

AK LEGISLATURE FINANCE COMMITTEES FILES 2007-2008 3150

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October 2003, the State issued approximately \$2 billion in POBs. These POBs were listed on the Luxembourg Stock Exchange in order to facilitate sales to European investors.

In 2003, the Oregon Legislative Assembly made substantial changes to Oregon PERS. These PERS reforms resulted in extended litigation. This litigation included a number of challenges to the legislative reforms seeking to, among other things, have implementation of the reforms enjoined or declared an unconstitutional impairment of contract or unconstitutional taking of property. Although these cases are not directly related to any particular bond issues, and have resulted generally in the legislative reforms being upheld. Continuing litigation, as well as subsequent legislation or administrative action, could have significant implications with respect to PERS and the related liability of Oregon state and local government units.

CONTACT INFORMATION

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HB

14

HFIN

FILE

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: Courts-4-30-07
Bill Version: CSHB014(JUD)
() Publish Date: _____

Revision Date/Time (Note if correction): _____

Dept. Affected: _____

Title Restrict access to alcohol

RDU Alaska Court System

Component Trial Courts

Sponsor Representative Crawford

Requester _____

Component No. _____

Expenditures/Revenues

(Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
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						
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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 (Specify Type--Do not abbreviate)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

The court system does not anticipate any fiscal impact from the passage of CSHB 14(JUD).

Prepared by: Doug Woolivor, Administrative Attorney
Division: Alaska Court System
Approved by: Doug Woolivor for Stephanie Cole, Administrative Director
Agency: Alaska Court System

Phone 463-4750
Date/Time 4-30-07 @ 10:30 am
Date 4/30/2007

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: CSHB014(JUD)-DOC-A&
 Bill Version: CSHB14 (JUD)
 () Publish Date: _____

Revision Date/Time (Note if correction): _____ Dept. Affected: Corrections
 Title An act relating to the purchase of alcoholic RDU Administration & Operations
beverages and to access to licensed premises; relating to . . . Component Office of the Commissioner
 Sponsor Representative Crawford
 Requester House Finance Component No. 694

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
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						
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CHANGE IN REVENUES ()						
-------------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

Passage of this legislation will not have a fiscal impact on the Department of Corrections.

Prepared by: Sharon Griffin, Director Phone (907) 465-3339
 Division Administrative Services Date/Time 5/1/07 9:39 AM
 Approved by: Dwayne Peoples, Deputy Commissioner Date 5/1/2007
 Agency Department of Corrections

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: 1
Bill Version: CSHB 14(L&C)
(H) Publish Date: 3/1/07

Revision Date/Time (Note if correction): _____ Dept. Affected: Law
Title An Act restricting access to alcohol. RDU Criminal
Component Criminal Justice Litigation
Sponsor Representative Crawford
Requester House Labor & Commerce Component No. _____

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
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						
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CHANGE IN REVENUES ()						
-------------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

The bill would establish new law and amend current statute so as to restrict the purchase of alcohol by persons prohibited from consuming alcoholic beverages as a result of a conviction or condition of probation or parole. It provides that such a person may not knowingly enter or remain in licensed premises to purchase or obtain alcohol.

It provides that the driver's license of a person who has been ordered not to consume alcohol will be marked with the restriction.

The department does not anticipate any significant fiscal impact.

Prepared by: Robert Meiners, Acting Director
Division: Administrative Services Division
Approved by: Robert Meiners for Talis Colberg, Attorney General
Agency: Department of Law

Phone: 465-5427
Date/Time: 2/5/07 8:51 AM
Date: 2/5/2007

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: 2
Bill Version: CSHB 14(L&C)
(H) Publish Date: 3/1/07

Revision Date/Time (Note if correction): _____ Dept. Affected: Administration
Title "An Act relating to the purchase of alcoholic beverages and acces to licensed premises..." RDU Division of Motor Vehicles
Component Motor Vehicles
Sponsor Rep. Crawford
Requester (H) L&C Component No. 2348

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services	*	*	*	*	*	*
Travel	0.0	0.0	0.0	0.0	0.0	0.0
Contractual	*	*	*	*	*	*
Supplies	*	*	*	*	*	*
Equipment	0.0	0.0	0.0	0.0	0.0	0.0
Land & Structures	0.0	0.0	0.0	0.0	0.0	0.0
Grants & Claims	0.0	0.0	0.0	0.0	0.0	0.0
Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE IN REVENUES ()	*	*	*	*	*	*

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1037 GF/Mental Health	0.0	0.0	0.0	0.0	0.0	0.0
Other (Specify Type--Do not abbreviate)	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time	*	*	*	*	*	*
Part-time	0	0	0	0	0	0
Temporary	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary)

This bill requires the Division of Motor Vehicles (DMV) to physically 'mark' a driver's license or a State issued Identification Card if the holder's privilege to purchase alcohol has been restricted. The DMV today has no direct knowledge of a persons conditions of probation or parole.

Until the number of customers and method of information transmission is ascertained in conjunction with the Alaska Court System, the DMV has no ability to measure the impact this will have on our planned operation. As a result we respectfully submit an 'indeterminate' fiscal note.

Once this information has been established, the DMV will provide a firm estimate of costs incurred and revenue generated as a result.

Prepared by: Duane Bannock, director
Division: Motor Vehicles
Approved by: Kevin Brooks, Deputy Commissioner
Agency: Department of Administration

Phone 269 5008
Date/Time 2/6/07 12:00 PM
Date 2/7/2007

*Alaska Cabaret, Hotel,
Restaurant & Retailers Association*



1111 East 80th Ave., Suite 3 • Anchorage, Alaska 99518
(907) 274-8133 • Fax: (907) 274-8630
Toll Free In Alaska: (800) 478-2027

The Honorable Harry Crawford
Alaska State Legislature
House of Representatives
State Capitol, Room 400
Juneau, AK 99801-1182

January 23, 2007

Dear Representative Crawford,

I am writing you today on behalf of the Alaska Cabaret, Hotel, Restaurant and Retailer's Association, a non-profit member-based trade organization for Alaska's hospitality industry.

Alaska CHARR would like to share our support of House Bill 14, an Act relating to the purchase of alcoholic beverages and to access to licensed premises; relating to the civil liability for certain persons accessing licensed premises; requiring driver's licenses and identification cards to be marked if a person is restricted from consuming alcoholic beverages as a result of a conviction or condition of probation or parole and relating to fees for the marked license; and requiring the surrender and cancellation of driver's licenses under certain circumstances.

Alaska CHARR supports the intent of this bill, as a voluntary option for licensed premises to civilly prosecute those subject to the conditions of this bill.

We appreciate your commitment to understanding our industry's concerns, and the time you spend working with our industry to create a piece of legislation that can be effectively used to combat abuse of alcohol in Alaska.

Sincerely,

Dale Fox
President & CEO, Alaska CHARR

Alaska State Legislature
House of Representatives

Alaska State Capitol
Juneau, Alaska 99801-1182
1-907-465-3438 (phone)
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Interim Address
716 West Fourth Avenue
Anchorage, Alaska 99501-2133
(phone) 1-907-269-0100
(fax) 1-907-269-0105

Representative Harry Crawford
District 21

SPONSOR STATEMENT: HOUSE BILL 14

Alaska has a problem with alcohol. Though we have some of the most punitive drunken driving laws in the nation, Alaskans continue to die in tragic accidents fueled by alcohol. In order to prevent these accidents from occurring, we need a new approach that keeps alcohol out of the hands of repeat offenders.

Repeat drunk drivers are often ordered not to consume alcohol as part of a sentence or as a condition of probation or parole. Currently there is no method by which a vendor of alcoholic beverages may determine whether an individual is under such restriction. House Bill 14 will require that the driver's license or state ID card of an individual court ordered not to drink be marked so that restaurants, bars and liquor stores are aware the individual is prohibited from consuming alcohol.

The bill does not require vendors to check the identification of every individual attempting to purchase alcohol; however, if a vendor catches a person with a marked license attempting to purchase alcohol, the vendor may pursue a \$1000 civil penalty. The civil penalty provides a hefty financial incentive for vendors to check for marked licenses and ensure customers are legally permitted to purchase alcohol.

This new approach will stop repeat offenders who are court ordered not to drink from purchasing alcohol and will save lives. In passing House Bill 14, we will keep Alaskan families safe by preventing tragic accidents from happening. I respectfully ask for your support.

Alaska State Legislature
House of Representatives

Alaska State Capitol
Juneau, Alaska 99801-1182
1-907-465-3438 (phone)
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Representative Harry T. Crawford, Jr.
East Anchorage District 21

E-mail: Representative_Harry_Crawford@legis.state.ak.us

Website www.akdemocrats.org

Changes in CS for HB 14 (JUD) version "V"

Section 4

Page 4, Lines 14-15

Fee for issuing a marked identification card

At the request of the DMV, the fee for issuing a marked identification card is set in statute at \$50.

Section 7

Add "identification card"

Adds "identification card" to the statutes requiring the courts and parole board to require a person ordered not to consume alcohol to surrender his or her driver's license.

Section 8

Page 6, Lines 7-9

Fee for issuing a marked driver's license

At the request of the DMV, the fee for issuing a marked identification card is set in statute at \$50.

Title amended accordingly to reflect the above described changes.

Alaska State Legislature
House of Representatives

Alaska State Capitol
Juneau, Alaska 99801-1182
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Representative Harry T. Crawford, Jr.
East Anchorage District 21

E-mail: Representative_Harry_Crawford@legis.state.ak.us
Website www.akdemocrats.org

Changes in CS for HB 14 (L&C)

Section 1

Page 2, Lines 6-8: Insert 04.16.047 (c)

New subsection clarifies that liquor licensees are not required to physically check the identification of every person entering their premises.

Section 2 and Conforming Amendments

Remove "privilege to purchase"

Language establishing the purchase of alcohol as a privilege removed and replaced with "restriction on purchasing alcoholic beverages."

Section 3

Page 3, Lines 11-12: Following "may" inserted "but has no duty or obligation to"

Clarifies that checking the identification of every person to see if it is marked is not mandatory.

Page 3, Line 16: Following "shall" inserted "be"

Correction to typographical error.

New Section 9 and Conforming Title Amendment:

Creates effective date of January 1, 2008. This provides sufficient time for the court system to develop a standardized form for reporting court orders to the DMV.

LEGAL SERVICES


DIVISION OF LEGAL AND RESEARCH SERVICES
LEGISLATIVE AFFAIRS AGENCY
STATE OF ALASKA

(907) 465-3867 or 465-2456
FAX (907) 465-2029
Mail Stop 3101

State Capitol
Juneau, Alaska 99801-1182
Deliveries to: 129 6th St., Rm. 329

MEMORANDUM

January 17, 2007

SUBJECT: Sectional Summary - HB 14 (Work Order No. 25-LS0095AE)
TO: Representative Harry Crawford
FROM: Gerald P. Luckhaupt
Legislative Counsel 

You have requested a sectional summary of the above-described bill. As a preliminary matter, please note that a sectional summary of a bill should not be considered an authoritative interpretation of the bill - the bill itself is the best statement of its contents.

Section 1 amends AS 04 by adding a new section that provides that a person who is not privileged to purchase alcohol may not enter or remain on licensed premises; provides a civil remedy for licensees against persons who violate this section.

Section 2 amends AS 04 by adding a new section that provides that the purchasing of alcoholic beverages by a person of legal age is a privilege that can be revoked for conviction of certain crimes or as a condition of probation or parole.

Section 3 provides an amendment to conform AS 04.21.050 to the change made in section 2.

Section 4 amends AS 18.65.310, relating to identification cards, to require that identification cards be marked if a person's privilege to purchase alcohol is restricted.

Section 5 amends AS 28.15.11(a) by requiring that drivers' licenses be designed to allow the license to be electronically read so as to display whether a person is privileged to purchase alcoholic beverages under AS 04.16.160.

Section 6 amends AS 28.15.161(a) to require the department of administration to cancel a driver's license when the licensee's privilege to purchase alcohol is restricted.

Section 7 amends AS 28.15.191 by requiring courts and the board of parole to notify the department of administration when a person's privilege to purchase alcohol is restricted.

Section 8 authorizes the department of administration to charge a fee for issuance of a new driver's license to a person when the privilege to purchase alcohol is restricted.

GPL:lhw
07-017.lhw

LEGAL SERVICES

DIVISION OF LEGAL AND RESEARCH SERVICES
LEGISLATIVE AFFAIRS AGENCY
STATE OF ALASKA

(907) 465-3867 or 465-2450
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Mail Stop 3101

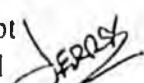
State Capitol
Juneau, Alaska 99801-1182
Deliveries to: 129 6th St., Rm. 329

MEMORANDUM

January 31, 2007

SUBJECT: Criminal Liability for ABC Licensees and HB 14
(Work Order No. 25-LS0095\AE)

TO: Representative Harry Crawford

FROM: Gerald P. Luckhaupt
Legislative Counsel 

You have asked if HB 14 provides for criminal liability for a licensee, or their agents or employees, for selling alcohol to a person whose privilege to purchase alcohol is restricted under HB 14. The answer is no, unless the licensee, agent, or employee knows the person is unable to purchase alcohol and sells the alcohol to the person anyway. In that situation the licensee, agent, or employee could be liable as a principle under AS 11.61.110.

In considering what HB 14 does, you can compare these persons who have their privilege to purchase alcohol restricted to persons under 21 years of age who have no privilege to purchase alcohol. Those under 21 may not access licensed premises,¹ may not possess, control, or consume alcohol,² may not be furnished alcohol by other persons,³ and may not be furnished alcohol by licensees, agents, or employees.⁴ HB 14 provides one section, proposed AS 04.16.047, that states that a person whose privilege to purchase alcohol is restricted may not access licensed premises to obtain or consume alcohol. Nothing similar to AS 04.16.052 is provided and so, generally, there would be no liability for a licensee, agent, or employee that sells or serves a person whose privilege to purchase alcohol is restricted. As I previously noted though, a licensee, agent, or employee who has knowledge that a particular person has had their privilege to purchase alcohol restricted who assists that person in obtaining alcohol could be liable as a

¹ AS 04.16.049.

² AS 04.16.050.

³ AS 04.16.051 makes the other person criminally liable for furnishing or delivering to a minor.

⁴ AS 04.16.052 makes the licensee, agent, or employee criminally liable.

principle under the accomplice liability law in AS 11.16.110.⁵

GPL:ljw
07-040.ljw

⁵ Sec. 11.16.110. Legal accountability based upon the conduct of another. A person is legally accountable for the conduct of another constituting an offense if

(1) the person is made legally accountable by a provision of law defining the offense;

(2) with intent to promote or facilitate the commission of the offense, the person

(A) solicits the other to commit the offense; or

(B) aids or abets the other in planning or committing the offense; or

(3) acting with the culpable mental state that is sufficient for the commission of the offense, the person causes an innocent person or a person who lacks criminal responsibility to engage in the proscribed conduct.

LEGAL SERVICES

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Mail Stop 3101


State Capitol
Juneau, Alaska 99801-1182
Deliveries to: 129 6th St., Rm. 329

MEMORANDUM

February 22, 2007

SUBJECT: HB 14 and Civil Liability of Licensees

TO: Representative Harry Crawford

FROM: Gerald P. Luckhaupt
Legislative Counsel 

You have asked if HB 14 imposes new liabilities for civil damages on alcoholic beverage licensees in the following areas:

1. The licensee fails to check the ID of a person whose privilege to purchase alcohol is restricted under AS 04.16.160;
2. The licensee checks the ID, discovers that the person is not eligible to purchase alcohol, but consciously chooses to sell the alcohol to the person anyway;
3. The licensee does not serve the person with the restricted privilege but another person supplies drinks to the person while on the licensed premises.

I do not see where there is any greater civil liability of a licensee to a person whose privilege to purchase alcohol is restricted under the bill or to a third person who might be injured by the actions of the person restricted under any of these scenarios.¹ AS 04.21.020 specifies the civil liability of a licensee or other person for providing alcohol to another person. Subsection (a) of that section provides that:

a person who provides alcoholic beverages to another person may not be held civilly liable for injuries resulting from the intoxication of that person unless the person who provides the alcoholic beverages holds a license authorized under AS 04.11.080 - 04.11.220 or is an agent or employee of such a licensee and

(1) the alcoholic beverages are provided to a person under the age of 21 years in violation of AS 04.16.051, unless the licensee, agent, or employee secures in good faith from the person a signed statement, liquor identification card, or driver's license meeting the requirements of

¹ Under the second scenario listed above, the conscious choice of a licensee to serve a person who is not eligible to purchase alcoholic beverages could subject the licensee to criminal liability as explained in my memorandum of January 31, 2007, and could potentially result in suspension or revocation of the license under AS 04.11.370.

AS 04.21.050(a) and (b), that indicates that the person is 21 years of age or older; or

(2) the alcoholic beverages are provided to a drunken person in violation of AS 04.16.030.

This provision does not waive the immunity traditionally provided to a server of alcohol under the scenarios you have provided. Two other exceptions are also provided in AS 04.21.020(b)² and (d)³ neither of which would apply here.

GPL:med
07-119.med

² (b) A person who sells or barter an alcoholic beverage to another person in violation of AS 04.11.010 is strictly liable (1) to the recipient or another person for civil damages if, while under the influence of the alcoholic beverage, the person receiving the alcoholic beverage engages in conduct that results in civil damages and the recipient's being under the influence of the alcoholic beverage substantially contributes to the civil damages; and (2) for the cost to the state or a political subdivision of the state to criminally prosecute a person who receives an alcoholic beverage from a person who violates AS 04.11.010, if the prosecution results from the violation of AS 04.11.010 described in this subsection.

³ (d) A person who knowingly furnishes or delivers an alcoholic beverage to a person under 21 years of age in violation of AS 04.16.051 is civilly liable to the recipient or another person for civil damages if, while under the influence of the alcoholic beverage, the person receiving the alcoholic beverage engages in conduct that results in civil damages and the recipient's being under the influence of the alcoholic beverage substantially contributes to the civil damages.

STATE OF ALASKA

Sarah Palin, GOVERNOR

DEPT. OF HEALTH AND SOCIAL SERVICES

*Advisory Board on Alcoholism and Drug Abuse
Alaska Mental Health Board*

*P.O. BOX 110608
JUNEAU, AK 99811-0608
PHONE: (907) 465-8920
FAX: 465-4410*

April 11, 2007

Testimony to the House Judiciary Committee by Angela Salerno, Advocacy Coordinator

Re: HB 14

The Advisory Board on Alcoholism and Drug Abuse and the Alaska Mental Health Board strongly support HB 14.

HB 14 uses an environmental strategy of prevention that has been proven to reduce alcohol abuse and related problems.

An environmental strategy is one that uses public policy and community-level interventions to affect whole populations. While traditional prevention strategies are aimed at helping the individual resist the temptation to use alcohol through information and skill training, environmental strategies work by changing the overall community system that informs its members what society tolerates, and of what it disapproves.

Three common methods of environmental change that have worked with alcohol abuse are:

1. Restrictions on retail sales or sellers: restrictions on the number, location, or density of retail outlets or on the days and hours of sales;
2. Price controls: sales taxes, or bans on drink discounts such as "happy hour";
3. Controls on advertising and promotion;
4. Purchase laws: minimum legal drinking age for purchasing alcohol.

HB 14 would add a new prevention method in the area of purchase laws by making it more difficult for people legally barred from buying or consuming alcohol to purchase it.

The advantages of environmental strategies such as that provided by HB 14 include:

- Broader reach. The bill has the potential to generate larger effects than prevention aimed at individuals. The bill would produce widespread small changes in behavior that result in substantial net benefits to society in terms of reduced problems;
- More substantial effects. While individually focused prevention efforts such as education and skill-building produce some effects on knowledge and attitudes, many environmental strategies have been shown to substantially reduce consumption and use-related problems including traffic crashes, unintentional injuries, suicide and assaultive offenses;
- More enduring effects. Environmental approaches result in the creation of a substantially changed system that offers few opportunities and inducements to use alcohol for both current and future generations;
- Ease of maintenance and cost-effectiveness. Environmental approaches have the benefits of being comparatively easy to maintain, and less costly than strategies directed at individuals.

We urge the committee pass HB 14 as an effective and responsible means to reduce alcohol abuse and its cost to the State of Alaska.

As printed in the Anchorage Daily News February 22, 2007

Card mark

Weapon against alcohol abuse

Rep. Harry Crawford has a simple bill in the works to enforce court-ordered alcohol abstinence. House Bill 14 would require convicted offenders to pay for a special driver's license or state ID that would carry an identifying mark so that alcohol retailers would know the customer had lost what state law calls the "privilege to purchase."

The law also would allow sellers to seek \$1,000 in civil damages, in addition to attorney fees from cardholders who illegally try to buy alcohol on their premises. That would give bar and liquor store owners and managers the financial incentive to go after violators and help enforce the law.

There shouldn't be much heartburn about this.

Nanny-state fears are groundless. The bill takes aim at those offenders deemed by a court of law, after full due process, to be too irresponsible to consume alcohol, at least during their sentence or while on probation or parole. Reasons for such restrictions are all too familiar -- driving under the influence, domestic violence, public drunkenness.

Sellers wouldn't be required to card every person who walks through the door, but would have an incentive to card more often and to card anyone who raises suspicions. For their part, offenders would carry a reminder of their sentence and the need to stay on the straight and narrow.

The bill does not increase a liquor store or bar owner's liability beyond what the law already provides. The burdens of cost and accountability would fall squarely on offenders, where they belong.

Don't want to carry the offending card? Then don't offend. Don't drink and drive, or drink and assault, or drink and pass out in the middle of the street. As Rep. Crawford says, despite some of the toughest drunken-driving laws in the country, Alaska still has a serious alcohol problem. The Anchorage Democrat's bill is part of the solution. The Anchorage Cabaret, Hotel, Restaurant and Retailer's Association is part of the answer too -- the group backs the legislation. It is possible that shutting out problem drinkers could help business owners' insurance rates.

HB 14 will get its first hearing Friday in the House Labor and Commerce Committee, the first of three House committees with jurisdiction. Members should give it a close look, improve it as needed, then start it on its way to passage.

BOTTOM LINE: A marked card for alcohol abusers will take away their purchasing privileges and prevent more abuse.

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Problem drinkers**Legislature should pass law to block sales to repeat offenders***(Published: April 7, 2007)*

A bill to mark the driver's licenses or state identification cards of repeat drunken-driving offenders is scheduled for a legislative hearing next Wednesday. House Judiciary Committee members should listen, give the bill a swift "do pass" and send it on to the Finance Committee.

*(Peter Dunlap-Shohl)*

Here's what House Bill 14, sponsored by Rep. Harry Crawford, would do:

- Require repeat drunken drivers to buy a driver's license or state ID card that would carry a mark and electronic tag telling sellers of alcoholic beverages that the bearer has lost the right to buy alcohol. Such licenses would be required only of those convicted offenders with court orders against the purchase or consumption of alcohol.
- Allow merchants to pursue civil damages up to \$1,000 from any person who tries to buy alcohol in violation of a court order.

The effect would be threefold.

First, the marked cards would send a strong, statewide message against drunken driving -- and against any alcohol abuse that fuels a range of crimes from shoplifting to sexual assault.

Second, offenders on probation or parole would carry a constant reminder of a condition of their freedom: If you cross the court or try to shrug off your debt to society, your parole or probation may be revoked.

Third, retailers would have more incentive to card buyers and keep alcohol out of the hands of those who have lost the privilege of purchase.

A better, more foolproof system would be to require mandatory carding of all buyers, but that is politically impossible in Alaska. Until that attitude changes, HB 14 would at least put retailers more squarely on the side of law enforcement and public safety, providing an extra incentive to say, "Not on my premises you don't."

The goal is to keep repeat offenders, those who have proven themselves too irresponsible to drink, from doing more damage. To keep them from killing people in car accidents, from battering partners, from endangering themselves and others.

Lawmakers already have plenty of work and less than six weeks left in the session, but this bill shouldn't require that much time. A similar measure passed the full House in 2006 -- by an overwhelming 33-5 majority -- before dying in the Senate. This year, lawmakers should finish the job and make Alaska a little safer.

BOTTOM LINE: Make it tougher for repeat offenders to buy the bottle and ruin lives.

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Alcohol can be kept from offenders

COMPASS: POINTS OF VIEW FROM THE COMMUNITY

By REP. HARRY CRAWFORD AND BERNADETTE BRADLEY

(Published: February 9, 2007)

In the past decade, the Alaska Legislature has taken an aggressive approach to combat drunken driving by increasing fines and sentences. Despite some of the toughest laws in the nation, Alaskans continue to be injured or killed in accidents fueled by alcohol.

Many convicted of drunken driving go on to commit the crime again. Statistics show that a third of the people arrested for drunken driving are repeat offenders.

These repeat offenders are 40 percent more likely to be involved in a fatal crash. Alaska has increased punishment for repeat offenders, but those penalties only kick in after the crime has been committed and someone has possibly been injured or killed.

Repeat offenders are often ordered not to consume alcohol as part of a sentence or as a condition of probation or parole. Yet there is currently no way for restaurants, nightclubs, bars and liquor stores to know if an individual has been court-ordered not to drink. There is nothing to stop him from going to the store and buying alcohol.

HB 14 would change that. If a convicted drunken driver were court-ordered not to drink for a period of time, a mark would be placed on his or her driver's license or state ID card for the duration of the order. That mark would alert businesses that sell alcohol that the individual was prohibited from drinking. If a business caught a person with a marked license attempting to illegally purchase alcohol, then the business could pursue a \$1,000 penalty, similar to the penalty awarded if a minor is caught attempting to purchase illegally.

Some people confuse HB 14 with other, more controversial approaches. It isn't a mandatory ID law. The laws regarding which customers are required to show ID are not changed by this legislation. It doesn't mean your grandmother would have to start showing ID in order to buy a bottle of wine for Sunday dinner. Checking ID remains voluntary, but there is a \$1,000 incentive through the civil penalty for liquor licensees to make sure their customers aren't under court order not to drink.

HB 14 also doesn't require bars, restaurants or liquor stores to buy any special equipment, like electronic scanners for IDs. Some stores have started using scanning technology, but most have not. The mark on the license will be a physical display visible to the naked eye. The information will also be on the card electronically for those businesses that utilize scanning technology. But there won't be any added cost for doing business in Alaska.

This legislation is supported by the Anchorage Cabaret, Hotel and Restaurant Retailer association. Anchorage CHARR is a trade organization that represents local restaurants, hotels, bars, liquor stores and other hospitality-related businesses.

The 2007 strategic plan of Anchorage CHARR includes efforts to continue to reduce drunken-driving statistics. In May of 2005, Anchorage CHARR initiated the successful "Off the Road" program, which

provides customers with a free, safe way of getting home if they have had too much to drink. Anchorage CHARR encourages its members to help customers make the right choice, to drink responsibly and drive responsibly. HB 14 is a step in the right direction to deter future repeat offenders.

Too many Alaskan lives have been destroyed by drunken driving. It's a crime that affects the whole community. By trying new ways to stop problem drinkers from buying alcohol, we can prevent drunken-driving deaths and injuries from happening. Working together, we can lead the way to protecting Alaska families.

Rep. Harry Crawford is the sponsor of HB 14 and represents East Anchorage in the Alaska State Legislature. Bernadette Bradley is the owner of the Bradley House in Anchorage and the president of Anchorage CHARR.

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Heather Beaty

From: Tom McGrath [tommcgrath@gci.net]
Sent: Sunday, February 04, 2007 8:44 AM
To: Sen. Hollis French; Sen. Johnny Ellis; Rep. Kevin Meyer; Rep. Berta Gardner; Rep. Mike Doogan
Cc: Governor Sarah Palin; Rep. Harry Crawford
Subject: HB 14

Ladies and Gentlemen:

I encourage you to work very hard to pass HB14 this year. Continually we are faced with the consequences of Alcohol Abuse. Just last week a man in the Mat-Su Valley was apprehended operating a motor vehicle, intoxicated, with 6 prior D.U.I.'s. This bill will not solve all the problems but it will highlight the problem and make every one who consumes alcohol a problem.

I feel there is nothing wrong with the responsible consumption of alcohol but we pay a very heavy price dealing with the misuse of alcohol. Law enforcement people will tell you that eighty per cent of the people in prison in Alaska are there with alcohol as a contributing factor. What is truly tragic is that thirty seven percent of prisoners in jail in Alaska are Alaska Natives while they only represent eight per cent of the population. Almost all are in jail with alcohol as a contributing factor.

O.C. Madden from Brown Jug first suggested this measure 6 years ago. Under his guidance, Brown Jug does a good job of trying not to sell to people who should not buy. With this law there would be a systematic approach to preventing abusers from buying alcohol in all Alcohol outlets in the State of Alaska. I don't think the problem will end here but it is one small step in the right direction.

I am a conservative person and I generally don't think Government should interfere with our lives. However, when the rights of one person causes significant harm to another the Government needs to step in. This is one of those times.

I encourage you to make HB14 a priority this year.

Tom McGrath
907-250-4302 Cell
907-562-8730 Office
907-563-0836 Fax
tommcgrath@gci.net

--
No virus found in this outgoing message.

Checked by AVG Free Edition.

Version: 7.5.432 / Virus Database: 268.17.22/666 - Release Date: 2/3/2007 3:31 PM

Heather Beaty

From: bonniel.jack [bonniel.jack@alaska.net]
Sent: Thursday, February 15, 2007 2:05 PM
To: Rep. Carl Gatto; Representative_Bob_Buch@legis.state.us; Rep. Kurt Olson; Rep. Berta Gardner; Representative_Jay@legis.state.ak.us; Rep. Mark Neuman; Rep. Gabrielle LeDoux
Cc: Rep. Harry Crawford
Subject: Support HB 14, Restrict Access to Alcohol

Members of Alaska State House, Labor & Commerce Committee --

I support the passage of House Bill 14, Restrict Access to Alcohol.

We all know that Alaska has a major alcohol and drunk problem. I drink so I have nothing against drinking if done in moderation. I believe the lack of moderation is what is wrong with the world in general.

I've heard the arguments against this bill based on the privacy of the individual but I believe that the purchase of alcohol is not a right but a privilege. If you are a "repeat drunk driver" then I believe you lost the privilege of purchasing alcohol and that right to privacy.

I'm a mother of two grown children and the grandmother of a 12 year old granddaughter and 8 year old grandson. When they misbehave they are punished. If they repeat the behavior, the punishment increases. Sometimes they do not get to go somewhere or do something that involves them having to tell their friends. Repeat drunk drivers should get no less. My grandchildren, even in their youth, do not make the same mistake very often, if at all. Hopefully, this bill will cause the one time drunk driver to not repeat his/her crime.

It really seems very simple to me.

B/

Jane Pierson

From: Emily Stancliff on behalf of Rep. Jay Ramras
Sent: Thursday, April 12, 2007 1:51 PM
To: Jane Pierson
Subject: FW: HB 14

-----Original Message-----

From: Larry Schrader [mailto:larry_schrader@ghscorp.org]
Sent: Thursday, April 12, 2007 1:24 PM
To: Rep. Jay Ramras
Subject: HB 14

Larry Schrader
5597 Aisek Street
Juneau, AK 99801-9522

April 12, 2007

The Honorable Jay Ramras
Alaska House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Ramras:

I would like to offer my opinion on this topic as a professional who deals with individuals on a daily basis who are ordered by the court to abstain from alcohol. I'm currently the Field Case Manager for the Serious & Violent Offender Re-Entry Initiative (SVORI) at Gastineau Human Services Corporation (GHS) in Juneau, Alaska. Of the 22 members in the program that fall under my guidance, a vast majority of them committed their crimes while under the influence of alcohol and/or drugs. This bill would give concerned citizens one more way to monitor individuals who have no business drinking. The biggest problem I deal with on a daily basis is the lack of supervision for the offender. Our system has left our parole and probation officers over worked and under manned. More often than not, an offender can drink as long as they're not seen by a probation officer and have police contact. The new ID would give the general public that is unaware of the conditions of the individuals release a way to help keep the streets a little safer for everyone. I would like to leave the committee with one last stat. As an Alaska Department Of Corrections Victim Impact Class instructor I have come across many disturbing stats but one that truly sticks out is this one. Alcohol was a primary or contributing factor in 80 percent to 95 percent of all criminal offenses committed. This stat was published in May 2000 in the Final Report of the Alaska Criminal Justice Assessment Commission. Thank you for taking the time to read my thoughts on this matter.

Sincerely,

Larry D. Schrader
907-780-3028

This message has been verified by CapwizXC as authentic and sent by this individual.
Authentication ID: [jvngPKZ1]

Brenda Moore

2200 E 56th Avenue ♦ Anchorage, Ak 99507 ♦ 907-563-7576

February 22, 2007

To: House Labor & Commerce Committee
Re: HB 14

Representative Harry Crawford has introduced HB 14 "An Act relating to the purchase of alcoholic beverages and to requiring identification to buy alcoholic beverages; requiring driver's licenses and identification cards to be marked if a person is restricted from consuming alcoholic beverages as a result of a conviction or condition of probation or parole."

This is written in favor of HB 14. A number of years ago the daughter of a close friend was struck while driving her children to an activity. She was killed and one of her children was injured.

The driver of the car that struck and killed my friend's daughter was driving with a revoked license, while under the influence of alcohol. He had several previous convictions of driving while under the influence, which resulted in his license being revoked.

I feel my friend's daughter might be alive today if the driver that killed her had been required to prove his privilege to purchase alcohol.

I am a member of the Mental Health Board and which is also in support of HB 14. I ask that you support the passage of HB 14 as a measure to preserve lives.

Sincerely,

Brenda Moore
Christian Health Associates
Alaska Mental Health Board
Statewide Suicide Prevention Council

From: Jeri Lanier [jerilanier@mosquitonet.com]
Sent: Wednesday, April 11, 2007 5:58 PM
To: Rep. Jay Ramras
Subject: Support HB 14

Jeri Lanier
790 Green Meadow Dr.
Fairbanks,, AK 99712-1429

April 11, 2007

The Honorable Jay Ramras
Alaska House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Ramras:

I would just like to say that while I appreciate the concept of this bill, I don't believe it will achieve the end you are looking for. Chronic offenders will still find ways to obtain alcohol, although this might slow them down a bit. I also believe it will be cost prohibitive to oversee the program. My personal opinion is that the money would be better spent returning treatment to the Corrections system. Treatment works for those who want it, and for those who don't want treatment - this bill will not change them either.

Sincerely,

Jeri Lanier
455-8855

This message has been verified by CapwizXC as authentic and sent by this individual. Authentication ID: [ONJ20Es7]

From: Anna Sappah [annasappah@hotmail.com]
Sent: Wednesday, April 11, 2007 9:53 PM
To: Rep. Jay Ramras
Subject: HB 14 will save lives

Anna Sappah
1711 Logan Street
Anchorage, AK 99508-3239

April 12, 2007

The Honorable Jay Ramras
Alaska House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Ramras:

HB 14 will prevent repeat drunk driving accidents, injuries and fatalities, and will save the state of Alaska millions of dollars health care and criminal justice costs. It will also save business millions in lost productivity and insurance costs.

HB 14 will save lives. Please pass the bill and keep alcohol out of the hands of those who present a danger to the community.

Sincerely,

Anna Sappah
(907) 277-8796

This message has been verified by CapwizXC as authentic and sent by this individual. Authentication ID: [sgamDHR5]

From: Daniel Ungier [housing@unitedwayseak.org]
Sent: Wednesday, April 11, 2007 4:52 PM
To: Rep. Jay Ramras
Subject: Support HB 14

Daniel Ungier
PO Box 20249
Juneau, AK 99802-0249

April 11, 2007

The Honorable Jay Ramras
Alaska House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Ramras:

Members of Juneau Homeless Coalition strongly support HB 14 for public safety reasons, for financial reasons, and because we believe it is also an effective strategy for long-term impact. The Coalition advocates for bills that make a lasting impact to the problem of substance abuse because we recognize that substance abuse is often a direct contributing factor to homelessness.

Furthermore, the cost of providing emergency services to homeless individuals who suffer from substance dependency is much higher to the public than the cost of services to address the problem directly. These emergency services cannot begin to make the same impact on breaking the cycle of poverty, substance abuse, and homelessness as much as direct efforts to address the problem. HB 14 will save the state millions of dollars in health care and criminal justice costs.

HB 14 is a successful strategy to help break the cycle of substance abuse rather than resorting to providing emergency services -- and, in worst case but not uncommon scenarios, providing for homeless individuals with chronic alcohol problems. HB 14 helps keeps alcohol out of the possession of those who are ordered not to drink. It cannot solve this problem, but it will make a major impact.

Finally, HB 14 will save lives. It will benefit not only potential offenders, but also the public safety of all Alaskans.

I urge your support for all of the reasons above.

Sincerely,

Daniel Ungier, Chair, Juneau Homeless Coalition 463-5530

This message has been verified by CapwizXC as authentic and sent by this individual. Authentication ID: [i2138XW]]

AS 04.21.050

ALASKA STATUTES

Title 4. Alcoholic Beverages.

Chapter 21. General Provisions.

Sec. 04.21.050 Proof of age.

(a) If a licensee or an agent or employee of the licensee questions or has reason to question whether a person entering licensed premises, or ordering, purchasing, attempting to purchase, or otherwise procuring or attempting to procure alcoholic beverages, has attained the age of 21 years or is entering without consent in violation of AS 04.16.049(a)(3) and has not attained the age of 16 years, that licensee, agent, or employee shall require the person to furnish proof of age acceptable under (b) of this section or proof of consent in a form determined by the board. If the person questioned does not furnish proof of age acceptable under (b) of this section, or if a licensee, agent, or employee questions or has reason to question the validity of the proof of age furnished, the licensee, employee, or agent shall require the person to sign a statement that the person is over the age of 21 or 16 years, as appropriate. This statement shall be made on a form prepared by and furnished to the licensee by the board.

(b) A valid driver's license or a valid identification card is acceptable as proof of age when used for identification in the purchase of alcoholic beverages and for securing entry to and remaining on premises where alcoholic beverages are sold if the license or identification card is made of or encased in plastic and contains a photograph of the license or card holder and a statement of age or date of birth.

(c) A licensee, or an agent or employee of the licensee, may not be charged for a violation of AS 04.16.051 -- 04.16.052 if a signed statement as provided in (a) of this section is secured in good faith, or a valid driver's license or identification card is presented indicating that the owner and possessor of the presented driver's license or identification card is 21 or 16 years of age or over, as appropriate.

(§ 4 ch 131 SLA 1980; am §§ 15, 16 ch 109 SLA 1983)

HISTORICAL NOTES

NOTES TO DECISIONS

Comparative negligence. -- In a tort action brought by a minor or her estate for injuries caused by the minor's use of liquor purchased unlawfully from the holder of a liquor license, in violation of this section, the licensee is not entitled to defend, in part, on the basis of the minor's comparative negligence in making the illegal purchase. Loeb v. Rasmussen, 822 P.2d 914 (Alaska 1991).

AS 28.15.111

ALASKA STATUTES

Title 28. Motor Vehicles.

Chapter 15. Drivers' Licenses.

Article 1. Issuance, Expiration, and Renewal of Licenses.

Sec. 28.15.111 Licenses issued to drivers; anatomical gift and living will document.

(a) Upon successful completion of the application and all required examinations, and upon payment of the required fee, the department shall issue to every qualified applicant a driver's license indicating the type or general class of vehicles that the licensee may drive. The license must display (1) a distinguishing number assigned to the license; (2) the licensee's full name, address, date of birth, brief physical description, and color photograph; (3) either a facsimile of the signature of the licensee or a space upon which the licensee must write the licensee's usual signature with pen and ink; (4) a holographic symbol intended to prevent illegal alteration or duplication; and (5) for a qualified applicant who is under age 21, the words "UNDER 21". A license may not display the licensee's social security number and is not valid until signed by the licensee. If facilities are not available for the taking of the photograph required under this section, the department shall endorse on the license, the words "valid without photograph."

(b) The department shall provide a method, at the time that an operator's license is issued, by which the owner of a license may make an anatomical gift under AS 13.52. The method must provide a means by which the owner may cancel the anatomical gift. The department shall inform each applicant in writing that, if the applicant executes a gift under AS 13.52 and if the gift is made with the license, the department will transmit the information on the license to a donor registry created under AS 13.50.110. The department shall also direct the applicant to notify a procurement organization or the department under AS 13.50.140 if the license is destroyed or mutilated or the gift is revoked under AS 13.52.170. The department shall carry out the requirements of AS 13.50.100 -- 13.50.190.

(§ 19 ch 178 SLA 1978; am § 2 ch 50 SLA 1993; am § 21 ch 80 SLA 1997; am § 2 ch 40 SLA 2001; am § 7 ch 68 SLA 2004; am § 7 ch 83 SLA 2004)

HISTORICAL NOTES

Revisor's notes. -- In 2004, in subsection (b), "AS 13.52" was substituted for "AS 13.50 or includes an anatomical gift in a living will under AS 18.12" and "AS 13.52.170" was substituted for "AS 13.50.050" in order to reconcile chs. 68 and 83, SLA 2004.

REFERENCES

Cross references. -- For the applicability of the 2001 amendment of (a) of this section, see § 4, ch. 40, SLA 2001, in the 2001 Temporary and Special Acts.

HISTORICAL NOTES

Effect of amendment. -- The 2001 amendment, effective June 26, 2001, inserted "may not display the licensee's social security number and" in the next-to-last sentence in subsection (a).

The first 2004 amendment, effective September 14, 2004, rewrote subsection (b).

The second 2004 amendment, effective January 1, 2005, rewrote subsection (b).

AS 28.15.161

ALASKA STATUTES

Title 28. Motor Vehicles.

Chapter 15. Drivers' Licenses.

Article 2. Cancellation, Suspension, Revocation, or Limitation of Drivers' Licenses.

Sec. 28.15.161 Cancellation of driver's license.

(a) The department shall cancel a driver's license upon determination that

(1) the licensee is not medically or otherwise entitled to the issuance or retention of the license, or has been adjudged incompetent to drive a motor vehicle;

(2) there is an error or defect in the license;

(3) the licensee failed to give the required or correct information in the licensee's application; or

(4) the license was obtained fraudulently.

(b) The licensee may apply for a new license at any time after cancellation upon removal of the cause for the cancellation.

(§ 19 ch 178 SLA 1978)

HISTORICAL NOTES

NOTES TO DECISIONS

Intent of act. -- This act plainly expresses the intent that all revocations and suspensions of operators' licenses be the act of the Department of Public Safety. Knudsen v. City of Anchorage, 358 P.2d 375 (Alaska 1960), overruled on other grounds, Roberts v. State, 458 P.2d 340 (Alaska 1969); Glasgow v. State, 469 P.2d 682 (Alaska 1970), and Baker v. City of Fairbanks, 471 P.2d 386 (Alaska 1970).

HB

18

HFIN

FILE

HOUSE COMMITTEE REPORT

(11)

Date Referred to Committee: January 31, 2007

FURTHER REFERRALS:

Date of Committee Action: 2/7/07

The FINANCE Committee considered:

HB 18

HOUSE BILL NO. 18

POSTSECONDARY MEDICAL & OTHER EDUC. PROG.

"An Act amending the functions and powers of the Alaska Commission on Postsecondary Education; and relating to the repayment provisions for medical education and postsecondary degree program participants."

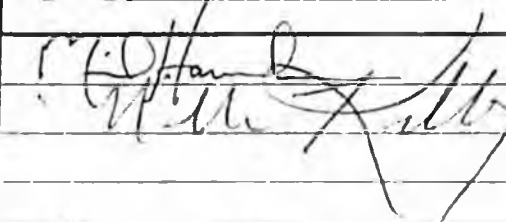
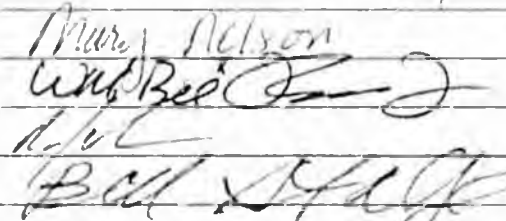

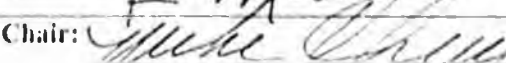



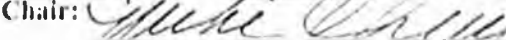
Recommends it be replaced with HCS or CS for HB 18 (HCS)
 For Senate Bills with new title: Technical Title New Title: HCR Same Title New Title

- 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
 LWF
 LAW
 LEC
 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
HFC				✓

<u>PREVIOUS FISCAL NOTES</u>				
List by Dept(s):	FN#	Fiscal	Indet.	Zero
AK	1	✓		
Postsecond.				

<u>Signing with recommendations</u>	Printed Last Name	DP	DNP	NR	AM
	Heather Kelly	x			
	Kelly	x			
	Nelson	✓			
	Thomas	✓			
	Sample			x	
	STOLTER	✓			
Chair: 	Meyer	✓			
Chair: 	Chumak	✓			

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: 1
Bill Version: HB 18
(H) Publish Date: 1/31/07

Revision Date/Time (Note if correction): _____ Dept. Affected: Education
Title An Act amending the functions and powers of RDU ACPE
the Alaska Commission on Postsecondary Education; and ... Component Program Administration &
Sponsor Rep. Meyer Operations
Requester (H)HESS Component No. 2738

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual		505.6	1,025.9	1,347.7		
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	0.0	505.6	1,025.9	1,347.7	0.0	0.0

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

CHANGE IN REVENUES ()						
-------------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF		505.6	1,025.9	1,347.7		
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
TOTAL	0.0	505.6	1,025.9	1,347.7	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Check this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

HB18 proposes to facilitate the expansion of the annual class size of Alaskan participants in the Washington, Wyoming, Montana, Idaho, and Alaska regional medical education program at the University of Washington School of Medicine (UWSM). This fiscal note reflects additional general fund expenses assuming the annual class size is increased from ten to twenty participants with the first twenty-student cohort entering the program in fall 2007. The first year of the program is conducted at the University of Alaska Anchorage, and, therefore, there are no associated increased costs in the ACPE budget until the additional ten participants begin their second year of training at UWSM.

Prepared by: Diano Barrans, Executive Director
Division: Executive Director
Approved by: Diane Barrans, Executive Director
Agency: Alaska Commission on Postsecondary Education

Phone: 465-6740
Date/Time: 1/25/07 3:00 PM
Date: 1/25/2007

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: _____
 Bill Version: CS HB 18 (HES)
 () Publish Date: _____

Revision Date/Time (Note if correction): _____ Dept. Affected: University of Alaska
 Title Postsecondary Medical & Other Educational RDU _____
 Programs Component _____
 Sponsor Representative Kevin Meyer Component No. _____
 Requester _____

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
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	0.0	0.0	0.0	0.0	0.0	0.0
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CHANGE IN REVENUES ()						
-------------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Recelpts						
1037 GF/Mental Health						
Other (specify type)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time						
Part-time						
Temporary						

ANALYSIS: (Attach a separate page if necessary)

No fiscal impact is anticipated due to the passage of HB 18.

Prepared by: House Finance Committee
 Division: _____
 Approved by: Representative Meyer
 Representative Chenault

Phone 465-4945
 Date/Time 02/07/016
 Date 2/7/2008

FISCAL NOTE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: _____
 Bill Version: CSHB18 (HES)
 () Publish Date: _____

Revision Date/Time (Note if correction): _____ Dept. Affected: University of Alaska
 Title WWAMI Bill RDU _____
 Component _____
 Sponsor Representative Meyer Component No. _____
 Requester _____

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services	250.0	265.0	280.9	297.8	315.6	334.6
Travel	30.0	30.0	30.0	30.0	30.0	30.0
Contractual	30.0	30.0	30.0	30.0	30.0	30.0
Supplies	20.0	20.0	20.0	20.0	20.0	20.0
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	330.0	345.0	360.9	377.8	395.6	414.6

CAPITAL EXPENDITURES	475.0					
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CHANGE IN REVENUES ()						
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	280.0	292.0	304.7	318.3	332.5	347.7
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (University Receipts)	50.0	53.0	56.2	59.5	63.1	66.9
TOTAL	330.0	345.0	360.9	377.8	395.6	414.6

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

Full-time	2					
Part-time	2					
Temporary						

ANALYSIS: (Attach a separate page if necessary)

CSHB18 proposes to expand the WWAMI program to accommodate 10 new program participants each year. This fiscal note reflects general fund operating expenses that will support two new faculty positions and related support costs associated with the expansion from 10 to 20 students entering the program in 2007. This fiscal note also reflects the \$475K general fund capital expenses necessary to build out, renovate, furnish and equip approximately 3,000 sq ft of additional space, including study space, office space for new faculty and expansion/upgrade of laboratory space. Students complete their first year of medical school at UAA, then complete the remaining three years through the University of Washington (UW) (some of this training can occur in Alaska). Alaska, through an agreement between Alaska Commission on Postsecondary Education (ACPE) and UW, pays for a portion of the medical school costs for the remaining three years. However, this fiscal note only includes the UA portion of costs which includes a 6% increase in salary and benefit costs in out years.

Prepared by: Michelle Rizk
 Division: University of Alaska
 Approved by: Pat Pitney
 Agency: University of Alaska

Phone: 907-450-8187
 Date/Time: _____
 Date: 2/2/2007

withdrawn 2/7/07 25-LS0131AK.1
Mischel
2/6/07

AMENDMENT 1

OFFERED IN THE HOUSE
TO: CSHB 18(HES)

BY REPRESENTATIVE CRAWFORD

1 Page 1, line 9:

2 Delete "20"

3 Insert "30"

4

5 Page 2, following line 31:

6 Insert a new bill section to read:

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

9 TRANSITION. Notwithstanding AS 14.42.030(d), as amended by sec. 1 of this Act,
10 and subject to appropriation by the legislature, the number of program participants
11 accommodated by agreements under AS 14.42.030(d) entered into each year by the Alaska
12 Commission on Postsecondary Education under AS 14.42.030(d) shall be at least 20 the first
13 year after the effective date of this Act and shall be increased by at least two participants each
14 year until at least 30 participants are accommodated under the agreements."

Alaska State Medical Association

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

January 17, 2007

Honorable Kevin Meyer
State of Alaska State Medical Association
House of Representatives
State Capitol, Room 515
Juneau, AK 99801-1182

Re: HB 18 – WWAMI Program Expansion

Dear Representative Meyer:

The Alaska State Medical Association (ASMA) represents physicians statewide and is primarily concerned with the health of all Alaskans.

ASMA is writing this letter to urge you to support HB18. HB18 provides a vital step in addressing the chronic and, most recently, acute shortage of physicians in Alaska.

ASMA participated in the process commissioned by University of Alaska President, Mark Hamilton and Alaska Department of Health and Social Services Commissioner Karleen Jackson to quantify the seriousness of the physician shortage in Alaska and to develop recommendations to address the shortage. Indeed, the seriousness of the shortage now and twenty years into the future was validated in this exhaustive study. HB18 is the embodiment of one recommendation that was made – expand the WWAMI class size.

ASMA, for more than 20 years, has been in support of an increase in the WWAMI class size to address the chronic shortage of physicians in Alaska, and it again has class expansion as one of its primary advocacy initiatives for 2007. In recent years, Alaska has many more qualified applicants than the current 10 seat class size.

HB18 is a critical step in beginning to face Alaska's chronic shortage of physicians. ASMA recognizes that this will not help the current acute shortage and will advocate that other measures are necessary in the short term.

ASMA strongly urges the passage of HB18 early this year so that the WWAMI class size can be increased from 10 to 20 medical students starting this Fall.

Sincerely,



By: Roland Gower, MD President
For: The Alaska State Medical Association

PETER MARSHALL, M.D.

145 SANTA CLAUS LANE ~ NORTH POLE, ALASKA 99705

02 05
20 07

TO: CO-CHAIR REP. CHUNAUT ~~AND CO-CHAIR REP. MEYER~~ AND FINANCE COMMITTEE MEMBERS

Concerning: HB 18 to increase the WWAMI medical school class size

This bill should be seen as an important initiative for our patients, the people of Alaska. It has been widely reported that Alaska's population is aging and of course this is true. Less well known is the fact that Alaska's doctors are aging. I am 61 and in Fairbanks where I practice, nearly half of my medical colleagues are older than 50 and almost a third are older than 55. If we are to have any medical care for Alaskans in 5 to 10 years we must start aggressively recruiting and producing new doctors now.

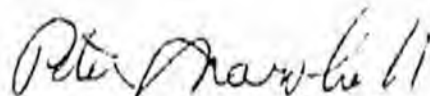
Unfortunately, recruiting doctors is relatively inefficient. Physicians tend to settle where they have roots. This makes "growing our own doctors" a much more attractive and ultimately successful proposition. We have a very high number of superbly qualified applicants for our medical school and we only have 10 spaces. The historical record of our graduates returning to Alaska is excellent. I serve as a volunteer member of our Alaska WWAMI Admissions committee. I feel a tragic loss when we are unable to accept highly qualified individuals who, because of state residency rules and personal finances may be unable to attend medical school anywhere. The numbers tell the story: we had 78 applicants last year of whom we interviewed 53. Nearly all of those interviewed were capable of doing the work of medical studies. I know this because I interviewed them all. We were only able to take 10.

It is important to understand that there is a long lag time: the students we select today will take 8 to 10 years minimum to finish their training and return to Alaska.

It is not that we are the only place with a shortage of doctors, this is a nationwide phenomenon. However, Alaska as a state is by far the worst, and Fairbanks and the other smaller towns in Alaska are much worse off than Anchorage. Just since August of 2006 we have lost seven doctors in Fairbanks. Our only two urologists have both retired, a psychiatrist and an internist left the state, a general surgeon retired, an orthopedic surgeon moved to Anchorage and a family doctor quit primary care to perform procedure based medicine. The loss of the orthopedic surgeon and the general surgeon have left us with a critical shortage in our E.R. at PMH and of course the lack of a urologist means that all Fairbanksans must travel to Anchorage for urinary surgery.

All of the practicing physicians in our state are aware of this crisis. Many of us have volunteered to help with the selection, the training and the ongoing encouragement of our next generation of doctors. The expansion of our WWAMI medical class to 20 students will not cure the medical shortage in our state. It will however be an important step and ultimately everyone in the state will benefit.

SINCERELY,



PETER MARSHALL, M.D.

ASHNHA Position on CSHB 18
Prepared by: Rod Betit, President/CEO
February 7, 2007

WHO DOES ASHNHA REPRESENT?

The *Alaska State Hospital and Nursing Home Association* membership includes 24 acute care hospitals, 2 behavioral health facilities, 6 assisted living facilities (Alaska Pioneer Homes), and 5 free-standing nursing facilities. Nine of our 24 acute care hospitals also provide nursing home services. We believe ASHNHA's rich composition of private, federal, state, and tribal health care facilities provides a balanced viewpoint on important health care policy matters. ASHNHA's membership authorized the position expressed in this testimony. (Full membership is listed on page 2)

ASHNHA's POSITION ON CSHB 18:

ASHNHA's membership 'strongly supports' passage of CSHB18. ASHNHA does not offer any amendments to CSHB 18.

SUPPORTING TESTIMONY:

☉ Many states are reporting a physician shortage in large part due to physician retirements and an inadequate number of physicians completing training to replace them. This is further exacerbated by U.S. population growth that exceeds the rate of increase in new medical school slots.

☉ As determined by the Alaska Physician Supply Taskforce study completed in 2006, Alaska's shortage of physicians is already acute. Alaska is presently facing a shortage of over 300 physicians and without intervention by the State this gap is expected to grow dramatically in the years ahead.

☉ With many states taking steps to address this national shortage, Alaska must also be proactive to address this situation. CSHB18 offers an important step to address this shortage by adding 10 additional slots to the WWHAMI program. While this will not solve the entire physician shortage problem, it is a key initial step to take.

☉ The WWHAMI program has had a historically high success rate for physicians deciding to practice in Alaska. Most of these returnees are actually Alaskans initially admitted into the WWHAMI program who are returning home. However a significant number of WWHAMI physicians who choose Alaska to practice were admitted from one of the other 5 participating states, and were exposed to Alaska as part of their clinical rotations while a WWHAMI student.

☉ **THIS LEGISLATION MUST MOVE QUICKLY TO HELP ALASKA THIS YEAR.** CSHB18 must be acted upon quickly to preserve the open offer from the University of Washington to increase Alaska's commitment by 10 additional slots in 2007. Competition for these slots is fierce as Wyoming is aggressively weighing their options to increase their WWHAMI slots this year. The University of Washington has committed to preserving 10 additional slots for Alaska

☉☉

ASHNHA Position on CSHB 18
Prepared by: Rod Betit, President/CEO
February 7, 2007

if they receive formal notice from the State by March 1, 2007. This deadline would give UW time to select 10 more Alaskans from the current applicant pool to admit to their medical school this Fall.

⇒ CSHB 18 also clarifies the repayment obligation for those WWHAMI students who do not return to Alaska following their medical education and residency. ASHNHA supports these clarifications as well.

⇒ ASHNHA urges your support of HB 18.

⇒ There are others either on the phone or in the room who could speak to the broad based partnership supporting passage of this bill including:

- Alaska State Medical Association
- Alaska Physicians & Surgeons,
- Providence Health System of Alaska
- University of Alaska
- University of Washington
- Alaska Department of Health & Social Services

⇒ Thank you for this opportunity to comment.

This Testimony is on Behalf of the Following Alaska Health Care Facilities

Alaska Regional Hospital, Alaska Native Medical Center, Alaska Pioneer Home System, Bartlett Regional Hospital, Bassett Army Community Hospital, Central Peninsula General Hospital, Cordova Community Medical Center, Denali Center Nursing Home, Fairbanks Memorial Hospital, Heritage Place Nursing Home, Kanakanak General Hospital, Ketchikan General Hospital, Manillaq Health Center, Mary Conrad Center, Mat-Su Regional Hospital, Mt. Edgecumbe Hospital SEARHC, Norton Sound Regional Hospital, Petersburg Medical Center, Providence Alaska Medical Center, Providence Extended Care Center, Providence Kodiak Island Medical Center, Providence Seward Medical & Care Center, Providence Valdez Medical Center, Sitka Community Hospital, South Peninsula Hospital, St. Elias Specialty Hospital, USAF 3rd Medical Group- Elmendorf, Wrangell Medical Center, Yukon Kuskokwim Delta Regional Hospital, Alaska Psychiatric Institute, North Star Behavioral Health System, Wildflower Court Nursing Home.



REPRESENTATIVE KEVIN MEYER

HOUSE DISTRICT 30

Sponsor Statement for House Bill 18

"An Act amending the functions and powers of the Alaska Commission on Postsecondary Education; and relating to the repayment provisions for medical education and postsecondary degree program participants."

Alaska currently has a shortage of physicians and the shortage is projected to get progressively worse over the next 20 years as Alaska's practicing physicians begin to retire. A physician shortage has serious implications for Alaskans access to quality medical care and can lead to increased costs for that care.

Alaska is one of five northwestern states that participate in a regional medical school referred to as WWAMI. WWAMI is an acronym for the participating states: Washington, Wyoming, Alaska, Montana and Idaho. Alaska currently places ten students per year at the University of Washington School of Medicine and these students become part of a class of 180 from the five participating states. To be eligible, students must have resided in Alaska for the previous two years and must spend their first year at the University of Alaska Anchorage before moving on to attend the University of Washington School of Medicine.

Under the WWAMI agreement, students pay in-state tuition at the University of Washington and the State of Alaska pays the difference. Students who enter the program must return to Alaska to practice or pay back a portion of the State's subsidy. House Bill 18 doubles the size of the WWAMI program to 20 participants per year and allows a program participant to perform their residency outside the State without accruing interest.

Over its history, the WWAMI program has been effective at attracting physicians to practice in Alaska and has been ranked as the #1 Primary Care Medical School by U.S. News and World report for the past 12 years. Expanding the WWAMI program will help ease the pending physician shortage and provide better access to medical care throughout Alaska.

(Updated: 1/31/2007)



REPRESENTATIVE KEVIN MEYER

HOUSE DISTRICT 30

MEMORANDUM

DATE: January 30, 2006
TO: Representative Meyer
FROM: Mike Pawlowski
RE: Changes to HB 18 in CS HB 18 (HES) (25-LS0131\K)

The Blank CS for HB 18 (HES) (25-LS0131\K) represents a merging of HB 18 (Rep. Meyer) and HB 55 (Rep. Kelly) with clarifying language suggested by the Alaska Commission on Post-Secondary Education.

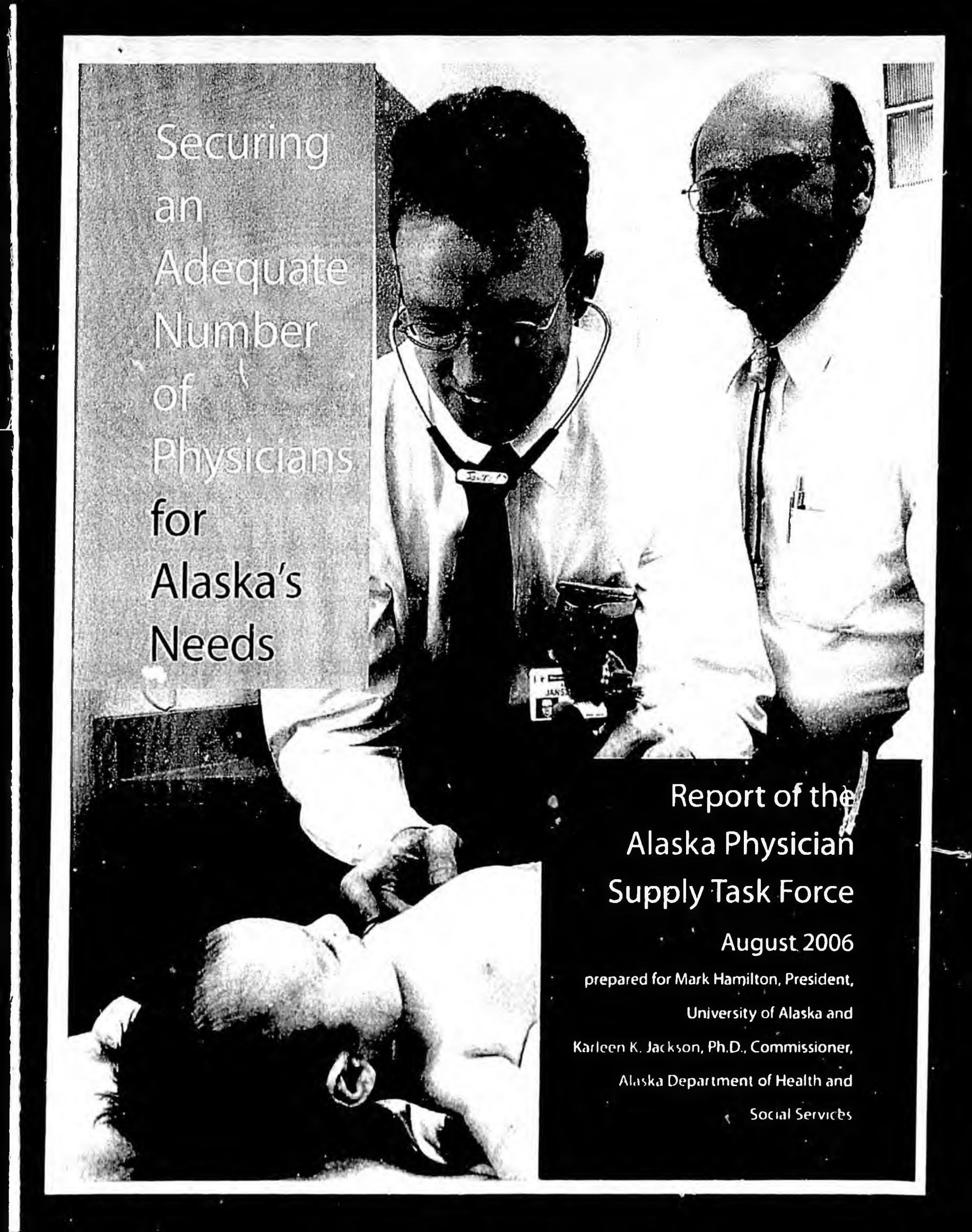
Changes:

Section 1: Replaced section one of HB 18 with section 1 of HB 55 and inserted clarifying language on line 9 that specifies the program should admit at least 20 participants each year.

Section 2: Replaced one-third on page 2 line 7 with 50 percent (new page 2 line 6) to bring the base obligation a program participant accrues in line with existing statute.

Replaced "student" with "program participant" throughout section 2 to better reflect the status of person under the WWAMI program since a person serving their residency is still under the program but not technically a student.

Deleted lines 19-23 on page 2 after testimony from ACPE that the provision was too difficult to enforce.



Securing
an
Adequate
Number
of
Physicians
for
Alaska's
Needs

Report of the
Alaska Physician
Supply Task Force

August 2006

prepared for Mark Hamilton, President,
University of Alaska and
Karleen K. Jackson, Ph.D., Commissioner,
Alaska Department of Health and
Social Services

Acknowledgements

The Alaska Physician Supply Task Force wishes to thank the staff for their time, diligence, and expertise provided throughout this project. We also thank all those who contributed their knowledge and expertise in providing information and comments on our report.

Task Force Members

Richard Mandsager, MD, State of Alaska Director of Public Health (Co-Chair)

Harold Johnston, MD, Director, Alaska Family Medicine Residency (Co-Chair)

Rod Betit, President, Alaska State Hospital and Nursing Home Association

Jan Gehler, Ph. D., Interim Provost, University of Alaska Anchorage

David Head, MD, Medical Director, Norton Sound Health Corporation, and Chair, Alaska State Medical Board, representing Alaska Native Tribal Health Consortium

Jim Jordan, Executive Director, Alaska State Medical Association

Karen Perdue, Associate Vice President for Health Affairs, University of Alaska

Dennis Valenzano, Ph. D., Director, Alaska WWAMI Biomedical Program

Staff

Patricia Carr, Alice Rarig, Joyce Hughes, Stephanie Zidek-Chandler, and Jean Findley, from Health Planning and Systems Development Unit, Alaska Department of Health and Social Services, staffed the Task Force and coordinated production of the report.

Project Funding and Support

Funding to support the Alaska Physician Supply Task Force was provided by the University of Alaska Statewide, Office of the Associate Vice President for Health through federal grants from the Health Resources and Services Administration, Office of Rural Health Policy, Special Projects (#DIARH00052) and Centers for Disease Control (#H75/CCH024673-01). Additional funding for staff time was provided through the Department of Health and Social Services: Health Planning and Systems Development's Alaska Office of Rural Health (HRSA #H95RH00135), State Planning Grant (HRSA #PO9HSO5505), Primary Care Cooperative Agreement (HRSA #U68CSO0157), and Rural Hospital Flexibility Program (HRSA #H54RH00014).

The Task Force members acknowledge the resources that were provided by our own organizations. Our organizations have supported our time, travel and related in-kind resources for the project.

Cover photo: Foreground, Andrew Janssen, M.D., a 2005 graduate of the Alaska Family Medicine Residency Program, examines 6-month-old Cooper Baines at the Providence Family Medicine Center in Anchorage, Alaska. Paul W. Davis, M.D., is shown in background. Photo by Greg Martin, 2005, courtesy of Providence Family Medicine Center.

**Securing an Adequate Number of
Physicians
for Alaska's Needs**

**Report of the
Alaska Physician Supply Task Force**

**Prepared for
Mark Hamilton, President, University of Alaska and
Karleen Jackson, Ph.D., Commissioner, Alaska Department of Health & Social
Services**

August 2006

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Executive Summary

The Alaska Physician Supply Task Force was commissioned in January 2006 by the President of the University of Alaska and the Commissioner of the Department of Health and Social Services to address two questions:

1. What is the current and future need for physicians in Alaska?
2. What strategies have been used and could be used in meeting the need for physicians in Alaska? Strategies of interest are:
 - programs to attract and prepare students for health careers;
 - medical school opportunities;
 - graduate medical education; and
 - recruitment and retention of physicians.

The Task Force has met regularly and drawn on a wide variety of sources of information, including public participation. The consensus of the Task Force is that this report represents the best answer possible to these questions, within the constraints of time and budget, and the inherent uncertainties of available data and predictions. The major conclusions and reasoning of the group are summarized here, and detailed in the body of the report.

Alaska has a shortage of physicians.¹ Although not at crisis levels, the shortage is affecting access to care throughout the state, and increasing cost to hospitals and health care organizations. Up to 16% of rural physician positions in Alaska were vacant in 2004. Patients with Medicare are having difficulty finding a primary care physician. Several important specialties are in serious shortage in Alaska.

The shortage is very likely to worsen over the next 20 years as the state's population increases and ages. Physician supply nationwide is entering a period of shortage, according to the best current predictions. Physicians in Alaska are aging and one-third may be retiring in the next 10-15 years. The new generation of physicians wants a more balanced life, meaning fewer hours on duty and more predictable schedules. These trends mean that more physicians will be required to serve the same population. Technology and scientific advances have increased the amount of medical care available, adding to the need for physicians, as the patients expect more care than previously.

As the national supply of physicians shrinks, recruitment will become more competitive. Alaska's traditional system of recruiting physicians from federal assignment in the military and Indian Health Service is much less effective with changes in these systems. Although Alaska has two very successful programs to produce its own physicians, the Alaska WWAMI medical school program and the Alaska Family Medicine Residency,

¹ Unless otherwise specified, "physician" in this report means medical doctor as well as doctor of osteopathy.

Alaska is far behind the other states in production capacity. These two programs, even if expanded, cannot meet the need.

The current trend in physician growth in Alaska is inadequate to keep up with basic population growth and to correct the current deficit. Unless changes are made in the systems used to increase physician numbers, the deficit will worsen, with significant consequences for access and quality of care for Alaskans, as well as increased cost for health care delivery systems.

The time frames to increase physician supply are long; it takes from seven to 13 years from entry into medical school to entry into practice. The time it takes to develop new or expanded programs adds to this delay. It is important to act quickly to begin the programs that will yield more physicians in the next two decades. Delay will only add to the cost and worsen the deficit to recoup.

Responses to this problem involve preparing and attracting Alaskan youth so they can enter medical careers, improving recruitment of physicians to practice in Alaska, and retaining the physicians who currently practice here. The Task Force recommends specific strategies and action steps to achieve four goals related to assuring an adequate supply of physicians to meet Alaska's need.

Goals:

1. Increase the in-state production of physicians by increasing the number and viability of medical school and residency positions in Alaska and for Alaskans.
2. Increase the recruitment of physicians to Alaska by assessing needs and coordinating recruitment efforts.
3. Expand and support programs that prepare Alaskans for medical careers.
4. Increase retention of physicians by improving the practice environment in Alaska.

The following sections summarize the findings of the Alaska Physician Supply Task Force supporting these goals. The body of the report contains the full discussion of the goals, strategy recommendations, and the rationale behind the recommendations.

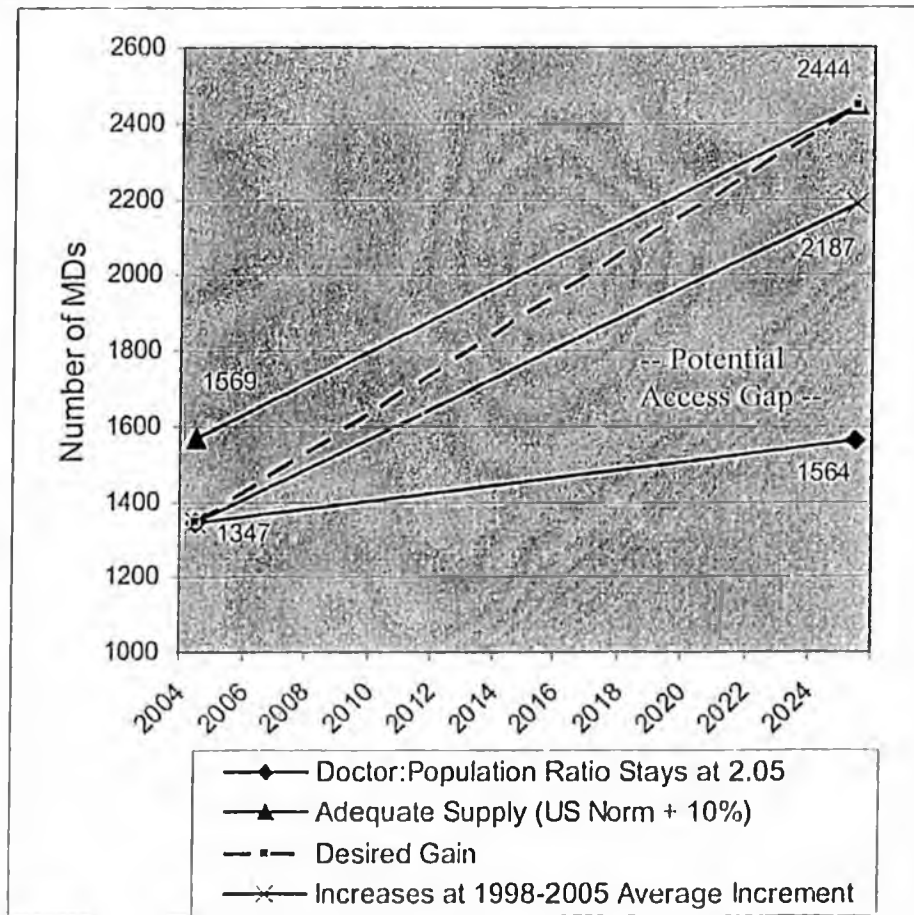
Assessment of need. The Task Force estimates that Alaska has a shortage of 375 physicians, based on the conclusion that Alaska should have 110% of the current national average physician-to-population ratio. In order to correct the deficit and reach an adequate supply of physicians by 2025, Alaska needs to add a net of 59 physicians per year, starting immediately. Alaska currently gains 78 physicians per year but loses 40 physicians yearly for various reasons. In order to improve its doctor to population ratio, and assure having an adequate supply in 20 years, the current net gain of 38 physicians per year will need to increase to 59 per year, more than a 50% increase. If the loss each year is greater than the recent average of 40 per year, Alaska will need more than 90 physicians to enter practice in Alaska each year.

These conclusions are supported by the following findings.

- Finding 1. The ratio of physicians to population in Alaska is below the national average at 2.05 MDs per 1000 population vs. 2.38 MDs per 1000 population in the US.
- Finding 2. Alaska should have 10% more physicians per population than the national average because Alaska's rural nature, great distances and severe weather result in structural inefficiencies of the health care system. Alaskan physicians' administrative and supervisory responsibilities in addition to patient care contribute to the need for more physicians to provide patient care services.
- Finding 3. Competition for physicians will intensify since the entire nation is expected to experience a shortage of physicians, associated with the aging of the population and an inadequate production of physicians.
- Finding 4. Retirement and practice reductions of aging physicians in Alaska and elsewhere, as well as changing preferences of physicians for more limited work hours, add to the need for more physicians.
- Finding 5. Alaska has and should maintain a higher ratio of mid-level providers (advanced nurse practitioners and physician assistants) to physicians than the national average, in order to make it feasible to provide high quality and timely care to the population. Without these providers the need for physicians would be even higher.
- Finding 6. Shortages are most apparent in internal medicine, medical subspecialties and psychiatry. It is important to evaluate the need for specialty types and distribution throughout Alaska, in order to plan for physician recruitment.

Over the next twenty years, nearly twice as many "physicians in practice" will be needed – about 1100 more than the current 1347 MDs in patient care – to meet expected demand as the state's elderly population triples and as medical practice patterns change. This projection assumes that doctors of osteopathy, advanced nurse practitioners and physician assistants will continue to increase proportionately over time.

Figure A. Gain in Alaskan Physicians: Static Doctor to Population Ratio vs. Desired Growth Scenario



Source: Based on HPSD analysis (AMA Master File 2006)

Basis for strategies for meeting the need for physicians for Alaska's health care system. After investigating the supply and need for physicians and reaching Findings 1- 6, the Task Force shifted its focus to investigating strategies for meeting the need. The Task Force drew on the knowledge of in-state professionals and educators, and of national experts, to identify lessons and information that form the basis for recommendations for action, as well as for further investigation and monitoring. The Task Force's selection of strategies is based on the following findings.

- Finding 7.** Alaska is one of six states without an independent in-state medical school. Alaska funds ten state-supported "seats" at the regional WWAMI medical school, administratively centered at the University of Washington School of Medicine. This number (10 seats) represents fewer seats per capita than all but five of the 50 states.
- Finding 8.** Residency programs are one of the most effective ways to produce physicians for a state or community. Alaska has only one in-state residency, the AFMR, which places 70% of its graduates in Alaska.

Maintaining and expanding residency opportunities will be critical in augmenting Alaska's physician numbers.

- Finding 9. Over the last ten years, an increasing number of Alaskan students have applied to medical schools; the average number of applicants has been 65. In 2005, 29 of 73 applicants were admitted into medical school. Ten per year attend WWAMI and the remainder attends medical schools without state support from Alaska. Since 1996, only WWAMI has had Alaska-supported seats. Prior to 1996, Alaska supported programs for medical and osteopathic students through the WICHE program and student loans.
- Finding 10. Recruitment for physicians is facilitated by the availability of loan repayment programs such as the IHS and NHSC loan repayment programs. Service obligations related to student loans have historically accounted for some recruitment and should be explored.
- Finding 11. There are several initiatives to increase interest in medical careers among Alaskans, including efforts by the tribal health care system, hospitals, the University of Alaska's newly funded Area Health Education Center (AHEC) and the UA Scholars Awards, school system initiatives for improvement of math and science programs, and programs that encourage students to go into health careers. Collectively, these initiatives generate qualified applicants to medical schools, but too few applicants matriculate to replenish Alaska's shortage, and there is inadequate diversity.
- Finding 12. Medical practice environments in Alaska have positive and negative aspects that affect the recruitment and retention of physicians.
- Finding 13. Surveys of providers (physicians and mid-levels) by the AMA and many states have provided data on practice characteristics, preferences, and retirement plans.
- Finding 14. Workforce development activities exist in multiple locations including the tribally managed system, private sector, and various state and federal agencies. However existing programs are not monitoring or analyzing specialty distribution or needs, changing roles of mid-level providers, or potential impact of electronic health records on all providers. Coordination of the efforts, and research and analysis of relevant trends, should inform policy.

In view of these findings, the relevant literature, and the experience of other states, the Task Force developed the following goals and strategies to respond to the physician shortage. The strategies are chosen because of their likely effectiveness, cost-to-benefit advantages, and achievability. Each strategy is discussed with respect to the time frame in which it will be effective, and the average expected cost to the state to produce each practicing physician, where such information is reasonably accessible. The listing below

	G. Empanel a group to assess medical education in Alaska, including the viability of establishing an Alaska-based medical school	Long	Undetermined at time of PSTF Report
2. Increase the recruitment of physicians to Alaska by assessing needs and coordinating recruitment efforts.	A. Create a Medical Provider Workforce Assessment Office to monitor physician supply and facilitate physician recruitment efforts	Short	\$250,000 per year
	B. Research and test a physician relocation incentive payment program	Short	\$65,000 per physician
	C. Expand loan repayment assistance programs and funding for physicians practicing in Alaska	Short	Undetermined – need to consult with other states
3. Expand and support programs that prepare Alaskans for medical careers	A. Expand and coordinate programs that prepare Alaskans for careers in medicine	Medium	Up to \$1,000,000 per year
4. Increase retention of physicians by improving the practice environment in Alaska.	A. Develop a physician practice environment index for Alaska	Short	\$100,000 to develop index; \$20,000 annually to update
	B. Develop tools that promote community-based approaches to physician recruitment and retention	Short	\$50,000 per year
	C. Support federal tax credit legislation Initiative for physicians that meet frontier practice requirements	Short	Zero cost to the state

Adoption of these strategies will depend on further analysis of resources and a balancing of effectiveness and achievability. Strategies to recruit and retain physicians promise the earliest positive results, but probably have a relatively low benefit ceiling, in that the maximum number of physicians achievable by those strategies will soon be reached. The

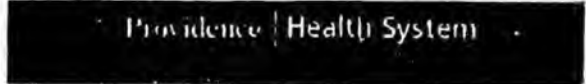
gives a brief identification of each goal and strategy. Full discussion of the strategies is included in the body of the report.

Goals and Strategies for Securing an Adequate Physician Supply for Alaska's Needs

Major Goal	Strategy	Timeline for Impact	Estimated Cost
1. Increase the in-state production of physicians by increasing the number and viability of medical school and residency positions in Alaska and for Alaskans.	A. Increase the number of state-subsidized medical school positions (WWAMI) from 10 to 30 per year	Medium	\$250,000 per practicing physician
	B. Ensure financial viability of the AFMR through state support including Medicaid support	Short	\$60,000 per practicing physician
	C. Increase the number of residency positions in Alaska, both in family medicine and appropriate additional specialties	Short	\$100,000 per year plus \$30,000 for planning in year 1 & 2
	D. Assist Alaskan students to attend medical school by: i) reactivating and funding the use of the WICHE Professional Student Exchange Program with a service obligation attached, and ii) evaluating the possibility of seats for Alaskans in the planned osteopathic school at the Pacific Northwest University of the Health Science	Medium	i) \$550,000 per practicing physician for WICHE; ii) cost unknown at time of PSTF report
	E. Investigate mechanisms for increasing Alaska-based experiences and education for WWAMI Students	Medium	Unknown at time of PSTF Report
	F. Maximize Medicare payments to teaching hospitals in Alaska	Short	Zero cost to the state

strategies likely to produce significant numbers of doctors over time are those designed to train physicians in Alaska, i.e. medical school and residency programs, but the time to realize the benefit in most cases is longer.

Implementation strategy – next steps for key policy makers. The shortage of physicians and other health care providers creates one of Alaska's most challenging public health and higher education issues. To ensure the work of the Task Force is carried forward, it is recommended that the President and Commissioner establish permanent structures to implement these recommendations. One component of this action would be creation of a Medical Provider Workforce Assessment Office (Strategy 2A).



3200 Providence Drive
P.O. Box 190004
Anchorage, Alaska
99519-0004

Tel 907.562.2211



January 17, 2007

The Honorable Kevin Meyer
Alaska State House of Representatives
State Capitol - Room 515
Juneau, AK 99801-1182


Dear Representative ^{KEVIN} Meyer:

I write today in support of the bill you introduced, House Bill 18, to increase the number of medical students in the WWAMI program along with a requirement for payback of financial assistance if the student does not return to Alaska to practice medicine. Passage of this important legislation is a major priority for Providence, Alaskans for Access to Health Care, the Alaska State Hospital and Nursing Home Association, and other health care organizations.

While certainly not viewed as the total solution, passage of this bill will be an important step in helping to solve the physician shortage faced in Alaska. All of us at Providence stand ready to assist in any way possible to ensure passage of this legislation.

If you have any questions or if I may be of assistance in any way, please let me know.

Sincerely,


E. Al Parrish
VP/CE Alaska Region
Providence Health System

Alaska Physicians & Surgeons, Inc.

4120 Laurel Street, Suite 206

Anchorage, Alaska 99508

Phone: 907-561-7705 Fax: 907-561-7704

Website: www.apsdoctors.org

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January 16, 2007

Honorable Kevin Meyer
State of Alaska
House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Meyer,

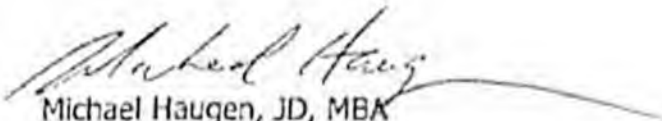
Alaska Physicians & Surgeons (APS) is writing you this letter in support of HB18.

Alaska Physicians & Surgeons along with many other Healthcare organizations strongly supports HB18, and we have set as one of our major initiatives for 2007, to support legislation to fund an expansion of the WWAMI medical school program for Alaskan's from 10 seats to 20 starting next fall.

While HB18 will not solve the chronic physician shortage in the short term, it is a vital step in helping Alaska catch up with the rest of the lower 48. Our physician per capita population is among the lowest in the country. It has been almost 30 years since the inception of WWAMI and it is high time for Alaska to get an additional 10 seats.

APS endorses the WWAMI legislation and encourages the bills passage during this session.

Sincerely,


Michael Haugen, JD, MBA
Executive Director

January 16, 2007

Honorable Kevin Meyer
State of Alaska
House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Meyer:

The Alaska State Hospital and Nursing Home Association (ASHNHA) is submitting this letter of support for HB18, an Act that gives the Alaska Commission on Postsecondary Education authority to increase the number of medical students placed in the WWHAMI program, and adding a requirement for payback of financial assistance if the student does not return to Alaska to practice medicine.

ASHNHA participated in a process commissioned by President Hamilton of the University of Alaska and Commissioner Karleen Jackson of the Alaska Department of Health and Social Services to review the seriousness of physician shortages in Alaska, and to develop recommendations for addressing this shortage. The conclusions of that exhaustive review substantiated that the physician shortage in Alaska is already very serious in some communities, and will become even more acute over the next 5 to 10 years if steps are not taken to address this issue. This is perhaps the most pressing public health issue facing the State of Alaska at this time.

Expanding the present WWHAMI program from 10 medical students to 20 students is one of the most prudent steps the State can take to address this shortage of physicians. The WWHAMI program has proven to be a cost-effective investment for training physicians that will return to Alaska to practice. Adding the measure that will require repayment of student financial assistance will strengthen WWHAMI even further and increase the likelihood that students will select Alaska as their home and place of practice.

ASHNHA's Board of Directors has identified expansion of the WWHAMI program as one of its top three legislative priorities for 2007 and therefore strongly supports HB18 and the measures it contains.

Sincerely,



Rod L. Betit
President/CEO

ASHNHA Executive Committee

John Bringham, CEO, Petersburg General Hospital
Al Parrish, V.P./Chief Executive, Providence Alaska
James Shill, CEO, North Star Behavioral Health
Frank Sutton, V.P., SEARHC
Charlie Franz, CEO, South Peninsula Hospital

Pat Branco, CEO, Ketchikan General Hospital
Dennis Murray, Administrator, Heritage Place
Moe Chaudry, CEO, Sitka Community Hospital
Brian Gilbert, CEO, Wrangell Medical Center
Rod Betit, President, ASHNHA

ASHNHA Position on HB 18
Prepared by: Rod Betit, President/CEO
January 29, 2007

WHO ASHNHA REPRESENTS: *The Alaska State Hospital and Nursing Home Association* represents 24 acute care hospitals, 2 behavioral health facilities, 6 assisted living facilities (Alaska Pioneer Homes), and 5 free-standing nursing facilities. Nine of our 24 acute care hospitals also provide nursing home services. We believe ASHNHA's rich composition of private, federal, state, and tribal health care facilities provides a balanced viewpoint on important health care policy matters. ASHNHA's membership evaluates health care legislation weekly and authorizes the position expressed in this testimony.

ASHNHA's POSITION ON HB 18: ASHNHA's membership 'strongly supports' passage of HB18 for the reasons noted below. ASHNHA does not offer any amendments to HB 18 as we believe the bill is excellent as written.

SUPPORTING TESTIMONY:

- ⊕ As determined by the Alaska Physician Supply Taskforce in 2006, Alaska is presently facing a shortage of 300 physicians and this gap is expected to grow dramatically in the years ahead.
- ⊕ Many states are reporting a physician shortage in large part due to physician retirements and an inadequate number of physicians completing training to replace them. This is further exacerbated by U.S. population growth that exceeds the rate of increase in new medical school slots.
- ⊕ Alaska must be proactive to address this situation. While adding additional slots to the WWHAMI program will not solve the entire physician shortage problem, it is a key initial step to take. ASHNHA also supports those provisions of HB 18 that would strengthen the pay back provisions for any WWHAMI participant who does not return to Alaska to practice.
- ⊕ ASHNHA urges your support of HB 18. Thank you for this opportunity to testify.

This Testimony is on Behalf of the Following Alaska Health Care Facilities

Alaska Regional Hospital, Alaska Native Medical Center, Alaska Pioneer Home System, Bartlett Regional Hospital, Bassett Army Community Hospital, Central Peninsula General Hospital, Cordova Community Medical Center, Denali Center Nursing Home, Fairbanks Memorial Hospital, Heritage Place Nursing Home, Kanakanak General Hospital, Ketchikan General Hospital, Manillaq Health Center, Mary Conrad Center, Mat-Su Regional Hospital, Mt. Edgecumbe Hospital SEARHC, Norton Sound Regional Hospital, Petersburg Medical Center, Providence Alaska Medical Center, Providence Extended Care Center, Providence Kodiak Island Medical Center, Providence Seward Medical & Care Center, Providence Valdez Medical Center, Sitka Community Hospital, South Peninsula Hospital, St. Elias Specialty Hospital, USAF 3rd Medical Group- Elmendorf, Wrangell Medical Center, Yukon Kuskokwim Delta Regional Hospital, Alaska Psychiatric Institute, North Star Behavioral Health System, Wildflower Court Nursing Home.



January 29, 2007

The Honorable Peggy Wilson, Chair
House Health, Education and Social Services Committee
Alaska State Capitol, Room 403
Juneau, AK 99801-1182

RE: HB 55 (Kelly)--Support

Dear Chair Wilson:

On behalf of the members of AARP in Alaska, we strongly encourage you and your colleagues on the House Health, Education and Social Services Committee to support HB 55, introduced by Representative Mike Kelly.

It is no secret that Alaska has a shortage of physicians which is expected to get worse over the next few years. AARP members in many Alaska communities already tell us that they are unable to find a physician who will accept them as Medicare beneficiaries. The current situation is so bad that United States Senator Lisa Murkowski is scheduling a Senate hearing on the issue in Anchorage on February 20.

The one bright spot in this shortage is the WWAMI program which has provided ten slots for family practice physicians to spend their residency in Alaska. Upon completion of their medical education, most of these physicians have chosen to stay here and practice in our cities as well as in our remote communities.

You and your House Committee colleagues have seen the Alaska Physician Supply Task Force report produced jointly by the University of Alaska and the Department of Health and Social Services. This excellent report should serve us as a roadmap for our future directions in physician training.

The former exodus of Alaska retirees has been reversed over the past few years. Because of our improved health services and provider community, older Alaskans have determined that they can remain here after retirement, close to their friends and families.

If older Alaskans are unable to find a physician willing to see them, we will be back with the situation of retirees leaving the state so they can be assured of access to health professionals.

HB 55 offers us the first real meaningful opportunity to begin to meet this need. Doubling the number of family practice residents from ten to twenty won't solve our problem but it is an excellent first step.

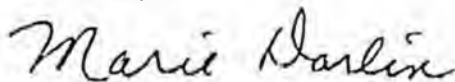
Our AARP members, your constituents, want to stay here after retirement. An affirmative vote on HB 55 will help accomplish that.

We urge an "AYE" vote on HB 55.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator
AARP Capital City Task Force
415 Willoughby Avenue, Apt. 506
Juneau, AK 99801
586-3637 (voice)
463-3580 (fax)

CC: Vice-Chair Bob Roses
Representative Anna Fairclough
Representative Mark Neuman
Representative Paul Seaton
Representative Berta Gardner
Representative Sharon Cissna
Representative Mike Kelly

UNIVERSITY OF AK

WWAMI Program Expansion

- ❖ WWAMI (Washington, Wyoming, Alaska, Montana, and Idaho) is Alaska's medical school
 - Collaborative medical education: 5 states, 6 institutions
 - 35 year history – Alaska was the 1st partner with Washington
- ❖ Need to *increase the net gain* of physicians by 21 per year
 - Actual (current) – gain 78, lose 40 for NET GAIN = 38
 - Needed (current) – gain 100, lose 40 for NET GAIN = 60
 - Future years – need will increase as aging physician population retires
- ❖ WWAMI doubling is a critical part of the overall strategy
 - No single strategy can achieve the needed increase (others: recruitment, retention, residency)
 - Class size same as 1971 when program started, 10 seats per year
- ❖ Why now?
 - Current physician shortage in Alaska
 - Nationwide shortage, worsening over next decade
 - Other states recruiting physicians aggressively
- ❖ Why WWAMI?
 - Cost
 - WWAMI is 2/3 the cost of WICHE per Alaska physician produced
 - Cost per medical student below national average (per AAMC)
 - Low in-state student tuition
 - Return on Alaska's investment
 - 7 - 8 WWAMI graduates start practice in Alaska each year
 - 3 years of 4-year medical school available in Alaska
 - Excellence in medical education
 - #1 Primary Care, 13 consecutive years (*US News & World Report, 2006*)
 - #1 Rural Health, 15 consecutive years (*US News & World Report, 2006*)
 - #1 Family Medicine, 15 consecutive years (*US News & World Report, 2006*)
 - Alaska WWAMI students excel among WWAMI peers
- ❖ How does WWAMI (medical education) work?
 - Undergraduate – can attend any undergraduate school
 - Application
 - Evaluation based on:
 - GPA (grade point average)
 - MCAT (medical college aptitude test)
 - Interview – ~50 percent of applicants
 - Excellent applicant pool in Alaska/Highly Competitive
 - 78 in 2005-06 for 10 positions
 - 35 to 40 qualified
 - top 30 – indistinguishable GPAs and MCATs
 - Year 1 at UAA – 10 Alaskans / year
 - Year 2 at UW – students from all 5 WWAMI states, 182 students / year
 - Year 3 Clerkships
 - Clinical experiences, ~ 6 weeks each
 - All 3rd year clerkships offered in Alaska
 - Year 4 Clerkships
 - Clinical experiences, ~ 4 to 6 weeks each
 - Most 4th year clerkships available in Alaska
 - Practicing Physicians
 - Participate in WWAMI education – clerkships, R/UOP, WRITE, etc.
 - Are supported by WWAMI MedCon, free phone consultation service

Note: A Physician Supply Task Force report issued in August 2006 is available at www.alaska.edu/health

Summary Projected Costs and Revenue for Doubling Class Size, WWAMI FY08

Investments in University of Alaska, University of Alaska Anchorage

Projected Operating Budget	Total	Projected Revenue	Total
Personnel (2 new faculty in clinical and microbiology areas; associated support staff)	\$250,000	Legislative Appropriation	\$280,000
Travel, Contractuals, Commodities	\$80,000	Tuition Revenue	\$50,000
Total	\$330,000	Total	\$330,000

Projected One-Time Capital Costs	Total	Projected One-Time Revenue	Total
Classroom furniture/renovations	\$55,000	Legislative Appropriation FY07	\$475,000
Renovation – Office space, research labs, study space	\$595,000	Legislative Appropriation FY08	\$475,000
Laboratory upgrade/renovations	\$100,000		
Faculty start-up research packages	\$200,000		
Total	\$950,000	Total	\$950,000

Added Payments to University of Washington for Years, 2, 3, and 4 of Program

	FY08	FY09	FY10	FY11	FY12-ongoing*
Additional 10 students 2 nd Year		\$505,558	\$505,558	\$505,558	\$505,558
Additional 10 students 3 rd Year			\$520,371	\$520,371	\$520,371
Additional 10 students 4 th Year				\$321,939	\$321,939
Total		\$505,558	\$1,025,929	\$1,347,868	\$1,347,868

* The cost increments annually based on inflation – not included for FY12.
More than half (~59%) of all WWAMI income, from years 1 through 4 is spent in Alaska.

Total Investments

- FY 07 \$ 475,000 in one-time capital (already allocated)
- FY 08 \$ 475,000 in one-time capital (requested this year)
- FY 08 \$ 280,000 in base support at UAA (requested this year)
- FY 09 \$ 505,558 in base for payments to UW
- FY 10 \$1,025,929 in base for payments to UW
- FY 11 \$1,347,868 in base for payments to UW

Appendix A. Data Details

1. Matriculants in Medical Schools by State

Applicants	Applicants' Matriculation Status						
	Matriculated In State		Matriculated Out of State		NOT Matriculated		
	N	Percent	N	Percent	N	Percent	
Region							
Northeast	7,867	2,072	26.3	1,773	22.5	4,022	51.1
Central	8,580	2,884	33.6	1,125	13.1	4,571	53.3
South	12,089	4,287	35.5	1,284	10.6	6,518	53.9
West	8,069	1,439	17.8	2,041	25.3	4,589	56.9
US Total	37,364	10,682	28.6	6,322	16.9	20,360	54.5
State of Legal Residence, Western States:							
Alaska	73	.	.	29	39.7	44	60.3
Arizona	602	109	18.1	98	16.3	395	65.6
California	4,288	812	18.9	1,167	27.2	2,309	53.8
Colorado	609	108	17.7	125	20.5	376	61.7
Hawaii	208	51	24.5	39	18.8	118	56.7
Idaho	161	.	.	61	37.9	100	62.1
Montana	108	.	.	53	49.1	55	50.9
Nevada	167	42	25.1	25	15	100	59.9
NewMexico	245	71	29	24	9.8	150	61.2
Oregon	387	68	17.6	87	22.5	232	59.9
Utah	478	75	15.7	150	31.4	253	52.9
Washington	670	103	15.4	155	23.1	412	61.5
Wyoming	73	.	.	28	38.4	45	61.6

Alaska Applicants to Medical School by Year, 1994-2005

1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005
72	51	62	59	60	48	59	76	75	69	71	73

Source: AAMC: Data Warehouse: Applicant Matriculant File as of 10/20/2005

Rebecca Rooney

From: Doris Robbins [drobbins@gci.net]
Sent: Tuesday, January 30, 2007 1:53 PM
To: Rebecca Rooney
Subject: RE: 3:00 Hearing on HB 18 and HB 55 Relating to Postsecondary Medical and Other Ed. Pgms

Ms. Rooney,

RE: HB 18 and HB 55 Relating to Postsecondary Medical and Other Ed. Pgms

This is late, as I just learned of the issues being heard today at 3:00 in the House Health, Education and Social Services Committee. Below you will find my e-letter which was emailed separately to each committee member or bill sponsor. Please see that it gets to the committee, given the late time it is being sent.

I appreciate this very much!

Doris Robbins
drobbins@gci.net

3763 Mitchell Ave. B
Fairbanks AK 99709-4636
(907) 374-0597

3763 Mitchell Avenue #B
Fairbanks AK 99709-4636
(907) 374-0597

January 30, 2007

Chair Representative Wilson,
Vice-Chair Representative Roses,
Representative Fairclough,
Representative Neuman,
Representative Scaton,
Representative Cissna,
Representative Gardner,

RE: HB 18 and HB 55 Relating to Postsecondary Medical and Other Ed. Pgms

I support both HB 18 and HB 55. I am grateful to Representatives Meyer, Kelly, Lynn and Crawford for proposing or cosponsoring these two bills. The availability of physicians in Fairbanks seem to me to be nearing a crisis state. Should some traumatic event such as an epidemic occur we will likely be in real trouble.

As a member of a couple of retiree organizations and as a personal user of medical services in

1/31/2007

Fairbanks, Alaska, I can speak to the issue of the lack of available physicians in the Fairbanks area. Personally experiencing difficulty when moving here in late 2004, and since that time with the additional problems expressed by local retirees that I have met, I can attest to the difficulty of finding a physician in Fairbanks.

The problem only increases upon becoming 65, when Medicare becomes the primary insurer for most. I have a year to go yet, but I know some who tell me that they can not get a physician who will accept Medicare, and one physician is seeing some on a donation for services basis. One couple had their story published in an Anchorage Daily News series on the subject. Two others I know received letters from their physicians which stated that for them to continue to be seen, under Medicare, they would be required to pay a \$300 retainer fee.

I have agreed to normally see the fine Nurse Practitioner in my primary physician/oncologist's office unless some need arises that requires a physician. This elderly but spry physician, who will retire not too far in the future, agreed to continue seeing me at age 65 because I was already his patient. He also agreed to act as a primary care physician for me as well. He does that for a few of his oncology patients. (I am cancer free but require check-ups.)

I was told before moving here that I would have no trouble finding someone who specialized in respiratory illnesses. I developed asthma from a work related exposure and although am under control I need occasional checks and refills for maintenance medication. Calling the only respiratory specialist in town, I was told they were full and I could only be put on a waiting list. Only after becoming ill and obviously displayed that with wheezing over the telephone was I able to get in for treatment. I have only seen a Physician's Assistant (PA) at that office. However, the PA's are very well trained and if necessary I am sure that there would be some way to see the physician if the PA could not deal with it. I don't know if that will be the case in a year when I become 65.

I have been doing a survey of physicians who will accept Medicare clients with the very small reimbursement paid by Medicare. It is not complete but the results so far look very depressing. Just because a physician is listed on www.medicare.gov does not mean they are available for primary care. In fact, some listed had retired or left the area. There were a number of them who only work in a hospital, nursing home, Native facility, or emergency room setting. One clinic reported having about a 2 month waiting list, because with so few physicians for the population, they are having too large a percentage of their patients under Medicare coverage and can not afford to keep their office running if they take all of them.

Giving an incentive to have physicians practice in Alaska, especially in Fairbanks, is important to insure care of our population. Having to wait until critically ill and show up in an emergency room is no way to economically operate. It only costs more for an illness that might have been controlled less expensively with a better outcome.

In addition, Alaska and Fairbanks has a large number of Tricare, military dependants, whose coverage is paid similarly to Medicare. Neither a large ratio of patients to physicians using Medicare or Tricare encourage physicians to work in this area. Alaska's medical costs are 70% higher than the average of the "Lower 48." Without some adjustment for Alaska's cost of treatment in relation to payments on medical care by government programs such as Medicare there needs to be some other incentives given to attract physicians to stay in the area over the long term.

The American Medical Association also has a paper which speaks to the problems of maintaining a practice in Alaska. Following is a short excerpt from that paper:

Alaska's 47,519 Medicare beneficiaries comprised 7% of the state's population in 2005. TRICARE, which provides health insurance for military families and retirees, ties its physician payment rates to Medicare, so the Medicare cuts will also hurt access for Alaska's 78,803 TRICARE beneficiaries. Data from the Bureau of Labor Statistics show that these Medicare physician payment cuts will have an impact on 6,969 employees in Alaska. These figures represent the impacts on Medicare Physician Payment Schedule services only and do not include potential spillover effects from private, Medicaid, TRICARE and other plans that tie payments to Medicare rates. In addition, per physician impacts may vary considerably within the state depending on each physician's Medicare patient load and utilization.

Please support both HB 18 and HB 55. They are one avenue to eventually provide some relief. I hope some other incentives can be found to attract physicians. I really understand how physicians cannot afford to take very many patients whose care is only reimbursed at maybe 25% of the going rate. Many are still paying off their education or continuing education to stay up with recent developments in their fields. I wish there could also be some type of tax break given to physicians who agree to see Medicare and Tricare clients. Otherwise, we will have a long wait before our current situation is resolved.

Sincerely,

Doris Robbins
drobbins@gci.net

Cc: Representative Meyer
Representative Lynn,
Representative Kelly,
Representative Crawford

Doris Robbins
drobbins@gci.net

Fairbanks AK 99709-4636
(907) 374-0597

To: Co-chair Representative Chenault & Co-chair Representative Meyer and Committee Members

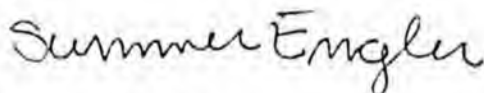
Concerning: HB 18 to increase the WWAMI medical school class size, a student applicant's perspective

My name is Summer Engler. I attend the University of Alaska Anchorage and will graduate in May with a B.S. in Biological Sciences. I am applying to the Alaska WWAMI program for the entering class of 2007. I am writing in support of doubling the WWAMI class size from ten to twenty participants for the entering class of 2007.

Why is an increase in the WWAMI class size important to me? I have several reasons. As an *applicant*, it will increase my chances of getting accepted to medical school. Alaskans are at a disadvantage when it comes to applying to medical school. For example, despite having MCAT scores and GPAs at the national average in 2004, Alaska had the second lowest acceptance rate to all US medical schools. Also, as a *resident* of the state of Alaska, I fear our current and worsening physician shortage. Currently, Alaska needs a net import of 50 new physicians per year. Over the past two years, however, the net increase has only been seven per year (Alaska State Medical Association data). In the future, as Alaska's population grows and our physician workforce ages, we will need an even larger net increase of physicians. As a *patient* in Alaska, I want to have adequate access to healthcare. Fifty percent of Alaska WWAMI students return to Alaska to practice. Increasing the WWAMI class size will increase the number of Alaska-trained physicians that return home to practice medicine. As a *future physician* in Alaska, I want to know that I will have many colleagues helping to meet the growing health care needs of our state.

I thank you for considering an increase in the Alaska WWAMI class size. This investment will help create a healthier Alaska.

Sincerely,



Summer Engler
2007 Alaska WWAMI applicant

HB

18

SFIN

FILE

SENATE FINANCE COMMITTEE REPORT

REPORTED OUT
MAR 15 2007
SENATE FINANCE COMMITTEE

DATE: 2/23/07

FURTHER:

DATE TURNED
IN TO OFFICE: 3/16/07

Finance Committee considered CS FOR HOUSE BILL NO. 18(HES)

HB 18 POSTSECONDARY MEDICAL & OTHER EDUC. PROG.

"An Act amending the functions and powers of the Alaska Commission on Postsecondary Education; and relating to the repayment provisions for medical education and postsecondary degree program participants."

and recommends:

- be replaced with SCS or CS CS HB 18 (FIN)
- adopt previous SCS or CS _____ (_____)
- attached amendment(s)
- adopt _____ Letter of Intent
- further referral to _____ Committee

SENATE BILL:	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	New Title
<hr/>	
HOUSE BILL:	
<input checked="" type="checkbox"/>	Same Title
<input type="checkbox"/>	Technical Title Change
<input type="checkbox"/>	New Title w/ SCR # _____

NEW FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#

PREVIOUS FISCAL NOTE(S):

Department	Date	Fiscal	Indet.	Zero	FN#
EED	1/25/07			<input checked="" type="checkbox"/>	1
H. Finance	2/7/07			<input checked="" type="checkbox"/>	2

APPROPRIATION - no fiscal note

SIGNATURES AND RECOMMENDATIONS:	PRINTED LAST NAME	DO PASS	DO NOT PASS	NO REC	AMEND
	Elin	<input checked="" type="checkbox"/>			
	Thomas	<input checked="" type="checkbox"/>			
	Dyson	<input checked="" type="checkbox"/>			
	Huggins	<input checked="" type="checkbox"/>			
	CARLSON	<input checked="" type="checkbox"/>			
CO-CHAIR:	SIGMAN	<input checked="" type="checkbox"/>			
CO-CHAIR:					

FISCAL NOTE

REPORTED OUT
MAR 15 2007
SENATE FINANCE COMMITTEE

STATE OF ALASKA
2007 LEGISLATIVE SESSION

Fiscal Note Number: _____
Bill Version: CSHB 18(HES)
(H) Publish Date: 1/31/07

Revision Date/Time (Note if correction): _____ Dept. Affected: Education
Title An Act amending the functions and powers of RDU ACPE
the Alaska Commission on Postsecondary Education; and ... Component Program Administration &
Operations
Sponsor Rep. Meyer Component No. 2738
Requester (H)HESS

Expenditures/Revenues (Thousands of Dollars)

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

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual		505.6	1,025.9	1,347.7		
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
TOTAL OPERATING	0.0	505.6	1,025.9	1,347.7	0.0	0.0

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

FUND SOURCE	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
1002 Federal Receipts						
1003 GF Match						
1004 GF		505.6	1,025.9	1,347.7		
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
TOTAL	0.0	505.6	1,025.9	1,347.7	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0
Check this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

POSITIONS

POSITIONS	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Full-time						
Part-time						
Temporary						

ANALYSIS: *(Attach a separate page if necessary)*
HB18 proposes to facilitate the expansion of the annual class size of Alaskan participants in the Washington, Wyoming, Montana, Idaho, and Alaska regional medical education program at the University of Washington School of Medicine (UWSM). This fiscal note reflects additional general fund expenses assuming the annual class size is increased from ten to twenty participants with the first twenty-student cohort entering the program in fall 2007. The first year of the program is conducted at the University of Alaska Anchorage, and, therefore, there are no associated increased costs in the ACPE budget until the additional ten participants begin their second year of training at UWSM.

Prepared by: Diane Barrans, Executive Director Phone 465-6740
Division: Executive Director Date/Time 1/25/07 3:00 PM
Approved by: Diane Barrans, Executive Director Date 1/25/2007
Agency: Alaska Commission on Postsecondary Education