## **HOUSE BILL NO. 57**

# IN THE LEGISLATURE OF THE STATE OF ALASKA THIRTY-THIRD LEGISLATURE - FIRST SESSION

#### BY REPRESENTATIVE WRIGHT

Introduced: 2/3/23

Referred: Labor and Commerce, Health and Social Services

## **A BILL**

## FOR AN ACT ENTITLED

- 1 "An Act relating to review organizations and permitting an emergency medical services
- 2 provider to establish a review organization; and relating to patient records."
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:
- **\* Section 1.** AS 18.23.070(1) is amended to read:
- 5 (1) "administrative staff" means the staff of **an agency, institution, or**
- 6 <u>organization that provides health care</u> [A HOSPITAL OR CLINIC];
- 7 \* **Sec. 2.** AS 18.23.070(3) is amended to read:
- 8 (3) "health care provider" means an acupuncturist licensed under 9 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 physician or podiatrist licensed
- 11 <u>under AS 08.64</u>; 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
- 14 PHYSICIAN LICENSED UNDER AS 08.64; A PODIATRIST;] a psychologist and a

| 1  | psychological associate licensed under AS 08.86; an organization or government     |
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| 2  | agency that is certified or licensed to provide emergency medical services under   |
| 3  | AS 18.08; a hospital as defined in AS 47.32.900, including a governmentally owned  |
| 4  | or operated hospital; and an employee of a health care provider acting within the  |
| 5  | course and scope of employment;  |
| 6  | * <b>Sec. 3.</b> AS 18.23.070(5) is amended to read:                               |
| 7  | (5) "review organization" means  |
| 8  | (A) a hospital governing body or a committee whose                                 |
| 9  | membership is limited to health care providers and administrative staff, except    |
| 10 | where otherwise provided for by state or federal law, and that is established by   |
| 11 | a hospital, by a clinic, by one or more state or local associations of health care |
| 12 | providers, by an organization of health care providers from a particular area or   |
| 13 | medical institution, by an organization or government agency that provides         |
| 14 | emergency medical services, or by a professional standards review                  |
| 15 | organization established under 42 U.S.C. 1320c-1, to gather and review             |
| 16 | information relating to the care and treatment of patients for the purposes of     |
| 17 | (i) evaluating and improving the quality of health care                            |
| 18 | rendered in the area or medical institution;                                       |
| 19 | (ii) reducing morbidity or mortality;  |
| 20 | (iii) obtaining and disseminating statistics and                                   |
| 21 | information relative to the treatment and prevention of diseases, illness,         |
| 22 | and injuries;  |
| 23 | (iv) developing and publishing guidelines showing the                              |
| 24 | norms of health care in the area or medical institution;                           |
| 25 | (v) developing and publishing guidelines designed to                               |
| 26 | keep the cost of health care within reasonable bounds;                             |
| 27 | (vi) reviewing the quality or cost of health care services                         |
| 28 | provided to enrollees of health maintenance organizations;                         |
| 29 | (vii) acting as a professional standards review                                    |
| 30 | organization under 42 U.S.C. 1320c;  |
| 31 | (viii) reviewing, ruling on, or advising on controversies,                         |

| 1  | disputes, or questions between a health insurance carrier or health          |
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| 2  | maintenance organization and one or more of its insured or enrollees;        |
| 3  | between a professional licensing board, acting under its powers of           |
| 4  | discipline or license revocation or suspension, and a health care            |
| 5  | provider licensed by it when the matter is referred to a review              |
| 6  | organization by the professional licensing board; between a health care      |
| 7  | provider and the provider's patients concerning diagnosis, treatment, or     |
| 8  | care, or a charge or fee; between a health care provider and a health        |
| 9  | insurance carrier or health maintenance organization concerning a            |
| 10 | charge or fee for health care services provided to an insured or enrollee;   |
| 11 | or between a health care provider or the provider's patients and the         |
| 12 | federal or a state or local government, or an agency of the federal or a     |
| 13 | state or local government;   |
| 14 | (ix) acting on the recommendation of a credential                            |
| 15 | review committee or a grievance committee;                                   |
| 16 | (B) the State Medical Board established by AS 08.64.010;                     |
| 17 | (C) a committee established by the commissioner of health and                |
| 18 | approved by the State Medical Board to review public health issues regarding |
| 19 | morbidity or mortality; at least 75 percent of the committee members must be |
| 20 | health care providers;   |
| 21 | (D) the Joint Commission on Accreditation of Healthcare                      |
| 22 | Organizations (JCAHO).   |