

1 *State of Alaska*
2 *Department of Commerce, Community and Economic Development*
3 *Division of Corporations, Business and Professional Licensing*

4
5 ***BOARD OF VETERINARY EXAMINERS***

6
7 *MINUTES OF THE MEETING*

8 *June 2, 2021*

9
10
11 *By authority of AS 08.01.070(2), and in compliance with the provisions of AS 44.61, Article 6,*
12 *a scheduled meeting of the Board of Veterinary Examiners (BOVE) was held by*
13 *teleconference.*

14
15
16 ***Agenda Item 1a***

Call to Order/ Roll Call

Time 9:00 a.m.

17
18 *The meeting was called to order by Acting Board Chair, Dr. Hal Geiger, at 9:00 a.m. Dr.*
19 *Berngartt's absence was excused.*

20
21 ***Board Members present, constituting a quorum:***

22 Hal Geiger, PhD- public member- Juneau
23 Chris Michetti, DVM- Anchorage
24 Scott Flamme, DVM- Fairbanks
25 Denise Albert, DVM- Denali Park

26
27 ***Division Staff present:***

28 Ilsa Lund, Occupational Licensing Examiner (Hereafter denoted OLE)
29 Sara Chambers- CBPL Division Director
30 Dawn Bundick- Investigator III
31 Michele Hearn- Investigator II
32 Amber Whaley- Senior Investigator
33 Lisa Sherrell- Prescription Drug Monitoring Program Manager

34
35 ***Members of the Public Present:***

36 Greg Grajew
37 Rosemarie Lombardi
38 Ashley Morgan
39 Bert Gore
40 Rachel Cole
41 Christina Hansen

42
43 In accordance with AS 44.62.310(e) and AS 44.62.175, this meeting of the Alaska Board of
44 Veterinary Examiners was public noticed in the Alaska Online Public Notice System (OPNC) on

45 April 14th, and in the Anchorage Daily News on April 15th. Notification was also posted on the
46 board webpage and sent to interested parties via the board ListServ. Notice regarding the oral
47 comment period of the meeting was also published in the OPNC on April 22nd.

48

49 Dr. Geiger began the meeting by reading the mission statement of the Board of Veterinary
50 Examiners:

51 **To protect the health, safety, and welfare of Alaskans by ensuring that**
52 **veterinarian practitioners possess and maintain a level of skill and knowledge**
53 **necessary to provide safe, competent professional veterinary services to consumers**
54 **and to protect the public from veterinary practitioners who pose a risk to the**
55 **public’s health, safety, and welfare.**

56

57 *Agenda Item 1b* *Review Meeting Agenda* *Time 9:02 a.m.*

58 **On a motion duly made by Dr. Michetti, seconded by Dr. Albert, and with unanimous**
59 **approval, it was:**

60 **RESOLVED to APPROVE the agenda for this meeting as written.**

61

62 *Agenda Item 1c* *Review Past Meeting Minutes* *Time 9:03 a.m.*

63 **On a motion duly made by Dr. Flamme, seconded by Dr. Michetti, and with unanimous**
64 **approval, it was:**

65 **RESOLVED to APPROVE the March 9, 2021 meeting minutes as written.**

66

67 *Agenda Item 1d* *Ethics* *Time 9:04 a.m.*

68 The board members had no ethics disclosures to make.

69 *Agenda Item 2* *Public Comment* *Time 9:09 a.m.*

70 Being ahead of schedule, the board took time to review written public comments received
71 regarding proposed changes to regulation on the record. Dr. Geiger asked OLE Lund to read
72 aloud specific sections of comments received. Board members acknowledged that they had
73 reviewed the received comments from the public prior to the meeting.

74 *Recess: Off record 9:12- 9:18 a.m.*

75 *Oral Public Comment* *Time 9:20 a.m.*

76 *Greg Grajew-* Good morning everyone. I’m up in Moose Mountain. I’m a Siberian Husky
77 owner. I have got –in this particular instance as with aging dogs –I’ve got one particular one in
78 mind that has immune mediated polyarthritis, which is kind of rare. But, my little girl is on
79 Tramadol as well as Prednisone and a number of other drugs for her condition, and this is a drug
80 that she will be on for her pain for the rest of her life. She is eight years old. I cannot ask Jeanne

81 Olson, my vet, every three days to go and renew my prescription. It's really... I'm beyond
82 myself to think that this is the answer you can come up with to our opioid epidemic. If the fact
83 that we are, essentially, diverting Tramadol or Rimadyl, or whatever, and this is feeding the self-
84 cushioning drug problem. This law will force the closure of small practices –from dentists to
85 veterinarians. They don't have the means to do this kind of reporting. Remote veterinarians
86 already have tenuous internet connections. They're also not particularly internet-savvy. They
87 are not going to be able to provide you with daily numbers that nobody is going to read or be
88 able to interpret. I find it is just... I don't know how to explain what you are going to
89 accomplish with this, because all it's going to do is force vets to go out of business, or spend
90 more and more time filling out useless forms at the expense of care. Veterinarians are not
91 policemen. They are not DEA agents. They have neither the time, nor the training to decide
92 whether this patient or that patient is on the verge of being suspect of stealing drugs that are
93 earmarked for their pets. Complying with this daily requirement –even if no drugs are dispensed
94 –that they still have to provide feedback saying, “No, I didn't give any Tramadol today, or
95 Rimadyl, or whatever controlled substance you're talking about.” Is this really the best use of
96 their time? Dosages for horses are different than dosages for my Siberian Huskies. Is this going
97 to be flagged because they're giving three-times the amount that is considered normal? Under
98 what? Are you going to review each case that is submitted? Is this really the best we can come
99 up with? I respectfully suggest that –as many, many other states have done –stop with this
100 nonsense and just issue a waiver to veterinarians to do this. Many states have done so. Please
101 emulate them and stop coming up with more nonsensical little rules. Thank you for allowing me
102 to testify today.

103 *Dr. Bert Gore-* I got the kids to help me on this. This is my first time. Anyway, I wanted to
104 make a comment that concerns my letter. And, what exactly are you trying to accomplish with
105 this client-patient relationship? As I explained in my letter, many times I've had to ship
106 medication out to the bush when people called in with a problem –be it dog, cat, porcupines in
107 your horse, porcupines in your dog. Apparently, I have violated all of these rules at one point in
108 time or another. And, I don't think that it benefits the animals to include this patient-client
109 relationship that you have in here. I mean, after all, we are veterinarians and supposed to be
110 taking care of the animal not to prevent treatment of the animal unless you can make a buck on
111 it. And that's what it seems to me, is more of a protectionist racket right here than taking care of
112 the animal. So, that would be my comment on the patient-client relationship. The other thing
113 that I really didn't understand was the second part where you couldn't use the farm as an office.
114 Well, if you're going to treat large animals, you have to go to the farm. So, I'm not sure what
115 your intent is on this, but most of the time, if you're working on dairy cows –as I've done as well
116 as other animals –you're always out on the farm working. So, you have to have some loophole
117 or whatever you want to call it so people can go out to treat an animal. And, that just has be
118 done. Another thing, going back to your client-patient relationship is, the insurance companies
119 right now are sending out brochures for “Call a Doc” or Teladoc where you can call up the
120 physician and get a prescription. If you need gout medicine –at my age at 78 –you know, you
121 need gout medicine, you can call up and get that. You can get ED medicine over the phone now.
122 I don't see why we are restricting the treatment of animals when humans can get a treatment over
123 the phone. And, with that, I'll close it up.

124
125 No other members of the public present wanted to participate in public comment.
126 **On a motion duly made by Dr. Michetti, seconded by Dr. Flamme, and with unanimous**
127 **approval, it was:**
128 **RESOLVED to AMEND the agenda to move on to discussing the Annual Report.**
129

130 *Agenda Item 8* *Board Business* *Time 9:30 a.m.*

131 *8a- Annual Report*

132 During the course of discussion to schedule upcoming meetings for FY22, Dr. Flamme
133 announced that he is resigning from the board because he will be moving out of state to
134 Montana. This meeting was to be Dr. Flamme’s last meeting with the board. He stated that it
135 was a joy serving on the board and he learned a lot.

136 **On a motion duly made by Dr. Albert, seconded by Dr. Michetti and with unanimous**
137 **approval, it was:**

138 **RESOLVED to hold the board’s next meeting in person in Anchorage on Friday,**
139 **October 8, 2021.**

140 The board tentatively planned the other FY22 board meetings for January and April.

141 **On a motion duly made by Dr. Albert, seconded by Dr. Michetti and with unanimous**
142 **approval, it was:**

143 **RESOLVED to send board representatives to the American Association of**
144 **Veterinary State Boards (AAVSB) Annual Conference in Denver, CO from September 30-**
145 **October 2, 2021.**

146 **On a motion duly made by Dr. Albert, seconded by Dr. Michetti and with unanimous**
147 **approval, it was:**

148 **RESOLVED to send a board member and staff representative to the AAVSB Board**
149 **Basics and Beyond Training in Kansas City, MO in April of 2022.**

150 **On a motion duly made by Dr. Michetti, seconded by Dr. Albert and with unanimous**
151 **approval, it was:**

152 **RESOLVED to maintain membership with the AAVSB by paying the annual dues.**

153 **On a motion duly made by Dr. Albert, seconded by Dr. Flamme and with unanimous**
154 **approval, it was:**

155 **RESOLVED to continue efforts for veterinary exemption from the PDMP and for**
156 **the board to name an appropriate program to establish foreign veterinary training**
157 **equivalency through legislative change.**

158 **On a motion duly made by Dr. Albert, seconded by Dr. Michetti and with unanimous**
159 **approval, it was:**

160 **RESOLVED to AMEND the agenda to move on to discuss Correspondence.**

161 **9b- Correspondence** ***Time: 9:58 a.m.***

162 The board reviewed correspondence received from the AAVSB regarding various aspects of the
163 upcoming Annual Conference this fall.

164 **On a motion duly made by Dr. Michetti, seconded by Dr. Flamme, and with unanimous**
165 **approval, it was:**

166 **RESOLVED to try to send board Investigator, Dawn Bundick, to the AAVSB**
167 **Annual Conference under the new Legal Counsel Funding Program.¹**

168 *Recess: Off record 10:20- 10:30 a.m.*

169

170 ***Agenda Item 3*** **Regulations** ***Time 10:30 a.m.***

171 (Words in **boldface and underlined** indicate language being added; words [CAPITALIZED
172 AND BRACKETED] indicate language being deleted. Complete new sections are not in
173 boldface or underlined.)

174

175 **On a motion duly made by Dr. Flamme, seconded by Dr. Michetti, and with unanimous**
176 **approval, it was:**

177 **RESOLVED to ADOPT 12 AAC 68.010(b) as public noticed.**

178 12 AAC 68.010(b) is amended to read:

179 (b) An application for licensure by examination and all supporting documents must be
180 received by the department at least **15** [120] days before the **deadline to register for the exam**
181 **as set by the International Council for Veterinary Assessment (ICVA)** [NEXT
182 SCHEDULED EXAMINATION].

183 **Authority:** AS 08.98.050 AS 08.98.165

¹ After the meeting, discussing this matter further with the AAVSB Member Concierge, Lainie Franklin, it was concluded that Investigator Bundick does not qualify as board legal counsel.

184 **Editor's note: The International Council for Veterinary Assessment (ICVA)**
185 **described in 12 AAC 68.010(b) is administered by ICVA, P.O. Box 1356, Bismarck, ND**
186 **58502; Telephone: (701) 224-0332; website at <https://www.icva.net/navle/>.**

187 **On a motion duly made by Dr. Michetti, seconded by Dr. Albert, and with unanimous**
188 **approval, it was:**

189 **RESOLVED to AMEND 12 AAC 68.215(e) to clarify that all requirements to**
190 **establish a VCPR are still applicable.**

191 **On a motion duly made by Dr. Michetti, seconded by Dr. Albert, and with unanimous**
192 **approval, it was:**

193 **RESOLVED to AMEND 12 AAC 68.215(a) to clarify the meaning of the term**
194 **“associate”.**

195 **On a motion duly made by Dr. Michetti, and seconded by Dr. Albert, it was:**

196 **RESOLVED to ADOPT 12 AAC 68.215 as AMENDED in accordance with public**
197 **comment received.**

Board Member	Yes	No	Absent
Rachel Bergartt			x
Hal Geiger		x	
Chris Michetti	x		
Scott Flamme	x		
Denise Albert	x		

198
199 **12 AAC 68 is amended by adding a new section to read:**

200 **12 AAC 68.215. Veterinarian-client-patient relationship.** (a) A person may not
201 **practice veterinary medicine unless a veterinarian-client-patient relationship exists. “Patient” and**

202 “client” are defined in 12 AAC 68.990. A veterinarian-client-patient relationship exists if the
203 licensed veterinarian or an associate **veterinarian in the same veterinary practice** of the
204 licensed veterinarian **with access to the medical records:**

205 (1) has assumed responsibility for making clinical judgements for the health of the patient
206 and the need for medical therapy, has instructed the client on a course of therapy appropriate to
207 the circumstance, and that client has agreed to follow the veterinarian’s recommendations;

208 (2) has sufficient knowledge of the patient to initiate at least a general or preliminary
209 diagnosis of the medical conditions; sufficient knowledge means the veterinarian has seen the
210 patient for a physical examination within the last 12 months, or is personally acquainted with the
211 keeping and care of the patient through medically appropriate visits to the premises where the
212 patient is maintained within the last 12 months;

213 (3) provides oversight of treatment and is readily available to provide, or has provided
214 for, follow-up medical care in the event of adverse reactions or failure of the treatment regimen;

215 (4) maintains patient records.

216 (b) A veterinarian-client-patient relationship cannot be established solely by telephone or other
217 electronic means; however, an established veterinarian-client-patient relationship as defined in
218 (a) of this section may be maintained by electronic or telephonic means during a 12-month
219 period.

220 (c) Both the licensed veterinarian and the client have the right to establish or decline a
221 veterinarian-client-patient relationship.

222 (d) A licensed veterinarian who in good faith engages in the practice of veterinary medicine by
223 rendering or attempting to render emergency or urgent care to a patient when a client cannot be
224 identified, and a veterinarian-client-patient relationship is not established, shall not be subject to
225 penalty based solely on the veterinarian's inability to establish a veterinarian-client- patient
226 relationship.

227 (e) In remote regions of this state that are without access to the road system, where there is no
228 locally available veterinarian, it may be logistically impossible for the patient or veterinarian to
229 immediately travel for in-person consultation. In these cases, an emergency exists and the patient
230 is at risk of going untreated. In this situation, an evaluation of the patient or premises may be
231 initially conducted through electronic or telephonic means, as long as the veterinarian requests
232 that the patient be presented for an in-person examination or that the veterinarian conducts a
233 medically appropriate visit to the premise when reasonably achievable. The veterinarian acting in
234 this manner must be licensed in this state at the time the electronic or telephonic evaluation is
235 conducted. **All other requirements in establishing a VCPR are still applicable.** The
236 veterinarian must provide the client with the veterinarian's identity, location, licensure status,
237 and any privacy or security issues involved in accessing veterinary services through electronic
238 means.

239 **Authority:** AS 08.98.050

240 **On a motion duly made by Dr. Michetti, seconded by Dr. Flamme, and with unanimous**
241 **approval, it was:**

242 **RESOLVED to ADOPT 12 AAC 68.315(b) as public noticed.**

243 12 AAC 68.315(b) is amended to read:

244 (b) An application for examination or reexamination must be received by the department
245 at least **15** [45] days before the **deadline to register for** [DATE OF] the next examination **as set**
246 **by the American Association of Veterinary State Boards.** Applicants who fail the
247 examination may retake the examination within one year from the date of their application. After
248 the expiration of one year from the date of application, applicants who wish to retake the
249 examination must reapply for it.

250 **Authority:** AS 08.98.050 AS 08.98.080 AS 08.98.167

251 **Editor's note: The American Association of Veterinary State Boards (AAVSB) described in**
252 **12 AAC 68.315 is administered by AAVSB, 380 W. 22nd Street, Suite 101, Kansas City,**
253 **MO 64108; Telephone: (816) 931-1504; website at <https://aavsb.org/vtne-overview/the-online->**
254 **[application.](https://aavsb.org/vtne-overview/the-online-application)**

255 **On a motion duly made by Dr. Albert, seconded by Dr. Michetti, and with unanimous**
256 **approval, it was:**

257 **RESOLVED to ADOPT 12 AAC 68.910(e), 12 AAC 68.930, 12 AAC 68.935, and 12**
258 **AAC 68.990 as public noticed.**

259 12 AAC 68.910(e) is amended to read:

260 (e) Unless released to the patient's owner, patient medical records must be retained by the
261 veterinary medical facility or licensed veterinarian for a minimum of five years. Records may be
262 disposed of by tearing, shredding, [OR] burning, **or other method for electronic disposal** so
263 that the records are totally destroyed.

264 12 AAC 68.930 is amended to read:

265 **12 AAC 68.930. Registration with the prescription drug monitoring program**
266 **controlled substance prescription database. (a)** A licensed veterinarian who has a federal
267 Drug Enforcement Administration registration number must register with the prescription drug
268 monitoring program (PDMP) controlled substance prescription database under AS 17.30.200,
269 **not later than 30 days after initial licensure or registration with the Drug Enforcement**
270 **Administration (DEA), whichever is later.**

271 **(b) A veterinarian may delegate PDMP responsibilities to another veterinarian or**
272 **veterinary technician within their practice who holds a current license under AS 08.68 and**
273 **this chapter. (c) The veterinarian’s delegate must be registered with the PDMP using a**
274 **separate login, and shall register using the name of the delegating veterinarian. The**
275 **veterinarian may not give their login to a delegate.**

276 **Authority:** AS 08.98.050 AS 17.30.200

277 12 AAC 68 is amended by adding a new section to read:

278 **12 AAC 68. 935. Compliance with the prescription drug monitoring program**
279 **controlled substance prescription database. (a)** Unless excused under AS 17.30.200(t) and (c)
280 of this section, a veterinarian or the veterinarian’s delegate must review the information in the
281 PDMP database to check a client’s prescription records before dispensing, prescribing, or
282 administering a schedule II or III controlled substance to the client.

283 (b) Unless excused under AS 17.30.200(t) and (c) of this section, a veterinarian who
284 dispenses a schedule II, III, or IV controlled substance must submit the information as required
285 by AS 17.30.200(b), to the prescription drug monitoring program (PDMP) daily including days

286 when no controlled substances are dispensed. When reporting a dispensed controlled substance
287 under this subsection, the veterinarian shall use the name of the client.

288 (c) A veterinarian is not required to review the client's information in the PDMP database
289 before prescribing, administering, or dispensing a controlled substance if

290 (1) the patient is receiving treatment

291 (A) in an inpatient setting;

292 (B) at the scene of an emergency;

293 (C) in an emergency veterinary hospital;

294 (D) immediately before, during, or within the first 48 hours after surgery
295 or a medical procedure; or

296 (2) the prescription is non-refillable and is written for a quantity intended to last
297 for not more than three days.

298 (d) In this section

299 (1) "reporting" means inputting prescription data for the client's animal patient;

300 (2) "client" has the meaning given in 12 AAC 68.990(1);

301 (3) "emergency veterinary hospital" means a veterinary hospital or emergency service
302 with the primary function of receiving, treating, and monitoring of emergency patients during its
303 specified hours of operation. A veterinarian must be in attendance at all hours of operation and
304 sufficient staff must be available to provide timely and appropriate care. A veterinary emergency

305 service may be an independent, after-hours service; an independent 24-hour service; or part of a
306 full-service hospital.

307 **Authority:** AS 08.98.050 AS 17.30.200

308 12 AAC 68.990 is amended by adding a new paragraph to read:

309 (6) "veterinary facility" or "veterinary medical facility" means any premises or facility
310 where the practice of veterinary medicine is performed, including but not limited to a mobile
311 clinic, temporary clinic, outpatient clinic, veterinary hospital or clinic, emergency facility,
312 specialty facility, referral facility, or veterinary center, but shall not include the premises of a
313 veterinary client, research facility, or a federal military base.

314 **Authority:** AS 08.98.050

315 *Agenda Item 4* **Division Update** *Time 11:11 a.m.*

316 *Director Sara Chambers joined the meeting.*

317 The report for fiscal year (FY) 21 through the end of the third quarter was presented to the board².

	FY20	FY21- 1 st –3 rd Quarter
Total Revenue	\$59,262	\$283,395
Non- Investigation Expenditures	\$90,710	\$61,046
Investigation Expenditures	\$48,627	\$49,461
Indirect Expenditures	\$68,687	\$51,515
Cumulative Surplus (Deficit)	(\$71,595)	\$49,778

318

319 Dr. Geiger expressed concern, again, about the sharp increase in investigative expenditures. He
320 asked Director Chambers to clarify how the PDMP directly correlates to that since the board has
321 not yet seen the manifestations of the increase in cases. Director Chambers responded by
322 explaining that, while the initial referral of PDMP related cases is covered by grant funding,

² Full fiscal reports for all CBPL boards and programs can be found here:
<https://www.commerce.alaska.gov/web/cbpl/DivisionReports.aspx>

323 since the board’s statutes and regulations mandate that a veterinarian with a DEA registration
324 must register with the PDMP, any investigative expenditures regarding non-compliance are
325 charged to the board³. She went on to say that the division is taking a closer, multi-layered look
326 at resources by triaging PDMP non-compliance complaints. Investigators are still in the process
327 of vetting cases, so there haven’t been any presented to the board.

328 Dr. Geiger mentioned that, at a previous meeting, information was presented to the board
329 indicating that very few queries were made on clients before prescribing; however, contradictory
330 statements were given during public comment. Several veterinarians declared that they had
331 personally queried more times than was reported to the board regarding the entire Alaska
332 veterinarian licensee base. The board is concerned that the PDMP database is not providing
333 accurate data and board resources are being squandered. Dr. Geiger said that there should be
334 discretion in how the law is enforced and resources are used.

335 Director Chambers stated that she fully agrees and that is why she lead the effort within the
336 division –from the PDMP side and on the investigative side, including executive management of
337 the division –to look at resources and priorities within the division to direct staff on how cases
338 should be prioritized. Particularly with veterinary cases, referrals were made to investigations
339 before the data pulled was refined. This lead to myriad cases being closed with “no action- no
340 violation.” The division is working out the kink with Appriss, the PDMP vendor, to ensure that
341 this does not continue to happen. Not to say that anything was done incorrectly, but division
342 staff is learning as they go and finding ways to be less impactful. She said that the division
343 understands the board’s concern about the PDMP and the industry’s disposition toward the
344 program.

345 Dr. Flamme told Director Chambers that the cart was put way before the horse with the PDMP.
346 He said, talking with other veterinary boards –Texas, California, Illinois, etc. –that have huge
347 licensure bases and lots of money have been having difficulty putting this square peg in a round
348 hole. He’s been monitoring the evolution of the database in Alaska. The practitioners at his
349 current practice have been diligent about entering the same information and putting in the
350 patient’s medical record that a query was made in the database, and then seeing that no
351 information is coming up under the client when another query is made at a later date. He said,
352 possibly due to COVID, that he was unable to reach any division staff regarding the matter. The
353 program is frustrating, to say the least, and is not in the best interest of the public.

354 Director Chambers replied that the division is aware of the concerns of the veterinary community
355 regarding the PDMP. Nonetheless, the administration has taken a neutral position regarding the
356 program. The legislative process is the correct avenue in order to change the statutes requiring

³ **Sec. 08.98.050(a)(10)**- The board shall require that a licensee who has a federal Drug Enforcement Administration registration number register with the controlled substance prescription database under AS 17.30.200(n)
12 AAC 68.930. REGISTRATION WITH THE PRESCRIPTION DRUG MONITORING PROGRAM CONTROLLED SUBSTANCE PRESCRIPTION DATABASE. A licensed veterinarian who has a federal Drug Enforcement Administration number must register with the prescription drug monitoring program (PDMP) controlled substance prescription database under AS 17.30.200.

357 DEA registered veterinarians to register with the PDMP. In the meantime, the division will
358 continue to explore ways to make the system more useable.

359 Dr. Michetti asked what might happen in the future if PDMP expenditures continue to
360 overburden the board so that, potentially, an insurmountable deficit is accrued?

361 Director Chambers explained that the division assesses board finances after the end of every
362 fiscal year. The division will continue to refine how PDMP expenditures are billed so any
363 anomalies can be identified. The division is advocating for different methods of covering
364 investigative expenditures. Several attempts have been made through the legislative process to
365 change the statutes that require programs to be self-supporting.

366 Dr. Albert noted how frustrating it is to see the cost of investigations spiking, only to have an
367 investigator report that myriad cases were closed because there was found to be no violation. It
368 doesn't seem right for the board –and in actuality the veterinary licensees –to pay for these
369 investigations when the division did not perform due diligence before making the referrals to
370 Investigations. The board is ending up with a pile of debt with no results. Alaska veterinary
371 license fees are already proportionately high compared with the rest of the country.

372 Dr. Geiger implored for board funds to be used more thoughtfully. Alaska has one of the highest
373 licensing fees for veterinarians in the country and, during his time on the board, the fees have
374 continued to increase. The way that the division is throwing money at the PDMP seems
375 wasteful, and there has not been one single instance discovered through use of this program of a
376 veterinarian diverting controlled substances.

377 Director Chambers stressed that the urgent health and safety cases are being prioritized. It will
378 ultimately be up to the legislature to decide if veterinarians should be involved in the PDMP.
379 Until then, the division shall uphold the current laws. Failure to query is a violation of state law,
380 so those matters do need to be investigated. The division will continue to refine the process of
381 investigative referrals. Instances of drug diversion and doctor shopping have been discovered
382 under other boards, and those cases are being addressed.

383 Dr. Michetti emphasized that, because the licensing fees are already so high, any increase would
384 not be sustainable. The Alaska veterinary community should not have to bear the brunt of
385 expenditures while the division troubleshoots how to use and filter the data more effectively.

386 Director Chambers reminded the board that the department sets the fees as is statutorily
387 required.⁴ The division is looking at various mechanisms for funding the cost of the PDMP
388 including future policy changes that would allow the division to cover the expenses differently.
389 She agrees with the board that the investigative expenditures have experienced a sharp increase
390 and this is something the division is looking at trying to mitigate. This is a work in progress and
391 she values the board's feedback and the opportunity to have this discussion.

392 After ensuring that no board members had further comments, Director Chambers moved on to
393 legislation of note. The veterinary PDMP exemption bill (HB91) had one hearing. Since this

⁴ Sec. 08.01.065. Establishment of fees. <http://www.akleg.gov/basis/statutes.asp#08.01.065>

394 was the first session of the 32nd legislature, the bill will remain where it is until the next session
395 and will not need to be reintroduces.

396 A bill was passed that will require all licensing programs to offer expedited temporary licenses to
397 military spouses. This has been an option for boards since 2011, and will now be required.
398 Director Chambers said that she is working on a plan and guidance for boards to start
399 implementing this law beginning in January so those temporary licenses can start being issued
400 next spring.

401 *Director Chambers left the meeting at 11:53 a.m.*

402 ***Agenda Item 5*** **Lunch** ***Time 11:53 a.m.***

403 *Off record: 11:53 a.m.*

404 *On record: 1:00 p.m.*

405 *It was established that a quorum of the board was present through a roll call.*

406 ***Agenda Item 6*** **Investigations** ***Time 1:00 p.m.***

407 *Amber Whaley, Dawn Bundick and Michele Hearn joined the meeting.*

408 *Dr. Flamme joined the meeting at 1:08 p.m.*

409 There is currently only one veterinary licensee on probation and no licensees have been released from
410 probation. The licensee on probation is in compliance with the terms of the consent agreement.

411 The report presented to the board by Investigator Bundick covered the period from February 25
412 through May 17, 2021. There are currently 43 open cases, and all except for 9 of the cases are
413 PDMP related.

414 Amber Whaley stepped in to field questions regarding PDMP investigations. She said that the
415 investigators are aware of the board's concerns regarding PDMP investigative expenditures. A
416 new investigator was hired to attend solely to alleged PDMP violation cases. The PDMP cases
417 had been in limbo, but now that the position has been filled, the board should start to see some
418 forward movement on PDMP cases.

419 Dr. Geiger urged the investigators to use discretion when using investigative resources.

420 *Amber Whaley, Dawn Bundick and Michele Hearn left the meeting at 1:20 p.m..*

421 **On a motion duly made by Dr. Michetti, seconded by Dr. Flamme, and with unanimous**
422 **approval, it was:**

423 **RESOLVED to AMEND the agenda to move on to discuss Board Business.**

424 ***Agenda Item 8*** **Board Business** ***Time 11:23 a.m.***

425 **8c- Oklahoma State University (OSU)- CE**

426 OLE Lund presented information to the board regarding continuing education courses offered by
427 OSU that is specifically targeted towards veterinarians. The board requested that OLE Lund
428 disseminate information regarding OSU CEs to licensees via the board listserv.

429 **8d- Legislative Board Member Confirmations**

430 It was discussed at the last meeting that the board may be required to cure board actions taken
431 between mid-December 2020 and mid-January 2021 due to a quorum of the board not receiving
432 timely legislative confirmation. The outcome of the court battle resulted in no further action
433 being required by the board.

434 **On a motion duly made by Dr. Michetti, seconded by Dr. Albert, and with unanimous**
435 **approval, it was:**

436 **RESOLVED to AMEND the agenda to move on to discuss scheduling the next**
437 **meeting.**

438 ***Agenda Item 9*** **Schedule Next Meeting** ***Time 1:32 p.m.***

439 The board would like to hold their next meeting in person in Anchorage, AK to coincide with the
440 Alaska Veterinary Medical Association (AKVMA) Annual Symposium.

441 **On a motion duly made by Dr. Michetti, seconded by Dr. Albert, and with unanimous**
442 **approval, it was:**

443 **RESOLVED to hold the next board meeting on Friday, October 8, 2021 in person in**
444 **Anchorage, AK.**

445 *Recess: Off record 1:36- 1:45 p.m.*

446 *Attendance was established through a roll call.*

447 *Lisa Sherrell joined the meeting.*

448 ***Agenda Item 7*** **Prescription Drug Monitoring Program** ***Time 1:45 p.m.***

449 Ms. Sherrell reported that the new contract with Appriss, the PDMP database vendor, has
450 officially been renewed and started as of April 1, 2021. There are updated user manuals and
451 dispensation guides that will be made available on the program webpage⁵ and the user platform.
452 Through additional grant funding, the division will be able to roll out some enhancement features
453 –communications module, provider outlier, advanced analytics, and integration –for the program
454 over the next six to eight months.

455 PDMP staff is still working on getting everything ready for license integration. That is expected
456 to go live, tentatively, in mid-June. This should clean up the database and remove any users that
457 should no longer be permitted access –for example, if the user no longer holds an active license
458 in Alaska. Through testing before the launch of integration, the estimated number of
459 veterinarians whose accounts will be deactivated is about 20.

⁵ <https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/PrescriptionDrugMonitoringProgram.aspx>

460 The Awareness and Feedback Questionnaire will be available soon. Participation is encouraged
461 so PDMP staff can learn what areas of the PDMP may need tweaking or improvement.

462 While registration compliance with the PDMP for veterinarians is very high, the data shows that
463 review compliance continues to be low. Through the information and educational outreach that
464 the PDMP is expected to initiate soon, the hope is that this compliance rate will drastically
465 increase⁶. Ms. Sherrell addressed a concern brought to her attention by the board previously,
466 questioning whether pharmacies were reporting veterinary prescriptions correctly. Ms. Sherrell
467 stated that she met with Appriss and, in fact, there were over 130 entities –some large
468 companies as well as veterinarians –that were not reporting veterinary prescriptions as animal
469 prescriptions. This is something that will be addressed in the educational outreach.

470 Dr. Flamme noted considerable changes to the database that began in January. He used to
471 receive NaRx scores and other information from the database when entering in client data, and
472 now he gets no information. He asked why that may be and stated that he had been experiencing
473 difficulty reaching someone on the phone to discuss the problem. Ms. Sherrell responded that
474 she would look further into the issue and touch base with Dr. Flamme at a later date.

475 Dr. Geiger questioned whether the data citing that seventy-one percent (71%) of PDMP
476 registered veterinarians had performed zero queries was accurate. Ms. Sherrell said that she
477 originally had the same thought. In looking into the matter, she came to the conclusion that the
478 data is accurate. There are a few veterinarians that query a lot, and then there are a lot of
479 veterinarians that don't query at all.

480 *Lisa Sherrell left the meeting at 2:25 p.m.*

481 The board went on to discuss the progress of House Bill 91⁷. The bill was heard in the House
482 Labor and Commerce Committee. This bill has gained bipartisan support with no less than five
483 members of the House signing on as cosponsors. A version of the bill was introduced in the Senate
484 (SB 132)⁸ by Senator Holland as a companion bill. That bill was referred to the Senate Health &
485 Social Services Committee, but that committee had adjourned through the end of session by that
486 time. Regardless, these bills are well positioned to make headway during the second session of
487 the 32nd Legislature. The AKVMA has been instrumental in the progress these bills have made.

488 ***Agenda Item 8*** **Board Business** ***Time 2:32 p.m.***

489 **8e- VTNE Approval**

490 OLE Lund received an inquiry questioning whether or not a veterinary technician in another state
491 could apply through the Alaska jurisdiction to take the VTNE with no intention of applying for
492 licensure in this state. This is not specified in regulations and coordinating with individuals for
493 exam approval takes an extraordinary amount of time and effort on the part of staff. The board

⁶ All PDMP reports for affected boards can be found here:

<https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/PrescriptionDrugMonitoringProgram/PDMPBoardReports.aspx>

⁷ <http://www.akleg.gov/basis/Bill/Detail/32?Root=HB91>

⁸ <http://www.akleg.gov/basis/Bill/Detail/32?Root=SB%20132>

494 members came to the consensus that they don't mind if techs from other jurisdictions with stricter
495 regulations regarding qualifying for the VTNE apply for exam approval through this jurisdiction.

496 **8f- Jurisprudence Exam Update**

497 The board would like to wait until the regulations adopted at this meeting go into effect within the
498 next several months to be able to include some of those on the updated exam.

499 ***Agenda Item 10*** **Adjourn** ***Time 2:40 p.m.***

500 Dr. Geiger, Dr. Michetti, and Dr. Albert thanked Dr. Flamme for his service to the board and
501 dedication to the PDMP topic and wished him the best in his new endeavors.

502 Dr. Flamme thanked OLE Lund for her work with the board. Having practiced in Alaska for 20
503 years, he noted the improvement in service to veterinarians since she took over the duties for the
504 program several years ago and working with her has made being on the board a pleasure.

505

506 *Dr. Geiger, as Acting Board Chair, called to adjourn the meeting at 2:47 p.m. having concluded*
507 *discussion for all agenda items.*

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Hal Geiger, Acting Chair Date

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