

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

**STATE MEDICAL BOARD**

**MINUTES OF MEETING  
May 4-5, 2017**

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, May 4-5, 2017 in Anchorage, Alaska.

**Thursday, May 4, 2017**

**Call to Order**

The meeting was called to order by Grant T. Roderer, MD, Chair, at 9:06 a.m.

**Roll Call**

Board members present:

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

Doug Mertz, Public Member  
Joy M. Neyhart, DO  
Timothy Olson, PA-C  
Grant T. Roderer, MD

Board staff present: Debora Stovern, Executive Administrator

Visitors present: Shalom Cederberg, representing the Governor's Office, Boards and Commissions; Wendy Brimmer; Don Ingraham, Nancy Ingraham.

Ms. Stovern noted appropriate emergency exits and gathering location.

**Agenda Item 1      Review Agenda**

The Board reviewed the agenda.

**Agenda Item 2      Board Business**

The following Board Business was addressed:

- Announcements – the Board president welcomed new board members, Timothy Olson, PA-C from Bird Creek, and Douglas Mertz, Public member from Juneau. Ms. Stovern reviewed Board responsibilities and open meetings requirements.

- Ethics Reporting – there were no ethics conflicts to report.
- Board Guidelines, Procedures, and Policies - The Board routinely makes determinations on various application and practice matters; those determinations are compiled by the Executive Administrator as 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.

The Board reviewed their guidelines regarding continuing medical education (CME) credits considered equivalent to the required Category 1 hours for the purpose of satisfying the CME requirements for renewal. The following proposed guidelines were read onto the record:

***Approved Continuing Medical Education Hours***

The board regulations governing continuing medical education (CME) specify Category I hours.

The board will accept the following CME credits as equivalent to the required Category 1 hours for the purpose of satisfying the CME requirements:

- American Academy of Family Physicians (AAFP) prescribed credit
- American College of Obstetricians and Gynecologists (ACOG) formal learning cognates
- CME activities recognized through the American Medical Association (AMA)
- International Conference Recognition Program
- CME activities approved by the European Accreditation Council for Continuing Medical Education (EACCME) that have been converted to AMA category 1 credit
- CME activities certified by the Royal College of Physicians and Surgeons of Canada (RCPSC) that have been converted to AMA category 1 credit

The board will accept the following CME credits as equivalent to the required Category 1 hours when earned by a podiatrist for the purpose of satisfying the CME requirements:

- CME activities earned from providers that are approved by the Council on Podiatric Medical Education (CPME)

**Upon a motion duly made by Dr. Neyhart, seconded by Mrs. Carlson, and approved unanimously, the Board adopted the proposed CME guidelines as read onto the record.**

**Agenda Item 3      Board Actions**

Investigator Sonia Lipker and Senior Investigator Al Kennedy joined the meeting.

**In the Matter of Case No. 2017-000037**

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a physician who failed to report another state licensing sanction to the Board within the required timeframe.

**Upon a motion duly made by Dr. Clift, seconded by Dr. Humphreys, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2017-000037, signed by Linda Stiles, MD.**

The adoption order was signed by the Chair.

In the Matter of Case No. 2017-000038

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a physician who failed to report another state licensing sanction to the Board within the required timeframe.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2017-000038, signed by Shawn P. Granger, MD.**

The adoption order was signed by the Chair.

In the Matter of Case No. 2017-000172

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a paramedic who failed to report a misdemeanor conviction to the Board within the required timeframe.

**Upon a motion duly made by Mr. Olson, seconded by Dr. Liu, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing Case No. 2017-000172; with Board executive and investigative staff remaining during the session.**

The Board entered executive session at 9:25 a.m. The Board went back on the record at 9:42 a.m.

**Upon a motion duly made by Dr. Clift, seconded by Dr. Humphreys, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2017-000172, signed by Gregory T. Hyatt (MICP)., as amended to allow 120 days to pay the fine instead of 90 days.**

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001291

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. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2016-001291, signed by Zvika Schreiber, MD.**

The adoption order was signed by the Chair.

In the Matter of Case No. 2016-001260

The Board reviewed a proposed imposition of a civil fine agreement from an investigation of a physician assistant who failed to report another state licensing action to the Board within the required timeframe.

**Upon a motion duly made by Dr. Liu, seconded by Mrs. Carlson, and approved unanimously, the Board adopted the imposition of civil fine agreement, Case No. 2016-001260, signed by Tyson Bubnar, PA-C.**

The adoption order was signed by the Chair.

In the Matter of Case No. 2017-000051

**Upon a motion duly made by Dr. Clift, 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 Case No. 2017-000051; with Board executive and investigative staff remaining during the session.**

The Board entered executive session at 9:52 a.m. The Board went back on the record at 10:30 a.m.

**Upon a motion duly made by Mr. Olson, seconded by Dr. Clift, and approved unanimously, the Board tabled Case No. 2017-000051 pending further inquiry by investigators.**

In the Matter of Case No. 2017-000131

Administrative Law Judge Pederson joined the meeting by teleconference.

**Upon a motion duly made by Dr. Humphreys, 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. 2017-000131; with the Board executive and ALJ Pederson remaining during the session.**

The Board entered executive session at 10:43 a.m. The Board went back on the record at 11:23 a.m.

**Upon a motion duly made by Dr. Clift, seconded by Dr. Humphreys, and approved unanimously, the Board tabled Case No. 2017-000131 pending further information from the Administrative Law Judge.**

In the Matter of Case No. 2014-000153 and 2017-000119

The Board reviewed a proposed agreement from an investigation of violations of a previous consent agreement that resulted in a license suspension on 5/5/16. The licensee has agreed to new conditions and probation and is petitioning the Board to lift the suspension. The consent agreement included a 10-year probation, a \$10,000 fine (suspended), reporting and treatment provisions, random testing, regular

testing during work shifts, restrictions on remote practice, abstinence, etc. These conditions are consistent with Board history and disciplinary guidelines.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board adopted the consent agreement, Case No. 2014-000153 and 2017-000119, signed by Peter Osterbauer, MD.**

The adoption order was signed by the Chair.

#### **Agenda Item 4      Investigative Unit**

##### **Investigative Report**

Investigator Lipker reviewed the investigative report provided to the Board.

##### **Probation Report**

Senior Investigator Kennedy reviewed probation monitoring report that was provided to the Board. He also noted the following regarding previous board inquiries:

- Dr. Donaldson is in compliance with his agreement, other than an overdue chart review; he is in compliance with reports required by his agreement, including psychiatric reporting; the probation monitor had attempted to visit his office but had found it closed.
- Dr. Schurig is in compliance with his agreement.

Investigator Kennedy discussed Board member responsibilities regarding ex parte information related to investigative cases. He also noted that he would like to arrange a meeting with the Alaska State Medical Associate (ASMA) Physician Health Program to discuss coordinating activities.

#### **Agenda Item 5      Board Review of Requests/Issues**

##### **In the matter of Wade Erickson, MD**

Dr. Erickson joined the meeting while the Board reviewed his request to accept education completed to comply with conditions of his consent agreement.

**Upon a motion duly made by Dr. Humphreys, 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 the matter of Dr. Erickson; with the Board executive and investigative staff remaining during the session.**

The Board entered executive session at 11:33 a.m. The Board went back on the record at 11:46 a.m.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board accepted the 28 documented continuing medical education hours, plus self-study hours, as meeting the additional education hours required by Dr. Erickson's consent agreement.**

Dr. Erickson was invited to address the Board. He noted that he had learned a lot through the investigative process in regard to medical assistants having no scope of practice and estheticians having no authority under their licenses for delegation of dermatological medical duties.

In the matter of Shubhranjan Ghosh, MD

The Board reviewed a petition from Dr. Ghosh to lift his license suspension.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing the matter of Dr. Ghosh; with the Board executive and investigative staff remaining during the session.**

The Board entered executive session at 11:53 a.m. The Board went back on the record at 12:16 p.m.

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Humphreys, and approved unanimously, the Board tabled the request from Dr. Ghosh, pending additional information from investigators.**

**Agenda Item 6 Malpractice Report Review**

The Board reviewed malpractice reports for Case No. A14-693897-C, Case No. 4FA-13-01917-CI, Case No. 3AN-15-05288-CI, Case No. 12-CV-02858-WJM, Case No. unknown, and Case No. 1JU-14-00527-CI.

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Humphreys, and approved unanimously, the Board accepted the malpractice reports, Case No. A14-693897-C, Case No. 4FA-13-01917-CI, Case No. 3AN-15-05288-CI, Case No. 12-CV-02858-WJM, Case No. unknown, and Case No. 1JU-14-00527-CI, with no further action at this time.**

**Recess for lunch**

The Board recessed for lunch at 12:27 p.m.  
The Board went back on the record at 1:30 p.m.

Board members present:

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

Doug Mertz, Public Member  
Joy M. Neyhart, DO  
Timothy Olson, PA-C  
Grant T. Roderer, MD

Board staff present: Debora Stovern, Executive Administrator

There were no visitors present.

## **Agenda Item 7 Full Board Interviews**

### **Scott E. Gray, MD**

Dr. Gray was present to discuss his license application with the Board.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Neyhart, 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. Gray; with Board staff remaining during the session.**

The Board entered executive session at 1:33 p.m., and went back on the record at 1:48 p.m.

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Clift, and approved unanimously, the Board granted a full unrestricted license to Scott E. Gray, MD.**

### **Patrick D. Rudersdorf, MD**

Dr. Rudersdorf had decided to withdraw his application for a license in Alaska.

## **Agenda Item 8 Statute/Regulation Updates**

### **Regulation Process**

A Division publication regarding the steps in the regulation process was included in the Board packet for further review.

### **Pending/potential 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.

### **Approved Regulation Project – applications, telemedicine, prescription drug monitoring program**

The Board has identified a number of regulation changes that will streamline the medical application process and improve licensure processing times by allowing applicants for more license types to submit credentials documents through the Federation Credential Verification Service (FCVS) and by providing for an expedited process for granting temporary permits. In addition, the Board is required to adopt regulations to implement SB 74, including standards for “telemedicine” practice, adopting a national model policy for standard of care, and requirements for the registration and use of the prescription drug monitoring program, as well as certain exceptions. SB 74 requires these regulations to take effect by July 17, 2017.

As published in the public notice, this regulations project proposes to update various regulations relating to physician temporary permits, physician and physician assistant applications, standards of practice for record keeping, unprofessional conduct, prescribing controlled substances, and to establish standards of practice for telemedicine, including the following:

- 12 AAC 40.035. Temporary permit application requirements, is proposed to be changed to alter the temporary permit application requirements. It will preserve the existing process for the issuance of temporary permits (under section a), and add criteria (under section b) to allow for an expedited temporary permit to be issued to a qualified applicant who has a clean record and has applied with an FCVS profile (which includes verification of identity, medical school, postgraduate training, and most examination types.)
- 12 AAC 40.036. Locum tenens permit application requirements, is proposed to be changed to allow an applicant for a locum tenens permit the option to submit credentials verification documents through the Federation Credentials Verification Service (FCVS).
- 12 AAC 40.038. Residency permit, is proposed to be changed to allow an applicant for a resident permit the option to submit credentials verification documents through the Federation Credentials Verification Service (FCVS).
- 12 AAC 40.045. Courtesy license, is proposed to be changed to allow an applicant for a courtesy license the option to submit credentials verification documents through the Federation Credentials Verification Service (FCVS).
- 12 AAC 40.400. Physician assistant license, is proposed to be changed to allow an applicant for a physician assistant license the option to submit credentials verification documents through the Federation Credentials Verification Service (FCVS).
- 12 AAC 40.445. Graduate physician assistant license, is proposed to be changed to allow an applicant for a graduate physician assistant license the option to submit credentials verification documents through the Federation Credentials Verification Service (FCVS).
- 12 AAC 40.940. Standards of practice for record keeping, is proposed to be changed to implement standards for record keeping for telemedicine practice.
- 12 AAC 40.943. Standards of practice for telemedicine, is a proposed new section that establishes standards of practice for telemedicine that the Board adopts by reference (as required by SB74).
- 12 AAC 40.967. Unprofessional conduct, is proposed to be changed to amend the provisions related to unprofessional conduct to comply with SB 74 related to “telemedicine” practice, requirements for registering for the prescription drug monitoring program, requirements for the use of the prescription drug monitoring program, and allowing for certain exceptions.

- 12 AAC 40.975, Prescribing controlled substances, is proposed to be changed to amend the requirements for prescribing controlled substances to comply with SB 74.

The Board discussed adopting practice standards published by other organizations versus developing and drafting their own standards.

In considering the proposed regulations project, the Board has reviewed and considered public comments received from: Narina Soloy, Justin E. McKenna, PA-C, Julie Castle MD, and Melodie Isgro MD. The Board does not expect the regulations change to incur cost to private persons, or to require an increased appropriation.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board adopted the proposed regulation changes regarding temporary permits, license applications, recordkeeping, unprofessional conduct, prescribing controlled substances, and standards of practice for telemedicine, as publicly noticed.**

The adoption order was signed by the Chair.

#### Approved Regulation Project – Abortion

The regulations project regarding abortion, as published in the public notice, proposes to amend regulations to conform to current law, amend regulations regarding record keeping, repeal a consultation requirement, adopt a national practice standard for abortion after the first trimester, and update requirements for hospitals and facilities to reflect current medical practice and technology.

In 1970, the Alaska Legislature enacted laws decriminalizing abortion, which included a requirement that the State Medical Board adopt regulations necessary to carry into effect the provisions of the new law and set standards of professional competency in the performance of abortions and establish procedures and set standards for facilities, equipment and care of patients. The Board adopted such regulations in 1970, and revised them in 1973.

The State has been named in a lawsuit challenging the constitutionality of the existing abortion regulations. Although the lawsuit brought the regulations to the attention of the Board, the Board is guided by their public protection mandate, not just to resolve the litigation.

After consulting with attorneys from the Office of the Attorney General, the State Medical Board issued a scoping notice to invite public comment on the existing regulations. After considering the comments, the status of the litigation, and guidance from the AAGs, the Board is proposing to revise the regulations regarding abortion, including the following:

1. 12 AAC 40.060. Termination of pregnancy: is proposed to be amended to conform to current law. The requirements regarding parents/guardians were authorized under AS 11.15.060, which was repealed and replaced by AS 18.60.010-.090. The replacement statutes includes specific language regarding these situations and informed consent.

*12 AAC 40.060 Termination of Pregnancy* is proposed to read “Termination of pregnancy must be requested by the pregnant woman.” The remaining language to be deleted: “unless she has been

adjudged mentally incompetent or is unmarried and under 18 years of age, in which case the request must be made by her parent or guardian.”

2. 12 AAC 40.070. Informed consent: is proposed to be amended to clarify the informed consent requirements to conform to current law. The requirements regarding informed consent were referenced under 12 AAC 40.060 and authorized under AS 11.15.060(a), which was repealed and replaced by AS 18.60.010-.090.

*12 AAC 40.070 Informed Consent* is proposed to read “A written informed consent that complies with AS 18.16.060 shall be obtained from the patient. Such written informed consent shall be on the patient's chart. The patient shall be advised of the medical implications and the possible emotional and physical sequelae of the procedure.” The remaining language to be deleted: “Unless otherwise provided in 12 AAC 40.060, a written informed consent shall be obtained from the patient or from any other person whose consent is required before termination of a pregnancy.”

3. 12 AAC 40.080. Medical procedures: is proposed to be changed to amend the provisions relating to examination and record keeping before performing an abortion, by removing the citation to 12 AAC 40.110, which is proposed for change, and to conform to existing patient record standards.

*12 AAC 40.080 Medical Procedures* is proposed to read “The patient shall be examined by a physician licensed in Alaska, and a written record of the patient's health shall be prepared before performing an abortion.” The language “physical and emotional” to be deleted and the remaining language to be deleted: “...procedure as set out in 12 AAC 40.110.”

4. 12 AAC 40.100. Consultation requirements: is proposed to be repealed. Necessary consultation is already required under other professional practice standards.

*12 AAC 40.100 Consultation Requirements* is proposed to be repealed. The language to be repealed: “Abortions interrupting a pregnancy up to and including the twelfth week of gestation may be performed without consultation. Abortions performed after the twelfth week of gestation shall be preceded by consultation with another physician. The consultation shall include an opinion as to the preferred method of termination of pregnancy.”

5. 12 AAC 40.110. Abortion procedures: is proposed to be amended to adopt by reference a national practice standard for abortion after the first trimester.

*12 AAC 40.110 Abortion Procedures* is proposed to read “The *Clinical Management Guidelines for Obstetrician-Gynecologists: Second-Trimester Abortion* Practice Bulletin Number 135, (dated June 2013, reaffirmed 2015) of the American College of Obstetricians and Gynecologists is adopted by reference as the standard of practice when providing an abortion after the first trimester.” The language to be deleted: “During the second or third trimester of a pregnancy, acceptable procedures include dilation and curettage, suction aspiration of the uterus, injection of pharmacological agents, hysterectomy and hysterotomy. The exact procedure to be used will depend upon the patient's total health, age, associated disease and pathology, and anomalies such as skeletal defects and other medical indications.”

6. 12 AAC 40.120. Standards for hospitals and facilities: is proposed to be amended to update requirements for hospitals and facilities to reflect current medical practice and technology.

*12 AAC 40.120(b) Standards for Hospitals and Facilities* is proposed to read “From and after the point in time when a fetus becomes viable, as determined by such medical examinations and tests which in the physician’s professional judgment are necessary, an abortion may only be performed at a hospital with a Neonatal Intensive Care Unit (NICU).” The language to be deleted: ” During the second or third trimester of a pregnancy, blood, blood derivatives, blood substitutes or plasma expanders shall be immediately available when an abortion is performed, and an operating room appropriately staffed and equipped for major surgery in accordance with regulations adopted under AS 18.20.060 shall be immediately available.”

*Note, the provisions of 12 AAC 40.120(a) are not proposed to be changed:* (a) During the second or third trimester of a pregnancy, abortions shall be performed under sterile conditions. A bed and a registered nurse shall be available for a minimum recovery period of one-half hour. A registered nurse shall be present during the procedure.

7. 12 AAC 40.130 Records: is proposed to be amended to cite the Board’s existing standards of practice for record keeping.

*12 AAC 40.130 Records* is proposed to read “In accord with 12 AAC 40.940, during the second or third trimester of a pregnancy, the attending physician shall record a medical history, findings of the physical examination, operative report of the abortion procedure and pathology report as part of the clinical record to be maintained by the hospital or facility. The physician and hospital or facility shall treat the patient's identity and medical record as confidential information.”

8. 12 AAC 40.140. Limitation: is proposed to be changed to remove a citation to a renumbered statute.

*12 AAC 40.140 Limitation* is proposed to read “A fetus which has not developed beyond 150 days after the first day of the last menstrual period may be considered non-viable. In the performance of an abortion after that date, the physician shall be guided by a reasonable judgment as to whether the fetus is viable in fact.” The remaining language to be deleted: “...for purposes of AS 11.15.060(a).”

Abortion continues to be regulated under AS 18.16.010-.090, which includes provisions such as: requiring that abortion may only be performed by a physician licensed by the State Medical Board, residency requirements, requirements for minors and judicial bypass provisions, informed consent requirements, partial-birth abortion prohibition, definition of abortion, civil and criminal penalties, etc.

The Board reviewed and considered public comments. Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh joined the meeting. AAG Greider summarized the public comments:

- 26 comments were received from licensees in support of the proposed regulations
- 7 comments were received from licensees who supported no changes to the regulations
- 15 comments were received from other health care professionals in support of the proposed regulation
- 6 comments were received from other health care professionals who supported no changes to the regulations

- 195 lay comments (including Planned Parenthood) were received in support of the proposed regulations
- 130 lay comments (including Alaska Family Council) were received from those who supported no changes to the regulations
- Comments regarding the proposed NICU requirements included those who felt the proposed regulations were too restrictive and those who supported the proposed regulations
- Comments regarding the proposed documentation requirements included those who supported and those who opposed
- Comments regarding the proposal to adopt the ACOG bulletin included those that opposed, those that supported, and some that felt the procedures should be regulated as any other procedure
- Comments included a recurring misunderstanding about
  - parental notification requirements, which were previously regulated by a statute that was invalidated by the Supreme Court in approximately 2014
  - consent for the mentally incompetent, which is regulated under the informed consent statutes
  - second and third trimester abortion, which is legal in Alaska
  - partial birth abortion, which was previously prohibited by a statute that was invalidated by the courts

The Board also noted that some of the public comments included concerns about the accessibility of the ACOG bulletin, which is not accessible by the general public on their website, but is available in the Board office and is available by requesting it from the ACOG or one of their members. Some of the public comments also included concerns about information in the ACOG bulletin that are not related to practice standards or procedures.

The Board reviewed the proposed language in 12 AAC 40.080, which currently reads: “Medical Procedures. The patient shall be examined by a physician licensed in Alaska, and a written record of the patient’s physical and emotional health shall be prepared before performing an abortion procedure as set out in 12 AAC 40.110.” The proposed changes include removing the phrases “physical and emotional” and “procedure as set out in 12 AAC 40.110.” The Board determined to retain the phrase “physical and emotional” but to pursue the removal of the phrase “procedure as set out in 12 AAC 40.110.”

The Board reviewed the proposed language in 12 AAC 40.110, which includes replacing the current language with the following: “The *Clinical Management Guidelines for Obstetrician-Gynecologists: Second-Trimester Abortion* Practice Bulletin Number 135, (dated June 2013, reaffirmed 2015) of the American College of Obstetricians and Gynecologists is adopted by reference as the standard of practice when providing an abortion after the first trimester.” The language to be deleted: “During the second or third trimester of a pregnancy, acceptable procedures include dilation and curettage, suction aspiration of the uterus, injection of pharmacological agents, hysterectomy and hysterotomy. The exact procedure to be used will depend upon the patient’s total health, age, associated disease and pathology, and anomalies such as skeletal defects and other medical indications.” The Board noted that it was their intent to adopt the practice standards for abortion procedures, but not necessarily to adopt other information included in the bulletin. They determined to pursue the change, but add a clarifying phrase to the beginning of the proposed first sentence: “The procedures describing in...”

The Board noted that these were not substantive changes, so would not require a new public notice period for the regulations changes.

In considering the proposed reductions project, the Board has reviewed and considered public comments received from: Matt Davis, Maria Hartz, Beth Adams, Kime McClintock, Senator Berta Gardner, Michelle Hotchkiss, Pamela Samash, Benjamin A. Garnett, Roy and Andrea Peters, Ursula McVeigh, Nicole Fliss, William Resinger MD, Lea Filippi, Theresa Lauterbach, Rebecca Gaguine, Sarah Jean Hanson MD, Barry D. Weiss MD, Neil Murphy MD, Dr. Leanne Komorowski, Mitchell F. Horan MD, Jan Whitefield MD, Heidi Doudna, Joshua J. Morris MD, Blake Burley, Karen Schuster, Barbara Crittenden, Stella Huffer, John and Diane Fleming, Shirleen Rannals, Rudy Poglitsch, Rosalyn Singleton, Rae Stevenson MD, Maureen Klump, Susan Lemagie MD, Mary Patania, David Kreiss-Tomkins, Paula Beneke, Laurel Holmes, Russell Moore, Natalie Watson, Leighanne Atwood, Alexis Hart, Linnea Pearson, Polly Haag, Taylor Raftery, Katherine Davies, Jessica Thornton, David Compton, Barrett Fletcher, Margaret McNeil, Gary Hawn, Eric Schneider DO, Lori Landstrom, Honalee Elkan, Karen Harvey, Michael Boshears, Sheryl Post, Jill Dery, Sara Kozup-Evon, John Macomber, Phyllis Morrow, Susanne Ratcliffe Wilson, Edeltraud Rodewald, Maite Lorente, Kathleen H. Sarns-Irwin, Bette Reed, G. Fries, David Lovell, Duncan Bovee, Denise Carl, Thareth Casey, Cecily Stern, Abigail Newby-Kew, Mary Pat Schilly, Laura Sabia, Melissa del Carpio, Sarah Fineman, Dana Seagars, Jenna Steffes, Brenda Loughman, Leigh Bolin, Salvatore Pietromonaco, Mark Steen, Ann Kirven, Charlotte Ciszek, Dirk Nelson, Elizabeth Webb, Nicole Burnard, Mark Boberick, J W Aderhold, Janessa Warren, Donna Russell, James Ducker, Malachi O'Rourke, Sigrun Robertson, Bernard Wostmann, Jef Harvey, Aaren Ellsworth, Deborah Voves, Christopher Marsh, Ian Albin-Brooks, Lesa Hollen, Diane Okonek, Christina Livesey, Dan Mortenson, James P. FitzSimons, Sarah Tabor, Rodreshia Dunbar, Elizabeth Hatton, Donald Greenberg, Paul Winkel, Terri Robbins, Gary Dailey, Cameron Sivertsen, Susan Whitefeather, Robert Daniels, Lee Walkowsky, Audrey Lance, Shirley Dean, Nicole Harrell, Candace Cahill, Shoshanah Stone, Olena Brusuelas, Mary Helen Stephens, John Spacer, Jessica Wallin, Georgiana Page, Barbara McDaniel, Janis Johnson, Bob and Mary Ellen Mitchell, Marie Pedraza, Chelsea Vukovich, David Barber, Susan Olsen, Donna Goldsmith, Rebecca Wall, Robyn Henry, Chelsee Largo, Gay Welman, Portia Collette, Rebecca Buckner, Sarah Ferrency, Dulce Ben-East, Sara Frerich, Hannah McFadden, Michael Eastman, Tina Matney, Maila Bischoff, Loretta Cole, Ann Cunningham, Stephanie Mann, Chris Blount, Emily Olsen, Jessie Huff, Jeremiah Boone, Janet McCallister, Crystal Brady, Colleen Murphy, Sarah Rue, Cheryl Risch, Molly O'Scannell, John Breiby, Orlanda Meyer, Cortney McLellan, Diana Redwood, Linda Blefgers, Tracy VerVelde, Karen Ouelette, Chilton Bowman, Darian LaTocha, Peter Mjos, Michael and Laurie Boelter, Laura Baldwin, Amanda Chriswell, David Tarby MD, Jennifer Pangalangan, Evan Anderson, Lorinda Brotherton, Richard Andrews, Judith Miller, Gretchen Clarke, Bridgette Reynolds, Michael LeMay, Warren Jones, Lori Landenburger, Ann Pence, Jean Land, Aaren Ellsworth, Keegan King, Diane Ziegner, Derek Monroe, Cynthia Fernandez, Steven Bergt, Margaret Asbury, Deborah Tennyson, Jacob Mortensen, Nicole Clark, Deirdre Downey, Sarah Bean, James Apone, Mary Turner, Hillary Brandenburg, Jessica Bond, Sarah Lewis, Jeanette McBride, Margaret Oliver, Carol Seekins, Mara Carnahan, Stephanie Sanguinetti, Lorie Hamel, Lance Preston, Joan Ollom, Rev. Melissa Engel, Eric Muench, Anja Phenix, Alfredo Bolivar, Susan Schrader, Carol Potter, Meghan Fridley, Kathleen Dinius, Catherine Medland RN, Jessie Huff, Lynne Prossick, Susan Pacillo, Maureen Knutsen, Stewart Cain, Cheryl Keepers, Sara Larson, Ruth Sheridan, Martha Morris, Jyoti Chadda, Jamie Staab, Kathleen Todd, Leila Wise, Aleta Geer, Hakram Singh, Susan Carver, Megan A. Green, Brian Metras, Jen Syzdek, Andie Rice, Elyce K. D. Santerre J.D., Terese Miller, Charles and Carole Hart, Lori Wilson Ortega, Barbara Seybold, Julia York, Eric Lee, Alexandria Therese, Patty Imus, Mitchell Jacobus, Felicity Young, Ken Spiers, Jeannine Jabaay, Penny Hlavna, Thomas Henehan, Elizabeth Hersh, Rose McGroarty, Shannon Isley, Leona Oberts, Patrick Martin, Senator Cathy Giessel, Ed Gray, Chris Hoch, Karen Procter, Ted Franke, Mary Maureen

Biermann, Teresa Killion, Martha Morris, Danielle O'Neill, Kris Pitts, Eileen Brado, Anna Abbott, Tammy K. Eaker, Judy Squires, James Farr, James Pазsint, Stewart Smith, CAH, Connie Kreiss MD, Elizabeth Martinez-Augustin, DO, Lowell Perry, Sheresica Miller, Ilona Farr MD, Joanne Anderson, Angela Blake, Daniel Sentz, Jeff Hazlewood, John Forbes MD, Rod Perry, Maria Dammeyer, Stephen Holmstock, Gerianne Watanabe Forbes, Tanya Holley, Elizabeth Whearty Hildebrand, Mary Avvenire, Hannah Lotton, Bob Ward, Julia Oaks, Kathleen Williams LPN, Michael and Doris Cardinale, Pat McGrath, Jim Felkel, Lillian Mattie, Tabitha Nardini, Kristina Johannes RN, Patricia Coll Freeman, Jenny Rohler, Scott Ogan, Sean and Josephine Stack, Dawn Tozier, Mary Tozier, Toby Ventura, Heather Klapak, Shannon Robertson, Sherry Wright, Lance Roberts, Crystal Gillespie, Dale Judge, Susan Casey, Betany Porter, Rosezella Michalsky, Sandy Anderson, Priscilla Fairbanks, Stephen M. Wahl MD, Theresa Bird, Nils Degerlund, Tess Syren, Darla Acker, Jacalyn Watson, Kelly Anderson BSN, Larry DeVilbiss, Adam and Jennifer Dalglish, Haylee Kurka, Laura Ryan, Mario Bird, Kim Mattison, Charles Horan, Christopher Kurka, Marc Levin MD, Senator Pete Kelly, Joe Byrnes, Amy Locke, Michele Hartline, Bill Hartline, Carol Carman, Candy Miller, Chad Hutchison, Sarah Chaal, Rep. David Eastman, Amy Thomas, Bill Dean, Alaska Family Action (Jim Minnery), Janet B. McCoy, Harley Bowerman, Gail O'Neill, Barnabas Firth, Julie Morris, John V. Miller, Jamie Adler, Aisha Hanson, Maria Combe, Robin Smith, Robbin Robbert, Laurel Chace, Robin Smith, Elijah Verhagen, Sarah Hennemann MD, Rebecca Hinsberger, Peter Anderson MD, Raymond Russell, Heather J. Austin, Pam Albrecht, Walter Anderson, Gertrude Toomey, Tracy Castoe, Meneka Thiru, Karlan Bachmann. Therese Lewandowski, Honalee Elkan, Planned Parenthood and American Civil Liberties Union (Hannah Brass Greer, Carrie Flaxman, Janet Crepps, Brigitte Amiri, Tara Rich), Wandal Winn MD, Carol Juergens MD, Mary Patania, Chloe Wurr MD, Amanda Arra, Alaska Family Council (Jim Minnery), and several anonymous individuals.

The Board does not expect the regulations change to incur cost to private persons, or to require an increased appropriation.

**A motion was duly made by Dr. Clift, seconded by Dr. Liu, and failed by roll call vote, to adopt proposed regulations changes to 12 AAC 40.060 – 12 AAC 40.140, as revised.**

**Roll Call Vote:**

Dr. Clift-Yea  
Dr. Humphreys-No  
Dr. Liu-Yea  
Mr. Mertz-Yea  
Dr. Neyhart-No  
Mr. Olson-No  
Mrs. Carlson-No  
Dr. Roderer-Yea

It was noted that a motion must pass by a majority, which requires five votes. This motion failed because it received only four votes in support.

**Upon a motion duly made by Mr. Olson, seconded by Dr. Clift, and approved unanimously, the Board determined to reconsider the regulations at tomorrow's meeting.**

**Agenda Item 9**                      **Update on Litigation**

Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh remained for this agenda item.

**Upon a motion duly made by Dr. Neyhart, 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 the Planned Parenthood litigation, subject to attorney-client privilege; with Board staff and attorneys remaining during the session.**

The Board entered executive session at 4:08 p.m. The Board went back on the record at 5:15 p.m.

The Board recessed at 5:19 p.m.

**Friday, May 5, 2017**

**Call to Order**

The meeting was called to order by Grant T. Roderer, MD, Chair, at 9:05 a.m.

**Roll Call**

Board members present:

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

Doug Mertz, Public Member  
Joy M. Neyhart, DO  
Timothy Olson, PA-C  
Grant T. Roderer, MD

Board staff present: Debora Stovern, Executive Administrator

Visitors present: Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh; Board Investigator Sonia Lipker; Shalom Cederberg, representing the Governor's Office, Boards and Commissions; Jason Weiner, Christopher Jensen, Mary Patonia, Nancy Ingraham; Don Ingraham; Wendy Brimmer.

**Agenda Item 8**                      **Statute Regulation Update (continued)**

**Approved Regulation Project – Abortion**

Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh joined the meeting. AAG Greider provided additional information regarding this history of the partial birth abortion prohibition under Alaska Statute (AS) 18.16.050. She reported that the statute was determined by the Alaska Superior Court to be unconstitutional; the state initially appealed, but later withdrew the appeal.

The Board reviewed the proposed language in 12 AAC 40.120(b), which includes replacing the current language with the following: “From and after the point in time when a fetus becomes viable, as determined by such medical examinations and tests which in the physician’s professional judgment are necessary, an abortion may only be performed at a hospital with a Neonatal Intensive Care Unit (NICU).”

They discussed the term “viable” and the NICU requirement. The following substitution was suggested, but not widely supported by Board members: “From and after the point in time when a fetus becomes viable, as determined by such medical examinations and tests which in the physician’s professional judgment are necessary, an abortion may only be performed at a facility with the ability to immediately transport to a hospital with a Neonatal Intensive Care Unit (NICU).”

**Agenda Item 9                      Update on Litigation (continued)**

Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh remained for this agenda item.

**Upon a motion duly made by Dr. Humphreys, seconded by Dr. Liu, and approved unanimously, the Board entered into executive session in accordance with AS 44.62.310(c) for the purpose of discussing the Planned Parenthood litigation, subject to attorney-client privilege; with Board staff and attorneys remaining during the session.**

The Board entered executive session at 9:12 a.m. The Board went back on the record at 9:58 a.m.

**Agenda Item                      Public Comment Forum**

Visitors present included:

Wendy Brimmer, representing herself – had questions regarding the scope of practice for Certified Medical Assistants and Estheticians. The Board clarified that Estheticians are regulated by the Board of Barbers and Hairdressers, and their scope of practice is authorized under those statutes and regulations, which does not include authority to administer Botox or to provide other medical services. It was noted that there is not a licensing program for Medical Assistants, and unlicensed assistive personnel are prohibited from providing services that are considered the practice of medicine. The Board referred her to their Board-issued Guidelines regarding Delegating to Medical Assistants and clarified that those guidelines do not represent a change in requirements, but rather a clarification of the requirements that have existed for quite some time.

Jason Weinder, representing Dr. Christopher Jensen – wanted to introduce himself and his client. The Board noted that they would not hear comments on open matters.

Other visitors were observing only, and did not wish to speak with the Board.

Public Comment period closed at 10:08 am

**Agenda item 10 Full Board Interviews:**

There were no further interviews scheduled.

**Agenda Item 11 Division Update**

The following Division staff joined the meeting by teleconference: Division Director Janey Hovenden, and Licensing Examiner Dawn Hannasch.

Ms. Hovenden reported on legislative matters, and discussed the Medical Board fee analysis, financial reports, and travel policies. She noted that travel approval for Board meetings still falls under the Governor’s travel restrictions which require the Department to justify before approving.

Ms. Hovenden asked that the Board review the Medical fee analysis and comment on the Division’s proposed licensing fee changes. She noted that, if House Bill (HB) 90 passes, the estimated surcharge would be approximately \$55.00 per license, assessed at the time of initial licensure and subsequent biennial renewals. She also noted that the Division would need to reduce fees to spend down the resulting surplus.

Ms. Hannasch reported on the status of the streamlining project for process improvements. She noted that Phase I has been completed with the implementation of a new server, and that IT is working to build a new system for online applications, online upload of documents, and real time application status updates. The plan is to go live with the new system by mid-December 2017.

Division staff departed from the teleconference.

**Agenda Item 9 Update on Litigation (continued)**

Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh remained for this agenda item.

**Upon a motion duly made by Dr. Humphreys, 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 the Planned Parenthood litigation, subject to attorney-client privilege; with Board staff and attorneys remaining during the session.**

The Board entered executive session at 11:06 a.m. The Board went back on the record at 11:08 a.m.

**Agenda Item 8 Statute Regulation Update (continued)**

Approved Regulation Project – Abortion

Assistant Attorneys General Megyn Greider and Margaret Paton-Walsh remained for this agenda item.

The Board reviewed the proposed language in 12 AAC 40.120(b), which includes replacing the current language with the following: “From and after the point in time when a fetus becomes viable, as determined by such medical examinations and tests which in the physician’s professional judgment are necessary, an abortion may only be performed at a hospital with a Neonatal Intensive Care Unit (NICU).”

They discussed the term “viable” and the NICU requirement. The following substitution was suggested, but not widely supported by Board members: “In the event of a failed abortion that results in a live birth, there must be the ability to transport to a Neonatal Intensive Care Unit (NICU).” It was noted that, if approved, this change would be considered substantive and would require a new public notice period for the regulations changes.

The Board determined to consider the proposed regulations changes individually.

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Clift, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.060 Termination of Pregnancy, which is proposed to read: “Termination of pregnancy must be requested by the pregnant woman.”**

**Roll Call Vote:**

- Mrs. Carlson-No
- Dr. Clift-Yea
- Dr. Humphreys-Yea
- Dr. Liu-Yea
- Mr. Mertz-Yea
- Dr. Neyhart-Yea
- Mr. Olson-Yea
- Dr. Roderer-Yea

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Clift, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.070 Informed Consent, which is proposed to read: “A written informed consent that complies with AS 18.16.060 shall be obtained from the patient. Such written informed consent shall be on the patient's chart. The patient shall be advised of the medical implications and the possible emotional and physical sequelae of the procedure.”**

**Roll Call Vote:**

- Dr. Humphreys-Yea
- Dr. Liu-Yea
- Mr. Mertz-Yea
- Dr. Neyhart-Yea
- Mr. Olson-Yea
- Mrs. Carlson-No
- Dr. Clift-Yea
- Dr. Roderer-Yea

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Humphreys, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.080 Medical Procedures, as revised to read: “The patient shall be examined by a physician licensed in Alaska, and a written record of the patient's physical and emotional health shall be prepared before performing an abortion.”**

**Roll Call Vote:**

Dr. Liu-Yea  
Mr. Mertz-Yea  
Dr. Neyhart-Yea  
Mr. Olson-Yea  
Mrs. Carlson-Yea  
Dr. Clift-Yea  
Dr. Humphreys-Yea  
Dr. Roderer-Yea

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Clift, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.100 Consultation Requirements, which is proposed to be repealed.**

**Roll Call Vote:**

Mr. Mertz-Yea  
Dr. Neyhart-Yea  
Mr. Olson-Yea  
Mrs. Carlson-No  
Dr. Clift-Yea  
Dr. Humphreys-Yea  
Dr. Liu-Yea  
Dr. Roderer-Yea

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Clift, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.110 Abortion Procedures, as revised to read: “The procedures described in the *Clinical Management Guidelines for Obstetrician-Gynecologists: Second-Trimester Abortion Practice Bulletin Number 135*, (dated June 2013, reaffirmed 2015) of the American College of Obstetricians and Gynecologists is adopted by reference as the standard of practice when providing an abortion after the first trimester.” The language to be deleted: “During the second or third trimester of a pregnancy, acceptable procedures include dilation and curettage, suction aspiration of the uterus, injection of pharmacological agents, hysterectomy and**

**hysterotomy. The exact procedure to be used will depend upon the patient's total health, age, associated disease and pathology, and anomalies such as skeletal defects and other medical indications."**

**Roll Call Vote:**

Dr. Neyhart-Yea  
Mr. Olson-Yea  
Mrs. Carlson-No  
Dr. Clift-Yea  
Dr. Humphreys-No  
Dr. Liu-No  
Mr. Mertz-Yea  
Dr. Roderer-Yea

**Upon a motion duly made by Dr. Humphreys, seconded by Mr. Mertz, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.120(b) Standards for Hospitals and Facilities, which is proposed to read: "From and after the point in time when a fetus becomes viable, as determined by such medical examinations and tests which in the physician's professional judgment are necessary, an abortion may only be performed at a hospital with a Neonatal Intensive Care Unit (NICU)."**

**Roll Call Vote:**

Mr. Olson-No  
Mrs. Carlson-Yea  
Dr. Clift-No  
Dr. Humphreys-Yea  
Dr. Liu-Yea  
Mr. Mertz-Yea  
Dr. Neyhart-No  
Dr. Roderer-Yea

**Upon a motion duly made by Dr. Neyhart, seconded by Dr. Humphreys, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.130 Records, which is proposed to read: "In accord with 12 AAC 40.940, during the second or third trimester of a pregnancy, the attending physician shall record a medical history, findings of the physical examination, operative report of the abortion procedure and pathology report as part of the clinical record to be maintained by the hospital or facility. The physician and hospital or facility shall treat the patient's identity and medical record as confidential information."**

**Roll Call Vote:**

Mrs. Carlson-Yea  
Dr. Clift-Yea

Dr. Humphreys-Yea  
Dr. Liu-Yea  
Mr. Mertz-Yea  
Dr. Neyhart-Yea  
Mr. Olson-Yea  
Dr. Roderer-Yea

**Upon a motion duly made by Dr. Clift, seconded by Dr. Neyhart, and approved by roll call vote, the Board adopted the regulations change to 12 AAC 40.140 Limitations, which is proposed to read: “A fetus which has not developed beyond 150 days after the first day of the last menstrual period may be considered non-viable. In the performance of an abortion after that date, the physician shall be guided by a reasonable judgment as to whether the fetus is viable in fact.”**

**Roll Call Vote:**

Dr. Clift-Yea  
Dr. Humphreys-No  
Dr. Liu-Yea  
Mr. Mertz-Yea  
Dr. Neyhart-Yea  
Mr. Olson-Yea  
Mrs. Carlson-No  
Dr. Roderer-Yea

The adoption order was signed by the Chair.

**Recess for lunch**

The Board recessed for lunch at 11:44 a.m.  
The Board went back on the record at 12:15 p.m.

Board members present:

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

Doug Mertz, Public Member  
Joy M. Neyhart, DO  
Timothy Olson, PA-C  
Grant T. Roderer, MD

Board staff present: Debora Stovern, Executive Administrator

**Agenda Item 12 License Application Review**

Information about the license application process and Board approval process was included in board packets for further review.

Board members reviewed license application files. They declined to consider the application of Gregory Charles Khoury, MD, pending further information.

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

<i>Kurt W. Andreason</i>	<i>Martin Peter Kaszubowski</i>
<i>John Leo Andreshak</i>	<i>Thomas Jackson Kleeman</i>
<i>Aleksey Aleksandrovich Androssov</i>	<i>Cristiane Kaufmann</i>
<i>Andrew Russell Barnett</i>	<i>Jacob Patrick Kelly</i>
<i>Jamil Jawold Bashir</i>	<i>Stefani Ann Lafrenierre</i>
<i>Minal Jaysing Bhanushali</i>	<i>Alan Robert Lemerande</i>
<i>Matthew Blacke</i>	<i>Lisa Ann Lepine</i>
<i>Ray Michael Bogitch</i>	<i>James Adam Levine</i>
<i>Mark Alan Boykin</i>	<i>Dwight Howard Lysne</i>
<i>Clare Antoinette Braun-Hashemi</i>	<i>Anusiyanthan Isaak Mariampillai</i>
<i>Roger Malcom Brecheen</i>	<i>James Richard Marrone</i>
<i>Matthew Adam Bzdega</i>	<i>Lindsay Ann Morgan</i>
<i>Edward Robert Campbell</i>	<i>Khanh Phuong Nguyen</i>
<i>Thomas Johnstone Campen</i>	<i>Gail Elaine Norton</i>
<i>Ralph Michael Costanzo</i>	<i>David Richard Finney Otten</i>
<i>Lisa Rae Davidson</i>	<i>Nyree Padilla</i>
<i>Eric Thomas Davis</i>	<i>Gregory Michael Paul</i>
<i>Alexander Divin</i>	<i>David Paul Paulson</i>
<i>Mark Nicholas Donovan</i>	<i>Har Pratar Rai</i>
<i>Jonathan James Dykstra</i>	<i>Robert John Raish</i>
<i>Susan Davis Emmet</i>	<i>Carlos R Ramirez-Ramirez</i>
<i>Anthony Latham Filly</i>	<i>Andrew Leonard Ray</i>
<i>Molly Marie Fuentes</i>	<i>Stephanie Anne Reddick</i>
<i>Donald Lee Garbett</i>	<i>Norberto Avelino Rodriguez</i>
<i>Ryan Gassin</i>	<i>Norman Carl Rokosz</i>
<i>David Kurt Gibson</i>	<i>Steven Lawrence Rosinski</i>
<i>Suzanne E. Gomez-Goldman</i>	<i>David Bennett Ross</i>
<i>Scott Wyn Hacking</i>	<i>Jeff Lee Ryan</i>
<i>Bryan Daniel Haughom</i>	<i>Azra Khan Salahuddin</i>
<i>Robin Ann Holmes</i>	<i>Elizabeth Virginia Sanseau</i>
<i>Sarah Ann Thiessen Holsopple</i>	<i>Michael D Scahill</i>
<i>Christopher Keith Johansen</i>	<i>James Jay Schellenger</i>
<i>Janice Gloria Johnston</i>	<i>Timothy Stuart Schmidt</i>
<i>Peter A Karth</i>	<i>Stacey Ann Schmidt</i>

*Zvika Jacob Schreiber  
Alan K Sears  
Katherine Alice Senter  
Rakesh Rasikal Shah  
Lisa Jo Shives  
Shannon Murphy Simon  
Benjamin George Slane  
Nathaniel Lee Smith  
Aris Michael Sophocles  
Gregory Martin Sprowl  
Jason William Tarpley  
Alfonso Richardo Urdaneta-  
Moncadi  
Michael Ian Vengrow*

*Kathryn Rankin Wagner  
Denise Desiree Wallis  
Lewis Charles Wasserman  
Linda Arlene Wasserman  
Najah Simone Waters  
J Denise Wells  
Thomas Herbert Wendel  
Jeffrey Jarvis Whittall  
Frederick Wayne Willison  
Dana Cheryl Wolinsky  
Jason Robert Young  
Tony Hue-Dan Yuan  
Arsen Mikael Zacharian*

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

*Nadine Aldahhan  
Robert Junson Balch III  
Avram Aaron Bram-Mostyn  
Catherine Ann Brankin  
Toby Janae Currin  
Kimberly Rae Fisher  
Edward Lovett Kramer  
Ai-Ling Lin  
Dennis Joseph Linderman*

*Liam Lunstrum  
Alexander Lawrence Reynolds  
Aubree Ann Ruzkowski  
Mary Beth Scott  
Nathan J. Thompson  
Colleen Walker-Vamos  
Jeremy Scott Weiss  
Dana M Winegarner  
Bart D. Worthington*

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

*Dustin Randall Hubbard*

**Upon a motion duly made by Mr. Mertz, seconded by Mr. Olson, and approved unanimously, the Board approved the following physician assistants for licensure in Alaska, pending completion of their application files:**

*Adam Elbert Bonner  
Benjamin David Eachon  
Emily Ann Felkner  
Ju-Lin Tham Fitzgibbon  
Megan Kathleen Hallock  
Megan Lin Heinecke  
William Joseph Helmick  
Megan Lynn Hermanson  
Melissa L Hoppe*

*Pamela Michelle Kove  
Nanette Marie Laufik  
Mark Alan Nelson  
Susan Anne Reed  
Sarah Catherine Spelsberg  
Brenton Allen Stockwell  
Kiana Uylukcu  
Lara Christina VanHoozer*

**Upon a motion duly made by Mr. Mertz, 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:**

*Margaret Allyson Allen  
Randall Mason Arnold  
Philip John Boyle  
Victoria Elizabeth Buzzard  
Sarah Lynn Carver  
Frank Alan Divelbiss  
Erin Lynn George  
Michael Seraphim Haley  
Tyler Steven Headley  
Christopher Ryan Holland  
Kinsea Grace Jones  
Kathrina Anne Knowlton*

*Matthew Stanley Krisiak  
Tyler James Lauger  
Christopher Lee Ling  
Benjamin James Ransom  
Brian Reisenbara  
Bonnie Diane Snyder  
Andrew Christian Stover  
Jason Arthur Tauriainen  
Andrew Robert Tighe  
Melanie Ann Wicken  
Christopher Wideman*

### **Agenda Item 8 Statute/Regulation Updates (continued)**

#### Legislative Information

- The Board reviewed Legislative guidance information prepared by Division staff, regarding tracking and testifying on bills.

#### Pending Legislation

- SB 108 Medical Licensing – the Board reviewed the proposed legislation related to streamlining of medical licensing, including board discretion to delegate the executive secretary to approve permanent licenses, and to delegate the executive secretary or other staff to approve temporary permits.

It was noted that the Board initially opposed the proposal because it 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. Upon reconsideration, the board decided to support the proposed changes to the approval process, per the statute change language proposed by the Office of the Attorney General, 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.

It was further noted that the bill does include some additional language to clarify the board's delegation of the approval authority and to specify that the Board adopt regulations regarding the approval delegation.

- SB 32 Prescriptions for Biological Products – the Board reviewed the proposed legislation, which would allow pharmacists to dispense interchangeable biological products as an equivalent to a written prescription, and to report the substitution to the prescribing practitioner within 3 days of dispensing.

The Board had reviewed the proposed legislations at their last meeting, as well as an FDA handout regarding approved biosimilar medications, and had determined to take a neutral position on the bill, so long as the reporting requirement remains, and recommended that the reporting occur at the time of dispensing instead of three days after dispensing.

- SB 19 and HB 43 Experimental Drugs for the Terminally Ill – the Board reviewed the proposed legislation which would provide immunity for, and prohibit disciplinary action of, physicians for prescribing, dispensing, or administering an experimental drug to terminally ill patients that have considered all other treatment options approved by the FDA and is ineligible or unable to participate in a current clinical trial.

The Board had reviewed the proposed legislation at their last meeting, and noted that the two current bills are nearly identical, except that HB 43 includes provisions for the both the use or non-use of these drugs. The Board had determined to take a neutral position on SB 19 because it does not include the “nonuse” clause; the Board supports HB 43 as written.

- SB 36 Optometry Scope of Practice – the Board reviewed the proposed legislation which would expand the scope of practice for optometrist to perform eye surgery and to prescribe controlled substances.

The Board had reviewed the proposed legislation at their last meeting, and had determined to oppose the bill in the interest of public safety, noting that the optometry scope of practice should not include surgery, injections, or expanded prescriptive authority.

- SB 79 and HB 159 Opioids, Prescriptions, Database, Licenses – the Board reviewed the proposed legislation which would allow patients to execute a Voluntary Nonopioid Directive, require healthcare licensing boards to require education in pain management and opioid use and addiction, and limit opioid prescriptions to a seven-day supply, as well as additional pharmacy and pharmacist requirements.

The Board reviewed the proposed legislation, as well as a FAQ prepared by the Division and the sponsor statements. They also discussed the Board’s participation in the drafting of the January 2017 Multi-Board Report to the Legislature, which included recommendations based on CDC and Washington State guidelines, and are relevant to these legislative proposals. The Board expressed their full support for the Governor and Legislature in curbing the opioid epidemic. However, they noted the following:

- Concern that the proposed language limiting prescription to seven days is vague and does not define a maximum dosage.
- Whether it is appropriate to require the Pharmacy Board to define standards for over-prescribing. The Board noted that they are mandated with setting professional standards for physicians, and they do have both regulations and Board-issued guidelines regarding the prescribing of controlled substances.

- The education requirements may not exist as specified and may be difficult to enforce.

The Board determined their position to be supportive of the intent of SB 79 and HB 159 in dealing with the opioid epidemic, but are concerned with the lack of daily dosage limitation, Pharmacy Board defining standards, and vague education mandate; the Board plans to work at their August meeting on some suggested language that may be more effective.

**Upon a motion duly made by Dr. Clift, seconded by Dr. Liu, and approved unanimously, the Board approved of their position statement as read onto the record.**

- The Board determined to review at the next meeting the following additional legislative items that were included in the Board packet for further review:
  - SB 91 Extend Disaster Emergency/Opioid Epidemic – which extends the State Chief Medical Officer’s authority to distribute opioid antidote drugs; the bill was signed into law by the Governor on March 21, 2017.
  - HB 191 Maintenance of Certification/Doctors – which would prohibit the Medical Board from requiring Maintenance of Certification as a condition for licensure.
  - HB 54 Voluntary Termination of Life – which would implement “death with dignity” provisions.
  - HB 89 Licensing Radiological Technologists – which would implement a new licensing program for radiological technologists.
  - HB 90 Licensing Fees and Investigative Costs – which would assess a surcharge to all professional licensees to cover the legal and enforcement cost of investigations, rather than covering those costs with individual program licensing fees. The Board had previously opposed this bill because it does not appear to promote fiscal responsibility and accountability by individual Boards and programs.

### **Agenda Item 13 Federation of State Medical Boards (FSMB) updates**

The annual meeting of the Federation of State Medical Boards (FSMB) was held April 20-22, 2017 in Fort Worth, Texas. Dr. Liu and Ms. Stovern attended, and will provide a report to the Board at the next meeting. Ms. Stovern also reported that the FSMB Chair Dr. Snyder has volunteered to visit the Board at the August meeting.

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

- 1) Annual Meeting information, including a report from the nominating committee
- 2) News from Interstate Medical Licensure Compact
- 3) Advocacy alerts and news
- 4) Immigration executive order
- 5) DEA registration renewal process
- 6) Kickback notice
- 7) Tri-regulator Symposium
- 8) USMLE exam scoring
- 9) Board of Directors meeting highlights
- 10) E-news (February – April editions)

## **Agenda Item 14      Correspondence**

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

- 1) Alaska Board of Pharmacy information PDMP
- 2) Accreditation Council for Continuing Medical Education (ACCME) reports, news
- 3) National Board of Osteopathic Examiners (NBOME) updates, newsletter
- 4) Federation of Podiatric Medical Boards (FPMB) update on FTC antitrust case
- 5) International Association of Medical Regulatory Authorities (IAMRA) newsletter
  
- 6) American Board of Cosmetic Surgery (ABCS) information
- 7) Journal of Opioid Management news, research, and International Conference on Opioids
- 8) American Academy of Addiction Psychiatry annual meeting
- 9) Alaska Department of Health and Social Services information, press releases
- 10) State of Reform news
- 11) Center for Telehealth (CTel) news briefs
- 12) American Telemedicine Association (ATA) news briefs

## **Agenda Item 16      Administrative Businesses**

### **Financial Report**

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

- Current Report – 3rd quarter of Fiscal Year 2017
- Year-end Report for Fiscal Year 2016
- Division Annual Fiscal Report to the Legislature for Fiscal Year 2016

The Board noted that there was not enough time to review the Division's Medical Fee analysis, and will plan to take it up at the next meeting.

### **Executive Administrator's Report**

The Executive Administrator's Report was included in the Board packet for review, including updates on the following:

Outreach efforts – Ms. Stovern responded to inquiries regarding telemedicine, PDMP, implementation of SB74, renewal applications and CME audit, application timeframe and requests for expedited processing, and AIM inquiries/polls by other state boards.

Participation activities of national organizations – Ms. Stovern continued work with FSMB to assess and evaluate the Uniform Application (UA), attended FSMB webinars (topics included physician burnout, patient safety), followed activities of the Interstate Medical Compact Commission, attended American Telemedicine Association (ATA) videocasts (topics included status of proposed telemedicine legislation, state policy developments, healthcare reform, and the impact of telemedicine efforts), and attended CTel webinar regarding telehealth and e-health issues.

Tracking of Board actions – a report of the Board's recent actions (including confirmation that the actions were properly reported) was provided for Board review.

Tracking of licensing process – statistics and a detailed spreadsheet covering processing of recent applications was provided for Board review.

Status of CME Audit – Ms. Stovern has been working on CME audits for the recent renewal, reviewing submittals for approval and following up on noncompliant audits.

Status of regulations projects – the Board has approved regulations for the implementation of SB74, expedited temporary permits and FCVS options, and has approved changes to the abortion regulations; the Board will review public comments and consider adopting the regulations at this meeting. Ms. Stovern will continue to request assistance from the Alaska State Medical Association and interested legislators for the Board’s request regarding statutory authority for delegation of routine duties.

Board administrative tasks – Ms. Stovern continues to monitor the status of legislation, attend committee hearings, provide information to management regarding the impact on Medical Board programs, board position, etc. She continues to update the Board website, as needed (including revised forms, regulations FAQ, opioid disaster declaration, PDMP info, etc.); she continues to revise and update the Board policies and procedures as changes are made; she updates and distributes the orientation manual to new Board members; she regularly works with attorneys at the Department of Law on litigation, regulations projects, and noncompliant CME audits; and she regularly attends Division meetings regarding Medical Board matters, the process improvement project, legislative matters, CME audit needs, travel and hiring changes, policies, mission, and finances.

#### Review Minutes

The Board reviewed the minutes of their last meetings.

**Upon a motion duly made by Dr. Clift, seconded by Dr. Liu, and approved unanimously, the Board approved the minutes of the February 2-3, 2017 meeting and the March 3, 2017 teleconference meeting.**

#### Meeting Scheduling

The Board confirmed the schedule for upcoming meetings:

- August 3-4, 2017 in Anchorage
- November 2-3, 2017 in Anchorage

The Board noted that they will plan to travel to these two meetings and will work with the Division to approve travel for future meetings when planning for them.

#### New Business

Mrs. Carlson reported that the issue of female genital mutilation had been in the news recently. The Board noted that it is illegal and not a widespread practice in the United States. Such practice would be considered a criminal offence and a violation of professional standards.

**Adjournment**

There being no further business, the meeting was adjourned at 3:31 p.m.

Respectfully submitted:

Approved:

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

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

August 4, 2017  
\_\_\_\_\_  
Date

August 4, 2017  
\_\_\_\_\_  
Date