

***Annual Report
Fiscal Year 2013***

ALASKA STATE MEDICAL BOARD

July 2013



**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 2013 ANNUAL REPORT

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**ALASKA STATE MEDICAL BOARD
 FY 2013 ANNUAL REPORT
 IDENTIFICATION OF BOARD**

Alaska Statute 08.64.010 establishes the State Medical Board, composed of eight members, including five licensed physicians, one licensed physician assistant, and two public members. Each member is appointed to serve by the governor and serves a four-year term; a member may serve beyond the termination date until a successor is appointed.

<u>Board Member</u>	<u>Date Appointed/Reappointed</u>	<u>Term Expires</u>
David A. Miller, MD President	March 1, 2009/March 1, 2012	March 1, 2016
William W. Resinger, MD Secretary	September 21, 2007/March 1, 2010	March 1, 2014
Camille (Cam) Carlson Public Member	March 1, 2012	March 1, 2016
Elizabeth A. Kohnen, MD	March 1, 2012	March 1, 2016
Kevin Luppen, PA-C	March 1, 2013	March 1, 2017
Kathleen (Casey) Millar Public Member	March 1, 2009/March 1, 2009	March 1, 2017
David J. Powers, MD	December 2, 2008/March 1, 2012	March 1, 2016
Grant T. Roderer, MD	March 22, 2013	March 1, 2016

**ALASKA STATE MEDICAL BOARD
FY 2013 ANNUAL REPORT
IDENTIFICATION OF STAFF**

Anchorage Office

Department of Commerce Community and Economic Development
Division of Corporations, Business and Professional Licensing
550 West 7th Avenue, Suite 1500
Anchorage, AK 99501

Debora Stovern, Executive Administrator

Work: (907) 269-8163
Fax: (907) 269-8196

Susan Winton, Senior Investigator

Work: (907) 269-8189
Fax: (907) 269-8195

David Newman, Investigator

Work: (907) 269-8177
Fax: (907) 269-8195

Miriam Patredis, Office Assistant

Work: (907) 269-8163
Fax: (907) 269-8196

Juneau Office

Department of Commerce Community and Economic Development
Division of Corporations, Business and Professional Licensing
P.O. Box 110806
Juneau, AK 99811-0806

Holly Kuhn, Licensing Examiner (A – K)

Work: (907) 465-2756
Fax: (907) 465-2974

Dawn Hannasch, Licensing Examiner (L – Z)

Work: (907) 465-2541
Fax: (907) 465-2974

ALASKA STATE MEDICAL BOARD
FY 2013 ANNUAL REPORT
NARRATIVE STATEMENT

The Alaska State Medical Board is responsible for protecting the public through the licensing, regulation, and discipline of allopathic and osteopathic physicians, podiatrists, physician assistants, and mobile intensive care paramedics.

The board establishes and evaluates minimum education and competency standards for applicants who wish to practice medicine in Alaska. The board also ensures the continuing competency of practitioners by establishing and evaluating professional standards and specific requirements for biennial license renewal. Such standards provide reasonable assurance to the public that licensees are qualified to practice medicine. During FY 2013, the board maintained its consistently high level of activity in all categories of licensure, including the initial licensure of 313 allopathic and osteopathic physicians, podiatrists, physician assistants, and mobile intensive care paramedics new to Alaska. In addition, the board issued seven locum tenens permits for temporary practice by physicians to fill absences in the state, and 66 resident permits to physicians participating in an accredited post-graduate residency program in the state.

The Alaska State Medical Board takes its public protection responsibilities very seriously and has well-established policies and procedures to investigate complaints and malpractice settlements, and take disciplinary action as appropriate. The board has worked with its investigative staff to develop specific disciplinary guidelines in order to mete out consistent and effective sanctions when violations occur. During FY 2013, the board took 23 formal actions under its enforcement mandate.

The board continues to monitor and propose regulation changes to improve its effectiveness. During FY 2013, the board adopted a number of regulations projects, including:

- changing continuing medical education requirements for paramedics;
- updating certification and assessment requirements for physician assistants;
- clarifying requirements for patient medical records;
- clarifying the eligibility requirements for examination applicants;
- establishing license verification procedures for new applicants; and
- changing the verification requirements for graduates of foreign medical schools; and

In addition, the board is working on regulations projects, including establishing:

- standards for the delegation of routine duties to unlicensed assistive personnel;
- procedures for board recognition of federal licensing exemptions for practitioners in Tribal Health Programs; and
- provisions to allow some military training credit as meeting part of the postgraduate training required for licensure.

The board continues to participate in the activities of the Federation of State Medical Boards (FSMB) and Administrators in Medicine (AIM). Attendance at their national and regional meetings allows the board and board staff to remain aware of issues concerning the practice of medicine nationally, and to participate in programs involving licensing requirements, professional standards and ethics, public protection, regulation, and discipline. The federation monitors developments in the health care regulatory field by the federal government, administers the national licensure examination, and maintains a national database of licensed physicians and physician assistants. AIM researches and tracks issues and developments on a state-by-state basis and assists board executives in obtaining or sharing information to more effectively respond to the needs of their states. Both organizations are active in providing education and assistance to board staff and members, including certification programs for board executives and board investigators.

The board employs an executive administrator, two investigators, two licensing examiners, and an administrative clerk. During the past fiscal year, they were able to fill all vacant positions and are pleased to have an effective and professional staff.

In the coming year, the board will continue to seek important and meaningful change in the areas of administrative and board functions. The board has developed policies and procedures for conducting routine business. They continue to evaluate and make changes as necessary for more efficient and appropriate licensing, regulation, and disciplinary processes. The board continues to seek new ways to disseminate information to the public and the profession, to have more information available on their website, and do more business via the internet. They are utilizing FSMB assistance in establishing an online application process and electronic resources for conducting board 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
FY 2013 ANNUAL REPORT
BUDGET RECOMMENDATIONS FOR FY 2014**

Board Meeting Travel

In accordance with Alaska Statute 08.64.085 the Board meets at least four times a year. The meetings are scheduled for as many geographical areas of the state as possible, in order to be accessible to the public and the profession. Board meetings are two days with a full agenda to conduct required administrative business (reviewing license applications and reinstatements), assess and propose regulation changes, evaluate board procedures and guidelines, deal with correspondence, and handle disciplinary matters.

Date	Location	# of Board Members	# of Staff	Total Estimated Cost (total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)
July 18-19, 2013	Dillingham	8	2	10,900
October 17-18, 2013	Anchorage	8	2	5,500
March 6-7, 2014	Fairbanks	8	2	8,700
June 5-6, 2014	Sitka	8	2	11,500

Travel Required to Perform Examinations

None – the Board accepts nationally administered examinations through membership in organizations such as the Federation of State Medical Boards (FSMB), National Board of Medical Examiners (NBME), National Board of Osteopathic Medical Examiners (NBOME), National Board of Podiatric Medical Examiners (NBPME), and Federation of Podiatric Medical Boards (FPMB).

Other Travel

The Board requires attendance by Board member(s) and the Board executive at the annual meeting and special issue meetings of the Federation of State Medical Boards (FSMB), the annual and regional meetings of Administrators in Medicine (AIM), as well as specialized training available to the Board executive and investigative staff. The FSMB establishes national policies and standards for the medical profession on behalf of state medical and osteopathic boards in their protection of the public. They hold an annual meeting and provide travel for one board member and the executive administrator to attend. AIM is an affiliated organization for board executives. They also hold an annual and regional meeting and provide travel for the executive administrator to attend. These meetings are well attended by all 70 state and territorial boards and staff. Attendance at the meetings by board members and executive staff allows the board to stay informed of issues concerning the practice of medicine nationally and to participate in programs involving the national licensing examination and reciprocity of professional licenses, as well as to participate in the development or revision of professional policies and standards.

Date	Location	# of Board Members	# of Staff	Total Estimated Cost (total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)	Total Potential Third-Party Offset
October 8-9, 2013	Raleigh, NC	0	1	2325.00	250.00
Description of meeting and its role in supporting the mission of the board: Federation of State Medical Boards (FSMB) and Administrators in Medicine (AIM) board executive training. The Board requires attendance by the Board executive to obtain specialized training on credentialing, license portability, maintenance of licensure, online applications, and ways to improve the license application process.					
October 28-29, 2013	Indianapolis, IN	0	1	2075.00	1250.00
Description of meeting and its role in supporting the mission of the board: Federation of State Medical Boards (FSMB) Administrators in Medicine (AIM) regional meeting. The Board requires attendance by the Board executive in order to stay informed and work with other Board executives on issues of national and regional import (i.e.; as telemedicine, the national licensure effort, efficient licensing processes, dealing with impairment issues and prescriptive authority issues, and legal implications of state policies.					

Apr 24-26, 2014	Denver, CO	2	1	7325.00	3600.00
Description of meeting and its role in supporting the mission of the board: Federation of State Medical Boards (FSMB) annual meeting. The FSMB establishes national policies and standards for the medical profession on behalf of state medical and osteopathic boards in their protection of the public. The Board requires attendance by Board members and the Board executive. These meetings are well attended by all 70 state and territorial boards and staff, allowing boards to stay informed of national issues, licensing, examinations, and the development or revision of professional policies and standards. The sponsor provides the airfare, hotel, and registration fee for one board member and the Board executive.					
TBA	Ft. Worth, TX	0	1	3525.00	3000.00
Description of meeting and its role in supporting the mission of the board: Federation of State Medical Boards (FSMB) special meeting for issues requiring urgent action (such as re: the national licensure movement). The FSMB will call such a meeting as required, and will provide the airfare and hotel for one Board member and the Board executive.					

NON-TRAVEL BUDGET REQUESTS
Dues/Memberships/Resources/Online Training/Teleconferences

Product or service: Member Board Annual Dues	Provider: Federation of State Medical Boards	Est. Annual Cost: 2,400.00
Description of item and its role in supporting the mission of the board: The FSMB establishes national policies and standards for the medical profession on behalf of state medical and osteopathic boards in their protection of the public. They provide specialized training for new Board members and staff. In addition, the Board contracts with FSMB to administer the licensing examination for physicians.		
Product or service: Annual Membership Dues	Provider: Administrators in Medicine	Est. Annual Cost: 1,200.00
Description of item and its role in supporting the mission of the board: AIM is an affiliated organization for board executives and provides tools and resources to assist Board staff in their work. They also hold an annual and regional meeting, and co-sponsor specialized training programs.		
Product or service: Board teleconference meetings	Provider: GCI	Est. Annual Cost: 1,500.00
Description of item and its role in supporting the mission of the board: The Board meets by teleconference 2-3 times per year as needed to address emergency or special issues that are time sensitive.		

Other Items with a Fiscal Impact:
Unknown at this time.

Summary of FY14 fiscal requests:

Board Meetings	36,600.00
Travel for Exams	-0-
Out-Of-State and Additional In-State Travel	15,250.00
Dues/Memberships/Resources/Online Training/Teleconferences	5,100.00
Total Potential Third-Party Offset	8,100.00
Other	
Total Requested:	\$45,250.00

**ALASKA STATE MEDICAL BOARD
FY 2013 ANNUAL REPORT
PROPOSED LEGISLATIVE RECOMMENDATIONS**

Focus Area (Check all that apply)

- Economic Development
- Government Within Our Means
- National Regulatory/Industry Changes
- Enhance Public Protection

1. Subject and Proposed Language (include intent and statutory reference).

Proposed statutory authority for delegation of routine duties by a physician or physician assistant

New Sec. 08.64.108 Delegation of routine medical duties. A licensed physician or physician assistant licensed under this chapter may delegate routine medical duties to other persons, including unlicensed assistive personnel, under regulations adopted by the board. A person to whom the routine medical duties are delegated may perform the delegated duties without a license under this chapter if the person meets the applicable requirements established by the board.

Revised Sec. 08.64.170. License to practice medicine, podiatry, or osteopathy. (a) A person may not practice medicine, podiatry, or osteopathy in the state unless the person is licensed under this chapter, except that...

(4) a person may practice within the scope of a delegation properly made under AS 08.64.108...

2. Explain the benefits the proposed legislation would provide.

Based on evaluation of existing practices, the board adopted regulations that set standards for appropriate delegation of duties to unlicensed assistive personnel (such as CMAs). After a routine review by the Department of Law, it was determined that there was not currently statutory authority for licensees to delegate any duties (routine or not) to unlicensed assistive personnel. It was recommended that the board and/or division pursue a statute change to allow for limited delegation, which is prevalent in medical practice.

3. Explain the consequences, if any, of not implementing the proposed statutory change.

Physicians and physician assistants unable to delegate routine duties to assistive personnel, exacerbating staffing shortages, particularly in rural areas or small practices.

4. Describe any potential negative impacts of this legislation and how they would be minimized.

None

5. Who do you anticipate will support the bill and why? Include municipalities, groups, etc...

Medical professionals and medical associations will support the establishment of specific standards for delegation authority

6. Who do anticipate will oppose the bill and why?

None

7. What other state departments will be affected by this legislation? Have you discussed the impact with the affected departments, and if so who and do they support this bill?

None

8. Identify and describe any previous state or federal legislation or similar efforts in other states which affect or relate to this proposal.

None

9. Has this bill topic been previously introduced in the legislature? If so, what was the final outcome and why?

None

10. In the event questions should be raised during review of this request, please indicate below which board member should be contacted:

Debra Stovern, Board Executive Administrator.

**ALASKA STATE MEDICAL BOARD
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REGULATION RECOMMENDATIONS**

The Alaska State Medical Board is currently pursuing a number of regulation projects, including:

- standards for the delegation of routine duties to unlicensed assistive personnel;
- procedures for board recognition of federal licensing exemptions for practitioners in Tribal Health Programs; and
- provisions to allow some military training credit as meeting part of the postgraduate training required for licensure.

**ALASKA STATE MEDICAL BOARD
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GOALS AND OBJECTIVES**

List the board's FY13 goals and objectives and how they were met and the board's FY14 goals and objectives. Include any strengths, weaknesses, opportunities, and threats, as well as any resources needed:

1. The board will continue to educate licensees regarding the medical board statutes and regulations.
 - During FY 2013, the board updated its website to include their board-issued guideline and information on reporting requirements. The board responded to inquiries regarding their proposed regulations.
 - The board will continue to provide relevant information, through publication on their website and in response to inquiries.
2. The board will continue to assess and evaluate the licensing of allopathic and osteopathic physicians, podiatrists, physician assistants, and mobile intensive care paramedics.
 - During FY 2013, the board reviewed licensing applications at all of their meetings and discussed needs as they arose.
 - The board will continue this practice through FY 2014.
3. The board will continue to evaluate the impact and effectiveness of current regulations and the need for revisions or new regulations.
 - During FY 2013, the board adopted a number of regulations projects related to continuing medical education requirements for paramedics, certification and assessment requirements for physician assistants, patient medical records requirements, eligibility requirements for examination applicants, license verification procedures for new applicants, and verification requirements for graduates of foreign medical schools.
 - During FY 2014, the board will be working on regulations projects related to the delegation of routine duties to unlicensed assistive personnel, board recognition of federal licensing exemptions for practitioners in Tribal Health Programs, and allowing some military training credit as meeting part of the postgraduate training required for licensure.
4. The board will annually review and update its disciplinary guidelines and its policies and procedures.
 - During FY 2013 the board reviewed these documents and made changes, as necessary.
 - The board will continue to review and update the documents during FY 2014.
5. The board will pursue more effective administrative support, including attracting and retaining competent staff, providing comprehensive training for staff, and compensating staff appropriately.
 - During FY 2013, the board supported legislation related to their sunset extension and increasing the pay range for their board executive and determined to send the board executive to all meetings and training events offered by their national organizations.
 - During FY 2014, the board will support efforts by the Division to increase the salary range for licensing examiners.
6. The board will continue to be involved nationally with the Federation of State Medical Boards and its affiliated organizations, and direct board and staff attendance at their meetings and activities.
 - During FY 2013, one board member and the board executive attended the annual meeting of the Federation of State Medical Boards (FSMB). Due to budget constraints, the Division denied travel by the board executive to attend the regional meeting of the sister-organization, Administrators in Medicine (AIM).
 - During FY 2014, the board is requiring that two board members and the board executive attend the FSMB annual meeting, and the board executive attend the AIM regional meeting, the FSMB/AIM board executive specialized training, and any special issue meetings called by FSMB.

**ALASKA STATE MEDICAL BOARD
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SUNSET AUDIT RECOMMENDATIONS**

Date of last Legislative Audit: September, 2012

Board sunset date: June 30, 2020

Audit Recommendation #1: The Division of Corporations, Business and Professional Licensing (DCBPL) Director should continue to address deficiencies in the investigative case management system.

Action taken: DCBPL established an interdisciplinary task force to identify underlying problems, develop a corrective action plan, establish case management procedures, and deliver training to investigative staff.
Next Steps: DCBPL will continue implementation of this action plan through FY 2013.
Date completed: Ongoing.

Audit Recommendation #2: DCBPL's Director should implement procedures to ensure board disciplinary actions are reported in accordance with state and federal law.

Action taken: The Investigative Unit has implemented standard operating procedures to comply with reporting requirements. The board has tasked the Executive Administrator with confirming appropriate reporting of actions taken at or since the previous meeting.
Next Steps: These actions have resulted in more actions being reported and catching any missed reports. However, by the time a missed report is corrected, the report is untimely. Board staff is working in improvements to the operating procedures to affect 100% timely reporting.
Date completed: Ongoing.

Audit Recommendation #3: DCBPL's Director should ensure continuing medical education (CME) reviews comply with state law.

Action taken: Significant improvements in the CME audit process are planned for the licensing database that is currently under development. Board staff is coordinating audit processes and have implemented standard operating procedures to assure accurate audit selections.
Next Steps: Testing the new CME audit process when the new database is launched.
Date completed: Ongoing.

FISCAL YEAR 20____ STATISTICAL OVERVIEW

Program: _____

AS 08. _____

12 AAC _____

Name of Individual Completing Report: _____

Date: _____

FY13 LICENSEES	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____

A. Current Active Licenses, Endorsements, Permits

List type and if issued by examination or credential, as applicable.

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____	LICENSURE BASIS
Example: Civil Engineer - AEL	C	AA	10	250	Exam: 6 Credentials: 4
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
TOTAL					

B. Temporary Licenses

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Physical Therapist - PHY	R	AA	4	24	
1.					
2.					
3.					
4.					
TOTAL					

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

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	TOTAL AS OF 6/30/____
Example: Salesperson - REC	S	II	64
1.			
2.			
3.			
4.			
TOTAL			

D. Retired Licenses

CATEGORY & PROGRAM CODE	Lic. Type Code	Status Code	RETIRED DURING FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Osteopath - MED	O	RR	1	8	
1.					
2.					
3.					
TOTAL					

E. Examination Detail

(List each examination administration separately. Write "See Attached" and attach a separate sheet if necessary.)

EXAM TYPE	LOCATION	DATE	CANDIDATES	NO. PASSED	NO. FAILED
Number of Postponed Exams					
Number of Exam Reviews					

F. Miscellaneous Program Activity

List all instances of fee-related work performed under Centralized Regulations per 12 AAC 02.105 (tracked by each program's fee ticker)

DESCRIPTION	TOTAL
Example: License Verification	62

G. Miscellaneous Program Activity

List all instances of fee-related work performed under the licensing program's regulations that is not included above

DESCRIPTION	TOTAL
Example: Course Approval	16

H. Board Meetings and Teleconferences

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