Home and Community Based Waiver and Personal Care Target Provider August 1, 2025 List

Each August 1, per 7 AAC 145.531(b), the Department will publish a list of target providers on the department's website and on the Alaska Online Public Notice System. Providers identified on this list will be required to submit an annual report within 8 months of their fiscal year end for the fiscal year that ends during the calendar year in which the list is published. The Department will list if the annual report is a full annual report or a reduced annual report.

Report Type: Reduced Annual Report for all listed providers (7 AAC 145.531(d))

Report Due Date: 8 Months after FYE

State Fiscal Year Provider

August 31 Fiscal Year Provider

Federal Fiscal Year Provider

Calendar Year Provider

SFY25 report due by April 30, 2026

FFY25 report due by May 31, 2026

CY25 report due by August 31, 2026

The August 1, 2025 list was determined by using claims data for dates of services July 1, 2023 through June 30, 2024, which represents the most recent state fiscal year for which timely filing has passed. Target providers are determined by the Medicaid units of service that were paid during the applicable time period. For each service category, the lessor of the top five providers in terms of units of service or the number of providers it takes to achieve 80% of all Medicaid paid units of service are selected.

State	Fiscal Year Providers (7/1/24 - 6/30/25)	Report Type Required	Less than \$750,000 in Medicaid payments to PC & HCBW
1	Access Alaska Inc	Reduced	No
2	ARCA	Reduced	No
3	Assets Inc	Reduced	No
4	Center for Psychosocial Development Inc	Reduced	Yes
5	Community Connections Inc	Reduced	No
6	Fairbanks Resource Agency	Reduced	No
7	Frontier Community Services	Reduced	No
8	Hope Community Resources Inc	Reduced	No
9	Palmer Senior Citizens Center	Reduced	Yes
10	REACH Inc	Reduced	No
11	South Peninsula Behavioral Health	Reduced	Yes
12	Wasilla Area Seniors Inc	Reduced	Yes

August 31 Fiscal Year (9/1/24 - 8/31/25)		Report Type Required	Less than \$750,000 in Medicaid payments to PC & HCBW
13	Easterseals Alaska	Reduced	No

Calendar Fiscal Year Providers (1/1/25 - 12/31/25)	Report Type Required	Less than \$750,000 in Medicaid payments to PC & HCBW
14 Alaska Consumer Direct Personal Care	Reduced	No
15 Absolute Care of Alaska LLC.	Reduced	No
16 Alaska Dinner Factory Inc	Reduced	No

17	Good Samaritan Care Services Corporation	Reduced	No
18	Greenwood Lodge Adult DayCare & Respite Services	Reduced	No
19	Health Court Foods Inc	Reduced	Yes
20	Hearts and Hands Inc	Reduced	No
21	Hearts and Hands of Care Inc	Reduced	No
22	Nadon Family Home LLC	Reduced	No
23	Northern Light Adult Day Services	Reduced	No
24	Southern Home Care Services/ Inc	Reduced	No
25	Turnagain Social Club LLC	Reduced	No
26	Willow Personal Care Assistants LLC	Reduced	No

Unknown Fiscal Year End Providers		Report Type Required	Less than \$750,000 in Medicaid payments to PC & HCBW
27	Tides LLC	Reduced	No
28	Utopia LLC	Reduced	No