

**STATE OF ALASKA
DEPARTMENT OF COMMERCE, COMMUNITY, AND ECONOMIC DEVELOPMENT
DIVISION OF CORPORATIONS, BUSINESS, AND PROFESSIONAL LICENSING**

STATE MEDICAL BOARD

**MINUTES OF MEETING
November 3-4, 2016**

By authority of AS 08.01.070(2) and in compliance with the provisions of AS 44.62, a regularly scheduled meeting of the Alaska State Medical Board was held on Thursday and Friday, November 3-4, 2016 in Anchorage, Alaska.

Thursday, November 3, 2016

Call to Order

The meeting was called to order by Grant T. Roderer, MD, Chair, at 9:00 a.m.

Roll Call

Board members present, constituting a quorum:

Cam Carlson, Public Member
Brück A. Clift, MD
Sai-Ling Liu, DO

Kevin Luppen, PA-C
Joy M. Neyhart, DO
Grant T. Roderer, MD

Board member Craig Humphreys, MD, was not able to attend the meeting in person; he joined the meeting by teleconference.

Public Member Kathleen Millar joined the meeting at 9:40 a.m.

Board staff present: Debora Stovern, Executive Administrator

Visitors present: Lisa Rosay, representing the State Behavioral Health Unit

Mr. Luppen, Safety Officer, noted appropriate emergency exits and gathering location.

Agenda Item 1 Review Agenda

The Board reviewed the agenda. Ms. Stovern noted the addition of items under Agenda Section 2 Board Business, Agenda Section 4 Board Actions, and Agenda Section 6 Investigations.

Agenda Item 2 Board Business

The following Board Business was addressed:

- Announcements – the Board discussed new State travel procedures, and Board member terms.
- Ethics Reporting – There were no ethics conflicts to report.

Agenda Item 3 Continuing Medical Education (CME) Audit

Statistics for the audit from the last license renewal period were included in the board packet for further review. Ms. Stovern reported that there are currently eight (8) cases outstanding – seven (7) will be resolved with Board adoption of their agreements and one has been referred to the Divisions Paralegal. She also noted that the Division Paralegal will also resume the responsibility of handling outstanding CME audits during the next renewal period.

	Physicians	MICP	Total
Number of licenses audited	164	23	187
Number of approved audits	157	22	179
Noncompliant audits requiring further action:	7	1	8
Noncompliant audits pending resolution	6	1	8
Noncompliant audits referred to Paralegal	1	0	1
Noncompliant audits otherwise outstanding	0	0	0

In the Matter of Case No. 2016-001044

The Board reviewed a proposed consent agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal. The agreement provides for sanctions consistent with Board disciplinary history and guidelines, including a reprimand, fine of \$3,500 (with \$1,500 suspended), a requirement to complete the deficient coursework, and a mandatory audit for the next two licensing renewals

For this paramedic licensee, the Board determined to increase the suspended portion of the fine to \$2,500, leaving the payable unsuspended portion at \$1,000.

Upon a motion duly made by Mr. Luppen, seconded by Mrs. Carlson, and approved by unanimous consent, the Board adopted the consent agreement, Case No. 2016-001044, signed by Nicole Rae Kiser, as revised by the Board.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001052

The Board reviewed a proposed consent agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal. The agreement provides for sanctions consistent with Board disciplinary history and guidelines, including a reprimand, fine of \$3,500 (with \$1,500 suspended), a requirement to complete the deficient coursework, and a mandatory audit for the next two licensing renewals

Upon a motion duly made by Mr. Luppen, seconded by Dr. Clift, and approved by unanimous consent, the Board adopted the consent agreement, Case No. 2016-001052, signed by Larry Allen Harikian, MD.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001051

The Board reviewed a proposed consent agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal. The agreement provides for sanctions consistent with Board disciplinary history and guidelines, including a reprimand, fine of \$3,500 (with \$1,500 suspended), a requirement to complete the deficient coursework, and a mandatory audit for the next two licensing renewals

Upon a motion duly made by Mr. Luppen, seconded by Dr. Clift, and approved by unanimous consent, the Board adopted the consent agreement, Case No. 2016-001051, signed by Richard Edward Marks, MD.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001046

The Board reviewed a proposed voluntary license surrender agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal.

Upon a motion duly made by Dr. Clift, seconded by Mr. Luppen, and approved by unanimous consent, the Board adopted the voluntary surrender agreement, Case No. 2016-001046, signed by Steve Clair Boyer, MD.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001045

The Board reviewed a proposed voluntary license surrender agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Liu, and approved by unanimous consent, the Board adopted the voluntary surrender agreement, Case No. 2016-001045, signed by Steven Victor Gurland, MD.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001236

The Board reviewed a proposed consent agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal. The agreement provides for sanctions consistent with Board disciplinary history and guidelines, including a reprimand, fine of \$3,500 (with \$1,500 suspended), a requirement to complete the deficient coursework, and a mandatory audit for the next two licensing renewals

Upon a motion duly made by Dr. Liu, seconded by Dr. Clift, and approved by unanimous consent, the Board adopted the consent agreement, Case No. 2016-001236, signed by John Gregory Zoltani, MD.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001237

The Board reviewed a proposed consent agreement with a licensee who failed to verify compliance with the continuing medical education requirements of the license renewal. The agreement provides for sanctions consistent with Board disciplinary history and guidelines, including a reprimand, fine of \$3,500 (with \$1,500 suspended), a requirement to complete the deficient coursework, and a mandatory audit for the next two licensing renewals

Upon a motion duly made by Mr. Luppen, seconded by Dr. Clift, and approved by unanimous consent, the Board adopted the consent agreement, Case No. 2016-001237, signed by Elowyn Marie Smith, DO.

The adoption order was signed by the Chair.

Agenda Item 4 Board Actions

In the Matter of Case No. 2016-000874

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a physician who failed to disclose material information on a new license application.

Upon a motion duly made by Mr. Luppen, seconded by Dr. Liu, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2016-000874, signed by Sarah Volz, DO.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001207

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a physician who failed to disclose material information on a new license application.

Upon a motion duly made by Dr. Liu, seconded by Dr. Humphreys, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2016-001207, signed by Russell A. DeGroot, MD.

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-000770

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a physician who failed to disclose material information on a new license application.

Upon a motion duly made by Mr. Luppen, seconded by Dr. Liu, and approved unanimously, the Board adopted the imposition of civil fine, Case No. 2016-000770 signed by Francis P. Lagattuta, MD.

The adoption order was signed by the Chair.

Agenda Item 4 Investigative Unit

Board investigative staff joined the meeting, including Investigators Greg Francois, July Lam, Sonia Lipker, Nina Akers, Amber Whaley, and Senior Investigator Alvin Kennedy.

Investigative Report

Investigator Francois reviewed the investigative report provided to the Board.

Probation Report

Investigator Lipker introduced the new probation monitor, Investigator Akers, and reviewed the probation monitoring report that was provided to the Board.

Probation Matters

Investigators provided requests regarding probations matters for Board consideration. In reviewing the requests, the Board referenced their policies and procedures concerning applicants with substance abuse history. Historically, the board's position is to require that an individual demonstrate a couple years of documented sobriety before they are given the opportunity to have their license restored under the terms of a consent agreement. Addiction is a compelling disorder and recovery is a long road. The board wants to see that record of recovery before they consider restoring the license, even under the conditions of a consent agreement.

Upon a motion duly made by Mr. Luppen, seconded by Mrs. Carlson, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing probation matters; with Board executive and investigative staff to remain during the session

The Board entered executive session at 9:30 a.m. The Board went back on the record at 10:35 a.m.

In the Matter of Samuel H. Schurig, DO

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board approved Dr. Miller as an additional supervising physician under the terms of Dr. Schurig's Memorandum of Agreement, Case No. 2802-07-005.

The approval request was signed by the Chair.

In the Matter of Peter J. Osterbauer, MD

Upon a motion duly made by Mr. Luppen, seconded by Mrs. Carlson, and approved by roll call vote, the Board denied the petition by Dr. Osterbauer to lift his license suspension under Case Nos. 2016-000323 and 2014-000153.

Roll Call Vote:

Mrs. Carlson-Yea
Dr. Clift-Yea
Dr. Humphreys-Yea
Dr. Liu-Yea
Mr. Luppen-Yea

Ms. Millar-Yea
Dr. Neyhart-Yea
Dr. Roderer-Recused

In the Matter of Jordan H. Greer, DO

Upon a motion duly made by Mr. Luppen, seconded by Mrs. Carlson, and approved by roll call vote, the Board denied the petition by Dr. Greer to lift his license suspension under Case Nos. 2016-000255 and 2016-001304.

Roll Call Vote:

Dr. Clift-Yea
Dr. Humphreys-Yea
Dr. Liu-Yea
Mr. Luppen-Yea
Ms. Millar-Yea
Dr. Neyhart-Yea
Mrs. Carlson-Yea
Dr. Roderer-Recused

Agenda Item 4 Board Actions (continued)

In the Matter of Case No. 2016-001177

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Neyhart, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing Case No. 2016-001170; with Board executive and investigative staff to remain during the session.

The Board entered executive session at 10:27 a.m. The Board went back on the record at 10:55 a.m.

The Board determined to delay consideration of Case No. 2016-001177.

Agenda Item 6 Probation Monitoring

- Brian Donaldson, MD, was present for his probation interview. He declined the opportunity to enter into executive session. The probation monitoring report from the Investigation Unit indicated that he was in compliance with his agreement.
- Dennis Mickleson, MD, was present for his probation interview. He declined the opportunity to enter into executive session. The probation monitoring report from the Investigation Unit indicated that he was in compliance with his agreement.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c)

for the purpose of discussing confidential matters; with Board executive and investigative staff to remain during the session.

The Board entered executive session at 11:10 a.m. The Board went back on the record at 11:20 a.m.

It was noted that Dr. Mickleson had submitted an application to return his inactive license to active status. He also requested that the Board change some of the conditions of his consent agreement, including the requirements for psychotherapy, AA/NA meetings, and participation in a health care provider support group. These items were discussed later in the meeting.

- Herbert Ortiz Bote, MD, was present for his probation interview. He declined the opportunity to enter into executive session. The probation monitoring report from the Investigation Unit indicated that he was in compliance with his agreement.
- Olga I. Wasile, MD, was present for her probation interview. She declined the opportunity to enter into executive session. The probation monitoring report from the Investigation Unit indicated that she was in compliance with her agreement.
- Samuel H. Schurig, MD, was present for his probation interview. He declined the opportunity to enter into executive session. The probation monitoring report from the Investigation Unit indicated that he was in compliance with his agreement. He had submitted a request for Board approval of an additional supervising physician, and a request to clarify the onsite supervision requirement of his agreement.

Upon a motion duly made by Dr. Powers, seconded by Ms. Millar, and approved by unanimous consent, the Board approved Dr. Haskell as an additional supervising physician under the terms of Dr. Schurig's Memorandum of Agreement, Case No. 2802-07-005.

The Board delayed discussion of the onsite supervision requirement to later in the meeting.

- The following licensees are not on probation, but were present for an interview regarding confidential non-disciplinary consent agreements: Paul Patton, PA-C; and John Ditzler (MICP). It was noted that Roger Spencer, MD failed to appear for his interview.

Upon a motion duly made by Mrs. Carlson, seconded by Mr. Luppen, and approved by unanimous consent, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing confidential matters; with Board executive and investigative staff to remain during the session.

The Board entered executive session at 11:50 a.m.; and went back on the record at 12:10 p.m.

Investigative staff departed from the meeting.

Recess for lunch

The Board recessed for lunch at 12:15 p.m.
The Board went back on the record at 1:10 p.m.

Board members present:

Cam Carlson, Public Member
Brück A. Clift, MD
Sai-Ling Liu, DO
Kevin Luppen, PA-C

Kathleen Millar, Public Member
Joy M. Neyhart, DO
Grant T. Roderer, MD

Board member Craig Humphreys, MD, was not able to attend the afternoon session of the meeting.

Board staff present: Debora Stovern, Executive Administrator

Visitors present: Lisa Rosay, representing the State Behavioral Health Unit

Agenda Item 2 Board Business (continued)

Board Guidelines, Procedures, and Policies

The Board reviewed their disciplinary guidelines (revised draft), and application procedures (process improvement proposals). It was noted that these items are considered confidential under deliberative process provisions.

Upon a motion duly made by Mrs. Carlson, seconded by Mr. Luppen, and approved by unanimous consent, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing confidential matters; with Board staff to remain during the session.

The Board entered executive session at 1:15 p.m.; and went back on the record at 1:45 p.m.

Agenda Item 7 Malpractice Report Review

The Board reviewed a malpractice report, Case No. A565004.

Upon a motion duly made by Dr. Clift, seconded by Ms. Millar, and approved unanimously, the Board accepted the malpractice reports, Case No. A565004, with no further action at this time.

Agenda Item 8 Full Board Interviews

Susanne S. Levene, MD

Dr. Levene was present to discuss her license application with the Board.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing the application of Dr. Levene; with Board staff to remain during the session.

The Board entered executive session at 1:50 p.m.; and went back on the record at 2:20 p.m.

Upon a motion duly made by Dr. Liu, seconded by Ms. Millar, and approved by roll call vote, the Board granted a license to Susanne S. Levene, MD.

Roll Call Vote:

Dr. Liu-Yea
Mr. Luppen-Yea
Ms. Millar-Yea
Dr. Neyhart-Yea
Mrs. Carlson-Yea
Dr. Clift-Yea
Dr. Humphreys-Absent
Dr. Roderer-Yea

Patrick D. Rudersdorf, MD

Dr. Rudersdorf was unable to attend; his interview will be rescheduled for a future meeting.

Agenda Item 9 Board Review of Requests/Issues

In the matter of Dennis Lyn Mickleson, MD

Upon a motion duly made by Dr. Liu, seconded by Dr. Clift, and approved unanimously, the Board approved the reactivation of Dr. Mickleson's license, subject to the terms of the existing consent agreement.

The Board declined to consider Dr. Mickleson's request to modify his consent agreement, and directed Ms. Stovern to provide him with information about the Board policy for requesting such changes.

In the matter of Brian Donaldson, MD

Upon a motion duly made by Mrs. Carlson, seconded by Ms. Millar, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing the request from Dr. Donaldson; with Board staff to remain during the session.

The Board entered executive session at 2:35 p.m.; and went back on the record at 2:50 p.m.

Upon a motion duly made by Ms. Millar, seconded by Mr. Luppen, and approved unanimously, the Board tabled the change request by Dr. Donaldson, pending additional information from the Investigative Unit.

In the matter of Samuel H. Schurig, DO

The Board declined to consider the request regarding Dr, Schurig and the conditions of his MOA, pending further information.

Agenda Item Public Comment Forum

There was one visitor present who was observing and did not wish to speak with the Board.

Agenda Item 10 Statute/Regulation Updates

Pending regulation projects

- Delegation to CMAs: The Board had previously adopted regulations setting standards for delegation of routine duties to unlicensed assistive personnel. Upon review by the Department of Law, it had been determined that a statute change is required in order to allow such delegation of routine duties. The Board has requested assistance from Senator Olsen and the Alaska State Medical Association to initiate a statute change. The Board will consider re-adopting the regulations once the legislation is enacted.

Pending Regulation Projects

- Implementation of Medicaid Reform bill: The recently enacted Senate Bill (SB) 74 requires the Board to adopt regulations to establish guidelines for “telemedicine” including a nationally recognized model policy for standard of care; and to adopt regulations requiring registration with the Prescription Drug Monitoring Program (PDMP), requiring physician use of the PDMP, and allow certain exceptions.

Assistant Attorney General Megyn Greider joined the meeting by teleconference to provide guidance to the Board in reviewing draft regulations. She will provide a revised draft for Board consideration at its next meeting.

- Expedited temporary permits: The Board currently allows for a temporary permit to be approved by the Executive Administrator for a qualified application that has been completed and is waiting for review by the Board at its next meeting. The Board reviewed a draft regulation change that includes additional criteria to allow for an expedited temporary permit to be issued to a qualified applicant who has a clean record and has applied with an Federation Credentials Verification Service (FCVS) profile (which includes verification of identity, med school, postgrad program, most exam types, and certification from the Education Commission for Foreign Medical Graduates -ECFMG).

The Board determined to pursue this change.

- Accepting FCVS for physician assistant applications: The Board currently accepts credentials verification documents through the Federation Credentials Verification Service (FCVS) of the

Federation of State Medical Boards (FSMB). The Board reviewed a draft regulation change to **accept** FCVS for physician assistant applications.

The Board determined to pursue this change.

The Board directed Ms. Stovern to provide the draft regulations for Board consideration and approval at its next meeting.

Legislative Information and Updates

- Implementation of Medicaid Reform: At the May 2016 meeting, the Board reviewed the recently-enacted Senate Bill (SB) 74 related to Medicaid reform, which includes telemedicine provision, a Division registry of telemedicine businesses, Prescription Drug Monitoring Program (PDMP) registration and use requirements, along with other provisions. The Board is working to draft regulations to implement these items.

In addition, the legislation requires a Report to the Legislature on pain medications, to be jointly prepared by the Medical, Optometry, Dental, Nursing, and Pharmacy Boards, regarding recommended guidelines for the prescription of schedule II controlled substances listed under federal law. The report is due by January 1, 2017.)

The Board had determined their position to include favoring appropriate prescribing and reducing over-prescribing, and practice in accordance with the Center for Disease Control (CDC), Federation of State Medical Boards (FSMB), and Board guidelines. Dr. Roderer was designated by the Board as their representative in creating the Legislative report, which should be based on the CDC guideline.

Dr. Roderer reported that the group of representatives from the Medical, Optometry, Dental, Nursing, and Pharmacy Boards, had met and were considering recommending guidelines issued by Arizona and Washington, as well as the CDC guidelines.

- Process Improvement Proposal: The Board reviewed a confidential memo from the Office of the Attorney General, including proposed legislation to enable licensure streamlining.

The Board recessed at 4:40 p.m.

Friday, November 4, 2016

Call to Order

The meeting was called to order by Grant T. Roderer, MD, Chair, at 9:00 a.m.

Roll Call

Board members present:

Cam Carlson, Public Member
Brück A. Clift, MD
Sai-Ling Liu, DO
Kevin Luppen, PA-C

Kathleen Millar, Public Member
Joy M. Neyhart, DO
Grant T. Roderer, MD

Board member Craig Humphreys, MD, was not able to attend the meeting in person; he joined the meeting by teleconference.

Board staff present: Debora Stovern, Executive Administrator; Alvin Kennedy, Senior Investigator

Visitors present: Lisa Rosay, representing the State Behavioral Health Unit

Agenda Item 2 Board Business (continued)

Board Disciplinary Guidelines

The Board 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 the Board's previous sunset audit, it was recommended that the Board review their Disciplinary Guidelines annually.

The Board Disciplinary Guidelines were reviewed at previous meetings and the Board considered adding a "duty to report" category of complaint. The Board reviewed and approved the draft language to include sanctions for "failure to report" issues.

Application Procedures (Department process improvement proposals)

Since November 2014, the workload of Medical Board staff has increased dramatically, resulting in delays in application processing through approximately May 2015. A large portion of the increased volume was attributed to telemedicine legislation that was enacted during the prior legislative session. However, the high volume has generally continued through the present. Since that time the Division has taken a number of actions to improve application processing, including:

- Implemented electronic handling and processing of all incoming documents
- Developed an expedited request form to prioritize the review of applications with an urgent/critical need
- Began accepting documents received by fax or email for expedited applications or in cases of delay/difficulty, begin accepting license and hospital privileges verifications by fax or email (when sender can be authenticated)
- Developed an authorization form to permit staff to discuss application contents with stakeholders authorized by the applicant, including facilities, credentialing agencies, etc.
- Revised MD/DO application forms, including biographical data (and other) fields to reduce errors by applicants; added fill-in capability for easier use by applicants

- Launched Uniform Application (UA) process through Federation of State Medical Boards (FSMB), to simplify the process for those applying in multiple states (UA is a data collection process for standard information required by licensing boards)
- Implemented digital file review by Exec.; digital application files are sent electronically (eliminating printing and shipment of paper files); review times for completed applications are now approximately 1-3 business days.
- Implemented digital file review by Board (eliminating printing and shipment of paper files); the Board is still requesting more appropriate tools to accommodate this review (larger, user-friendly tablets)
- Staffing Changes:
 - Filled 2 vacant licensing examiners positions
 - Reassigned existing licensing examiner with other program assignments to work 80% medical
 - Office Assistant duties restructured and position moved from Anchorage to Juneau for hands-on licensing work
 - Supervisor restructured responsibilities to prioritize hands-on time to assist medical staff
- Legislation introduced to implement Interstate Medical Licensure Compact, to create an additional pathway to licensure for the most highly qualified applicants; although the legislation did not pass, it may be expected to be introduced again during the upcoming legislative session

In addition, the Department has commenced with a Strategic Planning Initiative, which includes streamlining and improving Division processes. This “Process Improvement Project” was presented to the Board at the August 2016 meeting, and included the following design targets:

- Time from application to status letter – 5 business days
- Time from completion of application to issuance of permit – 5 days
- From time of application to issuance of permit – 30 days

At the August 2016 meeting, the Board noted their support for office and procedural changes and improved electronic capabilities. They determined to further consider recommendations regarding any larger program changes, application and licensing requirements, approval process, etc.

The Board again reviewed the process improvement proposals, as well as additional information from the Division regarding the proposed changes, and a memo from the Office of the Attorney General, including proposed statute change language.

They determined their position on the following proposals:

- I. New in-office efficiencies for processing applications
 - A. The Board fully supports the proposed IT/database changes, including:
 - Online applications modeled on web renewals
 - Allow applicant to submit online application documents, payments signatures, etc.
 - Online checklist (online and live interface)
 - Automated status letters
 - Electronic delivery of permits and licenses – print at home
 - B. The Board fully supports the following proposed procedure changes

- Changes that have already been implemented by Board Executive Administrator and Licensing Supervisor, including allow receipt of electronic documents from verifiers (so long as they came from a verifiable source); emailing status letters (instead of mail and email); retraining office assistant to correctly scan/stamp; run NPDB reports twice a week; consistent communication between investigators and staff; and staff training and (regular) meetings with supervisor and Executive Administrator.
- Changes that are in process, including updating check sheets (once updates complete, require adoption by regulation); and requiring all communications with applicants via email this will be encouraged, not required, and will require applicant authorization to communicate via email)

C. The Board supports the following additional changes to Board processes, as noted

- Use tablets to review application at board meetings, instead of paper files sent by FedEx. The Division is in the process of purchasing tablets; require security assurance by IT before use. The Board would like a report on the status of this project
- Hold at least one board meeting in Juneau. The Board schedules meeting and typically includes one meeting per year in Juneau. The Board supports this proposal subject to financial concerns.
- Allow examiners to attend board meetings. The Board supports Division approval of such staff travel, subject to financial concerns.

II. Changes to application requirements.

A. The Board does not support changes to the following general application requirements, as there is no information indicating the background regarding where the current requirements originated, how the needs have changed or no longer exist, etc.

- Remove photo requirement and duration at address
- Don't require certified true copies of diplomas and certificates

B. The Board does support a version of the proposed changes to allow for an expedited temporary permit and is working on regulations to implement such.

- Ability to issue temp permits before complete documentation
- Use National Practitioner Data Bank (NPDB) and Federation of State Medical Boards (FSMB) reports for verification to qualify for a temp

III. Major program changes.

A. The Board does not support the proposed changes to the approval process, including:

- Allow Supervisor to approve resident permits, locum tenens permits, and clean applications for temporary permits
- Allow Executive Administrator to approve permanent licenses with no discrepancies

The Board did not believe that adding workload to medical board staff would improve efficiency; that there was not currently a delay in the approval of temporary permits, and they preferred the licensing supervisor to focus on current responsibilities (supervising and training staff, and providing hands-on assistance for increased application volume or during staffing vacancies.) In addition the Board had concerns with transferring their licensing authority and responsibility to the Department.

- B. The Board supports the following staffing changes, as noted:
- Hire one more full-time Med licensing examiner. The Board understands that this change is under way, and would like a status report.
 - All med staff in one location. The Board noted the need to have the Executive Administrator and investigative staff in the Anchorage office, and agrees with the need to have all medical staff in one location; the Board supports moving medical licensing staff to the Anchorage office.

Review Board Policies and Procedures

The Board routinely makes determinations on various application and practice matters; those determinations are compiled by the Executive Administrator. These Board Policies and Procedures are used by Board staff to provide consistent and effective support to the Board, and information to applicants, licensees, and the public. More complex procedures are compiled as Board Guidelines, which are published on the Board's website. During the Board's previous sunset audit, it was recommended that the Board review their Policies and Procedures annually.

The Board Policies and Procedures were reviewed at previous meetings and the Board considered updating their guideline regarding delegating to non-physician personnel. They reviewed draft changes for the following guidelines:

- Delegating to unlicensed assistive personnel – the Board approved of the draft changes to their guideline in order to reflect current law. They will continue to pursue a statute change to allow for Board adoption of regulations to set standards for the delegation of routine duties to unlicensed assistive personnel.
- Delegating to non-physician personnel for certain dermatological procedures – the Board will continue to consider revising their guideline in order to reflect current law and practice standards.

In addition the Board considered their Policies and Procedures regarding the following:

- Confidential Nondisciplinary Consent Agreements, which are used to monitor impaired practitioners when their impairment was not related to their practice. These agreements are confidential, and the only part of the action that is reportable or releasable to the public, is the adoption order page (the last page of the document). It was noted that the use of the term “nondisciplinary” in these agreements is not correct, as the monitoring and other conditions in the agreements are disciplinary sanctions available to the Board by statute. In addition, the confidential agreements cause difficulty to Board staff when responding to inquiries from the public about the nature of a Board action that is otherwise public.

The Board determined that the confidential nondisciplinary consent agreements may have filled a need, but the noted concerns outweigh their benefit. They determined to return to use of standard (public) consent agreements that include probation and other standard conditions and limitations.

Upon a motion duly made by Mrs. Carlson seconded by Dr. Clift, and approved unanimously, the Board determined to discontinue the use of confidential nondisciplinary consent agreements.

The Board directed Ms. Stovern to notify any applicants with pending confidential nondisciplinary consent agreements that these are no longer accepted by the Board.

Agenda item 11 Full Board Interviews:

Kimberly Ame Jedlicka, MD

Dr. Jedlicka was present to discuss her license application with the Board.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing the application of Dr. Jedlicka; with Board staff to remain for the session.

The Board entered executive session at 9:40 a.m.; and went back on the record at 9:49 a.m.

Upon a motion duly made by Dr. Liu, seconded by Dr. Neyhart, and approved by roll call vote, the Board granted an unrestricted license to Kimberly Ame Jedlicka, MD.

Roll Call Vote:

Mr. Luppen-Yea
Ms. Millar-Yea
Dr. Neyhart-Yea
Mrs. Carlson-Yea
Dr. Clift-Yea
Dr. Humphreys-Yea
Dr. Liu-Yea
Dr. Roderer-Yea

Jeffrey Michael Albrecht, PA-C

Mr. Albrecht was present to discuss his license application with the Board.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) and Alaska Constitutional Right to Privacy Provisions, for the purpose of discussing the application of Mr. Albrecht; with Board staff to remain for the session.

The Board entered executive session at 9:50 a.m.; and went back on the record at 10:25 a.m.

The Board determined to deny Mr. Albrecht's license application due to previous and pending investigations and actions, including license limitations and restrictions, by other state Boards, as well as previous criminal charges and convictions, previous unprofessional conduct related to practice supervision and prescription issues. In addition, the Board noted the surrender of his license in Idaho while under investigation. Once that license has been restored, Mr. Albrecht may reapply for an Alaska license, with the understanding that the Board must address the other matters, and may require additional conditions and restrictions under the terms of a consent agreement.

Upon a motion duly made by Mrs. Carlson, seconded by Mr. Luppen, and approved by roll call vote, the Board denied a license to Jeffrey Michael Albrecht, under Alaska Statutes (AS) 08.64.240, 08.64.326, and 08.64.331

Roll Call Vote:

Ms. Millar-Yea
Dr. Neyhart-Yea
Mrs. Carlson-Yea
Dr. Clift-Yea
Dr. Humphreys-Yea
Dr. Liu-Yea
Mr. Luppen-Recuse
Dr. Roderer-Yea

Agenda Item 4 Board Actions (continued)

In the Matter of Case No. 2016-001177

Upon a motion duly made by Mr. Luppen, seconded by Dr. Clift, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing Case No. 2016-001170; with Board executive and investigative staff to remain for the session.

The Board entered executive session at 10:30 a.m. The Board went back on the record at 10:40 a.m.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board referred Case No. 2016-001170 back to the investigative unit for further investigation.

Investigator Kennedy departed from the meeting.

Agenda Item 12 Division Update

The following Department staff joined the meeting by teleconference to discuss the Department proposal for process improvements: Commissioner Chris Hladick, Deputy Commissioner Fred Parody, Commissioners Special Assistant Micaela Fowler, Division Director Janey Hovenden, Division Operations Manager Sara Chambers, and Division Licensing Supervisor Dawn Hannasch.

Commissioner Hladick noted his appreciation for work on the process improvement project. Deputy Commissioner Parody discussed the Department process in developing the proposals.

The Board directed Ms. Stovern to summarize their position on the various proposals, as follows:

- The Board supports new in-office efficiencies for processing applications.
- They do not support the larger program changes, including changing application and licensing requirements, and changes to the approval process. It was noted that the Board is working on regulations to implement expedited temporary permits. However, the Board did not believe that adding workload to medical board staff would improve efficiency, that there was not currently a delay in the approval of temporary permits, and they preferred the licensing supervisor to focus on current responsibilities (supervising and training staff, and providing hands-on assistance for

increased application volume or during staffing vacancies.) In addition the Board had concerns with transferring their licensing authority and responsibility to the Department.

Ms. Chambers noted that the proposed statute changes include retaining full Board authority for approval of temporary and permanent licenses, which is different from language in some of the early project proposals. The Board agreed to again review the memo and proposed legislation from the Office of the Attorney General.

The Board also agreed to consider some regulation changes regarding application requirements for notarized photos and certified true copies of documents, and directed Ms. Stovern to draft language for their consideration at the next meeting.

Department staff departed from the meeting.

Upon a motion duly made by Mrs. Carlson, seconded by Dr. Clift, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing a confidential memo and proposed legislation from the Office of the Attorney General; with Board staff to remain for the session.

The Board entered executive session at 11:50 a.m. The Board went back on the record at 12:10 p.m.

The following Board position on the Department proposals was read onto the record:

- I. New in-office efficiencies for processing applications
 - A. The Board fully supports the proposed IT/database changes, including an online application process, applicant submittal of online application documents, online application checklists, automated status letters, and electronic delivery of permits and licenses.
 - B. The Board fully supports the proposed procedure changes that have already been implemented (including allowing receipt of electronic documents, emailing status letters, staff training, etc.) and the proposed changes that are in process (including updating check sheets, and email communications with applicants.)
 - C. The Board supports the following additional changes to Board processes, as noted:
 - Use tablets to review application at board meetings - the Board supports this proposal and would like a status report on Division purchase of equipment.
 - Hold at least one board meeting annually in Juneau - the Board schedules meeting and typically includes one meeting per year in Juneau; the Board supports this proposal subject to financial concerns.
 - Allow examiners to attend board meetings - the Board supports Division approval of such staff travel, subject to financial concerns.
- II. Changes to application requirements
 - A. The Board supports a version of the proposed changes to general application requirements (regarding notarized photos, certified true copies of documents, and duration at address information), and is working on appropriate regulations.
 - B. The Board supports a version of the proposed changes to allow for an expedited temporary permit, and is working on appropriate regulations.

III. Major program changes

- C. The Board supports the proposed changes to the approval process, per the statute change language proposed by the Office of the Attorney General with their November 1, 2016 memo, so long as other changes are not added to that draft. These changes would allow the Board to designate approval of temporary and permanent licenses to the Executive Administrator or other staff. The changes would not allow transfer of the Board's licensing authority and responsibility to the Department.
- D. The Board supports the following staffing changes, as noted:
- Hire one more full-time Medical licensing examiner. The Board understands that this change is under way, and would like a status report.
 - All medical staff in one location. The Board noted the need to have the Executive Administrator and investigative staff in the Anchorage office, and agrees with the need to have all medical staff in one location; the Board supports moving medical licensing staff to the Anchorage office.

Upon a motion duly made by Mrs. Carlson, seconded by Ms. Millar, and approved unanimously, the Board accepted the Board position on the process improvement proposals, as read onto the record.

Recess for lunch

The Board recessed for lunch at 12:15 p.m.
The Board went back on the record at 12:45 p.m.

Board members present:

Cam Carlson, Public Member
Brück A. Clift, MD
Sai-Ling Liu, DO
Kevin Luppen, PA-C

Kathleen Millar, Public Member
Joy M. Neyhart, DO
Grant T. Roderer, MD

Board member Craig Humphreys, MD, was not able to attend the afternoon session of the meeting.

Board staff present: Debora Stovern, Executive Administrator

Visitors present: Lisa Rosay, representing the State Behavioral Health Unit

Agenda Item 13 License Application Review

Board members reviewed license application files. The Board discussed concerns with the digital applications, such as unclear copies of photos and other documents. This had been a previous concern, when the Division first launched the digital application system, and the Board had been satisfied that those issues had been resolved. The Board directed Ms. Stovern to confirm that those procedures were still in place. The Board determined to approve those applications pending receipt of incomplete or unreadable information, as noted on the signed approval sheets.

Upon a motion duly made by Ms. Millar, seconded by Mr. Luppen, and approved unanimously, the Board approved the following applicants for licensure in Alaska subject to agreements adopted by the Board on November 3, 2016:

Sarah Renee Volz, DO
Russell Andrew DeGroot, DO
Francis Peter Lagattuta MD

Upon a motion duly made by Dr. Clift, seconded by Mrs. Carlson, and approved unanimously, the Board approved the following physicians for licensure in Alaska, pending completion of their application files:

Emad Kamel Abdel-Fattah
Allen Dale Adams
Muhammad Kiwaja Ahmed
Ajit Joseph Alles
Francois Aspesberro
Russell Edward Bartt
Michael James Bauer
Nancy Arleen Burkey
Ira Chang
Nathan Paul Christensen
Michael Andrew Cole
Sarah Rose Cox
Michael Paul DelaCruz
Carlo Greg Niepes Demandante
Kim Driftmier
Edward William Eissmann
Christopher Vincent Fanale
Claire Alice Frost
Sarah Jane Fryberger
Brent Wesley Galloway
Natalia Rodrigues Goldman
Shafali Goyal
Walter James Gray
Heather Dawn Hawthorne
Mark Patrick Heilala
Nadir Ismat Ishag Osman
Jessie Willow Janowski
Judd Martin Jensen
Shiveindra Jeyamohan
Patricia Lynn Kandalajt
Christopher Wayne Kidwell
Panayota Kotsali

James Maruice Langevin
Robert Louis Lapidus
Adam Edward Larkins
Merrilee Gay Leonhardt
Lynn Gregory Lindsey
Rick Joseph Marino
Michael Morad Marvi
Clare Loise Maxwell
Sarah Tighe McCutcheon
Muhammad Asad Mirza
Nicole Antonia Morin
Wilscott Edward Naugler
Maria Nemethy
Patrick J Nestor
Nicole Marie Nilson
Cristin Moira O'Grady
Gerardo Francisco Olivera
Thomas Ervin O'Mara
Carol May Rockhill
Eugene Francis Schwarz
Byron Roderick Spencer
Pamela Elizabeth Stewart
Daniel Michael Strum
Kurtis Lee Tedesco
Kelsey Angeline Terland
Jonathan Van Ravenswaay
Bianca Velez
Vijay Vidyasagar
William Bradley White
Katherine Wollner
Ramon Emilio Yera
John Zhang

Upon a motion duly made by Dr. Clift, seconded by Mrs. Carlson, and approved unanimously, the Board approved the following osteopathic physicians for licensure in Alaska, pending completion of their application files:

*John Stephen Allerding
Maria Arganoza-Priess
James Darryl Bise
Adam Jacob Colton
Scott Allen Drummond
Michael Daniel Henderson*

*Hyon Ja Joo
Jeremy Jihani Kokkonen
Jennifer Kathleen Malcolm
Christina Mota
Starchild Weivoda*

Upon a motion duly made by Dr. Clift, seconded by Mrs. Carlson, and approved unanimously, the Board approved the following podiatrist for licensure in Alaska, pending completion of the application file:

Kristina Diann Lacy

Upon a motion duly made by Dr. Clift, seconded by Mrs. Carlson, and approved unanimously, the Board approved the following physician assistants for licensure in Alaska, pending completion of their application files:

*Patrick Garcia Alonso
Olivia Burtis Bockoff
Charles Francis Boelter
David Lowrey Budge
Benjamin Brad Dexter
Jesse Ellman Ennis
Micah Nathaniel Gentile
Patrick John Grimm
Ryan Kurtis Hawkins
Christine Gerarda Hickey
Audrey C. Kelley
Denya Catherine Koehler
Brittany Noelle Marshall*

*Matthew Jerrad Montee
Adam Carl Nelson
Nadege Nerette
Jeremy Lee Rosiecki
Douglas Blane Russell
Kali Danielle Saxton-Shaw
Heidi Lianne Sturgill
Leslie Dennis Tolliver
Brian James Tureman
Sophie Renee Walsh
Sean Andrew Walsh
Ivy Mariah Weakland
Scott John Woffinden*

Upon a motion duly made by Dr. Clift, seconded by Mrs. Carlson, and approved unanimously, the Board approved the following mobile intensive care paramedics for licensure in Alaska, pending completion of their application files:

*Leif E Albertson
Chloe Belflower
William Bocast
Hee Wang Cho
Charles Joseph Darnell
Matthew John Fellman
Bethany Diane Flynn
Lucas David Michael*

*Anders Ichiro Ogawa
Joseph Charles Oshea
Daniel Rekow
Lorraine Daphne Richmond
Jessica Dawn Roper
Rebecca Joanne Satathite
Brennon Patrick Schwartz-Whitermore
Bragan Washburn*

Agenda Item 9 Board Review of Requests/Issues (continued)

In the matter of Samuel H. Schurig, DO

The Board reviewed the request regarding Dr. Schurig and the interpretation of the “on site supervision” required by his Memorandum of Agreement. The Board noted their intent for “on site” supervision is for the supervising physician to be in the same physical building where he is practicing; it would not allow for him to practice unsupervised at a satellite office.

The Board will consider a change regarding the “on site supervision” requirement, pending further information. In the meantime, the Board-approval of the new physician supervisor will allow for Dr. Schurig to comply with the supervision requirements at both locations.

Agenda Item 12 Division Update (continued)

The Board tabled the following items until the next meeting:

- Review of current and year-end financial reports
- Fee analysis: the Division analysis of Medical Board fees was included in the Division Update section of the Board packet; however, there was not time to review or discuss it during that agenda item. Ms. Stovern reported that any fee changes would not impact the upcoming renewal. It was noted that the analysis did not reflect actual financial reporting for Fiscal Year 2016 and did not include the proposed increased revenues for application and license fees during Fiscal Year 2017. The Board would like an updated analysis for review at the next meeting.

The Board would like an update on the following items at their next meeting:

- status of Division purchase of tablets for Board business
- availability of a speaker phone for off-site meetings
- current and year-end financial reports, including detailed information on indirect expenditures
- information regarding their previous questions regarding Board and Division budgeting, including:
 - Was the travel budget cut by the Legislature for the current fiscal year?
 - If so, what will happen to surplus money due to travel restrictions?
 - What budget will be proposed for Legislative consideration for the next fiscal year?

Agenda Item New Business

There was no new business for consideration.

Agenda Item 14 Federation of State Medical Boards (FSMB) updates

The next annual meeting of the Federation of State Medical Boards (FSMB) is scheduled for April 20-22, 2017 in Fort Worth, Texas. The Board directed Ms. Stovern to attend the meeting, along with Dr. Liu, as their voting delegate.

The following additional FSMB items were included in the Board packet for further review:

- 1) Annual Meeting information, including
 - First call for award nominations
 - First call for bylaws amendments
 - First call for associate member nominations
 - First call for committee appointments
 - First call for nominations to elective office
- 2) Highlights from Board of Directors meetings
- 3) News from Interstate Medical Licensure Compact
- 4) Surgeon General letter regard opioid use
- 5) Annual report on USMLE examinations
- 6) Notice of national series on physician sexual misconduct
- 7) E-news (August - October editions)

Agenda Item 15 Correspondences

The following correspondence was included in the Board packet for review:

- 1) Accreditation Council for Continuing Medical Education (ACGME) milestone data, revised FAQ
- 2) Educational Commission for Foreign Medical Graduates (ECFMG) report on actions
- 3) National Board of Osteopathic Examiners (NBOME) updates, newsletter
- 4) International Association of Medical Regulatory Authorities (IAMRA) newsletter, national/international meeting notices
- 5) International Conference on Opioids meeting notice
- 6) Journal of Opioid Management call for papers
- 7) Alaska Department of Health and Social Services press releases
- 8) State of Reform news
- 9) Center for Telehealth (CTel) news briefs
- 10) American Telemedicine Association (ATA) news briefs

Agenda Item 16 Administrative Businesses

Financial Report

Ms. Stovern reported that the following financial reports were not yet available for review:

- Current Report (3rd quarter of Fiscal Year 2017)
- Year-end Report for Fiscal Year 2016

The following Board financial reports were included in the Board packet for review:

- Division Annual Fiscal Report for Fiscal Year 2016

Executive Administrator’s Report

The Executive Administrator’s Report was included in the Board packet for review.

Review Minutes

The Board reviewed the minutes of their last meetings.

Upon a motion duly made by Dr. Clift, seconded by Mr. Luppen, and approved unanimously, the Board approved the minutes of the August 22, 2016, the August 24, 2016, and August 4-5, 2016 teleconference meetings.

Meeting Scheduling

The Board confirmed the schedule for upcoming meetings:

- February 2-3, 2017 in Anchorage
- May 4-5, 2017 in Anchorage
- August 3-4, 2017 in Anchorage
- November 2-3, 2017 in Anchorage

Although the Board has traditionally held meetings in as many geographical areas of the state as possible to facilitate access by the public, they noted the need to be fiscally responsible with travel costs. However, it is essential that the Board regularly meet in person to conduct complex business and address multiple topics, which is problematic by teleconference. During the period of travel restrictions, the Board will conduct their meetings in Anchorage, which will reduce travel costs significantly.

Dr. Roderer will work with Ms. Stovern to compile Board feedback to justify the Board’s request for travel approval for in-person attendance at their May meeting.

Adjournment

There being no further business, the meeting was adjourned at 3:40 p.m.

Respectfully submitted:

Approved:

/s/
Debora Stovern, Executive Administrator
Alaska State Medical Board

/s/
Grant T. Roderer, MD, President
Alaska State Medical Board

February 3, 2017
Date

February 3, 2017
Date