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February 11, 2022

House Health & Social Services Committee  
Alaska Legislature  
Juneau, AK 99801

RE: HB265 Support

Dear Reps Snyder, Zulkosky, Spohnholz, Fields, McCarty, Prax, Kurka;

During the COVID-19 pandemic, changes made to expand Medicaid coverage of telehealth services have proven invaluable to many Alaskan seniors. Telehealth has brought care to patients, rather than having patients travel and put themselves and others at risk for possible exposure. Greater use of telehealth services should continue to increase access to healthcare, facilitate the sharing of clinical information for evaluation, and allow more older Alaskans to remain in their homes and communities.

**AARP supports telehealth policies that expand access and improve quality of care for patients; improves the ability to live at home or in community; and/or enhances the skill level, health, and wellbeing of family caregivers.** HB265 checks all those boxes, and we thank you for working on it. The following policies were approved for Medicaid coverage in Alaska during the public health emergency period, and we are grateful for their inclusion in HB265 to ensure these changes are retained as permanent changes to our state's telehealth Medicaid policy:

- Requiring all services that can be performed appropriately by telehealth be covered by Medicaid, if it is covered for in-person visits.
- Allowing any licensed healthcare provider to perform telehealth visits as long as it is appropriate for their professional standards of care.
- Ensuring audio-only telehealth interactions may be reimbursed for certain services, as it improves access to people living in areas without sufficient broadband service and those who may not be able to afford or use devices that allow video technology.
- Allowing and reimbursing for "Store-and-forward", or asynchronous telehealth services
- Allowing and reimbursing for remote patient monitoring services
- Allowing the patient-provider relationship to be established via telehealth.
- Allowing telehealth for services such as physician visits in skilled nursing facilities; hospital initial, subsequent, observation, and discharge evaluations; emergency department and critical care services.
- Expanding coverage to include telephone and online digital check-ins.
- Allowing telehealth for face-to-face encounters for case management services.

- Lifting “originating site” restrictions so patients can access care from anywhere in the state, including their home, a long-term care facility, or elsewhere.
- Providing for patient choice of in-person or telehealth service delivery.
- Allowing care coordination and appropriate service delivery under Home and Community Based Waivers.

On behalf of the fastest growing senior population in the nation and our 77,000 AARP Alaska members, and for the benefit of all Alaskans, AARP Alaska thanks you for your leadership on this issue. We urge your support and action to move and pass HB265 Healthcare Services by Telehealth.

Respectfully,  
Marge Stoneking  
Advocacy Director, AARP Alaska



# Alaska Regional Coalition

*Representing 100 Communities*

February 15, 2022

The Honorable Ivy Spohnholz  
Representative  
Alaska State Legislature  
Alaska State Capitol  
Juneau, Alaska 99801

**Subject: Alaska Regional Coalition SUPPORT for HB265 Health Care Services by Telehealth**

Dear Representative Spohnholz:

The benefits of telehealth in rural Alaska cannot be overstated. Indeed, while telehealth improves access and outcomes for Alaskans from all corners of the state, it is especially helpful for delivery of health care services in the state's most remote locations. This was true before the covid-19 pandemic and more so today now that a whole new universe of people discovered the benefits of medical and behavioral telehealth. Among its many benefits: It facilitates increased utilization, reduces missed appointments, and increases overall wellness.

The Alaska Regional Coalition, a consortium of four Alaska Native regional nonprofits and one regional tribe – three of whom are tribal health organizations – offers its unqualified support for HB265 Health Care Services by Telehealth.

Making the statutory changes to advance access to health care by telehealth is a priority to the individuals and communities we serve. We appreciate you bringing this bill forward. Please let us know how we can help.

*Ana baasee', Gunalchéesh, Háw'aa, Quyana*, for your work on this important issue.

Respectfully,

Chief/Chairman  
**Tanana Chiefs Conference**

Melanie Bahnke, President/CEO  
**Kawerak, Inc.**

Tim Gilbert, President/CEO  
**Maniilaq Assn.**

Jan Vanderpool, Executive Director  
**Chugachmiut**

Richard Peterson, President  
**Central Council Tlingit & Haida  
Indian Tribes of Alaska**

*The Alaska Regional Coalition is a consortium of four Alaska Native regional tribal nonprofits and one regional tribe – Tanana Chiefs Conference, Maniilaq, Kawerak, Chugachmiut, and Central Council Tlingit & Haida Indian Tribes of Alaska. We are all recognized by the U.S. Indian Self-Determination Act to provide medical, behavioral, social, public safety, workforce development, and judicial supports to the State of Alaska through contracts, compacts, and grants. The coalition represents 65,000 Alaskans and 100 communities from Ketchikan to Kotzebue. We provide services to all the people in our communities.*



February 2, 2022

Representatives Liz Snyder & Tiffany Zulkosky  
Co-Chairs  
House Health & Social Services Committee  
Alaska State Capitol  
Juneau, Alaska 99801

**Re: HB 265 Telehealth Legislation**

To Co-Chairs & HSS Committee Members,

My name is Amanda Spickler and I am writing to request your support for House Bill 265. The passing of this bill would allow telehealth access to be expanded to health care providers licensed in another state, if referred by a health provider with an Alaska license in good standing.

My husband and I were born and raised in Juneau and we are raising our young family here. Our children are 5<sup>th</sup> generation Alaskans. When our son was 5, we began to notice some peculiar behaviors. After extensive research, we were fairly confident he was displaying signs of OCD. We reached out to every pediatric psychologist in Juneau and several others throughout Alaska, none of whom were familiar with diagnosing or treating OCD. This in itself is alarming; according to the International OCD Foundation, 1 in 40 adults and 1 in 200 children face OCD.

Wanting the best for our child, we traveled out of state to seek professional help and to be seen by an OCD specialist. The therapist was able to properly diagnose our child and provide us with the education and tools to help him. She essentially trained us how to do ERP (exposure response prevention) which is the gold standard for treating OCD. We have flown to Seattle around half a dozen times to meet with this specialist and confirm we are still helping our child to the best of our ability. As he gets older, this is becoming more difficult. He needs one on one support from a professional therapist, not just his parents. We have developed a solid rapport with a provider who has truly changed our lives. If we had not sought help by a specialist, or didn't have the resources to do so, I cannot imagine the preventable suffering my child would have endured.

If HB 265 passes, our therapist will be able to provide telehealth therapy for our son. This will impact his life more than I could possibly put into words. The passing of HB 265 would benefit not only our family, but Alaskans who live in rural and underserved areas and Alaskans who need to see specialists that our state does not have. We deserve to be able to have access to quality mental health services; sometimes that means across state lines. If telehealth makes sense anywhere in the country, it's here in Alaska. Expanded access to quality care is long overdue.

I am pleading with you to support HB 265, make mental health care a top priority.

Thank you for your time and support,



Amanda Spickler  
11400 North Douglas Hwy · Juneau, Alaska 99801  
907-209-7889



FORGET ME NOT

# Family Centered Services

OF ALASKA



Representative Ivy Spohnholz  
State Capitol Room 406  
Juneau AK, 99801  
[Representative.Ivy.Spohnholz@akleg.gov](mailto:Representative.Ivy.Spohnholz@akleg.gov)

2/15/2022

Re: House Bill 265 (Version A, 32-LS0754\W)

Dear Representative Spohnholz,

Family Centered Services of Alaska (FCSA) has been providing behavioral health services to children and their families since 1989. Our agency provides educational services, foster care services, outpatient therapy, as well as residential services in and around the Fairbanks area and in the Mat-Su Valley. Our mission is To Serve Alaska by Providing Family and Child Centered Services with Unconditional Care.

Family Centered Services of Alaska supports House Bill 265. During the height of the pandemic, telehealth was implemented to provide stability to clients enrolled in FCSA programs. Our agency has experienced firsthand the benefits of this type of service delivery. We also believe that method of service delivery will become a mode of choice for consumers across Alaska. Telehealth therapy opens new doors to children and families throughout Alaska to receive clinical services where they otherwise may not have the ability to engage in person, which benefits those families.

During the COVID-19 Pandemic and Public Health Emergency, restrictive regulations and policies that have historically restricted our ability to provide timely access to quality behavioral health treatment and recovery services were temporarily set aside. This allowed agencies like FCSA the flexibility to provide telehealth services. The payment for this type of treatment service shifted from focusing on how the treatment was provided to a better focus on the ability to provide the service. These changes made it easier for Alaskans including our children and families to access behavioral health care and offered our clients and our clinical providers more options to choose from and that best address the client's treatment and recovery needs.

FCSA was able to provide continuity of care using telehealth platforms. This gave our agency the ability to continue with individual and family clinic services for both local and rural families. As you are aware, family participation is key to the recovery of children receiving services for behavioral health.

Our understanding is that when the Federal PHE expires, providers and clients risk losing the regulatory and policy and flexibility that has proven to be so beneficial over these last couple of years.

FCSA believes telehealth services will continue to be a vital part of the continuum of care to meet Alaskans mental health needs. Family Centered Services of Alaska fully supports HB265.

*Justin Borgen*

Sincerely,  
Justin Borgen  
Executive Director



2/11/2022

Representative Ivy Spohnholz  
Chair, House Ways and Means Committee  
Co-Chair, House Labor and Commerce Committee

RE: Letter of Support for HB 265

Please accept this letter of support regarding HB 265 to maintain pandemic-related telehealth flexibilities and expand Alaska Medicaid coverage of telehealth services in statute.

Set Free Alaska provides substance misuse and mental health counseling to adults and children located in the Matanuska Susitna Valley and Homer. Our organization employs 100 Alaskans and serves over 1000 individuals and families each year. We offer a vast array of programs including outpatient substance abuse disorder (SUD) treatment for adults and teens, residential SUD services, recovery housing, peer support, children's behavioral health services, and more.

Prior to COVID, our agency provided some telehealth services. As a result of the pandemic and the emergency order these services have increased exponentially. Telehealth services are extremely beneficial to individuals needing help. The benefit and need for these services will remain long after the pandemic has subsided. They help reduce barriers regarding access to care and improve our ability to serve some of our most vulnerable populations. Transportation, medical complications, house arrest monitoring, and lack of service providers in some geographic areas are just a few of the examples of barriers that telehealth services are helping us overcome.

Since the regulations have been lessened due to the emergency order, we have seen a significant increase in client's ability to access care through telehealth. Furthermore, we have seen a dramatic decline in no-show rates. A study in Massachusetts showed that individuals who lived more than 1 mile from their Intensive Outpatient SUD provider were significantly less likely to complete treatment. As we all know, in most areas of Alaska communities are spread out. Clients living within one mile of a treatment provider is unlikely in most cases. Telehealth essentially makes the treatment service zero miles from home. Removing this barrier has been huge in helping clients receive services they so desperately need.

Thank you very much for the work on this bill. I urge the members of our legislature to consider and pass HB 265 with the goal of improving access to care for Alaskan's struggling with substance abuse and mental health problems.

Sincerely,

A handwritten signature in black ink, appearing to read "Philip Licht", is written over a light blue horizontal line.

Philip Licht  
President/CEO  
Set Free Alaska, Inc.



# WISDOM TRADITIONS

## — COUNSELING SERVICES, LLC —

Representative Ivy Spohnholz  
State Capitol Room 406  
Juneau AK, 99801  
BY EMAIL AT: [Representative.Ivy.Spohnholz@akleg.gov](mailto:Representative.Ivy.Spohnholz@akleg.gov)

February 14, 2022

Re: House Bill 265 (Version A, 32-LS0754\W)

Dear Representative, Spohnholz,

Wisdom Traditions Counseling provides a full range of Behavioral Health, Ambulatory and Medication Management and Primary Care integrated services for individuals and families in Anchorage as well as outlining areas across the state of Alaska. We envision a future where everyone who seeks our services is viewed through a multi-dimensional lens; where we don't compartmentalize anyone by a single diagnosis, and our multidisciplinary team continuously anticipates all the possible ways to provide an integrative experience that supports a sustainable outcome. Wisdom Traditions Counseling supports House Bill 265 because we understand the importance of removing and eliminating barriers to accessible services.

During the Federal COVID-19 Public Health Emergency (PHE), restrictive regulations and policies that have hampered our ability to provide timely access to quality behavioral health treatment and recovery services were temporarily set aside. Flexibility regarding where the telehealth service occurred and how it occurred was provided. Additionally, payment for the treatment service shifted from focusing on how the treatment was provided to a better focus on what was provided. These changes made it possible for Alaskans to access behavioral health care, when these necessary services may not have otherwise been available, and this provided our patients and our healthcare provider team with more options to choose from to best address the patient's treatment and recovery needs.

When the Federal PHE expires, providers and clients risk losing the regulatory and policy flexibility that has proven to be so beneficial over these last couple of years. House Bill 265 extends the telehealth flexibility that has been in place during the PHE past the expiration of the PHE.

Specifically, some of the benefits the flexible telehealth policy has provided for our patients are uninterrupted access to time sensitive therapy, even when patients are isolating from others to navigate positive COVID test results, and the ability to continue with necessary care if they are parents or family care-givers who must stay at home to care for others who are ill, as well as providing the opportunity for patients to have reliable and consistent care in their homes when they would otherwise struggle with the barriers from living remotely. Additional barriers that

can be overcome with telehealth are limited access to transportation, severe weather conditions restricting travel, and managing chronic medical conditions that limit patient mobility.

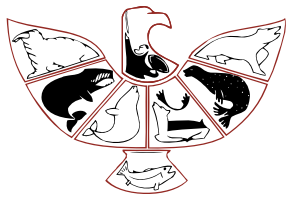
We also have ongoing concerns about the people currently receiving telehealth services, should our ability to provide telehealth treatment be interrupted or terminated if HB265 does not become law. Many of our persons served were previously limited to service access and that population already represents a large percentage of people who do not get timely treatment for behavioral health issues. Telehealth accessibility was a game changer, and clearly expanded opportunities for critical care as a time when mental and behavioral health needs are on the rise.

Wisdom Traditions Counseling understands how essential it is to increase accessibility to Alaskans who might otherwise not be able to continue receiving timely care for their behavioral health and medical needs. Wisdom Traditions fully supports BH265, in order to eliminate additional barriers for our patients and members of our community who rely on tele-health services.

Sincerely,

Kathie Gillet, PhD  
Executive Director  
Wisdom Traditions Counseling





# Alaska Native Health Board

THE VOICE OF ALASKA TRIBAL HEALTH SINCE 1968

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ALASKA NATIVE TRIBAL  
HEALTH CONSORTIUM

ALEUTIAN PRIBILOF  
ISLANDS ASSOCIATION

ARCTIC SLOPE  
NATIVE ASSOCIATION

BRISTOL BAY AREA  
HEALTH CORPORATION

CHICKALOON VILLAGE  
TRADITIONAL COUNCIL

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

MANILAQ ASSOCIATION

METLAKATLA INDIAN  
COMMUNITY

MT. SANFORD  
TRIBAL CONSORTIUM

NATIVE VILLAGE  
OF EKLUTNA

NATIVE VILLAGE OF EYAK

NATIVE VILLAGE  
OF TYONEK

NINILCHIK  
TRADITIONAL COUNCIL

NORTON SOUND  
HEALTH CORPORATION

SELDOVIA VILLAGE TRIBE

SOUTHCENTRAL  
FOUNDATION

SOUTHEAST ALASKA REGIONAL  
HEALTH CONSORTIUM

TANANA CHIEFS CONFERENCE

YAKUTAT TLINGIT TRIBE

YUKON-KUSKOKWIM  
HEALTH CORPORATION

VALDEZ NATIVE TRIBE

February 16, 2022

The Honorable Ivy Spohnholz  
Alaska House of Representatives  
Alaska Capitol Building, Rm 406  
Juneau, AK 99801

RE: House Bill 265

Dear Representative Spohnholz,

The Alaska Native Health Board (ANHB)<sup>1</sup> is very supportive of House Bill 265, an Act relating to Telehealth and other matters. During the COVID-19 pandemic, telehealth was expanded through “flexibilities” to remove barriers for individuals to access their health care from the safety and comfort of their homes. These “flexibilities” have saved Alaskan lives; we must make them permanent.

The expansion of telehealth during the COVID-19 pandemic has included more services available through telehealth modalities. For rural Alaskans, this has meant the ability to connect with a provider through a telephonic, audio-only encounter. This method of telehealth has meant Alaskans on Medicaid, who cannot afford the internet, mobile data, or whose communities do not have access to reliable broadband, can still make their appointments with their providers. This has been especially true in delivering behavioral health services.

Telehealth access to behavioral health services has had an important impact for our rural Alaska Native population. In the first year of the pandemic, one rural region of Alaska, the Northwest Arctic, saw a decline in completed suicides. The same region also saw increased utilization of some behavioral health services such as group therapy, which increased in utilization by 800%. In rural Alaska, it can be difficult to access such group therapy services in a small village. This would normally have required a patient to travel to the hub community where the service is delivered. Through telehealth, now a group therapy program can support patients across an entire region.

In our rural communities, one of the barriers to access counseling and therapy services can frequently be maintaining anonymity. Expanded telehealth services for behavioral

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<sup>1</sup> ANHB was established in 1968 with the purpose of promoting the spiritual, physical, mental, social, and cultural well-being and pride of Alaska Native people. ANHB is the statewide voice on Alaska Native health issues and is the advocacy organization for the Alaska Tribal Health System (ATHS), which is comprised of tribal health programs that serve all of the 229 Tribes and over 177,000 Alaska Native and American Indian people throughout the state. The ATHS administers clinical and public health programs for AI/AN people throughout the state of Alaska. As the statewide tribal health advocacy organization, ANHB supports Alaska's Tribes and Tribal programs achieve effective consultation and communication with state and federal agencies on matters of concern.

health patients in small communities can now allow patients to receive care in the privacy of their homes, through telephone or synchronous audio-visual broadband connections. For younger beneficiaries, behavioral health providers have reported that telephonic services have improved openness and progress in treatment plans.

One provider shared this compelling story of the benefits of telehealth on suicide prevention:

*There is an individual at-risk for suicide in [a village] who likely wouldn't be getting services if it weren't for telehealth (phone, specifically). There is a conflict of interest with the [Village-Based Counselor] and [the patient] refuses to go to that office. This person doesn't have internet in the home so is unable to do video telehealth. Audio-only is the opportunity that has helped keep this individual safe and alive, and has allowed [behavioral health providers] to provide therapy so this person can address the trauma causing the suicidal ideations.*

Other providers have noted that access to telehealth during the pandemic has decreased the “no-show” rate for appointments. This increased availability under the flexibilities that HB 265 would make permanent is saving Alaskan lives. When asked on the viability of telephonic behavioral health services, one provider stated, “I firmly believe and have seen that the delivery of services can be accomplished well over the phone (e.g. assessments, consults, sessions etc.). It is doable, therapeutic, and effective.”

One patient, who is also a health care provider, offered their personal story on the benefit of telehealth for their family:

*Telehealth is vital to rural and remote Alaska; we live in a vast State where not all places are accessible on a whim especially when we have such changing weather in a moment's notice. During the pandemic meeting the needs of the clients in [a village] was vital to making their needs met via video or telephonically. We meet the needs of the clients where they are at. My children were able to see their dad who was in a severe snowmobile accident in 2020 via Vidyo<sup>2</sup> while in Anchorage. Patients who were sent on a medivac could not have a family member to fly with them due to Covid-19. The doctors in Anchorage made sure the family was able to make vital decisions through Vidyo and telephonically. Being able to have my kids connect to their dad during the difficult time was important to them and gave sense of peace being able to see him. They greatly appreciated seeing their dad and the opportunity that telehealth was able to connect them during a difficult time in their life. Our people matter, we have limited resources but utilizing them with what we have means continuity and a blessing for us because when the pandemic hit it did show that resource is vital.*


It is clear that improved telehealth access during the pandemic has saved Alaskan lives – it has saved Alaska Native lives. The value of saving a life is immeasurable and priceless. Without making permanent the current telehealth flexibilities through this legislation, we risk losing access to these telehealth benefits if the COVID-19 public health emergency ends in April 2022. If we lose the increased access to telehealth, we will bear the cost of returning to the pre-COVID-19 telehealth paradigm—and it will be the people and cultures of Alaska who bear that cost.

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<sup>2</sup> Vidyo is a health video-teleconferencing platform.

ANHB appreciates the opportunity to support this legislation, should you have any questions regarding this letter, you may contact ANHB at [anhb@anhb.org](mailto:anhb@anhb.org) or via telephone at (907) 729-7510.

Duk'idli (Respectfully),

A handwritten signature in black ink, appearing to read "Diana Zirul", is positioned below the closing. The signature is fluid and cursive.

Diana L. Zirul  
Chair, Alaska Native Health Board  
Tribally-Elected Leader of the Kenaitze Tribal Council

CC:           The Honorable David Wilson  
              House Health & Social Services Committee  
              Senate Health & Social Services Committee

February 16, 2022

Alaska State Legislature  
House Health and Social Services Committee  
Juneau, AK 99801

RE: HB265 - Health Care Services by Telehealth

Dear, House Health and Social Services Committee:

I am writing in support of HB265 - Health Care Services by Telehealth.

I am an Alaskan citizen with multiple sclerosis. There isn't viable medical treatment for me locally, so my primary care providers have been referring me to a neurologist in Seattle since 2015.

I had an out-of-state, in-person visit in January of this year where my neurologist recommended I consider a change in my treatment plan, dependent on the results of a blood test. I can easily get the blood test in Alaska, but to discuss the results with her and decide how to move forward, I will need to travel to Seattle again to have an office visit. If telehealth were an option, this follow up visit could easily be reduced from a second two day trip to Seattle to a one hour online appointment from my own home.

I have a robust health insurance plan through the University of Alaska, with a medical travel support benefit, but it still leaves me to pay for lodging (definitely not cheap in Seattle), food, ground transportation or rental car, and 20% of my airfare for each trip. Not to mention, I need to take time off of work. The more rural the area of the state where someone in my situation lives, the higher the costs become, and this is all on top of the expenses for the medical appointment itself.

People who need a medical specialist inherently have physical, mental, and emotional challenges with their diagnosis. I understand that not all appointments can be completed virtually, but for those that can, telehealth would help ease the burden.

Please pass HB265. Thank you for your time and consideration.

Respectfully,

A handwritten signature in black ink, appearing to read 'Rachel Potter', with a stylized, flowing script.

Rachel Potter  
Fairbanks, AK