

ALASKA STATE LEGISLATURE
SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE

April 11, 2023

3:31 p.m.

MEMBERS PRESENT

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

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

CONFIRMATION HEARING(S)

State Medical Board
David Barnes - Wasilla

- CONFIRMATION ADVANCED

SENATE BILL NO. 106

"An Act relating to home- and community-based services under the medical assistance program; and providing for an effective date."

- MOVED SB 106 OUT OF COMMITTEE

SENATE BILL NO. 24

"An Act relating to mental health education; and providing for an effective date."

- HEARD & HELD

SENATE BILL NO. 91

"An Act relating to telehealth; relating to multidisciplinary care teams; and relating to the practice of medicine."

- HEARD & HELD

PREVIOUS COMMITTEE ACTION

BILL: SB 106

SHORT TITLE: HOME AND COMMUNITY-BASED WAIVER SERVICES

SPONSOR(s): SENATOR(s) GIESSEL

03/17/23 (S) READ THE FIRST TIME - REFERRALS
03/17/23 (S) HSS
04/04/23 (S) HSS AT 3:30 PM BUTROVICH 205
04/04/23 (S) Heard & Held
04/04/23 (S) MINUTE(HSS)
04/11/23 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 24

SHORT TITLE: PUBLIC SCHOOLS: MENTAL HEALTH EDUCATION

SPONSOR(s): SENATOR(s) GRAY-JACKSON

01/18/23 (S) PREFILE RELEASED 1/9/23
01/18/23 (S) READ THE FIRST TIME - REFERRALS
01/18/23 (S) EDC, HSS, FIN
02/22/23 (S) EDC AT 3:30 PM BELTZ 105 (TSBldg)
02/22/23 (S) Heard & Held
02/22/23 (S) MINUTE(EDC)
03/06/23 (S) EDC AT 3:30 PM BELTZ 105 (TSBldg)
03/06/23 (S) Moved SB 24 Out of Committee
03/06/23 (S) MINUTE(EDC)
03/08/23 (S) EDC RPT 4DP 1NR
03/08/23 (S) DP: TOBIN, GRAY-JACKSON, STEVENS, KIEHL
03/08/23 (S) NR: BJORKMAN
03/23/23 (S) HSS AT 3:30 PM BUTROVICH 205
03/23/23 (S) Heard & Held
03/23/23 (S) MINUTE(HSS)
04/11/23 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 91

SHORT TITLE: TELEHEALTH: MULTIDISCIPLINARY CARE TEAM

SPONSOR(s): SENATOR(s) CLAMAN

03/06/23 (S) READ THE FIRST TIME - REFERRALS
03/06/23 (S) HSS, FIN
03/21/23 (S) HSS AT 3:30 PM BUTROVICH 205
03/21/23 (S) Heard & Held
03/21/23 (S) MINUTE(HSS)
04/11/23 (S) HSS AT 3:30 PM BUTROVICH 205

WITNESS REGISTER

DR. DAVID BARNES, Governor Appointee

State Medical Board
Department of Commerce, Community, and Economic Development
Wasilla, Alaska

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

SHARON FISHEL, Education Specialist II
Innovation and Excellence in Education
Department of Education and Early Development (DEED)
Juneau, Alaska

POSITION STATEMENT: Answered questions during the hearing on SB 24.

KELLY MANNING, Deputy Director
Innovation and Education Excellence
Department of Education and Early Development (DEED)
Juneau, Alaska

POSITION STATEMENT: Answered questions during the hearing on SB 24.

SYLVAN ROBB, Director
Division of Corporations, Business & Professional Licensing
Department of Commerce, Community, and Economic Development
Juneau, Alaska

POSITION STATEMENT: Answered questions during the hearing on SB 91.

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 Tobin, Kaufman, Dunbar, Giessel, and Chair Wilson.

CONFIRMATION HEARING(S) **STATE MEDICAL BOARD**

[3:32:06 PM](#)

CHAIR WILSON announced the consideration of the confirmation hearing for David Barnes to the State Medical Board. He asked Dr. Barnes to tell the committee about himself and his reason for wanting to serve on the State Medical Board.

[3:32:24 PM](#)

DR. DAVID BARNES, Governor Appointee, State Medical Board, Department of Commerce, Community and Economic Development (DCCED), Wasilla, Alaska, testified as a governor appointee to the State Medical Board. He gave a brief history of his personal, educational and work experience. He graduated from medical school in 1999 and moved to Alaska in 2003 to work in hospitals and clinics in the Wasilla area. He stated his understanding that his primary role on the board would be to participate in the regulation of the practice of medicine in the state of Alaska. He hopes to contribute to the professionalism of the medical industry and protect the public and healthcare providers by reviewing cases. He described Alaska as a unique environment because much of the population lives in remote locations that do not have ready access to healthcare providers. He said he also sees that Alaska has a general deficit of healthcare providers. He opined that he was qualified to help the board, based on his more than 20 years of experience in both in-patient and out-patient health care in urban and rural areas. He thanked the legislature for passing the telehealth bill and said he looks forward to serving if he is confirmed.

CHAIR WILSON asked if there were questions for Dr. Barnes.

[3:38:35 PM](#)

SENATOR GIESSEL asked when he came to Alaska.

DR. BARNES replied it was in June 2003.

SENATOR GIESSEL asked for his view of the purpose of the State Medical Board.

DR. BARNES replied that it's to provide oversight and help with the resolution of complaints from a regulatory and statutory perspective.

[3:39:47 PM](#)

SENATOR GIESSEL said that is a good summary of the mechanisms, but the purpose of the State Medical Board is to protect the public through the regulation of the safe practice of medicine. She thanked Dr. Barnes for being willing to serve.

[3:41:34 PM](#)

SENATOR TOBIN expressed concern that even though the authorizing statute for the State Medical Board identifies five licensed physicians residing in as many separate judicial locations as possible, the current members are predominantly from Anchorage and the Mat-Su Valley, and Dr. Barnes is from Palmer. The

representative from Sitka is the only one who is not on the road system. She said she appreciates that Dr. Barnes put his name forward but it is very important to have representation from people who know what it's like to live and work in rural Alaska. It's a concern that there isn't enough diverse representation from other parts of the state.

[3:43:38 PM](#)

CHAIR WILSON opened public testimony on the governor appointee, David Barnes, to the State Medical Board; finding none, he closed public testimony.

[3:43:56 PM](#)

SENATOR KAUFMAN moved to forward the following name to a joint session for consideration:

State Medical Board

David Barnes - Wasilla

Signing the reports regarding appointments to boards and commissions in no way reflects individual members' approval or disapproval of the appointees; the nominations are merely forwarded to the full legislature for confirmation or rejection.

[3:44:13 PM](#)

CHAIR WILSON found no objection and the name was forwarded.

[3:44:21 PM](#)

At ease.

SB 106-HOME AND COMMUNITY-BASED WAIVER SERVICES

[3:45:40 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 106 "An Act relating to home- and community-based services under the medical assistance program; and providing for an effective date."

He noted that the committee heard the introduction and took invited and public testimony during the first hearing. He asked Senator Giessel to update the committee on the status of the department's application for a waiver.

[3:46:20 PM](#)

SENATOR CATHY GIESSEL, District E, Alaska State Legislature, Juneau, Alaska, speaking as the sponsor of SB 106, stated that on April 4 the federal government declined the request to extend

the waiver that temporarily allows legally responsible individuals (LRI) to be paid for rendering personal care services to family members who are Medicaid eligible. The current waiver ends on May 11, 2023, which makes the bill even more important. She cautioned that even if SB 106 were to pass, it would take time to write regulations so there would be a gap in payments to people supplying this care.

[3:47:23 PM](#)

CHAIR WILSON discerned there were no questions or comments and solicited a motion.

[3:47:27 PM](#)

SENATOR KAUFMAN moved to report SB 106, work order 33-LS0476\B, from committee with individual recommendations and attached zero fiscal note(s).

[3:47:45 PM](#)

CHAIR WILSON found no objection and SB 106 was reported from the Senate Health and Social Services Standing Committee.

[3:47:55 PM](#)

At ease.

SB 24-PUBLIC SCHOOLS: MENTAL HEALTH EDUCATION

[3:50:25 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 24 "An Act relating to mental health education; and providing for an effective date."

He noted that the committee heard the introduction and took invited and public testimony during the first hearing. He further noted that there was an amendment for the committee to consider.

[3:50:55 PM](#)

At ease.

[3:57:04 PM](#)

CHAIR WILSON reconvened the meeting and moved to adopt Amendment A.1 ("Amendment 1"), work order 33-LS0232\A.1.

33-LS0232\A.1
Wallace/Marx
4/3/23

AMENDMENT 1

OFFERED IN THE SENATE

BY SENATOR WILSON

Page 1, following line 9:

Insert a new bill section to read:

"* **Sec. 2.** AS 14.03.016(a) is amended to read:

(a) A local school board shall, in consultation with parents, teachers, and school administrators, adopt policies to promote the involvement of parents in the school district's education program. The policies must include procedures

(1) recognizing the authority of a parent and allowing a parent to object to and withdraw the child from a standards-based assessment or test required by the state;

(2) recognizing the authority of a parent and allowing a parent to object to and withdraw the child from an activity, class, or program;

(3) providing for parent notification not less than two weeks before any activity, class, or program that includes content involving human reproduction, [OR] sexual matters, or mental health is provided to a child;

(4) recognizing the authority of a parent and allowing a parent to withdraw the child from an activity, class, program, or standards-based assessment or test required by the state for a religious holiday, as defined by the parent;

(5) providing a parent with an opportunity to review the content of an activity, class, performance standard, or program;

(6) ensuring that, when a child is absent from an activity, class, program, or standards-based assessment or test required by the state under this section, the absence is not considered an unlawful absence under AS 14.30.020 if the child's parent withdrew the child from the activity, class, program, or standards-based assessment or test or gave permission for the child's absence."

Renumber the following bill sections accordingly.

Page 2, line 29:

Delete "sec. 3"
Insert "sec. 4"

Page 3, line 4:

Delete "sec. 3"
Insert "sec. 4"

3:57:17 PM

SENATOR KAUFMAN objected for purposes of discussion.

3:57:21 PM

CHAIR WILSON explained that the amendment adds "mental health" to AS 14.03.016(a)(3), which is the education statute pertaining to parents' rights to notification and their child's education. He read paragraph (3) with the proposed addition. The subsequent bill sections are renumbered accordingly.

CHAIR WILSON asked if there were questions or comments.

3:58:28 PM

SENATOR DUNBAR asked if parent notification was already in statute.

CHAIR WILSON answered that parental notification is in existing statute but it's not in the education statutes. His reason for adding mental health to this piece of statute is to help ensure that parents are aware and can be prepared for any reaction their child might have as a result of discussions about mental health situations.

3:59:43 PM

SENATOR DUNBAR observed that mental health is a broader category than human reproduction and sexual matters, which are specifically mentioned in paragraph (3), and that other parts of the bill call for specific instruction in mental health. He asked the Chair if he envisioned that only specific courses would require notification or if it would be required for any lesson that touches on mental health.

CHAIR WILSON responded that he wasn't sure that the bill had a definition for "mental health."

CHAIR WILSON asked Sharon Fishel or Kelly Manning whether there was a definition in statute for "mental health."

KELLY MANNING, Deputy Director, Innovation and Education Excellence, Department of Education and Early Development (DEED), Juneau, Alaska deferred the question to Ms. Fishel.

SHARON FISHEL, Education Specialist II, Innovation and Excellence in Education, Department of Education and Early Development (DEED), Juneau, Alaska, stated that she would follow up with an answer.

[4:01:54 PM](#)

CHAIR WILSON responded to Senator Dunbar's question with the explanation that mental health is used broadly and is intended to provide guidelines for instruction, similar to programs about domestic violence and sexual assault and Brie's Law for dating violence. Mental health is added to paragraph (3) to ensure that the department develops guidelines for programs relating to mental health and that parents receive notification about those programs.

SENATOR DUNBAR asked whether Brie's Law had a parental notification component.

CHAIR WILSON answered yes; it falls under domestic violence and sexual assault.

[4:03:08 PM](#)

At ease.

[4:04:05 PM](#)

CHAIR WILSON reconvened the meeting.

[4:04:08 PM](#)

SENATOR DUNBAR wondered whether there was a way to narrow the amendment so the notification requirement is specific to the instructional units about mental health. He explained that he didn't want a teacher to be disciplined if a class discussion strayed into mental health matters. He cited the hypothetical example of a literature class discussing a poet who died by suicide and that topic is raised in the course of the class discussion.

CHAIR WILSON articulated his intent to ensure that a parent or guardian is notified if a topic such as suicide is brought up in class so they're able to support their child if the need arises as a result of the class discussion.

CHAIR WILSON asked Ms. Fishel if the parental notification requirement in the existing statute relating to programs or classes about human reproduction and sexual matters extended to discussions in other classes that touch on those topics.

[4:06:48 PM](#)

MS. FISHEL reminded the committee that SB 24 is about developing guidelines for teachers to develop standards for programs about mental health and not a curriculum. She pointed out that teachers need to have some leeway to have conversations with students when topics relating to mental health and suicide come up organically in a classroom.

CHAIR WILSON indicated that his question wasn't really answered.

[4:07:50 PM](#)

SENATOR GIESSEL countered that Ms. Fishel's response did answer the question. She said Ms. Fishel used the example of suicide, but she was thinking about everyday situations such as a child who is distraught because of domestic violence in their family or their best friend's family and they bring that up in a classroom. The teacher or a counselor in that situation has to help those students process, and that is mental health. She commented that it was odd to add mental health to the subjects that require two weeks advance notice because it would tie teachers' hands and prevent them from addressing everyday topics or conversations that might arise in any given school day.

[4:09:45 PM](#)

CHAIR WILSON said he was willing to rework the amendment and address mental health in a separate curriculum.

[4:09:55 PM](#)

SENATOR GRAY-JACKSON suggested the committee consider removing the word "activity."

CHAIR WILSON opined that removing the word "activity" would affect the other items in the paragraph.

SENATOR KAUFMAN commented that it would be worthwhile to take the time to make it right.

[4:10:53 PM](#)

CHAIR WILSON withdrew Amendment 1, work order 33-LS0232\A.1, and committed to work with the sponsor.

[4:11:02 PM](#)

SENATOR GRAY-JACKSON requested permission for the committee to hear DEED's reasoning and explanation for the large fiscal note. When the bill was introduced in the previous legislature, the fiscal note was \$71 thousand; this year the fiscal note had increased to \$256 thousand. She questioned the reason for increasing the size of the committee from 20 to 30 members

CHAIR WILSON agreed to hear the explanation.

[4:12:45 PM](#)

KELLY MANNING, Deputy Director, Innovation and Education Excellence, Department of Education and Early Development (DEED), Juneau, Alaska, stated that the department met with the sponsor and then met separately to consider how to reduce the fiscal note. The conclusion was that the fiscal note is reflective of the current cost of the work. She recounted the following factors that DEED evaluated:

- The size of the committee increased from 20 to 30 members because DEED determined that was appropriate for the type of work that SB 24 considers. It will include subject matter experts in mental health as well as district representatives throughout the state to reflect different size and geographic locations.
- The work requires a facilitator who understands the national and Alaska landscape and is able to negotiate challenging conversations in groups that have different perspectives.
- The fiscal note for SB 24 is higher than it was for the original bill because the cost for this work has increased significantly since COVID.
- In the past DEED was able to attract educators with lower stipends, but higher stipends recognize the extra-duty work of educators as an important component of teacher engagement.

CHAIR WILSON commented on the general increase in fiscal notes from last year to this year and stressed that Senate Finance was taking a hard look at the increases.

[4:17:58 PM](#)

CHAIR WILSON held SB 24 in committee.

[4:18:06 PM](#)

At ease.

SB 91-TELEHEALTH: MULTIDISCIPLINARY CARE TEAM

[4:20:36 PM](#)

CHAIR WILSON reconvened the meeting and announced the consideration of SENATE BILL NO. 91 "An Act relating to telehealth; relating to multidisciplinary care teams; and relating to the practice of medicine."

He noted that this was the second hearing and there were two amendments for the committee to consider.

[4:21:17 PM](#)

CHAIR WILSON moved to adopt Amendment A.6 ("Amendment 1"), work order 33-LS0193\A.6.

33-LS0193\A.6
Bergerud
4/5/23

AMENDMENT 1

OFFERED IN THE SENATE

BY SENATOR WILSON

Page 6, following line 29:

Insert new bill sections to read:

*** Sec. 4.** AS 44.33.381(b) is amended to read:

(b) The department shall maintain the registry of businesses performing telemedicine services in the state. The registry must include the name, address, and contact information of businesses performing telemedicine services in the state. **The department may renew every three years the registration of a business that meets all renewal requirements established by regulation and pays a renewal fee every three years.**

*** Sec. 5.** AS 44.33.381 is amended by adding a new subsection to read:

(d) The department shall charge the following fees for businesses performing telemedicine services in the state:

- (1) initial registration fee, \$100;
- (2) renewal fee, \$100;
- (3) fee to report changes in the business's registration information, \$50."

[4:21:31 PM](#)

SENATOR KAUFMAN objected for purposes of discussion.

[4:21:35 PM](#)

CHAIR WILSON explained that Amendment 1 changes the registration fee for the telehealth registry to \$100 and adds a \$100 renewal fee every three years. The existing \$50 fee for a business to change its registration information remains the same.

[4:22:18 PM](#)

SENATOR TOBIN referenced paragraph (3) in Section 5 of the amendment and commented that charging \$50 to update a business's registration information might keep some businesses from making updates. She asked for more information.

CHAIR WILSON suggested that Sylvan Robb speak to question because the provision was existing language.

[4:23:28 PM](#)

SYLVAN ROBB, Director, Division of Corporations, Business & Professional Licensing, Department of Commerce, Community, and Economic Development (DCCED), Juneau, Alaska, stated that the current fee to register with the telemedicine registry is \$50.

SENATOR TOBIN said she'd like to look at the statute.

[4:24:00 PM](#)

At ease.

[4:26:45 PM](#)

CHAIR WILSON reconvened the meeting.

[4:26:51 PM](#)

SENATOR TOBIN read subsection (a) of AS 44.33.381 relating to the telemedicine business registry which did not mention fees. She articulated her reservations about placing a fee in statute rather than regulation, and noted that many businesses update their information every two years and the amendment calls for a three-year renewal. She asked the Chair if he would entertain a conceptual amendment to change "every three years" to "every two years" on lines 7 and 9 and allow the fees to be set in regulation.

CHAIR WILSON suggested breaking the items into two conceptual amendments. He added that his hesitation is that the department might not get around to updating the fees timely.

[4:28:35 PM](#)

SENATOR TOBIN agreed to make two motions. She moved to adopt Conceptual Amendment 1 to Amendment 1.

CONCEPTUAL AMENDMENT 1 TO AMENDMENT 1

Page 1, lines 7 and 9 replace 3 years with 2 years.

[4:29:02 PM](#)

CHAIR WILSON asked if there was any objection; he found none and Conceptual Amendment 1 to Amendment 1 was adopted.

[4:29:12 PM](#)

At ease.

[4:29:56 PM](#)

CHAIR WILSON reconvened the meeting.

[4:30:00 PM](#)

SENATOR TOBIN moved Conceptual Amendment 2 to Amendment 1.

CONCEPTUAL AMENDMENT 2 TO AMENDMENT 1

Page 1, line 13, following: "initial registration fee, \$100;"

Insert: "adjusted for inflation set by the department;"

[4:30:28 PM](#)

CHAIR WILSON objected for purposes of discussion.

[4:30:38 PM](#)

SENATOR KAUFMAN asked how the fee would be determined.

CHAIR WILSON opined that it would be done through the regulatory process. He asked Ms. Robb to speak to that process.

[4:31:00 PM](#)

MS. ROBB confirmed that most fees are in regulation and adjusted periodically, to ensure that the fee is roughly equal to the cost to administer the program. She advised that the telemedicine business registry was not administratively burdensome and confirmed that if the registration is renewed every two years, the fee would be reviewed on that schedule as well.

[4:32:09 PM](#)

SENATOR KAUFMAN warned about making incremental changes that cost more than the revenue that's realized.

[4:32:24 PM](#)

SENATOR GIESSEL suggested a further amendment to add the inflation adjustment to the renewal fee on line 14 of Amendment 1. She moved to adopt Conceptual Amendment 3 to Amendment 1.

CONCEPTUAL AMENDMENT 3 TO AMENDMENT 1

Page 1, line 14, following: "renewal fee, \$100;"
Insert: "adjusted for inflation set by the department;"

[4:32:36 PM](#)

CHAIR WILSON found no objection and Conceptual Amendment 3 to Amendment 1 was adopted.

[4:32:52 PM](#)

CHAIR WILSON removed his objection to the two conceptual amendments Senator Tobin offered. He found no further objection and Amendment 1, as amended, was before the committee.

[4:33:13 PM](#)

SENATOR DUNBAR commented that changing the renewal from every three years to every two years results in a 50 percent increase in the renewal fee and he hopes that is enough for the department to recoup its costs. He referenced the fee for changing the business's registration information in subsection (d)(3) and suggested the committee consider eliminating it because providing updated information is behavior that should be encouraged.

CHAIR WILSON deferred to Ms. Robb since the provision was already in regulation.

[4:34:19 PM](#)

MS. ROBB opined that since the change fee was in the current regulations, it was difficult to say whether eliminating it would change behavior.

SENATOR DUNBAR asked how often the \$100 renewal fee is charged currently.

MS. ROBB replied that the telemedicine business registry is perpetual. The registration does not expire so there is no renewal fee. Responding to an additional question, she confirmed that Amendment 1 adds the renewal fee.

SENATOR DUNBAR asked if she agreed that, should the amendment pass and the registration is renewed every two years, the

department will get updated information about the businesses every two years.

[4:35:23 PM](#)

MS. ROBB agreed.

SENATOR DUNBAR asked if she believes that the renewal process will be sufficient to collect the data that's needed or if the provision in paragraph (3) to report changes in the registration information is also needed.

[4:35:51 PM](#)

MS. ROBB responded that she views it as a policy call. She added that the data on the telemedicine business registry isn't used very much, but if that were to change it would be beneficial to have up-to-date data.

[4:36:25 PM](#)

SENATOR DUNBAR suggested the committee remove paragraph (3) from Amendment 1.

[4:36:45 PM](#)

SENATOR GIESSEL said a reason for keeping paragraph (3) and collecting a \$50 to update a healthcare business's registration information is that email addresses and names sometimes change and it's helpful to licensees and the division to have that information recorded somewhere.

CHAIR WILSON opined that the \$50 change fee would be insignificant for most healthcare businesses.

SENATOR DUNBAR asked the bill sponsor for his view of subsection (d)(3) of Amendment 1 which imposes a \$50 fee for a business to report changes in their business registration information.

[4:38:24 PM](#)

SENATOR CLAMAN responded that in light of all the proposed changes, he views the \$50 change fee as a disincentive for businesses to provide the information. He added that he was always hesitant to legislate things that are usually done by regulation. Thus he would support an amendment to remove paragraph (3) on lines 15 and 16 of Amendment 1.

[4:39:53 PM](#)

SENATOR DUNBAR asked for confirmation that the department could impose a similar change fee through regulation.

CHAIR WILSON said that's correct.

[4:40:09 PM](#)

SENATOR DUNBAR moved to adopt Conceptual Amendment 4 to Amendment 1.

CONCEPTUAL AMENDMENT 4 TO AMENDMENT 1

Page 1, lines 15-16:

Delete: "(3) fee to report changes in the business's registration information, \$50."

[4:40:23 PM](#)

CHAIR WILSON objected for purposes of discussion. He said wanted the business registry to remain viable and he thought it was reasonable for a business to pay a fee for the department to process changes in its registry information. He added that he was hesitant to rely on the department imposing a fee through regulation because that process is so slow.

[4:42:11 PM](#)

SENATOR GIESSEL agreed with his thoughts; the cost of state government is increasing and the Division of Corporations, Business & Professional Licensing is shorthanded, so the \$50 fee could make a difference in funding the activities related to the bill.

[4:42:45 PM](#)

CHAIR WILSON asked for further discussion; he found none and asked for roll call vote on Conceptual Amendment 4 to Amendment 1.

[4:43:01 PM](#)

A roll call vote was taken. Senators Dunbar and Tobin voted in favor of Conceptual Amendment 4 to Amendment 1 and Senators Giessel, Kaufman, and Wilson voted against it. The vote was 2:3.

[4:43:23 PM](#)

CHAIR WILSON announced that on a vote of 2 yeas and 3 nays, Conceptual Amendment 4 to Amendment 1 failed.

CHAIR WILSON asked for further discussion on Amendment 1 as amended; he found none.

[4:43:44 PM](#)

SENATOR KAUFMAN removed his objection.

[4:43:44 PM](#)

CHAIR WILSON found no further objection and Amendment 1 as amended, was adopted.

[4:43:49 PM](#)

CHAIR WILSON solicited a motion for Amendment A.8 ("Amendment 2") by Senator Giessel.

[4:43:54 PM](#)

SENATOR GIESSEL moved to adopt Amendment A.8 ("Amendment 2"), work order 33-LS0193\A.8, to SB 91.

33-LS0193\A.8
Bergerud
4/6/23

AMENDMENT 2

OFFERED IN THE SENATE

Page 1, line 8, following "AS 08.01.087.":

Insert "A member of a physician's multidisciplinary care team may provide a health care service through telehealth to a patient located in this state only if the health care service is not otherwise available in the state."

Page 3, lines 3 - 5:

Delete "that includes a physician licensed in another state who meets the requirements of (b)(1) of this section"

Page 3, following line 5:

Insert new bill sections to read:

"* **Sec. 3.** AS 08.02.130(j) is amended by adding a new paragraph to read:

(5) "member of a multidisciplinary care team" means an audiologist, speech-language pathologist, behavior analyst, professional counselor, dietitian, nutritionist, naturopath, marital and family therapist, podiatrist, osteopath, physician assistant, nurse, pharmacist, psychologist or psychological associate, or a social worker who is a member of a team that includes a physician licensed in

another state who meets the requirements of (b)(1) of this section.

* **Sec. 4.** AS 08.02.130 is amended by adding a new subsection to read:

(k) A member of a multidisciplinary care team shall register with the department before providing telehealth services to a patient located in the state. To register with the department, a member of a multidisciplinary care team shall submit

(1) the name of the physician leading the multidisciplinary care team;

(2) the area of health care in which the member of the multidisciplinary care team will be practicing and proof of licensure in a state or territory of the United States in that area;

(3) any applicable fees, as determined by the department."

Re-number the following bill section accordingly.

[4:43:57 PM](#)

CHAIR WILSON objected for purposes of discussion.

[4:44:01 PM](#)

SENATOR GIESSEL stated that her goal is to ensure that to every extent possible, Alaskans are providing the telehealth services that are offered in Alaska. The provision on page 1, lines 2-4 clarifies that the members of a physician's multidisciplinary care team may provide health care through telehealth to a patient in Alaska only if the service is not available in Alaska. The language on page 1, line 12 through page 2, line 4 identifies the professions that logically would be part of a multidisciplinary care team that provides telehealth services. She said not all of the professions initially identified in the bill were logical for telehealth services. Section 4 defines the requirements for the members of a multidisciplinary care team which includes registering with the department. The amendment also removes the provision on page 3, lines 3-5 of the bill because it's redundant.

CHAIR WILSON asked if there were any questions

[4:46:44 PM](#)

SENATOR DUNBAR asked which professions were removed from the list of telehealth providers.

[4:46:57 PM](#)

SENATOR GIESSEL directed attention to the health care providers identified on page 2 line 20 through page 3, line 1 of the bill. The professions removed from that list include chiropractor, dental hygienist, dentist, direct-entry midwife, dispensing optician, physical therapist, and occupational therapist.

[4:47:34 PM](#)

SENATOR DUNBAR said the list makes sense with the exception of physical therapist and perhaps occupational therapist. He asked if she could think of any circumstances where those services could be provided through telehealth. He cited his personal experience with physical therapy that only initially was in-person; thereafter he was given pictures to use as a guide.

[4:48:28 PM](#)

SENATOR GIESSEL said it's a good point but physical therapists also have to assess the patient's progress, and that's generally hands-on. The same applies to occupational therapy assessments.

CHAIR WILSON asked her to clarify that an in-state physical therapist could offer telehealth services.

SENATOR GIESSEL answered yes.

[4:49:31 PM](#)

SENATOR KAUFMAN offered his understanding that smart phone technology is capable of measuring one's eyes, so optometry services could be delivered via telehealth. He was aware of statutes in Texas that addresses optometry services via telehealth.

SENATOR GIESSEL described the differences between an optician, an optometrist, and an ophthalmologist.

[4:50:57 PM](#)

SENATOR KAUFMAN asked how businesses that provide glasses by mail would fit.

CHAIR WILSON responded that the purpose is to allow out-of-state providers to provide services for life-threatening conditions. He didn't consider ordering glasses through the mail in that category.

[4:51:41 PM](#)

SENATOR DUNBAR asked the bill sponsor whether any of the professions that the amendment excludes would have affected the

multidisciplinary care team for his constituent who has ALS and others in similar circumstances that prompted the bill.

[4:52:29 PM](#)

SENATOR CLAMAN stated that his constituent who has ALS has both a physical therapist and an occupational therapist on her multidisciplinary care team and she sometimes uses telehealth for those services. In addition, the ALS group in Alaska and the American Cancer Society raised questions about the first provision in the amendment regarding a member of the multidisciplinary care team only providing health care services through telehealth to an Alaskan if the health care services are not otherwise available in the state. Both organizations asked whether it was the insurance company or the patient who would have the burden of showing that the service was not otherwise available. To Senator Kaufman's question about telehealth services for optometry and the possibility of using an iPhone app, he said significant brain cancer can affect brain function and it's reasonable to think that somebody in that circumstance would want to see the optician who saw them last. He articulated concern with Section 3 of the amendment, pointing out that making a list of the professions that can be part of a multidisciplinary care team could unintentionally be either over-inclusive or under-inclusive. He argued that the best way to strike a balance between providing care for the patient who wants the care and maximizing the use of providers in Alaska wherever possible was through Section 4 of Amendment 2.

[4:58:29 PM](#)

SENATOR GIESSEL noted that she had neglected to mention that optometrist was not on the list in Section 3.

[4:59:00 PM](#)

SENATOR DUNBAR asked Senator Claman if his concern could be alleviated by amending the language on page 1, lines 2-4 of the amendment.

[4:59:31 PM](#)

SENATOR CLAMAN said his initial thought was to change the language on page 1, line 4 from "not otherwise available in the state." to "not reasonably available in the state." However, he would like to hear from the American Cancer Society and the ALS group in Alaska first, because those organizations have first-hand experience working with highly specialized multidisciplinary care teams and the people who leave the state to receive very specialized care.

5:00:26 PM

At ease.

5:00:58 PM

CHAIR WILSON reconvened the meeting and advised that the committee's time had run out for the day.

5:01:08 PM

CHAIR WILSON held SB 91 in committee with Amendment 2 pending.

5:01:25 PM

There being no further business to come before the committee, Chair Wilson adjourned the Senate Health and Social Services Standing Committee meeting at 5:01 p.m.