



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

The Honorable David Wilson
Alaska Senate
Alaska State Capitol Building, Rm 121
Juneau, AK 99801

RE: House Bill 265/Senate Bill 175

Dear Representative Spohnholz and Senator Wilson,

Copper River Native Association is very supportive of House Bill 265 and Senate Bill 175, 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.

Having the ability to utilize telehealth for both our primary care and our behavioral health programs has greatly improved both access to care and our ability to provide treatment in a timely manner. While we have the pleasure of being on the road system here, our catchment spans well over one hundred miles, in one direction. These distances can and do serve as barriers to efficient and effective treatment of our beneficiaries, unless we have reimbursable telehealth capabilities.

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, some rural regions of Alaska saw a decline in completed suicides. Providers also saw dramatic increased utilization of some behavioral health services such as group therapy. 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 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/SB175 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 Vidyo¹ 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.

¹ Vidyo is a health video-teleconferencing platform.

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.

Copper River Native Association appreciates the opportunity to support this legislation, should you have any questions regarding this letter, you may contact us at 907 822 5241.

Sincerely,



Angela Vermillion
Chief Executive Officer
Copper River Native Association



February 25, 2022

Representative Ivy Spohnholz
Alaska State Capitol
Juneau, AK. 99801

Dear Representative Spohnholz:

On behalf of the Mat-Su Health Foundation and its Board of Directors, I am writing to express support for HB 265, "An act related to telehealth." The Mat-Su Health Foundation shares ownership in Mat-Su Regional Medical Center and invests its share of the profits back into the community to improve the health and wellness of Alaskans living in the Mat-Su.

Access to healthcare, including behavioral healthcare, supports goals identified by the three most recent Mat-Su Health Foundation Community Health Needs Assessments. These assessments, which were conducted with community partners in 2019, 2016 and 2013, included extensive data analysis, public polling, participatory research, and community forums. Transportation was identified as the number one factor affecting health in our community in the 2016 study, and access to care was identified as a top ten health issue in the 2013 and 2019 studies.

Accessing the benefit of traditional health care requires reliable, affordable transportation. Telemedicine eliminates this barrier that adversely affects those without transportation. It also allows for easier access to care for individuals experiencing limited mobility and caregivers to young children or older Alaskans. The cost of travel to both receive and provide health care is tremendous for patients and providers. Patients postpone preventative care, medication refills, and early interventions due to access, cost, weather, and lack of time. This increases overall health costs because people wait to treat problems until they become a crisis instead of earlier when care is less expensive. While many patients in rural areas – including the more rural parts of Mat-Su – can benefit from telemedicine, this is not just a rural issue. Patients who struggle with medical conditions that make it difficult, uncomfortable, or exhausting to see a provider in person for treatment can benefit no matter where they live in Alaska.

Another factor that increases access to care is having an ongoing relationship with a primary care provider. In 2017, 72.2% of Mat-Su adults and 89.3% of adults 65 years or older had a regular primary care provider. Mat-Su and Alaska have not achieved the Healthy People 2020 Goal of 83.9% of the general population having a regular primary care provider. The 2019 County Health Rankings and Roadmaps data shows the ratio of Mat-Su primary care providers to be one physician to 2,130 persons, which is lower than the statewide average of 1,110:1. The telehealth provisions maintained by HB 265 give patients needed access to primary care providers who can help them regain and maintain health in the most economical way possible.

Thank you for introducing this important legislation. The temporary rules during the pandemic demonstrated that better access to telemedicine equates to better access to healthcare, period—and we want to maintain this telehealth flexibility. If we can help in other ways to advance this legislation, please don't hesitate to contact me directly via phone at 907-354-3595 or email at eripley@healthymatsu.org.

Sincerely,

Elizabeth Ripley
President and CEO



P.O. Box 357 • Gakona, Alaska 99586 • Phone (907) 822-5399 • Fax (907) 822-5810

February 17, 2022

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

The Honorable David Wilson
Alaska Senate
Alaska State Capitol Building, Rm 121
Juneau, AK 99801

RE: House Bill 265/Senate Bill 175

Dear Representative Spohnholz and Senator Wilson,

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Mt Sanford Tribal Consortium was established on June 26, 1992 to advance and protect common interests and the well-being of the descendants of the Upper Ahtna indigenous people.

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Mt Sanford Tribal Consortium appreciates the opportunity to support this legislation, should you have any questions regarding this letter, you may contact us at 907 822-5399 or ebeeter@mstc.org.

Sincerely,



Evelyn Beeter
President/CEO



AADD
ALASKA ASSOCIATION ON
DEVELOPMENTAL DISABILITIES
P.O. Box 241742
Anchorage, Alaska 99524

To facilitate a united provider voice for best practices, advocacy, partnerships and networking.

February 17, 2022

Representative Spohnholz
State Capitol room 406
Juneau, AK 99801

Re: Support for Telehealth legislation HB 265

Dear Representative Spohnholz,

AADD, the Alaska Association on Developmental Disabilities is the trade association for 67 organizations throughout Alaska that provide services for Alaskans who experience intellectual and developmental disabilities (IDD)s. This includes large and small service organizations, Assisted Living Homes and Care Coordinators. We are pleased to have this opportunity to express our support for HB 265, Telehealth Legislation.

AADD is in strong support of HB 265. The COVID Pandemic has moved the access and utilization of remote services forward rapidly. Many IDD service providers were able to benefit from the Appendix K flexibilities that allowed services such as day habilitation to be provided remotely for individuals who ended up isolated in their homes. The Alaska Mental Health Trust funded an Enabling Technology grant through AADD that provided training, an excellent handbook and on-going meetings among providers to share ideas and success stories for the wide utilization of remote services. The providers that accessed those services continue to offer robust remote services today. One provider continues to have a group of 4 to 5 individuals that have been meeting three hours a day, five days a week remotely doing a number of different activities, both educational and fun as well as connecting with each other. In a time when the workforce shortage is the most extreme providers have experienced for Direct Support Professionals (DPS's) remote services have allowed workforce members who are compromised (i.e. multiple cancers for example) to continue to work remotely without fear of infection. The continuity of such service options, supported by HB 265 is very important.

Care Coordination is another area in which remote services (telehealth visits) have been essential to the continuity of services for the individuals they support. In December of 2014 there were 592 certificated care coordinators in our system. This month (February, 2022) there are 178. Not only is this a significant reduction in the workforce, but a new waiver type (ISW, Individual Supports Waiver) has added another 350 waivers to our system during that period. With the onset of the pandemic, and Appendix K flexibilities that allowed for remote visits, rather than the required in person monthly visits, Care Coordinators have been able to serve significantly higher numbers of clients. A current evaluation of the system is being conducted through an

Alaska Mental Health Trust Grant through AADD to provide recommendations to the Department and the providers to better support the Care coordination system. We appreciate the language included in HB 265 that would allow the billing of Medicaid Waivers services when provided remotely.

AADD applauds the efforts that went into the creation of HB 265. And we greatly appreciate the collaboration offered to stakeholders that would be impacted by this bill. AADD is very grateful for the potential impact for continued services to individuals that experience intellectual and developmental disabilities.

Sincerely,

A handwritten signature in black ink that reads "Lizette Stiehr". The signature is fluid and cursive, with "Lizette" on top and "Stiehr" below it.

Lizette Stiehr
Executive Director, AADD