

ALASKA STATE LEGISLATURE
HOUSE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

March 1, 2022

3:11 p.m.

MEMBERS PRESENT

Representative Liz Snyder, Co-Chair
Representative Tiffany Zulkosky, Co-Chair
Representative Ivy Spohnholz
Representative Zack Fields
Representative Ken McCarty
Representative Mike Prax
Representative Christopher Kurka

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

HOUSE SPECIAL CONCURRENT RESOLUTION NO. 2
Disapproving Executive Order No. 121.

- MOVED HSCR 2 OUT OF COMMITTEE

CONFIRMATION HEARING(S) :

Alaska State Medical Board

Matt Heilala - Anchorage
David Wilson - Palmer

- CONFIRMATION(S) ADVANCED

PREVIOUS COMMITTEE ACTION

BILL: HSCR 2

SHORT TITLE: DISAPPROVING EXECUTIVE ORDER 121

SPONSOR(S) : HEALTH & SOCIAL SERVICES

02/22/22	(H)	READ THE FIRST TIME - REFERRALS
02/22/22	(H)	HSS
02/22/22	(H)	HSS AT 3:00 PM DAVIS 106
02/22/22	(H)	Heard & Held
02/22/22	(H)	MINUTE (HSS)
02/24/22	(H)	HSS AT 3:00 PM DAVIS 106

02/24/22 (H) Heard & Held
02/24/22 (H) MINUTE (HSS)
03/01/22 (H) HSS AT 3:00 PM DAVIS 106

WITNESS REGISTER

MARIANNE MILLS, President
AGenet
Juneau, Alaska

POSITION STATEMENT: Testified in opposition to HSCR 2.

BOB PAWLOWSKI, Chair
Alaska Pioneer Homes Advisory Board
Anchorage, Alaska

POSITION STATEMENT: Testified during the hearing on HSCR 2.

JULIE SMYTH, representing self
Fairbanks, Alaska

POSITION STATEMENT: Testified in support of HSCR 2.

ANDREE MCLLOUD, representing self
Anchorage, Alaska

POSITION STATEMENT: Testified in support of HSCR 2.

ROBIN O'DONOGHUE, Policy & Communications Manager
Alaska Public Interest Research Group
Anchorage, Alaska

POSITION STATEMENT: Testified in support of HSCR 2.

LAURA BONNER, representing self
Anchorage, Alaska

POSITION STATEMENT: Testified in support of HSCR 2.

MIRANDA WALSO, Executive Director
Governor's Council on Disabilities & Special Education
Anchorage, Alaska

POSITION STATEMENT: Testified in opposition to HSCR 2.

ED MARTIN, representing self
Kenai, Alaska

POSITION STATEMENT: Testified in support of HSCR 2; testified during the confirmation hearing on governor's appointees to the Alaska State Medical Board.

ANDREW DUNMIRE, Legislative Counsel
Legislative Legal Services
Legislative Agencies and Offices

Juneau, Alaska

POSITION STATEMENT: Answered questions during the hearing on HSCR 2.

MATT HEILALA, DPM, Appointee

Alaska State Medical Board

Anchorage, Alaska

POSITION STATEMENT: Testified as appointee to the Alaska State Medical Board.

DAVID WILSON, Appointee

Alaska State Medical Board

Palmer, Alaska

POSITION STATEMENT: Testified as appointee to the Alaska State Medical Board.

ACTION NARRATIVE

[3:11:04 PM](#)

CO-CHAIR TIFFANY ZULKOSKY called the House Health and Social Services Standing Committee meeting to order at 3:11 p.m. Representatives Spohnholz, Fields, McCarty, Prax, Snyder, Kurka, and Zulkosky were present at the call to order.

HSCR 2-DISAPPROVING EXECUTIVE ORDER 121

[3:13:24 PM](#)

CO-CHAIR ZULKOSKY announced that the first order of business would be HOUSE SPECIAL CONCURRENT RESOLUTION NO. 2, Disapproving Executive Order No. 121.

[3:14:19 PM](#)

CO-CHAIR ZULKOSKY opened public testimony on HSCR 2.

[3:14:55 PM](#)

MARIANNE MILLS, President, AGenet, testified that AGenet took a position to support [Executive Order 121], which would reorganize the Department of Health and Social Services (DHSS). She reported that currently DHSS has a budget the size of 12 other departments, with a staff tally equaling six departments, and a team of 5 manages 3,500 employees. She posited that narrowing the scope of the agency would improve its ability to

effectively serve Alaskans. She asked the committee to oppose HSCR 2.

[3:16:28 PM](#)

BOB PAWLOWSKI, Chair, Alaska Pioneer Homes Advisory Board, testified that there is a \$23 million deferred maintenance backlog for the Pioneer Home program, and he shared his belief that the program would be better served by being under a smaller department. He added that dividing the department [as would happen under EO 121, which HSCR 2 seeks to stop], would be beneficial for the health and safety of the residents and employees at the Pioneer Homes.

[3:17:40 PM](#)

JULIE SMYTH, representing self, testified in support of HSCR 2. She stated that she receives services through DHSS and has not received any information from the department about how dividing the department would change those services. She opined that the process to split DHSS should be stopped until such questions are answered.

[3:18:46 PM](#)

ANDREE MCLOUD, representing self, testified in support of HSCR 2 as someone who cared for a person who received benefits from DHSS. She argued that the executive order did not "pass muster" and would upend the lives of many [vulnerable] people as well as legislative authority. She spoke to points of concern she had after listening to previous presentations from DHSS. Presenters from DHSS had listed collaboration between departments to lower costs through economy of scale purchases, and she questioned why they were not already doing so. She mentioned that the division directors reported a need to "clamor for the commissioner's attention" as a large reason for dividing DHSS, and she argued that the commissioner should be able to handle the requests without needing to create an entire new department. She reported that there was a lack of input from the Alaskans that rely on the services provided by DHSS and quoted Commissioner Adam Crum as saying that informing recipients of the change was "not required." She referenced past department initiatives such as the Wellpath rollout and the Medicaid adult dental preventive program, which she described the department as having "messed up," and she questioned whether that was the leadership that should oversee the creation of a new department. She insisted

that the legislature should intervene in the governor's plan as it would create "chaos" for the most vulnerable Alaskans.

[3:22:14 PM](#)

ROBIN O'DONOGHUE, Policy & Communications Manager, Alaska Public Interest Research Group, testified in support of HSCR 2 and cited lack of public participation as one of the largest issues. He reported that there was a consensus that DHSS had many problems, but it was unclear if bifurcation would solve them. He said that high expense and creation of 13 new positions when the state was in a fiscal and employee deficit was troubling. He stated there had been a lack of communication between the department and its beneficiaries, especially when there have already been big changes in how Alaskans navigate their services due to COVID-19. He characterized the department's testimony about the proposal as confusing. He opined that the department to be under-prepared to take on such an important split and that many of the issues could be resolved internally while maintaining one department. He expressed concern that following through with the executive order would create a bad precedent that the executive branch can reorganize large parts of the state government with little input from the public or the legislature, and he referenced a memorandum ("memo") from the legislative legal division that said the executive order was an example of overreach. He asked the committee to pass HSCR 2 to give more time to properly investigate the proposal.

[3:24:40 PM](#)

LAURA BONNER, representing self, testified in support of HSCR 2 and mentioned that she had a disabled adult daughter who received many services from DHSS. She believed that the governor and commissioner have not provided enough compelling evidence for why the split should happen at this time. She stated that it was a huge and costly decision and should receive more input from the legislature and the community before going forward. She emphasized that the timing was not right and that a change this large should not be considered at the end of the governor's term.

[3:26:42 PM](#)

MIRANDA WALSO, Executive Director, Governor's Council on Disabilities & Special Education, testified in opposition to HSCR 2. She stated that to solve the issues DHSS was facing, the state needed to increase its capacity at the highest levels.

She shared her belief that "things aren't getting better" and that a larger change would be required. She opined that the expansiveness of the regulations and services provided was too diverse for one small group of people to handle, and there was a pressing need to increase oversight.

[3:28:36 PM](#)

ED MARTIN, representing self, testified in support of HSCR 2. He opined that splitting a department would not be cost-effective. He questioned the zero fiscal note associated with the executive order and stated that there would have to be an addition of government positions either now or in the future, which would cost the state money. He shared his concern over how DHSS handled the COVID-19 crisis and stated that "this whole department under [Commissioner] Crum has been out of control for two years." He shared his belief that splitting the department would lead to more opportunity for the department to "steal liberties" from Alaskans. He urged the committee to stop the governor's "overreach" by passing HSCR 2 out of committee.

[3:30:35 PM](#)

CO-CHAIR ZULKOSKY, after ascertaining there was no one else who wished to testify, closed public testimony on HSCR 2.

[3:31:00 PM](#)

REPRESENTATIVE FIELDS stated that he was personally against the bifurcation due to not enough collaborative stakeholder engagement and the lack of an accompanying bill. He expressed a need to make sure there was proper legislation for this departmental change so that there was not a precedent for the executive branch to rewrite large sections of statute through an executive order. He opined that there needed to be more time and thought put into the bifurcation process, and he advised that a bill should be drafted for the next legislative session, under the governor at that time. He emphasized the importance of ensuring a balance between the powers of the legislative and executive branches.

[3:32:47 PM](#)

REPRESENTATIVE MCCARTY commented that a common theme in the discussions about the issues within DHSS was its management. He shared how his personal experience working in health care has left him very disgruntled about the management of the department

he has seen over the years, which he said has been mirrored in the overall discussion. He said that the question was not whether there are issues but how to fix them. He mentioned several of the areas where DHSS has been struggling. He shared that he was not opposed to bifurcation but would want to see it accompanied by measurable goals for growth that show results within a year. He stated that it was within the power of the committee to create a bill that year to clean up the language of the executive order and ensure it was moving toward the goal of serving Alaskans.

[3:36:07 PM](#)

REPRESENTATIVE SPOHNHOLZ expressed agreement that there are many issues in DHSS and that the department needs more capacity, but she stated that the stakeholder engagement has been lacking. She reiterated that engagement has been one-way, with stakeholders feeling as though they were "essentially informed" that there would be a division of the department, but that their input on reorganization was not being considered. She argued that the current offer was an incomplete package - an executive order without companion legislation, which she described as "absolutely necessary" for the success of the reorganization. She posited that the executive branch did not submit the companion legislation out of fear that the bill would be "Christmas treed," but said it was her position that if adequate stakeholder engagement had occurred, then there would have been a lot of consensus and support for the executive order and its legislation within the legislature. Instead of collaboration, she reported hearing from people within the health care community who fear that their relationship with the administration and their mission within their work would be jeopardized if they spoke candidly on the subject. She stated that this is a problem because these community members run the "mom and pop" or non-profit organizations that provide most of the services that DHSS funds, and she explained that they cannot do their work if they have a bad relationship with the department.

REPRESENTATIVE SPOHNHOLZ characterized the proposal from the administration as "half-baked" and said that by presenting it without legislation, the governor was forcing the legislature to fix the issues itself or even draw out the transition process another year while creating the legislation. She stated that transitions are already difficult but can be improved with solid stakeholder engagement and an idea of what it will look like at the end. She said that what the legislature was currently

presented with was a transition that would be "a slog without a clear vista," and it is not clear what the state would be getting out of it. She stated that she supported passing HSCR 2 to reject the executive order and approach the issue slowly and methodically, with deep stakeholder engagement, and she mentioned the \$500,000 budget amendment to do more robust engagement over the next year. She recommended that the legislature invest in this approach because it would be a smoother process that would yield a better product overall.

[3:42:03 PM](#)

REPRESENTATIVE PRAX spoke in opposition to HSCR 2 and stated that the problems with the department have been known for over a decade and that there had been as much research as there was time for, so now the state needed to make a decision and move on. He opined that the amount of work and detail put in by the administration has been robust and included input from employees within the organization from over many years. He posited that the preparation was as good as it was going to get, and that there was more risk in not following the executive order than there was in following it.

[3:43:58 PM](#)

REPRESENTATIVE KURKA asked whether Mr. Dunmire from Legislative Legal Services was still on the line for questions.

REPRESENTATIVE ZULKOSKY confirmed that Mr. Dunmire was available.

REPRESENTATIVE KURKA voiced his understanding that the Constitution of the State of Alaska does give the governor the ability to split departments using an executive order, which would automatically involve changing the statute. He asked Mr. Dunmire if it would be possible to divide such a large department through executive order without making policy calls and changing statute.

[3:46:52 PM](#)

ANDREW DUNMIRE, Legislative Counsel, Legislative Legal Services, Legislative Agencies and Offices, opined that it would not be possible to split a principal department by executive order without making policy changes through the process.

REPRESENTATIVE KURKA stated that the memorandum ("memo") that Legislative Legal Services created addressed several sections in the executive order that included unnecessary policy changes, and he asked Mr. Dunmire to point these sections out. He specifically mentioned Section 27 and asked for more information about the Alaska Statutes that would be changed by that section.

MR. DUNMIRE explained that during the drafting of the memo, he compared each line of the executive order with existing statute and made note of every policy change he saw, which were all included in the final memo. He addressed Representative Kurka's question about the policy change made under Section 27, which decided that the new Department of Health (DOH) commissioner would sit on the board of the Alaska Mental Health Trust Authority (AMHTA). However, he explained that the executive order also decided that the Alaska Psychiatric Institute (API) would be overseen by the Department of Family Services (DFS), meaning that the commissioner who oversees that program would not have input into its regulatory board. He deferred to the legislature to decide whether the policy changes he found were unnecessary.

[3:51:42 PM](#)

CO-CHAIR SNYDER expanded on Representative Kurka's question and stated it was a valid line of questioning that had been touched on in previous testimony from the Department of Law (DOL) and Legislative Legal Services. She reported that reorganization and reassignment of a department through an executive order was legal, but expansions or shrinking of authority were a gray area. She mentioned that most of the issues were around "problematic" wording that left too much open to interpretation and listed board membership and areas of authority as two areas of concern, but she said that these could be fixed with a piece of companion legislature. She stated that legality aside, it was now "in the legislature's court" to decide how to proceed with the proposed bifurcation. She emphasized her commitment to improve the functionality and oversight of the department and her gratitude towards DHSS for the work accomplished so far. However, she insisted that it was part of the committee's responsibility to give the executive order due diligence and that she continued to have several questions about moving bifurcation forward that did not seem to have answers, which she stated was a concern.

CO-CHAIR SNYDER cited continuous budget cuts to the department since 2015 and opined that the state "shouldn't be terribly

surprised" about the persistent challenges the department was facing. She listed workforce burnout, low rates of recruitment and retention, and aging technological infrastructure as issues that can be directly tied to DHSS budget volatility. She agreed with Representative Prax's point that the issues are known and further research into that was not needed but argued that the proposal to bifurcate and add more positions would not solve the identified problem. She emphasized the point made by other members of the committee about the precedent that the executive order would set and added that the legislature should consider that precedent fully. She concluded by reiterating her support for HSCR 2 and stated that moving it through in a timely manner would allow the legislature to keep all its options on the table to ensure it practices due diligence before enacting this change.

3:59:05 PM

CO-CHAIR ZULKOSKY opined that the discussions around the executive order revealed that a solution to the many programs that are in crisis was crucial, as many of the stakeholders were among Alaska's most vulnerable populations. She expressed that DHSS had done an incredible job in demonstrating its many needs in terms of providing services, but that she had not been convinced that the executive order was the best solution. She echoed the concerns of Legislative Legal Services that the legal and fiscal ambiguities of the executive order could negatively impact the future of the legislature as an institution. She considered the 60-day deadline for a response on the executive order as an inadequate amount of time to fully consider the legal precedent, especially regarding the potential for executive branch overreach.

CO-CHAIR ZULKOSKY returned to the topic of the executive order's constitutionality and highlighted that the Legislative Legal Services' memo revealed that there was very little authority on the permissible scope of an executive order. She emphasized that EO 121 dwarfs previous executive orders in size and scope; allowing it to go into effect would signal that a reorganization of this size was permissible and would cede a large portion of the legislature's policy-making power to the executive branch. She stated that legislative powers were bestowed solely on the legislature by Alaska's constitution and that she was unable to separate the incredible work DHSS has done from her concern about the possibly substantive changes to statute included in EO 121 when Legislative Legal Services has advised that a bill would be a more appropriate way to enact the governor's

proposal. She added that allowing the executive branch to usurp the legislatures powers, whether intentional or not, would violate constitutional checks and balances.

CO-CHAIR ZULKOSKY, having looked back at the last three fiscal years, reported that the legislature had cut \$30 million from a number of DHSS divisions through the elimination of many "front-line" service delivery positions. These cuts were made in favor of six figure salaries and additional overhead in the creation of a new commissioner's office, which was not a fiscal or policy choice she supported. She expressed concern that if the state were not able to deliver on the promise of a seamless transition during bifurcation, then it would lead to the addition of positions and massive unforeseen expenses that future legislatures would have to address. She expressed her support of moving HSCR 2 out of committee through a summary of her concerns and stated that moving the resolution would promote further dialogue within the legislature about this multi-faceted issue.

[4:06:10 PM](#)

CO-CHAIR SNYDER moved to report HSCR 2 out of committee with individual recommendations and the accompanying fiscal notes.

[4:06:31 PM](#)

REPRESENTATIVE PRAX objected.

[4:06:36 PM](#)

A roll call vote was taken. Representatives Spohnholz, Fields, Kurka, Snyder, and Zulkosky voted in favor of the motion to report HSCR 2 out of committee with individual recommendations and the accompanying fiscal notes. Representatives McCarty and Prax voted against it. Therefore, HSCR 2 was reported out of the House Health and Social Services Standing Committee by a vote of 5-2.

[4:07:12 PM](#)

The committee took an at-ease from 4:07 p.m. to 4:19 p.m.

CONFIRMATION HEARING(S):
Alaska State Medical Board

[4:19:20 PM](#)

CO-CHAIR ZULKOSKY announced that the final order of business would be a confirmation hearing for consideration of the governor's appointees to the Alaska State Medical Board.

[4:19:46 PM](#)

MATT HEILALA, DPM, Appointee, Alaska State Medical Board, introduced himself with a brief personal history and stated that after 25 years in the medical profession he was ready to serve his fellow Alaskans in a different capacity by serving on the Alaska State Medical Board.

[4:20:51 PM](#)

CO-CHAIR SNYDER inquired about the type of work Dr. Heilala was looking forward to completing with the board and asked whether there were particular issues he was interested in addressing.

DR. HEILALA responded that he was eager to both learn and contribute while on the board. He stated that he was interested in policy concerning patient care and was concerned about the conflict surrounding these issues, which he contributed to a lack of strong leadership. He saw this as a great opportunity to step up and participate in these conversations with the ultimate goal of preserving the sanctity of patient care.

[4:22:25 PM](#)

REPRESENTATIVE SPOHNHOLZ asked Dr. Heilala to elaborate on the "conflicts" he had mentioned and how he envisioned the board approaching them.

DR. HEILALA replied that he had relationships with most of the physicians in Central Alaska and was concerned about strife and finger pointing that had arisen in the community, specifically around aftereffects of the pandemic. He referenced a highly publicized letter to the editor, and he said he hoped to contribute to a calmer conversation from his position on the board where he was excited to support President Dr. Levine. He stated that Dr. Levine helps keep the board in perspective of its purview. He said he believed that he had an opportunity to help remind people that multiple opinions and morals exist, and it is the board's mission to uphold proper patient care by adjudicating issues cautiously and proactively.

[4:25:02 PM](#)

REPRESENTATIVE SPOHNHOLZ asked Dr. Heilala to describe what he believed the role of the board should be in navigating the controversy that has been brought before it recently.

DR. HEILALA responded that there were concerns brought forward that individual Alaska physicians were implementing alternative COVID-19 patients. He added that there was a call by a group of physicians for the board to broadly investigate the claims without the board receiving any individual accusations. He agreed with Dr. Lee's formal response that it would be unprecedented to use a "drag net" approach without first establishing harm caused by an individual physician. He expressed empathy for both the physicians who are being accused and face losing their medical license and the infectious disease physicians at hospitals that have experienced extreme trauma over the last few years. He said he thinks that as a member of the state medical board, his main role is to improve communication. He concluded by agreeing with Dr. Lee that without particular cases being brought forth, the board does not have the authority to investigate broadly.

[4:27:27 PM](#)

REPRESENTATIVE SPOHNHOLZ questioned whether substantial harm must occur to Alaskans before the board acted. She acknowledged concerns that some Alaskans were put in harm's way due to "unorthodox" treatments of conditions during COVID-19 and wondered where the line was drawn in terms of the board taking action.

DR. HEILALA replied that it was the position of the board that concerns need to be brought to the board as individual cases. He explained that this allowed the board to assess the many factors of each case to determine if harm was done, if it fell into the board's jurisdiction, and decide on an appropriate action. He clarified that the board would not "sit back idly" if there were known harm occurring but reiterated that "there is a process for delivering a complaint" which did not include instigating a broad investigation. He agreed with Dr. Lee's written statement that the board should handle complaints that were focused on a particular practitioner rather than issuing broad statements of disapproval.

[4:29:59 PM](#)

CO-CHAIR ZULKOSKY inquired about Dr. Heilala's experience with the obstacles of practicing medicine in rural Alaska and asked how he would approach this topic as a board member.

DR. HEILALA talked about his experience living, working, and traveling throughout Alaska, including rural areas, and shared his understanding of the challenges facing rural practitioners. He emphasized that these practitioners need more flexibility to use tele-health technology without excessive regulations. He gave an example of his experience testifying against more stringent X-ray requirements that would have directly impacted many small villages across rural Alaska. He stated that flexibility needed to be defended to prevent needless transportation of patients across the state when proper diagnosis can and does happen close to home.

[4:33:12 PM](#)

CO-CHAIR ZULKOSKY asked which areas of medical practice Dr. Heilala considered a priority.

DR. HEILALA pointed to increasing access to podiatry care, which had been an issue for Alaskans within the Medicaid system. As the board's first podiatrist, he hoped to help bring the level of foot and ankle care up to par with the rest of the country and was particularly invested in preventing amputations for the diabetic population. He expressed that the country was experiencing a time of change with a considerable shift towards out-patient and increasingly localized care. He shared his excitement to be part of these conversations as they are brought before the board.

[4:35:01 PM](#)

CO-CHAIR ZULKOSKY opened public testimony on the confirmation hearing for Matt Heilala, Appointee, Alaska State Medical Board.

[4:35:21 PM](#)

ED MARTIN, representing self, raised his concerns around the modernization of the medical field, especially in regard to the treatment of patients. He noted that there was a lack of information available to the public about Dr. Heilala and said he felt as though he did not have access to the appointee. He shared his personal experience about being denied access to telehealth services while living away from the state during the COVID-19 pandemic, and he inferred that those were the sort of

issues most Alaskans are dealing with. He agreed with the board's decision not to implement a broad investigation into the COVID-19 treatment concerns and cited the right to privacy as ample reason. He stated that he was leaning toward support for the appointee but would like to have personal conversations with both appointees to the board before he could finalize his opinion.

[4:39:03 PM](#)

CO-CHAIR ZULKOSKY after ascertaining there was no one else who wished to testify, closed public testimony.

[4:39:37 PM](#)

DAVID WILSON, Appointee, Alaska State Medical Board, said that he was interested in the public seat on the board. He reported that as a pilot for Alaska Airlines, he served as the Anchorage chair for its Professional Standards Board. He talked about his history living in multiple places in Alaska over his career and how living in Bethel opened his eyes to the challenges to survival in rural Alaska. He listed high shipping, supply costs, and limited access to health care among the challenges he saw the Native communities face with "resourcefulness and independent resilience." While in Bethel, he reported, he flew patients and medical staff frequently and commented on the staff's commitment to their communities. He expressed his fortune in being able to help the medical professionals in their service to these rural areas, a service he described as essential to the survival of the villages. He spoke about similar experiences he had after moving back to Kodiak, Alaska, and flying the medical staff in that region, and he mentioned the meaningful relationships with members of the Alaska Native community that he has maintained. He talked about his personal experiences with doctors in Alaska, from his family physician to the medical team that supported his father later in life with "great care."

MR. WILSON shared that he wanted to serve on the board to help give back to the passionate and caring community of Alaska physicians. He stated that his role as the public member of the board served two purposes. First, he believed he would give the perspective of a patient and could especially represent those in rural Alaska who face the greatest logistical challenges to receiving medical care. Second, he shared that his experience in human factor analysis for aviation safety would benefit the board. He posited that there were many parallels between the

Professional Standards Board and the Alaska State Medical Board. He continued this comparison by talking about the similarities between pilots and medical personnel and the issues they can face professionally, such as culture of non-compliance, external pressures, and substance abuse. He spoke to the need for high levels of professionalism in both career paths due to the possibility of harm to the public if that standard was not maintained. He shared his belief that behavioral issues such as non-compliance often come from outside factors and can be solved only by speaking in depth with the person to address the root cause of the problem. He said he hoped to bring a similar approach to issues brought before the board.

[4:47:32 PM](#)

REPRESENTATIVE PRAX asked whether the Professional Standards Board Mr. Wilson served on was a national or state board.

MR. WILSON responded it was a national board related to the Airline Pilots Association (APA), a union of which he is a member.

REPRESENTATIVE MCCARTY spoke about the complexities of understanding humanity and the blend of science and art that is the profession of medicine. He asked how Mr. Wilson's use of systematic professional standards fit within that landscape.

MR. WILSON clarified that he had limited experience in medicine but could apply his perspective of the art and science of aviation to his response.

REPRESENTATIVE MCCARTY inquired about Mr. Wilson's ideas on the professional standards of behavior and how that contrasts with a need for latitude and openness in medicine to benefit patients.

MR. WILSON opined that because physicians were trained in certain specialties, the system of referrals allows doctors to point their patients towards the best care, which he believed showed the importance of latitude in the medical field.

REPRESENTATIVE PRAX expressed his intrigue about Mr. Wilson's aviation background and asked how he envisioned his experience in aviation investigations to benefit the board.

MR. WILSON referenced a board meeting he attended where the board's investigator went through several malpractice cases that were before the board. He reported that he had inquired about

the existence of a database for tracking [breeches of professional conduct]. He wondered what role the stress of the last two years and the fact that physicians were one of the occupations predisposed to substance abuse and suicide have played in the occurrence of malpractice suits. He reiterated that in the aviation world, any incident brought before the board would be addressed with the board's consideration of the pilot's history and be investigated for the root causes, such as outside factors, and he suggested that this practice should be applied to the Alaska State Medical Board as well. He shared his belief that physicians were pillars of the community and that the board should work to understand the circumstances that surround an instance of malpractice in order to get to the root of the problem and provide help to a physician who may be struggling.

[4:57:41 PM](#)

CO-CHAIR ZULKOSKY noted that the board oversees state license renewal, which depends on the physician proving continued competency. She asked how Mr. Wilson would assess competency given his lack of medical experience.

MR. WILSON replied that he would trust the opinions of the doctors on the board when it comes to competency, and that he viewed his role in assessment as supportive.

CO-CHAIR ZULKOSKY asked how Mr. Wilson's experience had prepared him for the board's work of setting regulations that establish guidelines for physicians.

MR. WILSON explained that in his previous position as lead pilot, he was tasked with creating policy for the company that complied with [ever-changing] regulations. Although the subject matter is different, he believed that his experience in regulatory compliance and creating policy that spoke to both the letter and the intent of the law would apply to his work on the board.

[5:01:07 PM](#)

The committee took a brief at ease.

[5:01:45 PM](#)

CO-CHAIR ZULKOSKY opened public testimony on the confirmation hearing for David Wilson, Appointee, Alaska State Medical Board.

After ascertaining that there was no one who wished to testify, she closed public testimony.

[5:02:18 PM](#)

CO-CHAIR ZULKOSKY stated that the House Health and Social Services Standing Committee had reviewed the qualifications of the following governor's appointees for consideration: Matt Heilala and David Wilson to the Alaska State Medical Board and would advance the confirmations to the joint session for consideration. Each member's signature on the committee report in no way reflects the member's vote during the joint floor session.

[5:03:33 PM](#)

ADJOURNMENT

There being no further business before the committee, the House Health and Social Services Standing Committee meeting was adjourned at 5:03 p.m.