

44 **competent professional veterinary services to consumers and to protect the public from**
45 **veterinary practitioners who pose a risk to the public’s health, safety, and welfare.**

46
47 Dr. Bergartt went on to extend a welcome to the board’s newest member, Dr. Denise Albert.
48 Dr. Albert was asked to share with the board her top three favorite things about herself.

49
50 Dr. Albert responded that she loves where she lives near Denali National Park. She loves to
51 explore the trails near her home with her pets. She has enjoyed practicing veterinary medicine
52 for 30+ years.

53
54 **Agenda Item 2** **Review/ Approve Agenda** **Time: 9:05 a.m.**

55
56 **On a motion duly made by Chris Michetti, seconded by Hal Geiger, and with unanimous**
57 **approval it was:**

58
59 **RESOLVED the APROVE the agenda for the meeting as written.**

60
61 **Agenda Item 3** **Review/ Approve Past Meeting Minutes** **Time: 9:07 a.m.**

62
63 **On a motion duly made by Hal Geiger, seconded by Chris Michetti, and with unanimous**
64 **approval it was:**

65
66 **RESOLVED to APROVE the minutes from the March 23, 2020 board meeting.**

67
68 **Agenda Item 4** **Ethics** **Time: 9:09 a.m.**

69
70 As Board Chair, Dr. Bergartt is the Designated Ethics Supervisor (DES) for the BOVE.

71
72 Dr. Bergartt disclosed that she and her partner are looking at, potentially, buying a boat from a
73 licensee. After a brief discussion, it was determined that, so long as Dr. Bergartt does not
74 receive a deal on the boat due to her affiliation with the board that could be construed as a gift
75 from a licensee, then no further action on ethics disclosure would be required.

76
77 Dr. Albert said that she had contact with a licensee regarding health mandate restrictions. OLE
78 Lund requested that any board member receiving questions or requests for clarification regarding
79 health mandates or any other COVID related uncertainties, to please direct them to her at
80 boardofveterinaryexaminers@alaska.gov. If OLE Lund is unable to provide direct clarification,
81 she has direct contact with the individual who will know the answer. That way, all information
82 being disseminated will be consistent.

83 As the board was running a bit ahead of the agenda, the next item up for discussion was:

84
85 **Agenda Item 11 B.** **COVID-19** **Time: 9:15 a.m.**

86

87 **Health Mandates**

88 OLE Lund has been in contact with the Alaska Veterinary Medical Association (AKVMA) to
89 answer questions about health mandates. OLE Lund went on to explain, in Health Mandate 15,
90 released on April 15th, the Governor announced that procedures which had been previously
91 prohibited under Health Mandate 5 could begin the process to resume in stages. On Monday,
92 April 20, health practitioners could resume all procedures so long as the procedure required
93 minimal PPE. On May 4th, all elective procedure can resume, regardless of the amount of PPE
94 used with the caveat that proper precautions continue to be used. Veterinary practices are
95 encouraged to continue observing social distance between staff, wearing face coverings,
96 regularly sanitizing commonly touched surfaces, not allowing clients to linger in waiting rooms,
97 utilizing curbside and telehealth services whenever possible, limiting and screening clients
98 admitted into the facility for any COVID related symptoms or recent travel, etc.

99
100 **TASK:** Dr. Bergartt asked that OLE Lund publish information on the board homepage where it
101 can easily be accessed by licensees. – Best practices, recommendations for veterinarians,
102 curbside pickup, limiting number for owners able to be present for a euthanasia, etc.

103
104 **TASK:** Publish on the board homepage a clarifying list of urgent/emergent procedures. Note that
105 the ultimate judgement should be left up to the professional performing the procedure.

106
107
108 Dr. Flamme stated, even after Health Mandate 5 (mandating that all elective procedures be
109 postponed in order to conserve PPE) was announced, some veterinarians continued to perform
110 spays and neuters. He said there was too much grey area for practitioners to interpret what was
111 mandated because it was not clearly defined.

112
113 Dr. Bergartt agreed and went on to say, without have things clearly defined on the board
114 website -as far as what the board expects of licensees -things were left up to the discretion of
115 individual practitioners to decide on best practices. She went on to say that, potentially, there are
116 some reasons for an emergency spay or neuter, but that was probably not what Dr. Flamme was
117 referring to.

118
119 Dr. Flamme said, if the virus were to have a resurgence this fall, it would be helpful to have clear
120 definitions of what is routine or elective. He went on to say there likely won't be a shortage of
121 PPE, but it would be nice to have more definitive guidance about where the boundaries are in
122 veterinary practice. Though, he said, maybe that is too much to ask. When professionals are
123 asked to guide themselves and to do what's right, there will be individuals who have no regard
124 for the rules and will do as they wish.

125
126 Dr. Michetti said what is considered essential practice should mostly be left up to the
127 veterinarian. She said individuals are responsible for their own practices. It is essential to spay a
128 dog before six months of age to prevent breast cancer, depending on the breed. It may be
129 essential to neuter a dog before it develops bad behavior. If situations are analyzed case-by-case,

130 as long as a veterinarian is cogent of the circumstances, that is in the best interest of the
131 profession.

132
133 Dr. Geiger agreed and said allowing for professional discretion would be in the best interest of
134 the public as well. Decisions should be made on a case-by-case basis.

135
136 Dr. Albert mentioned having looked at a number of veterinary practice websites to gain insight
137 on the COVID-19 discussions and what they were planning on scheduling. It seemed, in some
138 cases, interpretations were broader and not being interpreted on a case-by-case basis. She said,
139 in those cases, it would seem the public interest was not necessarily being protected in regard to
140 COVID-19. If information -such as a specific list -were posted on the website, it may encourage
141 practitioners to think twice before performing a procedure that may be deemed elective.

142
143 Dr. Flamme wondered if, in a larger practice, an individual was exposed to the virus, what is the
144 mandate for someone who was exposed to that person? Is that entire practice supposed to shut
145 down for 2 weeks?

146
147 OLE Lund clarified that, from what she had read in all the health mandates, if an individual in an
148 establishment tests positive for COVID-19, there are several different options the practice could
149 take. (This information comes from HM16, but is consistent across the board for all businesses,
150 so it would most certainly also apply to veterinary practices.)

151

152 Cleaning and Disinfecting:

153 i. Cleaning and disinfecting must be conducted in compliance with CDC protocols weekly or, in
154 lieu of performing the CDC cleaning and disinfecting, the [veterinary] business may shut down
155 for a period of at least 72 consecutive hours per week to allow for natural deactivation of the
156 virus, followed by site personnel performing a comprehensive disinfection of all common
157 surfaces.

158 ii. When an active employee is identified as being COVID-19 positive by testing, CDC cleaning
159 and disinfecting must be performed as soon after the confirmation of a positive test as practical.
160 In lieu of performing CDC cleaning and disinfecting, [veterinary] businesses may shut down for
161 a period of at least 72 consecutive hours to allow for natural deactivation of the virus, followed
162 by site personnel performing a comprehensive disinfection of all common surfaces.

163 iii. CDC protocols can be found online at: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-businessresponse.html> and
164 <https://www.cdc.gov/coronavirus/2019ncov/community/disinfecting-building-facility.html>.

166

167 **Agenda Item 5**

Fiscal/ Division Update

Time: 9:30 a.m.

168

169 AO Dumas presented the FY20 third quarter board report. This quarter, the BOVE has brought
170 in \$43,062 in total revenue. The expenditures for non-investigative personal services was
171 \$54,901. Personal services include regulations, supervisor, and licensing examiner time directly

172 charged to the program. Investigative personal services charged to the BOVE was \$30,678.
173 The board spent \$2,622 on travel. \$3,899 was charged to the board in services. Services
174 includes things like membership to the AAVSB, long-distance phone calls, postage, advertising
175 and legal advice. Total expenditures for non-investigative cost equal \$61,431 and \$30,743 for
176 investigative costs. Total direct expenditures for the first three quarters of FY 20 came to a total
177 of \$92,174.

178
179 AO Dumas explained that indirect expenditures are flat fees charged to the board for internal
180 administrative costs, departmental costs, and statewide operating costs. These, combined, came
181 to a total of \$49,635 so far for FY 20. This brings the total expenditures for the BOVE to
182 \$141,809. With surplus revenue of \$77,167 from FY 19 and accounting for revenue vs.
183 expenditures for this FY, the BOVE is sitting at a cumulative deficit of \$21,580 through the
184 third quarter.

185
186 For anyone interested in taking a closer look a CBPL program fiscal reports, those can be
187 accessed by visiting <https://www.commerce.alaska.gov/web/cbpl/DivisionReports.aspx>
188

189 The BOVE was due to have a fee analysis, but due to the COVID-19 pandemic, the Governor
190 has decided to place a hold on any fee increases for the time being. The Division will perform
191 another fee analysis after the next program renewal to see if the board does indeed require a fee
192 increase.

193
194 Dr. Bergartt asked for clarification. She stated the board just had a fee analysis and the
195 Division deemed a \$25 fee increase was required for veterinarian licenses. After COVID, the
196 board will be subjected to another fee analysis? She asked for AO Dumas to explain the
197 process.

198
199 AO Dumas explained, because the fee increase was not able to go through as planned, the
200 financial health of the board will be reassessed after the restrictions are lifted to see if
201 veterinarian licensees will, ultimately, receive a fee increase. Hopefully, if a fee increase is
202 required, it will still stand at \$25 as previously suggested and not have to be increased further.
203 With the restriction being in place until mid-November, and license renewals will begin at the
204 beginning of November, there will not be time to implement any fee increase for this renewal
205 period in 2020.

206
207 OLE Lund asked AO Dumas to tell the board about the possibility for payment plans being
208 implemented for license renewals.

209
210 AO Dumas explained that this will be a new feature offered to licensees. A licensee requesting
211 this service will be required to fill out and sign a memorandum agreeing to the terms of the
212 payment plan. Twenty-five percent of the fee will need to be paid up front with the remaining
213 seventy-five percent due within one year. As long as all other terms of the agreement are met,
214 an individual will be able to renew their professional license without paying the full licensing

215 fee in one lump sum. This is still in the early stages, so not all the kinks have been worked out as
216 of the time of this meeting. The Division Director said that she would like this feature to be
217 permanently available for licensees, not just for during the time of COVID.

218

219 Dr. Bergartt inquired as to what additional expense might a payment plan option cost the
220 BOVE.

221

222 AO Dumas clarified that the Admin staff would be processing and tracking the payment plans
223 for the board. Admin does not charge the BOVE directly for time (part of the indirect
224 expenditures), but instead charges a flat fee; therefore, implementing a payment plan would not
225 come at any additional cost to the board. Additional cost would only come if thousands of
226 people signed up for payment plans and Admin was forced to hire additional staff to handle the
227 workload. AO Dumas does not foresee that becoming the case.

228

229

230 **Agenda Item 11 B.**

COVID-19

Time: 9:45 a.m.

231

232 **Cats and COVID-19**

233 There have been a number of confirmed COVID-19 cases in felines diagnosed. The CDC is
234 now recommending social distancing for pets, particularly cats. Dr. Bergartt recommended
235 that individuals who own indoor-outdoor cats to keep them indoors as much as possible. If
236 someone is infected with the virus, arrange to have someone else care for your cat. She went on
237 to say ferrets may be particularly susceptible to COVID- 19 too, and asked other board members
238 if they had been able to find any verifiably published information on the topic.

239

240 Dr. Geiger stated he read a Science article from April 8th which addresses the susceptibility of
241 ferrets, cats, dogs, and domesticated animals to SARS COV-2 virus. The article says that the
242 virus replicates poorly in dogs, pigs, chickens, and ducks, but ferrets and cats are permissive to
243 the infection.

244

245 **TASK:** The board wishes to post the information from the CDC about COVID-19 and animals
246 on their webpage.

247

248 **Division Update from the Director**

Time: 10:00 a.m.

249

250 Division Director Sara Chambers made herself available to the board to answer any questions
251 they may have had. She said there has been confusion from licensees based on the health
252 mandates being issued, especially when it comes to opening business back up responsibly.
253 There was an FAQ document posted on the State COVID-19 page about HM15, which directly
254 affects veterinarians. Director Chambers believes that veterinarians have been doing a great job
255 with curb-side service and limiting public access to their practices. HM15 and the
256 accompanying FAQ provide further clarifications for customers coming into clinics. HM15 is
257 working to accomplish getting back to as regular-as-possible routine services. Boards have the

258 authority to interpret the mandates for their licensees, but any best- practice guidance would not
259 supersede the mandates. If there is any question as to the policies the board is trying to put in
260 place, Director Chambers is happy to forward any documents to Health and Social Services for
261 review, if necessary.

262

263 **Agenda Item 6**

Investigation

Time: 10:15 a.m.

264

265 Investigator Amber Whaley presented to the board from a report with data from December 28,
266 2019 through April 13, 2020. The BOVE has 11 cases open and 2 were closed during that time
267 period. Erika Prieksat will be handling all BOVE investigations as the board's regular
268 Investigator is on extended leave.

269

270 Dr. Bergartt expressed concern about seeing PDMP violations show up on the open cases list
271 and wanted to know if Inv. Whaley could share more information about that since that is a new
272 type of case that the BOVE is seeing. From the information given by Inv. Whaley, the violation
273 likely has something to do with a veterinarian with a DEA registration having failed to register
274 for the State PDMP (Sec. 08.98.050(10)).

275

276 Before the previous investigator had left on extended leave, she had been working on compiling
277 information for the board about case precedent so the board could draft a disciplinary matrix.
278 The board had previously worked on creating a basic disciplinary matrix regarding PDMP
279 complications. That matrix will need to be reviewed by the Department of Law before it can
280 officially be adopted by the board and used by Investigations.

281

282 **TASK:** The previously drafted disciplinary matrix needs to be sent through Dept. of Law.

283

284 Dr. Geiger asked Inv. Whaley for a status update on a licensee who is currently on probation.
285 Inv. Whaley informed the board that, upon last check, the licensee on probation is fully
286 compliant with the terms of the probation.

287

288 *Break: Off record at 10:30.*

289 *On record at 10:45*

290

291 **Agenda Item 7**

Regulations

Time: 10:45 a.m.

292

293 If, due to the COVID-19 public health crisis, the BOVE feels the need to pass emergency
294 regulations, it certainly has the ability to do so. Any authority given to the board under SB
295 241 will not require an act of emergency regulation, but only a policy statement.

296

297 If emergency regulations do need to be enacted, the regulations would only be valid for 120
298 days. Emergency regulation would still be held to the same State standards, but the process
299 would be sped up to accommodate for the emergency.

300

301 **Notarization of Forms**

302 OLE Lund has been getting a lot of correspondence from applicants about the inability to get
 303 application forms notarized since so many businesses offering this service are closed because of
 304 COVID-19. OLE Lund posted a poll for the board in OnBoard and the board came to the
 305 unanimous decision that any form that is not required to be notarized per regulations, will not be
 306 required to be notarized.

307
 308 After removing notarizations from forms, board members would like to still ensure that
 309 documents are legitimate. Adding extra contact information requirements for professional
 310 references in case further questions need to be asked and adding a statement for signing that all
 311 information is true and accurate with potential penalties for falsifications should be adequate.
 312

<u>Notarization</u>	
Required by Regulation	Not required by regulation
Expedited Courtesy License (submitted less than 30 days before the event <u>if</u> an applicant is submitting a copy of an active license in lieu of a license verification from a licensing jurisdiction) (per 12AAC 68.041(e))	Courtesy License- completed application submitted and verification of license received from licensing jurisdiction in which applicant holds and active license.
Temporary License* - a notarized copy of applicant’s diploma is required (per 12AAC 68.045(a)(3))	Permanent Licensure application forms for veterinarians and veterinary technicians
Temporary Permit* - a notarized copy of applicant’s diploma is required (per 12AAC 68.046(a)(3))	Professional Reference forms for all permanent licensure applicants (vets and vet techs)
*The board is working to loosen these regulations and oral comment will be accepted on these regulations during the June 2, 2020 meeting.	Affidavit of Active Practice form for veterinarians applying for licensure by credentials

313
 314
 315 **TASK:** OLE Lund will be working with the Division Publications Specialist to make the
 316 necessary changes to these application forms. Please direct any questions about form
 317 notarizations to boardofveterinaryexaminers@alaska.gov.

318
 319 **Waiving or Reducing CE Requirements**

320 With the passing of Senate Bill 241, boards now have the authority to adjust or waive CE
 321 requirements without having to pass regulation changes.
 322

323 Under normal circumstances, veterinarians would be required to obtain 30 contact hours of
324 continuing education per biennium. Veterinary Technicians are required to have 10 contact
325 hours of CE per biennium. There are no restrictions as to how many of the contact hours need
326 to be performed in-person versus online.

327

328 **In a motion duly made by Hal Geiger, seconded by Denise Albert and approved**
329 **unanimously, it was:**

330

331 **RESOLVED to SUSPEND all continuing education requirements for**
332 **veterinarians and veterinary technicians for the 2020 renewal period due to lack of**
333 **opportunity to travel, restrictions on in-person gatherings, lack of availability for**
334 **wet labs, and all other COVID-19 related restrictions.**

335

336 Authority: Senate Bill 241 Sec. 6(b)(1)

337

338 To further clarify, CE contact credits are not required to be submitted for the 12/31/2020
339 renewal, covering the period from 1/1/2019-12/31/2020; therefore, CE audits will not be
340 conducted. The suspension of CE requirements does not apply to any licensee that is obligated
341 to comply with mandatory CE audits under a consent agreement. CE contact hours obtained
342 during that specified period for the 2020 renewal cannot be applied to the 12/31/2022 license
343 renewal.

344

345 **Regulations that will go into effect on 5/16/2020**

346

347 12 AAC 68.500(b)(2) has been repealed. This will make student permits free for university
348 students coming into Alaska to perform their veterinary externships.

349

350 12 AAC 68.930 mandates that a licensed veterinarian who holds a DEA registration number
351 must register with the state PDMP.

352

353 12 AAC 68.990(4) defines “division” as meaning the division of corporations, business and
354 professional licensing.

355

356 RS Zinn joined the meeting around 11:15. She reiterated that the board did not need emergency
357 regulation to modify CE requirements or extend the license renewal date. Any other changes to
358 regulations would require the emergency regulation process. RS Zinn further explained about
359 what happens after the 120-day expiration of emergency regulations. The board can use and
360 emergency regulation to get a permanent regulation done more quickly. If the board wants to
361 make an emergency regulation permanent, the regulations would need to go out as soon as
362 possible for public comment. The board would need to state on the record the intent for the
363 emergency regulation and send them to RS Zinn for drafting. At the next meeting, the board
364 would either adopt or make changes and then adopt the regulation. RS Zinn would send the
365 regulations to the Lt. Governor, bypassing the Dept. of Law (other than to send them a copy for

366 their records and to ensure that the public notice is defensible). Once the regulation is signed by
367 the Lt. Governor it is then enacted into law. Since the start of the crisis, the Lt. Governor's
368 office has been signing emergency regulations within a day, so the regulations are able to
369 become active right away.

370

371 Dr. Bergartt asked, if the board were to enact an emergency regulation, after the 120 days if the
372 board did not wish to make the change permanent but the need for the regulation was still
373 present because of the crisis, what would happen then. Is there a way to renew and emergency
374 regulation after it expires without having to make it permanent?

375

376 RS Zinn explained that the regulation would expire. Boards are allowed to make an emergency
377 regulation on a particular regulation one time only. The board would need to take that into
378 consideration before adopting emergency regulations.

379

380 Dr. Bergartt asked, if an emergency regulation expires after 120 days, but there is a new wave
381 of COVID cases in the fall, then the same emergency regulation could not be made.

382

383 RS Zinn confirmed that, yes, that would be the case. SB241 gives boards the authority to create
384 a special type of license specifically to address the COVID-19 emergency, but need for the
385 license needs to be substantiated on the record at a publicly noticed meeting as to why the
386 emergency would require an expedited license specifically for COVID-19.

387

388 If the board wanted to make an emergency regulation permanent, it could put a new subsection
389 into a regulation that was specific to an emergency that has been declared by the federal
390 government of the governor under AS 26.23. That way, if anything happens in the future- like a
391 resurgence of the virus or a natural disaster- the board would still have the regulation on the
392 books.

393

394 **Jurisprudence Exam**

395 As mandated by 12 AAC 68.015(c), an applicant for permanent veterinary licensure has 30 days
396 to complete and return the open-book jurisprudence exam that is required for licensure. OLE
397 Lund has only received one informal request for an extension of the deadline and wanted to see
398 how the board feel about granting an extension.

399

400 The general consensus of the board is that 30 days is plenty of time to complete the
401 jurisprudence examination. If the board were to offer an exemption from this deadline, it would
402 be on a case-by-case basis in which the applicant would have to supply documentation of why
403 they were unable to comply with the 30-day deadline. Unless an applicant acquired a temporary
404 but debilitating illness during the application process, then 30 days should be plenty of time to
405 take a 50-question, open book exam.

406

407 OLE Lund recommended to the board that, sometime in the future when the situation isn't as
408 hectic with the health crisis and emergency mandates, etc., that time be taken to review and
409 update the jurisprudence exam. It was last revised in October of 2013.

410

411 *Break for lunch: Off record at 12:00 p.m.*

412 *On record at 1:00 p.m.*

413

414 **Agenda Item 9**

Public Comment

Time: 1:00 p.m.

415

416 The floor was given to Dr. Hollick (VETV261) to address the board. She thanked the board for
417 having an excellent discussion on the COVID-19 related topics, which she said has been a real
418 concern for members of the AKVMA –trying to do the right thing. The practices that she knows
419 are social distancing, doing curbside service, wearing masks. There has been some confusion
420 between the April 20th and May 4th benchmarks for available services from HM15 –what to offer
421 when. People are absolutely trying to comply with the mandates. She also wanted to commend
422 the board for getting rid of the notary requirements. She said that has created a hardship for lots
423 of people for a long time. She said that the AKVMA has received calls from vet clinics with
424 grooming services and wondered how that would fit into the mandates. Since hair and nail
425 salons are opening up, shouldn't grooming services also be able to open for business? CEs have
426 also been in question for licensees. The AKVMA annual meeting is scheduled for October and
427 they book speakers and the venue for that event years in advance. Depending on the COVID
428 situation, the AKVMA still intends to put on that event in October depending on what is
429 allowable according to mandates. She said the speakers will provide great content and the event
430 should be quite exciting.

431

432 Dr. Bergartt responded to Dr. Hollick about the grooming services. She clarified that, as a
433 board, their only authority lies with regulating veterinarians and veterinary technicians, but she
434 can see, if a veterinarian were to own the grooming business and it's rolled into the veterinary
435 clinic, then she could see how the board could potentially provide some guidance to the
436 veterinarian on how to deal with that situation.

437

438 OLE Lund offered the advice that any questions or inquiries that the board is not able to answer
439 or provide guidance for can be directed to COVIDquestions@alaska.gov.

440

441 Dr. Coburn (VETV655) added that she appreciated the discussion the board had about essential
442 versus elective procedures. She feels that Alaska is moving past that point at this time, but she
443 agrees with a lot of what the board discussed. As veterinarians move forward with HM15, a
444 statement of intent from the board of how the mandate effects veterinarians would be helpful.
445 She said it would be better to avoid putting out a prescriptive list of what is or is not allowed. It
446 should be left up to the veterinarians' professional judgement. They were trained to make those
447 types of critical decisions. But general guidelines from the board would be helpful.

448

449 **Agenda Item 11 C**

Evaluating CE Requests

Time: 1:09 p.m.

450
451 The board has been getting a lot of request lately from the Alaska Veterinary Technicians
452 Association (AKVTA) for CE course approval. The board chair requested that other board
453 members think more critically about the courses before they are approved. The board has a list
454 of 5 criteria posted on their website of what needs to be submitted for board review when a
455 request is made. Essentially, the board uses the same criteria as the RACE program to determine
456 if a course should be eligible for credit. Based on that, when the board is evaluating CE requests,
457 that members refer back to the established required criteria.

- 458 1. Instructor's CV
- 459 2. Statement of the course intent.
- 460 3. Course Outline, including the topics covered.
- 461 4. Time Budget
- 462 5. Statement of disclosure of a conflict of interest that would specifically address whether
463 the instructors receive funding from a drug or device manufacturer; or other funding
464 sources specific to the course of instruction.

465 Most recently, the AKVTA submitted a course about CBD oil use in veterinary practice.
466 Usually, from the RACE criteria, when looking through the instructor's CV board members
467 should be looking for some specific training that the instructor is an expert in the field. For the
468 vet tech CE, historically, the board has found it appropriate that any veterinarian can do a course
469 for a vet tech. Dr. Bergartt thinks the board should proceed with caution, particularly around
470 issues of opiate prescription, cannabis, and telemedicine. The goal of the board with approving a
471 CE is to ensure that accurate information is getting put forward. She said she thinks, as a board,
472 she would like to not be too general as far as what is being approved. There needs to be some
473 bona fide information that a person is an expert in the topic he or she is planning to discuss.

474 **In a motion duly made by Chris Michetti, seconded by Hal Geiger, and with unanimous**
475 **approval in accordance with the provisions of Alaska Statute 44.62.310(c)(2), moved to**
476 **enter executive session for the purpose of discussing subjects that tend to prejudice the**
477 **reputation and character of any person, provided the person may request a public**
478 **discussion, it was:**

479 **RESOLVED to enter into executive session in accordance with AS 44.62.310(c)(2).**

480 Board staff remained in the discussion for administrative purposes.

481 *Off record for executive session a 1:14 p.m.*

482 *On record at 1:31 p.m.*

483 The board unanimously decided to not approve CE credit for the course on CBD oil put on by
484 the AKVTA. That being said, CE requirements are waived for all licensees under the
485 jurisdiction of the BOVE.

486

487 **Agenda Item 10**

PDMP Report

Time: 1:31 p.m.

488

489 Laura Carrillo, Executive Administrator of the Board of Pharmacy, and Lisa Sherrell, PDMP
490 Manger, joined the meeting for the presentation.

491
492 There are only a few pending applications –5 in AWA RxE and 3 in Portal. OLE Lund is
493 responsible for processing those. The PDMP implemented a compliance module feature last
494 November. This allows prescribers to monitor their own compliance. A clinical alerts feature
495 went live April 15 that gives providers feedback for informational purposes. This sends alerts
496 based on thresholds that have been set, like a daily MME threshold. It also sends alerts if a
497 dangerous drug combination is being prescribed. Coming up, a license integration enhancement
498 project will take place. This should make the licensing process go a lot smoother.

499
500 Currently, there are 256 veterinarians registered with the PDMP. That is 3.3% of all active users.
501 There are 403 veterinarians licensed in Alaska.

502
503 The number of opioids being prescribed in Alaska is going down while patient review has gone
504 up. Log-in activity for veterinarians has continued to decrease since 2017. There was a bit of a
505 spike in activity in March but has declined since. Same with the query activity. Even though
506 there have been roughly 1,200 patient requests conducted since July of 2017, it is really a very
507 small number –36 per month. Of the 151 veterinarians who are prescribing at least one opioid
508 per month, only 25 veterinarians are actually performing any kind of query or review on the
509 client.

510
511 Dr. Bergartt asked for “opioids dispensed”, is that being counted from the opioids being
512 dispensed from the clinic, or is that dispensed and prescribed to an outside pharmacy?

513
514 The PDMP does not know where the prescription is dispensed from, whether from a pharmacy or
515 the site. The PDMP does not know what clinics dispense directly.

516
517 Dr. Bergartt concluded that the information is most likely the opioids prescribed by
518 veterinarians and not dispensed by veterinarians directly.

519
520 Ms. Sherrell confirmed that the PDMP would not know about an opioid dispensed by a
521 veterinarian if the vet was not reporting that information. PDMP only knows the information that
522 has been reported to the database.

523
524 EA Carrillo confirmed that the PDMP does not know what practitioners, not just veterinarians,
525 are directly dispensing, but the PDMP is working on trying to capture that information so they
526 are better able to track who is dispensing without reporting. Changes are being made to initial
527 license applications to capture better whether that prescriber is directly dispensing or planning to
528 so. The only assumption that can be made is that the opioid was prescribed and then
529 subsequently dispensed.

530

531 Dr. Geiger said that he would like to see more reports on data from distributional information,
532 like what sorts of controlled substances are veterinarians prescribing. Information of that nature
533 would be more useful to know when talking to legislators about exempting veterinarians from
534 the PDMP. He wants to know the size of the prescriptions and how many days of medication is
535 going out per prescription.

536
537 Dr. Flamme agreed with Dr. Geiger. He went on to say that the data is meaningless unless one
538 knows what drugs are being prescribed. He would also like to see distribution information.

539
540 Dr. Michetti agrees. She asked how the board was supposed to know if anything was being
541 mishandled or appropriated if they don't know what's being done, what's being prescribed, who
542 gets what, how much for how long, etc.

543
544 Dr. Bergartt agreed. She said it is one thing to say that veterinarians, overall, are prescribing
545 "x" amount of MMEs, but it's a very different thing to say veterinarians prescribe "x" amount of
546 MMEs to "x" number of patients. If someone has a large amount of MMEs, but there are lots of
547 patients, so each patient is getting a tiny amount, that is very different from a large number of
548 MMEs being prescribed to only a few patients where each patient was receiving a large amount
549 of MMEs. This would be more helpful information with figuring out overdose issues as opposed
550 to tiny amounts being prescribed appropriately to large numbers of patients.

551
552 Dr. Flamme asked how practitioners be educated on what drugs veterinarians are using more of
553 for CE purposes. The BOVE needs to know the distribution numbers.

554
555 Ms. Sherrell said PDMP staff would look into providing some of that information. It would
556 depend on the analytics being able to pull the data together. The database only has the
557 information that is reported, so if veterinarians are not reporting there is no way of obtaining that
558 information. Lately, PDMP staff has been working on obtaining grants that would allow them to
559 purchase more analytics, which will help them be able to pull the kind of reports that the BOVE
560 is asking for. With only 16% of PDMP registered veterinarians actually reporting, it would lead
561 one to believe that the information wouldn't be completely accurate.

562
563 Dr. Flamme said he had a long conversation with Dr. Holm of the Board of Pharmacy last fall.
564 He said they both had concerns about pharmacy employees that didn't know how to use the
565 database properly. He said there are a few pharmacies in Fairbanks that he has written
566 prescriptions for dogs for benzodiazepine. When he later queried the owner's name, after having
567 written multiple prescriptions, the data was not shown on the PDMP. He said this has happened
568 for multiple patients.

569
570 EA Carrillo reiterated Dr. Flamme's statement for clarification. He is querying the owner and
571 then not being able to find the animal's prescription history in the owner's database history?

572

573 Dr. Flamme said that was correct. He had written down the owner's birthdate on the script,
574 faxed it over to the pharmacy, then called the pharmacy to follow up, and still there is no data in
575 the database.

576
577 EA Carrillo clarified that animal profiles are completely separate from owner profiles. When a
578 veterinarian is writing a prescription for an animal, vets should be reporting the prescription for
579 the animal on a separate profile from the human owner. Vets will never see an animal
580 prescription in the owner profile.

581
582 Dr. Flamme asked, for compounding drugs through another state (AZ), he could see the
583 compounded prescriptions on the owner's profile. He asked why this might be the case.

584
585 EA Carrillo said, if a pharmacy in Arizona is reporting to the Alaska PDMP, that would mean
586 they have a registration as a pharmacy in Alaska. Arizona and Alaska might have different
587 reporting requirements. They may have different definitions for what data is required to be
588 reported. She is confused as to why that information would show up in the database from out-of-
589 state.

590
591 Dr. Flamme said there is a compounding pharmacy in Arizona that makes a coughing elixir that
592 contains controlled substances (hydrocodone and some other controlled substances), and he can
593 see a dog on a human's profile with Dr. Flamme's name on the prescription, but when he writes
594 prescriptions in state for benzodiazepine for the same patient, he doesn't see his information in
595 the database. It makes him wonder if the pharmacists are truly trained to use the database.

596
597 EA Carrillo said she doesn't want to make a generalization that pharmacists are not properly
598 trained or the database is not being utilized correctly. If the example presented is Arizona,
599 Arizona may be reporting to the PDMP because there could be differences in the laws between
600 states. An important distinction to make between pharmacists and prescribers is that pharmacists
601 are not required to review. As Ms. Sherrell mentioned earlier, PDMP staff can see the number of
602 pharmacies that are delinquent or delayed in reporting. PDMP staff also receive inquiries
603 directly from pharmacies when they have issues reporting, but that has not been frequent. This is
604 the first time the EA Carrillo is hearing of this particular issue, so she doesn't know exactly what
605 could be causing that but she, in part, thinks it's because of differences in how Arizona might be
606 reporting. It would be helpful for PDMP staff to get more information on the issue, so she asked
607 Dr. Flamme to provide her with the name of the compounding pharmacy. That way, they can
608 investigate what data is being reported and work with Appriss to see if they can get more details.

609
610 Dr. Flamme said he would send the information to EA Carrillo and Ms. Sherrell.

611
612 The only requirement for veterinarians is to review the owner's history, but then report
613 separately under the animal profile. The data should not be mixed.

614

615 Dr. Michetti remarked, regarding querying and following the statutes of the PDMP, the statutes
616 require that veterinarians put in the “patient” name. That has nothing to do with the owner.
617 Many veterinarians are looking at the statute and typing in the patient name –no other owner type
618 information. If owner information is required, then the statute needs to be rewritten because that
619 is not in there.

620
621 EA Carrillo asked if that was a recommendation for legislative change to be made.

622
623 Dr. Michetti says she just thinks it needs to be clear. For example, Dr. Flamme is checking
624 owners, but she knows of at least 3 veterinarians that are not checking owners and are just
625 checking patient name because that is what is written in statute. Some clarification would be
626 good for veterinarians because many licensees will be non-compliant because it states in statute
627 that the database is just asking for patient name.

628
629 EA Carrillo brought up that legal opinion was given to the board on this matter back in 2018 as
630 to whether veterinarians should be querying the owner, taking into consideration what is in
631 statute. The determination was that no statute change is needed. The BOVE was encouraged to
632 establish those standards and guidelines for veterinarians to comply with the mandate, which is
633 to query the owner. It is the owner that is to be queried.

634
635 Dr. Michetti wanted to know exactly where to find that information.

636
637 **TASK:** OLE Lund will try to locate that information for board members.

638
639 EA Carrillo pointed out that the BOVE has in regulation that a prescription must be labeled with
640 the owner’s name; therefore, querying must be done on the owner.

641
642 **12 AAC 68.900. PRESCRIPTION LABELING.** (a) All drugs prescribed and dispensed by a veterinarian for
643 patient treatment must be labeled at the time of dispensing.

- 644 (b) The prescription label, or unit dosage package, must contain
645 (1) name of the owner of the patient;
646 (2) name of the prescribing veterinarian;
647 (3) name of the drug;
648 (4) strength and quantity of the drug;
649 (5) date dispensed;
650 (6) name and address of the veterinary facility dispensing the drug; and
651 (7) directions for the owner administering the drug to the patient.

652
653
654 Dr. Michetti argued that she doesn’t write a prescription for an owner, she writes a prescription
655 for the animal patient. She is not a human physician.

656
657 Dr. Bergartt said that, yes there are regulation about prescriptions, but that is separate from the
658 PDMP. Dr. Bergartt asked, if the animal data is kept separate from the human data, is she under

702 OLE Derr gave a brief overview of telemedicine. She said one of the most frequently asked
703 question she gets is: who needs to register for telemedicine? The business itself must register.
704 There is no limit to the number of practitioners covered under that business license. Not every
705 individual licensee needs to apply, just the main business and then all providers are covered
706 under that one registration. If a business employed a contractor, for example a specialist
707 veterinarian, that worked under their own business license, that contractor's business would need
708 to be registered with the TBR, but only if the specialist was collecting fees separately from the
709 client.

710

711 When it comes to delivery of telemedicine, OLE Derr will be deferring to individual boards for
712 guidance in best practices. SB241 allows boards to issue a policy statement recommending
713 guidelines and link to information for licensees.

714

715 **TASK:** Dr. Michetti offered to write a policy statement to help guide veterinary licensees in
716 providing telemedicine.

717

718 **COVID-19: How can veterinarians help?**

719

720 After some discussion, it was decided that this topic had lost its timeliness. If Alaska's
721 healthcare system becomes overloaded with COVID cases, the board will hold an emergency
722 meeting to discuss this issue further.

723

724 **Future Meeting Dates**

725

726 At the next meeting, the board will hold oral public comment on regulations.

727

728 **In a motion duly made by Scott Flamme, seconded by Chris Michetti, and with unanimous**
729 **approval it was:**

730

731 **RESOLVED to hold oral comment at the next meeting on Tuesday, June 2nd,2020,**
732 **starting at 9:00 a.m.**

733

734

735 *Hearing no further business brought up for discussion, the chair adjourned the 3:07 p.m.*

736

737 **Respectfully Submitted,**

738

739 *Ilsa Lund*
740 -----

6/10/2020

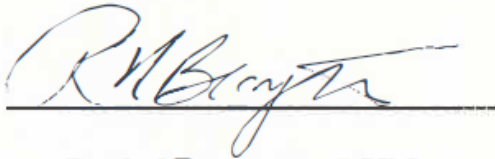
741 **Ilsa Lund, Licensing Examiner**

Date

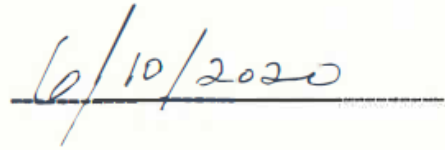
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744

Handwritten signature of Rachel Bergartt in cursive, written in black ink on a light yellow background. The signature is written over a horizontal dashed line.

745

Handwritten date 6/10/2020 in black ink on a light yellow background. The date is written over a horizontal dashed line.

746

Rachel Bergartt, DVM

747

Board Chair, Board of Veterinary Examiners

Date