

**ALASKA STATE LEGISLATURE**  
**SENATE HEALTH AND SOCIAL SERVICES STANDING COMMITTEE**

February 27, 2025

3:31 p.m.

**MEMBERS PRESENT**

Senator Forrest Dunbar, Chair  
Senator Cathy Giessel, Vice Chair  
Senator Matt Claman  
Senator Löki Tobin  
Senator Shelley Hughes

**MEMBERS ABSENT**

All members present

**COMMITTEE CALENDAR**

SENATE BILL NO. 89

"An Act relating to physician assistants; relating to collaborative agreements between physicians and physician assistants; relating to the practice of medicine; relating to health care providers; and relating to provisions regarding physician assistants in contracts between certain health care providers and health care insurers."

- HEARD & HELD

SENATE BILL NO. 88

"An Act relating to placement of a child in need of aid; relating to adoption; relating to variances for foster care licenses; relating to the medical records of children in foster care; and providing for an effective date."

- HEARD & HELD

**PREVIOUS COMMITTEE ACTION**

BILL: SB 89

SHORT TITLE: PHYSICIAN ASSISTANT SCOPE OF PRACTICE

SPONSOR(s): SENATOR(s) TOBIN

|          |     |                                 |
|----------|-----|---------------------------------|
| 02/07/25 | (S) | READ THE FIRST TIME - REFERRALS |
| 02/07/25 | (S) | HSS, L&C                        |
| 02/18/25 | (S) | HSS AT 3:30 PM BUTROVICH 205    |

02/18/25 (S) Heard & Held  
02/18/25 (S) MINUTE (HSS)  
02/27/25 (S) HSS AT 3:30 PM BUTROVICH 205

BILL: SB 88

SHORT TITLE: CHILD PLACEMENT; DILIGENT SEARCH

SPONSOR(S): SENATOR(S) BJORKMAN

02/05/25 (S) READ THE FIRST TIME - REFERRALS  
02/05/25 (S) HSS, FIN  
02/27/25 (S) HSS AT 3:30 PM BUTROVICH 205

**WITNESS REGISTER**

MARY SWAIN, Chief Executive Officer (CEO)  
Camai Community Health Center  
Naknek, Alaska

**POSITION STATEMENT:** Testified by invitation on SB 89.

JENNIFER FAYETTE, PA, Co-Chair  
Alaska Academy of Physician Assistants  
Anchorage, Alaska

**POSITION STATEMENT:** Testified by invitation on SB 89.

MACKENZIE POPE, Staff  
Senator Löki Tobin  
Alaska State Legislature  
Juneau, Alaska

**POSITION STATEMENT:** Answered questions on SB 89.

BARTHOLOMEW GRABMAN, MD, representing self  
Anchorage, Alaska

**POSITION STATEMENT:** Testified in opposition to SB 89.

DANIEL REYNOLDS, DO, representing self  
Naknek, Alaska

**POSITION STATEMENT:** Testified in support of SB 89.

KATHERINE VAN ATTA, PA, representing self  
Naknek, Alaska

**POSITION STATEMENT:** Testified in support of SB 89.

MICHAEL MICHADU, PA, representing self  
Mat-Su, Alaska

**POSITION STATEMENT:** Testified in support of SB 89.

MOLLY SOUTHWORTH, MD, representing self

Anchorage, Alaska

**POSITION STATEMENT:** Testified in opposition to SB 89.

MARGARET CARLSON Consentino, MD, President

Alaska Academy of Family Physicians

Anchorage, Alaska

**POSITION STATEMENT:** Testified in opposition to SB 89.

MEGHAN HALL, PA, President

Alaska Academy of Physician Assistants

Anchorage, Alaska

**POSITION STATEMENT:** Testified in support of SB 89.

SENATOR JESSE BJORKMAN, District D

Alaska State Legislature

Juneau, Alaska

**POSITION STATEMENT:** Sponsor of SB 88.

LAURA ACHEE, Staff

Senator Jesse Bjorkman

Alaska State Legislature

Juneau, Alaska

**POSITION STATEMENT:** Provided the sectional analysis for SB 88.

NANCY MEADE, General Counsel

Alaska Court System

Juneau, Alaska

**POSITION STATEMENT:** Answered questions on SB 88.

KIM GUAY, Director

Central Office

Office of Childrens Services

Anchorage, Alaska

**POSITION STATEMENT:** Answered questions on SB 88.

BRADLEY GALBRAITH, Policy Director

The Center for the Rights of Abused Children

Phoenix, Arizona

**POSITION STATEMENT:** Testified by invitation on SB 88.

MALAIKA TESSON, Foster Parent

Anchorage, Alaska

**POSITION STATEMENT:** Testified by invitation on SB 88.

KRISTEN A. MOORE, representing self

Wasilla, Alaska

**POSITION STATEMENT:** Testified by invitation on SB 88.

## **ACTION NARRATIVE**

[3:31:05 PM](#)

CHAIR DUNBAR 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, Hughes, Claman, Giessel and Chair Dunbar.

### **SB 89-PHYSICIAN ASSISTANT SCOPE OF PRACTICE**

[3:32:05 PM](#)

CHAIR DUNBAR announced the consideration of SENATE BILL NO. 89 "An Act relating to physician assistants; relating to collaborative agreements between physicians and physician assistants; relating to the practice of medicine; relating to health care providers; and relating to provisions regarding physician assistants in contracts between certain health care providers and health care insurers."

[3:33:40 PM](#)

MARY SWAIN, Chief Executive Officer (CEO), Camai Community Health Center, Naknek, Alaska, testified by invitation on SB 89. She said Camai Community Health Center is a federally qualified facility serving the Bristol Bay Borough. She stated the center is critical for delivering primary, urgent, and emergency care, including receiving all EMS and 911 cases in the region. In the past year, the center handled over 2,000 patient visits, including more than 150 emergency cases. She emphasized long-standing recruitment challenges due to the remote location and increasing dependence on physician assistants (PAs) and nurse practitioners. She explained that the current state regulations requiring physician collaborative practice agreements place unsustainable financial and administrative burdens on facilities like Camai. She noted the center pays over \$55,000 annually for physician collaboration, and delays in processing agreements negatively affect patient care and safety.

MS. SWAIN expressed strong support for SB 89, stating it modernizes the practice framework for PAs in Alaska by authorizing a more autonomous model under State Medical Board oversight. She supported the bill's provision that allows PAs to practice independently after 4,000 hours of post-graduate clinical experience, noting that formal training includes approximately 2,000 hours. She called this a balanced approach that ensures proper oversight while providing a path to autonomy

for experienced PAs. She cited examples from other states such as Iowa, Montana, New Hampshire, North Dakota, Utah, and Wyoming, which have eliminated statutory requirements for direct physician supervision, creating optimal practice environments. She added that Arizona also recently updated its laws to grant greater independence to experienced PAs, improving team-based healthcare delivery.

[3:36:57 PM](#)

MS. SWAIN concluded that SB 89 will reduce wait times and improve healthcare accessibility without compromising quality. She underscored that while the legislation supports providers, it ultimately benefits patients.

[3:37:32 PM](#)

JENNIFER FAYETTE, PA, Co-Chair, Alaska Academy of Physician Assistants, Anchorage, Alaska, testified by invitation on SB 89. said SB 89 is a crucial measure to modernize Alaska's physician assistant (PA) statutes and expand access to care. She noted that PAs have been essential to Alaska's healthcare system since the 1970s, serving both urban and underserved rural areas, yet outdated legal requirements continue to create unnecessary administrative hurdles for hiring and retaining PAs. She stated that SB 89 directly addresses these issues by updating collaborative practice language, allowing PAs to practice to the full extent of their training without compromising patient safety. She emphasized that the bill does not expand PA scope into areas like independent surgery or attempt to equate PAs with physicians but rather aligns regulations with current clinical practices in Alaska. She described the bill as the result of extensive discussions with physicians and a thoughtful response to prior legislative recommendations.

MS. FAYETTE explained that removing outdated restrictions will enhance flexibility in the healthcare system and improve patient outcomes across the state. She stressed that modernization is necessary not just to reduce administrative burden, but also to sustain and grow Alaska's PA workforce, which faces significant recruitment and retention challenges. She cited data from the National Commission on Certification of Physician Assistants (NCCPA), noting Alaska had the lowest PA workforce growth nationally. She added that Alaska's healthcare licensing grew only 14 percent over two years, compared to higher rates for other provider types. Citing Department of Labor projections of several thousand unfilled healthcare positions by 2030, she concluded by urging support for SB 89 to ensure PAs can continue

contributing meaningfully to Alaska's healthcare system and to meet the state's urgent care needs.

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SENATOR HUGHES expressed strong support for SB 89 and shared that her husband, a retired PA, began his career in Bethel 40 years ago and was a member of the Alaska Academy of Physician Assistants. She acknowledged the work of the association. She sought clarification to address concerns and asked whether PAs still need to complete 100 CME credits biennially to maintain certification through the NCCPA, essentially doubling the requirement for physicians.

MS. FAYETTE replied yes

[3:42:03 PM](#)

SENATOR CLAMAN referred to Ms. Fayette's statement about the declining number of physician assistants (PAs) in Alaska and requested additional context. He asked for a comparison with trends in other states. He asked for national data to frame Alaska's situation.

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MS. FAYETTE clarified that Alaska has seen a 14 percent increase in PAs, but this growth is significantly lower than the 35 percent increase among advanced practice registered nurses (APRNs). She added that nationally, PA numbers have increased by approximately 11 percent, though many states are experiencing much higher growth. She noted that the national median growth is in the 20 percent range, with some states seeing up to a 50 percent increase in PA licenses. She stated she would submit the relevant data from the NCCPA and emphasized that Alaska ranks at the bottom in terms of PA workforce growth.

[3:43:22 PM](#)

CHAIR DUNBAR acknowledged that SB 89 does not aim to expand the scope of surgery for PAs and explicitly stated that PAs cannot perform surgery independently. He pointed out that certain procedures, such as suturing, can be technically classified as surgery. He noted that some in the medical community have raised questions about how SB 89 addresses or defines surgical activities. He asked for the sponsor or another testifier to address this concern.

[3:43:58 PM](#)

MACKENZIE POPE, Staff, Senator Löki Tobin, Alaska State Legislature, Juneau, Alaska, answered questions on SB 89. She

explained that the bill's language regarding surgery was carefully placed under the authority of the State Medical Board, which is tasked with developing regulations. She stated this approach allows subject matter experts, such as physicians, PAs, and other medical professionals, to define "surgery" in a way that accurately reflects clinical practice. She emphasized that the regulations and definition of surgery must not restrict physician assistants from performing routine procedures already within their established scope, such as suturing and stitching. She clarified that the bill ensures the State Medical Board cannot use its regulatory authority to impede PAs from continuing to perform these common tasks.

SENATOR TOBIN stated the language is found in SB 89, page 2, lines 6-7.

[3:45:32 PM](#)

MS. SWAIN provided a clinical perspective on the definition of surgery within her facility, noting that in the absence of a physician, surgical procedures are limited to those performed with local anesthetic. She stated that procedures like suturing using localized anesthetic are considered minor surgeries and are allowed. However, any procedure requiring regional or blocking anesthesia would fall outside the clinic's capabilities and would require a physician.

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CHAIR DUNBAR opened public testimony on SB 89.

[3:47:18 PM](#)

BARTHOLOMEW GRABMAN, MD, representing self, Anchorage, Alaska, testified in opposition to SB 89 stating that 4,000 hours of clinical experience is insufficient for safe, independent medical practice. He compared this to his own training as a physician, which included roughly 18,000 clinical hours, and emphasized that even with that background, he still consults a supervising physician for every patient. He shared the perspective of a colleague and former physician assistant (PA) who stated her competence as a PA was significantly lower than her current competence as a physician in training, highlighting the difference in education and training. He argued that current PA regulations under 12 AAC 40.410-450 are not burdensome, citing requirements such as monthly check-ins and quarterly evaluations. He also stated that SB 89 does not improve rural healthcare access, suggesting financial incentives would be a more effective approach. He concluded by urging the committee to reject SB 89 as written and recommended increasing the clinical

hour requirement to at least 6,000 or 8,000 hours, citing Arizona as an example.

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DANIEL REYNOLDS, DO, representing self, Naknek, Alaska, testified in support of SB 89 stating he has worked with PAs for 22 years across military, Indian Health Service, and private practice settings, including in Naknek. He questioned a prior speaker's claim of working in Naknek, noting he had not encountered that individual during his eight years there. He affirmed that PAs receive strong training, especially in family medicine, and have also performed well in emergency department settings. He described PA training as extensive and appropriate for increased autonomy. He emphasized that PAs deliver high-quality care and, like physicians, consult when needed. He stated their training supports the level of independence proposed in SB 89.

[3:52:47 PM](#)

SENATOR GIESSEL asked for confirmation that Dr. Reynolds was amenable to entering into a collaborative agreement with a physician assistant (PA) to support them during the transition to independent practice.

DR. REYNOLDS responded, correct.

[3:53:34 PM](#)

KATHERINE VAN ATTA, PA, representing self, Naknek, Alaska, testified in support of SB 89, stating she has been a PA for 20 years and a nurse midwife for seven, holding independent licensure as an APRN and dependent licensure as a PA. She works in both Wasilla and Naknek, where the nearest physician is typically over 100 miles away. She also precepts medical students in rural rotations. She argued that state-mandated collaborative plans are unnecessary for experienced providers to practice safely, citing her ability to consult and transfer care as an independently licensed APRN. She emphasized that internal facility-level oversight ensures competence and appropriate scope of practice without requiring state-imposed collaboration. She stated that SB 89 would help address healthcare shortages in rural areas by reducing administrative burdens that limit the ability of facilities to hire PAs. She concluded that the bill would give rural clinics more flexibility to hire the most qualified provider for their needs.

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MICHAEL MICHADU, PA, representing self, Mat-Su, Alaska, testified in support of SB 89, sharing that he practiced as a PA for three years in emergency departments across Virginia, ranging from large teaching hospitals to small rural facilities. He described receiving extensive hands-on training under physician supervision, which prepared him well for independent decision-making. He stated that after moving to Alaska to work with Southcentral Foundation in both the Mat-Su Valley and rural clinics like McGrath and Iliamna, he immediately experienced the challenge of providing care without the team-based support he was accustomed to. He expressed deep respect for the skill and professionalism of the PAs he has worked with in Alaska. He urged the legislature to align Alaska's PA practice laws with the high standards already being demonstrated across the state.

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MOLLY SOUTHWORTH, MD, representing self, Anchorage, Alaska, testified in opposition to SB 89, stating she has been a physician in Alaska since 1985, with extensive experience in the tribal system, private sector, and medical education through the WWAMI program. She emphasized that while PAs strengthen the healthcare system, SB 89 undermines physician-led teams, which she believes would reduce care quality and hinder access to specialists. She warned that passing SB 89 as written could result in decreased access to quality care for patients. She urged the legislature to instead focus on strengthening team-based care and offered to share specific alternative recommendations.

MS. SOUTHWORTH also shared a written message from Dr. Kamila Sulak, president-elect of the Alaska College of Emergency Physicians, who stated, "the physician voice is important, and the physician groups we represent account for most of the physicians in the state of Alaska, it is important that we stand up strong for the highest quality care possible for our patients and ourselves."

[4:01:33 PM](#)

MARGARET CARLSON CONSENTINO, MD, President, Alaska Academy of Family Physicians, Anchorage, Alaska, testified in opposition to SB 89. She said the Alaska Academy of Family Physicians, representing 340 family doctors, and the organization opposes SB 89 in its current form. She noted that while they value their work with PAs and have collaborated on alternative frameworks, SB 89 does not reflect a mutually agreed-upon solution. She acknowledged concerns with current collaborative plan requirements and confirmed that the State Medical Board is

already working to revise them significantly. She emphasized the importance of maintaining team-based care models, which she believes have contributed to successful partnerships between physicians and PAs. She recommended considering the North Dakota model, which retains physician-led care teams without granting full independence to PAs. She urged continued work on SB 89 to ensure any changes preserve care quality and respect both physician and PA roles.

[4:04:07 PM](#)

MEGHAN HALL, PA, President, Alaska Academy of Physician Assistants, Anchorage, Alaska, testified in support of SB 89 as the current president of the Alaska Academy of Physician Assistants. She explained that the PA profession was originally created to relieve overburdened physicians and improve access to care, operating under collaborative agreements for supervision and liability. She emphasized that the profession has evolved, with PAs now holding master's degrees, national certifications, individual licensure, and Drug Enforcement Administration registration. She stated that while collaboration remains essential in practice, formal collaborative agreements have become outdated and now pose barriers to hiring. She noted Alaska's critical healthcare shortage and warned that outdated laws are pushing PAs to relocate to states with modernized practice statutes. She urged support for SB 89 to help retain the PA workforce and expand access to care across the state.

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CHAIR DUNBAR closed public testimony on SB 89.

[4:06:38 PM](#)

CHAIR DUNBAR held SB 89 in committee.

[4:06:54 PM](#)

At ease.

### **SB 88-CHILD PLACEMENT; DILIGENT SEARCH**

[4:08:21 PM](#)

CHAIR DUNBAR reconvened the meeting and announced the consideration of SENATE BILL NO. 88 "An Act relating to placement of a child in need of aid; relating to adoption; relating to variances for foster care licenses; relating to the medical records of children in foster care; and providing for an effective date."

[4:08:43 PM](#)

SENATOR JESSE BJORKMAN, District D, Alaska State Legislature, Juneau, Alaska, sponsor of SB 88, provided the following introduction of the bill:

I appreciate you hearing this bill today. It's an unfortunate, heartbreaking truth that sometimes a child must be removed from the care of their parents. It is then incumbent on the state of Alaska to ensure that these kids receive the best care possible while they are in the state's custody. This includes amending Alaska laws necessary to ensure the Department of Family and Youth Services and the Alaska court system have guidelines that will allow for the best possible outcomes for that child.

Studies show that every time a child is moved from one placement to another, there is an impact on that child. Kids in the foster care system, on average, show greater issues of behavior, mental health, and cognitive abilities than their peers. However, there can be a direct correlation drawn between the number of placements a child experiences and the impact that it has on them. I have invited subject matter experts that are online to speak about these concerns.

SB 88 seeks to minimize the number of placements a child may experience in two ways. First, the bill would place a 30-day timeline and more specific requirements on the Office of Children's Services for finding family members and family friends who are able and willing to take care of a child earlier in the process, to help minimize the number of placements that a child may experience, and also help maintain connections with family and their community. I have heard stories of relatives that were unaware for months or even years that a child was in foster care. Ensuring that more thorough and timely searches are conducted will help create better outcomes for kids.

Second, this bill provides more latitude to apply the placement preferences placed on OCS in the court system. SB 88 will allow the state to consider placing a child with a foster family instead of a family member if the child is under six years old and has been with the family for more than 12 months and it is determined to be in the best interest of the child for them to remain there.

Twenty years ago, the Alaska Legislature enacted policies giving family members ultimate preference when placing a child—policies I support through the provisions that will strengthen family searches. However, children under six are going through their most significant phases of brain development, and placement changes can have a much larger impact than for older children. It is difficult to craft laws that will perfectly apply to situations that are guaranteed to vary widely from one child to the next. This change in statute wouldn't mandate where a child is placed. SB 88 provides moral latitude for making the decision that is in the best interest of the child. Also, by encouraging timely and diligent family searches, the number of these difficult situations that occur can be minimized or avoided entirely.

It's important to note that the statutory change about placement will not apply to kids that fall under the federal Indian Child Welfare Act. Placement decisions will still be made under those federal guidelines.

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SENATOR BJORKMAN continued his introduction of SB 88:

In addition, the bill clarifies that foster families have the right to request a hearing about placement of a child they have been caring for, in order to ensure they, as the people most knowledgeable about the child in their care, have a seat at the table when decisions are made. They would not be parties to the case and would not be eligible to have legal representation under this provision.

It is also important to acknowledge the hard work of the Office of Children's Services and the heavy headwinds that they face every day. I am looking forward to the outcome of the salary survey promised by the administration, and I hope that we will be able to find a way to help the division recruit and retain enough people to keep up with their heavy and challenging workload. That said, I believe that this bill directly addresses issues that would be at play regardless of the circumstances at OCS, and that we need to act now to improve outcomes for Alaska's children in foster care.

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LAURA ACHEE, Staff, Senator Jesse Bjorkman, Alaska State Legislature, Juneau, Alaska, paraphrased the sectional analysis for SB 88:

[Original punctuation provided.]

**Senate Bill 88 Child Placement; Diligent Search  
Version A Sectional Analysis  
February 14, 2025**

**Section 1:** Adds language to AS 47.10.080(s) to clarify that foster parents may request a hearing regarding the Department of Family and Community Services' decision to transfer a child out of the foster home. Clarifies that while foster parents may request hearings regarding placement under AS 47.10.080(s), they are not parties to child in need of aid cases. Adds language to allow a foster parent to schedule at their own cost medical or psychological evaluations for a child for the purpose of providing evidence during a hearing regarding a proposed transfer.

**Section 2:** Amends AS 47.10.084(d) to allow foster parents to request and receive the medical records of a child under their care.

**Section 3:** Amends AS 47.10.088(i) to allow for determination of the best interest of the child when making decisions regarding permanent placement of a child. This section also adds language regarding determination of best interest, including whether a child is under six years old and has been in the care of the foster family for at least 12 consecutive months. Adds direction to follow the new process in AS 47.10.145 when OCS is searching for family when determining permanent placement of a child.

**Section 4:** Adds language to AS 47.10.142(i) that conforms to the changes in Section 4.

**Section 5:** Adds a new section, AS 47.10.145, that requires the Department search for adult family members and family friends suitable for placement of a child within 30 days of the State removing the child from the home, describes what constitutes a diligent

statutorily required search, and requires ongoing searches until excused to do so by the court or the child is in a permanent placement.

**Section 6:** Adds language to AS 47.14.100(e) allowing for consideration of placement with a foster family when an adult family member has also expressed interest for children who are under six years old and have been in the care of that foster family for at least 12 consecutive months if it is in the best interest of the child. Also amends language to conform to the change in Section 4.

**Section 7:** Amends AS 47.14.100(m) to add that consideration of the best interest of a child may not include consideration of poverty of the family member who has requested placement or inadequate or crowded housing. Adds language that non-parties requesting hearings under this and other sections of this statute are not eligible for publicly appointed legal counsel.

**Section 8:** Adds a new subsections that would require the Department to assist adult family member's and family friend's waivers to licensing requirements under AS 47.32.032 and defines "department" as the Department of Family and Community Services.

**Section 9:** Provides for a January 1, 2026 effective date.

[4:19:33 PM](#)

SENATOR CLAMAN asked the sponsor of SB 88 if the legislation had changed from a similar proposal introduced last year.

SENATOR BJORKMAN replied there were changes.

MS. ACHEE stated that two main changes had been made to SB 88 since last year. She explained that Section 1, now allows foster parents to schedule appointments for mental or physical evaluations. She added that Section 2 permits foster parents to access the medical records of a child in their care.

[4:20:20 PM](#)

SENATOR TOBIN said she was unclear about the language in SB 88, Section 5 and requested clarification. She noted that Section 5 (d) allows placement with a family friend but expressed concern that earlier parts of the section do not clearly identify

fictive kin such as a godparent, close family friend, or community member like a Girl Scout leader. She emphasized the importance of ensuring this category is explicitly included. She indicated she might be overlooking how the search and placement process is defined within the section.

[4:21:03 PM](#)

MS. ACHEE responded that she understood the question as a request to confirm whether the new section ensures that fictive kin or adult family friends are included in all search and placement considerations. She pointed to Section 5 (a), line 14, which references "family member or family friend of the child suitable for placement" as evidence of their inclusion. She offered to review the language further if that did not fully address the concern.

SENATOR TOBIN said she would like to follow up later to ensure clarity that fictive kin placement is allowed.

MS. ACHEE stated her belief that current law already allows for the inclusion of fictive kin. SB 88 does not change that provision. She said SB 88 refers to fictive kin as adult family friends. She emphasized that SB 88 carefully includes adult family friends in the search requirements. She added that conforming changes were made throughout the bill to ensure consistent terminology.

[4:22:12 PM](#)

SENATOR TOBIN asked a follow-up question regarding the definition of "adult family member." She sought clarification on whether this includes relatives such as a great-uncle or great-aunt. She also questioned how "immediate family" is defined and whether it extends to second- or third-degree relatives. She asked where this definition is provided or if it remains undefined.

MS. ACHEE said she would get back to the committee with an answer.

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SENATOR HUGHES stated that she had not participated in a previous hearing on the bill and framed her comments as an educational question. She referenced language in SB 88, page 3, line 15, concerning the department's obligation to consider a child's physical and psychological well-being in determining best interest. She noted the weight of that responsibility and questioned how disagreements between the department and foster

parents are handled. She asked whether there is an appeals process, what role psychological evaluations play, and how the department makes such life-impacting decisions.

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MS. ACHEE responded that some of the questions regarding placement decisions are best directed to the Office of Children's Services (OCS). She noted that there are opportunities at times for foster families, adult family members, or parents to appeal decisions. She acknowledged she was not fully familiar with the timelines or procedures involved in those appeals. She added that a foster parent would be included in invited testimony and anticipated that some might also speak during public testimony, offering further opportunity to explore their experiences.

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SENATOR BJORKMAN explained that this portion of SB 88 gives judges flexibility to consider a foster family's home as a viable placement when making decisions about a child's placement. He stated that under current law, if a relative comes forward, even years after a child has been placed in a foster home, the judge must prioritize the relative, regardless of the time elapsed or the child's bond with the foster family. He emphasized that SB 88 does not require judges to decide one way or another but simply allows them to consider the child's existing placement and emotional stability.

[4:26:12 PM](#)

SENATOR HUGHES referred to language in SB 88, page 3, regarding the department determining the best interest of a child under six. She sought confirmation that it is accurate to say that the foster family could appeal to the court if the department decided to move a three-year-old child to a newly identified family member. She sought confirmation that the court would then be able to consider the child's current placement and potentially reverse the department's decision, confirming that, under current law, the court does not have that authority.

SENATOR BJORKMAN replied that is his understanding.

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CHAIR DUNBAR expressed appreciation to Senator Bjorkman and his staff for addressing the Indian Child Welfare Act (ICWA) and clarifying that SB 88 does not impact ICWA-related concerns. He noted the timing of SB 88 coincides with another adoption-related bill from Senator Myers, which has prompted outreach

from groups opposed to that approach. He stated that similar concerns may apply to SB 88, especially in Section 3 and, to some extent, Section 6, where language removes the presumption favoring placement with an adult family member unless there is good cause. He said some groups argue that removing children from their cultural background can be harmful both to the child and the broader community. He referenced the underlying rationale for ICWA and asked whether cultural identity and connection are considered when determining the best interest of the child, particularly in cases where placement with a culturally connected adult family member is at issue.

[4:29:50 PM](#)

NANCY MEADE, General Counsel, Alaska Court System, Juneau, Alaska, answered questions on SB 88. She explained that a statute exists outlining how to determine the best interest of the child, found in the Family Law Section, AS 25, which also governs child custody. She summarized that courts consider multiple factors, including the child's physical, emotional, mental, religious, and social needs; the capability and desire of the individuals seeking custody to meet those needs; the child's preference if they are of sufficient age and capacity; the length of time the child has lived in a stable environment; and the willingness to support relationships with parents.

MS. MEADE stated that while these standards are applied in custody cases, they also apply to child-in-need-of-aid cases. In response to the Chair's question, she confirmed that courts always consider the best interest of the child. She noted that SB 88 primarily modifies the order of placement preference, found on page 6, line 6 of the bill. Current law prioritizes adult family members first, then family friends, followed by foster homes. She explained that an "adult family member" is defined under AS 47.10.990 as someone over 18 who is related to the child—such as a grandparent, aunt, uncle, sibling, or legal guardian—and that for Indian children, the definition extends further under ICWA.

[4:32:46 PM](#)

MS. MEADE stated that SB 88 allows, in cases involving children under age six who have lived in a stable foster home for at least 12 months, the foster family to be considered on equal footing with adult family members in the placement preference. She emphasized that this change introduces flexibility for the court to apply a best interest analysis in situations where a previously unknown or unavailable family member surfaces later

in the case, and that the change may also affect adoption decisions, since other statutes refer to this placement order.

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CHAIR DUNBAR asked the same question to the Office of Children's Services.

[4:34:35 PM](#)

KIM GUAY, Director, Central Office, Office of Children's Services, Anchorage, Alaska, she answered questions on SB 88. She stated that OCS operates under the Fostering Connections Act, which includes provisions from the Multiethnic Placement Act (MEPA). She explained that MEPA prohibits using race, color, or national origin to discriminate in placement or permanency decisions. She noted that this may address the question about considering cultural background,

[4:35:10 PM](#)

CHAIR DUNBAR said he understood the federal limitations under MEPA in the context of a system that prioritizes placement with an adult family member. He asked whether the federal framework, which restricts consideration of cultural background in placement decisions, operates under the assumption that adult family members are already given first preference, thereby addressing cultural concerns through that prioritization.

[4:35:35 PM](#)

MS. GUAY confirmed that under current statute, an adult family member is considered a first preference placement. She stated that OCS prioritizes locating and considering adult family members when identifying placement options.

[4:36:02 PM](#)

SENATOR HUGHES asked whether adding foster families as a consideration for children under six would affect or conflict with the Multiethnic Placement Act (MEPA).

[4:36:28 PM](#)

MS. GUAY stated her belief that it would not.

[4:36:50 PM](#)

SENATOR CLAMAN asked whether, in the case of an Indian child, the Indian Child Welfare Act (ICWA) takes precedence over state statute, meaning ICWA guidelines would govern the case.

[4:37:13 PM](#)

MS. MEADE stated her understanding that the Indian Child Welfare Act (ICWA) takes precedence over state statutes in child-in-need-of-aid cases involving Indian children. She clarified that she did not want to speak out of turn and suggested that the Office of Children's Services (OCS) could provide a more detailed and informed response.

4:37:36 PM

SENATOR CLAMAN requested a response to the question from OCS.

4:38:00 PM

MS. GUAY stated that when OCS is working with a child covered under ICWA, federal law takes precedence over state law. She noted that many state statutes are aligned with ICWA requirements.

4:38:31 PM

SENATOR CLAMAN asked whether, in cases involving a child covered by the Indian Child Welfare Act (ICWA), the federal law alone governs decision-making. He questioned if there is any need to consult current or amended state statutes, given that ICWA would apply fully and guide all determinations, regardless of state law alignment.

4:39:06 PM

MS. GUAY responded that the situation is more complex than simply following federal law alone. She explained that while OCS is committed to following the law, the best interest consideration, such as those described by Ms. Mead, also play a role. She emphasized that child welfare cases involve many nuances and are not handled solely by OCS. Instead, they include input from guardians ad litem, public defenders, attorneys, assistant attorneys general, and ultimately a judge, making it a collaborative legal process centered on the child's well-being.

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CHAIR DUNBAR recalled that the best interest test used by the court system includes physical, emotional, social, and religious considerations. He asked whether that test takes into account the child's ethnic and cultural background, including—but not limited to—Alaska Native cultures. He noted that, based on the OCS director's earlier comments, federal law may prohibit considering those factors and questioned how state and federal law interact on this issue. He further asked whether "social and religious needs" are interpreted narrowly, focusing only on the child's immediate circumstances, or if they also include the broader cultural group the child comes from.

[4:41:08 PM](#)

MS. MEADE responded that the best interest determination is not a checklist-style test but rather an ongoing discussion among all parties involved in the case. She explained that, for example, if someone argues that a child's social needs would be better met in a particular placement, various subjective and objective factors would be presented to support that view. She clarified that it would not be as simple as stating a child must be placed with a family of the same ethnic background, such as requiring a child raised in a Hmong household to be placed with a Hmong foster family. Instead, the process involves broader discussion and judicial discretion, with cultural background potentially considered indirectly or contextually. She acknowledged the complexity and said she could not offer a more precise answer.

[4:42:28 PM](#)

MS. MEADE requested to offer a brief clarification regarding an earlier question about the best interest finding in SB 88, Section 3. She explained that while the department (OCS) makes initial placement decisions, as outlined in Section 1, the court has the final authority if an objection is raised. She emphasized that this dynamic, common throughout child-in-need-of-aid cases, reflects a shared and collaborative decision-making process between the department and the court.

[4:43:16 PM](#)

CHAIR DUNBAR announced invited testimony on SB 88.

[4:43:34 PM](#)

BRADLEY GALBRAITH, Policy Director, The Center for the Rights of Abused Children, Phoenix, Arizona, testified by invitation on SB 88. He stated that children entering foster care have already endured significant trauma and that the most effective way to reduce further harm is by quickly placing them in stable, loving homes, ideally with relatives who can offer familiarity and continuity. He shared an example from a pro bono law clinic in Arizona, where a relative expressed interest early in a case but was ignored, and the child was placed with a foster family. Years later, on the verge of terminating parental rights, the state sought to move the child to that relative, despite the child having developed a strong bond with the foster family. He described the judge's frustration over the department's delayed and inadequate response.

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MR. GALBRAITH argued that while federal and Alaska law require relative searches, they lack clarity and accountability. He explained that this can lead to unnecessary moves, emotional harm, and prolonged foster care. He said SB 88 introduces essential reforms by requiring timely and thorough searches, providing relatives with clear information about their caregiving options, and enabling courts to review search efforts. He concluded that SB 88 prioritizes the child's emotional stability by allowing long-term foster families of young children to be treated like relatives, helping ensure permanent and loving placements when relatives are not identified early in the process.

[4:47:04 PM](#)

MALAIKA TESSON, Foster Parent, Anchorage, Alaska, testified by invitation on SB 88. She testified that she and her husband have been lifelong Alaskans and licensed foster parents for five years, with a deep commitment to creating positive change in their community. She shared the recent experience of having to surrender two long-term foster children, siblings aged eight and four, to the Office of Children's Services (OCS), despite having cared for them for four years. The children had formed deep bonds with their foster family and had only recently met the 70-year-old great grandmother they were placed with. She emphasized that this was not an Indian Child Welfare Act (ICWA) case.

MS. TESSON stated that SB 88 would have allowed them to request a placement review hearing and provide testimony from medical providers and others familiar with the children's extensive physical, cognitive, and emotional needs. She described the grievance process currently available as inadequate, often involving biased internal review and long timelines that are unworkable in urgent situations. She argued that SB 88 would empower foster families to bring relevant information to the court and ensure decisions are made based on a comprehensive understanding of the child's best interest.

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MS. TESSON detailed the children's significant medical and developmental challenges and stressed that disrupting their established home environment caused severe trauma. She explained that the relative placement had originally expressed interest but withdrew due to health concerns, only reappearing years later. She concluded by urging the passage of SB 88 to prevent future harm to vulnerable children, stating that while it is too late for the children that were in her care, the bill is essential to protect others.

[4:54:39 PM](#)

KRISTEN A. MOORE, representing self, Wasilla, Alaska, testified by invitation on SB 88. She stated she is a nurse and oversight case manager for adults and youth on Medicaid waivers. She emphasized that children in foster care experience frequent moves—averaging eight or more placements which causes emotional distress and instability. She stated kinship placement is ideal because it preserves connections to family, school, community, and cultural identity, which promotes normalcy and healing. She urged the department to conduct timely and diligent searches for family members to avoid delayed placements that cause further trauma. She added that while foster families develop an understanding of the child's needs over time, uninvolved relatives may lack awareness of the child's medical and emotional history, making abrupt placement changes potentially harmful.

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MS. MOORE stated that access to medical records is critical, especially since one-third of children in foster care have chronic health conditions and up to 80 percent have significant mental health needs. She described how lack of consistent healthcare due to placement changes can cause delays in care and worsen medical outcomes. She referenced Utah's system, where child welfare staff gather medical history early and share it with foster parents to coordinate care. She supported SB 88, stating it helps ensure timely kinship searches and better access to medical information to support the child's well-being.

CHAIR DUNBAR thanked the individuals invited to testify on SB 88.

[4:59:07 PM](#)

CHAIR DUNBAR held SB 88 in committee.

[4:59:33 PM](#)

There being no further business to come before the committee, Chair Dunbar adjourned the Senate Health and Social Services Standing Committee meeting at 4:59 p.m.