Annual Report
Fiscal Year 2014

ALASKA STATE MEDICAL BOARD

July 2014

DIVISION OF CORPORATIONS, BUSINESS AND PROFESSIONAL LICENSING

This Annual Performance Report is presented in accordance with Alaska Statute 08.01.070(1) and Alaska Statute 37.07.080(b). Its purpose is to report the accomplishments, activities, and the past and present needs of the licensing program.

ALASKA STATE MEDICAL BOARD

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IDENTIFICATION OF BOARD

Board Member	Date Appointed	Term Expires
David A. Miller, MD	March 1, 2009	March 1, 2016
Kathleen Millar, Public Member	March 1, 2009	March 1, 2017
Camille (Cam) O. Carlson, Public Member	March 1, 2012	March 1, 2016
Elizabeth A. Kohnen, MD	March 1, 2012	March 1, 2016
Sai-Ling Liu, DO	March 1, 2014	March 1, 2018
Kevin Luppen, PA-C	March 1, 2013	March 1, 2017
David J. Powers, MD	December 2, 2008	March 1, 2016
Grant T. Roderer, MD	March 22, 2013	March 1, 2016

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IDENTIFICATION OF STAFF

Anchorage Office

Department of Commerce Community and Economic Development
Division of Corporations, Business and Professional Licensing
550 West 7th Avenue, Suite 1500
Anchorage, AK 99501

Debora Stovern, Executive Administrator
Work: (907) 269-8163
Fax: (907) 269-8196

Susan Winton, Senior Investigator
Work: (907) 269-8109
Fax: (907) 269-8195

Brian Howes, Investigator
Work: (907) 269-8177
Fax: (907) 269-8195

Miriam Patredis, Office Assistant
Work: (907) 269-8163
Fax: (907) 269-8196

Juneau Office

Department of Commerce Community and Economic Development
Division of Corporations, Business and Professional Licensing
P.O. Box 110806
Juneau, AK 99811-0806

Holly Kuhn, Licensing Examiner (A – K)
Work: (907) 465-2756
Fax: (907) 465-2974

Dawn Hannasch, Licensing Examiner (L – Z)
Work: (907) 465-2541
Fax: (907) 465-2974

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NARRATIVE STATEMENT

The Alaska State Medical Board is responsible for protecting the public through the licensing, regulation, and discipline of allopathic and osteopathic physicians, podiatrists, physician assistants, and mobile intensive care paramedics.

The Board establishes and evaluates minimum education and competency standards for applicants who wish to practice medicine in Alaska. The Board also ensures the continuing competency of practitioners by establishing and evaluating professional standards and specific requirements for biennial license renewal. Such standards provide reasonable assurance to the public that licensees are qualified to practice medicine. During FY 2014, the Board maintained its consistently high level of activity in all categories of licensure, including the initial licensure of 544 allopathic and osteopathic physicians, podiatrists, physician assistants, and mobile intensive care paramedics new to Alaska. In addition, the Board issued 12 locum tenens permits for temporary practice by physicians to fill absences in the state, and 75 resident permits to physicians participating in an accredited post-graduate residency program in the state.

The Alaska State Medical Board takes its public protection responsibilities very seriously and has well-established policies and procedures to investigate complaints and malpractice settlements, and take disciplinary action as appropriate. The Board has worked with its investigative staff to develop specific disciplinary guidelines in order to mete out consistent and effective sanctions when violations occur. During FY 2014, the Board took 65 formal actions under its enforcement mandate.

The Board continues to monitor and propose regulation changes to improve its effectiveness. During FY 2014, the Board adopted regulations establishing:

- provisions to allow some military training credit as meeting part of the postgraduate training required for licensure; and
- procedures for Board recognition of federal licensing exemptions for practitioners in Tribal Health Programs.

In addition, the Board is working on regulations projects, including:

- clarifying requirements for reporting of criminal offenses;
- establishing standards for telemedicine practice in communities that have no health care practitioner; and
- establishing standards for the delegation of routine duties to unlicensed assistive personnel;

The Board works with the Division to ensure fiscal responsibility and the appropriate establishment of licensing fees. The Board continues to request and review complete and correct financial information regarding direct and indirect expenditures. They are working with the Division to ensure fair allocation of expenditures based on number of licenses and that an accurate number of licenses is established for that purpose. The statistical overview includes counts for both temporary and permanent licenses.

The Board continues to participate in the activities of the Federation of State Medical Boards (FSMB) and Administrators in Medicine (AIM). Attendance at their national and regional meetings allows the Board and Board staff to remain aware of issues concerning the practice of medicine nationally, and to participate in programs involving licensing requirements, professional standards and ethics, public protection, regulation, and discipline. The federation monitors developments in the health care regulatory field by the federal government, administers the national licensure examination, and maintains a national database of licensed physicians and physician assistants. AIM researches and tracks issues and developments on a state-by-state basis and assists Board executives in obtaining or sharing information to more effectively respond to the needs of their states. Both organizations are active in providing education and assistance to Board staff and members, including certification programs for Board executives and Board investigators.

The Board employs an executive administrator, two investigators, two licensing examiners, and an administrative clerk. During the past fiscal year, they were able to maintain stable staffing and are pleased to have an effective and professional staff.

In the coming year, the Board will continue to seek important and meaningful change in the areas of administrative and Board functions. The Board has developed policies and procedures for conducting routine business. They continue to evaluate and make changes as necessary for more efficient and appropriate licensing, regulation, and disciplinary processes. The Board continues to seek new ways to disseminate information to the public and the profession, to have more information available on their website, and do more business via the internet. They are utilizing FSMB assistance in establishing an online application process and electronic resources for conducting Board business. The Board will continue to be accessible to its licensees and the public and to be responsive to the needs and safety of Alaska's citizens.

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BUDGET RECOMMENDATIONS FOR FY 2015

TRAVEL REQUESTS:

Board Meetings

In accordance with Alaska Statute 08.64.085 the Board meets at least four times a year. The meetings are scheduled for as many geographical areas of the state as possible, in order to be accessible to the public and the profession. Board meetings are two days with a full agenda to conduct required administrative business (reviewing license applications and reinstatements), assess and propose regulation changes, evaluate Board procedures and guidelines, deal with correspondence, and handle disciplinary matters.

Date	Location	# of Board Members	# of Staff	Total Estimated Cost (total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)
August 2014	**Juneau**	**8**	**2**	**10,100.00**
November 2014	**Anchorage**	**8**	**2**	**6,500.00**
February 2015	**Fairbanks (tba)**	**8**	**2**	**9,250.00**
May 2015	**Nome (tba)**	**8**	**2**	**13,500.00**

Travel Required to Perform Examinations

None – the Board accepts nationally administered examinations through membership in organizations such as the Federation of State Medical Boards (FSMB), National Board of Medical Examiners (NBME), National Board of Osteopathic Medical Examiners (NBOME), National Board of Podiatric Medical Examiners (NBPME), and Federation of Podiatric Medical Boards (FPMB).

Out-Of-State Meetings and Additional In-State Travel

The Board requires attendance by Board member(s) and the Board executive at the annual meeting and special issue meetings of the Federation of State Medical Boards (FSMB), the annual and regional meetings of Administrators in Medicine (AIM), as well as specialized training available to the Board executive and investigative staff. The FSMB establishes national policies and standards for the medical profession on behalf of state medical and osteopathic Boards in their protection of the public. They hold an annual meeting and provide travel for one Board member and the executive administrator to attend. AIM is an affiliated organization for Board executives. They also hold an annual and regional meeting. These meetings are well attended by all 70 state and territorial Boards and staff. Attendance at the meetings by Board members and executive staff allows the Board to stay informed of issues concerning the practice of medicine nationally and to participate in programs involving the national licensing examination and reciprocation of professional licenses, as well as to participate in the development or revision of professional policies and standards.

Rank	Date	Location	# of Board Members	# of Staff	Total Estimated Cost		Total Potential Third-Party Offset
					(total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)	Conference Fee	☒ Reimbursement ☒ Direct
1	**April 2015**	**Ft. Worth, TX**	**2**	**1**	**8,200.00**	**450.00**	**3600.00**
	Description of meeting and its role in supporting the mission of the Board: Federation of State Medical Boards (FSMB) annual meeting. The FSMB establishes national policies and standards for the medical profession on behalf of state medical and osteopathic Boards in their protection of the public. The Board requires attendance by Board members and the Board executive. These meetings are well attended by all 70 state and territorial Boards and staff, allowing Boards to stay informed of national issues, licensing, examinations, and the development or revision of professional policies and standards. The sponsor provides the airfare, hotel, and registration fee for one Board member and the Board executive.						
2	**October 2014**	**tba**	**0**	**1**	**2,400.00**	**-0-**	**-0-**
	Description of meeting and its role in supporting the mission of the Board: Federation of State Medical Boards (FSMB) Administrators in Medicine (AIM) regional meeting. The Board requires attendance by the Board executive in order to stay informed and work with other Board executives on issues of national and regional import (i.e.; as telemedicine, the national licensure effort, efficient licensing processes, dealing with impairment issues and prescriptive authority issues, and legal implications of state policies.						

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BUDGET RECOMMENDATIONS FOR FY 2015 CONTINUED

Out-Of-State Meetings and Additional In-State Travel Continued:

Rank	Date	Location	# of Board Members	# of Staff	Total Estimated Cost (total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)	Total Estimated Cost: Conference Fee	Total Potential Third-Party Offset ☒ Reimbursement ☒ Direct
3	**tba**	**Euless, TX**	**1**	**1**	**4,250.00**	**-0-**	**-0-**
	Description of meeting and its role in supporting the mission of the Board: Federation of State Medical Boards (FSMB) special meeting for issues requiring urgent action (such as re: the national licensure movement).The FSMB will call such a meeting as required, and may provide the airfare and hotel for one Board member and the Board executive.						
4	**tba**	**Juneau, AK**		**1**	**1,050.00**	**-0-**	**-0-**
	Description of meeting and its role in supporting the mission of the Board: The Executive Administrator in the Anchorage office will travel to Juneau to work with and train new and existing Medical Board staff.						

NON-TRAVEL BUDGET REQUESTS:

Dues/Memberships/Resources/OnlineTraining/Teleconferences/ExaminationContracts

Product or service:	Provider:	Est. Annual Cost:
Member Board Annual dues	Federation of State Medical Boards	2,400.00
Description of item and its role in supporting the mission of the Board: The FSMB establishes national policies and standards for the medical profession on behalf of state medical and osteopathic Boards in their protection of the public. They provide specialized training for new Board members and staff. In addition, the Board contracts with FSMB to administer the licensing examination for physicians.		
Product or service:	**Provider:**	**Est. Annual Cost:**
Annual Membership dues	Administrators in Medicine	1,200.00
Description of item and its role in supporting the mission of the Board: *AIM is an affiliated organization for Board executives and provides tools and resources to assist Board staff in their work. They also hold an annual and regional meeting, and co-sponsor specialized training programs.*		
Product or service:	**Provider:**	**Est. Annual Cost:**
Board teleconference meetings		1,500.00
Description of item and its role in supporting the mission of the Board: The Board meets by teleconference 2-3 times per year as needed to address emergency or special issues that are time sensitive.		

Other Items with a Fiscal Impact:
Unknown at this time.

Summary of FY15 Fiscal Requests:

Board Meetings	**39,350.00**
Travel for Exams	**-0-**
Out-Of-State and Additional In-State Travel	**16,350.00**
Dues/Memberships/Resources/Online Training/Teleconferences	**5,100.00**
Total Potential Third-Party Offset	**3,600.00**
Other	
Total Requested:	**57,200.00**

Additional information: None

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RECOMMENDATIONS FOR PROPOSED LEGISLATION FOR FY 2015

Focus Area (Check all that apply)

☐ Economic Development

☐ Government Within Our Means

☒ National Regulatory/Industry Changes

☒ Enhance Public Protection

1. **Subject and Proposed Language (include intent and statutory reference)**

   Proposed statutory authority for delegation of routine duties by a physician or physician assistant

   New Sec. ***08.64.108 Delegation of routine medical duties. A licensed physician or physician assistant licensed under this chapter may delegate routine medical duties to other persons, including unlicensed assistive personnel, under regulations adopted by the Board. A person to whom the routine medical duties are delegated may perform the delegated duties without a license under this chapter if the person meets the applicable requirements established by the Board.***

   Revised Sec. 08.64.170. License to practice medicine, podiatry, or osteopathy. (a) A person may not practice medicine, podiatry, or osteopathy in the state unless the person is licensed under this chapter, except that… ***(4) a person may practice within the scope of a delegation properly made under AS 08.64.108***…

2. **Explain the benefits the proposed legislation would provide.**
   Based on evaluation of existing practices, the Board adopted regulations that set standards for appropriate delegation of duties to unlicensed assistive personnel (such as CMAs). After a routine review by the Department of Law, it was determined that there was not currently statutory authority for licensees to delegate any duties (routine or not) to unlicensed assistive personnel. It was recommended that the Board and/or Division pursue a statute change to allow for limited delegation, which is prevalent in medical practice.

3. **Explain the consequences, if any, of not implementing the proposed statutory change.**
   Physicians and physician assistants unable to delegate routine duties to assistive personnel, exacerbating staffing shortages, particularly in rural areas or small practices.

4. **Describe any potential negative impacts of this legislation and how they would be minimized.**
   None

5. **Who do you anticipate will support the bill and why? Include municipalities, groups, etc…**
   Medical professionals and medical associations will support the establishment of specific standards for delegation authority

6. **Who do anticipate will oppose the bill and why?**
   None

7. **What other state departments will be affected by this legislation? Have you discussed the impact with the affected departments, and if so who and do they support this bill?**
   None

8. **Identify and describe any previous state or federal legislation or similar efforts in other states which affect or relate to this proposal.**
   None

9. **Has this bill topic been previously introduced in the legislature? If so, what was the final outcome and why?** None

10. **In the event questions should be raised during review of this request, please indicate below which Board member should be contacted:** Board executive administrator.

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REGULATION RECOMMENDATIONS FOR FY 2015

The Alaska State Medical Board is currently working on regulations projects, including:

- clarifying requirements for reporting of criminal offenses;
- establishing standards for telemedicine practice in communities that have no health care practitioner; and
- establishing standards for the delegation of routine duties to unlicensed assistive personnel;

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GOALS AND OBJECTIVES FOR FY 2015

1. The Board will continue to educate licensees regarding the medical Board statutes and regulations.
   - During FY 2014, the Board updated its website with meeting information, Board actions, Board-issued guideline, reporting requirements, and regulations notices. The Board responded to inquiries regarding their proposed regulations.
   - The Board will continue to provide relevant information, through publication on their website and in response to inquiries.

2. The Board will continue to assess and evaluate the licensing of allopathic and osteopathic physicians, podiatrists, physician assistants, and mobile intensive care paramedics.
   - During FY 2014, the Board reviewed licensing applications at all of their meetings and discussed needs as they arose.
   - The Board will continue this practice through FY 2015.

3. The Board will continue to evaluate the impact and effectiveness of current regulations and the need for revisions or new regulations.
   - During FY 2014, the Board adopted regulations projects establishing provisions to allow some military training credit as meeting part of the postgraduate training required for licensure; and procedures for Board recognition of federal licensing exemptions for practitioners in Tribal Health Programs.
   - During FY 2015, the Board will be working on regulations projects related to the delegation of routine duties to unlicensed assistive personnel (and the required statutory authority), clarifying requirements for reporting of criminal offenses, and establishing standards for telemedicine practice in communities that have no health care practitioner.

4. The Board will annually review and update its disciplinary guidelines and its policies and procedures.
   - During FY 2014 the Board reviewed these documents and made changes, as necessary.
   - The Board will continue to review and update the documents during FY 2015.

5. The Board will pursue more effective administrative support, including attracting and retaining competent staff, providing comprehensive training for staff, and compensating staff appropriately.
   - During FY 2014, the Board supported efforts by the Division to increase the salary range for licensing examiners, and sent the Board executive to meetings and training events offered by their national organizations.
   - The Board will continue this practice through FY 2015.

6. The Board will continue to be involved nationally with the Federation of State Medical Boards and its affiliated organizations, and direct Board and staff to attend their meetings and activities.
   - During FY 2014, one Board member and the Board executive attended the annual meeting of the Federation of State Medical Boards (FSMB). The Board executive attended the regional meeting of the sister-organization, Administrators in Medicine (AIM), as well as specialized training for medical Board executives.
   - During FY 2015, the Board is requiring that two Board members and the Board executive attend the FSMB annual meeting, and the Board executive attend the AIM regional meeting, and any special issue meetings called by FSMB. The Board will continue to work with the Division to ensure timely reimbursement of travel costs to Board members and staff.

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SUNSET AUDIT RECOMMENDATIONS

Date of last Legislative Audit: September 18, 2012

Board sunset date: June 30, 2020

Audit Recommendation #1:
The Division of Corporations, Business and Professional Licensing (DCBPL or division) director should continue to address deficiencies in the investigative case management system.

Action taken:
The division has modified systems to help eliminate any oversights in the new case management system established an interdisciplinary task force to identify underlying problems, develop a corrective action plan, establish case management procedures, and provide training to investigative staff.
Next Steps:
implement updated case management system
Date completed:
unknown

Audit Recommendation #2:
DCBPL's director should implement procedures to ensure Board disciplinary actions are reported in accordance with state and federal law.

Action taken:
The investigative unit has established standard operating procedures for timely reporting of Board actions. The Board has also tasked their executive with confirming the reporting of disciplinary actions and reporting back to the Board at each meeting.
Next Steps:
None
Date completed:
May 2012

Audit Recommendation #3:
DCBPL's director should ensure continuing medical education (CME) reviews comply with state law.

Action taken:
The division is developing a new licensing database that will improve the audit selection process. Board staff have implemented cross-check procedures to confirm correct audit selections.
Next Steps:
None
Date completed:
December 2012

FISCAL YEAR 2014
STATISTICAL OVERVIEW

Program: Alaska State Medical Board

AS 08. 64

12 AAC 40

Name of Individual Completing Report: Dawn K Hannasch

Date: 7/30/2014

FY14 LICENSEES	NEW-ISSUED FY 2014	TOTAL AS OF 6/30/14
	(A+B4) 632	(A+B4+C) 5116

A. Current Active Licenses, Endorsements, Permits

List type and if issued by examination or credential, as applicable.

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 2014	TOTAL AS OF 6/30/14	LICENSURE BASIS
Example: Civil Engineer - AEL	C	AA	10	250	Exam: 6 Credentials: 4
1. Physician MED (AA, AC, AI, AP)	S	AA	349	3355	EXAM: 31 CREDENTIALS:318
2. Physician MED	M & S	ID	0	5	
3. Physician MED	S	SL	0	1	
4. Osteopaths MED (AA & AP)	O	AA/AP	46	308	EXAM: 12 CREDENTIALS:34
5. Podiatrist MED	P	AA	5	27	EXAM: 0 CREDENTIALS:5
6. Physician Assist. PAD (AA & UA)	A	AA	83	605	
7. Physician Assist. PAD	A	IS	0	1	
8. MICP MED (AA & AP)	M	AA/AP	60	500	
9. MED MICP (NA)	M	NA	1	9	
10. MICP MED	M	SL	0	1	
11. Courtesy MED	Y & U	AA	0	0	
12. Locum Tenens Permit MED	I & L	AA	12	16	
13. Resident Permit MED	C & R	AA	75	140	
		TOTAL	**631**	**4958**	

B. Temporary Licenses

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 2014	TOTAL AS OF 6/30/14	NOTES
Example: Physical Therapist - PHY	R	AA	4	24	
1. MD, DO & DPM MED	T, H & D	AA	314	469	
2. Physician Assist. PAD	G & T	All	57	93	AA & UA & TA
3. MICP MED	A	AA	54	81	
4. Temps not converted to Perm	THDGTA	AA UA	1	1	MED & PAD
		TOTAL	**426**	**644**	

OL-001 (Rev. 06/13/12)

C. Current Licenses Issued as Inactive (not lapsed licenses)
(Only Medical, Chiropractic, CPA, and Real Estate)

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	TOTAL AS OF 6/30/ 14
Example: Salesperson - REC	S	II	64
1. Physician MED	S	II	114
2. Osteopath MED	O	II	8
3. Physicians Assist. PAD	A	II	35
4.			
		TOTAL	**157**

D. Retired Licenses

CATEGORY & PROGRAM CODE	Lic. Type Code	Status Code	RETIRED DURING FY 20 14	TOTAL AS OF 6/30/ 14	NOTES
Example: Osteopath - MED	O	RR	1	8	
1. Physician MED	S	RR	0	154	
2. Osteopath MED	O	RR	0	7	
3. Podiatrist MED	P	RR	0	2	
		TOTAL	**0**	**317**	

E. Examination Detail
(List each examination administration separately. Write “See Attached” and attach a separate sheet if necessary.)

EXAM TYPE	LOCATION	DATE	CANDIDATES	NO. PASSED	NO. FAILED
N/A					
N/A					
N/A					
N/A					
N/A					
N/A					
N/A					
Number of Postponed Exams					
Number of Exam Reviews					

F. Miscellaneous Program Activity
List all instances of fee-related work performed under Centralized Regulations per 12 AAC 02.105 (tracked by each program's fee ticker)

DESCRIPTION	TOTAL
Example: License Verification	62
Verification of license & Wall certificates $20	1072
Change of address, name change & duplicate license request $5	193
Cerified copies of files	18
Licensing Data File $100	13

G. Miscellaneous Program Activity
List all instances of fee-related work performed under the licensing program's regulations that is not included above

DECSRIPTION	TOTAL
Example: Course Approval	16
Collaborative Plan $100	171
MD, DO &DPM application fee $500	362
Physician Assist. application fee $500	53
Resident application fee $50	95
Locum Tenens & Courtesy applicantion fee $200	36
MICP application fee $150	57

H. Board Meetings and Teleconferences

DATE	LOCATION *(indicate if teleconference)*
July 18-19 2013	Dillingham
October 17-18 2013	Anchorage
January 9 2014	Teleconference
Marck 6-7 2014	Fairbanks
April 9 2014	Teleconference
June 5-6 2014	Sitka