



May 17, 2023

Emily Beaulieu
Medicaid State Plan Coordinator
Alaska Department of Health
3601 C Street, Suite 902
Anchorage, AK 99503

RE: Proposed Temporary Medicaid State Plan Amendment to Suspend PA and SA for Behavioral Health State Plan Services

Dear Ms. Beaulieu,

Copper River Native Association writes to provide comment on the proposed temporary Medicaid state plan amendment (SPA) to suspend prior (PA) and service authorizations (SA) for behavioral health state plan services. We welcome and are supportive of the proposed temporary SPA to suspend PAs and SAs for behavioral health services. This would continue a flexibility the State utilized during the COVID-19 pandemic under an 1135 Waiver authority.

The Copper River Native Association (CRNA) is a mid-sized Tribal Health Organization (THO) and part of the Alaska Tribal Health Care system. The organization is one of the few – and largest – health care providers in its frontier Alaska area that is nearly the size of West Virginia and is located about 200 miles northeast of Anchorage. The Copper River Basin comprises zip codes 99566, 99573, 99586, and 99588 which collectively have 2,952 residents as of the 2010 US Census results. About 25 percent of residents -- and CRNA patients -- are Ahtna Natives (Ahtna People).

The Copper River Basin's population is scattered throughout 19 rural communities recognized as Census Designated Places that range in size from 16 residents to 554 residents. These communities are spread across four paved two-lane highways and several gravel roads in an unorganized borough, as defined by state law. There is not a single traffic light in the entire region. This project will serve all of the communities in the Copper River Basin as well as the more than 100,000 visitors from across the state, the nation, and the world who (normally) flock to the region during the short, intense summer season.

The current draft of the SPA, however, only makes this a temporary change to the State Plan for these outpatient services. We recommend that this change be made permanent. The State has the authority now to adopt this change permanently, and it creates duplicative work to adopt a temporary change and then complete a permanent SPA next year.

Further, we recommend that this suspension of PAs and SAs be extended to 1115 Waiver services. We understand that the State has proposed the end of PAs and SAs for 1115 Waiver services as part of its recently proposed regulatory package on 1115 Waiver services. This regulatory package does not go through Tribal Consultation, and we wanted to share our recommendation in through this consultation. We also plan to submit comments during the public comment period.

Finally, we urge the Department to put out clarification on when and how SAs and PAs will resume for 1115 Waiver services and explain the pause for state plan services. Because the proposed regulations for 1115 Waiver services will not be effective before the end of the Public Health Emergency, it is important for the Department and Division of Behavioral Health to clearly articulate its intention for providers working with beneficiaries and preparing for the increased administrative burden of PAs and SAs upon resumption.

We thank the Department for the opportunity to engage in this government-to-government Tribal Consultation. If you have any comments or questions regarding our recommendations, you may contact Angela Vermillion or Neal Schanbeck.

Sincerely,

Angela Vermillion

Angela Vermillion
Chief Executive Officer
Copper River Native Association
avermillion@crnative.org

Signature: *Angela Vermillion*

Email: avermillion@crnative.org