

ALASKA STATE LEGISLATURE
SENATE LABOR AND COMMERCE STANDING COMMITTEE

May 19, 2025
1:32 p.m.

MEMBERS PRESENT

Senator Jesse Bjorkman, Chair
Senator Kelly Merrick, Vice Chair
Senator Elvi Gray-Jackson
Senator Forrest Dunbar
Senator Robert Yundt

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 70 (L&C) AM

"An Act relating to emergency medical services for operational canines; relating to the powers, duties, and liability of emergency medical technicians and mobile intensive care paramedics; relating to the practice of veterinary medicine; and providing for an effective date."

- MOVED SCS CSHB 70 (HSS) OUT OF COMMITTEE

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."

- MOVED CSSB 89 (L&C) OUT OF COMMITTEE

PREVIOUS COMMITTEE ACTION

BILL: HB 70

SHORT TITLE: EMERGENCY MED SVCS; OPERATIONAL CANINES

SPONSOR(s): REPRESENTATIVE(s) SCHRAGE

01/27/25 (H) READ THE FIRST TIME - REFERRALS

01/27/25 (H) HSS, L&C
 02/18/25 (H) HSS AT 3:15 PM DAVIS 106
 02/18/25 (H) Heard & Held
 02/18/25 (H) MINUTE(HSS)
 03/13/25 (H) HSS AT 3:15 PM DAVIS 106
 03/13/25 (H) Heard & Held
 03/13/25 (H) MINUTE(HSS)
 03/20/25 (H) HSS AT 3:15 PM DAVIS 106
 03/20/25 (H) Moved CSHB 70(HSS) Out of Committee
 03/20/25 (H) MINUTE(HSS)
 03/21/25 (H) HSS RPT CS(HSS) 2DP 2DNP 2NR
 03/21/25 (H) DP: FIELDS, MEARS
 03/21/25 (H) DNP: PRAX, SCHWANKE
 03/21/25 (H) NR: RUFFRIDGE, MINA
 03/31/25 (H) L&C AT 3:15 PM BARNES 124
 03/31/25 (H) Heard & Held
 03/31/25 (H) MINUTE(L&C)
 04/02/25 (H) L&C AT 3:15 PM BARNES 124
 04/02/25 (H) Heard & Held
 04/02/25 (H) MINUTE(L&C)
 04/07/25 (H) L&C AT 3:15 PM BARNES 124
 04/07/25 (H) Scheduled but Not Heard
 04/09/25 (H) L&C AT 3:15 PM BARNES 124
 04/09/25 (H) Moved CSHB 70(L&C) Out of Committee
 04/09/25 (H) MINUTE(L&C)
 04/11/25 (H) L&C RPT CS(L&C) 5DP 2NR
 04/11/25 (H) DP: BURKE, CARRICK, NELSON, HALL,
 FIELDS
 04/11/25 (H) NR: COULOMBE, SADDLER
 04/28/25 (H) TRANSMITTED TO (S)
 04/28/25 (H) VERSION: CSHB 70(L&C) AM
 04/30/25 (S) READ THE FIRST TIME - REFERRALS
 04/30/25 (S) HSS, L&C
 05/08/25 (S) HSS AT 3:30 PM BUTROVICH 205
 05/08/25 (S) Heard & Held
 05/08/25 (S) MINUTE(HSS)
 05/15/25 (S) HSS AT 3:30 PM BUTROVICH 205
 05/15/25 (S) Moved SCS CSHB 70(HSS) Out of Committee
 05/15/25 (S) MINUTE(HSS)
 05/16/25 (S) HSS RPT SCS(HSS) 4DP NEW TITLE
 05/16/25 (S) DP: DUNBAR, CLAMAN, TOBIN, GIESSEL
 05/19/25 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)

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
 02/27/25 (S) Heard & Held
 02/27/25 (S) MINUTE(HSS)
 03/04/25 (S) HSS AT 3:30 PM BUTROVICH 205
 03/04/25 (S) Moved SB 89 Out of Committee
 03/04/25 (S) MINUTE(HSS)
 03/05/25 (S) HSS RPT 5DP
 03/05/25 (S) DP: DUNBAR, CLAMAN, GIESSEL, TOBIN,
 HUGHES
 03/14/25 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
 03/14/25 (S) Heard & Held
 03/14/25 (S) MINUTE(L&C)
 04/16/25 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
 04/16/25 (S) Heard & Held
 04/16/25 (S) MINUTE(L&C)
 05/02/25 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
 05/02/25 (S) Heard & Held
 05/02/25 (S) MINUTE(L&C)
 05/16/25 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)
 05/16/25 (S) <Bill Hearing Canceled>
 05/19/25 (S) L&C AT 1:30 PM BELTZ 105 (TSBldg)

WITNESS REGISTER

JEREMY HOUSTON, Staff
 Representative Schrage
 Alaska State Legislature
 Juneau, Alaska

POSITION STATEMENT: Provided the summary and sectional analysis for HB 70.

BRIAN WEBB, representing self
 Anchorage, Alaska

POSITION STATEMENT: Testified by invitation on HB 70.

MELISSA EDWARDS, representing self
 Juneau, Alaska

POSITION STATEMENT: Testified by invitation on HB 70.

MCKAYLA DICK, Member

Alaska Veterinary Medical Association
North Pole, Alaska

POSITION STATEMENT: Testified in opposition to HB 70.

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

POSITION STATEMENT: Provided the summary of changes from version N to version T for SB 89.

SENATOR LOKI TOBIN, District I
Alaska State Legislature
Juneau, Alaska

POSITION STATEMENT: Sponsor of SB 89.

ACTION NARRATIVE

[1:32:30 PM](#)

CHAIR BJORKMAN called the Senate Labor and Commerce Standing Committee meeting to order at 1:32 p.m. Present at the call to order were Senators Merrick, Gray-Jackson, Dunbar, Yundt and Chair Bjorkman.

HB 70-EMERGENCY MED SVCS; OPERATIONAL CANINES

[SCS CSHB 70(HSS) is before the committee.]

[1:33:23 PM](#)

CHAIR BJORKMAN announced the consideration of CS FOR HOUSE BILL NO. 70(L&C) am "An Act relating to emergency medical services for operational canines; relating to the powers, duties, and liability of emergency medical technicians and mobile intensive care paramedics; relating to the practice of veterinary medicine; and providing for an effective date."

[1:33:46 PM](#)

JEREMY HOUSTON, Staff, Representative Schrage, Alaska State Legislature, Juneau, Alaska, provided the summary and sectional analysis for HB 70.

[Original punctuation provided.]

House Bill 70 - "Rico's Law"

An act relating to emergency medical services for operational canines.

House Bill 70 empowers Emergency Medical Services (EMS) personnel to deliver on-scene point-of injury (POI) emergency care and transport for operational canines (OpK9s). Operational canines are essential members of law enforcement, other government operations, and search-and-rescue teams. These courageous animals amplify the success of countless military, law enforcement, search-and-rescue, and humanitarian missions. Their roles even extend to police or fire chaplaincy during crises.

This bill is named "Rico's Law" in honor of Alaska State Trooper K9 Rico, whose end of watch occurred on March 26, 2017. Rico was fatally shot while heroically attempting to apprehend a suspect after a lengthy pursuit on the Parks Highway in Wasilla, Alaska. K9 Rico, like all operational canines, demonstrated unwavering dedication, protecting, and defending his community. These animals are more than just assets or property—they are teammates, partners, and family members who deserve emergency care and transportation rights. Operational canines, especially those deployed in tactical or high-threat situations, face significant risks of injury or preventable death.

Currently, Alaska lacks statutory authority allowing EMS personnel to apply life-saving care to these animals. Under current law, providing such care could be deemed "practicing veterinary medicine without a license," a violation under AS 08.98.120, carrying severe penalties. The super-rural nature of Alaska adds another dimension of acuity for our operational canines outside of Alaska's major urban centers.

[1:35:42 PM](#)

MR. HOUSTON continued with the sponsor summary of SB 70:

Alaska's EMS professionals already possess the equipment, supplies, and medications needed to adapt existing prehospital standards of care for human patients to operational canines. Training programs like the K9 Tactical Emergency Casualty Care (K9 TECC) course provide additional training for clinicians to

confidently manage operational canine emergencies. The passage of this bill would eliminate legal barriers, allowing EMS personnel to administer life-saving care and transport injured operational canines to emergency veterinary facilities.

With minimal investment by our participating EMS services, Alaska EMS can ensure that our operational canines have a fighting chance at survival when injured in line of duty.

[1:36:29 PM](#)

MR. HOUSTON provided the sectional analysis as follows:

[Original punctuation provided.]

An act related to emergency medical services and operational canines.

Section 1: Amends AS 08.98.120 to allow emergency medical technicians and mobile intensive care paramedics to perform emergency medical services on an operational canine as authorized under AS 18.08.093 without a license to practice veterinary medicine.

Section 2: Adds one subsection to AS 09.65.097 which ensures a veterinarian who receives the transfer of an operational canine is not liable for civil damages as a result of an act or omission of the EMT or paramedic who transferred the operational canine to the veterinarian.

Section 3: Amends AS 18.08.075(a) to authorize emergency medical technicians and mobile intensive care paramedic to enter a building or premises where a report of an injury or illness has taken place, or where there is reasonable cause to believe an operational canine has been injured or is ill, to render emergency medical care and direct the removal of a motor vehicle or other thing determined necessary to prevent further harm to operational canines.

Section 4: Amends AS 18.08.082(a) to direct the Department of Health to prescribe a course or other requirements prerequisite to the issuance of certificates or licenses that provide for

authorization for a licensed emergency medical technician or mobile intensive care paramedic to provide emergency medical services to an operational canine as enumerated on a written document filed with the department by the medical director and approved by the department in regulation. **Section 5:** Amends AS 18.08.086(a) to provide for civil liability protection to providers, or a director of a provider licensed under AS 18.08.082 who administers emergency medical services to an operational canine within the scope of the person's certification or licensure and if the operational canine reasonably seems to be in immediate danger of serious harm or death. **Section 6:** Amends AS 18.08.087 to remove language limiting physicians, advanced practice registered nurses, or physician assistants' permission to disclose medical information of a patient to emergency medical technicians and mobile intensive care paramedics when the information is not for the purpose of evaluating the performance of an emergency medical technician, mobile intensive care paramedic or physician.

Section 7: Adds two new subsections to AS 18.08.087. The first allows licensed veterinarians to disclose medical or hospital records of an operational canine to an emergency medical technician or mobile intensive care paramedic for the purpose of evaluating the performance of an emergency medical technician or mobile intensive care paramedic. The second adds language restricting physicians, advanced practice registered nurses, or physician assistants' permission to disclose medical information of a patient to emergency medical technicians and mobile intensive care paramedics when the information is not for the purpose of evaluating the performance of an emergency medical technician, mobile intensive care paramedic or physician.

[1:39:55 PM](#)

MR. HOUSTON continued with the sectional analysis:

Section 8: Adds one new section to AS 18.08 with three subsections. Subsection (a) allows emergency medical technicians or mobile intensive care paramedics to provide emergency medical services to an operational canine if the emergency medical technician or mobile

intensive care paramedic reasonably determines there is immediate danger of serious harm to or death of the operational canine, determines that a veterinarian is unavailable to provide emergency medical services to the operational canine soon enough to address the danger, is authorized to provide emergency medical services to an operational canine, and has informed consent from the owner or someone authorized to make medical decisions about the operational canine or is providing medical service in accordance with a written protocol developed by a veterinarian. Subsection (b) requires the emergency medical technician or mobile intensive care paramedic to transfer the operational canine to a licensed veterinarian at the earliest practicable opportunity. Subsection (c) prohibits emergency medical technicians and mobile intensive care paramedics to provide care to operational canines if a person requires emergency medical services.

Section 9: Amends AS 18.08.200 to define "veterinarian" in this chapter the same as it is under AS 08.98 and "operational canine" as a dog used by law enforcement or other government operations; or in search and rescue operations.

Section 10: Sets an effective date of January 1st, 2026.

[1:41:50 PM](#)

CHAIR BJORKMAN announced invited testimony on SB 70.

[1:42:06 PM](#)

BRIAN WEBB, representing self, Anchorage, Alaska, testified by invitation on HB 70. He read the following:

[Original punctuation provided.]

This bill came from real-world experiences of Alaska EMS clinicians who had to treat injured op canines in the field while knowing there were stiff penalties by doing so. It was illegal and ethical grades don't navigate it. That is until now.

HB 70 brings clarity, compassion, and a responsible framework. Support for it has grown steadily with our state and national supporters and working with the 13

other states that have enacted similar laws, Alaska's blend of urban and rural response transport realities was always in the forefront.

HB 70 is unique in how fast the legislative phase is moved and how we're using that momentum. While I anticipated starting the design and implementation phases after the next legislative session was over, the Design phase starting now. EMS leadership and our veterinary partners are already developing a collaborative advisory panel to assess national training curricula, protocols, and a service level application process.

So we had to blend all the phases of legislative design and implementation in near real time. This created an accelerated path to implementation. Along with the regulatory and clinical oversight are well filed.

And this is how public safety should work. Co-actively, collaboratively, and with urgency.

[1:44:02 PM](#)

SENATOR MERRICK asked for clarification about an email from Mr. Webb stating he had reached over the aisle because of the flip of the House Majority and did what was needed to help protect Alaska's EMS and operational canines. She asked if Mr. Webb could explain what he meant.

[1:44:28 PM](#)

MR. WEBB explained that in the last legislature he authored House Bill 57 for EMS quality assurance, with Representative Stanley Wright who wasn't reelected. He then asked Anchorage Representative Calvin Schrage to carry the bill. He stated opposition came mostly from concerns about implementation before the bill even had a chance to pass. He mentioned there were some House members that voted against the bill.

[1:46:05 PM](#)

SENATOR MERRICK stated Representative Schrage is non-partisan.

[1:46:36 PM](#)

MELISSA EDWARDS, representing self, Juneau, Alaska, testified by invitation on HB 70. She read the following testimony:

[Original punctuation provided.]

I am in support, as a private individual, of HB70 as it helps provide a legal framework by which EMS providers can provide pre-hospital care for operational canines in Alaska.

Since the first legislation passed in Colorado in 2014, multiple states have enacted laws allowing EMS to provide care for operational canines. During that time there have been numerous guidelines and protocols established including the adaptation of the military K9 tactical combat casualty care guidelines to the civilian environment and state programs ranging from basic care examples like Massachusetts Nero's law to more developed programs like Maine's Operational Canine Care Protocols as examples. "Best practice recommendations for prehospital veterinary care of dogs and cats" have also been published. Several organizations including NAVEMS actively provide veterinary pre-hospital care training for K9 handlers and EMS. NAVEMS has also been providing train-the-trainer courses to veterinary professionals and is actively involved in providing evidence-based guidelines for veterinary pre-hospital care and establishing national accreditation standards for training courses at all levels of care from K9 handlers to paramedics. With proper evidence-based, veterinarian directed training, medical control and direction, EMS providers can provide resuscitative point of injury care and transport of operational Canines safely and successfully.

Personally, having experience in providing veterinary care in both remote and urban areas of Alaska and training EMS providers in veterinary pre-hospital care, I would be honored to participate on an advisory panel to develop appropriate protocols and training guidelines for Alaska should this be passed.

[1:49:12 PM](#)

CHAIR BJORKMAN opened public testimony on HB 70.

[1:49:37 PM](#)

MCKAYLA DICK, Member, Alaska Veterinary Medical Association (ALVMA), North Pole, Alaska, testified in opposition to HB 70.

She stated that although she and Mr. Webb are working towards establishing a board, she proposed the development of an advisory panel of veterinarians, EMTs, and medical directors to ensure animals receive appropriate and timely care. She said she would gladly serve on the panel and recommends involving the Board of Veterinary Examiners.

[1:51:23 PM](#)

CHAIR BJORKMAN stated that HB 70 includes several protections for veterinary medicine, like ensuring EMS personnel quickly get animals to a vet, and involve vets in care guidelines and responder training. He asked what specific changes or safeguards were wanted from the Alaska Veterinary Medical Association.

[1:52:24 PM](#)

MS. DICK stated that the Alaska Veterinary Medical Association is pro HB 70, regarding first aid and transport. She stated the concerns are with the aspects involving the practice of veterinary medicine. She stated veterinarians want to be part of the decision-making for patients. She said that with today's technology AVMA and EMTs can easily collaborate to stay aligned.

[1:54:34 PM](#)

CHAIR BJORKMAN closed public testimony on HB 70.

[1:54:38 PM](#)

CHAIR BJORKMAN commented that HB 70 was thoroughly reviewed in the other body and stated his belief that it included strong safeguards to promote collaboration between vets and EMS. He opined that the dogs are left unprotected for another year if action is delayed.

[1:55:27 PM](#)

CHAIR BJORKMAN solicited the will of the committee.

[1:55:28 PM](#)

SENATOR MERRICK moved to report SCS CSHB 70(HSS), work order 34-LS0245\H, from committee with individual recommendations and attached fiscal note(s).

[1:55:41 PM](#)

CHAIR BJORKMAN found no objection and SCS CSHB 70(HSS) was reported from the Senate Labor and Commerce Standing Committee.

[1:55:55 PM](#)

At ease.

SB 89-PHYSICIAN ASSISTANT SCOPE OF PRACTICE

[1:59:06 PM](#)

CHAIR BJORKMAN reconvened the meeting and 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."

[1:59:58 PM](#)

CHAIR BJORKMAN solicited a motion.

[2:00:04 PM](#)

SENATOR MERRICK moved to adopt the committee substitute (CS) for SB 89, work order 34-LS0063\T, as the working document.

[2:00:15 PM](#)

CHAIR BJORKMAN objected for purposes of discussion.

[2:00:21 PM](#)

MACKENZIE POPE, Staff, Senator Loki Tobin, Alaska State Legislature, Juneau, Alaska, provided the summary of changes from version N to version T for SB 89.

[Original punctuation provided.]

Explanation of Changes - Version N to T

Section 2 Amends AS 08.64.107 in the following six subsections.

Subsection (a) adds specific language that a physician assistant (PA) may not perform surgery without acting as an assistant to a physician, osteopath, or podiatrist.

Includes provisions for resolving any inconsistencies that may arise in the documented hours, and if a collaborating physician is unavailable to attest.

Subsection (b) increases the hours to 6,000 postgraduate clinical hours required before a physician assistant can exit a collaborative

agreement. Details how medical specialties will be documented in the collaborative agreement, and how the State Medical Board will evaluate any additional hours that a PA may be required to practice before exiting their collaborative agreement in that specialty.

Subsection (c) adds an additional stipulation that the collaborating physician will specialize in the same specialty as the PA.

Subsection (e) outlines the process for how a PA will notify that State Medical Board when they've completed the requirements to exit their collaborative agreement. Clarifies how a collaborating physician shall attest to the PA's clinical hours.

Subsection (f) prevents retaliation by either party during the attestation process.

Subsection (g) outlines the process for how a PA will notify that State Medical Board when they've completed the requirements to exit their collaborative agreement, and how the State Medical Board will process the hours attestation and, if a PA is denied exit from their collaborative agreement, a 500-hour maximum before reconsideration.

Section 17 Clarifies the public display of credentials for all licensees in this chapter if they hold a doctorate degree in a non-medical field.

[2:02:43 PM](#)

SENATOR DUNBAR stated Section 2(a), lines 6-7 on page 2 says physician assistants can't perform surgery. He asked if this section also applies to minor procedures like sutures.

[2:03:21 PM](#)

MS. POPE answered yes. She stated that [Section 2(a)(1)(line 6-7)] limits surgery, but [Section 2(a)(1)(line 2-5)] requires the board to allow PAs to perform tasks they're trained for such as sutures and other routine procedures.

[2:03:59 PM](#)

SENATOR DUNBAR stated the statute says PAs cannot perform surgery, but allows sutures, which are sometimes interpreted as surgery. He clarified that trained PAs are allowed to independently perform what they have been trained to do, per regulation.

MS. POPE answered yes.

SENATOR DUNBAR stated that to him the language in the statute isn't clear if PAs can perform sutures. He stated in Section 2(c) it states the collaborating physician needs to have the same specialty as the PA. He said there are a limited number of specialists in Alaska. He asked what a PA is expected to do if a physician with the same specialty is not available.

[2:05:13 PM](#)

SENATOR LOKI TOBIN, District I, Alaska State Legislature, Juneau, Alaska, sponsor of SB 89, answered that regulations currently require PAs to have two collaborating physicians. She stated that for PAs to keep providing care in Alaska they may need out-of-state collaborators.

[2:05:43 PM](#)

SENATOR DUNBAR asked whether Section 2(c) is just for certifying hours and training or is it an ongoing requirement even after a PA gains independent practice.

[2:06:28 PM](#)

MS. POPE answered Section 2(c) is for specialty collaborations, which can happen alongside the main agreement. It adds up to 4,000 hours, and those can count at the same time. The specialist would just confirm the hours in that field.

[2:07:13 PM](#)

SENATOR TOBIN stated she would be willing to continue to work through language changes.

[2:07:32 PM](#)

SENATOR DUNBAR opined Section 2(a) would block the ability for PAs to perform sutures. He stated he wasn't in agreement but wouldn't keep the bill from progressing.

[2:08:30 PM](#)

CHAIR BJORKMAN removed his objection.

[2:08:46 PM](#)

CHAIR BJORKMAN solicited the will of the committee.

[2:08:48 PM](#)

At ease.

[2:09:22 PM](#)

CHAIR BJORKMAN reconvened the meeting.

[2:09:32 PM](#)

CHAIR BJORKMAN solicited a motion.

[2:09:33 PM](#)

SENATOR MERRICK moved to adopt Amendment 1, work order 34-LS0063\T.1.

34-LS0063\T.1
Gunther
5/19/25

A M E N D M E N T 1

OFFERED IN THE SENATE BY SENATOR BJORKMAN
TO: CSSB 89(), Draft Version "T"

Page 2, line 29, following "section;":
Insert "and"

Page 4, line 27, following "Assistants;":
Insert "and"

[2:09:36 PM](#)

CHAIR BJORKMAN objected for purposes of discussion.

[2:09:53 PM](#)

MS. POPE read Amendment 1.

[2:10:47 PM](#)

CHAIR BJORKMAN removed his objection.

[2:10:55 PM](#)

CHAIR BJORKMAN found no further objection and Amendment 1 was adopted.

[2:11:12 PM](#)

CHAIR BJORKMAN solicited the will of the committee.

[2:11:14 PM](#)

SENATOR MERRICK moved to report CSSB 89, work order 34-LS0063\T, as amended, from committee with individual recommendations and attached fiscal note(s)

[2:11:37 PM](#)

CHAIR BJORKMAN found no objection and CSSB 89(L&C) was reported from the Senate Labor and Commerce Standing Committee and authorized Legislative Legal Services to make technical and conforming changes.

[2:12:15 PM](#)

There being no further business to come before the committee, Chair Bjorkman adjourned the Senate Labor and Commerce Standing Committee meeting at 2:12 p.m.