

ALASKA STATE LEGISLATURE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

May 3, 2022

1:35 p.m.

MEMBERS PRESENT

Senator David Wilson, Chair
Senator Shelley Hughes, Vice Chair
Senator Mia Costello
Senator Lora Reinbold
Senator Tom Begich

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 392(HSS) AM

"An Act relating to advanced practice registered nurses and physician assistants; and relating to death certificates, do not resuscitate orders, and life sustaining treatment."

- HEARD & HELD

SENATE BILL NO. 191

"An Act repealing emergency powers of the commissioner of health and social services and certain provisions related to the response to the novel coronavirus disease; and providing for an effective date."

- HEARD & HELD

SENATE BILL NO. 183

"An Act relating to home and community-based services; and providing for an effective date."

- BILL HEARING CANCELED

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 297(HSS) (TITLE AM)

"An Act relating to home and community-based services; and providing for an effective date."

- BILL HEARING CANCELED

CS FOR HOUSE BILL NO. 382 (HSS)

"An Act relating to insurance coverage for pharmacy services."

- BILL HEARING CANCELED

PREVIOUS COMMITTEE ACTION

BILL: HB 392

SHORT TITLE: EXPAND ADV PRC REG NURSE, PHYS ASSIS AUTH

SPONSOR(S): REPRESENTATIVE(S) SNYDER

02/22/22	(H)	READ THE FIRST TIME - REFERRALS
02/22/22	(H)	HSS, L&C
03/24/22	(H)	HSS AT 3:00 PM DAVIS 106
03/24/22	(H)	-- MEETING CANCELED --
03/29/22	(H)	HSS AT 3:00 PM DAVIS 106
03/29/22	(H)	Heard & Held
03/29/22	(H)	MINUTE (HSS)
03/31/22	(H)	HSS AT 3:00 PM DAVIS 106
03/31/22	(H)	-- MEETING CANCELED --
04/14/22	(H)	HSS AT 3:00 PM DAVIS 106
04/14/22	(H)	Moved CSHB 392 (HSS) Out of Committee
04/14/22	(H)	MINUTE (HSS)
04/20/22	(H)	HSS RPT CS (HSS) NEW TITLE 4DP
04/20/22	(H)	DP: FIELDS, SPOHNHOLZ, SNYDER, ZULKOSKY
04/20/22	(H)	L&C AT 3:15 PM BARNES 124
04/20/22	(H)	Heard & Held
04/20/22	(H)	MINUTE (L&C)
04/22/22	(H)	L&C AT 9:00 AM BARNES 124
04/22/22	(H)	Moved CSHB 392 (HSS) Out of Committee
04/22/22	(H)	MINUTE (L&C)
04/25/22	(H)	L&C RPT CS (HSS) NEW TITLE 3DP 1NR
04/25/22	(H)	DP: SNYDER, FIELDS, SPOHNHOLZ
04/25/22	(H)	NR: SCHRAGE
05/02/22	(H)	TRANSMITTED TO (S)
05/02/22	(H)	VERSION: CSHB 392 (HSS) AM
05/03/22	(S)	HSS AT 1:30 PM BUTROVICH 205

BILL: SB 191

SHORT TITLE: REPEAL COVID 19 DISASTER EMERGENCY

SPONSOR(S): SENATOR(S) REINBOLD

02/15/22	(S)	READ THE FIRST TIME - REFERRALS
02/15/22	(S)	HSS, FIN
05/03/22	(S)	HSS AT 1:30 PM BUTROVICH 205

WITNESS REGISTER

REPRESENTATIVE LIZ SNYDER
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Sponsor of HB 392.

ALLIANA SALANGUIT, Staff
Representative Liz Snyder
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Presented the sectional analysis for HB 392.

CHRISTINE KRAMER, DNP and APRN
Anchorage, Alaska

POSITION STATEMENT: Testified by invitation on HB 392.

CHRISTOPHER DITTERICH, PA, Past President
Alaska Academy of Physician Assistants
Palmer, Alaska

POSITION STATEMENT: Testified by invitation on HB 392.

CINDY FULLER, representing self
Juneau, Alaska

POSITION STATEMENT: Testified in support of SB 191.

RICH ANDERSON, representing self
Juneau, Alaska

POSITION STATEMENT: Testified in support of SB 191.

Elize Gavitt, representing self
Juneau, Alaska

POSITION STATEMENT: Testified in support of SB 191.

LISA WARD, representing self
Juneau, Alaska

POSITION STATEMENT: Testified in support of SB 191.

ACTION NARRATIVE

[1:35:57 PM](#)

CHAIR DAVID WILSON called the Senate Health and Social Services Standing Committee meeting to order at 1:35 p.m. Present at the call to order were Senators Costello, Hughes, Begich, Reinbold and Chair Wilson.

HB 392-EXPAND ADV PRC REG NURSE, PHYS ASSIS AUTH

[1:36:52 PM](#)

CHAIR WILSON announced the consideration of CS FOR HOUSE BILL NO. 392 (HSS) am "An Act relating to advanced practice registered nurses and physician assistants; and relating to death certificates, do not resuscitate orders, and life sustaining treatment."

[1:37:12 PM](#)

REPRESENTATIVE LIZ SNYDER, Alaska State Legislature, Juneau, Alaska, sponsor of HB 392, introduced the legislation speaking to the sponsor statement that read as follows:

HB 392 updates statute so Advanced Practice Registered Nurses (APRNs) and Physician Assistants (PAs) can provide more support for the seriously ill and their families. APRNs are Registered Nurses (RNs) with a master's degree in nursing and additional specialized education and training. Physician Assistants also have a master's degree and additional clinical training.

In 1984, Alaska became one of the very first states to give APRNs full practice authority. Full practice authority means APRNs can use their expanded knowledge and skillset to prescribe, diagnose, or treat patients independently within their specialization. A common example of this is Nurse Practitioners (NP), a type of APRN, working as primary care providers for many of us.

APRNs are authorized to independently oversee end of life care, including assisting with Do Not Resuscitate (DNR) orders and the Physician's Order for Life Sustaining Treatment (POLST). Similarly, PAs examine, diagnose, and treat patients, including participating in end-of-life care discussions, as part of a health care team. However, statute does not allow APRNs or PAs to sign and finalize these documents—only physicians can. This can cause administrative delays and unnecessary additional stress for families if a physician is unavailable.

Additionally, current statute allows a registered nurse to declare a death but only if a physician documents the anticipated reason for the death. A registered nurse can also sign a death certificate, but it must be certified by a physician within 24

hours. HB 392 revises statute so APRNs and PAs can also certify a death certificate. While the bill is narrow in scope, it helps many and especially those at vulnerable times.

Passage of HB 392 brings Alaska in line with 34 other states and the District of Columbia where APRNs have full practice authority and are allowed to sign DNR and POLST form; 37 other states and the District of Columbia where APRNs have full practice authority and can sign death certificates; 30 states where PAs can sign DNR and POLST forms; and 28 other states where a PA can sign a death certificate.

[1:41:19 PM](#)

ALLIANA SALANGUIT, Staff, Representative Liz Snyder, Alaska State Legislature, Juneau, Alaska, presented a summary of the sectional analysis for HB 392 that read as follows:

Sec. 1: Amends AS 08.68.700(a) Determination of death by registered nurse by allowing a Registered Nurse (RN) to pronounce or determine a death of a person if a physician or an advanced practice registered nurse (APRN) or physician assistant (PA) has documented in the person's medical or clinical record that the person's death is anticipated.

Sec. 2: Amends AS 08.68.700(b) by allowing an RN to sign a determination of death if a physician, APRN, or PA has previously documented the person's condition.

Sec. 3: Amends AS 08.68.700(c) by allowing an APRN or PA to certify a death determined by an RN within 24 hours of the determination of death.

Sec. 4: Amends to 08.68.700(d) by adding "an advanced practice registered nurse, or a physician assistant" and physician assistant as a conforming change to statute regarding health care facilities' policies and procedures for determination and pronouncement of death by a registered nurse.

Sec. 5: Amends AS 13.62.065 Do not resuscitate protocol and identification requirements (a) by allowing APRNs and PAs to issue a do not resuscitate order.

MS. SALANGUIT noted that Section 5 was further amended on the House floor requiring the written consent of the patient or the parent or guardian of a minor for a DNR order to be issued.

Sec. 6 & 7: Adds conforming language to AS 13.62.065 Do not resuscitate protocol and identification requirements to ensure APRNs and PAs are subject to the same rules and protocols as physicians.

Sec. 8: Adds language to AS 13.62.065(f) Do not resuscitate protocol and identification requirements allowing APRNs and PAs to revoke a do not resuscitate order.

Sec. 9: Adds "or an advanced practice registered nurse, or a physician assistant" to 13.52.080(a)(5) Immunities as a conforming change.

Sec. 10: Amends AS 13.52.100(c) Capacity by adding "an advanced practice registered nurse, or a physician assistant" to language regarding protocols and how do not resuscitate orders govern decisions regarding cardiopulmonary resuscitation and other life-sustaining procedures.

Sec. 11: Amends AS 13.52.300 Optional Form by adding "an advanced practice registered nurse, or physician assistant" to the Advanced Health Care Directive Form.

Sec. 12: Amends AS 13.52.390(12) Definitions by adding "an advanced practice registered nurse, or physician assistant" to language defining "do not resuscitate order."

Sec. 13: Amends AS 13.52.390(23) Definitions by adding "an advanced practice registered nurse, or physician assistant" to language defining "life-sustaining procedures."

Sec. 14: Adds a new paragraph to AS 13.52.390(38) defining an "advanced practice registered nurse" and "physician assistant" by referring to the definition in AS 08.68 Nursing and AS 08.64.107 Regulation of Physician Assistants and Intensive Care Paramedic respectively.

Sec. 15: Amends AS 18.15.230(c) by adding "advanced practice registered nurse, or the physician assistant" to the instructions for completing a death certificate.

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CHAIR WILSON turned to invited testimony.

[1:44:04 PM](#)

CHRISTINE KRAMER, DNP and APRN, Anchorage, Alaska, testified by invitation on HB 392. She stated that she has been practicing for 23 years, primarily in hospitals. She reviewed her credentials and specific work history and advised that she would talk from perspective of an APRN about how this bill impacts practice. She recounted that when a patient is admitted from the emergency department, their code status must be determined through discussion with the patient and their family. This is documented in the admission notes and orders are written to reflect those wishes. The NP is an integral part of the treatment team throughout the patient's hospitalization. If the patient passes, that is documented in the death summary. The NP provides all this documentation but cannot sign the death certificate. Under the current process a physician must sign the death certificate even though they may not be familiar with the patient care and case, and this may delay the signing. HB 392 changes this practice and would allow the NP to sign the death certificate. She offered her professional opinion that this legislation would improve care for patients who are critically ill and facing end-of-life issues.

[1:46:59 PM](#)

SENATOR COSTELLO referenced Section 5 and offered her understanding that an Alaskan can sign a DNR form and have it on file in anticipation of needing it someday. She asked Dr. Kramer to comment.

DR. KRAMER said that's correct, but what frequently happens is that family members are aware of the document but don't know where it is filed. If the document is on file at Providence Hospital she can look it up, but frequently that is not the case.

CHAIR WILSON said he didn't believe she tailored her answer to Section 5.

[1:48:58 PM](#)

SENATOR COSTELLO said her reading is that the DNR may have been written and signed in advance or the parent or guardian of a minor can make the decision when the need arises. It also says the nurse or physician shall document the grounds for the order in the patient's medical file.

DR. KRAMER asked if she was talking about the amendment [that passed on the House floor].

SENATOR COSTELLO said yes. She added that she knows DNR forms can be filled out in advance, she just wanted it on the record. She called it prior consent.

DR. KRAMER offered her perspective that requiring a patient to sign their consent to their DNR status when they're just coming from the emergency department could be difficult to impossible depending on the patient's condition.

[1:52:08 PM](#)

CHAIR WILSON asked if she understood that the discussion was about an amendment that passed on the House floor.

DR. KRAMER answered yes.

REPRESENTATIVE SNYDER said a concern that she has with the floor amendment is that a spouse may not be able to decide on what to do with a DNR if the patient doesn't have paperwork on file and is suddenly incapacitated. The other concern is what to do in situations where it is not possible to obtain written consent from the patient.

[1:54:23 PM](#)

DR. KRAMER said she didn't believe the floor amendment would prevent a spouse from signing a DNR on the patient's behalf. Alaska statutes make the spouse the decision maker in those situations, but they would have to be present at the hospital to sign the paperwork.

SENATOR HUGHES asked if she agreed that the part of Section 5 that requires written consent was a bit redundant because the forms are by either the patient or the family.

[1:56:54 PM](#)

DR. KRAMER agreed it was redundant. She also emphasized that the utmost attention is given to the patient's wishes when DNR orders are made and no decision is made without consent from the patient or the family.

SENATOR HUGHES asked if it's been a problem that DNR orders aren't defined in AS 13.52.065. She said she'd also like clarification on the record regarding what the sponsor brought up about a person's ability to make a DNR decision if their spouse is unable to do so.

[1:59:19 PM](#)

REPRESENTATIVE SNYDER asked Senator Hughes if she had seen the definition for "do not resuscitate order" in Section 12 that starts on page 18. She noted that there had been some discussion about adding the word "surrogate" to the language in Section 5 about those who have the ability to make a decision about a DNR order when the patient is unable to do so.

SENATOR HUGHES offered her perspective that the definition in Section 12 makes it sound as though the health care provider could issue a DNR order without advanced consent. She suggested that should be clarified and she would speak with the sponsor offline about whether that was a discussion to have with the drafter.

REPRESENTATIVE SNYDER said there are good reasons that the language in statute isn't as specific as the requirements and policies at the health provider level where signatures are required. She added that Ms. Salanguit would reach out to Senator Hughes about whether it was appropriate to speak with the drafter about this.

[2:03:23 PM](#)

At ease.

[2:04:10 PM](#)

CHAIR WILSON reconvened the meeting.

SENATOR HUGHES asked if there was any situation where a physician, and potentially PAs and nurse practitioners, would issue a DNR order without patient or family consent.

[2:04:46 PM](#)

DR. KRAMER answered yes, but it is highly unusual. It might happen when an individual is gravely ill and all efforts to locate the family have been unsuccessful. In that circumstance, two physicians look at the situation, perhaps in consultation with the Ethics Committee, consider the care options, and make a DNR judgement call. She then reiterated her concern with the

change in Section 5 that resulted from the House floor amendment.

[2:06:55 PM](#)

CHAIR WILSON clarified that Dr. Kramer was talking about a change made to Section 5 when the bill was in the other body. This committee was not considering an amendment.

[2:07:14 PM](#)

CHRISTOPHER DITTERICH, PA, Past President, Alaska Academy of Physician Assistants, Palmer, Alaska, stated that he was a practicing PA with Orion Behavioral Health Network and a behavioral health and primary care services provider with the Department of Corrections. He stated that NPs and PAs are integrative leaders in patient care teams who are in a good position and well able to provide end of life care decisions with patients and their families. He continued to say that PAs in particular are medical providers who diagnose illness, develop and manage treatment plans, prescribe medications, and often serve as the patient's principal health care provider. They are also specifically prepared to complete death certificates, provide life-sustaining treatment, and complete the DNR orders with patients.

[2:09:07 PM](#)

CHAIR WILSON opened public testimony on HB 392; finding none, he closed public testimony.

[2:09:29 PM](#)

At ease.

[2:11:54 PM](#)

CHAIR WILSON reconvened the meeting.

[2:11:59 PM](#)

SENATOR BEGICH directed attention to AS 13.52.065 related to the do not resuscitate protocol and AS 13.52.100 related to capacity [to make health care decisions]. He said it appears that the lingering issue about responsible party could be addressed with a minor amendment to the capacity statute.

[2:12:33 PM](#)

SENATOR HUGHES pointed out that PAs fall under the State Medical Board but APRNs do not. According to the current statute, APRNs have to comply with the protocol the department developed and the State Medical Board approved, so that would be the rule

regarding DNR that APRNs would have to follow in the situation where an individual either has no family or none can be located.

SENATOR BEGICH relayed that Senator Hughes was describing AS 13 52 065(d).

[2:13:43 PM](#)

CHAIR WILSON, finding no further questions or comments, held HB 392 in committee.

[2:14:08 PM](#)

At ease.

SB 191-REPEAL COVID 19 DISASTER EMERGENCY

[2:15:52 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 191 "An Act repealing emergency powers of the commissioner of health and social services and certain provisions related to the response to the novel coronavirus disease; and providing for an effective date."

[2:16:11 PM](#)

SENATOR LORA REINBOLD, speaking as the sponsor of SB 191, introduced the legislation by reading the following sponsor statement:

The purpose of SB 191 is to repeal the emergency powers of the commissioner of the Department of Health and Social Services related to the response to the novel coronavirus. The responsibility lies with the Governor, nowhere in the state or United States Constitution does it allow for this transfer of power. Separation of Powers is vital to the fabric of our country and state, repealing the emergency powers of the commissioner restores the delicate balance.

SENATOR REINBOLD directed attention to the sectional analysis for SB 191 and then discussed the reasons she feels SB 191 is so important. The sectional analysis read as follows:

Section One: Sections 4,9,10,13-16, 20, and 21 (b)-(e), Ch. 2, SLA 2021, are repealed.

Section Two: This Act takes effect immediately under AS 01.10.070 (c)

SENATOR REINBOLD relayed her belief that it was extremely important for either the Department of Law or the administration to tell Alaskans what the difference is between an emergency and a disaster declaration. She highlighted that the emergency Governor Dunleavy declared in March 2020 that was supposed to last just 30 days was still in effect, and that power regarding this emergency had been ceded to Commissioner Crum. She called this a massive abuse of power. She referenced SB 144 that she introduced to embolden the Legislative Branch to address emergencies and mentioned the vaccination bill of rights put forward in SB 156 that was related to SB 191.

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SENATOR REINBOLD stated that on December 20, 2021 she wrote a letter under the Freedom of Information Act asking the administration to provide answers to issues, and she would like those to be part of the record to explain why SB 191 is so important. She described the issues as follows:

1. Provide all clinical evidence of the isolated COVID-19 virus and know variants and where they had been identified and isolated. This is to justify the emergency. Question number 11, in particular, is a really good one.
2. Provide all clinical evidence that masks have been successful in preventing the spread of COVID-19, and which ones worked the best.
3. Provide all available clinical evidence that social distancing has been effective at stopping the spread of COVID-19.
4. Provide all clinical evidence that COVID-19 vaccines are in fact true traditional vaccines and that they provide immunity, not just mRNA therapy technology.
5. Provide all clinical evidence that COVID-19 vaccines are effective at preventing COVID-19 infection and which have been proven to be the most effective.
6. Provide all clinical evidence that COVID-19 vaccines are effective in preventing the spread and which vaccines have been proven to be the most effective, including the clinical data.
7. Provide all clinical evidence that COVID-19 vaccines have proven to be safe for human use, backed by clinical data. Please show the adverse events/deaths that have followed with the use of these vaccines and which have been least safe according to all available clinical evidence.
8. Provide a list of the ingredients in the COVID-19 vaccines, broken out by manufacturer.

9. Provide information regarding known adverse events regarding the COVID-19 vaccine.
10. Provide all evidence that pertains to COVID-19 vaccines in the US that each is fully FDA approved for broad use.
11. Provide all clinical evidence that an emergency exists to justify the emergency use of the products.
12. Provide the clinical information on the batches or lots of vaccine may carry the mRNA technology - either the RNA or the DNA, and any basic thing that could happen to that.
13. Provide all clinical documentation for the long-term effects, including the side effects of the mRNA vaccinations in COVID-19.

SENATOR REINBOLD stated that the response to the forgoing questions could be described as non-answers. She found this unacceptable because Alaskans have the right to know the answers. In conclusion she noted the zero fiscal note and urged the governor to answer the questions and lift this unnecessary emergency order.

SENATOR COSTELLO said she shares the concern that power that should reside with the governor has been ceded to an unelected official. She asked when Commissioner Crum's emergency powers would end if SB 191 did not pass.

[2:31:06 PM](#)

SENATOR REINBOLD answered that the bill has an immediate effective date, but Commissioner Crum has the power to end the emergency right now. She has requested an end to the emergency declaration repeatedly but to no avail. She understands that one reason is related to the enhanced SNAP benefits and she views that as an abuse of power. Her belief is that more people would return to work if benefits such as these were not available.

[2:32:45 PM](#)

SENATOR HUGHES referenced a bill that passed that says the commissioner's authority would expire either when the executive branch says the emergency is ending or when the Center for Disease Control (CDC) says the emergency is over. The federal emergency currently is under a 90-day extension that will end in mid-July. She acknowledged that the bill did designate narrow authority to the commissioner. The department could: provide public health services to mitigate the emergency, maintain federal benefits for SNAP and congregate sheltering, and procure and allocate medications related to the public health emergency.

[2:35:14 PM](#)

SENATOR BEGICH asked, since this is in uncodified law, would the question be moot as of June 30 when the Department of Health and Social Services ceases to exist. He also asked the sponsor to post the letter to DR. Zink on BASIS so it would be available to the public.

SENATOR BEGICH said his concern with SB 191 is that it goes beyond the commissioner's power. He specifically described Sections 9, and 10, ch. 2, SLA 2021 that would be repealed:

- Section 9 relates to legislation from Senator Costello currently under consideration in the House relating to charitable online gaming. He said he'd be reluctant to take away the ability for that to continue.
- Section 10 relating to school operating funds was removed from SB 111 to ensure a repeal date of June 30, 2025 because of the federal funding to the state for COVID and the American Rescue Plan Act (ARPA). The intention was for schools to have the ability to absorb that money.

SENATOR BEGICH and asked the sponsor why Sections 9 and 10 were included in SB 191. Both are issues of public policy that have not been settled, which could cause great hardship for school districts and charitable businesses that are operating online.

[2:39:23 PM](#)

SENATOR REINBOLD said she would like both her letter to Dr. Zink and the administration's response to be part of the public record.

SENATOR BEGICH clarified that he requested the letter from Dr. Zink, the sponsor's letter, and the response from the administration to be posted on BASIS.

SENATOR REINBOLD read the February 8, 2022 memorandum from Megan A. Wallace, Legal Services director:

Attached is the draft bill you requested, relating to the repeal of ch. 2, SLA 2021 (HB 76). Please note that some sections were not repealed, because they have already been repealed. More specifically, under sec. 21, ch. 2, SLA 2021, secs. 1 - 3, 5, 7, 8, 11, and 17 were repealed on April 30, 2021, when the governor declared that the public health disaster emergency no longer existed. I also did not repeal sec. 6, because the final report was due under that

section no later than January 31, 2022, which has already passed. Please note that considering your request to repeal the Act in its "entirety," I repealed sec. 12, which is a section preventing the governor from using the revised program legislative (RPL) process to increase an appropriation item for the fiscal years ending June 30, 2021, based on certain additional federal receipts. If you did not intend to repeal that restriction, please let me know. Finally, secs. 18 and 19 were not repealed, because they created new repeal dates for ch. 10, SLA 2020, which have already passed.

[2:41:30 PM](#)

SENATOR BEGICH said he was asking specifically about Sections 9 and 10, which the memo did not mention.

SENATOR REINBOLD provided the following response:

If we have another piece of legislation in play right now, it would probably be wise to just go ahead and move forward and not keep the whole state under, in some people's opinion, oppression. If we just need to just deal with gaming, let's deal with gaming. But we don't need to keep everybody in this unnecessary, constant over two year state of emergency. Also we can do gaming. To me that doesn't make sense.

[2:43:57 PM](#)

CHAIR WILSON opened public testimony on SB 191.

[2:44:19 PM](#)

CINDY FULLER, representing self, Juneau, Alaska, said the COVID-19 mitigations that are being done to people need to stop. There have been hundreds of kids that haven't been in class because they weren't masked. She asked the committee to pass SB 191 so people can get on with their lives and money could be spent on more important things.

[2:46:02 PM](#)

RICH ANDERSON, representing self, Juneau, Alaska, described traveling throughout the US last year and finding the conditions close to normal, but not in Juneau. He opined that the pandemic will be over when people decide it's over. As an issue it's becoming less relevant. He said it's time for people to get on with their lives because the fallout could be worse than the pandemic. People have anxiety disorders that "weren't on the

map" pre COVID. He urged the committee to help people move forward. He also voiced concern that power was given to nonelected people because the public didn't have a say and can't vote them from office.

[2:49:46 PM](#)

ELIZE GAVITT, representing self, Juneau, Alaska, stated that she supports SB 191 because the mandates are ruining society and traumatizing children. People should trust their immune system.

[2:50:20 PM](#)

LISA WARD, representing self, Juneau, Alaska, stated support for SB 191. She asked when in history an emergency lasted two years and emphasized that it was time to move forward.

[2:51:06 PM](#)

CHAIR WILSON closed public testimony on SB 191.

SENATOR COSTELLO referenced an earlier question about what would happen to the more than 800 charities that are permitted to conduct online gaming to support things like youth sports and other activities. She explained that the online portion would end June 30 unless SB 201 were to pass.

SENATOR BEGICH clarified that Section 10 does not have anything to do with spending money for masks for students. It's about an issue that's been debated for years about whether to give school districts flexibility on their fund balances. That provision was removed from SB 111, and if SB 191 were to pass as currently drafted, it would not be possible to address that fund balance issue. That is the reason for his concern about SB 191.

[2:52:47 PM](#)

SENATOR REINBOLD said she would be happy to work with Senator Begich and Senator Costello to resolve the issues related to school operating funds and online gaming.

SENATOR HUGHES said she too was concerned that SB 191 included Section 10, ch. 2, SLA 2021. She continued to say that she appreciates the sponsor's efforts, but wonders if Mayor Bronson was relying on the federal COVID funding to develop a long term strategy to address shelter for the homeless. She asked the sponsor if she had been in conversations with Mayor Bronson.

SENATOR REINBOLD answered that she had spoken to Mayor Bronson, but on a different topic. She said the disaster declaration has created a disaster that the state may never recover from, and

the entire state should not have to be in a state of emergency to deal with the homeless issue, as important as it is.

[2:56:43 PM](#)

CHAIR WILSON reviewed the questions the committee posed that require follow up.

[2:57:40 PM](#)

At ease.

[2:57:54 PM](#)

CHAIR WILSON reconvened the meeting and reviewed the committee schedule.

CHAIR WILSON held SB 191 in committee.

[2:58:35 PM](#)

There being no further business to come before the committee, Chair Wilson adjourned the Senate Health and Social Services Standing Committee meeting at 2:58 p.m.