



## **Organized Village of Kake**

**P.O. Box 316**

**Kake, Alaska 99830-0316**

Telephone 907-785-6471

Fax 907-785-4902/www.kake-nsn.gov

**(Federally Recognized Tribal Government serving the Kake, Alaska area)**



February 9, 2021

The Honorable David Wilson  
Chairman, Senate Health & Social Services Committee  
Alaska Senate  
State Capitol Room 121  
Juneau, AK 99801  
Via Email: [Senator.David.Wilson@akleg.gov](mailto:Senator.David.Wilson@akleg.gov)

***RE: Senate Bill 56 to Extend the COVID-19 Public Health Disaster Emergency***

Dear Chairman Wilson,

The extension of the public health disaster emergency (PHE) is vital for administrative, regulatory, and statutory flexibilities that have allowed Alaska to respond quickly and successfully to the COVID-19 pandemic. Alaska is leading the way in responding to the pandemic and it is vital that we continue to do so. The Organized Village of Kake, the federally recognized Tribe for Kake, AK is writing in support of Senate Bill 56 and its swift passage to continue these flexibilities.

As the federally recognized Tribe for the Village of Kake, Alaska, OVK provides a broad range of programs and services for Tribal and community citizens, including Lingit culture and language programs, a variety of social service and general assistance programs, alcohol and substance abuse programs, natural resource programs, domestic violence programs, and Tribal court.

The State's PHE has allowed for a series of flexibilities that have allowed for Governor Dunleavy's administration, specifically the Department of Health & Social Services and the Department of Commerce, Community and Economic Development, as well as health care providers and facilities to respond effectively to COVID-19. A few of the important flexibilities made available by the PHE are:

**Vaccine distribution** – The powers authorized under the State PHE allow the governor to control the distribution of scarce resources, including scarce COVID-19 vaccines. Without the State PHE, the Department of Health and Social Services will not be able to distribute the COVID-19 vaccine using the State Vaccination Distribution Plan which prioritizes vulnerable populations, such as our Elders and our first responders.

**Vaccine administration** – The State PHE does not just support the distribution of the COVID-19 vaccines, it also provides essential flexibility to allow more provider types to be able to administer vaccines. This includes the ability to deploy the Alaska National Guard for contact tracing efforts and vaccine administration.

**Provider licensing flexibilities** – Under the PHE, providers have received expedited, limited-use licenses that have reinforced Alaska's health care workforce during a time of severe strain. Alaska has fewer health care professionals per capita than most states, and there was a chronic need for providers in Alaska even before the pandemic.

**Telehealth provision and reimbursement** – The State's PHE also allows patients to see providers for telehealth services without first having an in-person visit. This has been important to keep patients and providers safe during the pandemic, but it has also allowed providers to bill third party payors, providing much needed funding to clinics who have seen patient visits decline dramatically during the pandemic.

**Continued provision of medication assisted treatment for patients with substance use disorders** – 12 AAC 40.943 allows a provider to see and prescribe controlled substances used as part of medication assisted treatment for substance use disorders via telemedicine during a declared disaster emergency without conducting required in-person exams. This flexibility has been used by rural providers to ensure patients do not have to go without treatment and can remain safe during the pandemic.

**Alternate Care Sites** – The State's PHE has been a vital component for standing up Alternate Care Sites (ACS) used for testing and treating patients for COVID-19 in non-traditional locations based on their clinical needs. For example, this flexibility allowed the State to establish a field hospital in King Salmon during the fishing season to help ensure local providers had the staffing and capacity to identify and treat COVID-19 in migrant workers. Generally, it has allowed for hospitals to establish an ACS that separates COVID-19 related care and treatment from non-COVID-19 care, keeping patients and providers safe.

**Quarantining Sites** – The State PHE also has made it possible to quickly stand up Quarantining Sites for COVID-19 patients during their isolation period. Without the State PHE, it would become significantly more difficult to stand these sites up, especially in our rural hub communities. This flexibility also supports local hospitality businesses which have suffered greatly due to decreased tourism during the pandemic.

**Travel** – The State PHE also made it possible to limit travel to Alaska and to our vulnerable rural, remote communities. These limitations have continued to protect rural communities in Alaska, especially those with community-based water and sanitation facilities, which face an increased risk of community-based transmission. Many of our rural communities cannot access the treatment options available at acute care facilities in a timely manner, making prevention from exposure to COVID-19 vital to individual and public health.

The State's PHE and flexibilities are distinct from the public health powers of local governments and the federal government, but necessary to allow the State to respond effectively to the pandemic. We urge swift passage of Senate Bill 56 by the Alaska State Legislature.

If you have any questions regarding this information, please contact Dawn Jackson, OVK Executive Director at [ed@kake-nsn.gov](mailto:ed@kake-nsn.gov).

Gunalcheesh,



Joel Jackson  
President

CC: Senate Health & Social Services Committee Members  
Alaska Senate  
Alaska House of Representatives