



Testimony on Improving the Licensure Process
House Labor and Commerce
April 21, 2021

My name is Jeannie Monk, I am the Sr Vice President of the Alaska State Hospital and Nursing Home Association. Thanks for the opportunity to provide comments on improving the licensure process in Alaska.

I want to start by acknowledging the work of Sara Chambers and her Division. I have Sara on speed dial, and she is very responsive and 100% supportive of any ideas to improve the licensing process. My comments about the challenges with licensing are not about Sara or her staff but rather the problems with the system.

Hospitals and nursing homes experience problems with delays in the time it takes for physicians, nurses and other health care professionals such as physical therapists or social workers to acquire licenses to practice in Alaska.

We are focused on the length of time it takes to get someone in a facility to practice medicine or provide nursing care. The Division tracks the length of time to review the application, we start counting as soon as a physician or nurse begins to submit documents for an application. Many of the delays occur during the process to build an application. Our facilities have shared that it routinely takes 18 weeks and more to get a physician license, this is often twice as long as other states. This creates a serious disadvantage to hiring people to come to Alaska. Nurses and other health professionals also face long waits to get a license. The licensure delays have sometimes resulted in losing a candidate to another state where they can go to work more quickly.

Why is licensing so difficult? There are many factors involved but right now I will highlight 2 key factors – staffing and duplicative processes.

- **Staffing** - Lack of staff at the Division limits timely communication and follow-up. A lack of two-way communication means weeks can go by before there is communication back to a physician or nurse that a document is missing. There is a lengthy process to submit documents and then wait to get confirmation that everything has been received. More examiners could improve communication and keep the processes flowing as applicants build their application process.
- **Duplicative processes**– Primary verification of medical school/fellowships is required even when physicians have already submitted the same documentation multiple times. Need to expand acceptable primary source documents to eliminate duplication.

Other states use a clearinghouse for primary verification rather than requiring original source, notarized paper documents. Many documents must be submitted for both a license and for a hospital credentialing – no sharing is allowed creating more duplication.

I want to highlight some improvements that we have worked on with the Division and the Boards.

- The Division has implemented an on-line application process that has offered improvements and better information sharing.
- The expedited process works when used. When there is an urgent need, and we contact the Division they can expedite the process and quickly get someone licensed. We try to save this request for only critical situations but appreciate that it can be done.
- The emergency courtesy license option during COVID have allowed providers to get to work right away while they complete the full process. Legislation being considered – SB 86 - would create a path for a temporary license process to continue. We support a temporary license process.
- Participation in licensure compacts with other states can reduce licensure barriers for those already licensed in another state. We strongly support Alaska participation in the Nurse Licensure Compact along with 35 other states. This allows nurses to quickly get to work. This would especially help military spouses. The Division has supported the compact.

Collaboration and forward thinking can only make us better. We look forward to continuing to work with the Division and the legislature on solutions to improve the licensing process.