

**Whereas** on January 31, 2020, the Secretary of Health and Human Services declared a public health emergency retroactive to January 27, 2020, for the entire United States to aid the nation’s healthcare community in responding to the 2019 novel coronavirus; and

**Whereas** on March 13, 2020, the President of the United States determined that the spread of COVID-19 within our Nation’s communities threatens to strain our Nation’s healthcare systems and proclaimed under the National Emergencies Act (50 U.S.C. 1601 et seq.) that the COVID-19 outbreak in the United States constituted a national emergency beginning March 1, 2020; and

**Whereas** on March 13, 2020, the President of the United States declared that the ongoing Coronavirus Disease (COVID-19) pandemic is of sufficient severity and magnitude to warrant an emergency declaration for all states, tribes, territories, and the District of Columbia pursuant to section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the “Stafford Act”); and

**Whereas** on April 9, 2020, the President of United States declared a major disaster in the State of Alaska related to COVID-19 and ordered Federal assistance to supplement State, tribal, and local recovery efforts pending in the areas affected by the Coronavirus (COVID-19) pandemic, beginning on January 20, 2020, and continuing; and

**Whereas** on January 7, 2021, the Secretary of Health and Human Services, as a result of the continued consequences of the COVID-19 pandemic, after consultation with public health officials as necessary and pursuant to authority under section 319 of the Public Health Services Act, renewed effective January 21, 2021, the January 31, 2020, determination that had been previously renewed on April 21, 2020, July 23, 2020, and October 2, 2020, that a public health emergency exists and has existed nationwide since January 27, 2020; and

**Whereas** the Indian Health Service (IHS) and its tribal health partners seek to maximize the number of qualified and capable health care workers to prepare for and respond to the COVID-19 pandemic throughout Alaska, and particularly in rural Alaska, and it is anticipated that Community Health Practitioners may be unable to satisfy their once-every six years practitioner re-credentialing requirements in light of the COVID-19 pandemic.

**\*\* TEMPORARY EMERGENCY NOTICE AND EXTENSION REGARDING  
COMMUNITY HEALTH PRACTITIONER CREDENTIALS \*\***

- 1) Community Health Practitioner credentials set to expire under CB 2.50.200(a)(6) between October 31, 2020 and June 30, 2021, are extended and valid for a period of 180 days from the date of credential expiration. This is effective as of November 1, 2020, and applies only to otherwise valid, unexpired Community Health Practitioner credentials;
- 2) For Community Health Practitioner credentials set to expire between October 31, 2020 and June 30, 2021, all requirements for re-satisfaction of practitioner credentials

under CB 2.50.200(a)(6) (Requirements for Renewal), and by reference CB 2.20.500 (CHP Training & Education Requirements), are extended for a period of 180 days from the date of credential expiration. This is effective as of November 1, 2020;

- 3) For credentials previously set to expire between March 1, 2020 and October 31, 2020, and for which a prior Temporary Emergency Notice and Extension Regarding Community Health Practitioner Credentials has previously been issued effective March 1, 2020, the impacted credentials and all requirements for re-satisfaction of practitioner credentials are extended for a period of an additional 180 days from the date of credential expiration. This is effective and applies only to otherwise valid, unexpired Community Health Practitioner credentials;
- 4) This Emergency Notice and Extension does not alter or amend the two-year Requirements for Renewal for provider certificates under CBs 2.50.100 (Expiration) and 2.50.200 (Requirements for Renewal), or any separate continuing education requirements;
- 5) This Emergency Notice and Extension does not alter or permit any Community Health Practitioner or any other provider to provide services beyond the scope allowed in accordance with the Community Health Aide Program Certification Board (CHAPCB) Standards and Procedures;
- 6) This Emergency Notice and Extension does not alter or amend any supervisory or employment related requirements otherwise set forth in the CHAPCB Standards and Procedures as applied to Community Health Practitioners or any other provider;
- 7) The Alaska Area Native Health Service – Indian Health Service, or CHAPCB, may still address any individual provider credentials or certificate or certificates for reasons set forth in the CHAPCB Standards and Procedures, including under Chapters 4 or 9, or as otherwise authorized by law.

Community Health Practitioners affected by this Temporary Emergency Notice and Extension are strongly encouraged, to the extent safe and practicable, to: (a) satisfy re-credentialing requirements as soon as possible; and (b) submit appropriate materials to the CHAPCB, including via an appropriate CHA/P Training Center, as far in advance as possible.