

Alaska Native Health Board

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Honorable Lyman Hoffman, Senate Finance Co-Chair
Honorable Bert Stedman, Senate Finance Co-Chair
Senate Finance Committee
Alaska State Legislature
Juneau, Alaska 99801

RE: Energy Assistance Need

Dear Co-Chairs Hoffman and Stedman and Members of the Senate Finance Committee:

The Alaska Native Health Board (ANHB) thanks the Senate Finance Committee for introducing and expresses support for SB 115 and SB 116.

ANHB represents 24 regional and village tribal health organizations that provide direct care services and programs to approximately 130,000 Alaska Natives and American Indians and to non-Native residents in most of the rural/remote villages in Alaska.

Village clinics and regional health organizations are experiencing extreme energy-related hardships with as a second year of high energy costs set in. As they struggling to balance budgets, many have had to cut direct patient services, reduce spending on medical supplies, and, in the worst instances, close clinics. I'll give you a few examples of these struggles.

- Maniilaq Association, which represents the hub village of Kotzebue and 11 surrounding villages, has seen fuel prices increase by 45%. The cost of electricity has increased 28%, along with office space rent. Maniilaq is estimating the increased cost in energy from last year to this year at \$2.1 million.
- Eastern Aleutian Tribes, Inc. represents eight remote villages along the Aleutian Chain and Whittier. Transportation fuel costs have risen more than 35%. As a result, many of their grants have spent 75% of their total budget in just the first eight months of the year. The Adak clinic has been open on an intermittent basis. It is one example of the impact high fuel and utility costs are having on direct patient services. The ability of the clinic to pay staff salaries has created retention and recruitment problems.
- Tyonek employs one Community Health Aide. Their energy costs have increased substantially, but they have been able to maintain clinic hours. However, they are experiencing rising supply costs due to freight charges causing changes to supplies orders.
- Bristol Bay Area Health Corporation (BBAHC) serves Dillingham and 34 villages in the area. BBAHC's village cost of living increases directly related to energy and fuel costs range from 206% to 376% above the Anchorage cost of living index. Facing their very first unbalanced budget, BBAHC recently laid off 18 employees and reduced hours for six employees. To

ALASKA NATIVE TRIBAL HEALTH CONSORTIUM
ALEUTIAN/PRIIBILOF ISLANDS ASSOCIATION
ARCTIC SLOPE NATIVE ASSOCIATION
BRISTOL BAY AREA HEALTH CORPORATION
CHUGACHMIUT
COPPER RIVER NATIVE ASSOCIATION
COUNCIL OF ATHABASCAN TRIBAL GOVERNMENTS
EASTERN ALEUTIAN TRIBES

KARLUK IRA TRIBAL COUNCIL
KENAITZE INDIAN TRIBE
KETCHIKAN INDIAN COMMUNITY
KODIAK AREA NATIVE ASSOCIATION
METLAKATLA INDIAN COMMUNITY
MT. SANFORD TRIBAL CONSORTIUM
NATIVE VILLAGE OF EKLUTNA
NATIVE VILLAGE OF TYONEK

NINILCHIK TRADITIONAL COUNCIL
NORTON SOUND HEALTH CORPORATION
SELDOVIA VILLAGE TRIBE
SOUTHCENTRAL FOUNDATION
SOUTHEAST ALASKA REGIONAL HEALTH CONSORTIUM
TANANA CHIEFS CONFERENCE
YUKON-KUSKOKWIM HEALTH CORPORATION
VALDEZ NATIVE TRIBE

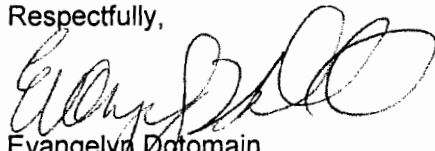
offset increased fuel and electricity costs experienced by village clinics, BBAHC increased Indian Health Service village lease payments by ten percent. Patient travel, medevac services, fuel oil and electricity combined are \$1 million above BBAHC's FY 2008 budget.

ANHB is also concerned about the toll high energy costs are taking on individual families. As households struggle with home heating and other energy costs, some families are deciding to close their homes and move in with relatives. Combining households means more people are living together in close quarters, raising public health issues. In these circumstances, the risk of spreading communicable diseases, including respiratory disease and skin infections, increases dramatically. Another concern is persons who are dependent on durable medical equipment (such as respirators) for chronic conditions are choosing to limit their hours of use because of high electric rates, which risks their health and, in the long run, puts the patient at risk for more invasive treatment.

Alaskans who live in rural/remote areas of the state count on the health systems in their communities for a complex array of health services. For most of rural Alaska, that is the tribal health system. As you consider energy assistance to the part of Alaska most challenged during high energy costs, we respectfully request you craft a solution that includes energy assistance for rural health facilities.

If we can provide any additional information or assistance please feel free to contact me at 907-562-6006 or via e-mail at edotomain@anhb.org.

Respectfully,

A handwritten signature in black ink, appearing to read 'Evangelyn Dotomain', written over a horizontal line.

Evangelyn Dotomain
President/CEO