

Annual Report
Fiscal Year 2010

ALASKA STATE MEDICAL BOARD

July 2010



**DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING**

This Annual Performance Report is presented in accordance with Alaska Statute 08.01.070(1) and Alaska Statute 37.07.080(b). Its purpose is to report the accomplishments, activities, and the past and present needs of the licensing program.

**ALASKA STATE MEDICAL BOARD
FY 2010 ANNUAL REPORT**

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**ALASKA STATE MEDICAL BOARD
 FY 2010 ANNUAL REPORT
 IDENTIFICATION OF BOARD**

<u>Board Member</u>	<u>Date Appointed</u>	<u>Term Expires</u>
Jean M. Tsigonis, MD, Chair 1001 Noble Street Fairbanks AK 99701	November 15, 2006	March 1, 2012
John S. Cullen, MD Post Office Box 1829 Valdez AK 99686	March 1, 2008	March 1, 2012
Edward A. Hall, PA-C 13601 Windward Circle Anchorage AK 99516	May 19, 2008	March 1, 2013
Kathleen (Casey) Millar, Public Member 15801 Windsong Drive Anchorage AK 99516	March 1, 2009	March 1, 2013
David A. Miller, MD 3268 Hospital Drive – Suite C Juneau AK 99801	March 1, 2009	March 1, 2012
David J. Powers, MD Post Office Box 324 Dillingham AK 99576	December 2, 2008	March 1, 2012
William W. Resinger, MD Post Office Box 839 Palmer AK 99645	September 21, 2007	March 1, 2014
Michael J. Tauriainen, Public Member 35186 Spur Highway Soldotna AK 99669	May 28, 2003	March 1, 2012

ALASKA STATE MEDICAL BOARD
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IDENTIFICATION OF STAFF

Executive Administrator

Vacant

Jamie Jolliff, Licensing Examiner (A – K)

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ALASKA STATE MEDICAL BOARD
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NARRATIVE STATEMENT

Charged with the responsibility of protecting the public by the careful and judicious licensing of physicians, mobile intensive care paramedics, and physician assistants, the board and its staff perform functions which fall into three broad categories: licensure, disciplinary, and regulatory.

The licensing process is designed to verify identity and evaluate the educational background and professional history for those who wish to practice medicine in Alaska. During the past year, the board executed its duties with the initial licensure of 374 physicians, physician assistants, podiatrists and mobile intensive care paramedics new to Alaska. In addition, the board issued 41 locum tenens permits and 67 resident permits to physicians.

During FY 10, the board maintained its consistently high level of activity in all categories of licensure. The number of inactive licensees (includes physicians and physician assistants) has remain relatively static for the past several years at 187 for this past fiscal year.

We also experienced a level of paramedic and physician assistant applications that was consistent with previous years.

The medical board's complaints and investigations are complicated, sensitive, and very time consuming. The board's investigators are cognizant of the concerns and needs of the public and respond to each complaint with professionalism and dedication as expeditiously as possible while still conducting a thorough and complete investigation.

Over the years, the results of a national survey have ranked Alaska in the top ten states for disciplinary sanctions against physicians, per capita. We believe these statistics reflect the Alaska board's vigorous and objective enforcement of the laws that regulate the practice of medicine in Alaska and the board's commitment to the safety and well being of the citizens of the state.

The board was pleased to work collegially with the Alaska Academy of Physician Assistants with mutual goals to improve access to care for patients in rural parts of the state.

We have addressed issues which involve the newer methods of teaching which incorporate distance/computer education. We had a presentation of telemedicine. In addition we have reviewed many licenses of teleradiologists. We have worked with physician/pharmacist cooperative agreements. We have made suggestions regarding patient access to their records after a physician has closed his practice. We have carried on conversations with members of the naturopathic profession. We have had discussions regarding scope of practice, standard of care and re-entry to practice. Clarification of the term "doctor" was further defined. Clarification of the language in the MOA's (memorandum of agreement, consent agreement) was accomplished.

Issues important to the Federation of State Medical Board such as the Maintenance of Licensure and Fifth Pathway programs have been discussed at the state level as well. We were honored to have Ms.Hedy Chang from the FSMB present at one meeting to brief us on the issues at the federal level. In its efforts to meet the ongoing and changing needs of the public and the license population, the board maintains its membership in the Federation of State Medical Boards and Administrators in Medicine. The Federation provides disciplinary information on physicians from all the boards in the country and monitors developments in the health care regulatory field by the federal government. The Alaska board was honored by having its executive administrator serving on the board of directors of the Federation. This distinction gives the board a greater voice in issues of national importance and this voice in national physician licensing matters makes Alaska's board a key and pivotal influence in the future of physician licensure in this country.

Administrators in Medicine researches and tracks new developments in the regulatory arena on a state-by-state basis for boards and assists board executives in sharing information and data to more effectively respond to the needs of their states. Both organizations are active in providing education and assistance to boards' staff and members. Leslie Gallant, Alaska's executive administrator served as a past president of this national organization and also has served as the program chairman for the FSMB/AIM Certified Medical Board Investigator training program.

The board continues to seek new ways to disseminate information to the public that is useful and informative in helping patients insure their physician encounters are productive and effective. It is a goal of the board to have more information available on the board's website on the Internet. The board also hopes to restore its printed newsletter to better inform its licensees of important news from the board. In the coming year, the board will continue to seek important and meaningful change in the areas of administrative function and support provided to board members, licensees, applicants, and the public, while being mindful of its duties and obligations to execute its responsibilities.

The board employs an executive administrator, two investigators, two licensing examiners, and an administrative clerk. We have been very fortunate to have a professional staff that has attended our meetings and guided our steps. In particular, I would like to thank those that have given us such good legal counsels, including: Gayle Horetski, Karen Hawkins, Dan Branch and Steve Weaver, Attorneys. Without the support of these committed individuals, the board would be far less effective in executing its responsibilities. Daily, these professionals give their energies, their skills, their knowledge, and their hearts to the work of the board. The board wishes to recognize and thank them for their hard work, dedication, and commitment to the physicians, podiatrists, physician assistants, and paramedics of the state, and most especially, for their concern for the people of Alaska. Our main priority in the next few months will be to find a replacement for our executive administrator.

In executing its mission to protect the public, the board met in four face-to-face meetings and two teleconferences to attend to its business.

The board will continue to be accessible to its licensees and the public and to be responsive to the needs and safety of Alaska's citizens.

**ALASKA STATE MEDICAL BOARD
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BUDGET RECOMMENDATIONS FOR FY 2011**

Hold four Board meetings per year at approximately \$7, 750.00 each	\$31,000.00
Travel and per diem for two Board members to attend annual FSMB Meeting**	\$ 3,500.00
TOTAL COSTS	\$34, 500.00

** Attendance at the national FSMB meeting allows the Board to remain aware of issues concerning the practice of medicine nationally and to participate in programs involving the testing (USMLE) of licensees and reciprocity of professional licenses. The cost of this national meeting is a third party reimbursement of \$1,600.00 per attendee.

**ALASKA STATE MEDICAL BOARD
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RECOMMENDATIONS FOR PROPOSED LEGISLATION FOR FY 2011**

The Medical Board has no recommendations for proposed legislation at this time.

ALASKA STATE MEDICAL BOARD
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REGULATION RECOMMENDATIONS

Several regulations are in the process of review by the Department of Law. These regulations have already been public noticed, replies received and assessed by the medical board and sent on to the Department of Law for final review. These regulations involve the following:

1. Licensing requirements for applicants from fifth pathway programs
2. Amendment to the foreign medical graduate regulation 12 AAC 40.036(a) and 038(a)
3. Amendment to 12 AAC 40.370(b)(2) to include “mobile intensive care paramedic”
4. Amendment to 12 AAC 40.490 adding (9) regarding the need for identification of oneself appropriately in a clinical setting, i.e. as a physician assistant or physician
5. 12 AAC 40.944 involving standard of care
6. Amendment to 12 AAC 40.965(a)(1)(B) to include “unless the applicant is not qualified under AS 08.64.240(b)
7. 12 AAC 40.967(26) amended to include “within 30 days from the effective date of such action.”
8. 12 AAC 40.967(29) repealed and readopted to include the need for physician-patient or physician assistant-patient relationship before prescribing, dispensing or furnishing a prescription medication
9. 12 AAC 40.967 adding (30) as another unprofessional conduct listing.

ALASKA STATE MEDICAL BOARD
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GOALS AND OBJECTIVES FOR FY 2011

1. The board will continue to educate licensees regarding the medical board's statutes and regulations.
2. The board will be involved in the hiring and interviewing of a new Executive Administrator, as this position is currently vacant.
3. The board will continue to assess and evaluate the licensing of physicians, physician assistants and mobile intensive care paramedics.
4. The board will continue to evaluate the impact of current regulations and the need for new regulations.
5. The board will continue to be involved nationally with the Federation of State Medical Boards and send two board members to their annual meeting.
6. The board will continue to request that a regular newsletter be disseminated to licensees.

ALASKA STATE MEDICAL BOARD
FY 2010
SUNSET AUDIT RECOMMENDATIONS

The Medical Board did not have a Sunset Performance Audit conducted this year.

FISCAL YEAR 20____ STATISTICAL OVERVIEW

Program: _____ AS 08. _____
12 AAC _____

Name of Individual Completing Report: _____ Date: _____

CATEGORY	NEW – ISSUED DURING FY 20____	TOTAL AS OF 6/30/____	EXAMINATION/ CREDENTIAL
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A. Current Active Licenses, Endorsements, Permits
(student, locum tenens, limited, courtesy licenses)
List type and if issued by examination or credential, as applicable
(Do not list “temporary permits” or “temporary licenses”)

Example: License Type	10	250	Exam: 6 Credentials: 4
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
TOTAL			

B. Current Inactive Licenses (not lapsed licenses)
(Only Medical, Chiropractic, CPA, and Real Estate)

CATEGORY	TOTAL AS OF 6/30/____
1.	
2.	
3.	
4.	
TOTAL	

C. Retired Licenses

CATEGORY	RETIRED DURING FY 20 ____	TOTAL AS OF 6/30/ ____	NOTES
1.			
2.			
TOTAL			

D. Examination Dates

(List each examination administration separately.)

EXAM TYPE	LOCATION	DATE	CANDIDATES	NO. PASSED	NO. FAILED

E. Board Meetings and Teleconferences

DATE	LOCATION <i>(indicate if teleconference)</i>