

SB

240

MEDICAL BOARD

- (1) Synopsis
- (2) Position Paper - Ak. Medical Assoc.
- (3) Position Paper - Ak. Health Coalition
- (4) Position Paper - Commissioner Beirne (Discusses fiscal impact of HCS SB 240am H)
- (5) Fiscal Note - HCS SB240
- (6) Budget & Audit Committee Summary

State Medical Board
extends board - June 30, 1980.

HCSSB 240

Section 1 extends board until June 30, 1980.

Section 2 changes composition of the board: reduces licensed physicians from five to four and increased from two to three the number of public members on the board.

Sections 3 and 7 provides for staggered terms and allows that incumbent members do not lose membership, but appointments after effective date must be consistent with staggered terms.

Section 4 limits board members to two consecutive terms.

Section 5 creates executive officer of the board to be employed by the Department to perform administrative duties and carry out regulations and policy decisions made by the board.

Section 6 is "winding down" provision.

Section 8 repeals appropriate sections amended by this bill.

Section 9 is effective date clause.

HCSSB 240amH

Adds new Section 8 which amends AS 08.64.380(3) (Definitions) by adding new subsection (I) which proscribes discrimination against a resident seeking nonelective medical care based on denial of treatment because payment for services is to be provided through medicaid.

Adds new Section 9 which amends AS 47.07.070 (Reimbursement for cost settled providers) adding a new subsection (b) which allows providers to assess an interest charge on unpaid medical bills.

Adds new Section 10 which mandates the State Medical Board to (1) adopt regulations describing circumstances in which physicians may refuse service based on patient's ability to pay (2) submit report to Legislature examining alternatives to current system to providing delivery services for the payment of medicaid.

Adds new Section 11 defining essential medical treatment.

Adds new Section 13 revising effective date provision.

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MEMORANDUM

TO: The Senate and House Chairman
FCC, SB 240 (Alaska State Medical Board)

FROM: Jeff Landry, Lobbyist
Alaska State Medical Association

The Alaska State Medical Association endorses the Senate version of SB 240, continuing the existence of the State Medical Board for an additional four years. The House Committee Substitute would terminate the Board on June 30, 1999.

Additionally, the State Medical Association opposes the House amendment to SB 240, which is in essence HB 228, "An Act relating to the provision of health care services", sponsored by Rep. Bill Parker.

Physicians in the State contend that HB 228 is inconsistent with the intent of the Federal Medicaid statute, the tone of which is one of provider voluntariness.

The Federal Medicaid statute sets out governing provisions that are mandatory upon the State. The State has already departed from the intent of the federal statute.

Furthermore, The State of Alaska provider agreements depart from the concept of an agreement and are not reasonably legal in form; the obligations of the state are not clearly expressed and any obligations implied are made illusory by reference to rules and regulations.

HB 228 violates Section 10 of Article I of the US Constitution which prohibits State impairment of contracts. This one-sided statutory modification imposes a penalty for breach of contract with the state that goes far beyond what was contemplated when the providers entered into the agreements.

HB 228 violates the 13th Amendment abolishing involuntary servitude.

HB 228 violates the 1st Amendment freedom of speech guarantees by effectively preventing a provider from registering his protest to government inefficiency by refusing to serve government subsidy patients.

The language of HB 228, such as on page 3, lines 21-22, "immediate pain and suffering", is so imprecise as to render it unenforceable.

Finally, despite these contractual inadequacies, physicians in the State of Alaska continue to treat government subsidy patients. There does not exist a Medicaid crisis in Anchorage, as alleged by Mr. Jamie Love and Rep. Parker.

POSITION OF ALASKA HEALTH COALITION RE: SUNSET FREE CONFERENCE

1. 4 year continuance for major boards: June 30, 1983
medical, dental, pharmacy, nursing, veterinary medicine, optometry
2. 2 year continuance for other boards: June 30, 1981
physical therapy, psychology, dispensing opticians, chiropractic
3. No more than 2 lay persons on each board.
4. Delete Sec. 8 of HCS Sb 240 (medical board regarding discrimination and denial of services.)
5. Delete Sec. 205 from HCS SB 246 or

Amend to read:

The board may waive the examination requirements for an applicant who meets the requirements of AS.36.110, pays the required fee, (and has an) holds an active licence from and has been in active practice for at least 30 hours per week for a period of 5 years in a state with licensing requirements at least equal to this state's in scope, quality, and difficulty and who has no judgements or disciplines assessed against such licence either by another state, professional review board, or state dental board and who has not failed the clinical examination of this state.

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES

OFFICE OF THE COMMISSIONER

JAY S. HAMMOND, GOVERNOR

POUCH H 01 - JUNEAU 00011

April 30, 1979

Honorable Glenn Hackney
Alaska State Senate
Pouch V
Juneau, Alaska 99811

Dear Senator Hackney:

Section 9 of SB 240 as amended by the House would require a one percent per month interest payment for all unpaid medical bills where payment is delayed more than 30 days after presentation of the bill. The Department is currently processing bills on an average of 50 days from the date of receipt of the invoice by the Department. Although improvement is expected, the Department does not expect a consistent processing time frame of less than 30 days to result unless new positions are established or a computerized schedule of maximum allowance payment is adopted by the Department. Thus, with the present workload and present staffing in the claims payment section of the Division of Public Assistance, almost all invoices would require at least a 1% interest payment. Implementation of this provision of SB 240 will require the Free Conference Committee to consider these alternatives:

- (1) Appropriation of State General Funds in the amount of 1% of the FY 80 Medicaid and General Relief Medical appropriations for Physicians' services from which the penalty payment may be made.
- (2) Appropriation of funds adequate to meet additional staffing needs to pay claims in a timely manner (the Governor's FY 80 Budget Request was for 3 new positions);
or

Senator Hackney

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April 30, 1979

- (3) Legislative intent, if funds are not available for (1) or (2) above, that the Department implement a computerized schedule of maximum allowances which will allow for compliance with the timeliness requirements of Section 9 of SB 240.

Sincerely,



Helen D. Beirne
Commissioner

cc: Ron Lind

April 24, 1979

HOUSE JOURNAL
SUPPLEMENT

No. 45

FISCAL NOTE

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HCS
52240

I. **REQUEST** House CS for SB 240
Bill/Resolution No. An act containing the existence of the State Medical Board
Title and providing for the ~~medical profession~~
Revised by ~~Committee~~ Date 4/5/79

II. **FISCAL DETAIL**
Agency Affected Commerce and Economic Development
Program Category Affected Public Protection
Budget Request Unit(s) Affected Regulation and Licensing of Professions

EXPENDITURES (Thousands of Dollars)

	FY 79	FY 80	FY 81	FY 82	FY 83	FY 84
100 PERSONAL SERVICES	-6-	50.5	53.5	57.0	60.6	64.3
200 TRAVEL	-0-	2.3	2.8	3.6	3.8	3.9
300 CONTRACTUAL	-0-	-0-	-0-	-0-	-0-	-0-
400 COMMODITIES	-0-	-0-	-0-	-0-	-0-	-0-
500 EQUIPMENT	-0-	3.8	-0-	-0-	-0-	-0-
600 LAND ACQUISITION	-0-	8.0	8.3	7.0	7.1	7.8
700 GRANTS, COOPERATION, ETC.	-0-	-0-	-0-	-0-	-0-	-0-
TOTAL	-6-	62.0	62.7	66.8	70.5	74.9

FUNDING (Thousands of Dollars)

GENERAL FUND	-0-	62.0	62.7	66.8	70.5	74.9
FEDERAL FUNDS						
OTHER (Specify)						

POSITIONS

FULL TIME	-0-	3	3	3	3	3
PART TIME						
TOTAL						

III ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

Personnel Services required for this act would be one A-13 position for all administrative duties and one Clerk Typist III position to provide clerical support. The present clerical staffing in the Juneau office can not supply the needed assistance. The Clerk Typist would most likely be used 30-75% for support to the Executive Officer. The balance of time would be used as support to other division needs. The A-13 position would be required to attend all board meetings at three days each and attend one out of state national organization conference for 1 day per year. The positions would be housed in Juneau. Equipment needs would only be required in FY80. Shortage of space availability in the existing Juneau office would require the renting of an additional 400 square feet for these positions.

a 6% inflation rate is used. See attached for further breakdowns.

IV. DATE 4/5/79 PREPARED BY Don Mosiak
Original: Legislator Finance AGENCY: REGULATORY LICENSING
DC: Budget and Management FICOM: 463-1333

HCS
SB240

Analysis:

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Personnel Services

12 months, partially exempt, Range 18	
Benefits = \$4422, FICA = \$1588, Health = \$1716	\$32,710

12 months, Clerk Typist III, Range 8	
Benefits = \$1555, FICA = \$1588, Health = \$1716	10,355
	<u>\$50,865</u>

Travel

Field/Administrative Travel	
7 Board meetings (2 Fairbanks, 2 Anchorage,	
2 Juneau, 1 Ketchikan) Transportation	\$ 846
Per Diem	846
1 Out-of-State Travel Transportation	350
Per Diem	300
	<u>\$ 2,342</u>

Equipment (FY80 Only)

2 Side Chairs	\$152	
1 Desk	370	
1 Exec. Chair	178	
1 Credenza	295	
2 file cabinets	344	
1 book shelf	87	
1 desk - Clerk	370	
1 Typewriter table	62	
1 file cabinet	172	
1 Chair - Clerk	91	
1 Typewriter	206	\$ 2,377

Land and Structures

Space for Range 18 and Clerk Typist would	
require 400 square feet at \$1.25/foot/month	\$ 6,000

The above is based on a 4% inflation rate.

THE LEGISLATURE

BUDGET AND AUDIT COMMITTEE

FINANCE DIVISION
POUCH W-STATE CAPITOL

JUNEAU, ALASKA 99811

November 5, 1978

SUMMARY OF: A Performance Review of the Alaska State Medical Board.

PURPOSE OF THE REVIEW

In accordance with the intent of Alaska Statutes 24.20.271(1), and 44.66.050 (sunset legislation), a review of the State Medical Board was conducted to review Board activities and accomplishments to determine if the Board has been operating in an effective, efficient and economical manner. The major areas reviewed were the Board's operations and its licensing, examination, administration, complaint and affirmative action functions.

REPORT CONCLUSION

In our opinion, the State Medical Board should be reestablished with consideration given to our recommendation that the Board be reorganized to provide a greater public awareness on the Board.

The practices of medicine, osteopathy, and acupuncture by physicians, osteopaths, paramedics, podiatrists, chiropractors, and physician assistants is regulated by the Alaska State Medical Board. In addition, the Medical Board jointly regulates the practice of medicine by advanced nurse practitioners with the Board of Nursing. Because these occupations affect the public health, safety and welfare, in our opinion they should be subject to regulations and controls. Establishing minimum educational and experience requirements provides the public a reasonable assurance persons licensed are qualified. In addition, an active investigation of complaints from the public and other practitioners assures the public that those licensed continue to practice in a competent manner.

In our opinion, these functions are needed for the protection of the public. However, we do not believe the Medical Board has effectively accomplished these functions. We are making recommendations which should be implemented in order for the State Medical Board to effectively serve the Alaska public.

We recommend a reorganization to prevent one occupational group from acting to the detriment of another and to provide a greater assurance that the public's interest is considered.

We have recommended the Board act in a timely manner to pass regulations needed to protect the public. The emergence of the mid-range medical profession has not been effectively handled. The Board has not passed regulations establishing the qualifications and scope of practice of the mid-range health care practitioner. It has been four years since the board was originally mandated to pass these regulations.

We have recommended that consumer complaints be examined on the basis of merit. Presently, consumer complaints are either not examined or are referred to the Alaska State Medical Association's grievance committees.

The Board has not effectively policed the profession. A substantial portion of this problem is because the Division of Occupational Licensing (OL) has not provided the required investigations for the Board. However, the Board has powers defined under the Administrative Procedures Act which could be used to investigate life threatening cases or when severe public harm could occur.

We have also recommended possible statutory amendments in areas where such changes increase the effectiveness of the Board.