

Konrad Jackson

From: Bethany Buchanan <buchanandnp@gmail.com>
Sent: Tuesday, March 18, 2025 8:17 PM
To: Senate Labor and Commerce
Subject: SB 121

March 18, 2025

Members of the Senate Labor and Commerce Committee

Re: SB 121

Dear Committee Members,

Thank you for hearing SB 121: “An act relating to settlement of health insurance claims; relating to allowable charges for health care services or supplies; and for providing for an effective date”

I am a nurse practitioner in Anchorage, serving our community as a primary care provider for 27 years. I love my job and serving patients. I work in a privately owned medical office with seven nurse practitioners, all offering primary care. I am fearful if this new legislation takes place, that it may limit our ability to serve our community.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient, and our business (Avante Medical Center) relies on office visits and minor procedures as the bulk of our income. If rates drop, it may force us to close or limit Premara patients we see. I work very hard to offer excellent primary care and I don't want that to change – Anchorage and all of Alaska needs APRNs.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute.

Please help ensure consistency of reimbursement and equal pay for equal work so our office and others like it can stay in practice.

Thank you for hearing this bill! My colleagues and I stand in solidarity and support of uniform reimbursement and equal application of those standards for all health care providers.

I encourage you to pass this bill, SB 121 out of committee in its current form.

Respectfully,

Bethany Buchanan, DNP, APRN, FNP-C

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Bethany Buchanan, DNP, FNP

Avante Medical Center

907.770.6700

907.770.6707 fax

Emails are rarely read or addressed on Wednesdays.

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Konrad Jackson

From: Kelly Cerutti <kcerutti@avantemedical.com>
Sent: Tuesday, March 18, 2025 1:43 PM
To: Senate Labor and Commerce
Subject: SB121

March 18, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov
Alaska State Capital
Juneau, Alaska 99801

Dear Committee members,

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse, I work as a Family Nurse Practitioner at Avante Medical Center, providing primary and urgent care services to our local population. I also support our often underserved rural population via telemedicine services. Without this critical access, many rural patients go without care until it becomes emergent and increasingly costly.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary healthcare needs. This is contributing to a growing crisis in accessing primary care.

Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Kelly Cerutti, APRN, FNP-c

Kelly Cerutti, APRN, FNP-c
Avante Medical Center
kcerutti@avantemedical.com
907-770-6700

Konrad Jackson

From: Mary McQuilkin <mary.mcquilkin@gmail.com>
Sent: Friday, March 21, 2025 11:56 AM
To: Senate Labor and Commerce
Subject: Support Senate Bill 121

Senate Labor and Commerce Committee,

Thank you for hearing 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.”*

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse and certified Adult-Gerontology Primary Care Nurse Practitioner, I work as a Rural Itinerant Nurse Practitioner for Southcentral Foundation. In this role, I travel to remote clinics to help fill critical staffing shortages. Many of the tribally-operated rural clinics are continuously understaffed and face challenges including the high cost of living in remote communities, irregular access to transportation (infrequent flights with weather cancellations), and challenges collaborating with higher levels of care (such as blood specimens unable to be sent to a lab in Anchorage because planes were unable to fly for several days due to weather or broken aviation equipment).

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

Thank you for hearing this bill. I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully,

Mary McQuilkin, NP, MPH

Nurse Practitioner | Certified in Public Health

website: marymcquilkin.com

mobile: 443.743.5234

email: mary.mcquilkin@gmail.com

Konrad Jackson

From: Sara Krokos <sarakrokosnp@gmail.com>
Sent: Thursday, March 20, 2025 12:50 PM
To: Senate Labor and Commerce
Subject: SB 121

March 20th, 2025

Members of the Senate Labor and Commerce Committee
Alaska State Capital
Juneau, Alaska 99801
Dear Committee members

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advanced Practice Registered Nurse, I work as a primary care provider at Avante Medical Center caring for teenage to adult male and female patients seeking treatment for diverse medical needs including preventative care, chronic disease management and mental health. I am a relatively new nurse practitioner (5 years' experience) and continue to be surprised on how much the insurance of a patient dictates what we can provide as far as frequency of visits, medication options, referrals, etc. Insurance should not be the barrier to health and wellness, nor the barrier to exceptional health care providers. As a nurse practitioner, we are trained in holistic patient care, and so many of the new patients that seek our services do so for this reason exactly – they want to be heard, and cared for, in a way that other providers have not given to them. This is exactly why I love what I do and the patient's that I am honored to serve.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,
Sara Krokos, APRN, FNP-C

Sara Krokos, APRN, FNP-C
Family Nurse Practitioner
907.440.4300 cell/text

sarakrokosp@gmail.com

Konrad Jackson

From: Susan Bryan <susanbryandnp@hotmail.com>
Sent: Thursday, March 20, 2025 12:05 AM
To: Senate Labor and Commerce
Subject: SB 121

Dear Committee Members,

Thank you for hearing 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.”*

Advance Practice Registered Nurses (APRNs) are vital members of the health care system in Alaska. I am a licensed APRN in Alaska. I currently work as a psychiatric nurse practitioner at my own private practice, Empowerment Mental Health, in Anchorage, Alaska. I have worked as a nurse practitioner in Alaska since 2007. As a practice owner, I have found it is extremely difficult working with insurers for contract negotiations and most attempts to obtain adequate reimbursements from negotiations with insurance companies have been unsuccessful. Current reimbursement rates for providers, especially APRNs can make it a struggle for healthcare practices to cover expenses and remain in business. The facts are that the cost of running a business in Alaska is simply higher than other states. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly significant and results in fewer available providers to treat the mental health care needs of patients in Alaska. This is contributing to the lack of access to mental health care services in the state. It is also not encouraging APRNs to move to our state to work. Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.

I appreciate you hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Sincerely,
Susan Bryan, APRN

Susan Bryan, DNP, APRN, PMHNP-BC
Doctor of Nursing Practice/Psychiatric Nurse Practitioner

Konrad Jackson

From: Tara Bonardi <tara.bonardi@gmail.com>
Sent: Thursday, March 20, 2025 12:09 AM
To: Senate Labor and Commerce
Subject: Senate Bill 121

March 19, 2025

Members of the Senate Labor and Commerce Committee Senate.Labor.And.Commerce@akleg.gov
Alaska State Capital
Juneau, Alaska 99801

Dear Committee Members,

I hope this letter finds you well. I am writing to express my strong support for Senate Bill 121, which proposes that Advanced Practice Registered Nurses (APRNs) in Alaska receive equal reimbursement for the high-quality care they provide to patients. *“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.”*

I myself am an APRN specialized in anesthesiology. As a Certified Registered Nurse Anesthetist (CRNA). I can attest to the impact this bill would have in ensuring quality access to care, improving patient outcomes, and ensuring fairness in healthcare reimbursement.

Our Alaska APRNs are providers who practice independently within the scope of their education and training. They are key members of the health care system in Alaska, particularly in the practice of primary care and also in my specialty of anesthesia. Many Alaskan communities, especially those in remote locations, rely heavily on APRNs for primary care, specialty services, urgent care, and anesthesia. Although I work for a large healthcare system, my place of employment is located off the road system, at a critical access hospital (CAH) on Kodiak Island. Our anesthesia department has always consisted of only a few APRNs/CRNAs. Currently we have three CRNAs who are responsible for administering all of the anesthetics to our community. We not only administer anesthesia for both elective and emergent surgeries, but are available 24/7 to provide essential care to patients in other areas of the hospital such as the emergency room. Without our small but crucial department, patients would require air transfer and care delayed.

Anesthesia services are provided according to the same standard of care, whether administered by a physician or an APRN/CRNA. This holds true for all APRNs. However, a disparity exists in the reimbursement rates for services provided by APRNs compared to those provided by physicians. Senate Bill 121 is an essential step in rectifying this inequity and ensuring that all healthcare professionals are compensated fairly for the care they deliver.

Equal reimbursement for APRNs will not only foster a more equitable healthcare system but will also improve access to care, particularly in underserved and rural areas of Alaska.

The COVID-19 pandemic has underscored the importance of a robust healthcare workforce, and APRNs have been integral to responding to this public health crisis. Equal reimbursement would recognize our contributions and help strengthen the overall healthcare system, providing greater stability and sustainability for healthcare providers and patients alike.

I strongly urge you to support Senate Bill 121 and champion equal reimbursement for APRNs in Alaska. By doing so, you will ensure that all healthcare professionals are valued equally, while also advancing better healthcare for all Alaskans.

Thank you for your time and consideration of this important issue. Should you have any questions or need further information, please do not hesitate to contact me at (774) 239-4106 or tara.bonardi@gmail.com. I am more than happy to discuss the positive impact of this bill further.

Respectfully,

Tara Bonardi
Certified Registered Nurse Anesthetist / APRN
Providence Kodiak Island Medical Center

March 23, 2023

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov
Alaska State Capital
Juneau, Alaska 99801
Dear Committee members

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse, I work as a Pediatric Nurse Practitioner at Alpine Medical Group, and care for patients with private insurance, as well as Medicaid and Medicare recipients. I have a DNP degree (Doctor of Nursing Practice) and post-graduate certifications in pediatric mental health and neurodevelopmental disabilities. Furthermore, I am a team member on the Interior of Alaska’s Fetal Alcohol Spectrum Diagnostic (FASD) Team. This is an unpaid, voluntary position that serves children from the entire northern half of Alaska, including rural villages. As such, much of my patient population experiences autism and chronic neurodevelopmental and behavioral health conditions. I pride myself in offering excellent care to my patients and their families, which requires time and dedication, and can be incredibly stressful and overwhelming given the complex and rapidly changing healthcare climate in the United States and Alaska.

While my clinic days are filled with 8-9 hours of direct patient care, much of my evenings and weekends are dedicated to documentation, navigating insurance requests, coordinating with other members of the patient care team, and reviewing diagnostic testing results to deliver care in a timely manner during business hours. Given the limited resources in Alaska, my role in the community includes resource attainment and advocating for my patients to receive services that are limited or difficult to obtain. My roles in the community are diverse, require years of training and knowledge, and carry the same responsibilities as those of my MD and DO colleagues.

Furthermore, I owe hundreds of thousands of dollars in student loans for my 11 years of higher education, similarly to many MD and DO graduates. The mental, physical, and financial burdens placed on Nurse Practitioners is akin to that of the medical doctors providing care in our community and deserves to be compensated in kind.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

**Respectfully Submitted,
Sarah E. Evans, DNP, APRN, CPNP-PC, PMHS, CNE**

March 18, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse, I work as an integrated psychiatric nurse practitioner at the Benteh Nuutah Valley Native Primary Care Center with Southcentral Foundation (SCF). In May of 2023, I flew from Utah to Alaska to interview with SCF. After three months of contract negotiations, I accepted the offer and moved with my family to Palmer, Alaska. I quickly learned that in the last five years, there have been over four nurse practitioners in my specific role. It is difficult for providers in my role to continue more than the minimum required time of their signed contracts. Over the past few years, I have cultivated various relationships within my consult liaison position, and currently support over 20 primary care providers in the management of various psychiatric conditions, including addiction. I have seen many providers leave both SCF and the state due to lack of administrative support, low paying salaries, and high cost of living. In comparison to Utah, I have noticed very few APRNs in Alaska are able to open and sustain a private practice or employment within various types of healthcare organizations.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Andrea Farmer MSN, DNP, APRN, FNP-C, PMHNP-BC



Alaska APRN Alliance
PO Box 240443
Anchorage, AK 99524

March 18, 2025

Senator Jess Bjorkman
Chair, Senate Labor and Commerce Committee
120 4th Street
Alaska Capitol
Juneau, AK 99801

Dear Senator Bjorkman and Members of the Senate Labor and Commerce Committee,

Thank you for hearing 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."* today in your committee.

The Alaska Advanced Practice Registered Nurse Alliance strongly supports the passage of this bill as it would ensure reimbursement rates are equitably applied for health care services 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.

The most recent licensing data from the Alaska Board of Nursing indicates that there are over 2600 Advanced Practice Registered Nurses (APRN's) in the State of Alaska. Of this number, a majority (approximately 2400) are Certified Nurse Practitioner (CNP's) who are practicing in primary care settings. CNP's 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 CNM's licensed in Alaska as of 11/30/2024. The two other types of APRN's in Alaska are Certified Nurse Anesthetist and Clinical Nurse Specialists. Both have important roles in the delivery of health care in rural critical access hospitals and inpatient care across Alaska.

APRN's are vital members of the health care system in Alaska. They 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 APRN's can continue to provide care in Alaska.

We thank you again for hearing this bill and the APRN Alliance stands in full support to pass this bill out of your committee.

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, Board of Directors Alaska Advanced Practice Registered Nurse Alliance
Chair, Legislative and Health Care Policy Committee

March 18, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse, I work as a CRNA at several different facilities in Anchorage. I have worked at Alaska Native Hospital, currently work at both Providence and Alaska Regional as well as 3 different surgery centers in Anchorage. Being an independent contractor allows me to provide services in many settings, to many different types of patients. I have often negotiated contracts and been told that I can not obtain the rates that I am seeking because of reimbursement issues or payer reimbursement. When providing the same services as physician colleagues reimbursements should be paid the same. CRNAs often provide services in under served areas which is vital to the health of communities in rural Alaska. Similarly owning and operating individual practices comes with challenges of obtaining a physical location, or hiring staff, all things that a necessary and rates should reflect such.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Ashley Burhans

March 16, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov
Alaska State Capital
Juneau, Alaska 99801

Dear Committee members,

Thank you for hearing 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.”***

Advanced Practice Registered Nurses (APRNs) are registered nurses with advanced education at the master’s or doctoral level who provide high-quality health care to individuals and families. APRNs have been licensed to practice independently since 1984 and are vital members of the health care system across Alaska. Many of us have our own practices or work in group practices with physician colleagues and/or physician associates.

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.

Current reimbursement rates are insufficient to remain in business and thus both physician and APRN practices are closing across the state. This is contributing to a growing crisis in accessing primary care for Alaskans. Ensuring consistency of reimbursement and equal pay for equal work is critical to ensure that APRNs can continue to provide care in Alaska.

Thank you for hearing this bill; we stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. We encourage you to pass this bill out of committee in its current form so clinics can remain open to serve Alaskans deserving medical care.

Respectfully,

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



March 19, 2025

Members of the Senate Health and Social Service Committee
Senate.Health.And.Social.Services@akleg.gov
Alaska State Capitol
Juneau, Alaska 99801

Dear Committee Members,

Thank you for hearing 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 (APRN), I am a board-certified Adult-Gerontology Primary Care Provider and the owner of Belle Medical, LLC, a primary care practice in Anchorage. When I opened my practice four years ago, I initially operated on a cash-only basis. At that time, I did not have the staff or resources to manage the complexities of insurance claim submission, verification, and the other administrative burdens that come with billing insurance as a primary care provider.

However, as I began seeing more patients, I recognized that in order to truly improve access to care and make our community healthier, I needed to accept insurance. Since making that transition, I have been able to expand access to high-quality primary care for my patients, many of whom rely on insurance for their healthcare needs.

While I am committed to growing my primary care practice and serving my community, the overhead costs associated with insurance billing are significant. Maintaining a practice that accepts insurance requires substantial resources, including staff for billing and insurance pre-authorization, front office personnel, medical assistants, rent, utilities, and other operational expenses. At current reimbursement rates, it is becoming increasingly difficult to sustain this model while continuing to provide high-quality care and keeping my doors open to new and existing patients.

APRNs are vital to Alaska’s healthcare system, particularly in primary care. We provide comprehensive, independent care across the state, in both urban and rural settings. However, reimbursement disparities between APRNs and physicians place additional strain on APRN-owned practices, leading to provider shortages and further limiting access to care.

I strongly urge you to support SB 121 and ensure equal reimbursement for equal work. Addressing these disparities is critical to maintaining access to primary care services in Alaska. I



appreciate your time and consideration and encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Brianna Clendenin, APRN
Owner, Belle Medical, LLC

2600 Denali St Suite 101, Anchorage, AK 99503

March 23, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.”*

Advanced Practice Registered Nurses (APRNs) are vital to Alaska’s healthcare system, especially in the delivery of primary care. Licensed to practice independently, APRNs provide essential services in both rural and urban areas, often operating their clinics or working alongside physicians and physician assistants. In a state with vast geography and limited access to care, APRNs play a critical role in reaching underserved populations.

As a Nurse Practitioner at the Alaska Native Tribal Health Consortium (ANTHC), I work in inpatient and outpatient settings, primarily within the General Surgery and Trauma Service. I care for patients facing acute injuries and surgical emergencies, while also focusing on prevention and follow-up to reduce complications and improve long-term outcomes. I serve patients from across Alaska, many of whom travel long distances from remote communities with limited healthcare access. These patients often experience significant barriers, including geographic isolation, limited provider availability, and long wait times for follow-up care.

Despite working within a large healthcare organization, I witness daily how delayed reimbursements and complex insurance requirements strain our ability to deliver timely care. Even with dedicated billing and pre-authorization teams, the administrative burden pulls critical resources away from direct patient services. The high cost of staffing surgical and trauma care, combined with recruitment challenges driven by Alaska’s high cost of living and housing shortages, makes it even more difficult to meet patient needs—especially in rural and remote regions.

Unequal reimbursement rates further compound these issues. APRNs are reimbursed at significantly lower rates than physicians for the same services despite delivering high-quality, comprehensive care. This disparity makes it increasingly difficult to recruit and retain qualified APRNs, even at large organizations like ANTHC which contributes to a growing shortage of healthcare providers across the state. Referral lists are long, and patients with urgent needs often wait weeks or months for appointments. Many primary care practices are being forced to scale back or close altogether due to unsustainable reimbursement rates. This is contributing to a healthcare access crisis in Alaska. Ensuring fair and consistent reimbursement and equal pay for equal work is essential not only to support APRNs but also to preserve access to care for all Alaskans, especially those in rural and underserved communities.

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Caryn Hafer DNP, FNP-BC, APRN

March 17, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.”***

Advanced Practice Registered Nurses (APRNs) are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many APRNs have their own practices or work in group practices with physician colleagues and/or physician assistants.

As a lifelong Alaskan and future APRN currently enrolled in the Masters of Nursing program at the University of Alaska Anchorage (UAA), I hope to be a part of the solution for Alaska's provider shortage. UAA's program graduates homegrown providers that are trained to care for Alaskan's unique needs. With my graduation and hopeful entry to practice as an APRN in 2027, I have to look ahead and consider the sustainability of practice in my home state given the high cost of practice and lower reimbursement rates as an APRN.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient for many to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska and to retain essential providers in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Hope Meyn, RN

Hope Meyn, RN, BSN, current APRN/MSN student

March 19, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advanced Practice Registered Nurse, I work as a family nurse practitioner at the University of Alaska Anchorage Student Health and Counseling Center (SHCC). SHCC promotes optimal health for the University community through access to high quality and affordable health care, preventative health care, individual counseling, consulting, outreach, and health education. The clinic serves students on a limited budget. The beginning of Fall 2024, SHCC implemented an administrative/usage fee of \$10 to bridge budgetary gaps and cost share amongst students who most utilize our services as SHCC is only partly covered by student fees. Student feedback suggests the fee has reduced accessibility to some.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Jordan Cannone, DNP, APRN
Family Nurse Practitioner
UAA Student Health and Counseling Center

March 19, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov
Alaska State Capital
Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.

APRN's are vital members of the health care system in Alaska. APRNs practice independently in urban, rural, and remote communities across the state. 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 APRN's 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.

Personally, I work as a Palliative Care APRN Specialist. Palliative Care is a medical specialty that supports patients and their chosen loved ones as they navigate serious illnesses, such as cancer treatment. It is a team-based approach focused on value of care with the assumption that good care is the best care. As a specialist, I function independently from my physician colleagues. My current employer is Providence Medical Group in Alaska, but I have contemplated independent practice in the community. Unfortunately, though, reimbursement for my services is not equitable to my physician colleagues, and this makes running a community-based clinic fiscally impossible. A clinic requires the same number of employees, insurance, overhead, benefits, etc., whether it is physician or APRN owned. Thus, reimbursement inequality hinders the ability for medical clinics to thrive and provide the care where it is needed.

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

Respectfully submitted,

A handwritten signature in cursive script that reads "Marianne Johnstone-Petty".

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

March 19, 2025

RE: SB 121

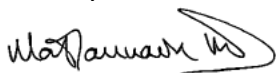
Dear Sir/Madam:

I am writing you as a 53-yr resident of Soldotna...someone who grew up here, went outside for schooling, then returned home. I have been a practicing physician, a dermatologist/Mohs Surgeon here in Soldotna since 2005 and hope to retire here one day. I love taking care of patients and families I grew up with...providing the same level of care someone would get at any major university center in the Lower 48.

My office is in danger of closing owing to shrinking reimbursement. While inflation has occurred every year and the cost of supplies like sutures, liquid nitrogen, gauze...and expenditures such as health insurance has grown exponentially (27% increase in health insurance rates, 2025-2026)...our reimbursement is CUT each year. Currently we are speaking with Northrim for a line of credit as we are finding ourselves short for monthly payroll. I am a physician...and there is this myth that doctors are wealthy. In reality...high-school educated Slope workers, even UPS drivers...are more financially stable than those of us in private practice. Were I to work for a hospital, where I could charge 50 times more for doing the same thing I do currently in my office (facility fees, etc)...I would be thriving. In the interest of providing exceptional care without enriching administrative folks who do nothing in terms of patient care (CPGH CEO)...I choose to continue in my small private practice. This is far more cost-effective in terms of healthcare. When someone comes in that has no money...I can choose to simply take care of them...rather than the bureaucratic mess they'd find themselves in in a large hospital-type setting. As noted, I don't charge a "facility fee," and my base rates are infinitely lower as well.

Insurance companies fight tooth and nail to deny care, or pay as little as possible...we deal with this EVERY DAY. When they say the 80th percentile rule enriches doctors...they are again fighting to squeeze every dime out of the health care system they can. This is how Michael Neidorff of Centene made \$24,956,77 in 2020...and David Cordani of Cigna made \$19,929,493. Can you imagine making that in ONE YEAR??? Meanwhile we are having to take a LOC to make payroll.

While they are wondering what their next yacht is going to be...I'm hoping I can pay my staff and remain open. SB 121...establishing the 75% percentile as the minimum allowable...is but a drop in the bucket...but it's the LEAST you could do to help those of us that actually provide health care...not the insurance CEO's and administrators who do NOTHING to actually care for patients. Sincerely,



March 19, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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.”***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse, I work as a primary care provider at a private-practice non-profit clinic in Anchorage Alaska serving underserved Alaskans of all ages throughout the state. As a non-profit clinic we are unable to compete with for-profit clinics and large hospital facilities to hire and retain providers or support staff such as CMA's and front desk staff yet we meet the same volume of care and standards of care. We also struggle to support billing at the current level of reimbursement. It is a constant struggle to stay open and provide life-saving care for an underserved community and population.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary healthcare needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to ensuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Monica Perez-Verdia, APRN, NP-C

March 21, 2025

Members of the Senate Labor and Commerce Committee: Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Chairman Bjorkman and the Members of the Senate Labor and Commerce Committee,

Thank you for hearing 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.”*

APRNs are vital members of the health care system in Alaska. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants. APRNs are vital to providing primary care services including behavioral health services. **!**

As a licensed Advance Practice Registered Nurse, I work as a psychiatric APRN for Providence St. Joseph Health at Providence Alaska Medical Center. I have worked for Providence in the inpatient as well as outpatient practice settings, and the need for mental health providers is great and continues to rise as social and health problems continue to plague our population. There are nowhere near enough psychiatrists or psychiatric/mental health nurse practitioners available to meet this need in urban Alaska, much less in the more remote parts of the state. As an advanced practice registered nurse, I am licensed to make diagnoses, prescribe medications, and perform psychotherapy - all within the scope of my education and practice. This is the same work that is performed by my psychiatric colleagues in the same setting. My patients are people in crisis, and the population that I treat are adolescents and adults age 13 and up.

My primary workplace is the inpatient mental health unit at Providence. I work in tandem with a psychiatrist on the unit, and the charges for services that I provide are the same as my physician counterparts. However, the reimbursement for my services are significantly lower, even though the costs of providing that care and service are the same.

While reimbursement is a problem for a large facility such as Providence, it is more pronounced in outpatient practices. With reimbursement rates significantly less, the effect on APRN practices is particularly acute resulting in fewer available providers outside large institutions to care for patients with behavioral health needs. This is contributing to a growing crisis in accessing mental health care, a need that continues to grow. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,

Nancy H. Magrath, PGC-NP, APRN, PMHNP-BC, CNS-BC

Commented [SW1]: Behavioral health is considered primary care. This is the message we want to keep honing in on, thus I have offered this change.



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Fax: 907-374-0854

March , 2025

Chairman Jesse Bjorkman and Committee Members
Senate Labor and Commerce Committee
120 4th Street
Alaska Capitol Room 121
Juneau, AK 99801

Dear Senator Bjorkman and Committee Members,

This letter is in support of 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."*

Advanced Practice Registered Nurses (APRN's) specialized as Psychiatric Mental Health Nurse Practitioners (PMHNP's) are qualified to assess, diagnose and treat patients with undifferentiated symptoms. Mental health care is recognized as a high needs area of specialization.

As an APRN with specialization as an PMHNP operating a small business, I am in a unique position to speak directly to the issues put forward in this bill. ND Systems Incorporated is a clinic system serving a population 57% covered by Medicaid and Medicare in three communities, Anchorage, Fairbanks and Kenai. Our Mission includes the commitment to supporting the next generation of clinicians and to attract new talent into the Alaskan market of providers. However, the current industry model struggles and has proven to be inadequate to serve the public need.

ND Systems, Inc has been in operation since 2012. It started is a personal private practice in Fairbanks and has since grown to three clinic sites and more than 20 employees for two reasons. The first is the need for new and early career clinicians to have a place to gain their professional experience as clinicians and providers. The second is to attempt to meet the demand for outpatient mental health services that serve children, teens, adults, and elders. This growth has been 100% driven to serve the needs of new and early career clinicians and our communities.

Though the needs are there, the inequity in reimbursement amongst various providers has created a fragile and brittle reimbursement system for providers and the ability to remain sustainable. The various barriers set up by the payment systems both private and governmental impact the most vulnerable of our clinician pool, new and early career clinicians.

Fairbanks

Kenai

Anchorage

Telehealth Available





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Yesterday, March 19, marks the one year anniversary of the layoff of 70% of ND Systems clinical staff as a result of the impact of the cyberattack of ChangeHealthcare. Why would this be an issue? It is an issue because there is no deep financial reserves possible without a viable, equitable reimbursement structure. Our business costs are similar to all other private practices regardless of the provider licensure and in our experience working with new and early career clinicians impedes our ability to have adequate margins which might explain why the willingness to hire without two years of experience is the norm in the industry.

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.

The passage of SB121 allows for equity of reimbursement reflecting equal pay for equal work. Passage of this bill will empower APRN's to be able to continue to provide care in Alaska. This will also allow for more sustainable margins that will assist in the support of the workforce development of new and early career clinicians.

Thank you again for your consideration of this bill. I stand in support of uniform reimbursement standards and equal application of those standards.

Respectfully submitted,

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

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March 18, 2025

Members of the Senate Labor and Commerce Committee:

Senate.Labor.And.Commerce@akleg.gov

Alaska State Capital

Juneau, Alaska 99801

Dear Committee members

Thank you for hearing 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."***

APRNs are vital members of the health care system in Alaska, particularly in the practice of primary care. APRNs are licensed to practice independently in rural and remote communities across the state as well as in urban centers. Many of us have our own practices or work in group practices with physician colleagues and/or physician assistants.

As a licensed Advance Practice Registered Nurse, I work as a Mental Health Nurse Practitioner at ND Systems and work mainly with children.

The costs related to running a business are the same regardless of qualifications. As nurse practitioners we don't get discounts on rent, utilities, or salaries. Working in small communities it is hard to attract employees to work and requires higher salaries to compensate. Our reimbursement from insurance companies is not equal even though expenses are the same.

Current reimbursement rates for primary care providers, especially APRNs are not sufficient to remain in business and thus health care practices are being forced to close. With reimbursement rates significantly less than physicians, the effect on APRN practices is particularly acute resulting in fewer available providers to care for those patients with primary health care needs. This is contributing to a growing crisis in accessing primary care. **Ensuring consistency of reimbursement and equal pay for equal work is critical to assuring that APRNs can continue to provide care in Alaska.**

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I thank you for hearing this bill and I stand in support of uniform reimbursement standards and equal application of those standards for all health care providers. I encourage you to pass this bill out of committee in its current form.

Respectfully submitted,
Sharon Geraghty
APRN, PMHNP

Fairbanks

Kenai
Telehealth Available

Anchorage



Spine Care Specialists of Alaska
2310 Peger Road, Suite 104
Fairbanks, AK 99709
Ph: 907-456-3876 Fax: 907-456-3877

March 21, 2025

Senator Dunbar

Senator Bjorkman

RE: Senate Bill 121

Dear Senator:

I am writing this letter in support of Senate Bill 121. 2024 was my worst year of reimbursement which is frankly unsustainable moving forward. My practice expenses are rising quickly at probably 10% over each year. Given the declining reimbursement, I have had less personal home income over the same period. I am totally unable to recruit new neurosurgeons to my practice given the declining economic situation in Alaska.

I have tried to negotiate with insurance companies unsuccessfully. I am concerned that in the near future I may have to close my practice given the deteriorating financial situation for me in Alaska. Given the lower reimbursement, it will be more difficult for me to serve medicare and medicaid patients since my economic situation is declining.

I am the only neurosurgeon in Fairbanks, Alaska and I want to stay in Fairbanks, Alaska but I do need to operate with positive margins. Please help me to continue to do this with passage of Senate Bill 121.

Thank you for your time and consideration. I am happy to discuss further.

Sincerely,

John A. Lopez, MD
JAL/lrh

cc: