

**BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON
REFERRAL BY THE COMMISSIONER OF HEALTH AND SOCIAL SERVICES**

In the Matter of)
)
V. BAKER PERSONAL) OAH No. 15-0656-MPC
HOMECARE)
_____)

DECISION

I. Introduction

V. Baker Personal Homecare (Baker Homecare) was certified to provide Medicaid Home and Community-Based Waiver services. On August 4, 2014, Baker Homecare was notified that its certification would expire on November 30, and that it needed to submit a new application to Senior and Disabilities Services (SDS). Baker Homecare did reapply, but SDS believed the application was incomplete. Over a several month period, the parties exchanged communications and Baker Homecare provided updated application materials. On May 1, 2015, SDS denied the recertification application. Baker Homecare appealed.

A hearing was held on July 29 and July 31, 2015.¹ Baker Homecare was represented by Mario L. Bird. Violet Baker, the owner of Baker Homecare, and paralegal Tamara Huffman testified for Baker Homecare. SDS was represented by Heather C. Parker. Health Program Manager Cheri Herman, Medical Assistance Administrator Brad Lentz, and Medical Assistance Administrator Jamie Kaiser testified for SDS.

Based on the evidence presented, the denial of Baker Homecare’s recertification is affirmed.

II. Facts

Baker Homecare is a Medicaid service provider with approximately twelve clients.² It provides respite services – relieving the regular caregiver for short periods of time – and chore services – services such as house cleaning and laundry.³ On August 4, 2014, Baker Homecare

¹ The hearing was held before Administrative Law Judge Andrew M. Lebo. This case was reassigned to ALJ Jeffrey A. Friedman, who has reviewed the entire record and listened to the hearing recordings.

² Baker testimony.

³ *Id.*

was sent a notice concerning the expiration of its certification.⁴ This notice informed Baker Homecare that its certification would expire on November 31, 2014. The notice included text inside a box that said

IMPORTANT: Read this letter carefully. Please note that the HCB waiver certification requirements changed July 1, 2013 and current policies & procedures must meet the new requirements. Please review the instructions and ensure that the agency's current policies and procedures meet the new requirements.

Submit a **complete Initial Certification Application with all required attachments** to our office no later than **October 1, 2014.**^[5]

The notice went on to provide web pages where additional information and guidance could be found.

Ms. Baker did not recall receiving this letter, but acknowledged that it was correctly addressed to her Post Office box. On October 27, 2014, Baker Homecare was sent a second letter. This letter stated that SDS had not received her recertification application. The letter stated, in part, "you will not be able to bill for services provided after the expiration of your certification, which is currently November 30, 2014, unless your recertification is approved."⁶ Baker Homecare was told that if it intended to continue providing services, it must submit a completed application by November 7, 2014.⁷

SDS received Baker Homecare's application on November 13, 2014.⁸ SDS concluded that the application was incomplete. SDS wrote to Baker Homecare on November 14, 2014, and gave it until December 10, 2014, to provide additional information.⁹ SDS' letter also detailed the information that was missing, and provided web pages where additional information and guidance could be found.

Baker Homecare sent additional information by e-mail on January 2, 2015.¹⁰ Again, SDS determined that even with the additional documents, the application was not complete. SDS sent

⁴ Agency Record page 1. SDS divided the record into 12 exhibits. The parties referred to both exhibit numbers and record page numbers throughout the hearing. This decision will refer to the page numbers stamped at the bottom of the agency record.

⁵ AR 1 (emphasis in original).

⁶ AR 3.

⁷ *Id.*

⁸ AR 5. The application was signed by Ms. Baker on November 13 as well.

⁹ AR 18.

¹⁰ AR 22 – 54.

another letter describing how the materials fell short of what SDS required.¹¹ Baker Homecare was given until March 6, 2015 to provide additional information.

In March of 2015, Tamara Huffman was asked to help Baker Homecare complete its application.¹² This was approximately five months after the application was initially due. Ms. Huffman had helped Baker Homecare with prior recertification applications. The previous process looked overwhelming at first, but was actually “quite simple.”¹³ This time, the process was very different. There were numerous reports, policies, and procedures that had to be written. She frequently e-mailed Mr. Lentz for advice, and he provided answers to her questions when he could.¹⁴

On March 6, 2015, Ms. Huffman wrote Mr. Lentz and asked for additional time to submit information. She asked to have the deadline extended to the following Friday, March 13.¹⁵ Mr. Lentz approved that extension.¹⁶ On March 13, Ms. Huffman asked for an extension until Tuesday, March 17. Mr. Lentz approved that extension.¹⁷

On March 17, Ms. Huffman sent another e-mail to Mr. Lentz. She stated, in part, I’ve finished the Quality Improvement Report, the Admissions Policy, the Complaint Management, Critical Incident Reporting, Emergency Policy, and Medication Administration. These have been sent to Violet for review and I don’t know yet if she will want me to make any changes. I believe I have finished the Confidentiality Policy, but want to review it and compare it to your list and Violet’s notes before I check that off the list. I still need to create documents for Conflicts of Interest (I need to meet with Violet again and get some clarification), Financial Accountability, Restrictive Intervention, Termination of Provider Services Policy and Procedures, Background Checks, and Training Policy and Procedures.^[18]

Ms. Huffman asked for an additional week to complete the application, and Mr. Lentz responded, “Please take your time, as long as we know you are in the process of providing documentation, we will extend the certification period as needed.”¹⁹

On Wednesday, March 25, 2015, Ms. Huffman wrote that she had completed the last document, and Mr. Lentz should have all of the new documents by the end of the week.²⁰

¹¹ AR 55.
¹² Huffman testimony.
¹³ *Id.*
¹⁴ *Id.*
¹⁵ AR 167.
¹⁶ AR 168.
¹⁷ AR 171.
¹⁸ AR 173.
¹⁹ AR 176.

On April 1, 2015, after reviewing the documents submitted, Mr. Lentz identified six areas where the policies and procedures were still inadequate.²¹ Ms. Huffman acknowledged his list of required changes, and asked whether she should submit documents individually as they were completed, or all at once?²² She also asked whether it was possible to get another extension.

Mr. Lentz said it would be better to submit all of the updated documents at once. He also said:

SDS is required to issue denials if not complete by the due date of 4/6. However, after this date we will certify both agencies for 30 days in which time the denial can be appealed or if required documents are submitted and complete, we will reverse the denials.^[23]

On April 7, Mr. Lentz asked for some clarification about documents received.²⁴ On April 13, he sent a follow-up asking for an update. He also stated “SDS needs to take an action on your applications as they have been in pended status for some time now.”²⁵ Ms. Huffman responded several times on April 14.²⁶

On April 17, 2015, Mr. Lentz informed Ms. Huffman that a denial would be issued:

SDS does not have complete info and will mail out certified denials [sic] letters for both PCA and the Waiver agencies at this point. The denial letters will contain specific info on why we took this action and the appeals process should you wish to pursue.^[27]

On May 1, 2015, SDS issued a Notice of Denial of Certification Renewal.²⁸ The denial stated:

The following documentation required for certification was found to be insufficient or missing:

- The general liability insurance identifies an agency other than SDS as a certificate holder. List. [sic]
- Inaccurate background check accounts.
- Incomplete policies and procedures involving admissions, critical incident reporting, medication administration, and restrictive interventions.

²⁰ AR 192.

²¹ AR 194 – 195.

²² AR 198.

²³ AR 198. The other agency referred to is Last Frontier, a PCA agency also operated by Violet Baker.

²⁴ AR 217. Ms. Huffman had previously informed him that she would be out of town that week.

²⁵ *Id.*

²⁶ AR 227, 233, 244, 250.

²⁷ AR 257.

²⁸ AR 97.

- Acceptable medication administrating and ASAM (assistance with self-administration of medications) training courses to be utilized by your agency.^[29]

Ms. Huffman was devastated that the application was denied. She believed that Baker Homecare could get additional extensions as long as they were in the process of completing the application and developing the policies to meet the new regulatory requirements. In addition to the e-mail correspondence, she had spoken with Mr. Lentz by telephone a few times. She expected him to tell her what was needed if any of the submitted policies remained inadequate.³⁰

SDS agrees that Baker Homecare continued to submit additional documents to complete its application. SDS also agrees that, when the application was denied, it was closer to being complete than when it was first received.³¹ However, as stated in the denial notice, SDS found that even with the additional information, the application could not be approved.

III. Discussion

A. *Home and Community-Based Waiver Provider Certification*

The Department of Health and Social Services adopted new regulations related to the Waiver program that were effective July 1, 2013. There was a substantial amount of change from the prior regulations.³² There was definitely a change in the required quality of the information to be provided when providers were certified or when their certifications were renewed.³³ According to Ms. Herman, SDS notified providers of these changes through E-Alerts (which many providers signed up to receive), training opportunities, and webinars.³⁴ Ms. Herman does not know whether individual providers were sent a notice telling them of the substantial changes they would need to comply with, but typically that is *not* something SDS or the Department would do.³⁵

Providers of Waiver services must enroll in the Medicaid program and must be certified by SDS.³⁶ Providers are initially certified for one year, and then recertified for two years at a time.³⁷ At least 90 days before the certification expires, SDS must send a notice to the provider

²⁹ AR 98.
³⁰ Huffman testimony.
³¹ Stipulation on the record.
³² Herman testimony.
³³ *Id.*
³⁴ *Id.*
³⁵ *Id.*
³⁶ 7 AAC 130.220(a).
³⁷ 7 AAC 130.220(c).

informing the provider that its certification is expiring.³⁸ “The provider must submit a new application for certification and all required documentation not later than 60 days before the expiration date of the current certification.”³⁹

SDS will deny a certification application if:

[T]he provider fails to submit a complete application under (a) of this section so that it is received by the department not later than 30 days after the date of any notice from the department that the application is incomplete.^[40]

A party who wishes to dispute a denial of recertification may appeal under 7 AAC 105.460.⁴¹ The appeal process is generally used for appeals of sanctions, and thus the denial of certification is treated as a sanction here. Normally, the Division has the burden of proof when imposing a sanction. However, at the hearing the parties agreed that Baker Homecare had the burden of proof. In this case, because there are few material facts in dispute, this decision would reach the same result regardless of how the burden of proof is allocated.

B. Reasons For Denial Of Certification Renewal

SDS listed four reasons for denying Baker Homecare’s certification.⁴² Each is discussed below.

1. General Liability Policy

SDS requires providers to have liability insurance. There is no dispute that Baker Homecare had the required insurance. SDS also requires that it be provided a certificate of insurance from the provider’s insurance company listing SDS as the certificate holder. As a certificate holder, SDS would be notified if the insurance policy is canceled or not renewed.⁴³

Initially, Baker Homecare submitted a certificate of liability insurance listing the wrong state agency as the certificate holder.⁴⁴ Later, it submitted a certificate for its workers compensation insurance.⁴⁵ Eventually, a certificate of insurance dated May 12, 2015 was issued for Baker Homecare’s general liability policy which correctly listed SDS as the certificate holder. It is not clear from the record when this certificate was sent to SDS, but it is assumed for

³⁸ 7 AAC 130.220(d).

³⁹ *Id.*

⁴⁰ 7 AAC 130.220(e)(1). The other listed reasons for denial are not applicable in this appeal.

⁴¹ 7 AAC 130.220(i).

⁴² If the application had been completed after the denial, but before May 31, 2015, SDS would reverse the denial and approve Baker Homecare’s application. *See* AR 198 (allowing 30 days from denial to submit documents).

⁴³ Kaiser testimony.

⁴⁴ AR 31.

⁴⁵ AR 54.

purposes of this appeal that it was received by SDS before May 31, 2015. Thus, Baker Homecare resolved this impediment to recertification.

2. *Inaccurate Background Check Accounts*

A provider may not hire an employee or contract with an independent contractor who does not pass the background check requirements.⁴⁶ SDS may not renew a certificate unless the provider is in compliance with this requirement.⁴⁷ As part of its application, Baker Homecare submitted a list of employees, along with their background check identification numbers.⁴⁸ SDS reviewed the application and found that several individuals on the organizational chart, or the list of employees, were not listed in Baker Homecare's background check account.⁴⁹ Baker Homecare provided additional background check IDs for six employees.⁵⁰ In its next notice, SDS informed Baker Homecare that seven individuals were not in Baker Homecare's account. SDS said "Make sure staff here are listed under V. Baker Homecare, not Last Frontier ALH/PCA."⁵¹

Eventually, Ms. Baker contacted the Background Check Unit. These individuals had all passed their background checks, and were eligible to work for Baker Homecare, but their names were associated with Last Frontier's account and not Baker Homecare's account.⁵² After speaking with several different people, she was told that she needed to go online and click a box to indicate that she wished these individuals to be associated with Baker Homecare.

The evidence is unclear as to when Ms. Baker corrected this problem. SDS represented on the record that there were still some employees who were not properly associated with the Baker Homecare account, but Ms. Baker testified that those individuals no longer worked for Baker Homecare. For purposes of this appeal, it is assumed that Baker Homecare corrected this problem prior to May 31, 2015.

3. *Acceptable Administration Training Courses*

SDS stated that the following documents were insufficient or missing:

⁴⁶ AS 47.05.310(3)(2).
⁴⁷ AS 47.05.310(b).
⁴⁸ AR 9.
⁴⁹ AR 18.
⁵⁰ AR 23.
⁵¹ AR 55.
⁵² Baker testimony.

Acceptable medication administration and ASAM (assistance with self-administration of medications) training courses to be utilized by your agency.^[53]

The first notice sent to Baker Homecare did not specifically describe this deficiency.⁵⁴

The next notice was more specific and said that the medication administration policy must, among other things, provide for “selecting a medication administration training course, and for verifying staff attendance and successful completion of the training course.”⁵⁵ Mr. Lentz wrote on April 1, that Baker Homecare must “train your staff in medication administration and ASAM assistance with self-administration of medications.”⁵⁶

The medication administration policy submitted by Baker Homecare on April 6 states:

Any VBPH respite worker who assists a client with the self-administration of medication shall successfully complete a training course through the Alaska Board of Nursing and shall provide written verification of attendance and successful completion to be placed in their personnel file.

Any VBPH respite worker who is to administer medication to the recipient without the assistance of the recipient must successfully complete a course through the Alaska Board of Nursing. The worker shall also obtain training in the administration of addictive medications through the Trust Training Cooperative. Written verification of attendance and successful completion of these courses shall be submitted to VBPH and placed in the respite worker’s personnel file.^[57]

This policy does not identify which Board of Nursing course will be used. SDS needs to know the course used in training in order to determine whether it is an appropriate course. In addition, SDS was looking for a course in self-administration of medications, not the course in administration of addictive medications.⁵⁸

Respite service providers are required to offer medication administration as part of the respite services.⁵⁹ The denial letter states that Baker Homecare had not documented the use of acceptable medication administration and self-administration courses. SDS is correct. Baker Homecare did not specify which course from the Board of Nursing would be used, and its policy specified a course in administration of addictive medications rather than a course in assisting

⁵³ AR 98.
⁵⁴ AR 18.
⁵⁵ AR 57.
⁵⁶ AR 270.
⁵⁷ AR 155.
⁵⁸ AR 265.
⁵⁹ 7 AAC 130.227(a)(6).

with self-administration of medications.⁶⁰ SDS has shown that Baker Homecare did not correct this deficiency in its policy language.

4. *Incomplete Policies*

Baker Homecare was in the process of developing the required policies and procedures when the denial letter was issued. Baker Homecare asserts that its application should not have been denied as long as it was making progress and was on a trajectory towards compliance.⁶¹ In addition, Baker Homecare argues SDS is estopped from relying on any incomplete policy as a basis for denial since it promised not to take action as long as Baker Homecare was in the process of providing documentation.

a. Develop and Implement

Waiver providers are required to “develop and implement” policies for critical incident reporting,⁶² medication administration,⁶³ and use of restrictive interventions.⁶⁴ The parties did not cite to a regulation requiring admission policies, but SDS did not dispute that any required policy was subject to the same “develop and implement” provision.

In order to be certified, Baker Homecare must be “in compliance” with the requirements of 7 AAC 130.⁶⁵ This includes the requirement to “develop and implement” various policies and procedures. Baker Homecare views developing as an ongoing process. Baker Homecare is correct that few policies can be created instantaneously, and the more complex the policy, the longer it would take to develop. However, the regulatory requirement is to develop and implement. For example, a provider must “develop and implement a system to manage and report critical incidents[.]”⁶⁶ A provider is not in compliance with 7 AAC 130.224 unless it has developed and implemented this policy. A policy cannot be implemented unless it has already been developed, regardless of how much time it takes to develop. A provider is not in compliance until it has implemented its policies, and SDS may not renew a certification before that occurs.⁶⁷

⁶⁰ Ms. Baker did obtain certification in the ASAM course. Exhibit C.

⁶¹ This is the primary issue raised by Baker Homecare in its prehearing brief and during the hearing.

⁶² 7 AAC 130.224(b).

⁶³ 7 AAC 130.227(d).

⁶⁴ 7 AAC 130.229(b).

⁶⁵ 7 AAC 130.220(a)(3).

⁶⁶ 7 AAC 130.224(b).

⁶⁷ 7 AAC 130.220(a)(3).

A strict application of this requirement would mean that Baker Homecare should have developed policies in time to implement them on July 1, 2013, when the new regulations took effect. SDS is not claiming in this appeal that the policies needed to be implemented in 2013. Instead, SDS asserts that Baker Homecare should have developed its new policies in time to include them with its application. This would have allowed SDS to review them and then, if acceptable, approve them for implementation during the new certification period.

Baker Homecare was informed that its policies needed to comply with the new regulations, and was given until October 1, 2014 to provide those policies.⁶⁸ Over the course of several months, Baker Homecare was allowed more time to develop policies that complied with regulations that had been in effect since July 1, 2013.

On April 1, 2015, Mr. Lentz established a final deadline of April 6, 2015 to send in all required documents.⁶⁹ This deadline was eight months after the first notice sent to Baker Homecare, five months after the second notice, and four months after the expiration date of Baker Homecare's certification. Even if the "develop and implement" requirement is an ongoing process, at some point the development must end and the policy must be implemented. Baker Homecare was given sufficient time to develop and submit policies that met the regulatory requirements.⁷⁰

The record shows that, at least since November 13, 2014, when it first submitted its application, Baker Homecare tried in good faith to provide everything SDS asked for. Ms. Huffman in particular was extremely diligent.⁷¹ There is no evidence that any of Baker Homecare's clients were harmed or poorly cared for during the reapplication process. However, Medicaid is a highly regulated program. Providers are expected to plan ahead for the renewal process so they can submit a complete application 60 days before the expiration of their current certification. Providers are expected to understand and comply with numerous, complex regulations. Providers are expected to be in compliance with all of those regulations, and not just

⁶⁸ AR 1.

⁶⁹ AR 198.

⁷⁰ Baker Homecare actually had more time since SDS would have reversed its denial if the policies were submitted prior to May 31, 2015, 30 days after the May 1 termination notice.

⁷¹ Both Ms. Huffman and Ms. Baker had other pressing issues that likely took time away from completing these policies. Ms. Baker was involved in a difficult legal matter apparently caused by a former bookkeeper. Ms. Huffman was a full-time paralegal at a busy law firm, and had a variety of family issues to deal with. While this may explain why the policies were not completed sooner, these other issues did not require SDS to grant additional time beyond April 6, 2015, to complete the application.

working towards compliance. This meant that Baker Homecare needed to be in a position to implement the policies it had developed pursuant to the regulations. It was not in that position, and therefore SDS properly denied Baker Homecare's application.

b. Equitable Estoppel

Under certain circumstances, the government may be estopped or partially estopped from taking certain actions that are otherwise required or permitted by regulation.⁷² Equitable estoppel may be applied when all four of the following elements are met:

(1) the division asserted a position by conduct or words; (2) [the party] acted in reasonable reliance on the division's assertion; (3) [the party] suffered resulting prejudice; and (4) estopping the division from acting against [the party's interests] serves the interest of justice so as to limit public injury.^[73]

Only the first element is met here.

On March 17, 2015, Mr. Lentz informed Baker Homecare: "Please take your time, as long as we know you are in the process of providing documentation, we will extend the certification period as needed."⁷⁴ Although this statement qualifies as an assertion of a position by SDS, it does not appear that Baker Homecare took any action in reliance on this assertion. Mr. Lentz's statement was in response to a request for a one-week extension, until March 24, to provide the required documents.⁷⁵ Baker Homecare was already planning to submit those documents by March 24, and Mr. Lentz's statement did not change that plan. While Ms. Huffman felt relieved that there was less pressure to complete the application immediately,⁷⁶ she continued to work on the documents. Additional documents were received and accepted by SDS on March 27.⁷⁷ In addition, any reliance must be reasonable. It would not be reasonable for Baker Homecare to rely on receiving additional extensions indefinitely into the future simply because it was making some effort to complete its application. A reasonable provider would understand that at some point SDS would set a firm deadline.

Baker Homecare was also not prejudiced by any reliance on Mr. Lentz's statement. To the extent his March 17 statement is viewed as a promise of continued extensions as long as Baker Homecare was making progress, that promise was rescinded on April 1, when Mr. Lentz

⁷² *In re C G*, OAH No. 13-0119-MDE (Commissioner of Health and Social Services 2013), page 3.

⁷³ *Hidden Heights Assisted Living, Inc. v. State, Dept. of Health and Social Services*, 222.03d 258, 268 (Alaska 2009), quoting *State, Dept. of Commerce & Economic Development*, 8 P.3d 351, 355 (Alaska 2000).

⁷⁴ AR 176 (e-mail from Mr. Lentz).

⁷⁵ AR 177.

⁷⁶ Huffman testimony.

⁷⁷ See AR 60.

stated that the application would be denied if not completed by April 6.⁷⁸ No harm resulted to Baker Homecare based on its initial belief – on March 17 – that it had unlimited time to complete its application as long as it continued to make progress.⁷⁹

Finally, it would not serve the interests of justice to prevent SDS from acting contrary to Mr. Lentz’s statement that SDS would continue to grant extensions as long as Baker Homecare was in the process of submitting more documents. Mr. Lentz was responding to a lengthy e-mail from Ms. Huffman in which she explained why it was taking longer than expected to submit the policies.⁸⁰ He provided a sympathetic and reassuring response that was technically inaccurate. He was not, however, providing specific guidance on how to comply with regulations or statutes.⁸¹ Baker Homecare would have a stronger argument if Mr. Lentz had made his statement and then denied the application without first stating a firm date after which no further extensions would be granted, but that is not what occurred here.

SDS is not estopped from asserting a deadline by which the application must be complete.

5. *Remedy*

Baker Homecare argues that the correct remedy for any deficiency is not a denial of certification. Instead, it asks that it be put on a remediation plan under 7 AAC 130.220(g). SDS has the option of using a remediation plan instead of decertification when it finds a provider to be out of compliance. This, however, is not a decertification case. Implementing a remediation plan here would have been akin to granting a conditional certification; something not explicitly provided for in the regulations. Assuming SDS had the discretion to impose a remediation plan instead of denying the application, it was not required to do so here. SDS had already allowed multiple extensions and provided “guidance designed to bring the provider into compliance” and

⁷⁸ AR 198.

⁷⁹ Even if the initial “assertion” by SDS is viewed as SDS’s repeated grants of extensions over several months, and a belief from that conduct that more extensions would be forthcoming, there was no prejudice to Baker Homecare when SDS decided to stop granting extensions. If anything, Baker Homecare benefited from these assertions because it was able to continue operating for a longer period of time under its previous certification.

⁸⁰ AR 176 – 177.

⁸¹ *Cf. In re C G*, OAH No. 13-0119-MDE (specific guidance that a home in Tennessee was exempt property); *In re C E*, OAH No. 12-0745-MDE (Commissioner of Health and Social Services 2012), page 4 (assurances on how to fund Miller Trust to qualify for Medicaid); *Davis Wright Tremaine, LLP v. Department of Law*, OAH No. 11-0377-PRO (Commissioner of Administration 2011), pages 7 – 8 (Department not bound by procurement officer’s statement that a late proposal would be accepted), *upheld on other grounds* 324 P.3d 293 (Alaska 2009).

provided a date by which Baker Homecare must comply.⁸² SDS correctly decided to set a final date by which Baker Homecare must be in compliance.

IV. Conclusion

After the initial one-year certification period, Medicaid providers are required to be recertified every two years. The recertification process involves submitting a lengthy and detailed application. Baker Homecare was given several months to provide acceptable policies and procedures for the operation of its Medicaid Waiver services. Ultimately, it failed to provide an adequate and complete application and SDS denied the application. Because the application was incomplete, SDS's decision is AFFIRMED.

Dated this 16th day of October, 2015.

Signed _____
Jeffrey A. Friedman
Administrative Law Judge

Adoption

The undersigned adopts this decision as final under the authority of AS 44.64.060(e)(1). Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with AS 44.62.560 and Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 23rd day of November, 2015.

By: *Signed* _____
Name: Jared C. Kosin, J.D., M.B.A.
Title: Executive Director
Agency: Office of Rate Review, DHSS

[This document has been modified to conform to the technical standards for publication.]

⁸² 7 AAC 130.220(g)(2).