ALASKA MEDICAID REDESIGN + EXPANS	SION PROJECT
below. We are collecting your feedbac	ting! Please complete a short survey using the link k on the various options presented, and what ces should be considered for Medicaid redesign.
https://www.surveymonkey.com/r/akmcdre-stakeholder-feedback-fall2015	
ADDITIONAL COMMENTS	
NAME:	CONTACT PHONE OR EMAIL (OPTIONAL):
You can submit feedback at any time to medicaid.redesign@alaska.gov	
ALASKA MEDICAID REDESIGN + EXPANSION PROJECT	
Thank you for participating in our meeting! Please complete a short survey using the link below. We are collecting your feedback on the various options presented, and what other priority populations and/or services should be considered for Medicaid redesign.	
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