



ABOLISHING THE 80TH PERCENTILE RULE IS DETRIMENTAL TO ALASKA'S HEALTHCARE SYSTEM



Learn More



PROTECT ALASKA'S 80TH PERCENTILE RULE

Lower-48 insurance companies and the Alaska Division of Insurance recently abolished Alaska's 80th Percentile Rule, a 2004 State of Alaska regulation implemented to protect patients, families and workers from predatory bill practices, exorbitant out-of-pocket medical costs and surprise medical billing. In short, the rule states that health insurers must reimburse out-of-network healthcare providers at an amount equal to or greater than the 80th percentile of charges in a community, rather than unilaterally determining an amount and saddling patients with the remainder. If this repeal is allowed to stand without adequate guardrails in place, the impacts will be devastating to Alaska's healthcare system, especially for our seniors, veterans, rural residents and other vulnerable populations who already struggle to find adequate medical access in Alaska.



Repealing the 80th Percentile Rule Is Bad For Families, Seniors & Patients in Need of Specialty Care

Without Alaska's 80th Percentile Rule, insurance companies have ZERO incentive to negotiate with your doctor. The result – they get to pick the winners and losers in our healthcare system; shrinking our healthcare market, reducing access, and driving specialists out of Alaska. For vulnerable populations like seniors, veterans, and rural residents, this would be catastrophic and would result in less access to care at home. **Providers will be forced to limit or stop seeing non-privately insured payers all together as their fees will be drastically cut by insurers.**



Without the 80th Percentile Rule, Insurance Companies Have All the Control

If Alaska's 80th Percentile rule goes away, access to reliable medical care in Alaska will be significantly impacted. That's because the 80th Percentile Rule prevents insurance companies from completely controlling Alaska's healthcare system. Without the 80th Percentile Rule, insurance companies have all the bargaining power, deciding which doctors you see, when and where you'll see them, and arbitrarily deciding how much they'll pay. **Providers will be forced out-of-network by insurers who see no reason to contract with them and seek to narrow their networks.**



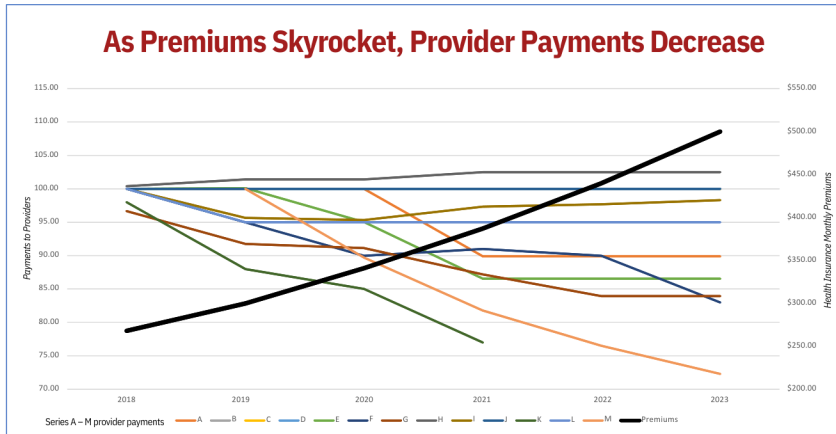
Alaska's 80th Percentile Rule Protects Patients Access to Care

The 80th Percentile Rule was adopted by the State of Alaska due to the volume of complaints from Alaskans that their insurance companies were not paying their medical bills and Alaskans were left paying more than their health insurance policy promised. It was designed to ensure insurance companies based outside of Alaska do not pay only part of your medical bill and saddle the patient with the remainder.

CONSIDER THIS...

In the intervening years since the implementation of the 80th Percentile Rule, the entire healthcare system in Alaska has grown – bringing care to many who could not receive healthcare before. Counterintuitively, fees paid to healthcare providers by insurers have only decreased since 2018.

Where is the Money Going?



Series A through M represent fees paid by insurance for a unit of healthcare service. 13 different medical, chiropractic, physical therapy, or surgical practices in Alaska, for the first time ever, shared anonymized data on insurance reimbursement. Providers tabulated their historical contracted rates for a representative common procedure, made them proportional to the first year data was available, and shared them here anonymously. Premiums indicates the monthly insurance premium paid by a local medical practice, an Alaskan small business owner.

While provider fees have fallen, hospital profits in Alaska have only risen. (see attached AK Hospital balance sheets). Hospital fees are roughly 10X that of providers for a given procedure.

FLAWED BASIS FOR REPEAL

State of Alaska regulators based their decision to repeal the 80th Percentile Rule on a deeply flawed 2018 Institute of Social and Economic Research (ISER) to conclude the rule was contributing to increased healthcare costs in Alaska. However, the study relied on incomplete and outdated data while also failing to account for Alaska's dramatically changing demographics. The basis for repeal was also predicated on flawed data produced by FairHealth, a national repository for private claims data, which falsely claim medical reimbursement rates are rising at the same rate of insurance premium increases.

In an effort to reconcile these discrepancies, for the first time in Alaska and possibly the United States, CRMA led cooperation among multiple physician, chiropractic, physical therapy and other practices in Alaska to share, in anonymous fashion, how much insurance has paid them for a given unit of service over the past several years. The chart (see above) shows flat or declining reimbursements across the healthcare spectrum for years, simultaneous with skyrocketing insurance premiums.

With this actual Alaska data in hand, it is clear there is no direct relationship between provider fees and health insurance premiums. If anything, this data outlines an inverse relationship, and demonstrates the 80th Percentile Rule is demonstrably not the cause of healthcare cost inflation in Alaska.

PRESERVING ALASKA'S 80TH PERCENTILE RULE

Preserving Alaska's 80th Percentile rule and advocating the importance of ensuring equitable healthcare access is essential to a healthy Alaska. There are many reasons the 80th should not be repealed:

- The 80th Percentile Rule protects patients from balance billing and out-of-pocket costs for healthcare in Alaska.
- The 80th Percentile Rule encourages providers and insurers to work together in good faith for fair and transparent contracting to benefit patients.
- The Federal No Surprises Act applies only to emergent care and does NOT replace the patient protections in the 80th Percentile Rule.
- Repealing the 80th Percentile Rule will only benefit insurance companies, all of whom are based in the lower-48 and enjoy substantial profits.
- Any claim that increasing insurance company profits will "trickle-down" to reduce the individual Alaskan's healthcare costs is dubious at best.
- Healthcare is a major employer of Alaskans and provides well-paying jobs with good benefits, which supports a healthy economy.
- Repealing the 80th Percentile Rule will affect Alaska's ability to recruit and retain high quality healthcare providers, which are already in short supply.



State of Alaska regulators shouldn't fold to the pressures of the out-of-state insurance companies. They should be working to preserve the 80th Percentile Rule, one of the few tools we have to hold the insurance companies accountable, ensure they pay their fair share, and protect Alaska's vulnerable healthcare ecosystem.



On May 12, 2023, the State of Alaska proposed abolishing the 80th Percentile Rule without a replacement; allowing insurance companies to set their own reimbursement rates for out-of-network providers. Initial filings show a reimbursement rate of 125% of Medicare, which would jeopardize access for countless Alaskans.



The 80th percentile rule is to be repealed as of January 1, 2024 without adequate guardrails in place.



The Alaska medical community has led efforts to develop a noninflationary replacement for the 80th Percentile Rule – to no avail.



In March of 2023, 623 medical providers and 25+ professional and practice signatories urged Alaska Governor Mike Dunleavy to protect and preserve the 80th Percentile Rule.



"The [80th Percentile Rule] is a consumer protection that's meant to keep patients from getting a surprise bill for elective and outpatient procedures, and it's been very effective"

Dr. Steven Compton
Alaska State Medical Association



"Without this regulation in place, the insurance company arbitrarily decides what they pay the out-of-network providers. Anything over that amount ends up being billed to the patient."

Kati Harkreader
Alaska Medical Group Management Association



"Without [the 80th Percentile Rule], medical reimbursement rates will get slashed, our ability to hire and retain qualified medical professionals with only get worse, and Alaska's ability to provide quality care here at home will drastically decrease.

Dr. Stephen Baker
Full Spectrum Pediatrics



"If it weren't for Alaska's 80th Percentile Rule, I would've been on the hook for thousands of dollars of out-of-pocket medical costs for my life saving procedure. Now, they are trying abolish the rule that helped me when it mattered most."

Bernie Vannoy
Master Electrician · Wasilla, AK



"As a senior with Medicare, it's hard enough to find reliable medical care in Alaska. Now insurance companies are trying to eliminate the 80th percentile rule, a State of Alaska regulation that promotes competition, helps recruit and retain medical professionals, and ensures insurance companies don't have a monopoly on our healthcare system. The 80th Percentile Rule... helps ensure vulnerable populations like seniors, veterans and rural residents can access specialty care here at home.

Pam Ventgen
Alaska State Medical Association

The Coalition for Reliable Medical Access is a group of diverse Alaska community leaders, small businesses, public and private sector employees, non-profits, medical professionals and concerned citizens with the shared focused of providing reliable access to medical care in Alaska. Together we advocate for maintaining healthcare quality across our state by preserving the 80th Percentile rule, and emphasizing the positive impacts the rule has had on Alaska's unique healthcare market and vulnerable populations.

WWW.RELIABLEMEDICALACCESS.ORG

See column headings for cost reporting periods. / Definitions

Balance Sheet

Period ending date	12/31/2021	12/31/2020	12/31/2019	12/31/2018	12/31/2017
Number of months in period	12	12	12	12	12
Cost report status	As Submitted	Amended	As Submitted	As Submitted	Settled Without Audit
Assets					
Current Assets	\$839,245,226	\$679,056,564	\$598,573,767	\$627,550,757	\$569,837,195
Fixed Assets	\$194,323,627	\$209,032,484	\$220,408,530	\$245,736,512	\$260,192,018
Other Assets	\$1,220,916,902	\$1,115,019,700	\$921,756,396	\$670,839,673	\$557,473,577
Total Assets	\$2,254,485,755	\$2,003,108,748	\$1,740,738,693	\$1,544,126,942	\$1,387,502,790
Liabilities and Fund Balances					
Current Liabilities	\$128,366,796	\$90,575,711	\$115,519,442	\$102,802,389	\$39,164,154
Long-Term Liabilities	\$180,694,986	\$239,685,742	\$190,391,041	\$153,810,346	\$155,353,128
Total Liabilities	\$309,061,782	\$330,261,453	\$305,910,483	\$256,612,735	\$194,517,282
Total Fund Balances	\$1,945,423,973	\$1,672,847,295	\$1,434,828,210	\$1,287,514,207	\$1,192,985,508
Total Liabilities & Fund Balances	\$2,254,485,755	\$2,003,108,748	\$1,740,738,693	\$1,544,126,942	\$1,387,502,790

Income Statement

Data are annualized for periods other than twelve months.

Period ending date	12/31/2021	12/31/2020	12/31/2019	12/31/2018	12/31/2017
Number of months in period	12	12	12	12	12
Cost report status	As Submitted	Amended	As Submitted	As Submitted	Settled Without Audit
Inpatient Revenue	\$1,860,217,376	\$1,641,827,242	\$1,673,972,299	\$1,619,806,398	\$1,560,515,839
Outpatient Revenue	\$886,307,708	\$811,679,605	\$885,175,975	\$820,440,956	\$744,123,720
Total Patient Revenue	\$2,746,525,084	\$2,453,506,847	\$2,559,148,274	\$2,440,247,354	\$2,304,639,559
Contractual Allowance (Discounts)	\$2,026,536,542	\$1,794,463,870	\$1,854,814,865	\$1,743,838,350	\$1,627,289,418
Net Patient Revenues	\$719,988,542	\$659,042,977	\$704,333,409	\$696,409,004	\$677,350,141
Total Operating Expense	\$649,020,774	\$583,923,537	\$586,500,315	\$584,683,429	\$596,739,249
Operating Income	\$70,967,768	\$75,119,440	\$117,833,094	\$111,725,575	\$80,610,892
Other Income (Contributions, Bequests, etc.)	\$5,487,808	\$3,198,746	\$3,342,056	\$2,873,308	\$5,382,026
Income from Investments	\$114,657,402	\$115,343,980	\$110,713,715	\$-23,790,759	\$50,531,144
Governmental Appropriations	\$0	\$0	\$0	\$0	\$0
Miscellaneous Non-Patient Revenue	\$35,119,897	\$25,106,327	\$15,868,830	\$19,107,501	\$15,866,575
Total Non-Patient Revenue	\$155,265,107	\$143,649,053	\$129,924,601	\$-1,809,950	\$71,779,745
Total Other Expenses	\$-324,894	\$-15,000	\$0	\$0	\$0
Net Income or (Loss)	\$226,557,769	\$218,783,493	\$247,757,695	\$109,915,625	\$152,390,637
Depreciation Expense (included above)	\$33,094,927	\$35,084,418	\$36,523,453	\$40,414,042	\$41,098,908

Uncompensated Care

This hospital's most recent cost reporting period is for the period ending 12/31/2021

Bad Debt Expense	\$12,567,065
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	Revenue	Estimated Cost
Medicaid	\$798,326,558	\$163,371,143

State Children's Health Insurance Program (SCHIP)	\$0	\$0
State and local indigent care programs	\$0	\$0
TOTAL Governmental Programs	\$798,326,558	\$163,371,143
Other uncompensated care	\$56,505,791	\$12,477,853
Restricted grants	\$0	N/A
Unrestricted grants	\$0	N/A

See column headings for cost reporting periods. / Definitions

Balance Sheet

Period ending date	12/31/2021	12/31/2020	12/31/2019	12/31/2018	12/31/2017
Number of months in period	12	12	12	12	12
Cost report status	As Submitted	As Submitted	As Submitted	Settled Without Audit	Reopened
Assets					
Current Assets	\$22,926,287	\$18,509,090	\$25,570,803	\$21,538,833	\$16,191,132
Fixed Assets	\$75,436,904	\$80,669,133	\$83,027,758	\$82,201,972	\$89,700,882
Other Assets	\$1,071,872	\$1,239,670	\$1,475,106	\$221,149	\$221,149
Total Assets	\$99,435,063	\$100,417,893	\$110,073,667	\$103,961,954	\$106,113,163
Liabilities and Fund Balances					
Current Liabilities	\$23,261,358	\$24,654,347	\$21,695,316	\$20,664,076	\$14,161,007
Long-Term Liabilities	\$-603,835,782	\$-480,585,760	\$-360,121,368	\$-283,757,398	\$-232,170,205
Total Liabilities	\$-580,574,424	\$-455,931,413	\$-338,426,052	\$-263,093,322	\$-218,009,198
Total Fund Balances	\$680,009,487	\$556,349,306	\$448,499,719	\$367,055,276	\$324,122,361
Total Liabilities & Fund Balances	\$99,435,063	\$100,417,893	\$110,073,667	\$103,961,954	\$106,113,163

Income Statement

Data are annualized for periods other than twelve months.

Period ending date	12/31/2021	12/31/2020	12/31/2019	12/31/2018	12/31/2017
Number of months in period	12	12	12	12	12
Cost report status	As Submitted	As Submitted	As Submitted	Settled Without Audit	Reopened
Inpatient Revenue	\$1,182,297,177	\$1,035,426,192	\$988,391,522	\$787,429,545	\$696,758,442
Outpatient Revenue	\$566,729,980	\$439,265,219	\$413,626,736	\$348,331,924	\$323,568,073
Total Patient Revenue	\$1,749,027,157	\$1,474,691,411	\$1,402,018,258	\$1,135,761,469	\$1,020,326,515
Contractual Allowance (Discounts)	\$1,385,215,550	\$1,150,905,464	\$1,092,905,229	\$875,545,077	\$765,228,974
Net Patient Revenues	\$363,811,607	\$323,785,947	\$309,113,029	\$260,216,392	\$255,097,541
Total Operating Expense	\$212,076,643	\$200,741,553	\$213,584,204	\$197,918,242	\$198,249,497
Operating Income	\$151,734,964	\$123,044,394	\$95,528,825	\$62,298,150	\$56,848,044
Other Income (Contributions, Bequests, etc.)	\$0	\$0	\$0	\$-5,962	\$1,367
Income from Investments	\$0	\$0	\$0	\$0	\$0
Governmental Appropriations	\$0	\$0	\$0	\$0	\$0
Miscellaneous Non-Patient Revenue	\$465,813	\$536,313	\$551,591	\$536,468	\$788,088
Total Non-Patient Revenue	\$465,813	\$536,313	\$551,591	\$530,506	\$789,455
Total Other Expenses	\$0	\$0	\$0	\$0	\$0
Net Income or (Loss)	\$152,200,777	\$123,580,707	\$96,080,416	\$62,828,656	\$57,637,499
Depreciation Expense (included above)	\$10,897,092	\$10,379,181	\$10,694,085	\$11,318,862	\$11,277,541

Uncompensated Care

This hospital's most recent cost reporting period is for the period ending 12/31/2021

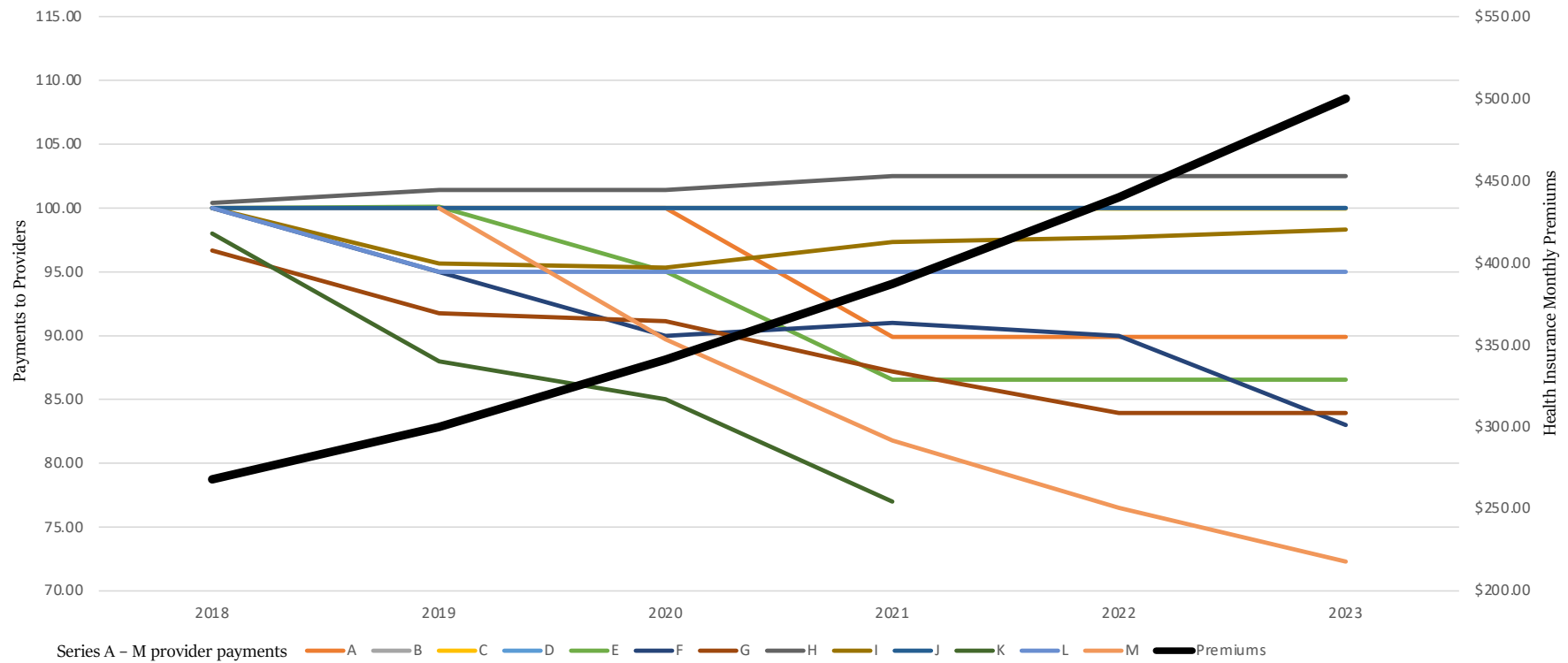
Bad Debt Expense	\$5,846,063
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	Revenue	Estimated Cost
Medicaid	\$393,572,000	\$49,850,617

State Children's Health Insurance Program (SCHIP)	\$0	\$0
State and local indigent care programs	\$6,834,399	\$865,659
TOTAL Governmental Programs	\$400,406,399	\$50,716,276
Other uncompensated care	\$33,217,871	\$5,112,056
Restricted grants	\$0	N/A
Unrestricted grants	\$0	N/A

Where is the Money Going?

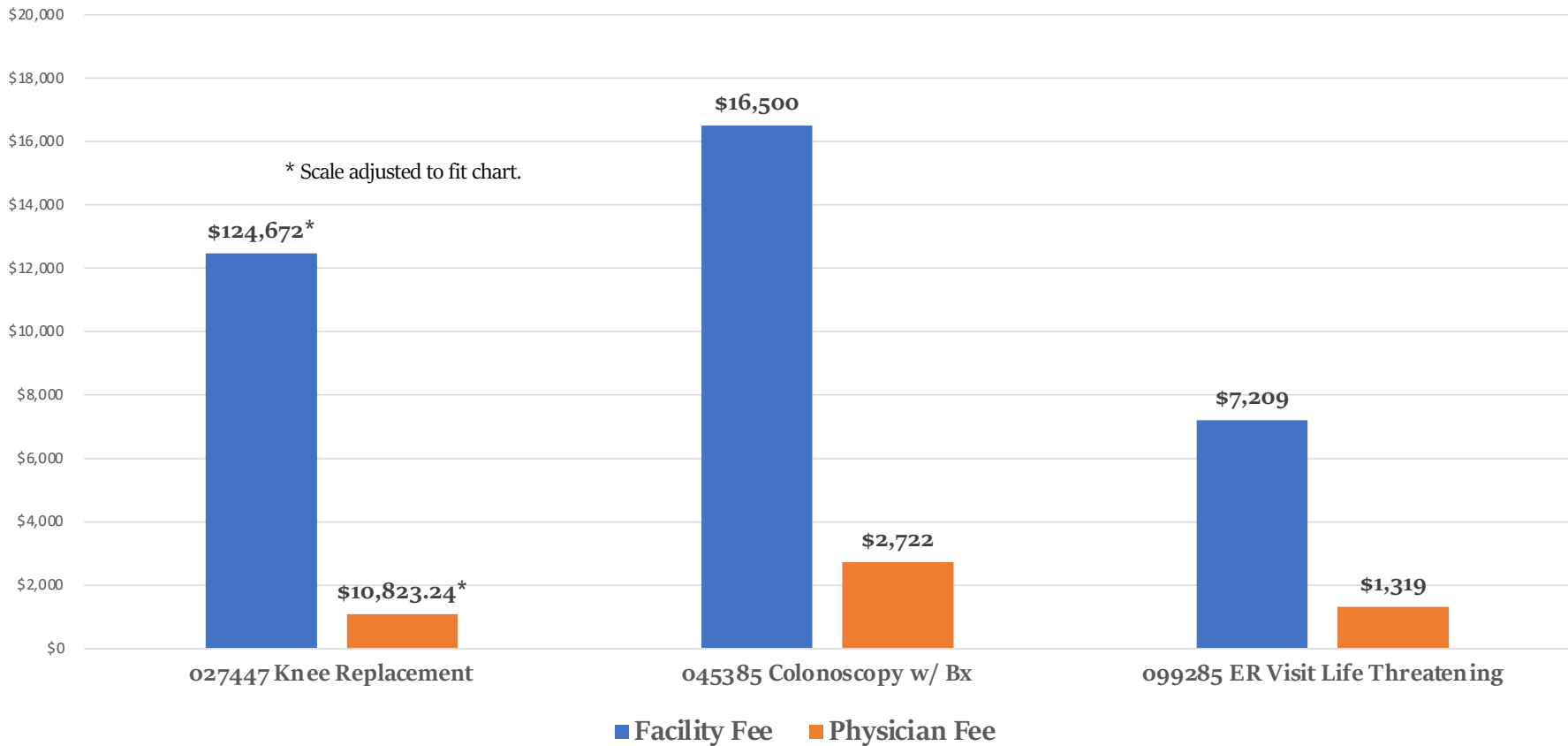
As Premiums Skyrocket, Provider Payments Decrease



Series A through M are the fees paid by insurance for a unit of healthcare service. 13 different medical, chiropractic, physical therapy, or surgical practices in Alaska, for the first time ever, shared anonymized data on insurance reimbursement. Providers tabulated their historical contracted rates for a representative common procedure, made them proportional to the first year data was available, and shared them here anonymously.

Premiums indicates the monthly insurance premium paid by a local medical practice, an Alaskan small business owner.

For Each Patient, Many More Dollars Go to the Hospital Than the Doctor



Facility Charge Data from <https://www.alaskaregional.com/patients/top-charges.dot>

Physician Charge data from FAIR Health 2023 80th percentile charge report to CRMA

A few of the “Derived” Prices

Year	Geozip	CPT	Procedure	Charges					Contracted Payments					Area
				50 th	60 th	70 th	80 th	90 th	50 th	60 th	70 th	80 th	90 th	
2018	996	33533	CABG ARTERIAL SINGLE	\$ 12,891.42	\$ 14,649.91	\$ 15,589.52	\$ 16,147.64	\$ 20,412.83	\$ 5,747.60	\$ 6,239.90	\$ 6,313.35	\$ 7,010.80	\$ 8,621.40	Kodiak
2019	996	33533	CABG ARTERIAL SINGLE	\$ 14,883.51	\$ 14,941.99	\$ 15,436.51	\$ 16,327.38	\$ 18,051.02	\$ 6,302.52	\$ 6,302.52	\$ 6,515.34	\$ 6,916.57	\$ 7,614.26	Kodiak
2020	996	33533	CABG ARTERIAL SINGLE	\$ 11,541.38	\$ 14,167.06	\$ 15,448.03	\$ 16,417.81	\$ 18,347.28	\$ 4,596.95	\$ 5,736.57	\$ 6,153.75	\$ 6,539.27	\$ 7,239.62	Kodiak
2021	996	33533	CABG ARTERIAL SINGLE	\$ 13,265.96	\$ 15,448.03	\$ 15,448.03	\$ 18,051.02	\$ 19,085.19	\$ 5,204.15	\$ 6,068.83	\$ 6,072.27	\$ 7,096.31	\$ 7,502.41	Kodiak
2022	996	33533	CABG ARTERIAL SINGLE	\$ 13,321.74	\$ 15,448.03	\$ 16,417.81	\$ 18,051.02	\$ 21,538.13	\$ 8,761.51	\$ 8,782.24	\$ 9,993.75	\$ 12,922.72	\$ 13,031.85	Kodiak
2023	996	33533	CABG ARTERIAL SINGLE	\$ 13,265.96	\$ 15,017.41	\$ 17,173.25	\$ 20,230.48	\$ 21,538.13	\$ 7,011.00	\$ 7,011.00	\$ 7,333.95	\$ 9,601.41	\$ 9,637.81	Kodiak
2018	997	33533	CABG ARTERIAL SINGLE	\$ 31,600.00	\$ 31,600.00	\$ 31,600.00	\$ 36,178.98	\$ 36,178.98	\$ 13,982.99	\$ 13,982.99	\$ 13,982.99	\$ 16,009.20	\$ 16,009.20	Fairbanks
2019	997	33533	CABG ARTERIAL SINGLE	\$ 31,600.00	\$ 31,600.00	\$ 33,732.99	\$ 33,732.99	\$ 36,178.98	\$ 17,648.61	\$ 17,648.61	\$ 18,839.88	\$ 18,839.88	\$ 20,205.96	Fairbanks
2020	997	33533	CABG ARTERIAL SINGLE	\$ 33,732.99	\$ 33,732.99	\$ 36,178.98	\$ 36,178.98	\$ 36,178.98	\$ 17,496.93	\$ 17,496.93	\$ 17,496.93	\$ 17,496.93	\$ 17,496.93	Fairbanks
2021	997	33533	CABG ARTERIAL SINGLE	\$ 13,883.01	\$ 31,600.00	\$ 31,600.00	\$ 36,178.98	\$ 36,178.98	\$ 7,875.82	\$ 17,926.66	\$ 17,926.66	\$ 20,524.33	\$ 20,524.33	Fairbanks
2022	997	33533	CABG ARTERIAL SINGLE	\$ 7,256.99	\$ 13,883.01	\$ 36,178.98	\$ 36,178.98	\$ 36,178.98	\$ 4,185.83	\$ 8,007.72	\$ 20,868.04	\$ 20,868.04	\$ 20,868.04	Fairbanks
2023	997	33533	CABG ARTERIAL SINGLE	\$ 7,256.99	\$ 7,256.99	\$ 13,883.01	\$ 36,178.98	\$ 36,178.98	\$ 4,291.05	\$ 4,291.05	\$ 8,209.03	\$ 21,392.62	\$ 21,392.62	Fairbanks
2018	998	33533	CABG ARTERIAL SINGLE	\$ 13,675.01	\$ 14,358.77	\$ 14,358.77	\$ 15,042.52	\$ 16,409.98	\$ 5,747.60	\$ 5,747.60	\$ 6,112.74	\$ 6,714.68	\$ 7,795.47	Juneau
2019	998	33533	CABG ARTERIAL SINGLE	\$ 11,541.38	\$ 13,231.40	\$ 14,769.00	\$ 14,941.99	\$ 14,941.99	\$ 4,868.16	\$ 5,581.01	\$ 6,230.15	\$ 6,302.52	\$ 6,302.52	Juneau
2020	998	33533	CABG ARTERIAL SINGLE	\$ 11,541.38	\$ 11,541.38	\$ 15,179.23	\$ 15,887.51	\$ 22,840.11	\$ 4,596.95	\$ 4,596.95	\$ 6,327.97	\$ 8,211.91	\$ 9,097.21	Juneau
2021	998	33533	CABG ARTERIAL SINGLE	\$ 5,907.60	\$ 6,174.28	\$ 9,145.51	\$ 15,787.57	\$ 23,754.61	\$ 2,460.37	\$ 2,711.64	\$ 3,595.17	\$ 6,206.38	\$ 9,337.95	Juneau
2022	998	33533	CABG ARTERIAL SINGLE	\$ 13,567.34	\$ 15,919.16	\$ 16,524.30	\$ 22,840.11	\$ 23,754.61	\$ 7,825.64	\$ 9,182.17	\$ 9,531.22	\$ 13,174.18	\$ 13,701.66	Juneau
2023	998	33533	CABG ARTERIAL SINGLE	\$ 14,536.59	\$ 16,032.73	\$ 17,185.60	\$ 23,754.61	\$ 24,706.17	\$ 8,595.48	\$ 9,480.15	\$ 10,161.86	\$ 14,046.10	\$ 14,608.76	Juneau
2018	999	33533	CABG ARTERIAL SINGLE	\$ 9,846.00	\$ 11,043.47	\$ 12,205.20	\$ 13,675.01	\$ 14,838.32	\$ 4,529.41	\$ 5,124.25	\$ 5,579.09	\$ 6,518.45	\$ 7,245.23	Ketchikan
2019	999	33533	CABG ARTERIAL SINGLE	\$ 9,846.00	\$ 11,043.47	\$ 11,917.50	\$ 13,675.01	\$ 16,055.43	\$ 4,705.30	\$ 5,414.07	\$ 5,833.07	\$ 6,909.63	\$ 8,081.65	Ketchikan
2020	999	33533	CABG ARTERIAL SINGLE	\$ 9,846.00	\$ 11,108.36	\$ 11,917.50	\$ 13,737.53	\$ 16,409.98	\$ 4,731.50	\$ 5,422.04	\$ 5,797.72	\$ 6,715.91	\$ 8,093.51	Ketchikan
2021	999	33533	CABG ARTERIAL SINGLE	\$ 9,846.00	\$ 10,528.08	\$ 11,917.50	\$ 13,948.48	\$ 17,543.80	\$ 4,361.58	\$ 5,309.55	\$ 5,895.59	\$ 6,825.49	\$ 9,037.15	Ketchikan
2022	999	33533	CABG ARTERIAL SINGLE	\$ 4,826.46	\$ 6,537.74	\$ 7,442.20	\$ 12,566.89	\$ 13,075.29	\$ 2,783.90	\$ 3,770.97	\$ 4,292.66	\$ 7,248.58	\$ 7,541.83	Ketchikan
2023	999	33533	CABG ARTERIAL SINGLE	\$ 10,256.23	\$ 11,110.03	\$ 12,301.74	\$ 14,942.29	\$ 20,767.43	\$ 6,782.43	\$ 6,795.75	\$ 6,795.75	\$ 8,494.69	\$ 9,532.89	Ketchikan

There are no heart surgeries in Kodiak, Fairbanks, Juneau, or Ketchikan