to encourage vaccine recipients to participate in V-Safe.

How to enroll in V-SAFE

1. Using a smartphone, type vsafe.cdc.gov into the phone's browser.
-OR-
Aim your smartphones camera or QR code reader at the code to the left:
2. Read the instructions and complete the registration, and enter the verification code texted to your smartphone.
3. Enter your COVID-19 vaccination information and click submit.

**Aim your smartphone's
camera at this code**



Please refer to the V-SAFE handout for additional details. For support with V-Safe registration or troubleshooting, please contact CDC at 800-CDC-INFO (800-232-4636) or visit www.cdc.gov/vsafe

Getting the Moderna COVID-19 Vaccine

What to Expect During & After Your Injection

EMERGENCY USE AUTHORIZATION

The Moderna COVID-19 Vaccine has not been approved or licensed by the US Food and Drug Administration (FDA), but has been authorized for emergency use by FDA, under an Emergency Use Authorization (EUA), to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 18 years of age and older. There is no FDA-approved vaccine to prevent COVID-19.

The EUA for the Moderna COVID-19 Vaccine is in effect for the duration of the COVID-19 EUA declaration justifying emergency use of the vaccine, unless terminated or revoked (after which the vaccine may no longer be used).

Before you get the vaccine

Tell your vaccination provider if you:



- Have any allergies
- Have a fever
- Have a bleeding disorder or take blood thinners
- Are immunocompromised or are on a medicine that affects your immune system
- Are pregnant, plan to become pregnant, or breastfeeding
- Have received another COVID-19 vaccine

For more information, visit [modernatx.com/covid19vaccine-eua/recipients/](https://www.modernatx.com/covid19vaccine-eua/recipients/)

After you get the vaccine

Side effects that have been reported with the Moderna COVID-19 Vaccine include:

- Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
- General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

Talk to your vaccination provider if you have side effects that bother you or do not go away.

If you think you're having an allergic reaction to the vaccine, call 9-1-1.

Signs of a severe allergic reaction can include: Difficulty breathing, swelling of your face and throat, a fast heartbeat, a bad rash all over your body, dizziness and weakness.

A second dose of the Moderna COVID-19 Vaccine is REQUIRED

Complete vaccination **1 month** after your first dose of the Moderna COVID-19 Vaccine.

To help remember that appointment:

Immediately schedule your next appointment **after the first dose of your vaccine**



Ask for a **2nd Dose Reminder Card** to display prominently at home



Set a reminder on your mobile phone or calendar



For more information, talk to your vaccination provider or call Moderna Customer Care at: 1-866-MODERNA (1-866-663-3762)

What is the Moderna COVID-19 Vaccine?

The Moderna COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19. The FDA has authorized the emergency use of the Moderna COVID-19 Vaccine to prevent COVID-19 in individuals 18 years of age and older under an Emergency Use Authorization (EUA).

Please see next page for additional Important Safety Information and Fact Sheet for Recipients and Caregivers beginning on page 3 of this document.

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IMPORTANT SAFETY INFORMATION

What should you mention to your vaccination provider before you get the Moderna COVID-19 Vaccine?

Tell your vaccination provider about all of your medical conditions, including if you:

- have any allergies
- have a fever
- have a bleeding disorder or are on a blood thinner
- are immunocompromised or are on a medicine that affects your immune system
- are pregnant or plan to become pregnant
- are breastfeeding
- have received another COVID-19 vaccine

Who should not get the Moderna COVID-19 Vaccine?

You should not get the Moderna COVID-19 Vaccine if you:

- had a severe allergic reaction after a previous dose of this vaccine
- had a severe allergic reaction to any ingredient of this vaccine

How is the Moderna COVID-19 Vaccine given?

The Moderna COVID-19 Vaccine will be given to you as an injection into the muscle. The Moderna COVID-19 Vaccine vaccination series is 2 doses given 1 month apart. If you receive one dose of the Moderna COVID-19 Vaccine, you should receive a second dose of the same vaccine 1 month later to complete the vaccination series.

What are the risks of the Moderna COVID-19 Vaccine?

Side effects that have been reported with the Moderna COVID-19 Vaccine include:

- Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
- General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

There is a remote chance that the Moderna COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Moderna COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. Signs of a severe allergic reaction can include:

- Difficulty breathing
- Swelling of your face and throat
- A fast heartbeat
- A bad rash all over your body
- Dizziness and weakness

These may not be all the possible side effects of the Moderna COVID-19 Vaccine. Serious and unexpected side effects may occur. The Moderna COVID-19 Vaccine is still being studied in clinical trials.

What should I do about side effects?

If you experience a severe allergic reaction, call 9-1-1, or go to the nearest hospital.

Call the vaccination provider or your healthcare provider if you have any side effects that bother you or do not go away.

Report vaccine side effects to **FDA/CDC Vaccine Adverse Event Reporting System (VAERS)**. The VAERS toll-free number is 1-800-822-7967 or report online to <https://vaers.hhs.gov/reportevent.html>. Please include "Moderna COVID-19 Vaccine EUA" in the first line of box #18 of the report form. In addition, you can also report side effects to ModernaTX, Inc. at 1-866-MODERNA (1-866-663-3762).

See Fact Sheet for Recipients and Caregivers beginning on page 3 of this document.



**FACT SHEET FOR RECIPIENTS AND CAREGIVERS
EMERGENCY USE AUTHORIZATION (EUA) OF
THE MODERNA COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019
(COVID-19) IN INDIVIDUALS 18 YEARS OF AGE AND OLDER**

You are being offered the Moderna COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Moderna COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19.

The Moderna COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Moderna COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Moderna COVID-19 Vaccine.

The Moderna COVID-19 Vaccine is administered as a 2-dose series, 1 month apart, into the muscle.

The Moderna COVID-19 Vaccine may not protect everyone.

This Fact Sheet may have been updated. For the most recent Fact Sheet, please visit www.modernatx.com/covid19vaccine-eua.

WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE

WHAT IS COVID-19?

COVID-19 is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

WHAT IS THE MODERNA COVID-19 VACCINE?

The Moderna COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19.

The FDA has authorized the emergency use of the Moderna COVID-19 Vaccine to prevent COVID-19 in individuals 18 years of age and older under an Emergency Use Authorization (EUA).

For more information on EUA, see the “**What is an Emergency Use Authorization (EUA)?**” section at the end of this Fact Sheet.

WHAT SHOULD YOU MENTION TO YOUR VACCINATION PROVIDER BEFORE YOU GET THE MODERNA COVID-19 VACCINE?

Tell your vaccination provider about all of your medical conditions, including if you:

- have any allergies
- have a fever
- have a bleeding disorder or are on a blood thinner
- are immunocompromised or are on a medicine that affects your immune system
- are pregnant or plan to become pregnant
- are breastfeeding
- have received another COVID-19 vaccine

WHO SHOULD GET THE MODERNA COVID-19 VACCINE?

FDA has authorized the emergency use of the Moderna COVID-19 Vaccine in individuals 18 years of age and older.

WHO SHOULD NOT GET THE MODERNA COVID-19 VACCINE?

You should not get the Moderna COVID-19 Vaccine if you:

- had a severe allergic reaction after a previous dose of this vaccine
- had a severe allergic reaction to any ingredient of this vaccine

WHAT ARE THE INGREDIENTS IN THE MODERNA COVID-19 VACCINE?

The Moderna COVID-19 Vaccine contains the following ingredients: messenger ribonucleic acid (mRNA), lipids (SM-102, polyethylene glycol [PEG] 2000 dimyristoyl glycerol [DMG], cholesterol, and 1,2-distearoyl-sn-glycero-3-phosphocholine [DSPC]), tromethamine, tromethamine hydrochloride, acetic acid, sodium acetate, and sucrose.

HOW IS THE MODERNA COVID-19 VACCINE GIVEN?

The Moderna COVID-19 Vaccine will be given to you as an injection into the muscle.

The Moderna COVID-19 Vaccine vaccination series is 2 doses given 1 month apart.

If you receive one dose of the Moderna COVID-19 Vaccine, you should receive a second dose of the same vaccine 1 month later to complete the vaccination series.

HAS THE MODERNA COVID-19 VACCINE BEEN USED BEFORE?

The Moderna COVID-19 Vaccine is an unapproved vaccine. In clinical trials, approximately 15,400 individuals 18 years of age and older have received at least 1 dose of the Moderna COVID-19 Vaccine.

WHAT ARE THE BENEFITS OF THE MODERNA COVID-19 VACCINE?

In an ongoing clinical trial, the Moderna COVID-19 Vaccine has been shown to prevent COVID-19 following 2 doses given 1 month apart. The duration of protection against COVID-19 is currently unknown.

WHAT ARE THE RISKS OF THE MODERNA COVID-19 VACCINE?

Side effects that have been reported with the Moderna COVID-19 Vaccine include:

- Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
- General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

There is a remote chance that the Moderna COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Moderna COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. Signs of a severe allergic reaction can include:

- Difficulty breathing
- Swelling of your face and throat
- A fast heartbeat
- A bad rash all over your body
- Dizziness and weakness

These may not be all the possible side effects of the Moderna COVID-19 Vaccine. Serious and unexpected side effects may occur. The Moderna COVID-19 Vaccine is still being studied in clinical trials.

WHAT SHOULD I DO ABOUT SIDE EFFECTS?

If you experience a severe allergic reaction, call 9-1-1, or go to the nearest hospital.

Call the vaccination provider or your healthcare provider if you have any side effects that bother you or do not go away.

Report vaccine side effects to **FDA/CDC Vaccine Adverse Event Reporting System (VAERS)**. The VAERS toll-free number is 1-800-822-7967 or report online to <https://vaers.hhs.gov/reportevent.html>. Please include “Moderna COVID-19 Vaccine EUA” in the first line of box #18 of the report form.

In addition, you can report side effects to ModernaTX, Inc. at 1-866-MODERNA (1-866-663-3762).

You may also be given an option to enroll in **v-safe**. **V-safe** is a new voluntary smartphone-based tool that uses text messaging and web surveys to check in with people who have been vaccinated to identify potential side effects after COVID-19 vaccination. **V-safe** asks questions that help CDC monitor the safety of COVID-19 vaccines. **V-safe** also provides second-dose reminders if needed and live telephone follow-up by CDC if participants report a significant health impact following COVID-19 vaccination. For more information on how to sign up, visit: www.cdc.gov/vsafe.

WHAT IF I DECIDE NOT TO GET THE MODERNA COVID-19 VACCINE?

It is your choice to receive or not receive the Moderna COVID-19 Vaccine. Should you decide not to receive it, it will not change your standard medical care.

ARE OTHER CHOICES AVAILABLE FOR PREVENTING COVID-19 BESIDES MODERNA COVID-19 VACCINE?

Currently, there is no FDA-approved alternative vaccine available for prevention of COVID-19. Other vaccines to prevent COVID-19 may be available under Emergency Use Authorization.

CAN I RECEIVE THE MODERNA COVID-19 VACCINE WITH OTHER VACCINES?

There is no information on the use of the Moderna COVID-19 Vaccine with other vaccines.

WHAT IF I AM PREGNANT OR BREASTFEEDING?

If you are pregnant or breastfeeding, discuss your options with your healthcare provider.

WILL THE MODERNA COVID-19 VACCINE GIVE ME COVID-19?

No. The Moderna COVID-19 Vaccine does not contain SARS-CoV-2 and cannot give you COVID-19.


KEEP YOUR VACCINATION CARD

When you receive your first dose, you will get a vaccination card to show you when to return for your second dose of the Moderna COVID-19 Vaccine. Remember to bring your card when you return.

ADDITIONAL INFORMATION

If you have questions, visit the website or call the telephone number provided below.

To access the most recent Fact Sheets, please scan the QR code provided below.

Moderna COVID-19 Vaccine website	Telephone number
www.modernatx.com/covid19vaccine-eua 	1-866-MODERNA (1-866-663-3762)

HOW CAN I LEARN MORE?

- Ask the vaccination provider
- Visit CDC at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Visit FDA at <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>
- Contact your state or local public health department

WHERE WILL MY VACCINATION INFORMATION BE RECORDED?

The vaccination provider may include your vaccination information in your state/local jurisdiction's Immunization Information System (IIS) or other designated system. This will ensure that you receive the same vaccine when you return for the second dose. For more information about IISs, visit: <https://www.cdc.gov/vaccines/programs/iis/about.html>.

WHAT IS THE COUNTERMEASURES INJURY COMPENSATION PROGRAM?

The Countermeasures Injury Compensation Program (CICP) is a federal program that may help pay for costs of medical care and other specific expenses of certain people who have been seriously injured by certain medicines or vaccines, including this vaccine. Generally, a claim must be submitted to the CICP within one (1) year from the date of receiving the vaccine. To learn more about this program, visit www.hrsa.gov/cicp/ or call 1-855-266-2427.

WHAT IS AN EMERGENCY USE AUTHORIZATION (EUA)?

The United States FDA has made the Moderna COVID-19 Vaccine available under an emergency access mechanism called an EUA. The EUA is supported by a Secretary of Health and Human Services (HHS) declaration that circumstances exist to justify the emergency use of drugs and biological products during the COVID-19 pandemic.

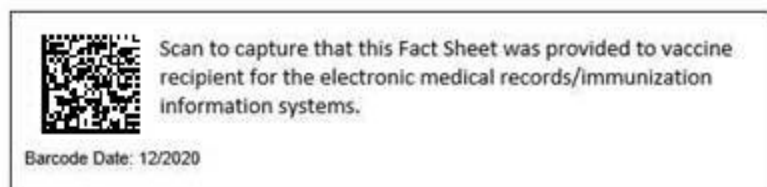
The Moderna COVID-19 Vaccine has not undergone the same type of review as an FDA-approved or cleared product. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, and available alternatives. In addition, the FDA decision is based on the totality of the scientific evidence available showing that the product may be effective to prevent COVID-19 during the COVID-19 pandemic and that the known and potential benefits of the product outweigh the known and potential risks of the product. All of these criteria must be met to allow for the product to be used during the COVID-19 pandemic.

The EUA for the Moderna COVID-19 Vaccine is in effect for the duration of the COVID-19 EUA declaration justifying emergency use of these products, unless terminated or revoked (after which the products may no longer be used).

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Patent(s): www.modernatx.com/patents

Revised: 12/2020



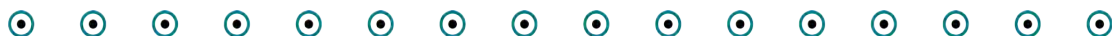


PUBLIC SERVICE ANNOUNCEMENT

The 2020/2021 Bering Sea Snow Crab fishery is upon us. In order to have a safe and productive fishery this year, we need community members and essential workers that are NOT participating in the fishery to follow the guidelines below:

- The Trident Seafoods plant on Saint Paul Island will be a “**closed campus**” beginning November 20, 2020 until further notification. Non-Trident employees are not allowed in the Trident plant, houses 106 and 107, Annex, or A-wing of King Eider hotel.
- The general public shall stay at least 20 feet or more away from the Trident housing units located at: the Annex, Houses 106 and 107, and A-wing of the King Eider Hotel.
- All persons not participating in the 2020/2021 Bering Snow Crab fishery on Saint Paul Island, Alaska will not be allowed in the harbor area, on or near the docks, the Trident plant, or other identified areas until the end of the season.
- The haul road and access down to the docks will be restricted to only authorized personnel. The City will maintain a list of authorized personnel.
- Trident will have security personnel in the harbor area to monitor their employees and access to the plant and docks. Please follow the instructions provided by Trident security personnel.
- Saint Paul Island resident shall not invite Trident workers or fishermen participating in the fishery into their home or go onto a fishing vessel for any reason.
- The incoming and outgoing airline passengers may only use the restroom facilities in the B-Wing at Saint Paul Island airport terminal on their day of travel. No one is to enter the A-wing of this facility.

The COVID-19 pandemic is still with us. In order to keep everyone safe!





December 16, 2020

Bob Barndt, District Operations Manager
Lynden
barndt@lynden.com

Re: Improved UPS Service

Dear Mr. Barndt:

On behalf of the City of Saint Paul and the Aleut Community of Saint Paul Island, we are writing to express significant concerns about the degradation of parcel delivery activity provided through United Parcel Service, Inc. (UPS). We continue to experience problems with timely delivery and safe handling of packages on Saint Paul Island.

It is our understanding that ACE Air Cargo holds the contract to deliver UPS to Saint Paul Island and that ACE contracts with APUN to offload the cargo planes and deliver, freight, mail, and UPS to our community.

A range of problems have been encountered over the last several months. The list includes lengthy delays in delivery (including after packages arrive at the airport), and packages exposed to the elements at the airport resulting in delivery of wet and damaged packages (including due to exposure to snow activity). ACE Air Cargo appears to give priority to all USPS mail resulting in additional delays in deliver of UPS parcels. Recently, APUN's delivery vehicle was observed parked at the State airport apron with the rear of the vehicle open and packages inside unsecured and open to weather elements.

We respectfully request your immediate attention to address our concerns. Options we recommend considering is whether better service can be provided using a different company to offload cargo planes or if the new services provided by Ravn Alaska since its return to providing scheduled air carrier services to Saint Paul Island can carry UPS.

Thank you for your consideration of these concerns. Please let us know if you want to meet virtually to discuss this matter further.

Sincerely,

Jacob Mercurief
Mayor
City of Saint Paul

Amos Philemonoff
President
Aleut Community of Saint Paul Island

Summary of Legislation: Public Employee Retirement System (PERS)

Summary

The Public Employee Retirement System (PERS) unfunded liability is financed through a combination of contributions from PERS employers of 22 percent of payroll and a state assistance payment for the remaining liability made by the State of Alaska. The proposed change to the PERS statutes will impact the State of Alaska as a PERS employer by lifting the 22 percent cap on the payroll contribution for the State of Alaska only. All other PERS and all TRS employers' rates will remain unchanged.

This will shift the state's share of the unfunded liability from the annual state assistance payment, which is typically funded 100% with unrestricted general fund (UGF) revenue, to agency payroll, where it can be spread across all fund sources. This change is anticipated to save an estimated \$43 million in unrestricted general funds each year by shifting these costs to other fund sources; mostly federal.

Nothing in this proposal will change the retirement system, costs to other participating employers, or benefits to plan members.

What is the problem?

Alaska has two main public employee retirement systems: the Public Employee Retirement System (PERS), with 142 current participating public employers, and the Teachers Retirement System (TRS), with 56 participating employers.

In the early 2000s policymakers became aware that both systems were significantly underfunded as a result of market losses, actuarial errors, and accelerating health costs. Significant legislative reforms were enacted to change the way the pension systems operated and were financed.

The first, to control the increasing liability, was the elimination of the defined benefit plan and creation of a defined contribution plan for new public employees who started service after June 30, 2006.

The legislature also created the Alaska Retirement Management (ARM) Board to manage the retirement systems replacing the separate boards for each system. The ARM Board was tasked with setting employer contribution rates for PERS and TRS normal costs as well as past service liability. Initial rates proposed by the ARM Board were dramatic increases for employers – averaging 40 percent of payroll for PERS and 54 percent of payroll for TRS. Each employer was assessed a different rate based on actuarial assumptions and plan experience and for some the rate increased to more than 100 percent of their total payroll.

In 2007 and 2008, the legislature established a uniform rate of 22 percent of payroll for PERS employers and 12.56 percent for TRS employers and required the state fund the difference between the employer contribution and the full liability. This state obligation, often referred to as the state assistance or “on-behalf” payment, is calculated each year by the state's actuaries based on PERS/TRS asset valuations and forecasted liabilities. Between fiscal years 2006 and 2022, the state will have paid more than \$8 billion in state assistance payments to the PERS and TRS systems, including a one-time lump sum deposit of \$3 billion appropriated for fiscal year 2015.

The uniform cap on payroll contributions below the actuarial rate provides budget certainty for PERS and TRS employers; however, the 22 percent cap on state employee payroll limits the state's ability to

incorporate the full cost within programs that are cost-shared by the federal government or funded by non-UGF sources. This under collection from non-UGF sources amounts to approximately \$43 million annually.

How do we fix it?

Raising the employer contribution to the actuarial rate for all PERS and TRS participating employers would place a financial burden on plan participants. Rather than apply this change to all participants this legislation proposes lifting the cap for the State of Alaska only. By limiting the change only to the State of Alaska the stable rate is retained for other PERS and TRS employers. The legislation will increase the percentage of payroll for the State of Alaska from a fixed 22 percent to an annually actuarially determined rate, calculated at 30.11 percent in fiscal year 2022.

This change will be seen in the state budget as a reduction in the amount of the state assistance payment of close to \$94 million UGF accompanied by an increase to payroll costs in state agencies by the same amount spread across multiple funding sources.

While this may seem like a net zero change, the shift allows the state to spread the cost among all fund sources instead of the unrestricted general funds used to make the state assistance payment. State employee payroll is charged across various fund sources depending on program cost allocation plans and an estimated \$43 million will be shifted to federal and other non-UGF fund sources.

The table below shows estimates for the cost increases by fund group for each department as well as the associated reduction in the state assistance payment, which is normally shown under “statewide items” in the OMB and Legislative Finance fiscal summaries. The net reduction in unrestricted general fund spending is roughly \$43 million in fiscal year 2022. These savings are projected to increase slightly each year with inflation and changes in the actuarial projections.

As this change is implemented in the budget, it is likely that some adjustments will be made on a case-by-case basis depending on the viability of various fund sources to absorb the increase. The intention is not to distribute “hollow” authority to agencies, but to capture additional funding where available and accurately reflect the cost of state employee payroll. The Office of Management and Budget will work with agencies to ensure that this cost shift is made appropriately.

FY22 Estimated Budget Impact	UGF	DGF	Other	Fed	Total
Agency Payroll Increase	51,713.5	4,585.2	24,920.7	13,780.6	0.0
State Assistance Payment Reduction	(95,000.0)	0.0	0.0	0.0	0.0
Total Budget Impact	(43,286.5)	4,585.2	24,920.7	13,780.6	0.0

Note: Alaska Marine Highway System payroll is not included in these estimates