

From: [Jamez Terry](#)
To: [House Health and Social Services](#); [Senate Health and Social Services](#)
Subject: HB 344 and SB 241
Date: Thursday, February 29, 2024 12:18:16 PM

Dear Legislators:

I am writing in support of HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for the Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes. When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

Thank you for your support.

Sincerely,

Dameron J. Terry

Anchorage, AK



Alaska Food Policy Council

PO BOX 173

Homer, AK 99603

907-756-3930

info@alaskafoodpolicycouncil.org

www.akfoodpolicycouncil.org

March 6, 2024

RE: Letter of Support for HB 344 and SB 241

Dear Dear Members of the Alaska Legislature:

On behalf of the Alaska Food Policy Council (AFPC), I am writing to express our full support of HB 344 and SB 241. We are enthusiastic about the opportunity for the Department of Health to apply for a new 1115 Medicaid waiver for health-related needs. Health care in Alaska should not be a one-size fits all approach, and through partnership and collaboration, we believe the State can improve health outcomes for Alaskans through evidence-based targeted projects.

AFPC's focus is on food security and nutrition access for Alaskans. We strongly support directed efforts to improve wellness and increase food access as a path towards health, and believe this legislation provides an excellent opportunity in this direction. Additionally, we see specific support for this action in the Governor's Alaska Food Security and Independence Task Force Report (2023, page 114):

“Recommended Action: Support the inclusion and education of local foods in prescription produce programs and the Department of Health and the Department of Family and Community Services in the education and messaging around the benefits of local Alaskan foods”

These bills will enable the Department of Health to provide new health-related support services for the Alaskans. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

We support the collaboration that has gone into the development of this legislation, and we strongly encourage the Department of Health to continue in this effort. Tribal consultations and both tribal and non-tribal partnerships are of paramount importance to the success of targeted efforts that would be possible with this 1115 waiver in place.

Thank you for your support.

Sincerely,

Robbi Mixon, Executive Director
Alaska Food Policy Council

February 28, 2024

The Honorable David Wilson
Chair, Senate Health and Social Services Committee
Juneau, AK 99801-1182
senator.david.wilson@akleg.gov
Senate.Health.And.Social.Services@akleg.gov

Re: AHHA supports SB 241

Dear Senator Wilson,

For 70 years, the Alaska Hospital & Healthcare Association (AHHA) has served as a non-profit trade association representing Alaska's hospitals, nursing homes, and other healthcare partners across the continuum of care. AHHA members play an invaluable role, both as community providers and essential employers, in cities, towns, and villages across Alaska.

I am writing to express our strong support for SB 241. This legislation allows the Department of Health to apply for a section 1115 waiver to establish one or more demonstration projects focused on addressing health-related needs and supportive services for one or more groups of Medicaid recipients in one or more specific geographic areas. Health-related needs include social or economic conditions that contribute to an individual's poor health outcomes like nutrition and food security, workforce development, transportation, temporary housing, or case management.

AHHA has been a longtime supporter of efforts to improve the Medicaid program through demonstrations projects because we believe Alaska's healthcare providers are in the best position to lead systems change and innovation from their communities.

Alaska's healthcare system and geography are well-suited for testing and innovation. We have a closed environment that is less impacted by interstate travel than other states. Alaska's population is small, and there are distinct population centers in different healthcare markets. Finally, Alaska has diverse provider types for experimentation throughout the care continuum.

Considering the need for real system change and the fertile environment for innovation, AHHA strongly supports maximizing opportunities for projects through 1115 demonstration waivers. In this instance, integrating support for health-related social needs through a Medicaid waiver could substantially help meet Alaskans' needs and reduce reliance on the highest cost healthcare services.



We appreciate your time and respectfully request your support in advancing this legislation.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Kosin'.

Jared C. Kosin, JD, MBA
President & CEO

February 26, 2024

The Honorable David Wilson
Chair Senate HESS Committee
State Capitol, Room 205
Juneau, AK 99801-1182

(VIA EMAIL)

Re: Senate Bill 241 “An Act relating to medical assistance demonstration projects established the Department of Health.”

Dear Senator Wilson:

I am writing to express our strong support for Senate Bill 241, as introduced by the Governor.

Central Peninsula Hospital (CPH) is a borough-owned, 49-bed, full-service hospital located in Soldotna, Alaska, serving the Central Kenai Peninsula. In 2016, CPH played a significant role in contributing to the development of language in Sec. 45 of Senate Bill 74, which successfully passed in the same year. SB 241 now aims to amend this section, and we believe the proposed changes are complimentary, allowing the Department of Health to build upon the demonstrations authorized in 2016.

As a small and growing hospital, our experience since 2016 has provided valuable insights. Extensive studies, data, and practical experience have revealed the substantial impact of social and economic conditions on health outcomes. This understanding has become integral to our daily operations, emphasizing the need to address these factors in any innovative healthcare solutions.

The passage of SB 241 would not only affirm the lessons we have learned but also empower the Department of Health to apply for 1115 waivers that encompass "health-related needs," a crucial component for comprehensive solutions.

We appreciate your time and sincerely hope for your support in advancing this legislation. Furthermore, we kindly request that you consider scheduling it as soon as possible and expediting its movement through the committee.

Thank you for your attention to this matter.

Sincerely,



Shaun Keef
Chief Executive Officer
Central Peninsula Hospital



Polaris House

907-780-6775

hblecount@polarishouseak.org

434 Willoughby

Juneau, Alaska 99801

March 5, 2024

The Honorable Members of the Senate Standing Committee on Health and Social Services
State Senate
Alaska State Capitol
120 4th Street Rm 3
Juneau, Alaska 99801-1182

CC: The Honorable Senator Jesse Kiehl

Dear Senators:

Polaris House Inc. is pleased to write in support of HB 344 and SB 241. Polaris House, located in Juneau, Alaska, serves adults who are living with a serious mental illness or injury and is an environment of mutual support dedicated to the development of the self-confidence necessary to live, learn and work within a community of the member's choice. The services provided via the 1115 waiver are critical to a majority of the members of our organization.

These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes¹. When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

Thank you for your support.
Sincerely,

Hazel Lecount,
Polaris House
Executive Director

¹ U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022): <https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>



3/1/2024

Dear Committee Leadership:

The Anchorage Coalition to End Homelessness (ACEH) is pleased to write a letter of support for HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes¹. When an individual is not able to meet their basic needs (e.g., stable housing and food), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating because of their unmet health-related needs, such as housing and food.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improve health outcomes, and drive down healthcare costs.

This legislation matters to ACEH because those experiencing homelessness have more physical health-related issues than those who are housed. Often the needs include not only additional medical attention, but also increased need of behavioral and mental health supports to obtain and maintain sustainable housing. Access to any Medicaid-eligible health or behavioral health service is much more effective while housed than in a shelter or an encampment. Additionally, coupling housing and any health-related intervention is much more likely to result in faster housing placements and decreased returns to homelessness. The passage of this legislation will have a direct, positive impact on the outcomes of our most vulnerable community members.

Thank you for your support, and we remain available for any questions or follow-ups.

Sincerely,

A handwritten signature in black ink, appearing to read "Meg Zaletel".

Meg Zaletel
Executive Director

A handwritten signature in black ink, appearing to read "DORUP".

Dakota Orm
Healthcare Integration Director

¹ U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022):
<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>
3427 E Tudor Road, Suite A, Anchorage, Ak 99507
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Member of the National League of Cities and the National Association of Counties

February 29, 2024

The Honorable David Wilson, Chair
The Honorable James Kaufman, Vice Chair
House Health & Social Services Committee

RE: HB 344 and SB 241

Dear Chair Wilson and Vice Chair Kaufman:

The Alaska Municipal League is pleased to write in support of HB 344 and SB 241, which will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for Alaskans.

Alaska faces some of the biggest public health challenges in the nation, which impacts almost all state department operations and budgets, costs the State of Alaska millions of dollars every year, and damages the state's economy by limiting productive contributions that healthier citizens could have made.

Many local governments are already leading local implementation of behavioral health interventions and are increasingly providing social services to respond to the needs of their residents. However, communities look to State leadership and investment to address system-wide public health needs, to ensure a stronger and more coordinated continuum of services that bridges the needs and complements investments at the local level.

HB 344 and SB 241 will give the Department of Health a powerful tool to provide statewide leadership that will improve Alaskans' health outcomes and reduce costs to the State and to local governments.

Sincerely,

Nils Andreassen
Executive Director



February 28, 2024

Senator David Wilson
Chair, Senate Health and Social Services Committee
State Capitol Room 121
Juneau, AK 99801

Re: ANTHC Support of Senate Bill 241

Chair Wilson,

On behalf of the Alaska Native Tribal Health Consortium (ANTHC), I write in support of Senate Bill (SB) 241, a bill to establish demonstration projects to address health related needs and supportive services.

ANTHC is a statewide tribal health organization serving all 229 tribes and all Alaska Native and American Indian (AN/AI) people in Alaska. ANTHC provides a wide range of statewide public health, community health, environmental health, and other programs and services for Alaska Native people and their communities. ANTHC and Southcentral Foundation operate programs at the Alaska Native Medical Center (ANMC), the statewide tertiary care hospital for all AN/AI people in Alaska, under the terms of Public Law 105-83.

ANTHC supports SB 241 because it clarifies existing authorities under Alaska Statute 47.07.036 for the Department of Health (DOH) to establish a section 1115 waiver for Health Related Social Needs (HRSN) services. Alaska is a unique state, and demonstration projects are an opportunity to pivot away from a one-size-fits-all approach to health care. ANTHC encourages DOH to pursue HRSN coverage that provides the opportunity for regional solutions that meet the specific needs of the communities served by this demonstration project. In particular, a HRSN project should include opportunities to build and expand unique tribal programs.

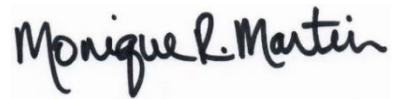
To expand on the February 20, 2024 DOH presentation to House Finance, the relationship between complex comorbidity illness and Medicaid spending could be ameliorated through one of the HRSN benefits – case management. Tribal Health stands ready to explore a HRSN waiver that promotes targeted case management services to individuals with complex chronic health conditions.

Reform developed at the local level, through provider driven planning and input, leverages on the ground expertise. We recommend that DOH consult with and lean on Tribal partners and non-tribal regional providers for data informed innovation.

Alaska Native Tribal Health Consortium
4000 Ambassador Drive, Anchorage, Alaska 99508
Main: (907) 729-1900 | Fax: (907) 729-1901 | anthc.org

Thank you for the opportunity to provide comment. Please do not hesitate to contact me at mmartin@anthc.org or 907-365-9334 with any questions or if additional information can be provided.

Sincerely,

A handwritten signature in black ink that reads "Monique R. Martin". The signature is written in a cursive, flowing style.

Monique R. Martin, Vice President
Intergovernmental Affairs



P.O. Box 100620
Anchorage, AK 99510-0620

March 5, 2024

Dear Esteemed Legislators:

Covenant House Alaska is pleased to write in support of HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes¹. When people are not able to meet their basic needs, their health is likely to deteriorate, often resulting in emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

Covenant House serves some of the most vulnerable young people in our community. We primarily serve youth experiencing homelessness and human trafficking, who too often have unmet health needs, including acute behavioral health issues. This bill would bring a critical resource to Alaska that would address these needs and help our next generation become thriving members of our community.

Sincerely,

Alison E. Kear
Chief Executive Officer
akear@covenanthouseak.org

¹ U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022):
<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>
<https://covenanthouseak.org> Covenant House Alaska is a registered 501(c)3 nonprofit organization.
907-272-1255 EIN: 13-3419755



March 1, 2024

Dear Senators:

Cook Inlet Housing Authority (CIHA) is pleased to write in support of HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes¹. When an individual is not able to meet their basic needs such as stable housing, food and nutrition, or access to transportation and employment, their health is likely to deteriorate. In some cases, to the point of increased and preventable emergency room visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating because of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

This legislation matters to CIHA, as most of our new residents in 2023 were people exiting homelessness. Our experience with this vulnerable group is that their outcomes and long-term stability correlate with the degree to which they can access clinical and social service supports. Addressing the underlying needs of vulnerable households also improves outcomes for entire communities. People in crisis sometimes negatively impact their neighbors or harm the physical condition of their surroundings, which reduces the amount of housing available to Alaskan families. Our work to create safe, stable communities is more productive when our residents are stabilized, mentally and physically, through support offered by clinical providers and social services organizations. A new 1115 Medicaid waiver would stabilize households, improve long term outcomes, promote healthy communities, and allow scarce housing resources to go significantly farther in our state.

Thank you for your support.

Respectfully,

A handwritten signature in blue ink, appearing to read "Gabriel Layman", is written over a light blue horizontal line.

Gabriel Layman
President/CEO

¹ U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022):
<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>



March 1, 2024

Dear Members of the Legislature,

The Food Bank of Alaska is enthusiastic to support HB 344 and SB 241 enabling the Department of Health to apply for a new 1115 Medicaid waiver that will allow them to provide additional services for Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes¹. When an individual can't meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to decline, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs to the public.

The Centers for Medicare and Medicaid Services (CMS) have partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. This legislation will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating because of their unmet health-related needs.

The Food Bank of Alaska recognizes the significant connections between food security and public health. Adults who are food insecure may be at an increased risk for a variety of negative outcomes and health disparities. Strengthening the public health system and allowing for additional services acts as an important way to improve health outcomes, decrease dollars spent on reactive healthcare, and bolster our food security efforts.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will allow Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs, more specifically, food insecurity. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

Sincerely,

Cara Durr
Chief Executive Officer
Food Bank of Alaska
cdurr@foodbankofalaska.org

¹ U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022):
<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>

From: [Holly Blood](#)
To: [Senate Health and Social Services](#)
Subject: Please Support HB 344
Date: Thursday, February 29, 2024 11:53:27 AM
Importance: High

Dear Members of the Senate Health & Social Services Committee:

I am Holly Blood, a constituent and a staff member of the Alaska Coalition on Housing and Homelessness. I am writing to you in support of HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for the Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs [account for as much as 50% of health outcomes](#). When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

This legislation matters to me because it matters to me that all Alaskans have their most basic needs met to support their health and well-being.

Thank you for your support. I appreciate each one of you.

Sincerely,

Holly

Holly Blood | she/her

Alaska Balance of State Coordinated Entry Manager

Alaska Coalition on Housing and Homelessness

Phone: (907) 450-9931

Email: holly@alaskahousing-homeless.org

Website: alaskahousing-homeless.org

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February 28th, 2024

Dear Senate Health and Social Services Committee,

Interior AIDS Association is pleased to write in support of HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for the Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes¹. When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

This legislation matters to Interior AIDS Association because we serve vulnerable and at-risk Medicaid beneficiaries living with HIV and substance use disorders.

Thank you for your support.

Sincerely,

Lindsey Grennan
Deputy Director
Interior AIDS Association
907-452-4222

¹ U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022):
<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>

March 4, 2024

Members of the House Health and Social Services Committee,

The U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), had **announced a new opportunity for states to help increase care for individuals who are incarcerated in the period immediately prior to their release to help them succeed and thrive during reentry.** The new Medicaid Reentry Section 1115 Demonstration Opportunity would allow state Medicaid programs to cover services that address various health concerns, including substance use disorders and other chronic health conditions.¹

According to the U.S. Department of Justice, from 2011 to 2012, approximately 37 percent of people in state/federal prisons and 44 percent of people who were incarcerated overall had a history of mental illness. The National Institute on Drug Abuse (NIDA) estimates that the rate of substance use disorders for people who are incarcerated may be as high as 65 percent. **In Alaska, DOC reports that, of those currently incarcerated, 65 percent have a mental health challenge and 80 percent have a substance use disorder.**² Our rates are higher than the national average which are concerning since Alaska holds the highest incarceration rate per capita internationally.³ The NIDA report also says that, **without treatment, individuals formerly incarcerated are at increased risk of overdose within the first few weeks of reentry.**

The Medicaid Reentry Section 1115 Demonstration Opportunity focuses on covering high-quality services for individuals who are incarcerated, eligible for Medicaid, and returning home to their communities – a group of individuals who have been historically underserved and adversely affected by persistent poverty and inequality. **Improving health care transitions and addressing social determinants of health** – from case management to medication-assisted treatment – for individuals after they have been released from carceral settings **increases the likelihood that they may continue to receive crucial substance use disorder, mental health, and other health care treatment during this vital period.** It also holds promise for reducing emergency department visits, inpatient hospital admissions, overdose, and overdose-related issues, including death, and improving health outcomes overall. Moreover, **addressing people's underlying health needs enhances their ability to succeed and thrive during reentry, thereby lowering the risk of recidivism, helping make our communities healthier and safer.**

If HB 344 is inclusive of the Reentry 1115 Medicaid Waiver, then I fully support this bill.



Jessica Angel, CTSS

Certified Trauma Support Specialist/Facilitator/Trainer

vivid907pss@gmail.com Anchorage, AK

¹ CMS announcement: [SMD 23-003 - Opportunities to Test Transition-Related Strategies to Support Community Reentry and Improve Care Transitions for Individuals Who Are Incarcerated \(medicaid.gov\)](https://www.medicaid.gov/smd-23-003-opportunities-to-test-transition-related-strategies-to-support-community-reentry-and-improve-care-transitions-for-individuals-who-are-incarcerated)

² DOC report: [Microsoft PowerPoint - FY2024 DOC HFIN Subcommittee February 14, 2023.pptx \(akleg.gov\)](https://akleg.gov/committees/subcommittees/health-and-social-services/fy2024-doc-hfin-subcommittee-february-14-2023.pptx)

³ Prison Policy Initiative data for Alaska: [Alaska profile | Prison Policy Initiative](https://prisonpolicy.org/en/country-profiles/usa/alaska/)

March 4, 2024

Members of the House Health and Social Services Committee,

The U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), had **announced a new opportunity for states to help increase care for individuals who are incarcerated in the period immediately prior to their release to help them succeed and thrive during reentry.** The new Medicaid Reentry Section 1115 Demonstration Opportunity would allow state Medicaid programs to cover services that address various health concerns, including substance use disorders and other chronic health conditions.¹

According to the U.S. Department of Justice, from 2011 to 2012, approximately 37 percent of people in state/federal prisons and 44 percent of people who were incarcerated overall had a history of mental illness. The National Institute on Drug Abuse (NIDA) estimates that the rate of substance use disorders for people who are incarcerated may be as high as 65 percent. **In Alaska, DOC reports that, of those currently incarcerated, 65 percent have a mental health challenge and 80 percent have a substance use disorder.**² Our rates are higher than the national average which are concerning since Alaska holds the highest incarceration rate per capita internationally.³ The NIDA report also says that, **without treatment, individuals formerly incarcerated are at increased risk of overdose within the first few weeks of reentry.**

The Medicaid Reentry Section 1115 Demonstration Opportunity focuses on covering high-quality services for individuals who are incarcerated, eligible for Medicaid, and returning home to their communities – a group of individuals who have been historically underserved and adversely affected by persistent poverty and inequality. **Improving health care transitions and addressing social determinants of health** – from case management to medication-assisted treatment – for individuals after they have been released from carceral settings **increases the likelihood that they may continue to receive crucial substance use disorder, mental health, and other health care treatment during this vital period.** It also holds promise for reducing emergency department visits, inpatient hospital admissions, overdose, and overdose-related issues, including death, and improving health outcomes overall. Moreover, **addressing people's underlying health needs enhances their ability to succeed and thrive during reentry, thereby lowering the risk of recidivism, helping make our communities healthier and safer.**

If HB 344 is inclusive of the Reentry 1115 Medicaid Waiver, then I fully support this bill.



Jessica Angel, CTSS

Certified Trauma Support Specialist/Facilitator/Trainer

vivid907pss@gmail.com Anchorage, AK

¹ CMS announcement: [SMD 23-003 - Opportunities to Test Transition-Related Strategies to Support Community Reentry and Improve Care Transitions for Individuals Who Are Incarcerated \(medicaid.gov\)](https://www.medicicaid.gov/smd-23-003-opportunities-to-test-transition-related-strategies-to-support-community-reentry-and-improve-care-transitions-for-individuals-who-are-incarcerated)

² DOC report: [Microsoft PowerPoint - FY2024 DOC HFIN Subcommittee February 14, 2023.pptx \(akleg.gov\)](https://www.akleg.gov/microsoft-powerpoint-fy2024-doc-hfin-subcommittee-february-14-2023.pptx)

³ Prison Policy Initiative data for Alaska: [Alaska profile | Prison Policy Initiative](https://www.prisonpolicy.org/profiles/alaska/)

From: [Kathleen McCoy](#)
To: [House Health and Social Services](#); [Senate Health and Social Services](#)
Subject: Support for HB 344 and SB 241
Date: Thursday, February 29, 2024 12:02:21 PM

I write as a taxpayer, a resident of Alaska for more than 40 years, a voter and a consistent unpaid volunteer in the arena of homeless services and relief. I support **HB 344 and SB 241**.

These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for the Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs

account for as much as 50% of health outcomes^[1]. When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

This legislation matters to me personally because I witness the need for this level of support while listening to the diverse stories of individuals at Brother Francis Shelter and at Complex Care in Anchorage, and as a repeat preparer and server of free hot soup and sandwiches at local homeless camps in Anchorage.

Thank you for your support.

Sincerely,

Kathleen McCoy

Citizen, voter, taxpayer, community volunteer

^[1] U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation (2022):
<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>

March 4, 2024

Senate Health & Social Services Committee
Alaska State Legislature
Juneau, AK. 99801

Dear Senate HSS Chair Sen. Wilson, Members of the Senate HSS Committee:

Please accept this letter of support from the Mat-Su Health Foundation for Senate Bill 241, Medical Assistance Demonstration Projects. Mat-Su Health Foundation (MSHF) is the official business name of Valley Hospital Association, which shares ownership in Mat-Su Regional Medical Center (MSRMC). MSHF invests its share of the profits back into the community through grants, scholarships, and systems change work with a goal to measurably improve the health and wellness of Alaskans living in the Mat-Su.

Our hospital is downstream; it takes care of people when we've failed to prevent illness and injury. Emergency Department (ED) visits, hospitalizations, and EMS response cost far more than preventing emergent needs by connecting people to local services and support. The Governor's 2025 Operating Budget allocates over \$2.5B to Medicaid, and the highest Medicaid costs are hospitalizations and long term care. We can do better.

Here in Mat-Su, we've proven it. Our 2014 Mat-Su Behavioral Health (BH) Environmental Scan showed that Mat-Su residents chose an ED visit to Mat-Su Regional as their number one go-to in a BH emergency. Research showed that 19 people that year had over 457 visits for an acute BH concern. In response to this data, the MSHF Board of Directors asked us to decrease these super-utilizers through upstream interventions. We worked with local partners and expert consultants to launch the High Utilizer Mat-Su (HUMS) Program in 2018 at LINKS.

A third party evaluation showed HUMS saved almost \$5M in ED charges on 113 patients from 2018 to 2021, after accounting for MSHF investments in the program.¹ Since almost 80% of HUMS clients are Medicaid recipients, the State enjoyed the majority of these savings. The 2022 evaluation shows a 16.8% reduction in ED utilization overall for those enrolled in HUMS that year. For the client group admitted to the program in 2021 or earlier (so at least two years in HUMS), ED visits decreased by 37.2%. Keep in mind this is a voluntary program, but payors (such as the State Medicaid Program) could compel people to participate. While HUMS typically serves over 100 super utilizers at a time, there are hundreds here in Mat-Su they don't serve.

DOH leadership identified HUMS as a successful pilot making significant strides in improving health-related social needs, including nutrition, housing, and care coordination, for high-utilizers and individuals with complex care needs in Mat-Su. They interviewed HUMS Medical Director Dr. Thomas Quimby, LINKS Executive Director Aaron Wright, and MSHF Program Officer Ray Michaelson about HUMS to inform development of this 1115 waiver. This approach should be replicated across Alaska. SB 241 gives DOH the ability to do that. These investments deliver a financial and human ROI. Instead of costly ED visits, these investments lead to healthier people who better provide for themselves and their families. That's a win for Alaskans and the State.

Don't hesitate to reach out if you want to learn more about our efforts and why MSHF supports SB 241. We encourage you to help expedite its passage.

Sincerely,



President & Chief Executive Officer

¹ MSHF is awaiting the data from Mat-Su Regional to determine cost savings for years 2022 and 2023.

From: [Rebecca Ling](#)
To: [Senate Health and Social Services](#)
Subject: HB 344 and SB 241.
Date: Friday, March 01, 2024 10:33:15 AM
Attachments: [CEF5436E0EE24225BBC8FC87C5D81051.png](#)
[7593D2B87D234902BD34D8081D6DFC90.png](#)

Dear Representatives,

MY House is pleased to write in support of HB 344 and SB 241.

These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes. When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs. CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

This legislation matters to My House because we have learned from our youth over the years that building a foundation of having basic needs met is key to a person's success. We often reference Maslow's Hierarchy of need where Basic or Psychological needs are the platform for success. Without shelter, food, clothing, safety and sleep it is very difficult for a person to move to safety, security, employment and health. This may include same day access to addiction and behavioral health services, necessary urgent medical physician contact for medications, physical safety considerations and access to specialty care in a timely manner. My House supports clients in creating an exit strategy from homelessness with a goal to empower all clients to be contributing, self-supporting members of their community through a hand up not a hand out.

We often see a lack of resources that support client's basic needs due to lack of funding and focus. A new Medicaid waver would create standards and practices that increase access to services that are preventative in nature for our clients and reduce

the need for higher levels of care more costly services. This effort could ultimately save not only money but lives.

Thank you for your consideration,

Michelle Overstreet, Chief Executive Officer



300 N Willow Street

Scan here to visit the MY House Podcast Network

Wasilla, Alaska 99654

Office: 907-373-4357

Cell: 907-414-0930

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Rebecca Ling

907-830-6788

rling@myhousematsu.org

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t: (907) 562-2211
providence.org

February 29, 2024

The Honorable Senator David Wilson
Chair, House Health & Social Services Committee
State Capitol, Room 121
Juneau, Alaska 99801

Electronic Letter

RE: Providence Alaska Supports Senate Bill 241 MEDICAL ASSIST. DEMONSTRATION PROJECTS

Dear Senator Wilson,

Providence Alaska has set the standard for modern health care in Alaska for more than 100 years. Today we remain the state's largest health care and behavioral health provider, and the largest private employer, with nearly 5,000 caregivers across Alaska. As the chief executive for Providence Alaska, I write in support for SB 241 and the continued positive transformation of health care.

Meaningful Medicaid reform requires partnership. We have an opportunity to leverage federal funds under Medicaid 1115 demonstration waivers to transform state Medicaid programs with the goal of driving down costs and improving health outcomes. The Alaska Legislature had the vision to create pathways toward transformation through SB 74 in 2016. Numerous hospitals, including Providence, have since partnered with the state on effective demonstration projects aimed at transforming the delivery of care to prioritize value over volume. SB 241 allows for this work to continue.

Effective transformation projects are built upon the fundamentals of population health, and I applaud the Department of Health's intended focus on projects that address nutrition and food security, workforce development, transportation, housing, and case management.

Providence looks forward to ongoing partnerships with the Department of Health to improve health outcomes for vulnerable Alaskans, as authorized by SB 241.

Sincerely,

Ella Goss, MSN, RN
Chief Executive
Providence Alaska

From: [Paige Ruesch](#)
To: [House Health and Social Services](#); [Rep. Justin Ruffridge](#); [Rep. Mike Prax](#); [Sen. James Kaufman](#); [Senate Health and Social Services](#)
Subject: HB 344 and SB 241
Date: Thursday, February 29, 2024 1:38:20 PM

Dear Legislators:

I am **pleased to write in support of HB 344 and SB 241**. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for the Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes. When an individual is not able to meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents negative health outcomes and shifts payment towards more cost-effective and preventive interventions. Services covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new innovative approaches addressing one of the root causes of poor health outcomes: unmet health-related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-limited services to stabilize individuals, improving health outcomes and driving down health care costs.

Thank you for your support.

Sincerely,
Jennifer Ruesch

February 28, 2024

Sen. David Wilson, Chair
Health and Social Services Committee
Alaska State Senate
Sent via email

Re: Support for SB241 - Medical Assistance Demonstration Projects

Dear Chair Wilson,

The Alaska Mental Health Trust Authority (Trust) supports SB241, which authorizes the Department of Health to apply for a section 1115 Medicaid waiver to help address health-related needs and support services for Medicaid recipients in Alaska.

The Trust is committed to improving the lives and circumstances of our beneficiaries, Alaskans who experience mental illness, substance misuse, Alzheimer's disease and related dementia, intellectual and developmental disabilities, and traumatic brain injuries. We have long supported community-based interventions and prevention efforts that help ensure that beneficiaries can receive services that prevent the need for higher levels of care – which can lead to better health and reduce the cost of care. Further, health-related needs such as case management, stable housing, and employment align directly with Trust grantmaking and policy focus areas.

We appreciate the Department of Health bringing forth this new and innovative approach to improving the health outcomes of Alaska's Medicaid recipients, many of whom are beneficiaries of the Trust. Thank you for your consideration and your leadership in this important matter.

Sincerely,



Steve Williams,
Chief Executive Officer

Cc Members, Senate Health and Social Services Committee
Heidi Hedberg, Commissioner, Department of Health



Alaska Native Health Board

THE VOICE OF ALASKA TRIBAL HEALTH SINCE 1968

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TRADITIONAL COUNCIL

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HEALTH CONSORTIUM

TANANA CHIEFS CONFERENCE

YAKUTAT TLINGIT TRIBE

YUKON-KUSKOKWIM
HEALTH CORPORATION

VALDEZ NATIVE TRIBE

February 29, 2024

The Honorable David Wilson
Chair, Senate Health and Social Services Committee
State Capitol Rm 121
Juneau, AK 99801
Via email: Senate.Health.And.Social.Services@akleg.gov

RE: ANHB Support for Senate Bill 241 – Medical Assistance Demonstration Projects

Chair Wilson and Members of the Senate Committee on Health and Social Services:

The Alaska Native Health Board (ANHB)¹ writes in support of Senate Bill (SB) 241 relating to medical assistance demonstration projects established by the Department of Health (DOH) to address health related needs and supportive services. The Centers for Medicare & Medicaid Services (CMS) has issued guidance and waiver approvals in other states that broaden and clarify how states can use Medicaid funds to help pay for clinically appropriate, evidence-based services that address individual health-related social needs (HRSN) to mitigate the effects of social determinants of health at the population level.

This opportunity reflects growing recognition of the impact HRSN have on overall health and of Medicaid's ability to address unmet needs, which contribute to poorer health among low-income and historically marginalized communities. Despite significant investments in high-quality health care, health inequities in the United States persist, particularly among Alaska Native and American Indian (AN/AI) people. When an individual cannot meet their basic needs—e.g., stable housing, nutritious food, employment, and transportation—they are more likely to develop chronic conditions, increasing utilization of high-cost healthcare services and exacerbating health disparities.

The passage of SB 241 would authorize DOH to pursue an HRSN 1115 waiver opportunity, following the lead of states like Arizona, California, Massachusetts, New Jersey, New York, Oregon, and Washington. This bill will enable Alaska Medicaid to build on this groundwork to pursue coverage for new services tailored for Alaskans in a manner that prevents adverse health outcomes and shifts payment towards more cost-effective and preventive interventions.

¹ Established in 1968, ANHB's mission is to promote 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 for the Alaska Tribal Health System, which is comprised of Tribes/Tribal Health Organizations that serve all 229 Tribes and over 188,000 Alaska Native and American Indian people throughout Alaska. As the statewide advocacy organization, ANHB supports achieving effective consultation and communication with state and federal agencies on matters of concern.

Alaska's history and geography inform our unique health related needs, and demonstration projects are an opportunity to pivot away from a one-size-fits-all approach and illustrate how our state can best care for our people. ANHB encourages DOH to pursue HRSN coverage that provides the opportunity for regionally tailored solutions that build and expand on existing tribal programs poised to implement these expanded services. The Alaska Tribal Health System stands ready to explore an HRSN waiver that promotes targeted case management for individuals with complex chronic health conditions.

This bill will allow Alaska to pursue Medicaid coverage for time-limited services to stabilize individuals, improve health outcomes, and drive down healthcare costs. We appreciate the opportunity to participate, along with other stakeholders, in the exploration phase of this project. To leverage on-the-ground expertise, we support healthcare reform developed at the local level through provider-driven planning and input.

Thank you for your attention to this matter and the opportunity to comment. If you have any questions or require additional information, please contact ANHB at anhb@anhb.org or by telephone at 907-729-7510.

Sincerely,

A handwritten signature in black ink, appearing to read 'W F Smith'.

Chief William F. Smith, Chairman
Alaska Native Health Board
Tribally-Elected Leader of the Valdez Native Tribe

From: [Jeanine Griek](#)
To: [Senate Health and Social Services](#)
Subject: Urgent RE: SB241
Date: Friday, March 01, 2024 10:05:57 AM

Dear Legislators:

As a caring Alaskan I am pleased to write in support of HB 344 and SB 241. These bills will enable the Department of Health to apply for a new 1115 Medicaid waiver to provide new support services for

the Alaskans. The new Medicaid waiver opportunity is grounded in strong evidence that health-related needs account for as much as 50% of health outcomes[1]. When an individual is not able to

meet their basic needs (e.g., stable housing, food and nutrition, or access to transportation and employment), their health is likely to deteriorate, in some cases to the point of increased and preventable emergency department visits, hospitalization, acute psychiatric treatment, or other high-acuity health care services at high costs.

CMS has partnered with many other states to approve new 1115 Medicaid waiver services that address health-related needs. These bills will enable Alaska Medicaid to build on this groundwork to

pursue coverage for new services tailored for Alaskans in a manner that prevents negative health

outcomes and shifts payment towards more cost-effective and preventive interventions.

Services

covered under a new health-related needs 1115 waiver would provide much-needed relief for Alaskans with health conditions that are deteriorating as a result of their unmet health-related needs.

Simply put, our current systems favor payment for more costly and intensive interventions rather

than payment for supportive services. These bills will enable Alaska Medicaid to evaluate new

innovative approaches addressing one of the root causes of poor health outcomes: unmet health-

related needs. These bills will give Alaska the opportunity to pursue Medicaid coverage for time-

limited services to stabilize individuals, improving health outcomes and driving down health care

costs.

This legislation matters to me because those in unstable housing situations are needing healthcare

support. It's difficult to navigate the housing and healthcare system when you are not living in a

stable environment.

Thank you for your support.

Sincerely,

Jeanine Griek of Fairbanks

[1] U.S. Department of Health and Human Services, Assistant Secretary of Planning and Evaluation
(2022):

<https://aspe.hhs.gov/sites/default/files/documents/e2b650cd64cf84aae8ff0fae7474af82/SDOH-Evidence-Review.pdf>

Senate.Health.And.Social.Services@akleg.gov