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

6 **STATE MEDICAL BOARD**

7  
8 MINUTES OF MEETING  
9 Thursday, April 23, 2020

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12  
13 By authority of AS 08.01.070(2) and in compliance with the provisions of AS 44.62, a special COVID-19  
14 video-conference meeting of the Alaska State Medical Board was held on Thursday, April 23, 2020.  
15

16  
17 **Thursday, April 23, 2020**  
18

19 **1. Call to Order/ Roll Call**

20 The meeting was called to order by Chair Wein at 4:01 p.m.  
21

22 **Roll Call**

23 Board members present, constituting a quorum:

24 Sarah Bigelow Hood, PA  
25 David Boswell, Public Member  
26 Larry Daugherty, MD  
27 Christopher Gay, MD  
28 Lydia Mielke, Public Member  
29 Steve Parker, MD  
30 Richard Wein, MD (Chair)

31  
32 Board staff:

33 Alysia Jones, Executive Administrator  
34 Jason Kaeser, Licensing Examiner  
35 Olena Ziuba, Licensing Examiner  
36

37 The following visitors attended the meeting:

38 Heather Carpenter, Health Policy Advisor, DHSS  
39 Kathryn (Katie) Chapman, Health Program Manager, DHSS  
40 Tessa Walker Linderman, Nurse Consultant, DHSS  
41

42 **2. Review Agenda**

43 The Board reviewed the agenda.  
44

45 **On a Motion duly made by Mr. Boswell, seconded by Ms. Mielke and approved**  
46 **unanimously, the Board approved the agenda as presented.**

1  
2 **3. Review/Approve Meeting Minutes**

3 The board reviewed the meeting minutes from the April 16, 2020 meeting.  
4

5 **On a Motion duly made by Ms. Mielke, seconded by Dr. Parker, and approved**  
6 **unanimously, the Board approved the minutes of the April 16<sup>th</sup> meeting as presented.**  
7

8 **4. Public Comment**

9 Dr. Shawn Vainio introduced himself as a family doctor and delegate to the Congress of Delegates for  
10 the Alaska Academy of Family Physicians. Dr. Vainio stated that he had been made aware of the board's  
11 actions during the April 9<sup>th</sup> meeting regarding emergency licensing of physician assistants and the  
12 decision to remove the clause requiring a collaborative plan.  
13

14 Dr. Vainio stated that he provided a letter prior to that meeting and wondered if the letter had been  
15 reviewed by the board prior to the vote<sup>1</sup>.  
16

17 Dr. Vainio expressed his concerns with the outcome of the vote as follows:

- 18 1. A member of the Alaska State Medical Board is a physician assistant and she had stated prior to  
19 the vote that she had an underlying conflict of interest in wanting to establish physician  
20 assistant practice in the state outside of emergency orders to practice without a collaborative  
21 agreement. Dr. Vainio stated that he hoped the individual abstained from the vote, but noted  
22 that he did not have access to that information.  
23
- 24 2. Physician assistant John Hall<sup>2</sup> testified previously and recommended that the board not go  
25 through with the vote because it would not be in the best interest of public safety or physician  
26 assistant practice in the state.  
27
- 28 3. I spoke with the PAs I currently work with in the State of Alaska, neither of whom agree with  
29 what was voted on, even in the emergency state. Dr. Vainio referenced his letter to the board  
30 which offered multiple approaches to the COVID-19 response that would not require an  
31 increase in the medical workforce in the state, including optimizing telehealth utilization and  
32 decreasing patient contact for use in a non-COVID response.  
33

34 Dr. Vainio asked the ASMB if they had considered the fact that there are multiple providers who are  
35 already licensed in the state of Alaska who are able to see patients, but are currently furloughed or  
36 not working and indicated that contact with this available workforce had not been made.

37 Dr. Vainio reiterated his specific concern that this decision was entered into on behalf of the PA on  
38 the board that had a specific interest in furthering his/her own interests.

39 The Chair responded, confirming a discussion was held at the board level and a decision was made by  
40 the majority of the board. The Chair noted that while he was not present for the discussion, his review  
41 of the minutes and follow up with staff revealed that it was a rigorous discussion and this is what the

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<sup>1</sup> Dr. Vainio's letter was included in the April 16, 2020 meeting materials and reviewed by the board. The adoption of the emergency regulations took place at the April 9, 2020 meeting.

<sup>2</sup> Ed Hall was the physician assistant who testified at the April 16, 2020 ASMB Meeting was Ed Hall.

1 board came up with. The Chair explained that the intent was only for the emergency timeframe and  
2 something that the majority of the board felt was necessary. The Chair further explained that for the  
3 item to be reconsidered it must be put forward by a member on the prevailing side and it must be at a  
4 super majority vote. The Chair reiterated that it was the will of the board and that the intent was  
5 honorable.

6  
7 Chair Wein noted that the discussion of collaborative plans is important and expressed his interest in  
8 revisiting the topic with the board in a more formal way, apart from the current emergency in the  
9 future.

10  
11 The Chair thanked Dr. Vainio for his testimony and commented that he had not considered the point  
12 about furloughed providers. The Chair reiterated that the decision to not include the collaborative plan  
13 requirement for the emergency courtesy license was a duly discussed and voted on issue, that is  
14 temporary. It was noted that the comments and the issue has raised questions and the Chair hoped to  
15 see the board discuss collaborative agreement regulations on a broader, non-emergency level in the  
16 future.

17  
18 Ms. Bigelow Hood clarified to Dr. Vainio's second point, the person who provided testimony was Ed Hall,  
19 a physician assistant who previously served eight years on the Alaska State Medical Board, not John Hall.

20  
21 Ms. Bigelow Hood also stated that there was no underlying conflict or personal issue brought forth  
22 recognizing that the language in Dr. Parker's correspondence may have been misinterpreted. She  
23 encouraged Dr. Vainio to listen to the actual discussion of the previous meetings. Ms. Bigelow Hood  
24 explained she was merely informing the board of a national movement in the lower 48 towards optimal  
25 team practice (OTP). Again, Ms. Bigelow Hood stated that there was no underlying intention to try and  
26 include that with the recent emergency regulations project related to COVID-19.

27  
28 Dr. Gay asked Dr. Vainio if he currently worked with PAs. Dr. Vainio responded affirmatively. Dr. Gay asked  
29 how frequently he reviews their collaborative plans. Dr. Vainio responded that he reviews charts daily  
30 with a new PA. Dr. Gay explained there may be wide variation in frequency and one of the reasons the  
31 decision to waive the collaborative plans was supported was in part the fact that plans may not be  
32 reviewed within the short timeframe in which the emergency courtesy license is valid. Dr. Gay reiterated  
33 the overall intent of the emergency courtesy license was to have the flexibility *if* outside health care  
34 providers were needed. Dr. Gay expressed his desire to utilize the work force that is already in Alaska and  
35 available to assist.

36  
37 Dr. Vainio thanked the board for the opportunity to speak and stated his appreciation to Ms. Bigelow  
38 Hood's clarification. He also reiterated his request for the board to consider local resources before  
39 reaching out of state. Dr. Vainio commented that he is here to serve the people in his community.

40  
41 The Chair again thanked Dr. Vainio for his comments.

#### 42 43 **5. Correspondence Received**

44 The board reviewed six email correspondence that the executive administrator had received on behalf  
45 of the board regarding the board's recent decision to waive the collaborative agreement requirement  
46 for PAs.

47  
48 Dr. Parker commented that his main concern is that PAs are not trained to work without collaboration

1 and putting them in an emergency situation could be a safety issue.

2

3 **6. White Paper on Telemedicine for Opioid Use Disorder**

4 The Chair invited Heather Carpenter, Kathryn (Katie) Chapman, and Tessa Walker Linderman to speak to  
5 the board.

6

7 Ms. Carpenter is the Health Care Policy Advisor to the Commissioner Crum of the Department of Health  
8 and Social Services. Tessa Walker Linderman is a Nurse Consultant for the Office of Substance Misuse  
9 and Addiction Prevention. Ms. Chapman is a Health Program Manager with the Division of Behavioral  
10 Health – Quality Assurance.

11

12 The presenters explained medical providers are utilizing telehealth due to COVID-19, however current  
13 Alaska law does not allow prescribing of controlled substances to be initiated via telehealth. Alaskan  
14 medical providers are unable to initiate medication assisted treatment (MAT) for patients seeking  
15 treatment for opioid dependency.

16

17 Additionally, the Drug Enforcement Administration recently relaxed rules regarding the requirement of  
18 an in-person visit prior to prescribing a controlled substance.

19

20 Prepared by the DHSS Division of Public Health and Division of Behavioral Health, the white paper  
21 proposes waiving the requirement of an in-person visit for initiating buprenorphine to provide access to  
22 treatment for Alaskan’s seeking treatment for opioid dependency.

23

24 Medical providers are utilizing telehealth due to COVID-19, however current Alaska law does not allow  
25 prescribing of controlled substances to be initiated via telehealth. Alaskan medical providers are unable  
26 to initiate medication assisted treatment (MAT) for patients seeking treatment for opioid dependency.  
27 Additionally, the Drug Enforcement Administration recently relaxed rules regarding the requirement of  
28 an in-person visit prior to prescribing a controlled substance.

29

30 The Chair expressed his support of the request in the short term, but noted concerns for long term and  
31 loss of human touch.

32

33 Dr. Gay identified two questions, (1) whether a provider should be able to prescribe a controlled  
34 substance for pain reasons without a physical examination and (2) specifically for medical assisted  
35 treatment for opioid dependency and individuals that wish to seek treatment at this time. Dr. Gay noted  
36 the answer to the first question was probably no, but suggested that there may be a place for the  
37 second situation and was open to discussing a potential waiver of an in-patient visit for initiating  
38 buprenorphine to address opioid dependency.

39

40 Ms. Carpenter confirmed the request from the DHSS is specifically for initiating MAT, acknowledging  
41 past efforts to fight the opioid crisis and address over prescribing. Ms. Chapman stated the intent was to  
42 open up access to care during this pandemic.

43

44 Mr. Boswell ask for information regarding the number of requests. Ms. Walker Linderman responded  
45 that she personally has received three inquiries. It was also noted that DHSS Commissioner’s Office and  
46 Dr. Zink have also been fielding concerns. The board also asked whether the requests originated from  
47 rural or urban areas. Ms. Walker Linderman and Ms. Chapman responded that the inquiries were more

1 from urban areas. Ms. Chapman provided examples of how the waiver would be helpful within an urban  
2 area during COVID-19, including assisting substance use disorder treatment programs.

3  
4 Dr. Parker asked if there was any data showing that the absence of an in-person visit for initiating MAT  
5 was as safe as current in-person requirements. Ms. Chapman and Ms. Walker Linderman responded that  
6 the DEA's statement was released less than a month ago and data from other jurisdictions had not been  
7 published yet.

8  
9 Dr. Daugherty indicated he could be supportive of the narrow request for a waiver of an in-person visit  
10 for initiating MAT and asked for information about what other states are doing. Ms. Chapman explained  
11 through her role as the State Opioid Treatment Authority she is connected to a network of other SOTAs,  
12 this access has opened and offered to gather information from other states.

13  
14 The Chair requested a potential sample of what the change would look like.

15  
16 Ms. Jones and Ms. Carpenter agreed to follow up after the meeting with representatives from the  
17 Department of Law to discuss the most appropriate mechanism (suspension of statute or emergency  
18 regulation) and potential draft of the language for the board to consider at next week's meeting.

19  
20 Ms. Carpenter thanked the board for their consideration. The Chair thanked Ms. Carpenter, Ms. Walker  
21 Linderman and Ms. Chapman for their work on the white paper.

22  
23 Mr. Boswell expressed his concern regarding follow up requirements and suggested that the board care  
24 for that in considering the waiver.

25  
26 Dr. Parker asked for background on the requirement for an initial in-person visit and cautioned the  
27 board against changing things quickly with unintended consequences. Ms. Carpenter stated that she  
28 was the legislative staff member that carried SB 74 forward and explained that this was put in place at  
29 the time all health care providers were mandated to register with the PDMP and the intent was to  
30 ensure a prescriber had a relationship with a patient before moving to telemedicine.

### 31 32 **7. Health Mandate 15 FAQs**

33 The board reviewed and discussed the FAQs. The Chair commented that a placeholder had intentionally  
34 been included and the Board of Dental Examiners was in the process of preparing a list of procedures  
35 that dentists will do as things open up.

### 36 37 **8. PDMP Letter of Support**

38 The Board of Pharmacy (BOP) is seeking funding for the PDMP through a Bureau of Justice Assistance  
39 grant and has requested a letter of support from the Alaska State Medical Board. The board reviewed a  
40 template letter provided for their consideration. The letter explained the funding would be used to  
41 advance existing efforts and provide resources to:

- 42  
43
- 44 • Leverage support from the statewide health information exchange organization to
    - 45 ○ expand the network of clinic integrations throughout Alaska, providing
    - 46 comprehensive data to high-risk and rural communities with vulnerable populations
    - 47 within its existing Gateway solution
    - improve database access efficiency for providers within their clinical workflow

- 1 • Provide adequate resources to assist state and federal agencies with investigations and  
2 enhance the method of receiving discovery data to enhance public safety and allow  
3 community wellbeing to thrive
- 4 • Enhance the PDMP by integrating an advanced analytics feature and provider outlier  
5 module, which will strengthen the State’s ability to identify problematic prescribing and  
6 dispensing behaviors while supporting judicious treatment practices
- 7 • Continue funding for the cost of RxCheck, which is currently configured in Alaska.
- 8 • Assist with the development of provider training materials to increase utilization of the  
9 PDMP

10  
11 The Chair reminded the board that there were findings in the sunset audit review regarding PDMP and  
12 noted the grant may assist in addressing some of those issues. The BOP Executive Administrator Laura  
13 Carrillo polled the board chairs during their weekly meeting requesting a letter of support from  
14 applicable boards.

15  
16 The board reviewed the letter and decided to delay the vote in order to submit questions to the BOP.  
17 Members of the board also requested additional details on what the funding would be used for.

18  
19 Given the time sensitivity of the request, the board agreed to consider voting on the letter in OnBoard  
20 once answers to their questions were provided. Ms. Jones agreed to confirm the deadline with Ms.  
21 Carrillo and follow up accordingly.

## 22 23 **9. Follow up on Previously Asked Questions**

24 Ms. Jones reported that the emergency regulations went into effect on April 21, 2020 and she is working  
25 with the Division’s publications team on the emergency courtesy license application forms. Ms. Jones  
26 confirmed staff determined a way to capture the more detailed scope of practice information, beyond  
27 the specialty, per the board’s request.

28  
29 Ms. Jones informed the board that she relayed the board’s request for information on staffing needs to  
30 ASHNHA.

31  
32 Ms. Jones also shared an announcement from the Department of Health and Social Services regarding  
33 registering with Alaska Respond. *AK Respond* is part of the national ESAR-VHP (Emergency System for  
34 Advanced Registration of Volunteer Health Professionals) program – a network of state-based, volunteer  
35 registration systems that manages responders in disasters and public health emergencies.

36  
37 Ms. Bigelow Hood commented that she had signed up for the *AK Respond* registry and said they are  
38 currently looking for volunteers during the period of April 20 – May 31, 2020.

39  
40 Dr. Gay asked whether the emergency courtesy licenses would need to be issued if *AK Respond*  
41 indicated that a sufficient work force was available to cover the needs of facilities. The Chair noted it  
42 was a good point for the board to consider and asked the board to acknowledge the importance of  
43 having a mechanism (e.g. emergency courtesy licenses) in place if additional resources were necessary.

44  
45 There being no further business, the meeting was adjourned at 5:22 p.m.

1 Respectfully submitted:  
2  
3 /s/ \_\_\_\_\_  
4 Alysia D. Jones, Executive Administrator  
5 Alaska State Medical Board  
6  
7 6/14/2020  
8 \_\_\_\_\_  
9 Date

Approved:  
  
/s/ Richard J. Wein, M.D.  
Richard Wein, MD, President  
Alaska State Medical Board  
  
6/14/20  
\_\_\_\_\_  
Date