

4048 Laurel St Ste 202 Anchorage, AK 99508 P 907-677-2636 F 907-677-2631

March 17, 2025

Senator Dunbar and Senate Health and Social Services members:

Over the years, practice-related expenses have consistently risen—much like the rising costs across all industries—while reimbursement rates have continued to decline. The most significant increase in expenses has been labor costs, which are critical to maintaining skilled employees in the state. This is particularly true for specialists, who face the added challenge of retaining talent in an environment where the cost of living is high and recruitment is difficult.

Maternal Fetal Medicine (MFM), also known as Perinatology, is a subspecialty of OB/GYN focused on the diagnosis and management of high-risk pregnancies and fetal/maternal health. Both OB/GYN and pediatrics have some of the highest proportions of Medicaid patients, with my practice, for instance, serving 45% Medicaid clients. MFM is a high-acuity care field, but unfortunately, it is also one of the most expensive to provide, due to the costs of specially trained staff and equipment, yet it is reimbursed at the lowest rates.

MFM sonographers, who are specially trained and certified to perform essential ultrasound imaging procedures like fetal echocardiograms, are in short supply. Additionally, the specialized ultrasound machines required for fetal echocardiograms—standard in MFM care—cost upwards of \$150,000 per machine, which adds to the financial burden of maintaining such practices.

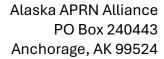
With the increasing costs of care and the potential for reduced reimbursements, it is becoming financially unfeasible to maintain medical practices, particularly specialty care, in Alaska. The state has long faced challenges in recruiting and retaining physicians, and without adequate financial protection, many practices may be forced to close. This would exacerbate the existing physician shortage and result in patients needing to travel out of state for basic care and procedures. For the continued health and growth of Alaska, it is crucial to ensure financial protection for both patients and providers. A minimum reimbursement floor is essential to protect the financial health of both parties. Without this, we risk further strain on our healthcare system and a deepening shortage of local providers.

I urge the committees to support and pass SB 121 to ensure the sustainability of healthcare practices in Alaska and safeguard the health of its residents.

Sincerely,

Corinna Muller, DO, FACOOG

Commun Muller D. D.





March 10, 2025

Senator Cathy Giessel 120 4th Street Alaska Capitol Room 121 Juneau, AK 99801

Dear Senator Giessel,

Thank you for introducing SB 121 "An Act relating to settlement of health insurance claims; relating to allowable charges for health care services or supplies; and providing for an effective date."

The Alaska Advanced Practice Registered Nurse Alliance strongly supports the passage of this bill as it would ensure reimbursement rates for health care services are equally applied when billed under the same Current Procedural Terminology code by health care providers who are practicing under the scope of their license and authorization by their respective professional state board.

APRNs are vital members of the health care system in Alaska particularly in the practice of primary care. APRNs practice independently in rural and remote communities across the state as well as urban centers. Many have their own practices or work in group practices with physician colleagues and physician assistants. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

The most recent licensing data from the Alaska Board of Nursing indicates that there are over 2600 Advanced Practice Registered Nurses (APRNs) in the State of Alaska. Of this number, a majority (approximately 2400) are Certified Nurse Practitioner (CNPs) who are practicing in primary care settings. CNPs are members of the health care delivery system and practice autonomously in areas such as family practice, women's health care, pediatrics, internal medicine, geriatrics, cardiology, and oncology. CNPs are qualified to diagnose and treat patients with undifferentiated symptoms as well as those with established diagnoses.

In addition, Certified Nurse Midwives (CNM) provide a full range of primary health services to women throughout the lifespan including gynecologic care, family planning, preconception, prenatal and postpartum care, childbirth, and care of a newborn. Their practice also includes treating male partners of female clients for sexually transmitted infections and reproductive health. There are approximately 65 CNMs licensed in Alaska as of 11/30/2024. APRNs in Alaska are also Certified Nurse Anesthesiologists and Clinical Nurse Specialists. Both have important roles in the delivery of health care in rural critical access hospitals and inpatient care across Alaska.

We thank you again for introducing this bill. We stand in support of uniform reimbursement standards and equal application of those standards.

Respectfully submitted,

Marianne Johnstone-Petty, DNP, FNP-C, APRN, ACHPN President Alaska Advanced Practice Registered Nurse Alliance

Stephanie Wrightsman-Birch, MSN, MPH, FNP-C, APRN Secretary, APRN Alliance Board of Directors Alaska APRN Alliance Legislative and Health Care Policy Committee From: aleckay@aptaalaska.org <aleckay@aptaalaska.org>

Sent: Saturday, March 8, 2025 6:18 PM

To: Sen. Forrest Dunbar < Sen.Forrest.Dunbar@akleg.gov >

Cc: Sen. Cathy Giessel <Sen.Cathy.Giessel@akleg.gov>; Sen. Matt Claman <Sen.Matt.Claman@akleg.gov>; Sen. Löki

Tobin < Sen.Loki.Tobin@akleg.gov >; Sen. Shelley Hughes < sen.shelley.hughes@akleg.gov >

Subject: Please support SB 121

Dear Chair Dunbar and members of the Senate Health and Social Services Committee,

I am writing in support of Senate Bill 121, an effort to replace the 80th percent rule that was repealed on 1/1/2024. I am president of our local association and an owner of a physical therapy practice in Alaska, United Physical Therapy and North Pole Physical Therapy.

Members of the American Physical Therapy Association Alaska chapter have been negatively impacted the repeal of this rule because is removes any negotiating stance to address declining payment from payers Without this protection, private insurers can decrease the rates in their contracts, forcing providers out of network without protection. Ultimately, this affects the numbers of providers willing to accept insurance rates and lowers access to crucial care. Physical therapy is an important aspect of health, avoiding excessive medication use, decreasing pain, improving function and avoiding more serious medical conditions. The value as a health care delivery method has been studied and confirmed repeatedly and will be a larger and larger player in the health of our community.

Over the past several years, I have witnessed flat or even declining reimbursement rates from insurers, despite the increasing costs of operating a physical therapy practice in Alaska. Over the same period, my practice expenses have risen by year over year due to inflation, rising wages, and increasing overhead costs. This has placed immense pressure on our ability to continue offering quality care to our patients, particularly to those reliant on Medicare and Medicaid.

Since the repeal of the 80th percentile regulation in January 2024, attempts to bargain for higher rates have been met with demands for further decreases from insurers. This has created a significant imbalance at the negotiating table, with insurers leveraging their power to impose further financial strain on already fragile practices like mine. Despite our best efforts to remain viable, my practice is at risk of closure due to these unsustainable financial pressures.

Additionally, the difficulty in recruiting and retaining qualified physicians in Alaska has only compounded these challenges. With declining reimbursement rates and rising costs, it is becoming increasingly difficult to offer competitive compensation to attract and retain the talent we need to care for our communities. The prospect of losing valued staff and physicians is a real and growing concern for my practice's future.

Do not hesitate to contact me for clarification or elaboration.

My cell number is 907.360.0940

Alec Kay, PT, DMT, OCS, FAAOMPT, ATC APTA Alaska, president



PO Box 72376, Fairbanks AK 99707-2376

www.ndsystems.org

Ph: 907-374-0852

Fax: 907-374-0854

March 10, 2025

Senator Cathy Giessel 120 4th Street Alaska Capitol Room 121 Juneau, AK 99801

Dear Senator Giessel,

Thank you for introducing SB 121 "An Act relating to settlement of health insurance claims; relating to allowable charges for health care services or supplies; and providing for an effective date."

As an Advanced Practice Registered Nurse specialized in Psychiatric Mental Health operating a small business clinic system serving a population 57% covered by Medicaid and Medicare in three communities, Anchorage, Fairbanks and Kenai, I respectfully request expansion of the language of the bill to include Mental / Behavioral Health services.

With such a expansion I would strongly support the passage of this bill as it would ensure reimbursement rates for health care services are equally applied when billed under the same Current Procedural Terminology code by health care providers who are practicing under the scope of their license and authorization by their respective professional state board.

To echo the APRN Alliance passage of SB121 allows for **Ensuring consistency of** reimbursement and equal pay for equal work is critical to assuring that APRN's can continue to provide care in Alaska.

Psychiatric Mental Health Nurse Practitioners are qualified to diagnose and treat patients with undifferentiated symptoms. A desire to expand into integrated care





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www.ndsystems.org

Ph: 907-374-0852 Fax: 907-374-0854

with primary care would be more accessible if the reimbursement playing field was level.

We thank you again for introducing this bill. We stand in support of uniform reimbursement standards and equal application of those standards.

Respectfully submitted,

Teresa Lyons, APRN, PMHNP CEO Nurses Diversidfied Systems Inc. (ND Systems Inc.) 907-460-1868 (personal cell)



----Original Message-----

From: Debbie Ryan < dryan@akchiro.org Sent: Tuesday, March 11, 2025 12:20 PM

To: Sen. Cathy Giessel < Sen.Cathy.Giessel@akleg.gov >

Subject: Protect Patient Access to Care!

Dear Senator Giessel,

Alaska has a monopsony

(https://urldefense.com/v3/ https://en.wikipedia.org/wiki/Monopsony ;!!LdQKC6s!M008 VBWzVFK 3IUHC8gZNafZHZ-AbTKQ95DPAwok9reZDPEAy5n594qlfprInjYSJ1x10NqZX2 KQg4M-KCeqUFshl4\$) when it comes to insurance in Alaska With one provider in Alaska hold 90-95 percent of the market they have become a master at manipulating our leaders in the state by threatening them with an exit or extremely high prices. Since 2014 (9 years ago) them have cut provider reimbursements on in-network providers 25%. They are NOT negotiating or giving any cost of living increases for providers who struggle with inflation, COLA, rising labor costs, etc. Their lobby of the removal of the 80th% rule in the Alaska Division of Insurance has insured their supreme power over all healthcare providers. This bill would help to balance a providers ability to fairly negotiate with the insurers. Alaskans are already seeing the treatment option funnel starting to narrow with providers retiring and moving out of state. Please vote to protect their right to access providers by passing this bill.

Alaska is facing a healthcare provider shortage due to rising inflation, reduced reimbursements, and lack of staff; especially, the small primary care practices.

Senate Bill 121 will help level the playing field and will allow providers to negotiate with carriers and opt out of networks if fee schedules are unsustainable for a business.

Alaska is quickly becoming a no-win place to provide healthcare as providers not only cannot afford an office and staff, but cannot pay employees enough to complete with hospitals and other corporate businesses. The funnel will continue to narrow for medical choice for all Alaskan citizens if this Bill fails.

Today, we encourage you to support Senate Bill 121 so that Alaska will continue to have a robust healthcare system for all Alaskans.

Sincerely,

Debbie Ryan 13208 Brant Way Anchorage, AK 99515 dryan@akchiro.org Dear Chairs, Vice Chairs and Senators,

My name is Noah Laufer. I am a private practice family physician. I write to strongly encourage you to support senate bills SB bill 121 and SB 122. With two partners, I run a 53-year-old family medicine practice in Anchorage, employing 85 people and providing Alaskans with more than 35,000 visits per year. We accept all forms of insurance including Medicare and Medicaid. My father, Dr. Ken Laufer, was also a physician in the practice. For over 50 years Medical Park Family Care patients have been able to see "Dr. Laufer". It is not uncommon for me to see third and fourth generation Alaskans. We provide exactly the kind of continuity based, cost effective, comprehensive medical care that results in healthy outcomes and high patient satisfaction. Family physicians' ability to manage a wide range of health issues reduces the need for specialist referrals, emergency room visits and hospitalizations, leading to better care and lower overall healthcare costs. Can read this over my shoulder if you want to go to send this to function Seldinger's

For the past decade we have seen flat contract reimbursements from insurance. Practice expenses in all categories have risen, typically 35 to 40%. We have experienced an increased burden of uncompensated efforts navigating denials, prior authorizations and other unnecessary hurdles to care. My income, and the income we can offer to prospective employees or partners has steadily dropped. We have worked hard to identify and address inefficiencies. We have been able to recruit physicians, nurse practitioners, and PAs with some success, but have also lost several due to low reimbursements compared to other communities, the cost of living in Anchorage and the struggles they have covering high education related debt. For the last 10 years we have had no success in bargaining for higher rates. We deeply value our long-term relationships with our patients and do not want to threaten dropping them. As a consequence, we have ZERO leverage in negotiations with monopolistic insurance companies. When they communicate with us, they have little desire to understand the impacts they have on our ability to practice good medicine.

Since opening in 1971, MPFC has seen Medicaid and Medicare. This has never been a rational business model but with flatline insurance reimbursements for the last decade it has become increasingly difficult to continue seeing Medicare patients at all. Sadly, we have been forced to limit new Medicare patients, as well as limit the number the clinic can see per day. We currently see 24-28 Medicare patients per day. This is a heavy lift and will not be sustainable in the long run.

As one of three owners, my deepest concern is that without markedly improved rates the clinic will eventually fold. I am 60 years old and will not be able to practice more than another decade. If either of my partners or I quit or retire the entire practice is likely to close. While our employed providers are willing to work for us because of the collegiality, quality, patient loyalty and warm atmosphere we have created, no one is willing to take on the burden of owning a business, even for free, in which we have no leverage over what we get paid.

Another important impact of the repeal of the 80th percentile without a replacement, has been our declining ability to refer patients to competent specialists in our community. Without question, this is a harder proposition than it has historically been. Medical specialty clinics are often overwhelmed, understaffed, less responsive or going out of business. Wait times can take weeks to months. My suspicion is that unless things change soon, a big part of my job will be quickly identifying patients who are too sick for the community and shipping them out of state. The old and recycled idea of "narrow networks" is frankly ridiculous. There are not that many of us! My list of cell phone numbers is a cherished resource. One specialist is not the same as another. Good referrals are based on training,

experience, personality and provider interests. I have been told personally by insurance executives, that even if "every provider in Alaska" were included, the entire state does not have enough providers for a "meaningful network". Narrowing the choices available for me as a referring family doctor, and for patients is bound to compromise care, undermine confidence in the community and ultimately cost more.

For most of us, the practice of medicine occurs in a largely altruistic economy. Unfortunately, this has allowed many businesses, including insurance companies to abuse the system. Most healthcare providers will bend over backwards to do whatever needs to be done to help their patient's. Our "bottom line" is the health and wellness of our patients and our community.

Over the years, I have, in addition to taking care of patients, served as president of MPFC, president of Alaska Physicians and Surgeons, a member of Governor Parnell's Healthcare Commission, served the Providence Alaska Community Board Member for three terms - 9 years, and was a all right I am sending founding member of Alaska Innovative Medicine. If you have any concerns or questions I might be able to help with, please feel free to contact me. This includes calling my cell phone or leaving a text message. I will always answer if I can. Healthcare in Alaska is very important to me and I would like to do what ever I can to help it continue to be sustainable and local.

Sincerely, Timothy Noah Laufer, MD

Medical Park Family Care 2211 E. Northern Lights blvd. Anchorage, AK 90508

3.17.25

Senator Forrest Dunbar

Chair, Senate Health and Social Services Committee Alaska State Legislature

Dear Senator Dunbar and Committee Members,

My name is Crystal Miner and I am writing to you as a constituent from Anchorage, Alaska. In addition to being a concerned citizen, I am a self-employed small business consultant specializing in healthcare. I am writing to express my strong support for **Senate Bill 121**, which proposes to establish the 75th percentile of charges in Alaska as the minimum allowable reimbursement for out-of-network healthcare providers. As a healthcare business consultant with over 15 years of experience assisting Alaskan healthcare practices, I have observed firsthand the challenges that have arisen since the repeal of the 80th percentile regulation on January 1, 2024. This repeal has led insurers to adopt a "take it or leave it" stance during contract negotiations, often offering rates marginally above Medicaid levels. Consequently, clinics face the difficult choice of accepting these reduced rates or operating as out-of-network providers, thereby compelling patients to seek care elsewhere.

Simultaneously, healthcare practices in Alaska are grappling with escalating operational costs, including increased expenses for supplies, shipping, and personnel. The combination of stagnant or declining reimbursement rates and rising costs threatens the financial viability of many clinics, potentially leading to closures that would diminish healthcare access across our state.

Implementing SB 121 would restore a fair balance in negotiations between providers and insurers, ensuring that reimbursement rates more accurately reflect the actual costs of delivering care in Alaska. This measure is essential to maintain the sustainability of healthcare practices and to preserve patient access to necessary services.

I respectfully urge the committee to support SB 121 to safeguard the integrity of Alaska's healthcare system.

Crystal Miner, MBA-HSA, FACMPE Your Helping Hand C Business Services, LLC

3.15.25

To the Senate Health and Social services committee:

Dear Mr. Chairman Dunbar,

I am a family physician and owner of a private family medicine clinic in Anchorage, Medical Park Family Care. We are a small business providing critical primary care services to patients in Anchorage. As you are aware, primary care has a massive shortage in Alaska, and Anchorage is no exception. We provide care in the needed space serving workers with private insurance, Medicaid, and Medicare. We accept nearly all health care plans and self pay patients. To the detriment of providers and patients in Alaska, the private insurers have refused to raise contracted reimbursements for nearly a decade. While cost of living and cost of doing business has increased substantially in the past 5 years, reimbursement has not.

Private practices bear the burden of purchasing all of the supplies for IT solutions, telehealth, testing supplies, everything around covid for PPE and masking, all from the same pool of reimbursement from our insurance payors. We at Medical Park have continued to also see Medicare patients at a loss, and we have seen those patients for 50 years. The declining reimbursement from insurance companies puts critical care of seniors in the balance. No business can continue to operate without also having the money to pay staff, nurses, physicians and advanced practice providers a competitive wage.

Recruitment has been more and more difficult in the past 5 years. Providers tend to choose subsidized jobs in larger health systems due to the ability of those systems to provide higher salaries and more expansive benefits.

Alaskans need private practice primary care. It's foolish to think that the role we play can be filled by urgent cares or pop-up Express care clinics sponsored by the hospitals. We've all seen the rise and closure of hospital based primary care in Anchorage - AK Regional closed all of their outpatient operations since 2023. They are interested primarily in opening more ER space because it's profitable.

As the legislature is making policy decisions about Alaska's health care, keep in mind who stands to lose if the State continues to let insurance companies dictate the scope of health care in Alaska. Primary care offices will close and private specialty offices will close. Most people who have been patients in Anchorage recognize that the bulk of providers are in fact private.

We need to require that private health plans step up and raise reimbursement, as they have definitely raised premiums. I am also very aware, as a business owner, how much more I'm paying for my employees to have health insurance. Senate bill 121 offers a fair and productive solution to help keep our medical community working and serving Alaskans.

Please support this legislation.

Sincerely, Jill Gaskill MD

Jill Gaskill, MD Medical Park Family Care, Anchorage, AK Dear Senator Giessel,

I would like to strongly recommend that you support SB 121. As a solo practitioner in Anchorage for 35 years, I know all too well the games played by the Insurance companies and the tremendous influence they exert on how health care is paid for.

The 80th percentile regulation protected small physician offices like myself. Several years ago, when I signed up to be a preferred provider, I had to take a substantial cut in my reimbursements. Specifically, my most common surgical procedure was cut from \$4500 to \$1168! Blue Cross complained that they needed more "preferred providers" but in doing so, we took severe cuts in reimbursement and their insurance premiums only went higher and higher. Five years ago, my monthly premiums for me and my family were \$3600/month with a \$5,000 deductible!

Six years ago, I signed another contract with Blue Cross and since that time, there have been significant costs increases and inflation. Last year, I asked them to consider giving me a cost of living increase. Their answer was a simple, "NO"!

I'm currently paying over \$10,000/yr to provide health insurance for my healthy, young employees.

Please support SB121 to help protect the physicians who care for Alaskans. Recruiting new physicians to Alaska is already hard enough. Lower reimbursements from insurance companies will make recruiting that much more difficult. We need to be able to attract younger physicians. Currently, Anchorage has eleven Otolaryngologists (ENT's) and all but two are older than 50 years old and several are in their 60's.

Your support of this bill is greatly appreciated. If I can be of any assistance to you, please do not hesitate to contact me. Most sincerely yours,

Creed Mamikunian, MD Alaska Sinus Center 2401 East 42nd Avenue Suite 206 Anchorage, AK 99508

3.12.25

My apologies for the typo in spelling of Senator Dunbar's name. The following is my corrected letter.

Dear Senator Dunbar and Members of the HSS Committee,

I am writing to express my strong support for SB 121 and the 75th percentile rule. As a behavioral health provider and co-owner of a group practice, I have witnessed firsthand the ongoing challenges independent providers, especially those unaffiliated with large hospitals, face due to declining contract reimbursement rates. Since our last contract negotiation in 2023, the financial strain on our practice has only worsened.

Our recent negotiation process with Blue Cross Blue Shield (BCBS) exemplifies the impact of the 80/20 rule repeal. For context, Alaska Telepsychology has been a preferred provider with Premera Blue Cross since 2018, serving 97 communities and over 347 Premera BC patients as of March 2025. BCBS has always offered the lowest reimbursement rates (as compared to all other major insurance companies) for our two most commonly billed CPT codes—90837 (psychotherapy) and 96130 (psychological assessment).

Since the repeal of the 80/20 rule, BCBS has repeatedly delayed and obstructed our attempts to negotiate fair rates. This fall we submitted a formal request for higher reimbursement, backed by data from the Transparency in Pay Act, yet despite assurances that their economics team would review our contract within eight weeks, we waited **18 weeks** for a response.

Today, after this prolonged delay, BCBS proposed a **14.46% reduction** in reimbursement for our psychological assessment code. My partner Dr. von Hippel and I specialize in evaluating diagnostically complex individuals using a comprehensive, multi-disciplinary, and multi-reporter approach that integrates information from patients, parents or partners, primary care providers, educators, occupational therapists, speech therapists, etc. We are well-known for evaluating autism spectrum disorders in children and adults alike. We maintain a **6- to 9-month waitlist** for evaluations like these due to high demand. A reduction in reimbursement for these services only exacerbates access issues for patients who are already waiting far too long for essential care.

Additionally, after two years of attempted negotiations and stagnant rates, BCBS offered only a **4.58% increase** for psychotherapy codes. This token adjustment, following years of stagnant rates and rising operational costs, is an insult to providers who work tirelessly to serve our community.

The continued suppression of reimbursement rates threatens the viability of independent behavioral health providers and directly impacts patient care. Without SB 121, insurance companies like BCBS will continue dictating unfair rates, driving providers out of network, and making mental health care even less accessible to Alaskans.

Please help us protect patient access to critical behavioral health services by passing SB 121. Thank you for your time and consideration. Sincerely,

Sammy Mack, PhD Licensed Clinical Psychologist and Co-owner Alaska Telepsychology

3.12.25 Dear Mr. Dunbar,

I am writing in support of SB 121- Health Insurance Allowable Charges. I have been practicing medicine in Alaska since 1996, and have experienced the health care market before, during and after the 80th percentile regulation. Since that regulation was repealed it has been clear to me and my partners why that bill was felt to be necessary in the first place. Following the repeal we experienced commercial insurance carriers shifting health care costs to our patients and a significant power imbalance during contract negotiations. We have been in network with Premera for many years, but that contract has not included any price escalation despite significant increases in practice expenses. The other major commercial insurance provider in our area has been very difficult to work with, and attempts to negotiate a contract with them resulted in offers that would not have allowed our practice to continue as a business. After the 80th percentile regulation was repealed we were forced to hire a consultant for contract negotiations and were only able to secure a contract after spending tens of thousands of dollars and almost one year of negotiations before we could secure a contract. Even then the best terms we could get are heavily weighted toward the insurance carrier due to our lack of negotiating leverage. Our practice works very hard to provide the highest level care possible while providing a stable workplace along with living wages and good benefits for our employees. Without legislation that provides support for Alaska's medical practices to negotiate with the multi billion dollar businesses that provide medical insurance coverage for our patients I doubt most practices will be able to survive in the long term and provide high level health care to our patients. I urge you to support SB 121 which will help to level the playing field and maintain high level medical care in our state. Thank-you for your work on this very important issue.

Sincerely,

John P Bursell MD

To Whom it may concern,

As a small privately-owned practice serving Southeast Alaska, we have been navigating the complexities of running a healthcare business in a rural area for the last 18 years. We have dedicated ourselves to enhancing access to quality healthcare, particularly specialty services in our community. The repeal of the 80th percentile in 2024 has led us to question our ability to do just that. Specifically, as out of network reimbursement rates have been drastically reduced to a mere 150-185% of Medicare allowed amounts leaving our practice revenue about 50% less than the year before.

With inflation on the rise and the costs associated with recruiting and employing surgeons and staff significantly higher than in many other states, our ability to expand services has been severely hampered. The notion of negotiating contracts with payors has become increasingly tenuous with minimal ground to stand on, leaving us unable to provide affordable care for our patients without imposing overwhelming financial burdens.

I strongly urge you to consider the passage of Senate Bill 121. This legislation presents an opportunity to restore essential services and improve access to quality healthcare for all Alaskans. By supporting this bill, you will enable us to continue our mission of delivering comprehensive and specialized care without forcing residents to seek treatment out of state as well as the ability to negotiate reasonable insurance contracts with payers.

Thank you for your attention to this vital matter.

Hannah Garity

Juneau Bone and Joint, Practice Manager 3220 Hospital Drive, Juneau, AK 99801

3.11.25

Please vote to pass Senate Bill 121. I have been in practice here in Wasilla for close to forty years and have witnessed dwindling reimbursement rates for the same services and ever-increasing overhead costs. If this legislation does not pass, I would have to consider closing my clinic. I currently have a staff that includes two Doctors of Chiropractic and twelve support personnel to include Chiropractic Assistants and Massage Therapists.

Sincerely,

Dr. James Martin-400 N Main Street Wasilla, AK, 99654

3.11.25

Good afternoon Senator Giessel,

I am writing to **urge your support for Senate Bill 121**, which seeks to restore fair and sustainable reimbursement standards for healthcare providers in Alaska. The repeal of the **80th percentile regulation** on **January 1**, **2024**, has further destabilized an already fragile system, allowing insurers to impose **arbitrary reimbursement rates with no standardized minimum**.

For years, contract reimbursement rates have been flat or declining, despite the rising costs of running a practice. Now, with the repeal of the 80th percentile rule, insurers have even more leverage to demand reductions, putting independent practices at risk of closure while larger companies can utilize their volume to continue to monopolize. This imbalance in negotiations threatens access to care for Alaskans and makes it increasingly difficult to recruit and retain providers in our state.

Over the past decade, healthcare providers in Alaska have faced significant financial pressures, including:

- Stagnant Reimbursement Rates From 2010 to 2020, reimbursement rates remained largely unchanged, failing to keep pace with rising operational costs.
- Rising Operational Costs Between 2017 and 2024, medical costs surged by 44%, while reimbursement rates remained flat, creating an unsustainable financial gap.
- **Decreasing Personal Income** The growing discrepancy between increasing operational costs and **stagnant reimbursements has drastically reduced provider income**, jeopardizing the ability to **sustain private practices and repay student loans**—especially after committing **over a decade to education and training**.
- Recruitment and Retention Challenges Alaska's high cost of living and the financial
 instability of healthcare practices make it increasingly difficult to attract and retain qualified
 providers, further limiting patient access.
- Increased Administrative Burdens Insurers continue to impose more administrative requirements, adding work without additional compensation, worsening provider burnout and making it harder to deliver quality care.
- Risk of Practice Closure Many independent practices are now on the verge of closing, directly reducing healthcare access for Alaskans.

Burnout is at an all-time high—a 2018 report found that 29% of physicians in Alaska were experiencing burnout due to financial and administrative burdens. Newer studies indicate this number has risen to 48% nationwide, highlighting the urgent need for systemic change. Insurers continue to make record profits while healthcare providers struggle to keep their doors open.

Insurance Profits at the Expense of Providers and Patients

While providers face shrinking reimbursements and growing expenses, **insurance companies continue to rake in record profits**:

- UnitedHealth Group's net income rose from \$15.4 billion in 2020 to \$20.6 billion in 2022— a 34% increase.
- Elevance Health (formerly Anthem) saw its net income jump from \$4.6 billion in 2020 to \$6 billion in 2022—a 30% increase.

These massive profits underscore the growing disparity between insurance companies and both healthcare providers and the patients they claim to serve. While insurers slash reimbursements to providers, they simultaneously raise premiums, deductibles, and copays, making healthcare more expensive and less accessible for the very people they insure. At the same time, they burden providers with excessive administrative requirements, forcing independent practices out of business. The result? Fewer choices, longer wait times, and reduced access to quality care—all while insurers continue to rake in record profits at the expense of both patients and providers.

How SB 121 Helps

SB 121 establishes the 75th percentile of charges as the minimum allowable reimbursement, ensuring that insurers can no longer arbitrarily dictate unsustainable rates. This bill will:

Restore Fair Negotiations – Provide **a standardized baseline for reimbursements**, preventing insurers from unfairly underpaying providers.

Sustain Healthcare Practices – Allow independent practices to **remain financially viable**, ensuring continuous care for patients.

Improve Recruitment and Retention – Create a more stable financial environment, making Alaska a more attractive place for healthcare providers.

The passage of **SB 121** is essential to maintaining a sustainable healthcare system in Alaska. Without action, independent providers will continue to disappear, leaving fewer options for patients and making access to care increasingly difficult.

I urge you to **support SB 121** to ensure **Alaskan healthcare providers receive fair compensation**, allowing them to **continue serving our communities**.

Thank you for your time and consideration. **Please let me know if I can provide any additional information.**

Sincerely,

Kyle Hanford, DC, FPSC(C), CCSP
Fellow, Primary Spine Care (Candidate)
Trauma Qualified - Cleveland University, Kansas City
MRI Interpretation Review Qualified - Cleveland University, Kansas City
Documentation and Diagnosing Qualified - Cleveland University, Kansas City
Denali Injury & Spine Center
6711 Debarr Rd, Anchorage, AK 99504

3.11.25

Dear Senator Giessel,

By reducing provider reimbursements, clinics are being forced to downsize, cut corners, or close altogether. We cannot sustain any more reductions in reimbursements for our extremely valuable services.

Alaska is facing a healthcare provider shortage due to rising inflation, reduced reimbursements, and lack of staff; especially, the small primary care practices.

Senate Bill 121 will help level the playing field and will allow providers to negotiate with carriers and opt out of networks if fee schedules are unsustainable for a business.

Alaska is quickly becoming a no-win place to provide healthcare as providers not only cannot afford an office and staff, but cannot pay employees enough to complete with hospitals and other corporate businesses. The funnel will continue to narrow for medical choice for all Alaskan citizens if this Bill fails.

Today, we encourage you to support Senate Bill 121 so that Alaska will continue to have a robust healthcare system for all Alaskans.

Sincerely, Coni Wells, 8840 Old Seward Hwy Ste E, Anchorage, AK 99515

FAIRBANKS

Sunday, March 9, 2025

PHYSICAL

Dear Esteemed Chair Dunbar and Members of the Senate Health and Social Services Committee:

THERAPY

(907) 479-0623 jeff@fairbankspt.com

The Artisan's Courtyard 1755 Westwood Way Suite #7 Fairbanks, Alaska 99709 I am writing in support of Senate Bill 121, an effort to reinstate the 80th percent rule that was repealed on January 1st, 2024. I write as the owner of a small private physical therapy practice in Fairbanks.

My business has suffered significant negative consequences as a result of the 80th percent rule's repeal, which took all bargaining power away from healthcare providers and handed it to private insurers. Those insurers have taken full advantage of the imbalance and have cut reimbursement rates repeatedly, deeply, and seemingly arbitrarily, even as the costs of operating a healthcare practice in Alaska have continued to rise. Meanwhile these same insurers raised premiums for their customers considerably.

The current trajectory is unsustainable for private practices such as mine. I am increasingly having to consider closing my practice and moving elsewhere, and I would not advise any of my colleagues to attempt opening a new practice in this environment.

Please support Senate Bill 121. It is the only hope for a sustainable future for Alaska's private healthcare providers. Please feel free to contact me with any questions at (907) 378-1809.

Sincerely and Respectfully,

Jeffrey S. Gordon, DPT, OCS

March 16, 2025

Senator Cathy Giessel 120 4th Street Alaska Capitol Room 121 Juneau, AK 99801

Dear Senator Giessel,

Thank you for introducing SB 121 "An Act relating to settlement of health insurance claims; relating to allowable charges for health care services or supplies; and providing for an effective date." This bill is essential for sustainable health care delivery in Alaska that will affect not only health care providers, but patients as well.

Patients First Medical Clinic (PFMC), a nurse practitioner owned urgent and family practice clinic, was open in East Anchorage for twenty years. For two decades eight nurse practitioners and one physician associate provided medical care to over 51,000 patients. PFMC was one of the few private clinics in the Anchorage Municipality to accept Medicare and Medicaid patients. The past three years it was difficult to keep the clinic open due to the staggering rise in cost of business and decreasing reimbursement. Because of the mismatch between the cost of business and health care reimbursement the clinic had to either close or sell to a larger organization. On January 2, 2025, the clinic was sold to Providence Medical Group and reopened in the same location as Providence Primary Care Debarr. This transition was made because East Anchorage is an underserved medical area with minimal health care availability. The decision to sell was difficult, but we felt the city would benefit by keeping a medical group who accepted all insurance types in the area to serve the East Anchorage population.

Blue Cross and Aetna have decided to cut reimbursement of nurse practitioners and midwives to 85% of the physician fee schedule this spring due to the "market standard" set by Medicare and Medicaid. This additional cut in reimbursement would certainly have caused a greater financial burden if we had decided to try to keep the clinic open under PFMC. It will most certainly cause financial harm to those nurse practitioner-owned clinics who are trying to remain open.

As previous clinic owners, we support the passage of SB121 as it would ensure reimbursement rates for health care services are equally applied when billed under the same Current Procedural Terminology code by health care providers who are practicing under the scope of their license. APRNs are essential to Alaska's health care system, especially in primary care. They are more likely to accept Medicare and Medicaid payment, expanding access to this vulnerable population. Consistent reimbursement and equal pay for equal work is crucial for APRNs to be able to serve as independent health care providers in Alaska. We support the uniform reimbursement standards and equal application of those standards that SB 121 would promote.

Thank you for your work on this very important topic.

Respectfully,

Bennett Jackson, FNP Lisa Jackson, DNP, FNP Former owners of Patients First Medical Clinic, LLC



03.17.2025

RE: Senate Bill 121 and 122

Dear Senator Giessel,

In short, I am writing you in support of Senate Bill 121 and 122. I am the CEO of an Alaskan-owned business that provides healthcare to all Alaskan's and visitors regardless of their ability to pay. We have taken a keen interest in the interplay between the insurance commissioner of the great State of Alaska and representatives of Premera BCBS as facts unfold in current litigation. We hear promises made by Premera regarding our premiums and yet nothing we have seen seems rooted in honesty. As you know, healthcare is one of the few businesses that cannot increase their prices as costs of doing business rise. In fact, our fees have remained unchanged for nearly a decade, yet our health insurance premiums have increased double digits every year. It is clear Premera has a multipronged approach to leverage the insurance commission to their advantage not Alaskan businesses or consumers.

We believe strongly to work toward affordable healthcare, we are consumers and providers. We believe the regulatory process may be the best way to keep payers honest with all Alaskans. Establishing a 75th percentile rule shows healthcare providers commitment to reducing cost while maintaining a floor to reimbursement to keep competent healthcare within Alaska. We would propose working toward lowering costs and limiting the administrative burden applied to us so everyone can win.

We believe the network of providers throughout Alaska is tenuous. We think Senate Bill 122 prevents insurance companies from picking winners and losers according to their ill-conceived metrics. Alaska is a difficult place to recruit providers and adding some consumer protection against blocking out some providers will likely have unintended consequences with an impact that may be incredibly difficult to reverse.

I have many more thoughts on why these bills should be made law, and I am happy to have further discussions or answer questions. Please reach out to me any time.

Very Respectfully,

7im Wullen, PhD tmullen@opaak.com 907-644-5306