

Division of Senior and Disabilities Services • Choice Program
Document Cover Sheet

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To: CHOICE Medicaid Waiver Program State of Alaska Department of Health and Social Services Division of Senior and Disabilities Services The Frontier Building 3601 C Street, Suite 310 Anchorage, AK 99503-5209 E-mail: waiver@admin.state.ak.us Telephone: 907-269-3666 or 1-800-478-9996 Fax: 907-269-3688 Copy:		From: Care Coordinator: Care Coordination Agency: Telephone: (907) Fax: (907) E-mail: PLEASE NOTE: This fax contains confidential and sensitive information protected by the laws of the State of Alaska and the Federal Government. If you have received this message in error, please call the phone number above, return this message by fax, and destroy your copy. Thank you.
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