



Alaska Native Health Board

THE VOICE OF ALASKA TRIBAL HEALTH SINCE 1968

☎ 907.562.6006 📠 907.563.2001 • 4000 Ambassador Drive, Suite 101 • Anchorage, Alaska 99508 • www.anhb.org

March 26, 2019

The Honorable Cathy Giessel
President of the Alaska Senate
State Capitol Room 111
Juneau AK, 99801

RE: Letter of Support for Senate Bill 44

Dear Senator Giessel,

The Alaska Native Health Board (ANHB) is writing in support of Senate Bill 44.

ANHB was established in 1968 with the purpose of promoting the spiritual, physical, mental, social, and cultural well-being and pride of Alaska Native people. ANHB is the statewide voice on Alaska Native health issues and is the advocacy organization for the Alaska Tribal Health System (ATHS), which is comprised of tribal health programs that serve all of the 229 tribes and over 175,000 Alaska Natives and American Indians (AN/AI) throughout the state. As the statewide tribal health advocacy organization, ANHB assists tribal partners, state and federal agencies with achieving effective communication and consultation with tribes and their tribal health programs.

ANHB supports Senate Bill 44 (SB 44), a bill to allow Physician Assistants (PAs) the ability to administer prescription drugs without a physical (in-person) exam, thusly allowing PAs to deliver services via telemedicine to Alaska's remote communities. Rural communities in Alaska are overwhelmingly the home to our AN/AI population, and the health care in these communities is predominately delivered by Tribal Health Providers.

ANHB welcomes and applauds this expansion of service, and we believe it will help expand access to needed care in the State's designated health care shortage areas. Telemedicine is an invaluable tool for providing healthcare in these small, remote communities. While this bill expands the reforms of Senate Bill 74 to include PAs, it should also include other prescribing provider types, such as Nurse Practitioners, Dentists, and Optometrists. Expanding to include these additional providers will further fulfill the intent of expanding care via telemedicine.

ANHB also advocates for additional changes to AS 08.64.364(b). The Alaska State Legislature should additionally amend AS 08.64.364(b) to change the reference "licensed health care provider" to "licensed or certified health care provider" and delete the term "diagnosis". This change would allow Community Health Aide/Practitioners (CHA/Ps) to assist physicians and practitioners via telemedicine with physical exams for treating patients using medication assisted treatment (MAT). MAT is the use of medications in

ALASKA NATIVE TRIBAL
HEALTH CONSORTIUM

ALEUTIAN PRIBILOF
ISLANDS ASSOCIATION

ARCTIC SLOPE
NATIVE ASSOCIATION

BRISTOL BAY AREA
HEALTH CORPORATION

CHICKALOON VILLAGE
TRADITIONAL COUNCIL

CHUGACHMIUT

COPPER RIVER
NATIVE ASSOCIATION

COUNCIL OF ATHABASCAN
TRIBAL GOVERNMENTS

EASTERN ALEUTIAN TRIBES

KARLUK IRA
TRIBAL COUNCIL

KENAITZE INDIAN TRIBE

KETCHIKAN
INDIAN COMMUNITY

KODIAK AREA
NATIVE ASSOCIATION

MANILAQ ASSOCIATION

METLAKATLA INDIAN
COMMUNITY

MT. SANFORD
TRIBAL CONSORTIUM

NATIVE VILLAGE
OF EKLUTNA

NATIVE VILLAGE OF EYAK

NATIVE VILLAGE
OF TYONEK

NINILCHIK
TRADITIONAL COUNCIL

NORTON SOUND
HEALTH CORPORATION

SELDOVIA VILLAGE TRIBE

SOUTHCENTRAL
FOUNDATION

SOUTHEAST ALASKA REGIONAL
HEALTH CONSORTIUM

TANANA CHIEFS CONFERENCE

YAKUTAT TLINGIT TRIBE

YUKON-KUSKOKWIM
HEALTH CORPORATION

VALDEZ NATIVE TRIBE

combination with counseling and behavioral therapies for the treatment of substance use disorders.¹

Like PAs, CHA/Ps work with a collaborating physician; CHA/Ps however are certified rather than licensed. In Alaska, CHA/Ps are the most common practitioners in the ATHS with their farthest reach in rural communities. There are approximately 550 CHA/Ps that serve 170 rural Alaskan villages. The important role of CHA/Ps in the MAT telemedicine treatment process was recently recognized by the US Drug Enforcement Agency and Indian Health Service.^{2,3} But due to the wording in AS 08.64.364(b), CHA/Ps cannot currently help facilitate telemedicine visits related to controlled substances, limiting the use of MAT via telemedicine for the treatment of substance use disorders in rural Alaska.

We hope that by expanding access to needed treatment options through telemedicine, both through prescribing PAs and CHA/P involvement for MAT treatment of substance use disorders, that Alaska's AN/AI peoples can receive the care they deserve.

If you would like to have further questions or comments on these issues, please contact ANHB at (907) 562-6006 or anhb@anhb.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrew Jimmie", with a stylized flourish at the end.

Andrew Jimmie,
Chairman
Alaska Native Health Board

¹ Substance Abuse and Mental Health Services Administration, *Advisory* (2012). "An Introduction to Extended-Release Injectable Naltrexone for the Treatment of People with Opioid Dependence." Volume 11, Issue 1.

² Drug Enforcement Agency (2018). *Use of Telemedicine While Providing Medication Assisted Treatment (MAT)*. Accessed: <https://www.hhs.gov/opioids/sites/default/files/2018-09/hhs-telemedicine-dea-final-508compliant.pdf>.

³ Indian Health Service (2018). *Indian Health Service Manual*, Chapter 38 – Internet Eligible Controlled Substance Provider Designation. Accessed: <https://www.ihs.gov/ihtm/pc/part-3/chapter-38-internet-eligible-controlled-substance-provider-designation/>.