

ALASKA STATE LEGISLATURE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

February 28, 2023

3:31 p.m.

MEMBERS PRESENT

Senator David Wilson, Chair
Senator James Kaufman, Vice Chair
Senator Forrest Dunbar
Senator Cathy Giessel

MEMBERS ABSENT

Senator Löki Tobin

COMMITTEE CALENDAR

SENATE BILL NO. 53

"An Act relating to involuntary civil commitments."

- HEARD & HELD

SENATE BILL NO. 51

"An Act exempting veterinarians from the requirements of the controlled substance prescription database; and providing for an effective date."

- HEARD & HELD

SENATE BILL NO. 59

"An Act relating to the licensing of runaway shelters; relating to advisors to the board of trustees of the Alaska Mental Health Trust Authority; relating to the sharing of confidential health information between the Department of Health and the Department of Family and Community Services; relating to the duties of the Department of Health and the Department of Family and Community Services; and providing for an effective date."

- HEARD & HELD

PREVIOUS COMMITTEE ACTION

BILL: SB 53

SHORT TITLE: COMPETENCY; INVOLUNTARY CIVIL COMMITMENTS

SPONSOR(S): SENATOR(S) CLAMAN

02/01/23 (S) READ THE FIRST TIME - REFERRALS
02/01/23 (S) HSS, JUD
02/21/23 (S) HSS AT 3:30 PM BUTROVICH 205
02/21/23 (S) Heard & Held
02/21/23 (S) MINUTE(HSS)
02/28/23 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 51

SHORT TITLE: CONTROLLED SUB. DATA: EXEMPT VETERINARIAN
SPONSOR(S): SENATOR(S) TOBIN

02/01/23 (S) READ THE FIRST TIME - REFERRALS
02/01/23 (S) HSS, L&C
02/28/23 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 59

SHORT TITLE: RUNAWAYS; DFCS/DOH: DUTIES/LICENSING/INFO
SPONSOR(S): RULES BY REQUEST OF THE GOVERNOR

02/06/23 (S) READ THE FIRST TIME - REFERRALS
02/06/23 (S) HSS
02/28/23 (S) HSS AT 3:30 PM BUTROVICH 205

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SHORT TITLE: COMPETENCY; INVOLUNTARY CIVIL COMMITMENTS
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02/28/23 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 59

SHORT TITLE: RUNAWAYS; DFCS/DOH: DUTIES/LICENSING/INFO
SPONSOR(S): RULES BY REQUEST OF THE GOVERNOR

02/06/23 (S) READ THE FIRST TIME - REFERRALS

02/06/23 (S) HSS
02/28/23 (S) HSS AT 3:30 PM BUTROVICH 205

WITNESS REGISTER

SENATOR CLAMAN, District H
Alaska State Legislature
Juneau, Alaska
POSITION STATEMENT: Sponsor of SB 53.

EMMA POTTER, Staff
Senator Claman
Alaska State Legislature
Juneau, Alaska
POSITION STATEMENT: Provided a summary of changes for SB 53.

JOHN SKIDMORE, Deputy Attorney General
Criminal Division
Alaska Department of Law
Anchorage, Alaska
POSITION STATEMENT: Answered questions on SB 51.

TREVOR BAILLY, Staff
Senator Löki Tobin
Alaska State Legislature
Juneau, Alaska
POSITION STATEMENT: Offered the sponsor statement and sectional analysis for SB 51 on behalf of the sponsor.

RACHEL BERNGARTT, DVM, JD, Chair
Board of Veterinary Examiners
Juneau, Alaska
POSITION STATEMENT: Testified by invitation on SB 51.

TRACY WARD, DVM, Past-President
Board of Veterinary Examiners
Juneau, Alaska
POSITION STATEMENT: Testified by invitation on SB 51.

SUZE NOLAN, Manager
North Pole Veterinary Hospital
North Pole, Alaska
POSITION STATEMENT: Testified in support of SB 51.

MELISSA BECKER, representing self
Fairbanks, Alaska
POSITION STATEMENT: Testified in support of SB 51.

HEATHER CARPENTER, Deputy Director
Office of the Commissioner
Department of Health (DOH)
Juneau, Alaska

POSITION STATEMENT: Provided the sectional analysis for SB 59.

CLINTON LASLEY, Deputy Commissioner
Department of Family & Community Services
Juneau, Alaska

POSITION STATEMENT: Introduced SB 59 on behalf of Governor Dunleavy.

STEVE WILLIAMS, CEO
Alaska Mental Health Trust
Anchorage, Alaska

POSITION STATEMENT: Answered questions on SB 59.

ACTION NARRATIVE

[3:31:08 PM](#)

CHAIR DAVID WILSON called the Senate Health and Social Services Standing Committee meeting to order at 3:31 p.m. Present at the call to order were Senators Kaufman, Dunbar, Tobin, Giessel, and Chair Wilson.

SB 53-COMPETENCY; INVOLUNTARY CIVIL COMMITMENTS

SB 53-COMPETENCY; INVOLUNTARY CIVIL COMMITMENTS

[3:31:43 PM](#)

CHAIR WILSON announced the consideration of SENATE BILL NO. 53 "An Act relating to involuntary civil commitments."

[3:32:57 PM](#)

SENATOR MATT CLAMAN, District H, Alaska State Legislature, Juneau, Alaska, sponsor of SB 53 said his office suggested changes to SB 53 and that Ms. Potter would provide a summary of changes.

[3:33:14 PM](#)

EMMA POTTER, Staff, Senator Claman, Alaska State Legislature, Juneau, Alaska, provided an explanation of proposed changes from Senator Claman's office to SB 53 as follows:

We are suggesting adding the crime of arson to the legislation. This change reflects suggestions our office received from the Criminal Division of the

Department of Law. It is their belief that including the felony offense of arson, in addition to a felony offense against the person, is necessary for public safety. The suggested change includes conforming changes in Section 1, Section 2, and Section 4 of the legislation.

There are two suggested changes to Section 4 of the legislation. The first change is the removal of the word "repeated" from Section 4, line 8. It is our intention that the provisions outlined in the legislation apply upon a person's first dismissal of a felony level offense against a person. The second change modifies Section 4(e). The subsection relates to the ability of individuals to petition for early release. The suggested change is to create a one-year limit on a new petition from the individual both after the initial order for involuntary commitment up to five years and a subsequent denial of a petition for early release.

There are three suggested changes in AS 12.47.100. The first change is to add a requirement that requests for competency evaluation in AS 12.47.100 to be written requests. The second change allows the court to order defendants evaluated for competency at out-patient facilities while on bail. The third change states that when the psychiatrist or psychologist finds that the defendant is incompetent and the defendant is charged with a felony offense against the person or arson, the psychiatrist or psychologist may evaluate the defendant for involuntary commitment. The fourth change allows the court to order defendants treated for competency restoration at out-patient facilities on bail.

Other changes to Title 12 include increasing the maximum time a person can be held for restoration competency from one year to two years, adding language that if a court dismisses the charges against a defendant for incompetence for a felony offense against a person or arson, the defendant may not be discharged until 72 hours after the court dismisses the charges. This is meant to allow time for the civil commitment petition to be filed.

The final change for Title 12 is changing the number of evaluations by a psychiatrist or psychologist from two to one for the insanity defense. This will match the number of evaluations required for the insanity defense to the number of evaluations required in the process for both the evaluation for competency and involuntary commitment.

The final group of changes to the legislation that we are proposing addresses alleged victim notice in the specific instance for an individual found incompetent to stand trial and related felony level offenses against the person or arson are dismissed.

The current version of the bill creates a duty for the department of law to file a civil commitment petition upon the dismissal of felony level offenses against the person based on an incompetency finding. The first change is a process change and would require the Criminal Division to notify the Civil Division of the Department of Law within 24 hours of charges being dismissed in the situation that the bill addresses. The second change is also a process change, and states that the Civil Division shall file a petition for involuntary commitment within 72 hours of the dismissal of charges in the situation that the bill addresses. The third change is creating a right for the alleged victim in the dismissed criminal charges to receive notice of the time and place of any civil commitment proceeding of the courts finding, any civil commitment proceeding, including the length of time for which the respondent is committed, and of when the respondent is discharged from any civil commitment.

[3:36:42 PM](#)

SENATOR GIESSEL said that in SB 53, page 2, line 12, the word "repeated" appears. She asked if it would also be removed.

SENATOR CLAMAN replied that the intent is to remove all references to the word "repeated."

[3:37:14 PM](#)

SENATOR DUNBAR noted that Senator Claman's office had conversed with the Criminal Division of the Department of Law regarding changes to SB 53. He asked Senator Claman if his office had considered the notional changes in Disability Law Center's letter.

[3:37:53 PM](#)

SENATOR CLAMAN said he is always happy to talk with the Disability Law Center. The center has yet to schedule a meeting, but his office has worked successfully with the center in the past. He said he does not agree with their interpretation of SB 53 in all instances. He stated his belief that the center does not like the notional five-year commitment. He opined that other than dismissing SB 53, the only resolution the center would consider is returning to a six-month commitment process.

[3:38:42 PM](#)

SENATOR DUNBAR asked if there would be a committee substitute for SB 53 rather than amendments.

[3:38:54 PM](#)

CHAIR WILSON said that was correct. The committee previously ran out of time to talk about changes to SB 53. He wanted to allow the sponsor time to talk about the changes and receive community feedback before requesting a committee substitute.

[3:39:14 PM](#)

SENATOR DUNBAR said he is uncomfortable adding arson to SB 53 because it is a novel bill that changes criminal law in response to a tragedy. He opined that changes to criminal law should be narrowly focused on a set of circumstances. He said he understands the Criminal Division's perspective because arson is dangerous; but so is drunk driving, which may kill more people on average than arsonists. He said that once crimes other than against people are included, a variety of crimes may fall into the dangerous category. There may be enough votes in favor of including arson, but he does not favor its inclusion in SB 53.

[3:40:36 PM](#)

SENATOR CLAMAN said SB 53 will not suddenly create a massive number of people that will fall into a very narrow focus of incompetent, non-restorable people who reach a certain level of dangerousness. He said he does not think there is a history of felony DUI offenders being incompetent and non-restorable. He suggested Mr. Skidmore could explain why arson should be included in SB 53 along with the other felony crimes against a person.

[3:42:10 PM](#)

JOHN SKIDMORE, Deputy Attorney General, Criminal Division, Alaska Department of Law, Anchorage, Alaska, said the division included arson in SB 53 because the elements of the crime,

particularly arson in the first degree, require another person to be harmed or be at risk of harm. He said the same steps would not apply to someone with a DUI unless another person were injured, thereby making it a DUI with felony assault, which would be in the same conduct group listed in SB 53. He said that from his 25 years of practice, the most serious cases the division sees are homicides, sexual assaults, and arson. When released from care, individuals with mental health issues pose the greatest danger and risk to the public. Including arson in SB 53 is ultimately a policy call for the legislature to make.

[3:43:52 PM](#)

SENATOR DUNBAR asked if it is correct to say felony arson should be included in SB 53 because the crime satisfies similar elements to a crime against a person, but for some reason, arson is not categorized as a crime against a person.

[3:44:19 PM](#)

MR. SKIDMORE replied that the state codified arson in AS 11.46, property offenses. However, arson involves an element of danger or risk of danger to others which separates it from the type of conduct seen in most property crimes. The rationale is that setting fire to a structure places other human beings at risk of physical harm. That is why it makes sense from a policy perspective to include it in SB 53 with other crimes against a person.

[3:45:09 PM](#)

SENATOR DUNBAR asked whether an arsonist would have to know someone was in the building before the crime could be classified as being against a person. Senator Dunbar compared the governor's bill on fentanyl distribution to arson. The governor is seeking additional penalties for fentanyl distribution. Distribution is not a crime against a person, but it is being categorized as one of the most dangerous crimes, and it is likely to result in the deaths of many people. He asked why felony arson is worse than fentanyl distribution.

[3:45:52 PM](#)

MR. SKIDMORE responded that the nature of arson poses a risk to others and therefore does not require foreknowledge of someone in the building. The governor's bill on fentanyl distribution penalties addresses the crimes of manslaughter or homicide, which are AS 11.41 crimes. SB 53 would include AS 11.41 crimes because they are crimes against a person. He opined that simple distribution of drugs would not suddenly be a crime included in SB 53. However, when distribution of drugs causes the death of

someone there are provisions in crimes against persons that apply.

[3:47:00 PM](#)

SENATOR KAUFMAN said there is a boundary between operating with intent versus being incompetent to act with intent. He asked Mr. Skidmore to speak to intent and the topics mentioned. For example, he wondered how somebody would be a drug dealer via mental incompetence. He opined that drug dealing would require a certain competence that maybe drunk driving and arson would not.

[3:48:13 PM](#)

MR. SKIDMORE said SB 53 addresses when an individual has engaged in conduct that would be considered criminal but for their inability to assist in their defense; this is the definition of incompetency. The state attempts to restore the person to competency. If restoration cannot occur, there are questions about whether a person meets the standards for civil commitment. Competency is not about a person's ability to engage in conduct. There are two elements to any criminal act, the actus reus which is the physical act, and mens rea which is the mental element. Competency is the ability to assist counsel in defending against accusations. The intent is the ability for someone to decide they will commit a particular action, which is not what incompetency necessarily addresses.

[3:49:45 PM](#)

CHAIR WILSON held SB 53 in committee.

[3:50:09 PM](#)

At ease.

SB 51-CONTROLLED SUB. DATA: EXEMPT VETERINARIAN

[3:51:04 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 51 "An Act exempting veterinarians from the requirements of the controlled substance prescription database; and providing for an effective date."

[3:51:32 PM](#)

TREVOR BAILLY, Staff, Senator Löki Tobin, Alaska State Legislature, Juneau, Alaska, presented the following sponsor statement for SB 51 on behalf of the sponsor:

[Original punctuation provided.]

In 2008, in response to the nationwide opioid epidemic, the Alaska State Legislature created the Prescription Drug Monitoring Program (PDMP). This program created a database of prescriptions for controlled substances in Alaska, with the stated intent was to place obstacles in front of individuals seeking opioids from multiple providers. In 2016, the Legislature expanded the program to include veterinarians. Unfortunately, the program failed to account for the major differences between the practice of human medicine and veterinary medicine. SB 51 addresses this conflict by exempting veterinarians from the Prescription Drug Monitoring Program.

Eliminating the requirement for veterinarians in Alaska to use the PDMP does not cause deregulation. Veterinarians will continue to be covered by federal statutes and regulated by the Drug Enforcement Agency (DEA) and the Alaska Board of Veterinary Examiners. Additionally, provisions in state statute will continue to limit the number of opioids a veterinarian can prescribe to a seven-day prescription, with two exceptions. Those exceptions are if the prescription is part of long-term chronic care, or if there is logistical or travel barrier to returning within seven days.

Prescription drug monitoring is not unique to Alaska. All 50 states have some variation of prescription drug monitoring, with 34 states exempting veterinarians. Previously, 10 of those states mandated veterinarians be part of prescription drug monitoring efforts; however, those states soon realized that including veterinarians had no clear benefit. Instead, these states found that including veterinarians in their prescription drug monitoring programs placed unnecessary time-consuming barriers on those who practice veterinary medicine. In Alaska, the PDMP fails to be effective because animal patients do not have identifiers such as social security numbers. As a result, veterinarians must try to get the private health data of those who seek care for their animals prior to treating the animal. This is both inefficient and an invasion of privacy.

Senate Bill 51 seeks to correct an overexpansion of the Prescription Drug Monitoring Program to ensure continued access to veterinary care in Alaska.

[3:54:13 PM](#)

MR. BAILLY presented the following sectional analysis for SB 51:

[Original punctuation provided.]

Section 1

Deletes the requirement that the Board of Veterinary Examiners to notify the Board of Pharmacy when a practitioner registers with the controlled substance prescription database.

Section 2

Creates a new subsection in the controlled substance prescription database statutes that exempts veterinarians from the requirements of the controlled substance prescription database.

Section 3

Repeals the subsection that requires veterinarians register with the controlled substance prescription database.

Section 4

The act takes effect immediately upon passage.

MR. BAILEY commented that SB 51 is an iteration of legislation from the 32nd legislature. Although SB 51 may look substantially different from the previous bill, it still has the same legislative purpose and intent. The legislative legal department made SB 51 clear and succinct while meeting the goals of the previous legislation.

[3:55:20 PM](#)

CHAIR WILSON announced invited testimony on SB 51.

[3:55:55 PM](#)

RACHEL BERNGARTT, DMV, JD, Chair, Board of Veterinary Examiners, Juneau, Alaska, introduced herself as a doctor of veterinary medicine and a lawyer.

[3:56:16 PM](#)

TRACY WARD, DVM, Past-President, Board of Veterinary Examiners, Juneau, Alaska, stated she is a veterinarian that practices animal rescue.

[3:56:32 PM](#)

DR. BERNGARTT turned to slides 2 - 3 and said SB 51 exempts veterinarians from the controlled substance prescription database requirements. The Alaska State Veterinary Medical Association (AKVMA) and the Board of Veterinary Examiners (BOVE) support SB 51. Also, the Alaska Board of Pharmacy, which administers the PDMP, passed a motion on February 18, 2022, that supports the exemption of veterinarians from participation.

[3:57:01 PM](#)

DR. WARD turned to slide 4 and said the PDMP was established with voluntary participation in 2008. In 2016, House Bill 159 was amended due to the increase in opioid use in the US. The amendment mandated participation for all actively licensed practitioners who held a drug enforcement agency (DEA) license to prescribe, administer, or dispense controlled substances on the federal II, III, or IV drug schedules. The change went into effect in 2017. The committee that was formed to discuss the amendment included all affected boards except AKVMA and BOVE.

[3:58:24 PM](#)

DR. WARD turned to slide 5 and spoke to the following points:

[Original punctuation provided.]

2008: Alaska's PDMP established by SB 196.

2017: In reaction to growing opioid epidemic, the PDMP was amended by via HB 159 to include all DEA permit holders, including veterinarians.

Neither AKVMA nor BOVE were consulted regarding this amendment.

PDMP reporting is required for all actively licensed practitioners who hold a Federal Drug Enforcement Agency registration number and who prescribe, administer, or dispense federally scheduled II - IV controlled substances in the state.

[4:00:02 PM](#)

DR. WARD moved to slides 5 - 7 and discussed why it makes sense to exempt veterinarians from the PDMP:

[Original punctuation provided.]

The PDMP is not an effective database for veterinarians or our patients.

- The PDMP was established for human medicine. Querying of PDMP data for animals is not possible with the PDMP (and reported drugs for an animal are not visible in the PDMP database).
- A query is made on the individual(s) that bring the animal to the veterinarian and human data is obtained, not animal data.
- Human data obtained from the PDMP query is not usable for the veterinarian. Veterinarians are not trained in human medicine to understand what the dosages mean.

Querying of human PDMP information is invasion into an individual's medical privacy.

- Clients find it intrusive when the veterinarian is required to query their private health data in the PDMP
- An individual's private medication information becomes known to the veterinarian for certain drugs, such as narcotics, sedatives, and stimulants.

Examples of some common medications seen include, but are not limited to: Adderall, Ritalin, anabolic steroids such as testosterone, postpartum depression medications, sex hormones, Xanax, Klonopin, Valium, Ativan, Domar, and sleep aids like Ambien and Lunesta.

Veterinarians are monitored by the Drug Enforcement Agency and must adhere to controlled substance regulations.

- Veterinarians who prescribe or dispense controlled substances are licensed through the Drug Enforcement Agency (DEA). There is already a

significant level of accountability, record keeping, and medication storage requirements that veterinarians must adhere to.

- Distributors of controlled substances monitor utilization patterns of veterinarians. The Suspicious Order Monitoring System is in place and data is gathered by distribution companies who are required by the DEA to monitor and report unusual purchase patterns a veterinarian may have. Distributors are required to flag purchases that fall outside of norms for either previous purchase history or the norms for practices of similar size/type. DEA oversight is to control/prevent diversion from licensed professionals to drug dealers and users.

[4:03:03 PM](#)

DR. BERNGARTT moved to slide 8 and spoke about why it makes sense from a licensing perspective to exempt veterinarians from the PDMP:

[Original punctuation provided.]

33 other states have exempted veterinarians from participating in the PDMP.

- 10 states formerly mandated veterinary reporting but repealed their inclusion due to the problems experienced, lack of identified benefits to veterinary participation, and demonstration that exempting veterinarians does not decrease protection of public health and safety. These states are Alabama, Arizona, Idaho, Illinois, Kansas, Kentucky, Louisiana, New Mexico, West Virginia (2021), and Wyoming.
- Missouri was the last state to implement a PDMP in 2021 and did not require veterinarians to participate.

[4:04:23 PM](#)

DR. BERNGARTT turned to slide 9 and said the drugs most often implicated in overdose and death are not drugs veterinarians prescribe. The graph depicts trends in US drug overdose deaths from 1999 - 2021. She noted a correction to the synthetic opioids category stating deaths have increased 97-fold,

excluding methadone overdose. Fentanyl and oxycodone are synthetic opioids that are increasing deaths the most. Veterinarians do not prescribe these two drugs for dispensing. Veterinary fentanyl is administered directly to the animal at the hospital. Oxycodone does not have veterinary usage. It is important to remember that veterinarians do not dispense the drugs that cause problems in the US. She said opioid medications prescribed by veterinarians (728,223) were only 0.34 percent of the total opioid prescriptions (214 million) dispensed by US retail pharmacies in 2017.

[4:06:11 PM](#)

DR. BERNGARTT said the PDMP is just one tool for monitoring veterinary drug use. There is a natural barrier that prevents drug seekers from using veterinarians for doctor shopping. Veterinarians require upfront payment for services. If a person cannot pay for veterinary services, a pet will not receive the diagnostic services necessary for a vet to consider dispensing an opiate. Also, if a vet dispensed a drug, it may not be a sought-after drug. Exempting veterinarians from the PDMP is not expected to make them a source for doctor shopping.

[4:08:09 PM](#)

SENATOR KAUFMAN said one of the objections he has heard is that the .34 percent of opioid medication prescribed by veterinarians would increase if veterinarians were exempt. He asked if it would be possible for a person to visit several veterinary locations with a dog in obvious pain, pay for services, and receive desirable opioids.

[4:08:58 PM](#)

DR. WARD said anything is possible, but it would be improbable. Given the current veterinary shortage, the wait time to see a vet is 3 - 14 days. A visit to the vet for an animal in pain costs approximately \$500 - 800. Rarely are opioids a vet's first choice for an animal in pain. A vet usually admits an animal if it is in enough pain to receive an opioid. The medication is dispensed to the animal by the vet. She estimated that animal owners had gone home with something other than a non-steroidal anti-inflammatory less than five times since beginning her practice. She stated that it is virtually impossible to visit several vets in a short amount of time to receive opioids.

[4:10:44 PM](#)

SENATOR KAUFMAN asked whether veterinarians typically act as the dispensary for the medications they prescribe and, if so, would the passage of SB 51 create any tracking issues.

[4:11:12 PM](#)

DR. BERNGARTT said approximately 60 veterinarians directly dispense prescription-controlled substances from their clinics. The clinics may use the substances in their practice but also directly dispense them.

[4:12:04 PM](#)

SENATOR KAUFMAN asked if veterinarians dispense a controlled substance in a potency of interest to someone. He also asked if there would be a control mechanism to track dispersion if veterinarians were not in the PDMP.

[4:12:27 PM](#)

DR. WARD said 60 veterinarians in Alaska dispense drugs. The other 350 licensed veterinarians in Alaska send written prescriptions to pharmacies. Record keeping takes place at the pharmacy.

SENATOR KAUFMAN asked whether SB 51 would create a tracking gap if veterinarians who dispense controlled substances did not have to report using the PDMP.

[4:13:35 PM](#)

DR. WARD replied that there is a small potential gap. Most of the 60 Alaskan clinics dispense schedule IV drugs, such as phenobarbital, for seizure control. Only a handful of clinics dispense opioid class schedule II drugs.

[4:14:20 PM](#)

SENATOR DUNBAR asked how a vet would be caught if one of the 60 that distribute controlled substances did so illegally.

[4:14:55 PM](#)

CHAIR WILSON interjected that it might be helpful if Ms. Robb discussed the utilization of the PDMP because the Drug Enforcement Agency does not review the PDMP for bad actors.

[4:15:28 PM](#)

DR. BERNGARTT said a vet who engages in nefarious behavior with illicit drug consumption or distribution would not be captured by the PDMP because a vet who diverts drugs would not be entering those controlled substances into the data base. She said she is aware that the DEA caught one vet in eight years, and it was through drug log requirements.

[4:16:56 PM](#)

DR. BERNGARTT moved to slides 10 - 11 and spoke about the following points:

[Original punctuation provided.]

The unwieldy PDMP leads to costly and burdensome investigations of veterinarians by the Alaska Board of Veterinary Examiners.

Costly and onerous requirements for monitoring veterinarians have been placed on the board of veterinary examiners (BOVE).

Licensing fees for veterinarians will likely increase as a result of the cost to conduct needless investigations of veterinarians with DEA licenses. The cost of doing business will be passed on to consumers.

Alaska has the highest licensing fees for veterinarians in the country.

Licensing fees are expected to increase in the State of Alaska as a result of the cost of PDMP investigations.

Charging veterinarians for the cost of enforcement of an unusable PDMP system, and regulations with which they are unable to comply, is not responsible stewardship of resources.

[4:19:34 PM](#)

DR. BERNGARTT moved to slide 12, AKVMA and BOVE Ask For Support of SB 51, and read the following:

[Original punctuation provided.]

An Exemption of Veterinarians from participating in the PDMP:

Will allow veterinarians to provide the appropriate, timely, medical management appropriate for each patient.

Will increase the efficiency of the PDMP system for its intended purpose, by allowing for accurate interpretation of data and trends in human medicine.

Will allow continued judicious use of controlled substances that is already practiced by veterinarians.

Will eliminate unnecessary and disproportionate business burdens for veterinarians.

[4:20:25 PM](#)

CHAIR WILSON opened public testimony on SB 51.

[4:20:40 PM](#)

SUZE NOLAN, Manager, North Pole Veterinary Hospital, North Pole, Alaska, testified in support of SB 51. She said she is the practice manager for a veterinary hospital with nine doctors. She supports all the statements provided by the invited testifiers. She asked for a yes vote on SB 51.

[4:21:46 PM](#)

MELISSA BECKER, representing self, Fairbanks, Alaska, testified in support of SB 51. She said that as a veterinarian she has no interest in looking up pet owners' information before treating their pets. She does not dispense schedule II and III controlled substances. The PDMP does not work for animals because animals in shelters do not have owners, and children sometimes bring in their pets. Also, an animal's name is easily changed, and there is no way to prove it is the same animal.

[4:23:00 PM](#)

CHAIR WILSON closed public testimony on SB 51.

[4:23:23 PM](#)

CHAIR WILSON held SB 51 in committee.

[4:23:44 PM](#)At ease

SB 59-RUNAWAYS; DFCS/DOH: DUTIES/LICENSING/INFO

[4:24:50 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 59 "An Act relating to the licensing of runaway shelters; relating to advisors to the board of trustees of the Alaska Mental Health Trust Authority; relating to the sharing of confidential health information between the Department of Health and the Department of Family and Community Services; relating to the duties of the Department of Health and the Department of Family and Community Services; and providing for an effective date."

[4:25:48 PM](#)

MS. HEATHER CARPENTER, Deputy Director, Office of the Commissioner, Department of Health (DOH), Juneau, Alaska, gave a brief history of SB 59, stating that in 2021 Governor Dunleavy introduced Executive Order 119 that proposed splitting the Department of Health and Social Services into two departments, Department of Health and Department of Family and Community Services. Governor Dunleavy withdrew the order due to drafting errors and substantive changes that went beyond the powers of an executive order. Last session Governor Dunleavy reintroduced the bill as Executive Order 121. The legislature adopted the order that took effect July 1, 2022.

[4:26:41 PM](#)

CLINTON LASLEY, Deputy Commissioner, Department of Family & Community Services, Juneau, Alaska, said the departments knew that Executive Order 121 was a large bill and that the need for small amendments would surface. SB 59 contains those changes. It ensures that the new Department of Health (DOH) and the Department of Family and Community Services (DFCS) share important information, including confidential, protected health information necessary to administer programs within each department to serve Alaskans. It provides in statute the clarity of work that the Department of Health and Social Services supplied. The two departments interact daily. For example, eligibility information for an individual can pertain to DOH for public assistance and to DFCS for children's services. Also, SB 59 would make the commissioner of DFCS an adviser to the trustees of the Alaska Mental Health Trust. The departments knew of the substantive change and that a clean-up bill would be necessary. The Mental Health Trust supports the change. Clarifying statutes related to licensing duties assigned to the former Department of Health and Social Services are reassigned due to a citation error. Licensing related to runaway shelters is assigned to DOH, and foster homes licensing is assigned to DFCS. Finally, an amendment defines the "department" to include DFCS in AS 18.65.340.

[4:29:48 PM](#)

MS. CARPENTER presented the following sectional analysis for SB 59:

[Original punctuation provided.]

Section 1 Amends AS 12.62.400(a) to assign
responsibility for criminal history
checks for the licensing of runaway

shelters to the Department of Health rather than the Department of Family and Community Services. This is done to correct a mistake from EO 121 that assigned the licensing of runaway shelters to Department of Family and Community Services even though a division of Department of Health performs this work. Sections 4-9 also implement this correction.

Section 2 Amends AS 44.25.260 to add the Department of Family and Community Services Commissioner to the Alaska Mental Health Trust Authority board of advisors.

Section 3 Amends AS 47.05 by adding a new section:

- (1) requiring the Department of Health and Department of Family and Community Services share identifiable health information between and within departments as necessary to enable the efficient and effective administration and operation of both departments;
- (2) establishing that information acquired, used, disclosed, and stored under this section be stored in a confidential and secure environment;
- (3) establishes the definition of "identifiable health information" with the existing definition in AS 18.15.395.

Sections 4-9 Amends statute to identify that the Department of Health holds responsibility for the licensure of programs and drafting regulations related to runaway minors.

Sections 10 Amends AS 47.32.032 to provide clarifying language in licensing statute to identify that the Department of Family and Community Services is responsible for foster home licensing. This corrects a mistake from EO 121 that assigned the licensing of foster homes to Department of Health even though a division of

Department of Family and Community Services performs this work.

Sections 11-15 Amends AS 47.32 to provide clarifying language in licensing statute about the respective departments having responsibility for actions related to the entities they license.

Section 16 Establishes an immediate effective date.

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CHAIR WILSON said he had a question regarding Section 2. He asked how often advisors attend Alaska Mental Health Trust board meetings and what weight their input carries.

[4:34:56 PM](#)

STEVE WILLIAMS, CEO, Alaska Mental Health Trust, Anchorage , Alaska, answered that advisors attend once or twice a year. Commissioners and staff generally attend the board meetings. Various departments and trustees discuss the needs of beneficiaries, how partnerships can be improved, and the work of the trust. The dialogue is often very good.

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CHAIR WILSON asked if advisors are invited to each meeting or just as needed.

[4:35:40 PM](#)

MR. WILLIAMS replied that advisors typically are not invited to each meeting. The board meets four times a year and advisors attend once or twice a year.

CHAIR WILSON said he wanted to ensure more administrative influence was not added to a public board.

[4:36:12 PM](#)

CHAIR WILSON opened public testimony on SB 59.

[4:36:24 PM](#)

CHAIR WILSON closed public testimony on SB 59.

[4:36:52 PM](#)

CHAIR WILSON held SB 59 in committee.

[4:37:42 PM](#)

There being no further business to come before the committee, Chair Wilson adjourned the Senate Health and Social Services Standing Committee meeting at 4:37 p.m.