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Nauman/Wallace
3/26/15

CS FOR SENATE BILL NO. 14(L&C)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-NINTH LEGISLATURE - FIRST SESSION

BY THE SENATE LABOR AND COMMERCE COMMITTEE

Offered:

Referred:

Sponsor(s): SENATOR COGHILL

A BILL

FOR AN ACT ENTITLED

"An Act relating to the appointment of a mobile intensive care paramedic to the State Medical Board; relating to medical review organizations; and providing for an effective date."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

*** Section 1.** AS 08.64.010 is amended to read:

Sec. 08.64.010. Creation and membership of State Medical Board. The governor shall appoint a board of medical examiners, to be known as the State Medical Board, consisting of five physicians licensed in the state and residing in as many separate geographical areas of the state as possible, one physician assistant licensed under AS 08.64.107, one mobile intensive care paramedic licensed under AS 08.64.107, and one person [TWO PERSONS] with no direct financial interest in the health care industry.

*** Sec. 2.** AS 18.23.070(3) is amended to read:

(3) "health care provider" means an acupuncturist licensed under

AS 08.06; a chiropractor licensed under AS 08.20; a dental hygienist licensed under AS 08.32; a dentist licensed under AS 08.36; a nurse licensed under AS 08.68; a dispensing optician licensed under AS 08.71; an optometrist licensed under AS 08.72; a pharmacist licensed under AS 08.80; a physical therapist or occupational therapist licensed under AS 08.84; a physician licensed under AS 08.64; a podiatrist; a psychologist and a psychological associate licensed under AS 08.86; a hospital as defined in AS 47.32.900, including a governmentally owned or operated hospital; an emergency medical technician certified under AS 18.08; an emergency medical dispatcher certified under AS 18.08; a mobile intensive care paramedic licensed under AS 08.64; and an employee of a health care provider acting within the course and scope of employment;

* Sec. 3. AS 18.23.070(4) is amended to read:

(4) "professional service" means service rendered by a health care provider of the type the provider is licensed or certified to render;

* Sec. 4. AS 18.23.070(5) is amended to read:

(5) "review organization" means

(A) a hospital governing body or a committee whose membership is limited to health care providers and administrative staff, except where otherwise provided for by state or federal law, and that is established by a hospital, by a clinic, by one or more state or local associations of health care providers, by an organization of health care providers from a particular area or medical institution, or by a professional standards review organization established under 42 U.S.C. 1320c-1, to gather and review information relating to the care and treatment of patients for the purposes of

(i) evaluating and improving the quality of health care rendered in the area or medical institution;

(ii) reducing morbidity or mortality;

(iii) obtaining and disseminating statistics and information relative to the treatment and prevention of diseases, illness, and injuries;

(iv) developing and publishing guidelines showing the

1 norms of health care in the area or medical institution;

2 (v) developing and publishing guidelines designed to
3 keep the cost of health care within reasonable bounds;

4 (vi) reviewing the quality or cost of health care services
5 provided to enrollees of health maintenance organizations;

6 (vii) acting as a professional standards review
7 organization under 42 U.S.C. 1320c;

8 (viii) reviewing, ruling on, or advising on controversies,
9 disputes, or questions between a health insurance carrier or health
10 maintenance organization and one or more of its insured or enrollees;
11 between a professional licensing board, acting under its powers of
12 discipline or license revocation or suspension, and a health care
13 provider licensed by it when the matter is referred to a review
14 organization by the professional licensing board; between a health care
15 provider and the provider's patients concerning diagnosis, treatment, or
16 care, or a charge or fee; between a health care provider and a health
17 insurance carrier or health maintenance organization concerning a
18 charge or fee for health care services provided to an insured or enrollee;
19 or between a health care provider or the provider's patients and the
20 federal or a state or local government, or an agency of the federal or a
21 state or local government;

22 (ix) acting on the recommendation of a credential
23 review committee or a grievance committee;

24 (B) the State Medical Board established by AS 08.64.010;

25 (C) a committee established by the commissioner of health and
26 social services and approved by the State Medical Board to review public
27 health issues regarding morbidity or mortality; at least 75 percent of the
28 committee members must be health care providers;

29 (D) the Joint Commission on Accreditation of Healthcare
30 Organizations (JCAHO);

31 (E) an emergency medical services medical director or an

1 emergency medical services group or committee whose membership is
2 limited to health care providers and administrative staff that gather and
3 review information relating to the care and treatment of patients for the
4 purpose of

5 (i) evaluating and improving the quality of health
6 care and emergency medical services rendered in the area;

7 (ii) reviewing patient care provided by a certified or
8 licensed health care provider;

9 (iii) reviewing the quality or cost of emergency
10 medical services rendered; or

11 (iv) developing or providing training for emergency
12 medical services.

13 * Sec. 5. Sections 2 - 4 of this Act take effect immediately under AS 01.10.070(c).

14 * Sec. 6. Except as provided in sec. 5 of this Act, this Act takes effect March 1, 2017.