

**ALASKA STATE LEGISLATURE
HOUSE SPECIAL COMMITTEE ON TRIBAL AFFAIRS**

April 12, 2023

3:30 p.m.

MEMBERS PRESENT

Representative CJ McCormick, Chair
Representative Ben Carpenter
Representative Sarah Vance
Representative Josiah Patkotak
Representative Maxine Dibert
Representative Jennie Armstrong

MEMBERS ABSENT

Representative Jamie Allard

COMMITTEE CALENDAR

PRESENTATION(S): TRIBAL HEALTH COMPACTS

PREVIOUS COMMITTEE ACTION

No previous action to record

WITNESS REGISTER

ALBERTA UNOK, President/CEO
Alaska Native Health Board
Anchorage, Alaska

POSITION STATEMENT: Participated in the Tribal Health Compacts presentation.

MONIQUE MARTIN, Vice President
Intergovernmental Affairs
Alaska Native Tribal Health Consortium
Anchorage, Alaska

POSITION STATEMENT: Participated in the Tribal Health Compacts presentation.

APRIL KYLE, President
Southcentral Foundation
Anchorage, Alaska

POSITION STATEMENT: Participated in the Tribal Health Compacts presentation.

ACTION NARRATIVE

[3:30:00 PM](#)

CHAIR CJ MCCORMICK called the House Special Committee on Tribal Affairs meeting to order at 3:30 p.m. Representatives Vance, Dibert, Armstrong, and McCormick were present at the call to order. Representatives Carpenter and Patkotak arrived as the meeting was in progress.

PRESENTATION(S): Tribal Health Compacts

[3:30:39 PM](#)

CHAIR MCCORMICK announced that the only order of business would be the Tribal Health Compacts presentation.

[3:31:23 PM](#)

ALBERTA UNOK, President/CEO, Alaska Native Health Board, began the presentation via PowerPoint [hardcopy included in the committee packet], on slide 2, which listed various tribal health boards and authorities. She moved to slide 3, which gave an overview of the Alaska Native Health Board (ANHB) by describing its advocacy, its mission, and the honors it has received as a board. She continued to slide 4, which displayed a timeline that described the history of Alaska Native health. Slide described the history of the Alaska Tribal Health System (ATHS). Slides 6-8 acknowledged two recognitions that the Alaska State Government made in regard to Alaska Native health.

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MS. UNOK moved to slide 9, which listed all of the individuals who co-signed the Alaska Tribal Health Compact (ATHC). She continued to slide 10, which displayed a graphic that explained how the Alaska Tribal Health system works within the context of state and tribal governments. She moved to slide 11, which displayed a map of Alaska that highlighted tribal health locations in Alaska and listed their associated tribes.

[3:37:26 PM](#)

MS. UNOK continued to slide 12, which displayed a map of Alaska superimposed over a map of the Lower 48 United States as a means to emphasize the large travel distances required to provide healthcare to tribal members across the state. She moved to

slide 13, which highlighted the impact and importance of Alaska's tribal health system to the tribal economy and voice in Alaska.

[3:39:53 PM](#)

MONIQUE MARTIN, Vice President, Intergovernmental Affairs, Alaska Native Tribal Health Consortium (ANTHC), took over the presentation on slide 14, which gave an overview of the consortium's mission and partnerships. She moved to slide 15, which gave a brief description of ANTHC's history, mission, and its achievements as an organized health authority.

[3:42:52 PM](#)

MS. MARTIN continued the presentation on slide 16, which gave a brief overview of ANTHC's operation areas. Slide 17 described the Consortium Businesses Support Services (CBSS) and what it provides to ANTHC and the Alaska Native Medical Center (ANMC). She continued to slide 18, which gave a comprehensive description of community health services that are provided by tribal health authorities around Alaska.

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MS. MARTIN moved to slide 19, which displayed graphics of four tribal health authority's logos accompanied with a broad description of the routine services that are provided by those authorities.

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MS. MARTIN continued to slide 20, which emphasized the successes that tribal health authorities around Alaska had achieved in Fiscal Year 2022 (FY 22) by highlighting specific healthcare statistics and metrics achieved. She moved to slide 21, which further elaborated on the successes that tribal health authorities around Alaska had achieved in FY 22 by highlighting a series of grants awarded to tribal health authorities and the food distributed to tribal communities around the state.

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MS. MARTIN continued to slides 22 and 23, which highlighted the federal Office of Environmental Health & Engineering's role in providing clean healthcare facilities and prompt support to those experiencing an environmental health crisis and specific

instances in where the environmental health of the communities was improved by that office.

[3:59:52 PM](#)

MS. MARTIN skipped to slide 25, which highlighted the location of ANMC and its importance as a medical facility to all Alaskans, not only tribal members. She continued to side 26, which displayed a graphic that highlighted specific statistics and metrics of healthcare delivered to patients admitted to ANMC.

[4:02:54 PM](#)

MS. MARTIN moved to slide 27, which displayed various images of Alaska Native traditional foods and emphasized their importance in maintaining Alaska Native people's health.

[4:05:13 PM](#)

APRIL KYLE, President, Southcentral Foundation, picked up the presentation on slide 28, where she briefly explained the Southcentral Foundation and its role within the tribal health system in Alaska. She continued to slide 29, which displayed a map of Alaska with specific regions of the state outlined in order to demonstrate how the tribal health system interacts with Alaska's health system as a whole.

[4:07:30 PM](#)

MS. KYLE moved to slide 30, which explained the foundation's vision/goals for tribal health in Alaska. She continued to slide 31, which demonstrated the foundation's customer ownership model and explained how it interacts with both the Southcentral Foundation and the Alaska health system.

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MS. KYLE continued to slide 32, which further elaborated on the customer-ownership model on which the Southcentral Foundation operates. She moved to slide 33, which emphasized the importance of five key issues affecting the Alaska Native community. Slide 34 addressed the need to shift current medical culture's understanding of tribal health to a more intuitive one.

[4:12:20 PM](#)

MS. KYLE moved to slide 35, which displayed an image of a group of healthcare providers of many different practices in a room to emphasize the need for different types of healthcare in tribal health practices. She continued to slide 36, which displayed a graphic meant to illustrate the previously mentioned customer-owned healthcare model and further explained how that healthcare model would interact with Alaska's healthcare system as a whole. She moved to slide 38, which explained the composition of a patient's personal healthcare team, and slide 39, which described what the concept of behavioral health integration is.

[4:17:23 PM](#)

MS. KYLE moved to slide 40, which gave a broad list of different types of medical, specialty, and community programs that a tribal healthcare practice might provide. She continued to slide 41, which gave a broad list of different types of behavioral health care programs and services that a tribal healthcare practice might provide. Slide emphasized the need for behavioral health services and programs in hospitals. She moved to slide 43, which explained how the concept of tribal health has impacted the healthcare community as a whole and described the role that Alaska has played in its impact.

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MS. MARTIN moved to slide 44, which explained how the state and tribal healthcare entities have worked together with both executive and legislative actions in recent years to create the successes that have been mentioned throughout the current presentation.

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CHAIR MCCORMICK opened the floor to questions from the committee.

[4:29:35 PM](#)

REPRESENTATIVE CARPENTER asked whether the Alaska Native health community was meeting its "achieved wellness" metrics mentioned earlier in the presentation.

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MS. KYLE answered by sharing that there has been a redesign in primary care structures and a decrease in hospital and emergency room admissions, both of which meet that standard. She added that there has been improvement in other metrics related to domestic and emotional health in Alaska Native populations.

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REPRESENTATIVE CARPENTER asked whether the current system of health in Alaska is not sufficient to achieve its goals.

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MS. MARTIN said that the Southcentral Foundation has an epidemiology center that performed studies on health outcomes for Alaska Native people across generations. She referenced multiple studies that the epidemiology center had performed and used those as examples of the health system in Alaska failing its Alaska Native population.

[4:38:59 PM](#)

CHAIR MCCORMICK asked whether the Southcentral Foundation had conducted an assessment of the impact of climate change on Arctic communities in Alaska.

MS. MARTIN answered that the foundation has a climate center for environmentally threatened communities and said that Alaska is on the "frontier" of the effects of climate change. She further explained how climate change is affecting Alaska and how the Southcentral Foundation is working to both catalogue and mitigate the harmful effects of climate change on Alaska Native health.

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CHAIR MCCORMICK remarked that he represented multiple communities that are impacted by climate change and thanked the invited testifiers for their presentation.

[4:44:26 PM](#)

ADJOURNMENT

There being no further business before the committee, the House Special Committee on Tribal Affairs meeting was adjourned at 4:44 p.m.