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

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STATE MEDICAL BOARD

MINUTES OF MEETING
Thursday, June 25, 2020

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By authority of AS 08.01.070(2) and in compliance with the provisions of AS 44.62, a video-conference meeting of the Alaska State Medical Board was held on Thursday, June 25, 2020.

Thursday, June 25, 2020

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1. Call to Order/ Roll Call

The Chair called the meeting to order at 4:05 p.m.

Roll Call

Board members present, constituting a quorum:

David Boswell, Public Member
Christopher Gay, MD
Lydia Mielke, Public Member
Steve Parker, MD
Richard Wein, MD (Chair)

Ms. Bigelow Hood joined the meeting at 4:09 p.m. Dr. Larry Daugherty was not in attendance.

Board staff:

Alysia Jones, Executive Administrator

The following applicants attended portions of the meeting:

Scott Boruchov, MD

The following visitors attended portions of the meeting:

Dr. Scott Boruchov
Dr. Arom Evans
Kari Bernard
Megyn Weigand, Assistant Attorney General, Department of Law
David Newman

2. Review Agenda

The board reviewed the agenda.

**On a Motion duly made by Dr. Gay, seconded by Mr. Boswell, and approved
unanimously by acclamation, the Board approved the agenda as presented.**

Ms. Bigelow Hood joined the meeting.

1
2 **3. Review/Approve June 18, 2020 Meeting Minutes**

3 The board reviewed the meeting minutes from the June 18, 2020 meeting.
4

5 **On a Motion duly made by Ms. Mielke, seconded by Dr. Gay, and approved**
6 **unanimously, the Board accepted the minutes of the June 18th meeting as presented.**
7

8 **4. Board Interviews**

9 The board conducted one full board interview, as requested during the May 21-22, 2020 meeting.
10

11 A. Scott Boruchov

12 Dr. Boruchov was present to discuss his license application with the board, and requested to remain on
13 record.

14 **On a motion duly made by Dr. Gay, seconded by Mr. Boswell, and approved**
15 **unanimously, the board entered into executive session in accordance with the provisions of**
16 **Alaska Statute 44.62.310 (c)(2) and Alaska Constitutional Privacy Provisions for the purpose of**
17 **discussing Dr. Boruchov’s application, with the Board executive to remain during the session,**
18 **and Dr. Boruchov to join at such time the board requests his presence.**
19

20 The board entered executive session at 4:11 p.m. and went back on the record at 4:14 p.m.
21

22 Dr. Boruchov responded to the board’s questions.
23

24 **On motion duly made by Dr. Parker, seconded by Dr. Gay, and approved unanimously,**
25 **the board granted a full, unrestricted physician license to Scott Boruchov, M.D**
26

27 Dr. Boruchov left the meeting.
28

29 **5. Correspondence**

30 The Board reviewed the following correspondence received.
31

32 **A. Letter from Dr. Arom Evans** – Request to formally recognize telemedicine as a modality to provide
33 both “direct and immediate supervision” for physician assistants (PAs) that have less than 2 years clinical
34 service as well as “direct personal contact visits” required for PAs that already have 2 years clinical
35 experience.
36

37 The Chair responded that a broader discussion of collaborative plans and relationships is scheduled for
38 the board’s August meeting.
39

40 **B. Correspondence from Mr. Dirk Tanner** inquiring about implementation of optimal team practice for
41 PAs and consideration of statutory/ regulatory changes by the State Medical Board to allow PAs to open
42 a private practice.
43

44 **C. Correspondence from Bill Mackreth** regarding in-person, continuing medical education (CME)
45 requirements for mobile intensive care paramedics given cancellation of many course offerings due to
46 COVID-19.

47 Ms. Jones responded to Mr. Mackreth that the board has reduced the CME requirement by fifty percent
48 and encouraged the board review the Board’s current CME guidelines and provide additional

1 clarification for all licensees regarding the reduction of CME requirements for the 2019-2020 licensing
2 period.

3 4 **6. Public Comment**

5 The Chair invited Dr. Arom Evans to address the board. Dr. Evans expressed his agreement that there
6 are broader issues regarding collaborative plans that require a more in-depth discussion, and clarified
7 the urgency of his request was related to compliance with current collaborative plans. Dr. Evans
8 requested clarification regarding in-person requirements for periodic performance assessments based
9 upon legal definitions of “direct supervision” and “direct personal contact visits”.

10
11 The Chair asked Dr. Evans to follow up with Ms. Jones with his specific questions.

12
13 There were no additional persons to be heard.

14 15 **7. PDMP Regulations**

16 Assistant Attorney General Megyn Weigand walked the board through the proposed regulations. The
17 board reviewed suggested edits.

18
19 The board discussed methods for improving communication with licensees to ensure understanding of
20 statutory and regulatory requirements. In regards to compliance and violations, Ms. Weigand explained
21 the importance of maintaining case precedence for predictability and reliability of risks, and consistency
22 of consequences. Ms. Weigand also explained that if there is a divergent from the precedence, the
23 reason needs to be clearly and specifically articulated.

24
25 **On a motion duly made by Mr. Boswell, seconded by Dr. Parker, and approved unanimously**
26 **the board approved proposed changes to the regulations 12 AAC 40.450(a) and addition of new**
27 **section 12 AAC 40.976 for public comment.**

28
29 **Mr. Boswell read the following proposed regulation changes into the record:**

30
31 12 AAC 40.450(a) is amended to read:

32 (a) A physician assistant who prescribes, orders, administers, or dispenses controlled substances
33 must

34 (1) have a current Drug Enforcement Administration (DEA) registration number, valid
35 for that handling of that controlled substance on file with the department; **and**

36 **(2) comply with 12 AAC 40.976.**

37
38 12 AAC 40 is amended by adding a new section to read:

39 **12 AAC 40.976. Registration and reporting with the prescription drug monitoring program**
40 **controlled substance prescription database. A physician or physician assistant licensed under this**
41 **chapter who holds a federal Drug Enforcement Administration (DEA) registration number must**

42 **(1) register and comply with the prescription drug monitoring program (PDMP) controlled**
43 **substance prescription database within 30 days of initial licensure or registration with the DEA,**
44 **whichever is later; and**

45 **(2) comply with the requirements of AS 17.30.200 and 12 AAC 52.865.**

46 47 48 **8. Professional Fitness Questions**

1 The board revisited the topic of revising outdated professional fitness questions to be ADA compliant
2 and discussed Ms. Weigand’s comments of the previous board’s proposed changes from the February
3 2020 meeting.

4
5 Ms. Weigand read the following excerpt of the Alaska Public Records Act (AS 40.25.120(a)(3)&(4)):
6

7 **AS 40.25.120. Public Records; Exceptions; Certified Copies.**

8 (a) Every person has a right to inspect a public record in the state, including public records in
9 recorders' offices, except...

10 (3) medical and related public health records;

11 (4) records required to be kept confidential by a federal law or regulation or by state law;
12

13 Ms. Weigand discussed the process for public records requests. The Chair asked what options were
14 available to the board to make responses to professional fitness questions confidential. Ms. Weigand
15 responded that it would require a statutory amendment giving the board the authority to create an
16 exception to the Alaska Public Records Act. Ms. Weigand briefly explained the process for requesting a
17 statutory amendment.
18

19 The board and Ms. Weigand discussed the difference between medical records, which are covered
20 under HIPAA, versus a narrative provided by an applicant in response to professional fitness questions.
21 The board discussed the relevancy of the professional fitness questions and what questions need to be
22 asked. The board also discussed its responsibility to connect applicants and licensees to the Physician
23 Health Committee.
24

25 The Chair and Dr. Gay agreed to review the examples from other states and prepare a draft of updated
26 questions for the full board to consider.
27

28 Ms. Weigand left the meeting.
29

30 **9. Health Mandate 15 Changes** – The Chair explained that the State is considering transitioning away
31 from mandates to guidance and is interested in input from the health care related boards as it relates to
32 Health Mandate 15.
33

34 **10. Follow Up: Previously Asked Questions**

35 **Emergency Courtesy License (ECL) Applications** - To date, **33** emergency courtesy licenses have been
36 issued including: 2 osteopathic physicians, 23 physicians, and 8 physician assistants
37

38 Ms. Jones reported issues with applicants for initial registration submitting ECL applications as a way to
39 expedite their licensure and clarified the intent of the ECL application. Dr. Parker suggested improving
40 the standard application process to address the issue. The board also discussed reviewing specialties to
41 determine necessity of an emergency.
42

43 The Chair expressed his apologies to the board and left the meeting. Secretary Boswell took over
44 chairing the meeting and requested Ms. Jones continue with the report.
45

46 Ms. Jones provided a status update on the annual report and follow up related to the board’s questions
47 regarding the National Registry of EMT provisional license that was initially brought to the board at their
48 May 21-22, meeting.

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Ms. Jones noted that there were three board interviews to be scheduled and indicated that she would follow up via email to get input regarding the board’s upcoming meeting schedule. Mr. Boswell asked about follow up from previous board interviews. Ms. Jones confirmed that all interviews requested during the May 21-22 meeting had been conducted and requests for additional information were awaiting responses.

The following topics remain on the board’s radar:

- Asset Data – Staff are gathering scope of practice data for ECL applications.
- Data collection of staffing needs
- Why AK is the only state not to require licensure for respiratory therapist
- SB 173 Transfer of MICPs to DHSS/EMS

9. Adjourn

There being no further business, the meeting was adjourned at **5:52 p.m.**

Respectfully submitted:

Approved:

/s/ _____
Alysia D. Jones, Executive Administrator
Alaska State Medical Board

/s/ *Richard J. Wein, M.D.*
Richard Wein, MD, President
Alaska State Medical Board

7/28/2020

Date

July 28, 2020

Date