

HB

260

HOUSE COMMITTEE REPORT

4-30-03

(7)
Date Referred to Committee: April 11, 2003

FURTHER REFERRALS: Judiciary

Date of Committee Action: April 28, 2003

The LABOR AND COMMERCE Committee considered:

HB 260

HOUSE BILL NO. 260

HEALTH CARE PROVIDER IMMUNITY

"An Act relating to immunity for free health care services provided by certain health care providers; and providing for an effective date."

Recommends it be replaced with HCS or CS for HB 260 (L* C)
For Senate Bills with new title: Technical Title New Title: HCR _____ Same Title New Title

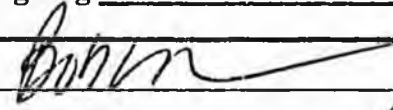
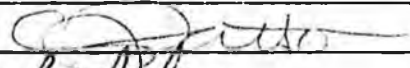
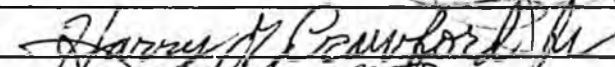
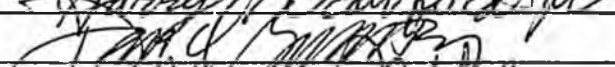

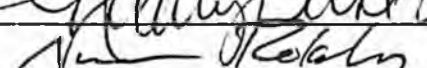
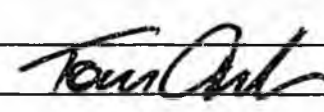
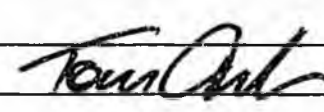
- attach amendments
- add new referral to _____ Committee
- Letter of Intent _____ Committee

List of Abbrev for Depts.:

- ADM
- CED
- COR
- CRT
- EED
- DEC
- DFG
- GOV
- HSS
- LEG
- LAW
- LWF
- MVA
- DNR
- DPS
- REV
- DOT
- UA

<u>NEW FISCAL NOTES</u>				
*Assigned by Chief Clerk's Office				
List by Dept(s):	*FN#	Fiscal	Indet.	Zero
<u>CED</u>	<u>1</u>			<input checked="" type="checkbox"/>

<u>PREVIOUS FISCAL NOTES</u>				
List by Dept(s):	FN#	Fiscal	Indet.	Zero

<u>Signing with recommendations</u>	Printed Last Name	DP	DNP	NR (a)	AM (5)
	LYNN			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	GATTO				<input checked="" type="checkbox"/>
	CRAWFORD				<input checked="" type="checkbox"/>
	GUTTENBERG				<input checked="" type="checkbox"/>
	DAHLSTROM				<input checked="" type="checkbox"/>
	Roksbark			<input checked="" type="checkbox"/>	
Chair: 	ANDERSON				<input checked="" type="checkbox"/>
Chair: 	ANDERSON				<input checked="" type="checkbox"/>

ALASKA STATE LEGISLATURE

Rep. Lesil McGuire, Chair
Rep. Tom Anderson, Vice-Chair
Rep. John Coghill
Rep. Jim Holm
Rep. Ralph Samuels
Rep. Les Gara
Rep. Max Gruenberg



State Capitol, Room 120
Juneau, AK 99801-1182
(907) 465-4990
Fax (907) 465-6592

House Judiciary Committee

Memorandum

To: Mike Ford, Leg. Legal
From: Vanessa Tondini, Committee Aide *YMT*
House Judiciary Committee
Date: May 7, 2003
Re: CS Request

Please create a final draft House Judiciary Committee Substitute for work order # 23-LS0823\Q, HB 260, incorporating the attached amendment. The bill was passed out of committee today.

If you have any questions, please call me at 4990. Thank you!

The information attached to this memo is **CONFIDENTIAL** an/or privileged. It is intended to be reviewed initially by only the individual named above. If the reader of this Memorandum is not the intended recipient or a representative of the intended recipient, you are hereby notified that any review, dissemination, or copying of the information contained herein is prohibited. If you have received this in error, please immediately notify the sender by telephone and return this to the sender at the above address.

23-LS0823\Q
Ford
5/8/03

CS FOR HOUSE BILL NO. 260()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-THIRD LEGISLATURE - FIRST SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES SEATON, Wilson, Garz, Anderson, McGuire

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to immunity for free health care services provided by certain health**
2 **care providers; and providing for an effective date."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 *** Section 1.** The uncodified law of the State of Alaska is amended by adding a new section
5 to read:

6 **SHORT TITLE.** This Act may be known as the Volunteer Health Care Provider
7 Immunity Act of 2003.

8 *** Sec. 2.** The uncodified law of the State of Alaska is amended by adding a new section to
9 read:

10 **FINDINGS.** The legislature finds that

11 (1) many of the state's most senior and experienced physicians will be retiring
12 in the next five to 10 years; retiring physicians deciding to reside in Alaska could continue to
13 benefit our local communities by volunteering their medical services;

14 (2) historically, Alaska has had difficulty in attracting and maintaining

1 adequate numbers of qualified physicians; currently, Alaska ranks 49th in the number of
2 physicians per capita, while Alaska's physicians continue to grow older, reaching an average
3 age of 51 years;

4 (3) without civil liability protection, retired physicians would be unwilling to
5 provide free services to the indigent and elderly;

6 (4) 43 states have enacted legislation limiting liability for retired physicians,
7 thus encouraging retired physicians to continue in providing voluntary medical services; and

8 (5) removing liability requirements for retired physicians would be in the best
9 interests of the state; retired physicians unhindered by expensive malpractice insurance would
10 be more inclined to volunteer necessary and important medical services to all Alaskans.

11 * **Sec. 3.** AS 09.65 is amended by adding a new section to read:

12 **Sec. 09.65.290. Immunity for providing free health care services.** (a)

13 Except as otherwise provided in this section, a health care provider who provides
14 health care services to another person is not liable for civil damages resulting from an
15 act or omission in providing the health care services if the health care

16 (1) provider is licensed in this state to provide health care services;

17 (2) services provided were within the scope of the health care
18 provider's license;

19 (3) services were provided at a medical clinic, medical facility,
20 nonprofit facility, or facility owned by a municipality, the state, or the United States
21 government;

22 (4) services were provided voluntarily and without pay to the health
23 care provider for the services, except as provided in (b)(3) and (4) of this section; and

24 (5) provider

25 (A) obtains informed consent from the person receiving the
26 health care services as described under AS 09.55.556, except in the case of an
27 emergency; and

28 (B) provides the person receiving the health care services
29 advance written notice of the immunity provided under this section to a health
30 care provider when providing voluntary health care services as described under
31 this section.

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(b) This section does not

(1) preclude liability for civil damages that are the result of gross negligence or reckless or intentional misconduct;

(2) apply to civil damages resulting from an elective abortion;

(3) preclude a health care provider from receiving payment or being reimbursed for expenses, including travel and room and board while providing voluntary services; or

(4) preclude a medical clinic or facility from charging for its services.

(c) In this section,

(1) "health care provider" means a state licensed physician, physician assistant, dentist, dental hygienist, osteopath, optometrist, chiropractor, registered nurse, practical nurse, nurse midwife, advanced nurse practitioner, naturopath, physical therapist, occupational therapist, marital and family therapist, psychologist, psychological associate, licensed clinical social worker, or certified direct-entry midwife;

(2) "health care services" means services received by an individual in order to treat or to prevent illness or injury.

* Sec. 4. The uncodified law of the State of Alaska is amended by adding a new section to read:

APPLICABILITY. This Act applies to a cause of action that accrues on or after the effective date of this Act.

* Sec. 5. This Act takes effect July 1, 2003.

AMENDMENT L - Adopted
to CSHB 260

By Rep. Gruenberg

- 1 Delete page 3, line 4, and renumber accordingly.

CHANGES MADE IN
CS HB 260 \ VERSION Q

TO: CSHB 260(L&C)

1 Page 2, line 22:

2 Delete "without charge for the services"

3 Insert "voluntarily and without pay to the health care provider for the services, except
4 as provided under (b)(3) and (4) of this section"

5

6 Page 2, line 28:

7 Delete all material.

8 Insert "advance written notice of the immunity provided under this section to a health
9 care provider when providing voluntary health care services as described under this section"

10

11 Page 2, line 31:

12 Delete "or"

13

14 Page 3, line 1, following "abortion":

15 Insert ";

16 (3) preclude a health care provider from receiving payment or being
17 reimbursed for expenses, including travel and room and board while providing voluntary
18 services; or

19 (4) preclude a medical clinic or facility from charging for its services"

ALASKA STATE LEGISLATURE

Chair
FISHERIES

Vice-Chair
EDUCATION

Member
HEALTH, EDUCATION AND SOCIAL SERVICES

Member
STATE AFFAIRS



REPRESENTATIVE PAUL SEATON
House District 35

Session:
State Capitol Building
Juneau, Alaska 99801
Phone 907-465-2689
Fax 907-465-3472
1-800-665-2689
Rep.Paul.Seaton@legis.state.ak.us

Interim:
345 W. Sterling Highway
Suite 102B
Homer, Alaska 99603
Phone 907-235-2921
Fax 907-235-4008

MEMORANDUM

TO: Representative Lesil McGuire
Madam Chair, House Judiciary

FM: Representative Paul Seaton *PKS*

DATE: April 29th, 2003

RE: Hearing Schedule. HB 260

Please schedule HB 260, "Volunteer Health Care Provider Immunity Act of 2003," for a hearing in the House Judiciary Committee at your earliest convenience. Attached you will find the information to be included in the committee packets. Thank you for the committee's time during this busy part of session. If you have any questions, please contact my aide, Cameron Yourkowski, x3306.



ALASKA STATE LEGISLATURE

Chair
FISHERIES

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SPONSOR STATEMENT

CS HB 260 (L&C)

"Volunteer Health Care Provider Immunity Act"

Alaska is currently experiencing a shortage of physicians and many of the physicians that do work in the state will be retiring soon. This lack of physicians may decrease future medical care available to Alaskans. CSHB 260 addresses this problem by extending the ability of licensed physicians and other health care providers to administer health care services free of charge. By exempting such services from malpractice liability, CSHB 260 would allow health care providers to donate their professional services at a lower personal cost. CSHB 260 will be especially helpful for retiring health professionals that wish to donate their services but do not still carry medical malpractice insurance. 43 other states have enacted similar legislation.

Historically, Alaska has had a hard time recruiting and keeping adequate numbers of physicians and other health care providers. Currently, with 186 physicians per 100,000 residents, Alaska ranks 49th in the country in per capita physicians. The average age of Alaska's physicians is over 51 years old. Many of Alaska's most senior and experienced physicians will be retiring in the next 5 to 10 years.

As licensed physicians in Alaska retire, many of them would like to provide free services within their communities. Unfortunately, paying for extremely expensive medical malpractice insurance while providing free services is costly and prohibitive. CSHB 260 would allow health care providers to give free services without this cost and thus would greatly increase the volunteer activity among the state's aging health care providers.



CSHB 260 would exempt from malpractice liability only those health care services that are provided for free to individuals that are willing to receive such services. Patients would have to be given written notice of this exemption and give informed consent. CSHB 260 does not in any other way alter medical malpractice laws or liability. Health care providers would still be liable for actions resulting from gross negligence, reckless behavior, or intentional misconduct.

I ask your support for this effort to broaden the availability of affordable health care.

ALASKA STATE LEGISLATURE

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HEALTH, EDUCATION AND SOCIAL SERVICES

Member
STATE AFFAIRS



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House District 35

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Suite 102B
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SECTIONAL ANALYSIS

CSHB 260

“Volunteer Health Care Provider Immunity Act”

Section 1: Titles CSHB 260 as the Volunteer Health Care Provider Immunity Act of 2003.

Section 2: Lays out the findings of the legislature in drafting CSHB 260.

Section 3: Amends AS 09.65 by adding a new section that gives health care providers immunity from civil damages resulting from medical malpractice, but only if the services are provided without charge and the patient gives informed consent (09.65.290). This section also lays out further provisions that must be met for this immunity to apply and makes it clear that immunity is not granted for civil damages resulting from gross negligence, reckless or intentional misconduct, or elective abortions. “Health care provider” and “health care services” are also defined in this section.

Section 4: States that this act applies only to actions occurring after the effective date of this act.

Section 5: Sets the effective date of this act at July 1, 2003.



FISCAL NOTE

STATE OF ALASKA
2003 LEGISLATIVE SESSION

Fiscal Note Number: _____
Bill Version: HB 260
() Publish Date: _____

Revision Date/Time (Note if correction):
Title Immunity for Providing Free Health Care

Dept. Affected: DCED
BRU Occupational Licensing (117)
Component Occupational Licensing

Sponsor Representative Seaton
Requester Labor and Commerce

Component No. 2360

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
-----------------------------	--	--	--	--	--	--

CHANGE IN REVENUES ()						
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other 1156 - Receipt Supported Services						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2003) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2004 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

HB 260 provides immunity for free health care services by certain health care providers. New funds are not required to implement this bill.

Prepared by: Jennifer Strickler, Administrative Manager
Division: Occupational Licensing
Approved by: Edgar Blatchford, Commissioner
Agency: Department of Community & Economic Development

Phone (907) 465-2144
Date/Time 4/28/03 1:32 PM
Date 4/28/2003

Public Law 105-19
105th Congress

An Act

June 18, 1997
[S. 543]

To provide certain protections to volunteers, nonprofit organizations, and governmental entities in lawsuits based on the activities of volunteers.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

Volunteer
Protection Act of
1997.
42 USC 14501
note.

SECTION 1. SHORT TITLE.

This Act may be cited as the "Volunteer Protection Act of 1997".

42 USC 14501.

SEC. 2. FINDINGS AND PURPOSE.

(a) FINDINGS.—The Congress finds and declares that—

(1) the willingness of volunteers to offer their services is deterred by the potential for liability actions against them;

(2) as a result, many nonprofit public and private organizations and governmental entities, including voluntary associations, social service agencies, educational institutions, and other civic programs, have been adversely affected by the withdrawal of volunteers from boards of directors and service in other capacities;

(3) the contribution of these programs to their communities is thereby diminished, resulting in fewer and higher cost programs than would be obtainable if volunteers were participating;

(4) because Federal funds are expended on useful and cost-effective social service programs, many of which are national in scope, depend heavily on volunteer participation, and represent some of the most successful public-private partnerships, protection of volunteerism through clarification and limitation of the personal liability risks assumed by the volunteer in connection with such participation is an appropriate subject for Federal legislation;

(5) services and goods provided by volunteers and nonprofit organizations would often otherwise be provided by private entities that operate in interstate commerce;

(6) due to high liability costs and unwarranted litigation costs, volunteers and nonprofit organizations face higher costs in purchasing insurance, through interstate insurance markets, to cover their activities; and

(7) clarifying and limiting the liability risk assumed by volunteers is an appropriate subject for Federal legislation because—

(A) of the national scope of the problems created by the legitimate fears of volunteers about frivolous, arbitrary, or capricious lawsuits;

(B) the citizens of the United States depend on, and the Federal Government expends funds on, and provides tax exemptions and other consideration to, numerous social programs that depend on the services of volunteers;

(C) it is in the interest of the Federal Government to encourage the continued operation of volunteer service organizations and contributions of volunteers because the Federal Government lacks the capacity to carry out all of the services provided by such organizations and volunteers; and

(D)(i) liability reform for volunteers, will promote the free flow of goods and services, lessen burdens on interstate commerce and uphold constitutionally protected due process rights; and

(ii) therefore, liability reform is an appropriate use of the powers contained in article 1, section 8, clause 3 of the United States Constitution, and the fourteenth amendment to the United States Constitution.

(b) **PURPOSE.**—The purpose of this Act is to promote the interests of social service program beneficiaries and taxpayers and to sustain the availability of programs, nonprofit organizations, and governmental entities that depend on volunteer contributions by reforming the laws to provide certain protections from liability abuses related to volunteers serving nonprofit organizations and governmental entities.

SEC. 3. PREEMPTION AND ELECTION OF STATE NONAPPLICABILITY. 42 USC 14502.

(a) **PREEMPTION.**—This Act preempts the laws of any State to the extent that such laws are inconsistent with this Act, except that this Act shall not preempt any State law that provides additional protection from liability relating to volunteers or to any category of volunteers in the performance of services for a nonprofit organization or governmental entity.

(b) **ELECTION OF STATE REGARDING NONAPPLICABILITY.**—This Act shall not apply to any civil action in a State court against a volunteer in which all parties are citizens of the State if such State enacts a statute in accordance with State requirements for enacting legislation—

- (1) citing the authority of this subsection;
- (2) declaring the election of such State that this Act shall not apply, as of a date certain, to such civil action in the State; and
- (3) containing no other provisions.

SEC. 4. LIMITATION ON LIABILITY FOR VOLUNTEERS. 42 USC 14503.

(a) **LIABILITY PROTECTION FOR VOLUNTEERS.**—Except as provided in subsections (b) and (d), no volunteer of a nonprofit organization or governmental entity shall be liable for harm caused by an act or omission of the volunteer on behalf of the organization or entity if—

- (1) the volunteer was acting within the scope of the volunteer's responsibilities in the nonprofit organization or governmental entity at the time of the act or omission;
- (2) if appropriate or required, the volunteer was properly licensed, certified, or authorized by the appropriate authorities for the activities or practice in the State in which the harm occurred, where the activities were or practice was undertaken

within the scope of the volunteer's responsibilities in the nonprofit organization or governmental entity;

(3) the harm was not caused by willful or criminal misconduct, gross negligence, reckless misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed by the volunteer; and

(4) the harm was not caused by the volunteer operating a motor vehicle, vessel, aircraft, or other vehicle for which the State requires the operator or the owner of the vehicle, craft, or vessel to—

(A) possess an operator's license; or

(B) maintain insurance.

(b) **CONCERNING RESPONSIBILITY OF VOLUNTEERS TO ORGANIZATIONS AND ENTITIES.**—Nothing in this section shall be construed to affect any civil action brought by any nonprofit organization or any governmental entity against any volunteer of such organization or entity.

(c) **NO EFFECT ON LIABILITY OF ORGANIZATION OR ENTITY.**—Nothing in this section shall be construed to affect the liability of any nonprofit organization or governmental entity with respect to harm caused to any person.

(d) **EXCEPTIONS TO VOLUNTEER LIABILITY PROTECTION.**—If the laws of a State limit volunteer liability subject to one or more of the following conditions, such conditions shall not be construed as inconsistent with this section:

(1) A State law that requires a nonprofit organization or governmental entity to adhere to risk management procedures, including mandatory training of volunteers.

(2) A State law that makes the organization or entity liable for the acts or omissions of its volunteers to the same extent as an employer is liable for the acts or omissions of its employees.

(3) A State law that makes a limitation of liability inapplicable if the civil action was brought by an officer of a State or local government pursuant to State or local law.

(4) A State law that makes a limitation of liability applicable only if the nonprofit organization or governmental entity provides a financially secure source of recovery for individuals who suffer harm as a result of actions taken by a volunteer on behalf of the organization or entity. A financially secure source of recovery may be an insurance policy within specified limits, comparable coverage from a risk pooling mechanism, equivalent assets, or alternative arrangements that satisfy the State that the organization or entity will be able to pay for losses up to a specified amount. Separate standards for different types of liability exposure may be specified.

(e) **LIMITATION ON PUNITIVE DAMAGES BASED ON THE ACTIONS OF VOLUNTEERS.**—

(1) **GENERAL RULE.**—Punitive damages may not be awarded against a volunteer in an action brought for harm based on the action of a volunteer acting within the scope of the volunteer's responsibilities to a nonprofit organization or governmental entity unless the claimant establishes by clear and convincing evidence that the harm was proximately caused by an action of such volunteer which constitutes willful or criminal misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed.

(2) CONSTRUCTION.—Paragraph (1) does not create a cause of action for punitive damages and does not preempt or supersede any Federal or State law to the extent that such law would further limit the award of punitive damages.

(f) EXCEPTIONS TO LIMITATIONS ON LIABILITY.—

(1) IN GENERAL.—The limitations on the liability of a volunteer under this Act shall not apply to any misconduct that—

(A) constitutes a crime of violence (as that term is defined in section 16 of title 18, United States Code) or act of international terrorism (as that term is defined in section 2331 of title 18) for which the defendant has been convicted in any court;

(B) constitutes a hate crime (as that term is used in the Hate Crime Statistics Act (28 U.S.C. 534 note));

(C) involves a sexual offense, as defined by applicable State law, for which the defendant has been convicted in any court;

(D) involves misconduct for which the defendant has been found to have violated a Federal or State civil rights law; or

(E) where the defendant was under the influence (as determined pursuant to applicable State law) of intoxicating alcohol or any drug at the time of the misconduct.

(2) RULE OF CONSTRUCTION.—Nothing in this subsection shall be construed to effect subsection (a)(3) or (e).

SEC. 5. LIABILITY FOR NONECONOMIC LOSS.

42 USC 14504.

(a) GENERAL RULE.—In any civil action against a volunteer, based on an action of a volunteer acting within the scope of the volunteer's responsibilities to a nonprofit organization or governmental entity, the liability of the volunteer for noneconomic loss shall be determined in accordance with subsection (b).

(b) AMOUNT OF LIABILITY.—

(1) IN GENERAL.—Each defendant who is a volunteer, shall be liable only for the amount of noneconomic loss allocated to that defendant in direct proportion to the percentage of responsibility of that defendant (determined in accordance with paragraph (2)) for the harm to the claimant with respect to which that defendant is liable. The court shall render a separate judgment against each defendant in an amount determined pursuant to the preceding sentence.

(2) PERCENTAGE OF RESPONSIBILITY.—For purposes of determining the amount of noneconomic loss allocated to a defendant who is a volunteer under this section, the trier of fact shall determine the percentage of responsibility of that defendant for the claimant's harm.

SEC. 6. DEFINITIONS.

42 USC 14505.

For purposes of this Act:

(1) ECONOMIC LOSS.—The term "economic loss" means any pecuniary loss resulting from harm (including the loss of earnings or other benefits related to employment, medical expense loss, replacement services loss, loss due to death, burial costs, and loss of business or employment opportunities) to the extent recovery for such loss is allowed under applicable State law.

(2) HARM.—The term "harm" includes physical, nonphysical, economic, and noneconomic losses.

(3) **NONECONOMIC LOSSES.**—The term “noneconomic losses” means losses for physical and emotional pain, suffering, inconvenience, physical impairment, mental anguish, disfigurement, loss of enjoyment of life, loss of society and companionship, loss of consortium (other than loss of domestic service), hedonic damages, injury to reputation and all other nonpecuniary losses of any kind or nature.

(4) **NONPROFIT ORGANIZATION.**—The term “nonprofit organization” means—

(A) any organization which is described in section 501(c)(3) of the Internal Revenue Code of 1986 and exempt from tax under section 501(a) of such Code and which does not practice any action which constitutes a hate crime referred to in subsection (b)(1) of the first section of the Hate Crime Statistics Act (28 U.S.C. 534 note); or

(B) any not-for-profit organization which is organized and conducted for public benefit and operated primarily for charitable, civic, educational, religious, welfare, or health purposes and which does not practice any action which constitutes a hate crime referred to in subsection (b)(1) of the first section of the Hate Crime Statistics Act (28 U.S.C. 534 note).

(5) **STATE.**—The term “State” means each of the several States, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, the Northern Mariana Islands, any other territory or possession of the United States, or any political subdivision of any such State, territory, or possession.

(6) **VOLUNTEER.**—The term “volunteer” means an individual performing services for a nonprofit organization or a governmental entity who does not receive—

(A) compensation (other than reasonable reimbursement or allowance for expenses actually incurred); or

(B) any other thing of value in lieu of compensation, in excess of \$500 per year, and such term includes a volunteer serving as a director, officer, trustee, or direct service volunteer.

SEC. 7. EFFECTIVE DATE.

(a) IN GENERAL.—This Act shall take effect 90 days after the date of enactment of this Act.

(b) APPLICATION.—This Act applies to any claim for harm caused by an act or omission of a volunteer where that claim is filed on or after the effective date of this Act but only if the harm that is the subject of the claim or the conduct that caused such harm occurred after such effective date.

Approved June 18, 1997.

LEGISLATIVE HISTORY—S. 543 (H.R. 911):

HOUSE REPORTS: No. 105-101, Pt. 1 (Comm. on the Judiciary) accompanying H.R. 911.

CONGRESSIONAL RECORD, Vol. 143 (1997):

May 1, considered and passed Senate.

May 21, considered and passed House, amended, in lieu of H.R. 911. Senate concurred in House amendment.

○

Rate of Nonfederal Physicians per 100,000 Civilian Population, 1999



- Less than 225
- 225 to 255
- 256 to 282
- More than 282
- No data available/NSD

Rate of Nonfederal Physicians per 100,000 Civilian Population, 1999

Sort by: Rank

**Rate of Nonfederal Physicians
per 100,000 Civilian
Population, 1999**

Rank	State	#
	United States	285
1	District of Columbia	811
2	Massachusetts	454
3	New York	423
4	Maryland	413
5	Connecticut	397
6	Rhode Island	372
7	Vermont	362
8	New Jersey	327
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51	Idaho	179
NR	Guam	NA
NR	Puerto Rico	NA
NR	Virgin Islands	NA
NR	Residence Unknown	NA

Notes: Nonfederal physicians are employed in the private sector of the US physician population. They represent 98% of total physicians.
The US total excludes physicians and population in the possessions.

Sources: Physician Characteristics and Distribution in the US, 2001-2002 Edition, American Medical Association, copyright 2001, Table 5.20, p. 348.



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FARMERS MARKET IN A BOWL

Capture the essence of autumn in the fields with a steaming bowl of minestrone. As the summer turns to fall, the last of the Valley crops come to town, and this classic Italian soup presents a fine way to enjoy the harvest. See Wednesday's Life & Taste.

LIFE & Health

ANCHORAGE DAILY NEWS • www.adn.com

TUESDAY, SEPTEMBER 3, 2002

A CRISIS COULD BE COMING



Dr. Keith Brownsberger, 69, begins an annual physical with longtime patient Lots Kiehl. Brownsberger met Kiehl more than 30 years ago when they both worked in Sitka. Brownsberger is one of many older doctors in Alaska. Experts are concerned the state will face a doctor shortage in the near future.

Shingle Shortage?

Dr. Keith Brownsberger, 69, begins an annual physical with longtime patient Lois Klehl. Brownsberger met Klehl more than 30 years ago when they both worked in Sitka. Brownsberger is one of many older doctors in Alaska. Experts are concerned the state will face a doctor shortage in the near future.

Shingle Shortage?

State statistics point to a coming medical crunch as aging doctors retire

By ANN POTEPA
Anchorage Daily News

One of the youngest states in the nation has an aging problem: Its doctors are growing older. Jim Jordan, executive director of the Alaska State Medical Association, wanted to know just how old Alaska's doctors had become. His staff studied a list of physicians and guessed their ages from the dates they graduated from medical school. Based on his study, about half are older than 60.

His guess was right. Leslie Gallant, executive administrator of the state medical board, verified Jordan's research with her own database, complete with ages. Today, 48 percent of Alaska's licensed doctors have passed the half-century mark.

Gallant's data shows a sharp drop-off in practicing physicians as the decades mount up: Almost 650 retain their licenses in their 50s, but less than half that many remain licensed into their 60s. Slightly more than 100 of the state's 2,170 doctors are 70 or older.

That statistic foreshadows a pending crisis.

"Within the next 10 years, we could lose as many as half of Alaska's doctors," said Dr. Harold Johnston, a family practice physician who's older than 50.

When these doctors retire or cut back their practices, more doctors will have to move here and fill in. But that's not happening.

"They're not coming to Alaska," Johnston said.

At least not with the frequency they did in the past.

"There's going to be a problem, and we see it coming," said Dr. Tom Nighswander, who turns 60 this year. "And the time to be working on it is now."

Doctors used to come to Alaska for many reasons. Physicians came here to flee states that had health

“
There's going to be a problem, and
we see it coming. And the time to be
working on it is now.
”

— Dr. Tom Nighswander

maintenance organizations.

"They were what I termed to be 'managed care refugees,'" Jordan said.

But Johnston said managed care is changing, and fewer doctors are moving here for that reason now.

Decades ago, the government signed up doctors to come north and work with the military and the U.S. Public Health Service. In the early 1970s, Nighswander came to Alaska to fulfill a two-year contract with the U.S. Public Health Service.

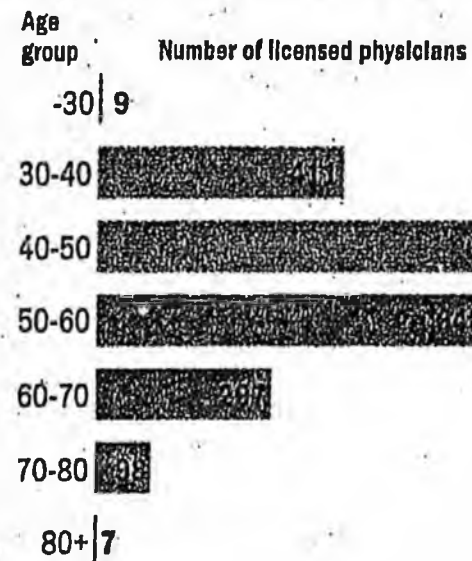
"That is where the Indian Health Service got all their manpower," he said.

Thirty years later, he's still here. Other physicians who came to Alaska through the health service finished their contracts and elected to stay, too.

Nighswander said the public health service's role in Alaska has changed since those days. It no longer brings doctors to Alaska to serve the Native population. Instead, the tribes have taken over and directly recruit their own physicians to care for Alaska



ALASKA'S AGING PHYSICIANS

State officials are concerned about Alaska's ability to serve the medical needs of residents as the state's physicians get older. Records show a sharp drop in the state's number of physicians who continue to practice beyond the age of 60. Almost half the state's licensed physicians are more than 50 years old.



Source: Alaska State Medical Board 2002

See Page E-2, DOCTORS

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Primary Health Care

Access to Health Care: Volunteer Health Care Providers and Civil Immunity Laws

Updated March 2000

Laws establishing immunity from civil liability for health care providers delivering uncompensated care to indigent populations have been enacted in a majority of the states in the last decade. Viewed as a way to encourage health care providers to provide free care to underserved populations, states have removed the threat of civil suits against providers who are acting in good faith.

Laws providing immunity only for services rendered in an accident or emergency situation are not included.

First Letter of State **A C D F G H I K L M N O P R S T U V W**

State	Description
Alabama	Ala. Code § 6-5-339 provides immunity from civil immunity to medical professionals who volunteer their services at free medical clinics without compensation, and provides that an act or omission of a volunteer medical professional shall be the responsibility of the free medical clinic.
Alaska	-
American Samoa	-
Arizona	Ariz. Rev. Stat. Ann. § 12-571 states that a health professional who provides medical or dental treatment within the scope of their certificate or license at a nonprofit clinic where neither the professional or the clinic receives compensation is not liable in a medical malpractice action unless the health professional was grossly negligent.
Arkansas	Ark. Stat. Ann. § 16-6-105 states that physicians and health care professionals who are licensed under the laws of the state, and who render medical services voluntarily and without compensation to any person at a any free or low-cost medical clinic shall not be liable

for any civil damages for any act or omission resulting from the medical services unless the act or omission was a result of gross negligence or willful misconduct.

Ark. Stat. Ann. § 17-95-108 expands upon the previous law to state that the immunity applies when the patient acknowledges in writing that the physician is immune from civil liability.

- California** **Cal. Business and Professions Code § 2395.5** states that a physician who serves on an on-call basis to a hospital emergency room and in good faith renders emergency obstetrical services to any person while on-call shall not be liable for any civil damages except in cases of gross negligence, recklessness, or willful misconduct.
- Colorado** **Colo. Rev. Stat. § 24-10-103 (4)** extends governmental immunity from civil damages to any health care practitioner employed by a public entity and to any health care practitioner who volunteers his services at or on behalf of a public entity or as a participant in the community maternity services program.
- Connecticut** -
- Delaware** **Del. Code Ann. Tit. 10 § 8135** grants immunity from civil suits resulting from any negligent act or omission performed during or in connection with an activity of the volunteer while serving the medical clinic to any licensed physician or nurse engaged in an activity for a medical clinic without compensation.
- District of Columbia** **D. C. Code Ann. § 2-1344** extends limited immunity to health care professionals including physicians, nurses or nurse midwives who in good faith provide health care or treatment at a free health clinic without the expectation of receiving or intending to receive compensation unless the act or omission is an intentional wrong or constitutes a willful or wanton disregard for the health and safety of others.
- Florida** **Fla. Stat. § 768.13(4)** states that any person who is licensed to practice medicine, while acting as a staff member or with professional clinical privileges at a nonprofit medical facility shall not be held liable for any civil damages for any care provided gratuitously.
- Georgia** **Ga. Code. § 51-1-29** states that no health care provider licensed under Chaps. 11, 26, 30, or 34 who voluntarily and without expectation or receipt of compensation provides professional service, within the scope of their license, for a hospital, public school, nonprofit organization or an agency of the state shall be liable for damages or injuries alleged to have occurred in the rendering of these services.
- Guam** -
- Hawaii** -
- Idaho** **Idaho Code § 6-1605** provides immunity for civil liability for nonprofit organization officers, directors, and volunteers who serve

the nonprofit without compensation with the exception of willful, wanton misconduct.

- Illinois** Ill. Rev. Stat. ch. 111§ 4400-30 provides immunity from civil damages for physicians who provide medical treatment in good faith at a free medical clinic to medically indigent patients if he or she receives no compensation, excludes willful or wanton misconduct.
- Indiana** Ind. Code § 34-412.1-2, 34-4-12-1.5 provides that a health care provider, including a retired physician, who voluntarily provides health care at a medical clinic or health care facility is immune from civil liability arising from the care provided unless the acts constitute a criminal act, gross negligence or willful, wanton misconduct.
- Iowa** Iowa Code § 65-135.24 establishes a volunteer physician program and states that physicians providing care under this program will be considered employees of the state and shall be afforded the protection from civil immunity for their services.
- Kansas** Kan. Stat. Ann. § 75-6102 provides indemnity to charitable health care providers who have entered into an agreement with the secretary of health and environment and who provides free professional services to medically indigent patients by considering the provider a state employee.
- Kentucky** Ky. Rev. Stat. § 304.40-075 states that the Department of Insurance will provide medical malpractice insurance to a charitable health care provider who has registered with the Cabinet for Human Resources. A charitable health care provider is defined as any person, agency, clinic or facility engaged in providing medical care without compensation. This law also applies to health care providers who are not licensed in the state of Kentucky as long as they meet the definition of charitable health care provider.
- Louisiana** La. Rev. Stat. Ann. § 40:1299.152 provides state indemnification of health care providers who provide charity care in at least 10% of the provider's patient encounters. Charity care is limited to defined State programs or care provided at federally funded nonprofit clinics. Health care providers can be a person, partnership or corporation. The providers must maintain liability insurance, the law excludes protection for gross negligence or intentional misconduct.
- La. Rev. Stat. Ann. § 40:1299.161 provides a state mandated premium discount for health care providers who provide at least 10% or more charity care in their practices.
- Maine** Me. Rev. Stat. Ann. Tit. 24, § 2904 states that a licensed physician who voluntarily, and without compensation, provides professional services within the scope of his practice to a nonprofit organization or to an agency of the state shall not be liable for damages or injuries related to those services. The state will be liable unless the damages were caused willfully, wantonly or by gross negligence.
- Me. Rev. Stat. Ann. Tit. 14, §315 states that the Board of Medicine

shall issue a license free of charge to any physician who provides medical services to patients with no compensation and is not engaged in the private practice of medicine.

Maryland

Md. Courts & Judicial Proceedings Code Ann. Sec. 5-616 repealed a requirement compelling volunteer health care providers and physicians delivering care at charitable organization to carry a specified amount of insurance to qualify for immunity from specified types of civil liability.

Massachusetts

Mass. Gen. Laws Ann. Ch. 112, § 12C states that no physician rendering immunizations or other protective programs under public programs shall be liable for civil damages.

Michigan

-

Minnesota

-

Mississippi

Miss. Code Ann. § 11-46-1 indemnifies physicians who provide care under an agreement with State government. The physician is considered a State employee.

Miss. Code Ann. § 73-25-18 establishes a special volunteer medical license for physicians who are retired from active practice and with to donate their expertise for the medical care and treatment of indigent and needy people or people in medically underserved areas. The laws provides that the license be issued without charge and that the license shall limit the practice of the physician to a specific location.

Missouri

Mo. Rev. Stat. § 105.711 provides that the state legal defense fund covers payment of claims against physicians, dentists, dental hygienists, nurses and physician assistants who provide primary or preventive care for free at a city or county health department or a tax-exempt nonprofit community health center or who provide such care to students of public, private or parochial elementary or secondary schools, pursuant to a contract with a local health department.

Montana

-

Nebraska

-

Nevada

Nev. Rev. Stat. Ann. § 41.505 provides civil immunity for physicians, including retired physicians, who offer free care and, or provide emergency obstetrical services.

Nev. Rev. Stat. Ann. § 41.485 states that a volunteer of a charitable organization is immune from liability for civil damages as a result of an act or omission. Volunteer includes any person who performs services without compensation.

New Hampshire

N.H. Rev. Stat. Ann. § 329:25-a grants certain retired physicians immunity from civil liability for health education services.

N.H. Rev. Stat. Ann. § 508:17 provides immunity from civil damages for volunteers of a nonprofit organization or government

Texas	Texas Civil Practice and Remedies Code Ann. § 110.001 indemnifies physicians for defined "charity care" if the physician renders the care in at least 10% of his patient encounters during the year a claim is made.
	Texas Insurance Code Ann. § 5.15-4 states that a physician is entitled to a premium discount for medical professional liability insurance for providing services for selected charity care programs.
U.S. Virgin Islands	-
Utah	Utah Code Ann. § 58-12-23.5 provides qualified immunity for health care providers who render charity care without compensation in a qualified location, excludes gross negligence and willful misconduct.
Vermont	-
Virginia	Va. Stat. Ann. Tit. § 54-1.2:2 states that health care professionals rendering services free of charge at free clinics are exempt from civil liability, excludes acts of gross negligence and willful misconduct.
Washington	-
West Virginia	W. Va. Code § 30-3-10a establishes special volunteer medical licenses for physician wishing to donate their expertise for the medical care and treatment of indigent and needy patients of clinics organized in whole or in part for the delivery of health care services without charge and provides immunity from civil actions for physicians rendering such care.
Wisconsin	Wis. Stat. § 146.89 provides indemnification for volunteer health care providers who submit an application associating them with a nonprofit agency to the state.
Wyoming	-

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Fax: 202-737-1069

Alaska State Medical Association

4107 Laurel Street • Anchorage, Alaska 99508 • (907) 562-0304 • (907) 561-2063 (fax)

04/24/2003

Honorable Paul Seaton
State of Alaska
House
State Capitol, Room 428
Juneau, AK 99801 - 1182

Transmitted by Fax:
907-465-3472

Re: HB 260 - Volunteer Health Care Provider Immunity Act of 2003

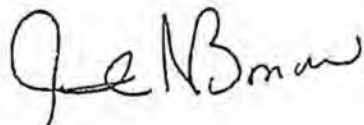
Dear Representative Seaton:

The Alaska State Medical Association (ASMA) represents Alaska's patients and the physicians who care for them.

ASMA supports the Volunteer Health Care Provider Immunity Act of 2003 (HB 260). HB 260 provides the vehicle for tapping into this experienced physician resource to provide free care.

Physicians provide significant amounts of free care during their active careers. The Volunteer Health Care Provider Immunity Act will allow that practice to be carried into the retirement years.

Sincerely,



By: Jeanne Bonar, MD
President

For: Alaska State Medical Association



Honorable Tom Anderson, Chair
House Labor and Commerce Committee
Alaska Capital, Room 432
Juneau, AK 99801-1182

April 28, 2003

RE: HB 260 (Seaton)-Support

Dear Chair Anderson:

On behalf of the AARP members in Alaska, we encourage you and your colleagues on the House Labor and Commerce Committee to support HB 260, authored by Representative Paul Seaton, and co-sponsored by Representatives Peggy Wilson, Les Gara, and you.

As you know, several states have programs that provide immunity to health care professionals who volunteer their services to help citizens in need. As Alaska attempts to provide care for the 20% of us who have no health insurance, volunteerism among health care workers is one option that is being explored to help fill the gap.

We believe HB 260 will help encourage volunteerism while still maintaining consumer access to damages if there was a case of gross negligence or reckless intentional conduct. AARP believes this is a "win-win" bill for citizens who need access to health care as well as the health professionals who are willing to volunteer their services in the highest tradition of their professions.

We look forward to your support of this bill in the House Labor and Commerce Committee and we sincerely thank you in anticipation of that support. AARP recommends an "AYE" vote on HB 260.

Should you have any questions about our position, please feel free to contact Marie Darlin (907.586.3637), Coordinator of the AARP Capital City Task Force; Patrick Luby (907.762.3314), AARP Legislative Representative; or me (907.245.5259).

Thank you for your consideration.

Sincerely,

Marguerite Stetson

Marguerite Stetson
AARP Alaska
Executive Council Member for Advocacy
3009 Northwood Street
Anchorage, AK 99517-1871
907.245.5259 voice
907.245.5279 fax
ffmas@aurora.uaf.edu

cc: Vice-Chair Bob Lynn
Representative Nancy Dahlstrom
Representative Carl Gatto
Representative Norman Rokeberg
Representative Harry Crawford
Representative David Guttenberg
Representative Paul Seaton
Representative Peggy Wilson
Representative Les Gara
Marie Darlin
Patrick Luby

April 30, 2003

Dear Representative Seaton, (fax: (907) 465-3472)

I was listening to the House L&C Committee hearing on HB 260 on April 28. I appreciated that you acknowledged that nurses should also be included in Section 2 of your bill. But I was very disappointed to hear that you were not aware of the levels of licensure for the nursing categories named in your bill.

Two weeks ago I sent to every Legislator an Informational brochure about the various categories of Advance Practice Nurses in Alaska. Attached is some of the information, in case your staff did not give that to you. I provided this information because legislators usually do not know much about this topic.

Nurses are a most altruistic group of health care providers. While I appreciate that you are carrying this bill on behalf of ASMA, nurses far outnumber MDs and do far more volunteer work in their communities than do MDs.

The defined health care providers in HB 260 is very appropriate, if the purpose of the bill is to provide a more hospitable environment for access to health care for Alaskans of all economic levels. I would encourage you NOT to entertain a reduction of those categories. I don't know if you heard Dr. Hedrick Hanson, who commented that he could not operate a clinic without nurses. Rep. Gara commented that he sees his dental hygienist much more frequently than his dentist.

I support your statement that free health care from volunteer health care providers is certainly vastly more desirable than no health care at all. There are too many Alaskans with no health care at all and that is the need that will be addressed by HB 260.

Thank you for your service to Alaska in the legislature.

Respectfully,



Cathy Giessel, MSN, FNP-CS
Marketing Committee Chair, Alaska Nurse Practitioner Association
12701 Ridgewood Rd
Anchorage, AK 99516

907 345 5470

copy to Representative Wilson (fax: (907) 465-3175)



ANPA

Alaska Nurse Practitioner Association
 2207 E. Tudor Rd. #34
 Anchorage, AK 99507
 907.222.6847

Advanced Nurse Practitioners in Alaska

Advanced practice nurses are Registered Nurses (RN) who have masters or other advanced degrees in specialty medical care.

There are 570 advanced practice nurses in the State of Alaska (2002 licensure figures). They are:

- Advanced Nurse Practitioners (ANP) - 477
- Certified Registered Nurse Anesthetists (CRNA) - 93

Advanced Nurse Practitioners (ANP) hold specialty certifications in:

- family and adult health care
- pediatrics
- gerontology
- women's health and midwifery
- school health
- psychiatric
- oncology
- cardiology

Advanced Nurse Practitioners:

- provide independent primary health care services
- provide professional consulting services
- are post-secondary and graduate level educators
- are administrators for health care facilities
- conduct professional research

ANP health care services include:

- health histories, physical examinations and diagnosis
- ordering of lab and x-ray testing
- prescription of medications and other treatments
- management of illnesses
- promotion of prevention and proactive health counseling

Advanced Nurse Practitioners can be found in:

- Alaska's large cities and rural communities
- clinics ANPs own and operate
- collaborative practices with physicians or other health care providers
- hospitals, nursing homes and long term care settings

w w w . a l a s k a n p . o r g

ANP continuing education:

- License renewal every 2 years
- Continuing education required for license renewal
- National specialty certification
- Periodic peer review

Advanced Nurse Practitioners are very active in community and state-wide issues:

- employing a lobbyist in Juneau
- participating in political campaigns for candidates of their choice
- voting

Advanced Nurse Practitioners contribute to the quality of life in Alaska as active members of their community and state, providing professional, caring and affordable health services for all ages.

For more information contact:

**Alaska Nurse Practitioner Association
2207 East Tudor Rd, Suite #34
Anchorage, AK 99507
907 222 6847**

**Cathy Giessel, MSN, FNP-CS
cgiessel@mac.com**



Lung & Sleep Clinic
of Alaska, Inc.
William Lucht MD. FCCP.

April 17, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Pulmonary, Critical Care Medicine, and Sleep Medicine.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

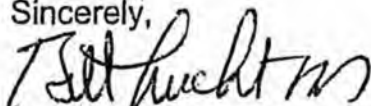
Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,



Bill Lucht, MD

JOHN B. DEKEYSER, M.D., P.C.
Obstetrics & Gynecology

Alaska Medical Plaza
1200 Airport Heights Drive, #280A
Anchorage, Alaska 99508-2955
(907) 339-9717 (800) 818 2229
Fax (907) 339-9720

April 18, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capital, Room 432
Juneau, AK. 99801-1182

Re: HB260 - The Retired Physicians Immunity Bill

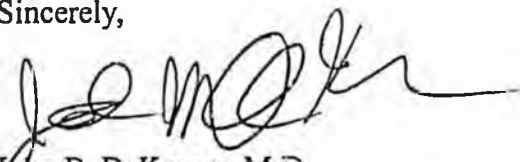
Dear Representative Anderson:

I am an Anchorage based physician specializing in Obstetrics & Gynecology.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

As you are aware, we are in the midst of both a medical liability insurance crisis along with a Medicare availability shortage. HB260 is a partial answer to both of these issues. I strongly urge you to support HB260.

Sincerely,



John B. DeKeyser, M.D.

tjl

MEDICAL
PARK



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Diplomates American Board of Family Practice

2211 EAST NORTHERN LIGHTS BOULEVARD, ANCHORAGE ALASKA 99508

F. LELAIND JONES, M.D.
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MARIO A. LANZA, M.D.
DARREN B. LEWIS, M.D.
TIMOTHY NOAH LAUFER, M.D.

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

April 18, 2003

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Family Practice.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice, even after they retire.

Sincerely,

Charles L. Aarons, M.D.

MEDICAL
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Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

April 18, 2003

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Family Practice.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

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I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice, even after they retire.

Sincerely,

Timothy Coalwell, M.D.

April 18, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Gastroenterology and Liver Disease.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

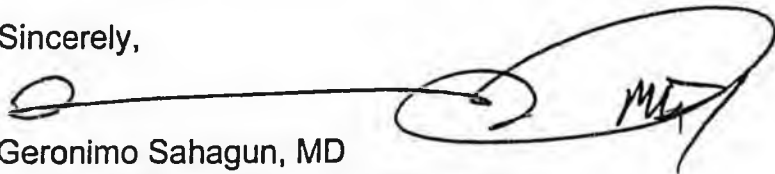
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Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,


Geronimo Sahagun, MD
Staff Gastroenterology/Hepatologist
Internal Medicine Associates (2841 DeBarr Rd-50, Anchorage, AK 99508)

MEDICAL
PARK
FAMILY CARE, Inc.



F. LELAND JONES, M.D.
KENNETH S. LAUFER, M.D.
R. MATISON WHITE, JR., M.D.
RICHARD R. TAYLOR JR., M.D.
CHARLES L. AARONS, M.D.

GLENN J. SCHULTES, M.D.
GARY L. CHILD, D.O.
TIMOTHY COAKSWELL, M.D.
MARIO A. LANZA, M.D.
DARREN B. LEWIS, M.D.
TIMOTHY NOAH LAUFER, M.D.

"Prompt, Thorough, Concerned"

Diplomates American Board of Family Practice

2211 EAST NORTHERN LIGHTS BOULEVARD, ANCHORAGE ALASKA 99508

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

April 18, 2003

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Family Practice.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

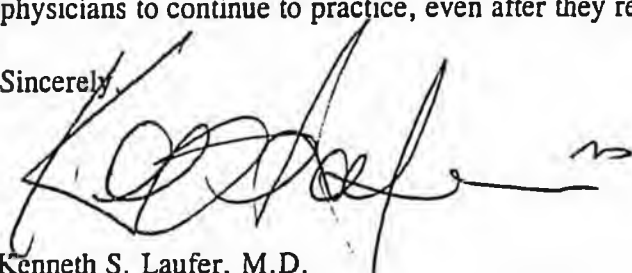
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I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice, even after they retire.

Sincerely,


Kenneth S. Laufer, M.D.

CREED MAMIKUNIAN, M.D.

2401 EAST 42ND AVENUE, SUITE 206
ANCHORAGE, ALASKA 99508
(907) 562-1860 • FAX (907) 562-1865

Otolaryngology
Head and Neck Surgery

Facial Plastic and
Reconstructive Surgery

April 17, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative:

I am an Anchorage based physician specializing in Otolaryngology.

Like many of my colleagues, I have plans to eventually retire in Alaska and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

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Sincerely,



Creed K. Mamikunian, MD

John D. Erkmann, M.D.

A PROFESSIONAL CORPORATION
Diplomate American Board Obstetrics & Gynecology

1200 Airport Heights Drive, Suite 200
ANCHORAGE, ALASKA 99508-2954
(907) 339-9700

April 21, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capital, Room 432
Juneau, AK. 99801-1182

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in OB/GYN.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

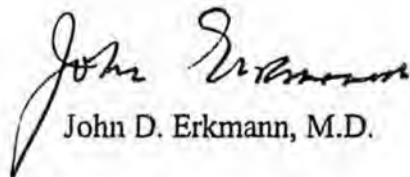
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Sincerely,



John D. Erkmann, M.D.

tjl

MEDICAL
PARK
FAMILY CARE, Inc.



F. LELAND JONES, M.D.
KENNETH S. LAUFER, M.D.
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RICHARD R. TAYLOR, JR., M.D.
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2211 EAST NORTHERN LIGHTS BOULEVARD, ANCHORAGE ALASKA 99508

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

April 18, 2003

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Family Practice.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

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I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice, even after they retire.

Sincerely,

F. Leland Jones, M.D.

The Senner Family, P.O. Box 102264, Anchorage, AK 99510
907-243-8044 (home) ♦ senfam@customcpu.com

May 5, 2003

Honorable Lesil McGuire
State Capitol, Room
Juneau, Alaska 99801-1182

Dear Representative McGuire;

On May 9th the House Judiciary Committee is scheduled to hear testimony on HB 260, " An Act relating to immunity for free health care services provided by certain health care providers...". The Alaska Nurses Association is very much in favor of this piece of legislation, but we would like to see one change be made to the bill.

The Alaska Nurses Association along with the Alaska Chapter of the American Red Cross, the Alaska Division of Public Health Nursing, and the Municipality of Anchorage Health Department has established the Alaska Nurse Alert System. This is a registry of nurses willing to volunteer in an event such as an epidemic or disaster.

We would like to see section 09.64.290 (3) of HB 260 amended to include emergency shelters and temporary health facilities set up as part of a disaster response. This would help provide added liability protection to those health care providers who volunteer in response to a public health emergency.

Thank you for your attention to this request, if you have any question please give me a call. We hope that we are able to testify on this bill by teleconference.

Sincerely,

Patricia Senner RN
President, Alaska Nurses Association

CREED MAMIKUNIAN, M.D.

2401 EAST 42ND AVENUE, SUITE 206
ANCHORAGE, ALASKA 99508
(907) 562-1860 • FAX (907) 562-1865

Otolaryngology
Head and Neck Surgery

Facial Plastic and
Reconstructive Surgery

April 17, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative:

I am an Anchorage based physician specializing in Otolaryngology.

Like many of my colleagues, I have plans to eventually retire in Alaska and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need and allow some of Alaska's most senior experienced physicians to continue to practice even after they retire.

Sincerely,



Creed K. Mamikunian, MD

John D. Erkmann, M.D.

A PROFESSIONAL CORPORATION
Diplomate American Board Obstetrics & Gynecology

1200 Airport Heights Drive, Suite 280
ANCHORAGE, ALASKA 99508-2954
(907) 339-9700

April 21, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capital, Room 432
Juneau, AK. 99801-1182

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in OB/GYN.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

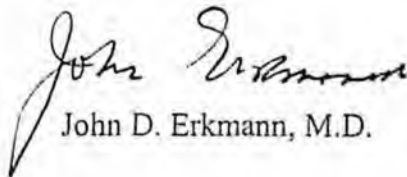
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Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for its geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,



John D. Erkmann, M.D.

tjl

JOHN SCHULTZ, D.O.
DIPLOMATE OF THE AMERICAN BOARD OF DERMATOLOGY
4048 LAUREL STREET, SUITE 301
ANCHORAGE, ALASKA 99508
—
TELEPHONE (907) 562-2510

April 17, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 - The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician.

Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB 260 will alleviate one of my major concerns about providing this free healthcare.

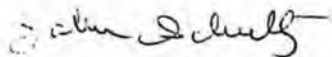
Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

Please support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,



John Schultz, D.O.



Richard A. Anschutz, MD, FACC
 James A. Baldauf, MD, FACC
 Leo B. Bustad, MD, FACC
 John C. Finley, MD, FACC
 Seth L. Krauss, MD, FACC
 William F. Mayer, MD, FACC
 Paul A. Peterson, MD, FACC
 Mark A. Sellenth, MD, FACC
 David W. Sonneborn, MD, FACC

Krzysztof W. Galaban, MD
 Maria Binder, MD
 Steven J. Compton, MD, FACC, FACP
 Thomas K. Kramer, MD, FACC
 William A. Kutcher, MD, FACC
 Mark W. Moroneil, MD
 George S. Rlynceer, MD, FACC
 Alan E. Skolnick, MD, FACC

Margaret Barnea, ANP Janet E. Campana, ANP Laurel K. Racenet, ANP
 Vicki L. Vermillion, ANP Mary Weppeler, MSN, NP

April 23, 2003

Honorable Tom Anderson
 House of Representatives
 Chairman Labor and Commerce
 State Capitol, Room 432
 Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative Anderson:

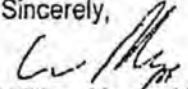
The Alaska Heart Institute, LLC, is an Anchorage based physician group that specializes in Cardiology. We have 17 Board Certified physicians and 5 Nurse Practitioners.

Many of these physicians will eventually retire in Alaska. We believe that providing a process where retired physicians are able to provide occasional free healthcare services to the elderly and indigent would alleviate some of the uninsured and access issues.

It is not realistic for a retired physician to pay a large medical malpractice insurance premium just to provide free services. HB260 would provide some needed civil liability protection.

Additionally, this bill will also encourage other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

The physicians of the Alaska Heart Institute urge you to support HB260. It will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,

 William Mayer, MD
 President



23 April, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

RE: HB260—The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in anesthesia.

Like many of my colleagues, I have plans to eventually retire in Alaska. I may want to continue to benefit my community by providing occasional free healthcare services to the elderly and the indigent. HB260 will alleviate one of my major concerns about providing the free healthcare.

Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and retaining adequate numbers of physicians to care for its geographically dispersed population. We have the fourth lowest number of physicians per capita in the nation. HB260 may help alleviate this problem.

I urge you to support the bill. HB260 will help Alaska's healthcare providers to care for those Alaskans most in need. It will allow us to continue to practice and serve our communities after retirement.

Sincerely,

Barbara M. Chen, M.D.



ANCHORAGE
WOMEN'S CLINIC
AT PROVIDENCE
Primary and Specialty Care for Women

April 17, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am an Anchorage based physician specializing in Obstetrics and Gynecology. Like many of my colleagues, I have plans to eventually retire in Alaska, and would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of my major concerns about providing this free healthcare.

Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,

Karen A. McCreary, M.D.

Alaska Physicians & Surgeons, Inc.
4120 Laurel Street, Suite 206
Anchorage, Alaska 99508
Phone: 907-561-7705 Fax: 907-561-7704
E-mail: akphys@alaska.net
Website: www.apsdoctors.org

April 24, 2003

Honorable Tom Anderson
House of Representatives
Chairman Labor and Commerce
State Capitol, Room 432
Juneau, AK 99801-1182

Re: HB260 – The Retired Physicians Immunity Bill

Dear Representative Anderson:

I am the Executive Director of Alaska Physicians & Surgeons, representing approximately 170 Anchorage based physicians. My association strongly supports HB260's goal of expanding healthcare access to indigent and elderly Alaskans by encouraging retired and other physicians to provide free service.

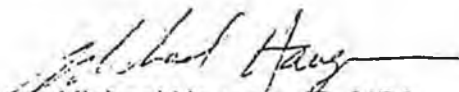
Currently, it is not realistic for retired physicians to pay large medical malpractice insurance premiums to provide free services. HB260 would provide some needed civil liability protection.

Please note that the bill will also encourage many other types of healthcare providers to offer their services free of charge to many of the most needy in Alaska.

Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for it's geographically dispersed population. HB260 would to some extent help alleviate this problem.

I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Sincerely,


Michael Haugen, JD, MBA
Executive Director

PRIMARY CARE ASSOCIATES
4100 Lake Otis Parkway, Ste 322
Anchorage, AK 99508
Voice 907-562-1234
Fax 907-561-8550

PRIMARY CARE ASSOCIATES
10928 Eagle River Road, Ste 150
Anchorage, AK 99577
Voice 907-694-7223
Fax 907-696-5123

Health Works

April 17, 2003

Hon. Tom Anderson
House of Representatives
Chairman of the Labor and Commerce
State Capital, Room 432
Juneau, AK 99801-1182

RE: HB260-The retired physicians immunity bill.

Dear Representative Anderson:

I am a 64-year-old family practice physician in Anchorage. Like many of my colleagues, I have plans to eventually retire in Alaska, and I would like to continue to benefit the community by providing occasional free healthcare services to the elderly and indigent. HB260 will alleviate one of the major concerns about providing this free healthcare.

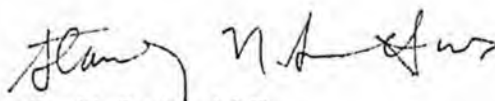
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Alaska has always had trouble attracting and maintaining adequate numbers of physicians to care for its geographically dispersed population. HB260 would, to some extent, help alleviate this problem. I urge you to support the bill. HB260 will encourage Alaska's healthcare providers to care for those Alaskans most in need, and allow some of Alaska's most senior and experienced physicians to continue to practice even after they retire.

Your attention to this matter is greatly appreciated.

Cordially,



Stanley N. Smith, M.D.

SNS/ILHS/xm.KB

Subject: [Fwd: hOUSE BILL 260]
Date: Thu, 01 May 2003 17:08:09 -0800
From: Lesil McGuire <Representative_Lesil_McGuire@Legis.state.ak.us>
Organization: Alaska State Legislature
To: Vanessa Tondini <Vanessa_Tondini@legis.state.ak.us>

Hey V! Lesil wanted you to see the following. Thanks!

Subject: hOUSE BILL 260
Date: Wed, 30 Apr 2003 13:41:43 -0800
From: "Dolly Lefever" <dolly@corecom.net>
To: <Representative_Lesil_McGuire@legis.state.ak.us>

Please support to broad definition of Health Care Providers in the Good Samaritan law. I have been a Nurse Practitioner in Alaska for 30 years first as State public health nurse working in the expanded role as the most trained medical provider in many villages(before health aides), than as a Nurse Midwife/ Family Nurse Practitioner. We provide sound care, well trained in diagnosing and treating minor illness with the knowledge to discriminate illness that need the care of Physicians. There are many illness like vaginitis, bladder infections etc that do not require MD care- just look at what is happening in Bush Alaska where lay people get training to treat these problems. In the event of a catastrophic event like an earthquake, major fire NP will be an invaluable assets to caring for the injured. The State licenses a number of health care providers - these should be included in the expanded definition for this Samaritan law.



t/ 907-274-0827
f/ 907-272-0292

2207 East Tudor Rd, Suite 34
Anchorage, AK 99507-1069
www.aknurse.org
aknurse@aknurse.org

May 9, 2003

Honorable Paul Seaton
Alaska State Legislator
State Capitol (MS 3100)
Juneau, AK 99801-1182

RE: HB 260 – Liability waiver for Volunteer Health Care Providers

Dear Representative Seaton;

The Alaska Nurses Association appreciates your sponsorship of House Bill 260, a waiver of liability for health care providers who are volunteering their services.

This bill is very important to the continued participation of nurses as volunteers, especially in connection with disaster preparedness and response. Since launching the Alaska Nurse Alert System in April, we have had over 150 Licensed Practical Nurses, Registered Nurses, and Advanced Nurse Practitioners volunteer to train and provide services in immunization clinics, Red Cross Shelters and the Anchorage Medical Reserve Corps.

By providing a limited informed consent liability waiver, the State would enable more health care providers to consider donating their much needed skills in times of need, without the volunteers having to face frivolous lawsuits.

Our one concern about this bill is that the current language appears to limit the coverage to traditional settings of healthcare delivery and does not appear to cover non-traditional situations that are possible during a disaster response. We would like the bill to clarify that it also covers a health care provider who volunteers services at such sites as a Red Cross Shelter or a temporary trauma unit (for example if a hospital was incapacitated and a temporary trauma unit was needed.)

Thank you, again, for your support on this critical matter. We hope for speedy passage of HB 260.

Sincerely,

A handwritten signature in cursive script that reads "Camille Soleil".

Camille Soleil
Executive Director

THE ALASKA ASSOCIATION OF NATUROPATHIC PHYSICIANS
11238 EAGLE RIVER ROAD, SUITE 254 • EAGLE RIVER, ALASKA • 99577-7228
PHONE: 907-694-5522 • FAX: 907-694-5524

May 7, 2003

Representative Paul Seaton
Capital Building
Juneau, Alaska 99811

Dear Representative Seaton:

Thank you for sponsoring the Volunteer Health Care Provider Immunity Act (HB 260). We as naturopathic physicians strongly agree that the removal of liability requirements for retired physicians would be in the best interest of the state of Alaska. We agree that removing the hindrance of malpractice insurance for retired physicians would increase the availability of quality volunteer medical care for Alaskans in all parts of the state. Further, we appreciate Section 09.65.290 that provides immunity from civil damages for physicians providing free health care services. Our profession has a tradition of providing volunteer health care for alcohol and drug detox centers, outreach clinics, and other state funded programs.

Licensed naturopathic physicians (N.D.) have completed a minimum of four years of graduate level naturopathic medical school. They are educated in all of the same basic and clinical sciences as a M.D., but with a strong emphasis on disease prevention and health optimization. In addition to the standard medical curriculum, the naturopathic physician is trained in acupuncture, botanical medicine, clinical nutrition, counseling, homeopathic medicine, physical medicine and psychology. Entry into the profession requires rigorous national board exams so that they can be licensed as primary care, general practice physicians. N.D.s know when, and how to refer to medical doctors, or specialists, for patient care that require immediate or further medical intervention.

We appreciate that naturopathic physicians have been included and support your sponsorship of HB 260.

Sincerely,

Madeleine Morrison-Young N.D.
AKANP President

Jason Harmon N.D.
Vice President
Anchorage

Scott Luper N.D.
Secretary
Fairbanks

Gigi Schulte N.D.
Treasurer
Anchorage

Daniel J. Young N.D., L.Ac.
Legislative Affairs
Anchorage

The Senner Family, P.O. Box 102264, Anchorage, AK 99510
907-243-8044 (home) ♦ senfam@customcpu.com

May 6, 2003

Honorable Paul Seaton
State Capitol
Juneau, Alaska 99801-1182

Dear Representative Seaton;

On May 9th the House Judiciary Committee is scheduled to hear testimony on HB 260, " An Act relating to immunity for free health care services provided by certain health care providers...". The Alaska Nurses Association is very much in favor of this piece of legislation, but we would like to see one change be made to the bill.

The Alaska Nurses Association along with the Alaska Chapter of the American Red Cross, the Alaska Division of Public Health Nursing, and the Municipality of Anchorage Health Department has established the Alaska Nurse Alert System. This is a registry of nurses willing to volunteer in an event such as an epidemic or disaster.

We would like to see section 09.64.290 (3) of HB 260 amended to include emergency shelters and temporary health facilities set up as part of a disaster response. This would help provide added liability protection to those health care providers who volunteer in response to a public health emergency.

Thank you for your attention to this request, if you have any question please give me a call. We hope that we are able to testify on this bill by teleconference.

Sincerely,

Patricia Senner RN
President, Alaska Nurses Association

HB 260

COVENANT HOUSE  ALASKA

The Honorable Paul Seaton
House of Representatives
Alaska State Capitol
Juneau, Alaska 99801-1182

Dear Representative Seaton:

Thank you for sponsoring HB260. This legislation would be of great benefit to Covenant House programs in two ways. First it would provide us an extra layer of protection for the services we are currently providing to youth without charge. Second, it would increase our abilities to utilize the services of health care providers from the community who are willing to volunteer. We provide free health care services to the youth we serve in all our programs. In one year we have had over 650 visits to our health clinic. A part-time Family Nurse Practitioner currently staffs our clinic.

We have had offers from nurses and physicians to provide volunteer services to our youth. Concerns about liability often keep individuals from being able to provide additional services to our youth. We recently had an offer for assistance from a military doctor, who could not provide direct services because her military malpractice does not cover her in the private sector.

Background Information

Covenant House Alaska is a non-profit social service organization. We have been a "lifeline from the streets" for homeless and runaway youth in Anchorage since 1988.

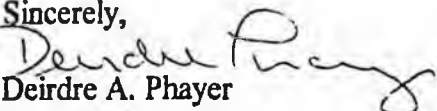
Covenant House operate multiple programs the include:

- Crisis Center: temporary residential care for youth in need of immediate sanctuary
- Youth Resource Center: offers outreach and walk-in services
- Transitional Living Programs: provides residential care for 24 youth

We provide an opportunity for young Alaskans to leave the streets, finish school, learn a skill, find a job, reunify with their families and begin their lives again. Our annual budget is 3.5 million and we employ 60 full time staff.

I appreciate your efforts and can be contacted at #907-339-4203 if you have additional questions.

Sincerely,


Deirdre A. Phayer
Executive Director

Alaska State Hospital & Nursing Home Association

We're helping people care for people!

April 28, 2003

Representative Tom Anderson
Capitol Building, Room 432
Juneau AK 99801-1182

Dear Representative Anderson:

I am writing in support of HB 260 relating to immunity for free health care services provided by certain health care providers.

ASHNHA wholeheartedly supports this legislation. Any efforts to increase the limited medical resources available in Alaska are a positive for the health care community and Alaskans.

The Alaska State Hospital and Nursing Home Association (ASHNHA) is an organization of all but one of the hospitals and nursing homes in Alaska. As such we represent the views of those medical facilities. They are solidly in favor of this legislation.

If you have questions, please contact me.

Sincerely yours,



Laraine L. Derr, President/CEO

426 Main Street, Juneau, Alaska 99801

Phone: 907-586-1790 • Fax: 907-463-3573 • Web: ashnha.com



t/ 907-274-0827
f/ 907-272-0292

2207 East Tudor Rd, Suite 34
Anchorage, AK 99507-1069
www.aknurse.org
aknurse@aknurse.org

Honorable Tom Anderson
Chair of House Labor and Commerce Committee
Alaska State Legislator
State Capitol (MS 3100)
Juneau, AK 99801-1182

RE: HB 260 – Liability waiver for Volunteer Health Care Providers

Dear Representative Anderson;

The Alaska Nurses Association supports the passage of House Bill 260, a waiver of liability for health care providers who are volunteering their services. This bill is very important to the continued participation of nurses as volunteers, especially in connection with disaster preparedness and response.

Our one concern about this bill is that the current language appears to limit the coverage to traditional settings of healthcare delivery and does not appear to cover non-traditional situations that are possible during a disaster response. We would like the bill to clarify that it also covers a health care provider who volunteers services at such sites as a Red Cross Shelter or a temporary trauma unit (for example if a hospital was incapacitated and a temporary trauma unit was providing services.)

Thank you for your work on this critical matter. We hope for, and will support, speedy passage of this bill.

Sincerely,

Camille Soleil
Executive Director

cc: House Labor and Commerce Committee Members



Honorable Tom Anderson, Chair
House Labor and Commerce Committee
Alaska Capital, Room 432
Juneau, AK 99801-1182

April 28, 2003

RE: HB 260 (Seaton)—Support

Dear Chair Anderson:

On behalf of the AARP members in Alaska, we encourage you and your colleagues on the House Labor and Commerce Committee to support HB 260, authored by Representative Paul Seaton, and co-sponsored by Representatives Peggy Wilson, Les Gara, and you.

As you know, several states have programs that provide immunity to health care professionals who volunteer their services to help citizens in need. As Alaska attempts to provide care for the 20% of us who have no health insurance, volunteerism among health care workers is one option that is being explored to help fill the gap.

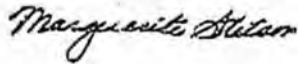
We believe HB 260 will help encourage volunteerism while still maintaining consumer access to damages if there was a case of gross negligence or reckless intentional conduct. AARP believes this is a "win-win" bill for citizens who need access to health care as well as the health professionals who are willing to volunteer their services in the highest tradition of their professions.

We look forward to your support of this bill in the House Labor and Commerce Committee and we sincerely thank you in anticipation of that support. AARP recommends an "AYE" vote on HB 260.

Should you have any questions about our position, please feel free to contact Marie Darlin (907.586.3637), Coordinator of the AARP Capital City Task Force; Patrick Luby (907.762.3314), AARP Legislative Representative; or me (907.245.5259).

Thank you for your consideration.

Sincerely,



Marguerite Stetson
AARP Alaska
Executive Council Member for Advocacy
3009 Northwood Street
Anchorage, AK 99517-1871
907.245.5259 voice
907.245.5279 fax
ffmas@aurora.uaf.edu

cc: Vice-Chair Bob Lynn
Representative Nancy Dahlstrom
Representative Carl Gatto
Representative Norman Rokeberg
Representative Harry Crawford
Representative David Guttenberg
Representative Paul Seaton
Representative Peggy Wilson
Representative Les Gara
Marie Darlin
Patrick Luby

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Justification for amendment to HB 260

The reason for adding Dental Hygienists to those covered by the protection offered in this legislation is the following:

- Dental Hygienists are also health care providers by the insurance definition
- While they are covered by the dentists malpractice insurance if they are practicing under his license, there are instances where they would be required to carry their own malpractice insurance, and are also eligible to carry their own malpractice insurance above what is covered by the supervising dentist.
- Instances this would apply to an RDH:
 - A nursing home setting
 - Administering fluoride
 - Placing sealants
 - Conducting oral health screenings
 - Providing cleanings or periodontal therapy

Remote areas are currently the most underserved with regards to dental health care. Dental Hygienists provide a number of preventive and therapeutic services different than restorative dentistry. I believe the addition of this profession to the list of those covered will encourage their charitable participation.