



# Alaska Native Health Board

THE VOICE OF ALASKA TRIBAL HEALTH SINCE 1968

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March 4, 2015

Ms. Gennifer Moreau, Medical State Plan Coordinator  
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Division of Health Care Services  
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Re: Proposed State Plan Amendment to Correct Errors  
and Unintended Consequences of Recent Amendments  
Regarding Payment for Services of "Physician  
Collaborators."

Dear Ms Moreau:

Thank you for your letter of January 26, 2015 notifying tribal health leaders of the Department's proposed Medicaid State Plan Amendments, and for the additional time provided for tribal consultation on the proposal. I submit these comments on behalf of Alaska Native Health Board (ANHB). ANHB is the statewide organization representing the Tribes and Tribal health organizations carrying out health services on behalf of over 140,000 Alaska Native people in the state of Alaska. Established in 1968, Alaska Native Health Board (ANHB) serves as the statewide voice on Alaska Native health issues. ANHB is the statewide advocacy organization for the Alaska Tribal Health System (ATHS) assisting state and federal agencies with achieving effective communication and consultation with tribes and tribal health programs. The ATHS is comprised of tribal health programs that serve all of the 229 tribes throughout Alaska.

As we understand it, the Department proposes changes to the State Plan to correct errors in amendments it recently made to Attachment 4.19-B of the Plan, and to prevent unintended consequences that could stem from those amendments, which were mistakenly adopted without tribal consultation because their potential impact on tribal health programs was not recognized at the time. We appreciate the Department's efforts to engage in tribal consultation now and to restore the *status quo*, as well as the Department's assurance that it intended no changes in reimbursement policy for tribal health programs.

You have explained that the recent amendments were adopted at the request of the Centers for Medicare and Medicaid Services (CMS) and were intended to simply remove duplicative and redundant language from the Plan. Specifically, language describing payment for "physician collaborators" was deleted, and although it was intended to be replaced with a

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HEALTH CORPORATION  
CHUGACHMIUT  
COPPER RIVER  
NATIVE ASSOCIATION  
COUNCIL OF  
ATHABASCAN  
TRIBAL GOVERNMENTS  
EASTERN ALEUTIAN  
TRIBES  
KARLUK IRA  
TRIBAL COUNCIL  
KENAITZE INDIAN TRIBE  
KETCHIKAN  
INDIAN COMMUNITY  
KODIAK AREA  
NATIVE ASSOCIATION  
MANILAQ ASSOCIATION  
METLAKATLA INDIAN  
COMMUNITY  
MT. SANFORD  
TRIBAL CONSORTIUM  
NATIVE VILLAGE  
OF EKLUKNA  
NATIVE VILLAGE  
OF TYONEK  
NINILCHIK  
TRADITIONAL COUNCIL  
NORTON SOUND  
HEALTH CORPORATION  
SELDOVIA  
VILLAGE TRIBE  
SOUTHCENTRAL  
FOUNDATION  
SOUTHEAST ALASKA  
REGIONAL HEALTH  
CONSORTIUM  
TANANA CHIEFS  
CONFERENCE  
YUKON-KUSKOKWIM  
HEALTH CORPORATION  
VALDEZ NATIVE TRIBE

separate payment provision for each practitioner type that had been included on the "physician collaborator" list, several types of practitioners were inadvertently omitted, including Community Health Aides and Practitioners and Physician Assistants. We also understand that by deleting the "physician collaborator" language, the recent amendment could adversely impact payment to tribal hospitals under Attachment 4.19-C of the Plan.

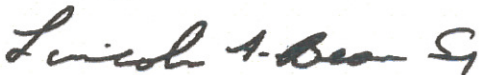
The Alaska Native Tribal Health Consortium (ANTHC) has shared with us the final draft of the comments it plans to submit to you today. We agree with ANTHC's comments and endorse its suggested State Plan Amendment language. The changes it proposes will preserve and clarify the long-standing payment methodologies for services of tribal health programs.

From our perspective, it is especially important that the State Medicaid Plan include language that describes the well-established payment methodology for the services of Physician Assistants, who are widely utilized by tribal health programs, and for Community Health Aides and Practitioners, who are the very backbone of the rural tribal health system and serve on the front line of our efforts to deliver primary and emergency health services to Alaskans living in rural and remote communities. We are also aware of concerns that the recent amendments could inadvertently impact tribal hospital reimbursement. Although we do not operate a hospital ourselves, it is important to the entire tribal health system, and the people we serve, that tribal hospitals are correctly and adequately reimbursed for their services. We strongly support efforts to prevent any adverse consequences for tribal hospitals stemming from the recent amendments, and we endorse ANTHC's recommendations in that regard.

We urge the Department to do all it can to expedite adoption of the needed State Plan Amendments so that any uncertainty about the impact of the earlier amendments can be quickly resolved.

Thank you again for the opportunity to consult with the Department on this important matter.

Sincerely,



Lincoln Bean, Chairman  
Alaska Native Health Board

cc: DHSS Deputy Commissioner Jon Sherwood  
DHSS Tribal Program Manager Renee Gayhart  
Alaska Chief Assistant Attorney General Stacie Kraly  
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