

Alaska Native Health Board

THE VOICE OF ALASKA TRIBAL HEALTH SINCE 1968

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ALASKA NATIVE TRIBAL
HEALTH CONSORTIUM

ALEUTIAN PRIBILOF
ISLANDS ASSOCIATION

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NATIVE ASSOCIATION

BRISTOL BAY AREA
HEALTH CORPORATION

CHICKALOON VILLAGE
TRADITIONAL COUNCIL

CHUGACHMIUT

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NATIVE ASSOCIATION

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TRIBAL GOVERNMENTS

EASTERN ALEUTIAN TRIBES

KARLUK IRA
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KENAITZE INDIAN TRIBE

KETCHIKAN
INDIAN COMMUNITY

KODIAK AREA
NATIVE ASSOCIATION

MANILAQ ASSOCIATION

METLAKATLA INDIAN
COMMUNITY

MT. SANFORD
TRIBAL CONSORTIUM

NATIVE VILLAGE
OF EKUTNA

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

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YUKON-KUSKOKWIM
HEALTH CORPORATION

VALDEZ NATIVE TRIBE

September 7, 2021

The Honorable Michael Dunleavy
Governor of Alaska
State Capitol, Third Floor
Juneau, AK 99801

RE: Public Health Emergency for Alaska's Health Care System

Dear Governor Dunleavy,

The Alaska Native Health Board¹ is writing to fully support SB 3006 to provide the necessary flexibilities to health care providers as they respond to the current COVID-19 spike driven by the Delta variant. We are in a public health emergency, and we also urge you to use your existing authorities and influence to lead on community level mitigation to address this crisis.

The Alaska health care system is straining under staffing and resourcing shortages as the worst phase of the COVID-19 pandemic has taken hold in Alaska.² The COVID-19 Delta variant is now the most prevalent variant in Alaska, spreading at a serious and significant rate. The Alaska Tribal Health System (ATHS), which forms a crucial part of the Alaska health care system, is feeling the same strain as non-Tribal hospitals, nursing homes, and health clinics. The Alaska Native Medical Center (ANMC) in Anchorage, the heart of tertiary care in the ATHS, has been operating at crisis levels due to staffing shortages and patient acuities resulting from COVID-19. ANMC is the referral hospital for the vast majority of Alaska's rural hospitals, receiving Alaska Native and American Indian patients who need acute levels of care that they cannot receive in their home communities. When ANMC is unable to accept patients, it is a statewide crisis.

Senate Bill 3006 is the quickest way for us to immediately access crucial flexibilities to help relieve clinical staffing shortages. The bill works in the following ways to support providers:

- Section 2 would add a new section to state law that would allow the Director of the Division of Insurance to waive utilization review requirements during a state or federal public health disaster.
- Section 3 would continue to provide for telehealth flexibilities. This provision would allow providers to practice via telehealth without in-person visits. Subsection 3(c) would temporarily allow the Commissioner of Health & Social Services to waive state laws and regulations which would impede the provision of telehealth.

¹ 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 177,000 Alaska Native and American Indian people throughout the state. As the statewide tribal health advocacy organization, ANHB helps Alaska's Tribes and Tribal programs achieve effective consultation and communication with state and federal agencies on matters of concern.

² We are in a crisis situation in our state, due to the significant number of patients with COVID-19 taking up a significant number of hospital beds. There continue to be patients with other diagnoses who need emergency hospital care who are being severely impacted by staffing shortages. Providers are working double shifts and caring for more patients than under normal circumstances. That is not sustainable and will only lead to more burnout and further workforce reductions. Our workforce is also impacted when their children are sick with COVID-19, resulting in parent-providers having to call out to attend to their COVID-positive children. We need community level mitigation efforts to combat where we are now and support our health care community.

- Section 4 would temporarily suspend the requirement for hospitals and nursing facilities to seek background checks through Department of Health & Social Services (DHSS). Though, organizations will still need to attest that a background check process as part of the on-boarding process for health care professionals.

The bill as written would extend certain flexibilities through July 1, 2022. We believe that to better mirror flexibilities already available at the federal level, the bill should be amended to tie the telehealth and background check flexibilities to the end of the Federal Public Health Emergency Declaration.

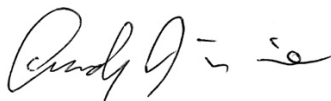
In addition to the flexibilities that SB 3006 and your current statutory authorities, there is still a need for additional personnel to support mitigation and containment activities such as supplies and material management and distribution, additional contact tracers to support DHSS and other organizations undertaking this work, and individuals to help stand up additional testing locations which are needed now. The Federal Emergency Management Agency can support this work, and we urge you to request assistance if you have not already done so. Hospitals also need assistance with patient transfer coordination immediately. Rural patients off the road system are at a significant disadvantage in accessing tertiary level of care without a centralized mechanism to facilitate the transfers in an equitable and timely manner. There must be support to do this time-sensitive work.

Finally, the state **must** provide for additional community level mitigation efforts to help stem this public health emergency. Mitigation measures are needed to gain control of this public health emergency. We must encourage the public to wear masks, get tested and get vaccinated. The State must require masking in schools and in indoor public settings when community spread is at high levels. The public must be encouraged to continue practicing social distancing. Without these measures, this crisis will only get worse.

Again, we urge you and the Legislature to act now to help prevent a complete collapse of the Alaska health care system. We must bring this surge back down as we have done during previous surges, and we know that requires commitment from Alaskans to socially distance, wear masks, get tested, and get vaccinated! As we come out of the Labor Day weekend, without appropriate measures to combat the current surge, the current situation will only continue to decline.

We thank you for your immediate consideration of our requests.

Sincerely,



Andrew Jimmie, Tribally-Elected Leader of the Village of Minto
Chairman
Alaska Native Health Board

CC: The Honorable Adam Crum, DHSS
The Honorable Louise Stutes, Speaker of the Alaska House
The Honorable Peter Micciche, President of the Alaska Senate
The Honorable Mia Costello, Chair of the Senate Labor & Commerce Committee
Jared Kosin, President & CEO, ASHNHA