

ALASKA LEGISLATURE SPECIAL COMMITTEE / SUBJECT FILE 8672
1732 SCOMM 69: HOUSE LIABILITY INSURANCE TASK FORCE, 1989-1990 300

Funding

There is an approximate 13% decrease in license renewals for FY 88 from FY 87, which is probably due to Alaska's weakened economy which has resulted in a decline in the construction and professional services industries of the state. However, the board is able to generate sufficient revenue to offset the expenses attributed to the board's operations. We expect that this balance will continue as the board does review the budget periodically with the Division of Occupational Licensing at scheduled board meetings.

STATISTICAL OVERVIEW

I. Licenses

A. Total Licenses Renewed - FY 88

<u>Type</u>	<u>Total</u>	<u>Alaska Only</u>
Architects	543 (100%)	220 (41%)
Engineers	2,945 (100%)	1,242 (42%)
Land Surveyors	720 (100%)	521 (72%)
Corporate	227 (100%)	137 (60%)
TOTAL	4,435	2,120

B. New Licenses Issued - FY 88

<u>Type</u>	<u>Total</u>	<u>By Exam</u>	<u>By Comity</u>
Architects	30 (100%)	14 (47%)	16 (53%)
Engineers	130 (100%)	84 (65%)	46 (35%)
Land Surveyors	33 (100%)	32 (97%)	1 (3%)
Corporate	20 (100%)	N/A	N/A
Total	213	130 (61%)	63 (30%)

Note: Registration by comity or endorsement by authority of AS 08.48.191. Registration by examination by authority of AS 08.48.181.

Expiration date of all current licenses: December 31, 1989.

II. Examinations Administered

A. Engineer-In-Training, Professional Engineering, Land Surveyor-In-Training, Professional Land Surveyor and Alaska Land Surveyor Exams are given twice a year in Anchorage, Fairbanks and Juneau.

<u>Date</u>	<u>Category</u>	<u>Candidates</u>	<u>Passed</u>	<u>Failed</u>
October 29, 1987	EIT	51 (100%)	27 (53%)	24 (47%)
	LSIT	12 (100%)	7 (58%)	5 (42%)

October 30, 1987	PE	60 (100%)	34 (50%)	34 (50%)
	PLS	13 (100%)	11 (85%)	2 (15%)
	PLS IIa	19 (100%)	16 (84%)	3 (16%)
	AKLS	19 (100%)	9 (47%)	10 (53%)
April 16, 1988	EIT	92 (100%)	72 (78%)	20 (22%)
	LSIT	12 (100%)	9 (75%)	3 (25%)
April 17, 1988	PE	75 (100%)	37 (49%)	38 (51%)
	PLS	18 (100%)	10 (56%)	8 (44%)
	PLS IIa	22 (100%)	20 (91%)	2 (9%)
	AKLS	33 (100%)	22 (66%)	11 (33%)

- B. The Architectural Registration Exam (A.R.E.) consists of nine divisions and is given once a year in Anchorage, Fairbanks and Juneau.

<u>Date</u>	<u>Division</u>	<u>Candidates</u>	<u>Passed</u>		<u>Failed</u>	
			#	%	#	%
June 13, 14, 15, and 16, 1988	A	19	12	63	7	37
	B-W	21	21	100	0	0
	B-G	21	10	48	11	52
	C	36	15	42	21	58
	D/F	19	8	42	11	58
	E	16	9	56	7	44
	G	13	11	85	2	15
	H	15	14	93	1	7
	I	15	11	73	4	27

A total of 47 candidates took one or more division(s) of the June 1988 A.R.E.

III. Board Meetings and Teleconferences held in FY 88.

<u>Date</u>	<u>Place</u>
September 9-11, 1987	- Fairbanks, Alaska
December 3-4, 1987	- Anchorage, Alaska
February 25-26, 1988	- Juneau, Alaska
April 21-22, 1988	- Anchorage, Alaska
May 19, 1988	- Teleconference

1988 SUNSET AUDIT RECOMMENDATION
AND LEGISLATIVE ACTION

Sunset Review

SB 365 and HB 425 were introduced during the second session of the Fifteenth Legislature to extend the termination date of the board and provide for an effective date. Wayne Jensen and Malcolm Menzies appeared before the House Labor and Commerce Committee, and Wayne Jensen testified on behalf of the board at the Senate Finance Committee. Representative Koponen sponsored and introduced a House Labor and Commerce Committee Substitute to HB 425 (CS HB 425) which includes the board's proposed changes to Sec. 08.48.111, POWER TO REVOKE, SUSPEND, OR REISSUE CERTIFICATE, which included minor housekeeping changes to existing law; repeal and reenact Sec. 08.48.331, EXEMPTIONS, to include housekeeping changes which clarify unclear or ambiguous language and to strengthen the original intent of the law, to protect the safety, health, property, and welfare of the public; amend Sec. 4. 08.48.341, DEFINITIONS, updating language consistent with current definitions as defined and recommended by professional societies.

A committee substitute to SB 365 was introduced late in the session changing the extended termination date of the board from four to three years. CS SB 365 was enacted 6/08/88, Chapter 124, SLA. The Senate adopted a Senate Finance Committee letter of intent for this bill and refers to the recommendation made by the Division of Legislative Audit in its July 1, 1983-June 30, 1987 Performance Report on the Board. The report recommends that legislation be introduced requiring continuing education or continued competency requirement for license renewals. The letter of intent also asks the board to consider the benefits of a ten-year residency requirement for board membership and a five-year license renewal cycle. The board is required to report its recommendations on these issues to the Legislature by January 15, 1989.

The board has been researching the continuing education issue by contacting other state boards for legislative guidelines. At present, Iowa has a continuing education requirement for renewal of architects, engineers and land surveyors licenses, and Montana has a continuing competency requirement for engineers and land surveyors. An estimated 13 other states have some type of continuing education requirement for land surveyor license renewals. The land surveyors on the board are supportive of some type of continued competency or education requirement for their discipline only and have the support of state professional land surveyor societies.

The board's architects and engineers believe that a continuing education requirement for license renewal in their professions will cause an undue burden and hardship upon the licensees. Due to the remoteness of Alaska and limited continuing education courses, compliance will be difficult for all of the disciplines. The architects and engineers maintain that they must meet daily demands of staying abreast of current changes in their professions, lest they would not be able to compete or survive in the marketplace.

REVIEW OF PRIOR YEAR'S GOALS AND OBJECTIVES

1. Continue to monitor the board's statutes and regulations and investigate changes where necessary. Specific areas of concern are the "exemptions" statutes, AS 08.48.331, and the definitions of architect and civil engineer, AS 08.48.341(7)(8).

This has been and will continue to be one of the goals of the board. With the failure of House Bill 425 during 1988, this becomes a priority issue.

2. Continue to express the importance of budget funding to allow the board to fulfill its statutory requirements.

During the last fiscal year, the board was able to work within its budget and many of its members become appointed to and attended national functions.

3. Continue to improve the board's complaint investigation procedure to the point where it will provide speedy and satisfactory results. Activate the "peer" review" (Enforcement Advisory Committee) process to handle complaints more economically and efficiently.

Enforcement advisory committees have been named. Their effectiveness will be tested during FY 88-89.

4. Maintain good communications between administrative staff of the Department of Commerce and Economic Development and improve communications with the Department of Law.

Great strides have been made on this matter.

5. Evaluate the corporate registration system to determine if the intent of the original legislation is being served.

This item was not completed.

6. Evaluate the application process procedures to try to decrease the time and paperwork currently required.

This has been accomplished, both through new application forms and review process recommended by the licensing examiner.

7. Reevaluate the recently adopted disciplinary guidelines in reference to conformance to NCEE and NCARB guidelines.

This has not been completed.

8. Investigate requiring engineer comity applicants to submit NCEE "council records" instead of current required information.

This has been investigated and found not to completely satisfy Alaska at this point in time.

9. Reevaluate the acceptable methods of satisfying the "Subarctic Construction" requirement for Alaska registration.

The discontinued allowance of treatise papers as an alternate to Arctic 603 course instruction. We continued to monitor this new procedure.

10. Obtain a "pool" of questions to be used in the Alaska portion of the land surveyors examination.

This is ongoing.

11. Recommend that an executive secretary be assigned to the board and investigate increasing fees to provide for this position.

The board has looked into this item somewhat. Also, the design professional has looked into this. A more positive approach would be made during FY 89-90.

12. Increase board member involvement in NCARB and NCEE activities.

This has been accomplished.

NEW GOALS AND OBJECTIVES

The new goals and objectives of the board for FY 89/90 are;

1. The exemption and definition statutes.

Continue to work toward getting House Bill 425 passed or one similar that will address the housekeeping measures that the board desires. Members have suggested that the board draft regulations to tighten the State employees exemption status (AS 08.48.261.) A subcommittee of the board has chosen to undertake this task.

2. Funding.

The board continues to work on the ongoing basis with the Division of Occupational Licensing for adequate funding to maintain the statutory required number of meetings and active involvement with national organizations.

3. Investigation Process.

Activate the Enforcement Advisory Committee and utilize same in the process of complaint review.

4. Communication.

Although the board has improved its communication level with the Division of Occupational Licensing and the Attorney General's office, the "new communication" is not enough. Strides must be continued to be made to open better channels.

5. Corporate Authorization.

Ongoing review is required to evaluate corporate application processes and the statutes relating to corporate authorization to determine if the intent of the original legislation is being served.

6. NCEE and NCARB Discipline Guidelines.

The board needs to continue working on these guidelines.

7. NCEE Council Records.

This item remains on our list. The board will not adopt as a sole guideline for engineering registration and application process the NCEE Council Record. It just does not seem to fit with the Alaskan application at this time.

8. Subarctic and Arctic Engineering Requirements.

The board needs to work with the University of Alaska to place at a more economic level the video correspondence course for subarctic and arctic engineering.

9. The Alaska Land Surveyors Pool of Exam Questions.

This is an ongoing process. Currently, the Division of Occupational Licensing is soliciting proposals from the universities and individuals to aid in preparing the one-hour Alaska examination. It is hoped that a pool of questions will be gathered so we can simply computer generate questions when tests are due.

10. Executive Secretary.

Continuing to investigate costs and evaluate possibilities of the board having their own executive secretary. We are to do this by comparison to our board and other state's boards and their positions of executive secretary.

11. NCARB and NCEE.

Continue to serve nationally on various committee assignments so as to pursue adequate funding through the State of Alaska to attend western zone conferences, annual meetings and special committee tasks.

12. Investigations.

Research the qualifying criteria and job description of investigators. Research and discuss possibilities of the AELS investigators by contacting a board member when a complaint is filed. The board members could act on behalf of the profession to assist the AELS investigator: Aid the investigator in the duties and functions of the professional architect, engineer and land surveyor, and request of the investigator to aid the board in understanding of investigation processes.

13. Legal Counsel.

Research evidence for the board to pursue legal representation when the Department of Law elects not to proceed with legal action on items the board feels very strongly about.

14. New Disciplines.

Investigate adding other disciplines for purposes of registration in the AELS professions. Compile a list of disciplines and contact other states for licensing requirements and processes. These disciplines could include, but are not limited to, structural engineer, sanitary engineer, environmental engineer, landscape architect, survey engineer, etc.

15. Disciplinary Actions.

It is the board's recommendation that results of investigations be published in the local design journals and/or the board's own newsletter. These investigations should include cease and desist orders, the types and kinds of complaints, and the action taken by the board.

16. Continuing Competency.

Examine, per the Legislature's request, issues of possible requirements for registration renewal to comply with legislative intent.

17. Abandon Application Regulations.

The board will review the regulations with regard to abandoned applications.

BUDGET RECOMMENDATIONS

Budget requests should be prepared by the division to cover the following specific expenses, in addition to regular administrative expenses required by the division for the Board of Architects, Engineers and Land Surveyors:

A. Travel and Per Diem.

1. There shall be four board meetings: one to be held in Southeastern Alaska (hopefully, during the legislative session); two to be held in Southcentral Alaska; and one to be held in Interior Alaska.
2. Attendance at regional and national meetings of NCEE and NCARB. The meeting locations vary within the region and the nation for the purpose of budgeting assuming that the following travel will be a minimum;
 - a. Two board members and the licensing examiner will attend two regional meetings: one in Los Angeles and one in Albuquerque, New Mexico, for a total of four days each.
 - b. Two board members and the licensing examiner will attend two national meetings in Washington, D.C., for a total of six days each.

B. Executive Secretary.

We recommend that a new position be created.

LEGISLATIVE RECOMMENDATIONS

New legislation is proposed to review the definition of "architect" and "civil engineer." In conjunction with this, the definition will revise the exemptions for each of these disciplines. Legislation is also recommended to add an executive secretary for the AELS Board.

Past legislation gave the AELS Board three more years. We are to work with the Legislature and, in particular, the Senate to continue the board for an additional year. Senator Zharoff from Kodiak has "promised" to sponsor the bill.

During the last Legislature, it was proposed to transfer the AELS Board from the Department of Commerce and Economic Development to the Department of Labor. If this legislation reappears, the board and its membership should strongly oppose it.

REGULATION RECOMMENDATIONS

Regulation changes are recommended to tighten the state employees' exemption status to AS 08.48.261., with regard to professionally licensed state employees.

CLOSURE

It should be pointed out that the Board of Registration for Architects, Engineers and Land Surveyors is losing three key members. By statute, Board Members Wayne Jensen (past president), G. Sam Best (past vice president), and E. Odin Strandberg cannot continue to serve.

Mr. Strandberg has continued to serve his peers even though his appointment officially terminated July 1, 1987. For this continuation, Mr. Strandberg is highly commended.

G. Sam Best has been the first land surveyor appointed to the board. His actions on the board on behalf of the land surveying profession, his national committee work with NCEE, and his unselfish volunteering for exam preparation, reviews, proctoring, etc., are highly commendable.

Finally, Wayne Jensen, the board president for the past six years, is also leaving our presence. Wayne has served on the board for over ten years and he will surely be missed. His expertise on regulations, action, and board history is irreplaceable.

ENFORCEMENT ADVISORY COMMITTEE

*** * * PROCEDURES MANUAL * * ***

**A SYSTEM OF VOLUNTARY DISCIPLINE
FOR ALASKA-LICENSED
ARCHITECTS, ENGINEERS & LAND SURVEYORS**

**Adopted by the State Board of Registration for
Architects, Engineers and Land Surveyors**

**Wayne K. Jensen (Architect), President
Gordon S. Best (Land Surveyor)
Rajeev Bhargava (Mechanical Engineer)
Robert B. Boswell (Electrical Engineer)
Jacquelyn Luke (Public Member)
Malcolm A. Menzies (Civil Engineer & Land Surveyor)
Robert A. Perkins (Civil Engineer)
Sandra L. Sampson-Jones (Architect)
E. Odin Strandberg (Mining Engineer)**

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By the Division of Occupational Licensing,
Department of Commerce and Economic Development**

**J. Anthony Smith, Commissioner
Randall P. Burns, Director**

**P. O. Box D-LIC
Juneau, Alaska 99811**

907-465-2540

THE ENFORCEMENT ADVISORY COMMITTEE PROCEDURES

AN INTRODUCTION

Background

In the State of Alaska there are approximately 3,800 registered architects, engineers and land surveyors (AELS). These professionals are regulated by the state through the Board of Registration for Architects, Engineers, and Land Surveyors (hereinafter "Board") in conjunction with the Division of Occupational Licensing (hereinafter "Division") in the Department of Commerce and Economic Development. It is the responsibility of the Board to set minimum qualifications for persons applying to be registered in the profession and to discipline practitioners in order to safeguard the life, property, and welfare of the public.

Each year the Investigations Section of the Division receives approximately fifty complaints from consumers or members of the AELS profession itself concerning the work or conduct of Alaska's licensed AELS professionals. Each complaint is investigated to determine whether the allegations can be substantiated. The status of these investigations is reported to the Board at each of its meetings.

If an investigation provides the Division with sufficient evidence to substantiate the allegations contained in the complaint, the case is referred to the Attorney General's Office for its review. If the Attorney General's Office concurs with the findings of the Division, an accusation is filed against the AELS licensee, listing the allegations of illegal or unethical conduct.

If the licensee contests the charges, a hearing is scheduled at which the Division (represented by the Attorney General's Office) and the licensee (with or without counsel) appear before a hearing officer and present their cases. A decision in the matter is then written by the hearing officer and the officer's findings, conclusions, and recommendations are presented to the Board for its final determination.

The procedures governing the filing of an accusation and any subsequent administrative hearing or other related legal proceeding are found in AS 44.62, the Alaska Administrative Procedure Act (APA).

Findings of the Board

The Board finds that the present discipline system, from complaint and investigation through accusation, hearing, and the imposition of appropriate discipline, if any, is a very formal, lengthy, and expensive process for all concerned.

Currently, the person who files a complaint (hereinafter "Complainant") is not likely to see final action on the complaint for at least six months to a year, often even longer. Equally, the complaint and allegations against the AELS professional (hereinafter "Respondent") must be investigated, often resulting in protracted, expensive litigation. The Board finds that the present administrative procedures frequently benefit neither the Complainant nor the Respondent and that the public interest is not well-served by such a cumbersome and time-consuming disciplinary process.

Purpose of the Enforcement Advisory Committee System

The Board has therefore adopted the procedures detailed in this manual, which it believes will both considerably simplify and speed-up the hearing process on complaints filed, thereby increasing the credibility of the complaint process. These procedures involve and require the participation of a Respondent, a Complainant, and a newly created, community-based "Enforcement Advisory Committee" in a system of voluntary discipline.

The purpose of a voluntary discipline program is to provide for an expeditious handling of complaints involving less serious offenses by AELS professionals. If both the Complainant and the Respondent in a particular case agree to submit to these procedures, the Board believes that justice will no longer be delayed or denied.

GENERAL PRINCIPLES AND JURISDICTION

The license to practice architecture, engineering, or land surveying in Alaska is a continuing proclamation by the State of Alaska that the holder is fit to be entrusted with matters involving the practice of architecture, engineering, or land surveying. A certificate of registration sealed by the Board entitles the holder to all rights and privileges of a professional architect, professional engineer, or professional land surveyor, so long as the certificate remains unrevoked, unexpired, or unsuspended.

As a condition of the privilege to practice, it is the duty of every person duly registered under AS 08.48 to act at all times in conformity with the law and with the standards imposed by the Architects, Engineers, and Land Surveyors Registration Act in AS 08.48; the Code of Professional Conduct in 12 AAC 36.200 through 12 AAC 36.245; and the Disciplinary Guidelines in 12 AAC 36.300 through 12 AAC 36.330.

VOLUNTARY DISCIPLINE PROCEDURES

A. Complaint/Investigation/Referral to EAC

Complaints against architects, engineers, and land surveyors are made to the Investigations Section of the Division. If an investigation by the Division substantiates the allegations contained in the complaint, the Division will evaluate whether the matter should be referred to the Attorney General's Office or the Enforcement Advisory Committee (EAC). In making this determination, the division will evaluate the seriousness of the allegations contained in the complaint. Generally, the Division will not recommend a matter to the EAC if the conduct of a Respondent appears serious enough to justify revocation or a lengthy suspension of the Respondent's registration.

If, after review, the Division Director (hereinafter "Director") determines that the matter could appropriately and efficiently be handled by the Enforcement Advisory Committee, then the Director shall, with the concurrence of the Complainant, recommend to the Board that the case be referred to a local Enforcement Advisory Committee for its review and recommendation to the Board. (If a Complainant insists that the matter be referred to the Attorney General's Office, it will not be submitted to an EAC.)

On an annual basis, a member of the Board (hereinafter "designated Board member") shall be assigned by the full Board the responsibility of evaluating the cases recommended by the Director for referral to a local EAC. If the designated Board member agrees with the Director's recommendation that the case should be referred to the profession's voluntary discipline system, the Respondent will be notified of the complaint by the designated Board member and of the Board's desire to refer the matter to a local Enforcement Advisory Committee. Upon receipt of this notice, the architect, engineer, or land surveyor against whom the complaint has been filed must then decide whether he or she shall agree to participate in the Board's voluntary discipline procedures.

B. Consent to Participation

If, after due consideration, the Respondent consents to participate in the Board's voluntary discipline program, the Respondent shall so notify the designated Board member of his or her decision to participate. The Respondent must also complete a formal agreement provided by the designated Board member, consenting to the voluntary procedures, and stating his/her willingness to abide by the final decision of the Board in this matter.

C. Participation Declined

If the Respondent declines to participate in the voluntary discipline, the designated Board member shall return the case to the Division, where it will be referred to the Attorney General's Office for its review and appropriate action (including the possibility of a formal hearing under the Administrative Procedure Act).

D. Local Enforcement Advisory Committees

Upon receipt of a signed consent agreement, the designated Board member shall assign the case to the appropriate local Enforcement Advisory Committee. Committees are presently located in three communities: Fairbanks, Anchorage, and Juneau.

Appointed by the Board President (but with the concurrence of the full Board), each local EAC is made up of licensed architects, engineers, and land surveyors from the community, as well as members of the public who reside in the area. At least three engineers, architects, land surveyors, and public members serve on the Fairbanks and Juneau committees; at least four licensees from each profession and four public members serve on the committee in the Anchorage area. The term of appointment is three years.

E. EAC Hearing Panels

The members of these local EAC's serve as a "pool" from which the designated Board member will appoint a three-person panel to hear the referred complaint.

Two of the three EAC panelists appointed to hear a matter may come from the same professional discipline as the Respondent. The third member will be a public member. The designated Board member will name one of the three appointed panelists to serve as chair of the panel. The panel chair will contact the Respondent and the Complainant (or the Division) to set a mutually agreeable time and place for the hearing, but not later than thirty days from the date on which the Respondent signed the agreement to participate. The Complainant or Respondent may challenge for cause any panelist appointed to hear his or her matter; the designated Board member will rule on such challenges. If a panelist is removed for cause, the designated Board member will appoint another local EAC member to serve on the panel.

F. The Hearing

The hearing need not be conducted according to technical rules relating to evidence and witnesses. Any relevant evidence will be admitted if it is the sort of evidence on which reasonable persons are accustomed to rely in the conduct of serious affairs. Irrelevant and unduly repetitious evidence will be excluded. The panel chair will preside at the hearing, and will rule on all matters related to procedure or evidence.

The Respondent may be represented by counsel. The Complainant may appear on his or her own behalf, or may request to be represented by the Division.

During the hearing, the Complainant (or the Division on behalf of the Complainant) and the Respondent, are entitled to:

- (1) present and examine witnesses;
- (2) cross-examine opposing witnesses;
- (3) present documentary evidence; and
- (4) rebut the evidence presented.

If the panel itself finds it needs additional expertise in order to render a proper judgment in a particular case, the panel, through its chair, may seek the testimony or review of such other professionals as it considers necessary.

G. Record of Proceedings

A complete electronic record of the hearing and any additional proceedings held before the hearing panel will be made and preserved for one year following the hearing. Either the Respondent or the Complainant may ask for a copy of the tape recording, which will be duplicated at their expense.

H. The Report of the Hearing Panel

The panel will make its report within 30 days of the close of the hearing. The findings and recommendations contained in the report will be based upon the standards imposed by the Architects, Engineers and Land Surveyors Registration Act (AS 08.48), the administrative regulations adopted under the Act, the Code of Professional Conduct (12 AAC 36.200 through 12 AAC 36.245), and the Disciplinary Guidelines (12 AAC 36.300 through 12 AAC 36.330).

The report of the hearing panel is the responsibility of the panel chair. The report must be in writing and need not be in any particular form; however, the report will include:

- (1) a brief statement of the dispute;
- (2) a statement indicating that the hearing was held with proper notice to all parties and that the parties were given the opportunity to testify, cross-examine witnesses, and present evidence;
- (3) the findings of the panel on all issues and questions which are necessary to resolve the dispute; and

- (4) a recommendation for appropriate discipline, if any, or a recommendation that the matter be returned to the Division for referral to the Attorney General's Office for its review and action.

The report must be signed by the members of the hearing panel. The panel chair will forward the report to the Director, together with the file, tapes, and any documents presented in evidence, who will then serve a copy of the signed report on the Complainant, the Respondent, and the Board. A separate dissent may be filed by a panel member and should be included with the majority report when it is forwarded to the Director.

I. Appropriate Discipline

A hearing panel may recommend to the Board any of the following disciplinary actions, singly or in combination:

- (1) dismissal of the complaint;
- (2) submission to peer review, in accordance with AS 08.01.075(a)(5);
- (3) the imposition of remedial professional education requirements, in accordance with AS 08.01.075(a)(6);
- (4) the imposition of a fine, in accordance with AS 08.01.075(a)(8);
- (5) the imposition of limitations or conditions on a licensee's practice, in accordance with AS 08.01.075(a)(4);
- (6) censure or a reprimand, in accordance with AS 08.01.075(a)(3);
- (7) the imposition of probation, in accordance with AS 08.01.075(a)(7) and (b); or
- (8) the suspension of a license, in accordance with AS 08.01.75(a)(2).

J. Confidentiality

Except for the Board's final decision in this matter, which shall be made public, the investigatory file and all records, tapes, documents, and files, as well as the proceedings, hearings, and deliberations pertaining to a voluntary discipline matter heard by an Enforcement Advisory Panel will be confidential and closed to the public.

K. Board Action

After receipt of the hearing panel's report, the Board shall consider imposition of the appropriate discipline in the case at its next regularly scheduled meeting. The designated board member is disqualified from the deliberations and vote on any case before the Board in which he or she concurred in a referral to voluntary discipline and appointed the hearing panel which heard the case. The panel's confidential report will be discussed by the Board in executive session, unless the Respondent requests that the deliberations be open to the public.

The Board may either accept or modify the panel's recommendation. The Board, in open session, must formally adopt its decision in the case. The Board's reported decision, in accordance with the consent agreement signed by the Respondent, is final and binding upon the Respondent. The decision must be in writing and include:

- (1) a brief statement of the dispute;
- (2) the findings of the Board; and
- (3) the decision of the Board as to the appropriate discipline, if any.

The Board's decision is a public document and will be kept in the Respondent's permanent file. The Respondent may petition the Board after one year to remove the report from his or her permanent file.

QUESTIONS AND INFORMATION

Persons seeking information regarding these voluntary discipline procedures or who have questions about any matter discussed above should address their requests to:

Division of Occupational Licensing
Department of Commerce and Economic Development
P.O. Box D-LIC
Juneau, AK 99811
Attention: AELS Board Licensing Examiner
(907) 465-2540

Please note: these procedures were adopted December 4, 1987.
Revision dates, as applicable, are listed below:

(None to-date)

State of Alaska
Department of Commerce and Economic Development
Division of Occupational Licensing
Board of Registration for Architects, Engineers and Land Surveyors
P.O. Box D-LIC, Juneau, Alaska 99811
(907) 465-2540

APPLICANT INSTRUCTIONS FOR ARCHITECTS, ENGINEERS AND LAND SURVEYORS

GENERAL INFORMATION

PLEASE READ the application, statutes, regulations and these instructions will be processed according to the date received by the licensing examination verification forms and other supporting documents received to date, prior to a year, usually in February, April, September and December. Written notification approximately two weeks after the board meeting. All documents received to one year and matched with an application upon receipt.

*Basic info
for new
applicants*

tion. Application of
s four times
It be mailed
be held up

ALASKA LICENSES BY EXAMINATION AND BY COMITY for the following professions: Civil, Chemical, Electrical, Mechanical, Mining, and Petroleum Engineering. Applicants with licenses in other branches of engineering must apply for the branch cited above which is most closely associated with their specialty.

ALASKA DOES NOT HAVE RECIPROCITY (WRITTEN AGREEMENT) WITH ANY OTHER STATE OR COUNTRY. Comity MAY be granted to professional registrants from other states, territories and foreign countries at the discretion of the board and in compliance with statutes and regulations. (12 AAC 36.103, .105, .107 by authority of AS 08.48)

COMITY IS NOT GRANTED to applicants who have not been registered by fundamental and professional examination regardless of registration(s) held in another licensing jurisdiction or years of professional work experience. However, the Fundamentals of Engineering Exam may be waived by verified work experience. See 12 AAC 36.090.

EXAM and COMITY APPLICANTS are required to have all education, examinations and the minimum required work experience verified by a third party using Alaska forms, and mailed directly to the Alaska board registration office. NCARB and NCEE Council Records will be accepted for portions of Comity applications, but applicants must still complete Sections 1, 5, 7, 8 and 9 of the Alaska application form. COPIES of college transcripts, another states' application, work experience or any other types of verification forms will NOT be accepted.

SECTION 2. REFERENCES

List five (5) references, three of which should be professionals with some knowledge of your professional abilities and NOT the same persons who will be verifying your work experience. Reference letters do not need to be provided, but references may be contacted by the board for additional information.

SECTION 3. PREVIOUS REGISTRATION AND EXAMINATION

ALL PROFESSIONAL EXAMINATIONS MUST BE VERIFIED BY A REGISTRATION BOARD OR BY NCARB OR NCEE COUNCIL RECORD: Architectural Registration Examination, Fundamentals of Engineering and Land Surveying, and Professional Engineering and Land Surveying Examination. Please forward enclosed registration and examination request form(s) to the state in which your original license was issued or where you took examinations, and to a state board where you hold a current license. Some boards require a fee for this service and most boards require that you enclose a stamped, pre-addressed envelope (use the Alaska board address) along with your verification form(s) and request. If the fundamentals exams were taken in Alaska, you do not need to complete or send the verification form, but do need to list the name and year of exam.

08-0600 (Rev. 6/89)

(DETACH AND RETURN WITH APPLICATION)

State of Alaska
Department of Commerce &
Economic Development
Division of Occupational Licensing
Board of Architects, Engineers & Land Surveyors
P.O. Box D-LIC
Juneau, Alaska 99811

Place
Stamp
Here

EXAMINATION SCHEDULE 1989, 1990 and 1991
Alaska Board of Architects, Engineers and Land Surveyors

ENGINEERING/SURVEYING EXAMINATIONS	APPLICATION DEADLINE	EXAMINATION DATES
Fund. of Engineering (EIT)	August 28, 1989 February 21, 1990 To Be Announced	October 28, 1989 April 21, 1990 October 25, 1990
Fund. of Land Surveying (LSIT)	August 28, 1989 February 21, 1990 To Be Announced	October 28, 1989 April 21, 1990 October 25, 1990
Prin. and Practice of Engineering (PE)	August 27, 1989 February 20, 1990 To Be Announced	October 27, 1989 April 20, 1990 October 26, 1990
Prin. and Prac. of Land Survey. (PLS)	August 27, 1989 February 20, 1990 To Be Announced	October 27, 1989 April 20, 1990 October 26, 1990
Alaska Land Surveying Exam (AKLS)	August 27, 1989 February 20, 1990 To Be Announced	October 27, 1989 April 20, 1990 October 26, 1990
ARCHITECTURAL REGISTRATION EXAM (ARE)	Div. B-Gr and C only April 18, 1990 Div. B-Gr and C only To Be Announced	Dec. 11-12, 1989 June 18-21, 1990 Dec. 10-11, 1990 June 17-20, 1991

POSTPONING EXAM: If you have received notice of approval to sit for an exam, you must submit a written request for postponement and a \$20.00 postponement fee no later than 10 days immediately following the date of examination (See 12 AAC 36.070).

APPLICATION DEADLINE: This means your application must be complete by this date and ready for board review. All necessary Work Verifications, Verification of Registration and Examination, and transcripts must be in your application file by the deadline date. Applications must be received by the Division of Occupational Licensing office by the deadline date (See 12 AAC 36.050(d)). This deadline does not apply to verification of the arctic engineering requirement.

RETAKING A FAILED EXAM: If you have failed a previous examination you usually are not required to complete a new application as long as 18 months have not elapsed, but will be required to pay for the examination fees by the deadline listed on your notification of exam scores (See 12 AAC 36.040 and 12 AAC 36.020).

ENGINEERS AND LAND SURVEYORS: Alaska will be administering the national exams on the same option dates as they are given in all other states. Effective with the fall 1989 exams, professional exams and fundamentals exams will be administered on Friday and Saturday, respectively.

ARTICLE 2 OCCUPATIONAL LICENSING FEES

Section

100. Fees established by department
105. Administrative fees
110. Board of registration for architects,
engineers and land surveyors

12 AAC 02.100. FEES ESTABLISHED BY DEPARTMENT. The fees established in this chapter have been adopted by the department with the concurrence of the applicable board or commission listed in AS 08.01.010. (Eff. 3/6/86, Reg. 97)

Authority: AS 08.01.065

12 AAC 02.105. ADMINISTRATIVE FEES. Except as otherwise provided in this chapter for a particular board or occupation, the following fees apply to all boards and professions listed in AS 08.01.010.

- (1) duplicate license fee, \$5;
- (2) fee for verification or certification to another state of Alaska license, registration, or examination, \$5;
- (3) name change, except for construction contractors, \$5;
- (4) photocopy fee, \$.25 per page;
- (5) returned check fee, \$20;
- (6) penalty for reinstatement of a registration, license, permit or certificate which remains lapsed for more than 60 days, \$20;
- (7) exam postponement fee, \$20; and
- (8) wall certificate fee, \$20. (Eff. 9/27/86, Reg. 99; am 11/20/86, Reg. 100; am 4/3/88, Reg. 105)

Authority: AS 08.01.065
AS 08.01.100

12 AAC 02.110. BOARD OF REGISTRATION FOR ARCHITECTS, ENGINEERS AND LAND SURVEYORS. (a) The following application, registration, and certification fees are established for architects, engineers and land surveyors:

- (1) application fee for all examination and corporate certification applications, \$30;
- (2) application fee for license by comity, \$130;
- (3) registration fee for all or part of the initial

biennial registration period, \$100;

- (4) biennial registration renewal fee, \$100;
- (5) corporation certification fee, for all or part of the biennial certification period, \$400;
- (6) biennial corporation certification renewal fee, \$400;
- (7) amendment to corporate certification, \$50; and
- (8) fee for having examination proctored out of state, \$50.

(b) The following examination fees are established for engineers and land surveyors:

- (1) Fundamentals of Engineering or Engineer in Training (EIT), \$50;
- (2) Principles and Practices of Engineering (PE), \$100;
- (3) Fundamentals of Land Surveying or Land Surveyor in Training (LSIT), \$50; and
- (4) Professional Land Surveyor
 - (A) Principles and Practices of Land Surveying (PPLS) section, \$50; and
 - (B) NCEE Principles and Practices of Land Surveying, Part IIA, \$40; and
 - (C) Alaska Land Surveying Exam (AKLS) section, \$35.

(c) The following fees are established for the Architect Registration Examination (ARE):

- (1) Division A, \$30;
Division B-Gr, \$50;
Division B-Wr, \$15;
Division C, \$80;
Division D/F, \$25;
Division E, \$10;
Division G, \$30;
Division H, \$30;
Division I, \$30; or
- (2) a total of \$300 for the entire examination, all divisions.

(d) The examination fees established in this section are due each time an applicant applies for an examination or examination division. (Eff. 11/20/86, Reg. 100)

Authority: AS 08.01.065
AS 08.48.265



ABOUT THE COUNCIL

The purpose of the National Council of Engineering Examiners is to provide an organization through which State Boards may act and counsel together to better discharge their responsibilities in regulating the practice of engineering and land surveying as it relates to the welfare of the public in safe guarding life, health and property.

Some of the objective of the Council are:

- Improvements in engineering and land surveying registration laws, their administration and effectiveness.

- Uniformity of standards and practices in engineering and land surveying registration.

- General acceptance of inter-board recognition of registration of engineers and land surveyors.

- Definition and maintenance of nationally recognized qualifications for professional engineering and land surveying registration.

- Identification and monitoring of international professional engineering registration procedures and maintenance of liaison with international registration agencies.

FEES PREPARATION OF A COUNCIL RECORD

A discount applies for newly Licensed Professional Engineers. If application is made during:

The first calendar year after licensure \$50

The second calendar year after licensure \$75

Subsequent years, full fee applies ... \$95

TRANSMITTAL OF COUNCIL RECORD

Transmittal of an active Council Record \$35

RENEWAL OF COUNCIL RECORD

Renewal of an active Council Record \$15

Reinstatement and reactivation of a Council Record \$15 per year of inactivity; not to exceed \$75.



NATIONAL COUNCIL OF ENGINEERING EXAMINERS
P.O. Box 1686 • Clemson, South Carolina 29633-1686

ENGINEERS



Your NCEE
Record is
the key
to mobility.



NATIONAL COUNCIL OF ENGINEERING EXAMINERS
P.O. Box 1686 • Clemson, South Carolina 29633-1686

ATTENTION PROFESSIONAL ENGINEERS!

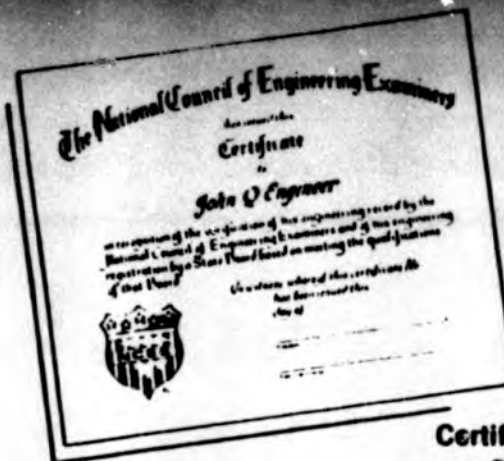
Now that you have your Professional Engineer license, you may be considering registration in a neighboring state. Many engineers find that having an NCEE Council Record will simplify and expedite registration via comity/reciprocity in a majority of states. All jurisdictions will require that the applicant complete at least part of their standard application, and a few may require additional information to supplement the NCEE Council Record. Any Professional Engineer is eligible for the NCEE Records Program.

WHAT BENEFITS WILL THE RECORD PROVIDE?

An NCEE Record will, in most cases, reduce the paperwork required by a registration board. Since the NCEE Record contains verified transcripts, registration, Professional Engineer references and work experience, you will not have to duplicate this information. Most states will accept the Council Record without further duplication of the paperwork.

Also, since the Record contains your concise work experience, this information will be available for future use (i.e. registration)—be it 10 to 20 years from now.

When you need registration in additional states, a copy of your NCEE Council Record



Certificate
of
Verification

can be transmitted to other registration authorities with your written release. Special forms are provided for this purpose. Your Council Record cannot be released without your consent and cannot be released to any other agency or person.

WHAT IS REQUIRED?

When completing your NCEE Record application forms, please provide NCEE with your complete record, including education, engineering and/or non-engineering experience, five Professional Engineer references with knowledge of your engineering reputation and registration information.

WHAT DOES THE RECORD CONTAIN?

When the NCEE Council Record is complete it will contain a concise report of your education, experience, references, examination results and registration which have been verified by NCEE. Yearly you will receive renewal forms for reporting the current information as to the year's activities and a current engineer reference.

BONUS

Each engineer maintaining an NCEE Council Record will receive a free subscription to the *Registration Bulletin*. This newsletter is published five times a year and contains information of interest to Professional Engineers.

NCEE
Records
Application

(Tear off page and send with fee)

To obtain application forms, information and instructions, fill out form and mail to address below.

Mail to:

NCEE Records Program
National Council of
Engineering Examiners
P.O. Box 1686
Clemson, South Carolina 29633-1686

Name _____ First _____ Middle _____ Last _____
Address _____

N C A R B

O R G A N I Z A T I O N
S E R V I C E S P R O C E D U R E S
R E C O R D S C E R T I F I C A T I O N S
A N D E X A M I N A T I O N S

CIRCULAR
OF INFORMATION
No. 1

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Circular of Information No. 1

National Council of Architectural Registration Boards

1735 New York Avenue, N.W. Suite 700

Washington, DC 20006

(202) 783-6500

This Circular dated July 1, 1989 and supersedes all previous Circulars of Information No. 1

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INTRODUCTION

In 1919 fifteen architects representing fourteen states, met and discussed the feasibility of effecting an organization of the examining committees in states which had architect licensing or registration laws. At this conference, a tentative organization was established and a chairman and secretary were elected. These first officers were requested to take steps to bring all of the various examining officials into a national organization. Its purpose would be to consider development and implementation of uniform examination procedures, reciprocal registration, higher educational standards, interchange of information, and other matters of common interest. It was determined that one important function of the organization would be to provide certification for architects, indicating that the holder thereof had met all requirements for certification and, therefore, was recommended to all registration authorities for registration as an architect.

As a result of the activities of this developing committee, a meeting was held in Washington, D.C., in May 1920 and by action of the group present, a council was formally organized. Later, in 1920, the current name of the "National Council of Architectural Registration Boards" (NCARB) was adopted. The first annual meeting was held in 1921.

The NCARB (The Council) has devoted its energies to assisting its member boards in carrying out their duties, developing examinations, establishing standards for certification requirements in education and training, and perfecting its procedures for verifying the qualifications of applicants and determining eligibility for certification.

In recent years, the Council has also been active in developing standards of professional conduct and a structured internship program. The Council is vitally concerned with the content and quality of architectural education, and in this context, appoints members to the National Architectural Accrediting Board as well as members to serve on accreditation teams. Council officers and staff maintain effective liaison with the American Institute of Architects (AIA), the

National Architectural Accrediting Board (NAAB), the Association of Collegiate Schools of Architecture (ACSA), the American Institute of Architecture Students (AIAS) and other segments of the architectural community. The Council maintains relationships with the National Council of Engineering Examiners and Surveyors (NCEES) and the Council of Landscape Architectural Registration Boards (CLARB) through the Interprofessional Council on Registration (ICOR) and with the Council of Licensing Enforcement and Regulation (CLEAR) and the Federation of Associations of Regulatory Boards (FARB).

The Council is a nonprofit corporation, having incorporated under the provisions of the Iowa Nonprofit Corporation Act. All legally constituted architectural registration boards of the fifty states, The District of Columbia, Guam, the Northern Mariana Islands, Puerto Rico and the Virgin Islands are its members. As such, they formulate the policies, rules and regulations of the Council and elect its officers and directors. All of its officers and directors serve without pay.

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SECTION A. ORGANIZATION

1. OBJECTIVE

The mission of the Council is to work together as a council of member boards to safeguard the health, safety, and welfare of the public and to assist member boards in carrying out their duties. Pursuant thereto, the Council develops and recommends standards to be required of an applicant for architectural registration, develops and recommends standards regulating the practice of architecture, provides a process for certifying to member boards the qualifications of an architect for registration, and represents the interests of member boards before public and private agencies.

2. BYLAWS

The organization, function, and procedures of the Council are governed by bylaws. That document is printed each year in the Annual Report of the NCARB.

3. REGIONAL CONFERENCES

Each individual board is required to be a member of a regional conference in order to be a member of the Council. Each of the six regional conferences is responsible for its own method of organization, objectives, meetings, finance, and officers.

The Council bylaws provide for the election of one director from each regional conference.

4. MEETINGS AND REPORTS

Provisions with regard to meetings of the Council are contained in the bylaws. Each member board is entitled to be represented at meetings of the Council by one or more official delegates who must be members of that member board. However, each member board represented at the meeting is entitled to only one vote regardless of the number of representatives present.

Decisions with regard to Council policies are made at meetings of the Council by a majority

vote of member boards, except decisions resulting in bylaw changes require a vote of two-thirds of the member boards.

The Council Board of Directors meets several times each year. One meeting is held immediately before and one immediately after the Council annual meeting.

Prior to the Council annual meeting, a Pre-Annual Meeting Report setting forth all resolutions to be considered at the Annual Meeting and containing reports of the secretary, treasurer, executive director and all committees is mailed to the board administrator and members of each member board. Following the annual meeting, a complete report of the meeting, titled Annual Report is mailed to the board administrator and members of each member board. Several times each year, bulletins or newsletters are distributed to the board administrator and members of each member board and to certificate holders.

5. OFFICERS AND COMMITTEES

The officers and directors of the Council are elected each year at the annual meeting to serve for the following year. Nominations for officer positions are made at the meeting. Election is by majority vote of the member boards present and voting.

Only current members of member boards are eligible for initial election to the Council board as officers or directors. Once elected to the Council Board of Directors, subsequent election is not predicated upon member board membership. Permanent committees are listed in the Council bylaws. Special committees may be appointed by the president with the approval of the Board of Directors. In general, Council committees are composed of members of member boards. Consultants may be appointed to assist in committee work.

6. BUDGET

A budget is adopted annually by the Board of Directors and the Council's audited financial statement is published in the Annual Report. Funds to operate the Council are received from

the following sources:

- a. Member board membership dues;
- b. Examinations;
- c. Fees from certificate and record holders;
- d. Publications;
- e. Investments.

7. ELIGIBILITY

The legally constituted registration authorities of all States, The District of Columbia and Territories of the U.S. are eligible for membership in the Council. Membership is obtained by taking the following action:

- a. Submitting an application for membership;
- b. Filing copies of the jurisdictional statutes, bylaws and board rules and regulations;
- c. Paying the annual membership dues.

8. RESPONSIBILITIES OF MEMBER BOARDS

Each member board furnishes the Council with the following:

- a. On July 1 of each year—the names and addresses of all of its current members and officers;
- b. At the time of election or appointment—the names and addresses of newly elected or appointed members and officers;
- c. By March 15 of each year—confirmation or correction of its requirements for examination and registration;
- d. At the time of adoption—two copies of revisions and additions to the statutes, bylaws and board rules and regulations of the member board;
- e. Timely payment of annual dues;
- f. A report of disciplinary actions taken by the board;
- g. Roster of resident registered architects.

Member board dues are established by the bylaws. Statements for annual dues are sent to the member boards for the ensuing calendar year. A member board is considered to be in good standing if, on the date of the annual meeting, its dues for the current calendar year have been paid.

SECTION B. SERVICES TO ARCHITECTS & INTERNS

1. NATIONAL

The Council verifies and maintains a record of an applicant's education, training, experience, examinations and registrations. This data, when compiled, becomes a Council record.

When a Council record has been completed, the Council will examine the applicant's qualifications and determine the applicant's eligibility for certification. If NCARB standards are met, a Council certificate will be issued.

As long as a Council certificate is in effect, the Council will, upon application of the holder thereof, transmit a certified copy of the individual's certificate record to any member board or to any foreign registration authority. The certificate record is the individual's Council record together with the Council certification that the individual has complied with the Council's standards of eligibility for certification and the Council's recommendation that the individual be registered as an architect without further examination.

With this certification, registration can be obtained from most NCARB member boards without further examination and without the certificate holder being required to make a personal appearance. A few boards may require that the certificate holder's qualifications be supplemented by a personal interview, and/or by additional examination on seismic forces, cold weather construction or local law.

2. IDP

The Intern-architect Development Program (IDP) was established to serve the following objectives:

- a. To provide a formal means of evaluating training;
- b. To enable intern-architects to better prepare themselves for their careers as registered architects;
- c. To recognize intern-architects' professional development by compiling a continuing comprehensive record of their internship activities;
- d. To present intern-architects with a definition

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of the range of internship activities and information on the training experience required to help them qualify for registration.

For further information, see *IDP Guidelines*.

3. INTERNATIONAL

The Council has an agreement of interrecognition with the Architects Registration Council of the United Kingdom (ARCUK). This agreement provides for qualified architects with ARCUK qualifications to apply for Council certification. This agreement terminates on February 1, 1990 after which, applications from United Kingdom architects will not be accepted for certification under these procedures. All requirements, including the oral examination, must be completed by February 1, 1991 to be considered for certification under the terms of the agreement. All other foreign applicants for Council certification must comply with the Council standards of eligibility for certification.

SECTION C. EXPLANATION OF TERMS AND PROCEDURES

1. STANDARDS OF ELIGIBILITY FOR COUNCIL CERTIFICATION

Not all architects who are currently registered by individual member boards are eligible for Council certification. Issuance of the Council certificate is based upon standards established for the Council by its member boards. In order to be eligible for Council certification, architects must submit evidence satisfactory to the Council that they:

- a. Comply with the standards for education, training, examination, and character set forth in the latest edition of Appendix "A" or "B" to this Circular, and
- b. Have been registered by a member board, and registration in that jurisdiction is in effect at the time of application and issuance of Council certification unless duly transferred to the current state of residence or practice (See Section C-9).

The Council may find an architect ineligible for certification if any of the grounds for revocation set forth in Section C-11 are found to exist or if, through references or otherwise, there is evidence of incompetence, dishonesty or fraud relating to the practice of architecture, which is not adequately refuted.

2. THE COUNCIL RECORD

The Council record is a detailed, authenticated record of an applicant's education, training, examination, registration and character.

The applicant will record such information on forms supplied by the Council office. When the completed application form together with the established fee is returned to the Council, the application is reviewed, and if the applicant is found eligible for certification, based on the unsubstantiated information provided by the applicant, processing will begin. Council standards may change as a result of action by its member boards at an Annual Meeting. These standards become effective at the close of the Annual Meeting (late June each year) and apply both to applications in process and newly filed applications.

If, after preliminary review, the applicant is found ineligible for certification, the application form and fee will be returned unless the applicant has requested that the Council proceed with record compilation and evaluation. Application fees are not refundable after record compilation has begun.

During processing, a copy of the application form is returned to the applicant with a supply of reference reply forms and return envelopes. These forms are distributed by the applicant to the selected references. When completed and returned to the Council, they substantiate information supplied by the applicant.

The Council record, when completed, consists of the application and all the properly executed reply forms. The time required to complete a Council record will depend largely upon the promptness with which reference replies are received. The applicant will be notified of any delays which occur in receipt of such replies. The Council will monitor the compilation

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progress and, when the record has been completed and evaluated for compliance with Council standards, the Council will notify the applicant of the results of the evaluation.

Council records are confidential documents containing communications from employers, clients, and other architects which will be made available to no one other than member boards or foreign registration authorities to whom the holder may apply for registration.

The Council will not make the record available to the record holder.

IDP periodic assessment report forms become a part of the IDP applicant's Council record and will be transmitted to a member board upon request of the applicant.

The Council record is required by some member boards to determine an applicant's eligibility for admission to examination and registration.

The Council record is transmitted to member boards in one of three different colored covers. These covers and their functions are as follows:

- a. **GREEN COVER** indicates that the individual is applying to a member board for examination and registration and has fulfilled the Council's education and training standards. It is used to transmit an individual's record to a member board in support of an application for examination. The record of an applicant who has not fulfilled the Council standards may be transmitted without Cover.
- b. **BUFF COVER** indicates that the individual has been registered by a member board but has not yet acquired the Council certificate. It is used to transmit an individual's record in support of an application for reciprocal registration in certain jurisdictions.
- c. **BLUE COVER** indicates that the individual has been certified by the Council. It is used to transmit an individual's record to a member board or foreign registration authority in recommendation and support of an application for registration.

3. COUNCIL CERTIFICATION

Council certification recommends to all registration authorities that registration be granted the

holder without further examination. Most member boards accept Council certification as conclusive evidence of an architect's eligibility for registration.

Council certification does not constitute national registration. It does not qualify its holder to practice in any jurisdiction prior to being registered (licensed) by that jurisdiction.

4. CONCURRENT APPLICATION FOR COUNCIL RECORD AND EXAMINATION

This procedure allows the applicant to start compilation of a Council record at the same time application is made for examination before a member board. IDP applicants are considered to be a part of this concurrent application procedure.

Applicants who are simultaneously applying for a Council record and admission to the examination are urged to contact their state registration board immediately to request that board's application form. Applicants should return the form and any appropriate fees promptly to their board office. IDP applicants will be advised by the Council when they meet Council standards for admission to the examination and to request their state registration board's application form.

In this concurrent application process, the Council will conduct all verifications and will, upon the request of the applicant, transmit the completed record to the member board. (If the applicant has satisfied all Council requirements for admission to the examination the record will be transmitted under Green Cover. If Council requirements are not yet satisfied, the record may be transmitted to the member board without a Council recommendation.) The member board will evaluate the applicant's Record for compliance with their standards for admission to the examination. Some boards require candidates to be residents of or work in the jurisdiction in which they take the examination.

Upon passing the examination, receiving registration, and fulfilling all other Council certification standards and fee requirements, the applicant will be granted Council certification.

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5. DURATION OF VALIDITY

The Council record is valid for one year from the date an acceptable application form is received at the Council office. The Council certificate is valid for one year from the date of initial certification and must be renewed annually thereafter.

IDP Council records are also valid for one year from the date an acceptable application form is received at the Council office. To maintain their records, IDP applicants must periodically file the appropriate assessment forms and pay the required annual maintenance fee (see Section D, Item 2.b).

6. RENEWAL OF COUNCIL RECORD

A Council record that has not been renewed annually may be made current by filing the required forms and paying supplemental fees. (See Section D-l.f)

7. RENEWAL OF COUNCIL CERTIFICATION

Council certification may be renewed annually by submission of an annual renewal fee and an annual report of professional activities during the preceding year, and by maintaining registration in the jurisdiction of initial (base) registration. Prior to the renewal date each year, the Council will send to each certificate holder a statement for the renewal fee and an annual report form. These are due on or before the indicated date. The annual report is added to the Record of the certificate holder. Failure to meet these requirements will cause the certification to become inactive.

8. TRANSMITTAL OF COUNCIL RECORDS AND CERTIFICATES

Member boards are required to examine and maintain a record of the qualifications of each applicant for registration. To satisfy this requirement, a complete copy of an applicant's Council record must be transmitted to a member board in support of an application for registration. The boards' requirements cannot be satisfied by a

reproduction of the announcement which is furnished to certificate holders.

Most member boards prefer the Council certificate record as a basis for reciprocal registration. Some will not consider applicants without certification. Others may deny registration even though the application is supported by certification if the applicant has not satisfied the particular requirements of that board. As long as a record or certification is current and valid, a certified copy will be sent to any member board or to the registration authority of a foreign country upon request of the applicant and payment of the transmittal fee. Applicants are requested not to send transmittal or registration fees until advised to do so by the Council office.

When an application is made for the transmittal of a certificate record to a member board that has requirements differing from those required for Council certification, the Council will attempt to identify any such requirements that the applicant does not meet and bring them to the attention of the applicant. Individuals so notified should contact that state board directly, prior to having their certificate record transmitted, to determine what procedures they must follow to satisfy these requirements.

9. JURISDICTION OF INITIAL (BASE) REGISTRATION

For purposes of Council certification, the jurisdiction of initial registration is that in which the applicant was first registered as an architect. The applicant must maintain registration in that jurisdiction in order to maintain Council certification. A record holder or certificate holder who does not wish to maintain registration in that jurisdiction may transfer, for certification purposes, to the jurisdiction in which residency or practice is maintained. This transfer can be effected provided the architect is registered in the jurisdiction to which transfer is requested, and provided the registration in the original jurisdiction has not expired or lapsed for reasons other than nonpayment of the required renewal fee. Such transfer may be made upon request to the Council and payment of a transfer fee.

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10. INACTIVE COUNCIL CERTIFICATION

Certification is inactive and void when the holder has failed to file the annual report and pay the renewal fee or when the holder does not make payment for Council services performed. To reactivate or reinstate certification, the holder is required to file supplementary forms and reports satisfactory to the Council, pay all fees which are in arrears, and a reinstatement fee.

11. REVOCATION OF COUNCIL CERTIFICATION

The Council *shall* revoke an architect's certification if:

- a. A member board has revoked or suspended for a period of twelve months or more the architect's registration for a cause other than non-payment of renewal fees or failure to file information with the member board; or
- b. Facts are subsequently revealed which show that the architect was actually ineligible at the time of certification.

In addition, the Council *may* revoke an architect's certification if:

- c. A member board or a court makes a finding, not reversed on appeal, that the architect (i) has, in the conduct of his/her architectural practice, violated the law or (ii) has engaged in conduct involving wanton disregard for the rights of others; or
- d. The architect has surrendered or allowed to lapse his or her registration in connection with disciplinary action pending or threatened; or
- e. A member board has denied the architect registration for a cause other than the failure to comply with the educational, training, age, residency, or other technical qualifications for registration in such jurisdiction; or
- f. The architect has willfully misstated a material fact in a formal submission to the Council.

The Council may reinstate a previously revoked certification, if the cause of the revocation has been removed, corrected, or

otherwise remedied. An applicant for reinstatement must meet the eligibility standards for certification in effect at the time of the new application.

SECTION D. SCHEDULE OF FEES

1. APPLICATION FOR CERTIFICATION

- a. For compilation of a Council record: \$125.00
- b. For processing an application for a Council certification: \$75.00 (This is in addition to the fee for compilation of a Council record under "a" above.)
- c. For transmittal of Council record or certificate record to a member board or to the registration authority of a foreign country: \$200.00
- d. For transmittal of supplemental information in connection with a Certificate Record previously transmitted when requested by the member board due to the applicant's failure to comply with that board's requirements in a timely manner: \$50.00
- e. For transfer of initial (base) registration: \$35.00
- f. For making the Council record current prior to granting Council certification: \$25.00 for each year or fraction thereof from the date of initial application or the date of the most recent application to make the record current. In no event shall the total updating fee exceed \$125.00
- g. For annual renewal of Council certification: \$50.00
- h. For reinstatement of Council certification which has lapsed due to non-payment of annual renewal or other fees: \$50.00 plus the sum of any outstanding fees. (The reinstatement fee is in addition to the payment of the annual renewal fees, at the rate as noted in "g" above, and any other fees that are in arrears to the date of receipt of the reinstatement fee.)
- i. For review, oral examination, or other personal appearance before a Council committee: \$350.00

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- j. For reinstatement of a revoked certification: \$350.00 (The reinstated fee is in addition to the payment of the annual renewal fees, at the rate as noted in "g" above, and any other fees that are in arrears to the date of receipt of the reinstatement fee.)

2. IDP

IDP applicants for Council certification are charged fees in accordance with the following schedule:

- a. For compilation of a Council record: \$125.00
Note: \$50.00 is payable upon submission of the application; the remaining \$75.00 is payable upon completion of the Council record compilation process. This includes only one transmittal of the record to a member board for admission to the examination when the transmittal is made twelve or more months *after* receipt of the application for Council record. When the transmittal is made within twelve months of the date of receipt of the application for Council record, the transmittal fee is \$150.00. Additional transmittals of the IDP Council record will be charged at the rate of \$200.00 per transmittal.
- b. For annual maintenance of the Council record (during internship period only): \$25.00
- c. For processing the Council record for certification once registration is acquired: \$75.00 (This fee is in addition to the fees noted above.)
- d. For updating or review of a Council record after transmittal to a board for admission to examination, should registration not have been acquired on a previous attempt: \$25.00 for each year or fraction over two months from the date of the initial transmittal. In no event shall the total updating fee exceed \$125.00.

NOTE: A \$25.00 fee will be imposed for each dishonored check. All fees are to be paid in U.S. dollars only.

SECTION E—EXAMINATIONS

1. GENERAL

For many years, the NCARB written examination was a 4-day, 36-hour, 7-part examination, all parts of which had to be passed before an individual could be registered as an architect by the board which administered the examination. This examination was discontinued after the December 1974 administration. In June 1973, a new written examination format was instituted consisting of two separate and distinct examinations: the Professional Examination and the Equivalency Examination. In July 1976, the Equivalency Examination was renamed the Qualifying Test. Beginning in January 1978, all applicants for registration were required to pass the architectural design/site problem of the Qualifying Test. In 1979, the Design/Site Test became Section "A" of the Professional Examination.

From 1979 to 1981 the Council conducted an assessment of its examinations. The examinations were assessed against criteria that were established following a national study of architectural practices and client/user needs. The findings and recommendations of this study were published in a report issued in 1981 titled NCARB Examination Validation Study. These recommendations were incorporated into a revised examination for registration. The examination, the NCARB Architect Registration Examination (A.R.E.), was administered for the first time in June, 1983. In 1988, another national study was conducted, and the findings were incorporated into revised A.R.E. specifications. The Council will periodically conduct such studies to maintain the examination content current with architectural practice and client/user needs.

In 1988, the Council also provided the A.R.E. in a computerized format on a pilot test basis (C/A.R.E.). The Council will continue its studies for possible implementation of C/A.R.E. on a full-scale basis in the near future. In the computer version of the A.R.E., only the machine scorable divisions are given.

The A.R.E. is intended to examine the applicant's competence based upon both education

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and practical experience. Accordingly, the Council has recommended to its member boards that the A.R.E. be administered only after applicants have completed their education and training.

2. ARCHITECT REGISTRATION EXAMINATION (A.R.E.)

The A.R.E. is the only examination offered by the Council for registration. It is given over four consecutive days in June of each year and contains the following divisions:

- Division A: Pre-Design
- Division B: (1) (2) Site Design—Written
- Division B: (2) Site Design—Graphic
- Division C: (2) Building Design
- Division D/F: (3) Structural Technology—General and Long Span
- Division E: Structural Technology—Lateral Forces
- Division G: Mechanical, Plumbing and Electrical Systems
- Division H: Materials and Methods
- Division I: Construction Documents and Services

To pass the A.R.E., an applicant must achieve a passing grade on each Division. Scores from the individual divisions may NOT be averaged. The Council does not require applicants to take all divisions of the A.R.E. at their initial sitting for the examination, nor that they take all previously failed divisions at any subsequent sitting for the examination. For purposes of certification, the Council permits applicants unlimited opportunities to retake divisions previously failed.

(1) Beginning with the June 1988 administration of the A.R.E., Division B consists of separate written and graphic tests. Only the part of Division B which has been failed must be repeated.

(2) Beginning in December 1989, and each December thereafter, Division B—Graphic and Division C will be given in December as well as in June.

(3) Divisions D and F have been merged into a single division beginning with the 1988 administration of the A.R.E.

3. EXAMINATION TRANSFER CREDITS

Applicants who previously passed both Divisions D and F of the A.R.E. will receive credit for Division D/F. Those applicants who have not passed both Division D and Division F must pass Division D/F even though they may have passed Division D or Division F previously.

Applicants transferring from the previous examination series need only take those Divisions for which transfer credit has not been received. In order to be eligible for transfer credits for any parts of Professional Examination—Section B, the applicant must have passed three parts of that examination in one sitting.

Transfer credits to the A.R.E. from the previous NCARB examinations are as follows:

<u>Previous Examinations Passed</u>	<u>Credits to A.R.E.</u>
Professional Examination— Section B, Parts I and II	Division A
Professional Examination— Section A, (Design/Site)	Divisions B & C
Professional Examination— Section B, Part III.	Divisions D/F, E, G & H
Qualifying Test—Section B	Divisions D/F & E
Qualifying Test—Section D	Division G
Qualifying Test—Section C	Division H
Professional Examination— Section B, Part IV	Division I

Applicants without an NAAB accredited degree in architecture must, in all cases, pass Divisions D/F, E, G, and H of the A.R.E. if they have not passed equivalent portions of the Qualifying Test, even though the applicant may have passed the Professional Examination—Section B, Part III.

Applicants without an NAAB accredited degree in architecture must, in all cases, pass Division A of the A.R.E. if they have not passed Section A of the Qualifying Test, even though the applicant may have passed the Professional Examination—Section B, Parts I & II.

Since the history and theory of architecture is incorporated into all divisions of the A.R.E., no

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credit will be given for having passed the qualifying Test Section A—History.

In October 1988 and February 1989, many jurisdictions administered the computerized version of certain divisions of the A.R.E. (C/A.R.E.). More information regarding the A.R.E. and the C/A.R.E. is provided in NCARB *Circular of Information No. 2* and the C/A.R.E. Information Booklet. Early each calendar year, the Council publishes the Architect Registration Examination Handbook, which contains detailed information about the examination.

Applicants will not be admitted to the Oral Examination until all application and supplemental requirements are completed. Applicants may pass a lateral forces exam before or after the Oral Examination. The Oral Examination is conducted by a special committee of the Council; its scope is described in a document entitled Oral Interview Procedures for ARCUK Registrants, copies of which are available from the Council office.

SECTION F. INTERNATIONAL INTERRECOGNITION AGREEMENT

A qualified architect, registered by the Architect Registration Council of the United Kingdom (ARCUK) desiring to practice as an architect in the United States, may apply for Council certification until February 1, 1990. On that date, the Agreement will terminate. The application procedures and examination must be entirely completed by February 1, 1991, after which no further oral examinations for Council certification will be given.

The following specific criteria form the basis for evaluation of eligibility of ARCUK candidates for certification by the Council:

The applicant shall—

- a. have been registered under the provisions of the Architects Registration Acts 1931 to 1938, of the United Kingdom and have one year of additional practice experience following registration, and such registration is in good standing, and
- b. be required to present completed application forms and such other supplemental information as may be necessary to the Council in accordance with Section C of this Circular, and
- c. be required to pass Division E (Structural Technology—Lateral Forces) of the A.R.E. or the Council's lateral forces examination; and,
- d. be required to pass a Council Oral Examination.

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APPENDIX "A" To Circular of Information No. 1 EDUCATION, TRAINING AND EXAMINATION REQUIREMENTS FOR NCARB CERTIFICATION RELEASED JULY 1989.

THIS EDITION OF APPENDIX "A" SUPERSEDES ALL PREVIOUS TABLES OF EQUIVALENTS. INTERN-ARCHITECT DEVELOPMENT PROGRAM (IDP) APPLICANTS REFER TO APPENDIX "B" FOR THEIR TRAINING REQUIREMENTS.

1. CERTIFICATION STANDARDS

1.1 To be granted NCARB certification, an applicant must:

1.1.1 Be of good character as verified by employers, architects and NCARB member boards.

1.1.2 Hold a professional degree in architecture where the degree program has been accredited by the National Architectural Accrediting Board (NAAB) not later than two years after termination of enrollment or have satisfied NCARB's education requirements as otherwise specified in *Circular of Information No. 3*.

1.1.3 Have at least 3 years of training credits in accordance with Section 2 or have satisfied the IDP training requirements in accordance with Appendix "B".

1.1.4 Have passed the NCARB Architect Registration Examination (A.R.E.), or the NCARB Professional Examination (and the Qualifying Test or the Equivalency Examination when applicable by NCARB standards) or the NCARB 7-part, 36-hour Examination; provided such examinations and the grading procedures applied were in

accordance with NCARB standards current at the time the applicant sat for the examination.

1.1.5 Hold a current registration to practice architecture issued by an NCARB member board.

1.2 Applicants meeting all certification requirements above except 1.1.2 may nonetheless be granted certification if the applicant holds a high school diploma or equivalent and either (a) was registered by an NCARB member board prior to July 1, 1984 and has accumulated at least 5 education credits, or (b) had accumulated at least 5 education credits as of June 30, 1984. See *Circular of Information No. 3* for explanation of education credits.

1.3 Other experience may be substituted for the certification requirements outlined above, only insofar as NCARB considers it to be equivalent to the required qualifications.

1.4 In evaluating records, NCARB may, prior to certification, require substantiation of the quality and character of the applicant's experience, notwithstanding the fact that the applicant has complied with the technical certification requirements set forth above.

2. TRAINING STANDARDS

2.1 To satisfy the NCARB training standards, an applicant must have at least 3 years of training credits or have satisfied the IDP training requirements in accordance with Appendix "B". The following table sets forth the ways in which training credits can be acquired:

DESCRIPTION OF TRAINING	PERCENT CREDIT ALLOWED	MAXIMUM CREDIT ALLOWED
2.1.1 Diversified experience in architecture as an employee in the office of a registered architect.	100%	No Limit
2.1.2 Diversified experience in architecture as a principal practicing in the office of a registered architect with a verified record of substantial practice.	100%	No Limit (but see 2.4)
2.1.3 Diversified experience in architecture as an employee of an organization (other than offices of registered architects) when the experience is under the direct supervision of a registered architect.	100%	2 Years
2.1.4 Experience directly related to architecture, when under the direct supervision of a registered architect but not qualifying as diversified experience or when under the direct supervision of a professional engineer, landscape architect, planner or interior designer.	50%	1 Year
2.1.5 Experience, other than 2.1.1, 2.1.2, 2.1.3, and 2.1.4 experience, directly related to on-site building construction operations or experience involving physical analyses of existing buildings.	50%	6 Months
2.1.6 A post professional degree in architecture or teaching or research in an NAAB accredited architectural program.	100%	1 Year

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2. TRAINING STANDARDS (CONTINUED)

2.2 No training credits may be earned prior to satisfactory completion of:

- (1) three years in an NAAB accredited professional degree program, or
- (2) the third year of a four year pre-professional degree program in architecture accepted for direct entry to an NAAB accredited professional master's degree program, or
- (3) one year in an NAAB accredited professional master's degree program, or
- (4) 96 semester credit hours as evaluated by EESA in accordance with NCARB *Circular of Information No. 3* of which no more than 60 hours can be in the general education category or
- (5) five education credits in the circumstances described in 1.2.

Note: 32 semester credit hours or 48 quarter credit hours shall equal one year in an academic program.

2.3 No experience used to meet education requirements may be used to earn training credits.

2.4 After satisfying 1.1.2., every applicant must earn at least (i) one year of credit under 2.1.1 or (ii) three years of credit under 2.1.2, provided the applicant has practiced for those three years in association with another architect practicing as a principal or (iii) five years of credit under 2.1.2.

2.5 To earn credits under 2.1.1, 2.1.2, 2.1.3, 2.1.4, and 2.1.5, an applicant must work at least 35 hours per week for a minimum period of ten consecutive weeks under 2.1.1 or six consecutive months under 2.1.2, 2.1.3, 2.1.4, or 2.1.5. An applicant may earn one-half of the credits specified under 2.1.1 for work of at least 20 hours per week in periods of six or more consecutive months. No credits will be given for part-time work in any category other than 2.1.1.

2.6 To earn credit under 2.1.6, an applicant's credit hours must be in subjects evaluated by NCARB as directly related to architecture. 20 semester credit hours or 30 quarter credit hours of teaching or equivalent time in research will equal 1 year.

2.7 An organization will be considered to be "an office of a registered architect" if: (a) the architectural practice of the organization in which the applicant works is in the charge of a person practicing as a principal; and the applicant works under the direct supervision of a registered architect, and (b) the organization is not engaged in construction, and (c) the organization has no affiliate engaged in construction which has a substantial economic impact upon the person or persons in the organization practicing as a principal.

2.8 An organization (or an affiliate) is engaged in construction if it customarily engages in either of the following activities:

- (a) undertakes to provide labor and/or material for all or any significant portion of a construction project, whether on lump sum, cost plus or other basis of compensation, or
- (b) agrees to guarantee to an owner the maximum construction cost for all or any significant portion of a construction project.

2.9 A person practices as a "principal" by being (a) a regis-

tered architect and (b) the person in charge of the organization's architectural practice, either alone or with other registered architects.

2.10 A "registered architect" is a person registered to practice architecture in the jurisdiction in which (s)he practices.

2.11 The maximum credit for training as an employee of a person practicing architecture who is not an architect registered in a U.S. jurisdiction shall be one year. No credit will be granted for foreign training other than as an employee of a person practicing architecture. Provided, however, that a person with five years of foreign training under category 2.1.2 shall be deemed to have satisfied the training requirements.

2.12 In deciding if training represents "diversified experience in architecture," NCARB will compare the training with the training requirements set forth in the Intern-architect Development Program (IDP). See Appendix "B" and *IDP Guidelines*.

Applicants employed in settings described in 2.1.1, 2.1.2, and 2.1.3, whose experience is not diversified, may obtain credit only under 2.1.4.

3. EXAMINATION DEFICIENCIES

3.1 Examination deficiencies shall be subject to the following conditions:

3.1.1 Prior to July, 1973, the NCARB written examination was a 7-part examination of 36 hours duration, but some NCARB member boards administered examinations of a shorter duration. Compensation for each one hour deficiency in duration in the 7-part examination may be achieved by one year of excess training credits. Excess training credits may be earned only after initial registration by accumulating training credits in excess of those required for NCARB certification. Applicants who have earned under 2.1.2, ten or more years of excess training credits (in the manner described in the preceding sentence) and have received their initial registration by written examination, regardless of hour duration, are eligible for certification.

3.1.2 NCARB may waive deficiencies in the applicant's examination procedure arising from the examination transitions which occurred between July 1973 and January 1, 1978, and with the implementation of the A.R.E. in 1983 if, in its judgment, such deficiencies are minor in nature or, if substantial, have been adequately compensated for by some equivalent proof of the applicant's competency.

3.1.3 The transition rules relating to the implementation of the NCARB A.R.E. are described in Circular of Information No. 2.

3.1.4 An applicant whose registration was based in whole or in part on having passed sections of the California Architectural Licensing Examination and who has successfully completed an oral examination administered by NCARB with respect to the subject matter of those sections, shall be deemed to have received a passing grade in the corresponding divisions of the A.R.E.

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APPENDIX "B" To Circular of Information No. 1 TRAINING REQUIREMENTS FOR INTERN-ARCHITECT DEVELOPMENT PROGRAM (IDP) APPLICANTS FOR NCARB CERTIFICATION

THIS EDITION OF APPENDIX "B" SUPERSEDES ALL PREVIOUS TABLES OF EQUIVALENTS.

IDP APPLICANT DEFINED

An IDP applicant for NCARB certification is a person who has completed the training requirements listed below in satisfaction of 1.1.3 of Appendix "A".

TRAINING REQUIREMENTS

An IDP applicant must acquire a total of 700 value units (VU's) to satisfy the training requirements. One VU equals 8 hours of acceptable activity. See Appendix "A" for acceptable experience descriptions. The following chart lists the IDP training categories and areas and the value unit requirements for each.

CATEGORY A: Design and Construction Documents

	Minimum VU's Required
1. Programming	10
2. Site and Environmental Analysis	10
3. Schematic Design	15
4. Building Cost Analysis	10
5. Code Research	15
6. Design Development	40
7. Construction Documents	155
8. Specifications & Materials Research	15
9. Documents Checking & Coordination	15
Minimum Total VU's Required	360*

CATEGORY B: Construction Administration

10. Bidding & Contract Negotiation	10
11. Construction Phase-Office	15
12. Construction Phase-Observation	15
Minimum Total VU's Required	70*

CATEGORY C: Office Management

13. Office Procedures	15
14. Professional Activities	10
Minimum Total VU's Required	35*

*The differences between the minimum total VU's required in each of the categories A, B and C and the sum of the minimums required for each training area within the category must be acquired by earning VU's from training areas within the same category.

CATEGORY D: Related Activities

No Minimum Required	0
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This listing of required minimums in categories A, B and C totals 465 VU's, allowing for 235 additional VU's to be acquired in any of the listed categories. All of the 235 additional VU's may be acquired in one category or distributed among the categories.

EXPLANATION OF REQUIREMENTS

1. VU's in categories A, B and C may be acquired only if the applicant meets the time requirements of 2.5 of Appendix "A". VU's may be acquired in category D only if the activity is substantial and continuous.

Full VU credit is earned for acceptable full-time employment in the settings described in 2.1.4 and 2.1.5 of Appendix "A", and for acceptable part-time employment in the setting described in 2.1.1 of Appendix "A".

2. No VU's may be acquired prior to meeting the requirements of 2.2 of Appendix "A".

3. A post professional degree in architecture qualifies for 235 VU's under category D.

4. An IDP applicant may earn VU's by completing NCARB-approved supplementary education programs: credit to be in accordance with a table of credits established by NCARB. Supplementary education cannot be used to satisfy the minimum VU requirements in training areas 1-14. No VU's may be earned for supplementary education prior to meeting the requirements of 1.1.2 of Appendix "A" or while enrolled in a post-professional degree program in architecture.

5. The VU's which may be earned under paragraphs 3 and 4 may not exceed in the aggregate 235 VU's.

6. To satisfy categories A and B of the training requirements, VU's (including VU's earned from supplementary education) in those categories must be acquired when employed in the settings described in 2.1.1 or 2.1.3 of Appendix "A".

7. A minimum of 235 VU's must be acquired in the setting described in 2.1.1 of Appendix "A" after having satisfied 1.1.2.

8. In evaluating training, NCARB may, prior to certification, require substantiation of the quality and character of the training notwithstanding the fact that the IDP applicant has complied with the technical training requirements set forth above.

9. For detailed descriptions of the IDP training categories and supplementary education requirements, see *IDP Guidelines*.

Doctors, etc.

**CHAPTER 64.
MEDICINE.****Article**

1. State Medical Board (§§ 08.64.010—08.64.160)
2. Licensing (§§ 08.64.170—08.64.340)
3. Unlawful Acts (§ 08.64.360)
4. Miscellaneous Provisions (§§ 08.64.366—08.64.369)
5. General Provisions (§§ 08.64.370—08.64.380)

**ARTICLE 1.
STATE MEDICAL BOARD.****Section**

10. Creation and membership of State Medical Board
50. Oath of office
60. Seal
70. Officers
85. Meetings of the board
90. Quorum
100. Powers of board to adopt regulations
101. Duties
103. Investigator; executive secretary
105. Regulation of abortion procedures
107. Regulation of physician assistants and intensive care paramedics
110. Per diem and expenses
130. Board records
160. Applicability of Administrative Procedure Act

Sec. 08.64.010. Creation and membership of State Medical Board. The governor shall appoint a board of medical examiners, to be known as the State Medical Board, consisting of five physicians licensed in the state and residing in as many separate geographical areas of the state as possible, and two persons with no direct financial interest in the health care industry.

Sec. 08.64.050. Oath of office. Each member shall take an oath of office. The oath shall be filed and preserved in the division of occupational licensing of the department.

Sec. 08.64.060. Seal. The board shall adopt a seal.

Sec. 08.64.070. Officers. The board shall elect a president and secretary from among its members. The president and secretary may administer oaths.

Sec. 08.64.085. Meetings of the board. The board shall meet at least four times a year.

Sec. 08.64.090. Quorum. Four members of the board constitute a quorum for the transaction of all business properly before the board.

Sec. 08.64.100. Power of board to adopt regulations. The board may prescribe and establish rules and regulations necessary to carry into effect the provisions of this chapter.

Sec. 08.64.101. Duties. The board shall

- (1) examine and issue licenses to applicants;
- (2) develop written guidelines to insure that licensing requirements are not unreasonably burdensome and the issuance of licenses is not unreasonably withheld or delayed;
- (3) submit an annual report of its proceedings to the governor, including a statement of money received and disbursed;
- (4) after a hearing, impose disciplinary sanctions on persons who violate this chapter, or the regulations or orders of the board;
- (5) adopt regulations insuring that renewal of licenses is contingent upon proof of continued competency on the part of the licensee; and
- (6) coordinate with private professional organizations to establish an impaired medical professionals program to treat persons licensed under this chapter who abuse addictive substances.

Sec. 08.64.103. Investigator; executive secretary. After consulting with the board, the department shall employ two persons who are not members of the board; one shall be assigned as the investigator for the board; the other shall be assigned as the executive secretary for the board. The investigator shall

- (1) conduct investigations into alleged violations of this chapter, and into alleged violations of regulations and orders of the board;
- (2) at the request of the board, conduct investigations based on complaints filed with the department or with the board; and
- (3) be directly responsible and accountable to the board, except that only the department has authority to terminate the investigator's employment and the department shall provide day to day and administrative supervision of the investigator.

Sec. 08.64.105. Regulation of abortion procedures. The State Medical Board shall adopt regulations necessary to carry into effect the provisions of AS 18.16.010 and shall define ethical, unprofessional or dishonorable conduct as related to abortions, set standards of professional competency in the performance of abortions and establish procedures and set standards for facilities, equipment and care of patients in the performance of an abortion.

Sec. 08.64.107. Regulation of physician assistants and intensive care paramedics. The board shall adopt regulations regarding the registration of physician assistants and physician-trained mobile intensive care paramedics, and the medical services that each may perform, including but not limited to (1) the educational and other qualifications, (2) the application and registration procedures, (3) the scope of activities authorized, and (4) the responsibilities of the supervising or training physician.

Sec. 08.64.110. Per diem and expenses. The members of the board are entitled to per diem and expenses authorized by law

Sec. 08.64.130. Board records. The board shall preserve a record of its proceedings, which shall contain the name, age, residence and duration of residence of each applicant for a license, the time spent by the applicant in medical study, the place of medical study, and the year and school from which degrees were granted. The record shall also show whether the applicant was granted a license or rejected.

Sec. 08.64.160. Applicability of Administrative Procedure Act. The board shall comply with the Administrative Procedure Act. (AS 44.62)

ARTICLE 2. LICENSING.

Section

170. License to practice medicine or osteopathy
180. Application for license
190. Contents of application
200. Qualifications of physician applicants
205. Qualifications for osteopath applicants
207. Qualifications for acupuncture applicants
209. Qualifications for podiatry applicants
210. Examination required
220. Contents of examination and grading
225. Foreign medical graduates
230. License granted
240. License refused
250. License by credentials
255. Interview required
260. Re-examination
270. Temporary permits
272. Residency and internship permits
275. Temporary permit for locum tenens practice
312. Continuing education requirements

- 313. Inactive license
- 315. Fees
- 326. Grounds for imposition of disciplinary sanctions
- 331. Disciplinary sanctions
- 332. Automatic suspension for mental incompetency or insanity
- 334. Voluntary surrender
- 335. Reports of disciplinary action or license suspension or surrender
- 336. Duty of physicians and hospitals to report
- 338. Medical and psychiatric exams
- 340. Statement of grounds of refusal or revocation of license

Sec. 08.64.170. License to practice medicine or osteopathy.

(a) A person may not practice medicine, podiatry, osteopathy, or acupuncture in the state unless the person is licensed under this chapter, except that

(1) a physician assistant may examine, diagnose or treat persons under the supervision, control, and responsibility of either a physician licensed under this chapter or a physician exempted from licensing under AS 08.64.370;

(2) a physician-trained mobile intensive care paramedic may render emergency lifesaving service;

(3) a person licensed under AS 08.36 may perform acupuncture in the regular practice of dentistry, subject to the regulations of the Board of Dental Examiners; and

(4) a person who is licensed or authorized under another chapter of this title may engage in a practice that is authorized under that chapter.

(b) *[Repealed, § 4 ch 101 SLA 1974.]*

(c) A chiropractor practicing in the state on May 16, 1972 is exempt from this section.

(d) A podiatrist practicing in the state on March 26, 1976 is exempt from this section, and shall be issued a license without examination if application is made within one year of March 26, 1976.

Sec. 08.64.180. Application for license. A person who desires to practice medicine, osteopathy or acupuncture in the state shall apply in writing to the department for a license.

Sec. 08.64.190. Contents of application. The application shall state the name, age, residence, the duration of residence, the time spent in medical or osteopathy study, the place, year and school in which degrees were granted, and other information the board considers necessary. The application shall be made under oath.

Sec. 08.64.200. Qualifications of physician applicants. (a) Except for foreign medical graduates as specified in AS 08.64.225, each physician applicant shall

(1) *[Repealed, § 19 ch 48 SLA 1983.]*

(2) submit a certificate of graduation from a legally chartered medical school accredited by the Association of American Medical Colleges and the Council on Medical Education of the American Medical Association;

(3) submit a certificate from a recognized hospital certifying that the applicant has satisfactorily performed the duties of resident physician or intern for a period of one year;

(4) not have a license to practice medicine in another state, province, or territory which is currently suspended or revoked for disciplinary reasons; and

(5) be a citizen of the United States or be lawfully admitted for permanent residence.

(b) The board shall determine whether each physician applicant has any disciplinary or other actions recorded in the nationwide disciplinary data bank of the Federation of State Medical Boards.

Sec. 08.64.205. Qualifications for osteopath applicants. Each osteopath applicant shall meet the qualifications prescribed in AS 08.64.200(a)(4) and (5) and shall

(1) submit a certificate of graduation from the legally chartered school of osteopathy approved by the board;

(2) submit a certificate from a hospital approved by the American Medical Association or the American Osteopathic Association which certifies that the osteopath has satisfactorily completed and performed the duties of intern or resident physician for one year;

(3) take the examination required by AS 08.64.210 or be certified to practice by the National Board of Examiners for Osteopathic Physicians and Surgeons.

Sec. 08.64.207. Qualifications for acupuncture applicants. Each acupuncture applicant shall meet all of the qualifications prescribed in AS 08.64.200 and shall meet those requirements of experience or education in the practice of acupuncture as may be required by the board.

Sec. 08.64.209. Qualifications for podiatry applicants. (a) Each applicant who desires to practice podiatry shall meet the qualifications prescribed in AS 08.64.200(a)(4) and shall

(1) submit a certificate of graduation from a legally chartered school of podiatry approved by the board;

(2) take the examination required by AS 08.64.210; the State Medical Board shall call to its aid a podiatrist of known ability who is licensed to practice podiatry to assist in the examination and licensure of applicants for a license to practice podiatry;

(3) meet other qualifications of experience or educational which the board may require.

(b) The provisions of AS 08.64.180—08.64.190, 08.64.220, and 08.64.230—08.64.380 relating to the practice of medicine or osteopathy apply to the application procedure, testing, and practice of podiatry, as appropriate.

Sec. 08.64.210. Examination required. (a) The applicant shall take examinations in subjects the board considers necessary, unless excused under provisions of AS 08.64.250.

(b) The deadline for submitting an exam application to the board shall be established by regulation.

Sec. 08.64.220. Contents of examination and grading. (a) The board shall offer a written examination sufficient to test the applicant's fitness to practice medicine or osteopathy.

(b) *[Repealed, § 27 ch 148 SLA 1970.]*

(c) The examinations, answers, and scores shall be preserved and filed.

Sec. 08.64.225. Foreign medical graduates. Applicants who are graduates of medical colleges not accredited by the American Medical Association or one of its agencies shall meet the requirements of AS 08.64.200(a)(3), (4) and (5) and must have passed an examination and be certified by the Education Council on Foreign Medical Graduates, or be licensed by examination in another state or territory of the United States or province of Canada.

Sec. 08.64.230. License granted. (a) If the physician applicant passes the examination and meets the requirements of AS 08.64.200, the board shall grant a license to the applicant to practice medicine in the state.

(b) If the osteopath applicant passes the examination and meets the requirements of AS 08.64.205, the board shall grant a license to the applicant to practice osteopathy in the state.

(c) Each license shall be signed by the secretary and president of the board, and have the seal of the board affixed to it.

Sec. 08.64.240. License refused. (a) The board may not grant a license if

(1) the applicant fails or cheats during the examination;

(2) the board determines that the applicant is professionally unfit to practice medicine or osteopathy in the state; or

(3) the applicant fails to comply with a requirement of this chapter.

(b) The board may refuse to grant a license to any applicant for the same reasons that it may impose disciplinary sanctions under AS 08.64.326.

Sec. 08.64.250. License by credentials. The board may waive the examination requirement and license by credentials if the physician or podiatry applicant meets the requirements of AS 08.64.200 or 08.64.209, submits proof of continued competence as required by regulation, pays the required fee and has

(1) an active license from a board of medical examiners established under the laws of a state or territory of the United States or a province of Canada issued after thorough examination; or

(2) passed an examination given by the National Board of Medical Examiners or the Federation of State Medical Boards of the United States if the applicant is a physician, or passed an examination given by the National Board of Podiatry Examiners if the applicant is a podiatrist.

Sec. 08.64.255. Interview required. All applicants for licensure must be interviewed in person by at least one member of the board before a license will be issued. The interview must be recorded. If the application is denied on the basis of the interview, the denial must be stated in writing with the reasons for it, and the record must be preserved.

Sec. 08.64.260. Re-examination. (a) If the applicant fails the examination, the applicant may, on the same application and payment of a reexamination fee, take another examination not less than six months nor more than two years after the date of the first examination. If the applicant fails a second examination, the applicant may, after a year or more of further study or training approved by the board, make a new application for licensure.

(b)—(d) *[Repealed, § 21 ch 87 SLA 1987.]*

Sec. 08.64.270. Temporary permits. (a) The board may issue a temporary permit to a physician applicant, osteopath applicant, or podiatry applicant who meets the requirements of AS 08.64.200, 08.64.205, or 08.64.209 and pays the required fee.

(b) A temporary permit issued under this section is valid for eight months or until the board meets to consider the application, whichever occurs first.

(c) A temporary permit issued under this section may be renewed at the board's discretion one time only.

Sec. 08.64.272. Residency and internship permits. (a) A person may not serve as a resident or intern without a permit issued under this section.

(b) For the limited purpose of residency or internship, the board may issue a temporary permit to an applicant without examination if the applicant meets the requirements of AS 08.64.200(a)(2) and applicable regulations of the board, pays the required fee, and has been accepted by an eligible institution in the state for the purpose of residency or internship.

(c) A permit issued under this section is valid for the period specified by the board, but not to exceed one year after the date of issue.

Sec. 08.64.275. Temporary permit for locum tenens practice. (a) A member of the board may grant a temporary permit to a physician or osteopath for the purpose of substituting for another physician or osteopath licensed in this state. The permit is valid for 120 consecutive days. If circumstances warrant, an extension of the permit may be granted by the board.

(b) A physician applying under (a) of this section shall pay the required fee and shall meet the requirements of AS 08.64.200. In addition, the physician shall submit evidence of holding a license to practice medicine in a state or territory of the United States or in a province of Canada.

(c) An osteopath applying under (a) of this section shall pay the required fee and shall meet the requirements of AS 08.64.205. In addition, the osteopath shall submit evidence of holding a license to practice in a state or territory of the United States or in a province of Canada.

(d) Within 10 days after the permit has been granted, the board member shall forward to the department a report of the issuance of the permit.

Sec. 08.64.312. Continuing education requirements. (a) The board shall promote a high degree of competence in the practice of medicine by requiring every physician licensed in the state to fulfill continuing education requirements.

(b) Before a license may be renewed the licensee shall submit evidence to the board that continuing education requirements prescribed by regulations adopted by the board have been met.

(c) The board may exempt a physician from the requirements of (b) of this section upon an application by the physician giving evidence satisfactory to the board that the physician is unable to comply with the requirements because of extenuating circumstances. However, no person may be exempted from more than 15 hours of continuing education in a five-year period.

Sec. 08.64.313. Inactive license. A licensee who does not practice in the state may hold an inactive license. A person who practices in the state, however infrequently, shall hold an active license.

Sec. 08.64.315. Fees. The department shall set fees under AS 08.01.065 for each of the following:

- (1) application
- (2) license by examination
- (3) license by endorsement or waiver of examination
- (4) temporary permit
- (5) locum tenens permit
- (6) license renewal, active
- (7) license renewal, inactive
- (8) license by reexamination.

Sec. 08.64.326. Grounds for imposition of disciplinary sanctions. (a) The board may impose a sanction if the board finds after a hearing that a licensee

(1) secured a license through deceit, fraud, or intentional misrepresentation;

(2) engaged in deceit, fraud, or intentional misrepresentation while providing professional services or engaging in professional activities;

(3) advertised professional services in a false or misleading manner;

(4) has been convicted, including conviction based on a guilty plea of plea of nolo contendere; of

(A) a felony or other crime if the felony or other crime is substantially related to the qualifications, functions, or duties of the licensee; or

(B) a crime involving the unlawful procurement, sale, prescription or dispensing of drugs;

(5) has procured, sold, prescribed or dispensed drugs in violation of a law, regardless of whether there has been a criminal action;

(6) intentionally or negligently permitted the performance of patient care by persons under the licensee's supervision that does not conform to minimum professional standards even if the patient was not injured;

(7) failed to comply with this chapter, a regulation adopted under this chapter, or an order of the board;

(8) has demonstrated

(A) professional incompetence, gross negligence or repeated negligent conduct;

(B) addiction to, severe dependency on, or habitual overuse of alcohol or other drugs which impairs the licensee's ability to practice safely;

(C) unfitness because of physical or mental disability;
 (9) engaged in unprofessional conduct or in lewd or immoral conduct in connection with the delivery of professional services to patients;

(10) has violated AS 18.16.010;

(11) has violated any code of ethics adopted by regulation by the board;

(12) has denied care or treatment to a patient or person seeking assistance from the physician if the only reason for the denial is the failure or refusal of the patient to agree to arbitrate as provided in AS 09.55.535(a); or

(13) has had a license or certificate to practice medicine in another state, territory of the United States or a province of Canada suspended or revoked unless the suspension or revocation was caused by the failure of the licensee to pay fees to that state, territory or province.

(b) In a case involving (a)(13) of this section, the final findings of fact, conclusions of law and order of the authority that suspended or revoked a license or certificate constitutes a prima facie case that the license or certificate was suspended or revoked and the grounds under which the suspension or revocation was granted.

Sec. 08.64.331. Disciplinary sanctions. (a) If the board finds that a licensee has committed an act set out in AS 08.64.326(a), the board may

- (1) permanently revoke a license to practice;
- (2) suspend a license for a determinate period of time;
- (3) censure a licensee;
- (4) issue a letter of reprimand;
- (5) place a licensee on probationary status and require the licensee to

(A) report regularly to the board on matters involving the basis of probation;

(B) limit practice to those areas prescribed;

(C) continue professional education until a satisfactory degree of skill has been attained in those areas determined by the board to need improvement;

(6) impose limitations or conditions on the practice of a licensee;

(7) impose a civil fine of not more than \$10,000; or

(8) impose one or more of the sanctions set out in (1)—(7) of this subsection.

(b) The board may end the probation of a licensee if it finds that the deficiencies which required this sanction have been remedied.

(c) The board may summarily suspend a license before final hearing or during the appeals process if the board finds that the licensee poses a clear and immediate danger to the public health and safety

if the licensee continues to practice. A person whose license is suspended under this section is entitled to a hearing by the board no later than seven days after the effective date of the order and the person may appeal the suspension after a hearing to a court of competent jurisdiction.

(d) The board may reinstate a license that has been suspended or revoked if the board finds after a hearing that the applicant is able to practice with reasonable skill and safety.

(e) The board may suspend a license upon receipt of a certified copy of evidence that a license to practice medicine in another state or territory of the United States or province of Canada has been suspended or revoked. The suspension remains in effect until a hearing can be held by the board.

(f) The board shall be consistent in the application of disciplinary sanctions. A significant departure from earlier decisions of the board involving similar situations must be explained in findings of fact or orders made by the board.

Sec. 08.64.332. Automatic suspension for mental incompetency or insanity. Notwithstanding AS 44.62, if a person holding a license to practice medicine or osteopathy under this chapter is adjudged mentally incompetent or insane by any final order or adjudication by a court of competent jurisdiction or by voluntary commitment to an institution for the treatment of mental illness, the person's license shall be suspended by the board. The suspension shall continue in effect until the court finds or adjudges that the person has been restored to reason or until a licensed psychiatrist approved by the board determines that the person has been restored to reason.

Sec. 08.64.334. Voluntary surrender. The board, at its discretion, may accept the voluntary surrender of a license. No license may be returned unless the board determines, under regulations established by it, that the licensee is competent to resume practice. However, no license may be returned to the licensee if the voluntary surrender resulted in the dropping or suspension of civil or criminal charges against the physician.

Sec. 08.64.335. Reports of disciplinary action or license suspension or surrender. The board shall promptly report to the Federation of State Medical Boards for inclusion in the nationwide disciplinary data bank license refusals under AS 08.64.240, actions taken by the board under AS 08.64.331, and license suspensions or surrenders under AS 08.64.332 or 08.64.334.

Sec. 08.64.336. Duty of physicians and hospitals to report.
 (a) A physician who professionally treats a person licensed to

practice medicine or osteopathy in this state for alcoholism or drug addiction, or for mental, emotional, or personality disorders, shall report it to the board if there is probable cause that the person may constitute a danger to the health and welfare of that person's patients or the public if that person continues in practice. The report shall state the name and address of the person and the condition found.

(b) A hospital that revokes, suspends, conditions, restricts, or refuses to grant hospital privileges to, or imposes a consultation requirement on, a person licensed to practice medicine or osteopathy in the state shall report to the board the name and address of the person and the reasons for the action within seven working days after the action is taken. A hospital shall also report to the board the name and address of a person licensed to practice medicine or osteopathy in the state if the person resigns hospital staff privileges while under investigation by the hospital or a committee of the hospital and the investigation could result in the revocation, suspension, conditioning, or restricting of, or the refusal to grant, hospital privileges, or in the imposition of a consultation requirement. A report is required under this subsection regardless of whether the person voluntarily agrees to the action taken by the hospital. A report is not required if the sole reason for the action is the person's failure to complete hospital records in a timely manner or to attend staff or committee meetings. In this subsection "consultation requirement" means a restriction placed on a person's existing hospital privileges requiring consultation with a designated physician or group of physicians in order to continue to exercise the hospital privileges.

(c) Upon receipt of a report under (a) or (b) of this section, the board shall investigate the matter and, upon finding that there is reasonable cause to believe that the person who is the subject of the report is a danger to the health or welfare of the public or to the person's patients, the board may appoint a committee of three qualified physicians to examine the person and report its findings to the board. Notwithstanding the provisions of this subsection, the board may summarily suspend a license under AS 08.64.331(c) before appointing an examining committee or before the committee makes or reports its findings.

(d) If the board finds that a person licensed to practice medicine or osteopathy is unable to continue in practice with reasonable safety to the person's patients or to the public, the board shall initiate action to suspend, revoke, limit, or condition the person's license to the extent necessary for the protection of the person's patients and the public.

(e) A physician, hospital, or hospital committee that in good faith submits a report under this section or participates in an investigation

or judicial proceeding related to a report submitted under this section is immune from civil or criminal liability for the submission or participation.

(f) A physician or hospital may not refuse to submit a report under this section or withhold from the board or its investigators evidence related to an investigation under this section on the grounds that the report or evidence

(1) concerns a matter that was disclosed in the course of a confidential physician-patient relationship or during a meeting of a hospital medical staff, governing body, or committee that was exempt from the public meeting requirements of AS 44.62.310; or

(2) is required to be kept confidential under AS 18.23.030.

Sec. 08.64.338. Medical and psychiatric exams. For the purposes of an investigation under this chapter, the board may order a person to whom it has issued a license or permit to submit to a medical or psychiatric examination by a physician or other practitioner of the healing arts appointed by the board. An examination shall be at the board's expense. An examination may include the required submission of biological specimens requested by the examining physician or practitioner.

Sec. 08.64.340. Statement of grounds of refusal or revocation of license. If the board refuses to issue a license or revokes a license, it shall file a brief and concise statement of the grounds and reasons for the action in the office of the secretary of the board and in the department. The statement, together with the written decision of the board, shall remain of record in the department.

ARTICLE 3. UNLAWFUL ACTS.

Section

360. Penalty for practicing without a license or in violation of chapter

Sec. 08.64.360. Penalty for practicing without a license or in violation of chapter. Except for a physician assistant, a physician-trained mobile intensive care paramedic under AS 08.64.170, or a person licensed or authorized under another chapter of this title who engages in practices for which that person is licensed or authorized under that chapter, a person practicing medicine or osteopathy in the state without a valid license or permit is guilty of a class A misdemeanor. Each day of illegal practice is a separate offense.

**ARTICLE 4.
MISCELLANEOUS PROVISIONS.**

Section

- 366. Liability for services rendered by a physician-trained mobile intensive care paramedic**
367. Prescription or administration of laetrile by physicians
369. Health care professionals to report certain injuries

Sec. 08.64.366. Liability for services rendered by a physician-trained mobile intensive care paramedic. An act or omission of a physician-trained mobile intensive care paramedic done or omitted in good faith while rendering emergency service to a person who is in need of immediate aid in order to avoid serious harm or loss of life does not impose any liability upon the physician-trained mobile intensive care paramedic, the supervising physician, a hospital, the officers, members of the staff, nurses, or other employees of a hospital or upon a federal, state, borough, city or other local governmental unit or upon other employees of a governmental unit; however, this section does not relieve a physician or a hospital of a duty otherwise imposed by law upon the physician or hospital for the designation of training of a physician-trained mobile intensive care paramedic or for the provision or maintenance of equipment to be used by the physician-trained mobile intensive care paramedic.

Sec. 08.64.367. Prescription or administration of laetrile by physicians. (a) A physician may not be subject to disciplinary action by the State Medical Board for prescribing or administering amygdalin (laetrile) to a patient under the physician's care who has requested the substance unless the State Medical Board in a hearing conducted under the Administrative Procedure Act (AS 44.62) has made a formal finding that the substance is harmful.

(b) A hospital or health facility may not interfere with the physician-patient relationship by restricting or forbidding the use of amygdalin (laetrile) when prescribed or administered by a physician and requested by a patient unless the substance as prescribed or administered by the physician is found to be harmful by the State Medical Board in a hearing conducted under the provisions of the Administrative Procedure Act (AS 44.62)

Sec. 08.64.369. Health care professional to report certain injuries. (a) A health care professional who initially treats or attends to a person with an injury described in (b) of this section shall make certain that an oral report of the injury is made promptly to the Department of Public Safety, a local law enforcement agency, or a village public safety officer. The health care professional shall make

certain that a written report of an injury described in (b)(1) or (2) of this section is submitted to the Department of Public Safety within three working days after the person is treated. The report shall be a form provided by the Department of Public Safety.

(b) The following injuries shall be reported under (a) of this section:

- (1) second or third degree burns to five percent or more of a patient's body;
- (2) a burn to a patient's upper respiratory tract or laryngeal edema due to the inhalation of super-heated air;
- (3) a bullet wound, powder burn, or other injury apparently caused by the discharge of a firearm;
- (4) an injury apparently caused by a knife, axe, or other sharp or pointed instrument, unless the injury was clearly accidental; and
- (5) an injury that is likely to cause the death of the patient, unless the injury was clearly accidental.

(c) A person who, in good faith, makes a report under this section, or who participates in judicial proceedings related to a report under this section, is immune from any civil or criminal liability that might otherwise be incurred as a result of making such a report or participating in the judicial proceedings.

(d) In this section, "health care professional" includes an emergency medical technician, health aide, physician, nurse, paramedic, and physician's assistant, but does not include a practitioner of religious healing.

**ARTICLE 5.
GENERAL PROVISIONS.**

Section

- 370. Persons not affected**
380. Definitions

Sec. 08.64.370. Persons not affected. This chapter does not apply to

(1) officers in the regular medical service of the armed services of the United States or the United States Public Health Service while in the discharge of their official duties;

(2) a physician or osteopath who is not a resident of this state, who is asked by a physician or osteopath licensed in this state to help in the diagnosis or treatment of a case;

(3) the practice of the religious tenets of a church;

(4) [Repealed, § 21 ch 87 SLA 1987.]

(5) a physician in the regular medical service of the United States Public Health Service or the armed services of the United States volunteering services without pay or other remuneration to a hospital, clinic, medical office, or other medical facility in the state;

**CHAPTER 40.
STATE MEDICAL BOARD****Articles**

1. Licensing (12 AAC 40.010—12 AAC 40.055)
2. Abortions (12 AAC 40.060—12 AAC 40.140)
3. Continuing Medical Education
(12 AAC 40.200—12 AAC 40.220)
4. Mobile Intensive Care Paramedics
(12 AAC 40.300—12 AAC 40.390)
5. Physician Assistants
(12 AAC 40.400—12 AAC 40.490)
6. General Provisions
(12 AAC 40.960—12 AAC 40.990)

**ARTICLE 1.
LICENSING****Section**

10. Application for license by credentials
15. Application for license by examination
20. License by examination
25. Lapsed physician licenses
35. Temporary permit application requirements
36. Locum tenens permit application requirements
38. Residency permit
40. Recognized hospital
50. Biographical data
55. Interview required

12 AAC 40.010. APPLICATION FOR LICENSE BY CREDENTIALS. (a) An applicant for licensure by credentials must file a complete application and be interviewed in accordance with 12 AAC 40.055 and AS 08.64.255 before the board will consider issuance of a license.

(b) A complete application must include the following documents requested by the applicant but sent directly to the division office:

(1) evidence satisfactory to the board that applicant has passed an appropriate examination as described in (c) of this section;

(2) a notarized copy of a medical, osteopathy, or podiatry school diploma;

(3) a notarized copy of an internship or residency certificate;

(4) verification of licensure from all states where the applicant held a license;

(5) a sworn statement listing all hospitals at which the applicant has had privileges within the past five years and original letters of

reference from each of those hospitals describing the kind of experience received and the performance of the applicant;

(6) clearance from the federal Drug Enforcement Administration (DEA);

(7) clearance from the Federation of State Medical Boards;

(8) a Physician Profile from the American Medical Association (AMA), if applicable; and

(9) all required application and licensing fees.

(c) The evidence that an applicant has passed an appropriate examination as by (b)(1) of this section must be either

(1) verification of an examination in the medical and basic science subjects as a prerequisite to licensure in a State or Territory of the U.S., District of Columbia, Puerto Rico, or a Province or Territory of Canada; or

(2) an official transcript from

(A) the Federation of State Medical Boards documenting successful passage of the FLEX exam; or

(B) the National Board of Medical Examiners documenting successful passage of the NBME exam; or

(C) the National Board of Examiners of Osteopathic Physicians and Surgeons documenting successful passage of the NBEOPS exam; or

(D) the National Board of Podiatry Examiners documenting successful passage of the NBPE exam.

(d) Applicants are responsible for requesting transcripts and paying any fees associated with having transcripts sent directly to the board.

12 AAC 40.015. APPLICATION FOR LICENSE BY EXAMINATION. (a) An applicant for license by examination shall submit a written application to the department not less than 120 days before the examination date.

(b) A complete application must be on file with the department not less than 120 days before the examination date and must include all supporting documents and meet the requirements of AS 08.64.200 or AS 08.64.225.

(c) After passing the written examination an applicant must be interviewed in accordance with 12 AAC 40.055 and AS 08.64.255 before the board will consider issuance of a license.

12 AAC 40.020. LICENSE BY EXAMINATION. (a) The written examination administered twice yearly in Alaska will be the most current version of the Federation of State Medical Boards FLEX examination.

(b) The minimum passing grade for each part of the FLEX exam is a scale score of 75.

(c) Both parts of the FLEX exam may be taken at one sitting or each may be taken at separate times. If the parts are taken separately, they must be taken in sequence. An applicant will not be permitted to sit for Part II until Part I is successfully passed.

(d) An applicant who takes both parts of the FLEX exam in a single sitting and fails only one part will be required to retake only the part failed.

(e) Except as provided in (f) of this section, an applicant may retake the FLEX exam or any part of the FLEX exam, as often as desired.

(f) If an applicant does not pass both parts of the FLEX exam within five years after first applying, the applicant must pursue and complete a supervised course of study acceptable to the board before permission to retake the exam will be given. The applicant must then retake and pass both parts, even if one of the two parts has been previously passed.

(g) No credit will be given for passing any part of the former three part version of the FLEX exam administered before May 18, 1985.

(h) If an applicant for licensure in this state has passed either part of the two part FLEX exam in another state during the five years before application in this state, the applicant need only take the part not passed as long as both parts are passed within five years.

12 AAC 40.025. LAPSED PHYSICIAN LICENSES. (a) A physician license which has been lapsed for between one and five years will, in the board's discretion be reissued, if the applicant submits

(1) a new and complete application as required by 12 AAC 40.010, documenting compliance with AS 08.64.200 and 08.64.250;

(2) documentation that the continuing medical education requirements of 12 AAC 40.200—12 AAC 40.220 have been met for the entire period the license has been lapsed; and

(3) the fees required by 12 AAC 02.250.

(b) A physician whose license has been lapsed for one year or more but who has been licensed and actively practicing in another state or country may apply for a license by credentials under 12 AAC 40.010 and pay the fees required in 12 AAC 02.250.

(c) A physician license which has been lapsed for less than one year will be reinstated by the board if clearance is received from the Federation of State Medical Boards and if the applicant submits

(1) documentation that all continuing medical education requirements of 12 AAC 40.200—12 AAC 40.220 have been met; and

(2) the penalty for reinstatement fee required in 12 AAC 02.105 and all renewal fees required in 12 AAC 02.250.

12 AAC 40.035. TEMPORARY PERMIT APPLICATION REQUIREMENTS. (a) A member of the board, will, in a member's discretion, issue a temporary physician permit to an applicant who

- (1) meets the requirements of AS 08.64.270; and
- (2) has a complete application on file with the division before arranging for an interview with the member of the board; and
- (3) is interviewed in accordance with 12 AAC 40.055 and AS 08.64.255.

(b) A complete application must include all of the documents required in 12 AAC 40.010 except that

- (1) letters of reference are required from only the last two hospitals at which the applicant has had privileges;
- (2) the AMA physician profile needs only to have been requested; and
- (3) the DEA clearance needs only to have been requested.

(c) After an application for a temporary permit has been received, the division will request biographical data clearances from the Federation of State Medical Boards and the federal Drug Enforcement Agency. The clearance must be on file with the division before the permit is issued.

12 AAC 40.036. LOCUM TENENS PERMIT APPLICATION REQUIREMENTS. (a) A member of the board, will, in the member's discretion, issue a locum tenens permit to an applicant who

- (1) meets the requirements of AS 08.64.275;
- (2) has a complete application on file with the division prior to arranging for an interview with a member of the board; and
- (3) is interviewed in accordance with 12 AAC 40.055 and AS 08.64.255.

(b) A complete application must include

- (1) a notarized copy of a medical school diploma;
- (2) a notarized copy of an internship or residency certificate;
- (3) a verification of active licensure from at least one other state, requested by the applicant but sent directly to the division; verification from all other states where the applicant has held or currently holds licenses must have been requested by the applicant and directed to the division for inclusion in the applicant's file; and
- (4) all required application fees for a locum tenens permit.

(c) Once an application for a locum tenens permit has been received, the division will request Federation of State Medical Boards clearance, which must be on file with the division before the permit is issued.

12 AAC 40.038. RESIDENCY PERMIT. (a) A member of the board will, in the member's discretion, issue a residency permit to an applicant who

- (1) meets the requirements of AS 08.64.272;
 - (2) is interviewed in accordance with 12 AAC 40.055 and AS 08.64.255; and
 - (3) provides a complete application at the interview.
- (b) A complete application must include
- (1) a letter from the Alaska institution accepting the applicant as a resident and accepting responsibility for the applicant's training;
 - (2) a letter from the training institution stating that the applicant is in good standing and that the Alaska program is a part of the residency or internship program;
 - (3) a certified copy of the applicant's medical school diploma as required in AS 08.64.200(2); and
 - (4) payment of a \$30 application fee and a \$20 residency permit fee.
- (c) A residency permit is valid only for the duration of the residency at the Alaska institution, not to exceed one year.

12 AAC 40.040. RECOGNIZED HOSPITAL. For the purpose of AS 08.64.200(3) a recognized hospital is one which has been approved for internship or residency training by the Council on Medical Education of the American Medical Association or the Canadian Medical Association.

12 AAC 40.050. BIOGRAPHICAL DATA. No application for licensure by credentials or examination will be considered complete until the applicant has requested the following documents and they are on file in the division office:

- (1) a physician profile from the American Medical Association, if applicable;
- (2) clearance from the United States Department of Justice, Bureau of Narcotics and Dangerous Drugs;
- (3) clearance from the Federation of State Medical Boards regarding previous or pending disciplinary actions against the applicant by another jurisdiction.

12 AAC 40.055. INTERVIEW REQUIRED. (a) All applicants for a physician license or permit shall be interviewed in person by a board member as required by AS 08.64.255.

(b) If the interviewing board member determines that the interview is not adequate to allow license or permit approval without consultation with the board, an in-person interview before a quorum of the board is required.

**ARTICLE 2.
ABORTIONS****Section**

- 60. Termination of pregnancy
- 70. Informed consent
- 80. Medical procedures
- 90. Evaluation
- 100. Consultation requirements
- 110. Abortion procedures
- 120. Standards for hospitals and facilities
- 130. Records
- 140. Limitation

12 AAC 40.060. TERMINATION OF PREGNANCY. Termination of pregnancy must be requested by the pregnant woman, unless she has been adjudged mentally incompetent or is unmarried and under 18 years of age, in which case the request must be made by her parent or guardian.

12 AAC 40.070. INFORMED CONSENT. Unless otherwise provided in 12 AAC 40.060, a written informed consent shall be obtained from the patient or from any other person whose consent is required before termination of a pregnancy. Such written informed consent shall be on the patient's chart. The patient and other persons whose consent is required shall be advised of the medical implications and the possible emotional and physical sequelae of the procedure.

12 AAC 40.080. MEDICAL PROCEDURES. The patient shall be examined by a physician licensed in Alaska, and a written record of the patient's physical and emotional health shall be prepared before performing an abortion procedure as set out in 12 AAC 40.110.

12 AAC 40.090. EVALUATION. The attending physician shall make an evaluation of the patient and an estimation of the duration of gestation based upon the patient's history, examination and test results. This information shall be recorded on the patient's chart.

12 AAC 40.100. CONSULTATION REQUIREMENTS. Abortions interrupting a pregnancy up to and including the twelfth week of gestation may be performed without consultation. Abortions performed after the twelfth week of gestation shall be preceded by consultation with another physician. The consultation shall include an opinion as to the preferred method of termination of pregnancy.

12 AAC 40.110. ABORTION PROCEDURES. During the second or third trimester of a pregnancy, acceptable procedures include dilation and curettage, suction aspiration of the uterus, injection of pharmacological agents, hysterectomy and hysterotomy. The exact procedure to be used will depend upon the patient's total health, age, associated disease and pathology, and anomalies such as skeletal defects and other medical indications.

12 AAC 40.120. STANDARDS FOR HOSPITALS AND FACILITIES. (a) During the second or third trimester of a pregnancy, abortions shall be performed under sterile conditions. A bed and a registered nurse shall be available for a minimum recovery period of one-half hour. A registered nurse shall be present during the procedure.

(b) During the second or third trimester of a pregnancy, blood, blood derivatives, blood substitutes or plasma expanders shall be immediately available when an abortion is performed, and an operating room appropriately staffed and equipped for major surgery in accordance with regulations adopted under AS 18.20.060 shall be immediately available.

12 AAC 40.130. RECORDS. During the second or third trimester of a pregnancy, the attending physician shall record a medical history, findings of the physical examination, operative report of the abortion procedure and pathology report as part of the clinical record to be maintained by the hospital or facility. The physician and hospital or facility shall treat the patient's identity and medical record as confidential information.

12 AAC 40.140. LIMITATION. A fetus which has not developed beyond 150 days after the first day of the last menstrual period may be considered nonviable for purposes of AS 11.15.060(a). In the performance of an abortion after that date, the physician shall be guided by a reasonable judgment as to whether the fetus is viable in fact.

**ARTICLE 3.
CONTINUING MEDICAL EDUCATION****Section**

- 200. General requirements
- 210. Credit hours
- 220. Certification of compliance

12 AAC 40.200. GENERAL REQUIREMENTS. (a) A physician seeking renewal of a license on or after January 1, 1986 shall obtain an average of 17 credit hours of continuing medical education during each year of the previous license period.

(b) If a licensee fails to meet continuing medical education requirements due to illness or other extenuating circumstances, the board will, in its discretion, grant an extension of time in compliance with AS 08.64.312(c). The board will consider each case on an individual basis.

12 AAC 40.210. CREDIT HOURS. (a) Except as provided in (b) of this section, a licensee may meet the continuing medical education requirements set out in 12 AAC 40.200(a) only by obtaining credit hours in a Category I continuing medical education program accredited by the American Medical Association.

(b) The board will accept the following as the equivalent of the credit hours required under 12 AAC 40.200(a):

(1) a current physician's recognition award from the American Medical Association, American Podiatry Association, American Osteopathy Association, or a recognized subspecialty board; or

(2) a current recertification by a specialty board recognized by the American Medical Association.

12 AAC 40.220. CERTIFICATION OF COMPLIANCE. (a) A licensee shall submit, upon a form supplied by the board, a sworn affidavit of compliance with the continuing medical education requirement at the time the licensee applies for license renewal.

(b) The board will, in its discretion, require a licensee to submit additional evidence of compliance with the continuing medical education requirement. The licensee shall maintain evidence of compliance.

ARTICLE 4.

MOBILE INTENSIVE CARE PARAMEDICS

Section

- 300. Application for license
- 310. Qualification for license
- 315. Sponsorship
- 320. Approved curriculum
- 325. Internship requirements
- 330. Persons currently practicing as mobile intensive care paramedics
- 340. License issuance and expiration
- 350. Renewal of license
- 352. Lapsed paramedic licenses
- 355. Temporary permits
- 356. Provisional license
- 360. Grounds for suspension, revocation or refusal to issue a license

370. Scope of authorized activities

380. Prohibited acts

390. Identification

12 AAC 40.300. APPLICATION FOR LICENSE. (a) An applicant for a license as a mobile intensive care paramedic shall apply in writing to the board.

(b) The application will be provided by the board and must contain the name, age, mailing and geographical address (if different), the time spent in study, the place, year and school from which the degrees or certificates were granted, evidence that the applicant meets the requirements of 12 AAC 40.310, and any other information the board considers necessary.

(c) The application must be made under oath before a person empowered by AS 09.65.010 to administer oaths and must be signed by the sponsoring physician.

12 AAC 40.310. QUALIFICATION FOR LICENSE. An applicant for license as a mobile intensive care paramedic must

(1) be 19 years of age or older;

(2) be a high school graduate;

(3) be currently certified as an emergency medical technician by the National Registry of Emergency Medical Technicians, or the Alaska Department of Health and Social Services;

(4) at all times, be under the supervision of a physician sponsor approved by the board, as required under 12 AAC 40.315;

(5) have successfully completed an approved curriculum under 12 AAC 40.320;

(6) have satisfactorily completed a six-month internship which meets the requirements of 12 AAC 40.325 following the successful completion of a board-approved curriculum;

(7) pass the written and practical examination for emergency medical technician-paramedic administered by the National Registry of Emergency Medical Technicians;

(8) submit a nonrefundable license application fee required by 12 AAC 02.250; and

(9) not be currently under suspension or revocation as a mobile intensive care paramedic, the subject of an unresolved investigation, complaint review procedure, or disciplinary proceeding undertaken by a certifying or licensing agency in another state.

12 AAC 40.315 SPONSORSHIP. (a) A person licensed as a mobile intensive care paramedic shall immediately report to the board, in writing, any change of sponsorship.

(b) A change in sponsorship automatically suspends a mobile intensive care paramedic's license to practice until a new physician

sponsor is approved by the board. A licensee must have a board-approved physician sponsor at all times.

12 AAC 40.320. APPROVED CURRICULUM. (a) The approved curriculum for license as a mobile intensive care paramedic is the U.S. Department of Transportation **National Training Course Emergency Medical Technician Paramedic**, in effect at the time of training.

(b) The training program must be under the direction of a physician licensed in the state where the training takes place.

12 AAC 40.325. INTERNSHIP REQUIREMENTS. An internship for a mobile intensive care paramedic must meet the following requirements:

(1) all procedures performed by an intern must be under the direct supervision of a physician sponsor or another physician, physician assistant, registered nurse, or mobile intensive care paramedic, licensed or certified in the state where the internship takes place, who has been designated the responsibility of supervision by the physician sponsor; and

(2) the successful completion of the internship must be verified, on a form approved by the board, by the physician sponsor, attesting that the mobile intensive care paramedic intern is capable of performing the activities listed in 12 AAC 40.370(a) including any other emergency procedures authorized by the physician sponsor under 12 AAC 40.370(a)(8); and

(3) verification from the supervising physician of the successful completion of 20 twenty-four hour shifts, or the equivalent number of hours, completed at a location approved in advance by the board.

12 AAC 40.330. PERSONS CURRENTLY PRACTICING AS MOBILE INTENSIVE CARE PARAMEDICS. A mobile intensive care paramedic practicing in this state under the supervision of a board-approved sponsor physician upon January 13, 1980, will be issued a license without examination if application is made within 180 days after January 13, 1980.

12 AAC 40.340. LICENSE ISSUANCE AND EXPIRATION. Upon documentation of successful completion of the requirements of this chapter, a license will be issued by the department to an applicant to practice as a mobile intensive care paramedic. A license expires biennially on a date set by the department. A license must be renewed under 12 AAC 40.350.

12 AAC 40.350. RENEWAL OF LICENSE. (a) Upon receipt of written application by a licensee, the board will renew the license for two years if

(1) The licensee submits satisfactory evidence of completion of continuing medical education consisting of not less than 30 classroom hours and 30 clinical hours for each year he has practiced as a licensed mobile intensive care paramedic;

(2) the licensee submits to the board a written recommendation as to his fitness to practice as a mobile intensive care paramedic made by the applicant's sponsor physician; and

(3) payment of the nonrefundable license renewal fee required by 12 AAC 02.250 is received.

(b) When a license cannot be renewed under (a) of this section, the licensee must resubmit an initial application under 12 AAC 40.300—12 AAC 30.310.

(c) The board will, in its discretion, exempt a mobile intensive care paramedic from the requirements of (a)(1) of this section upon application giving evidence satisfactory to the board that he or she has been unable to comply with the requirements because of extenuating circumstances. No person will be exempted from more than 60 hours of continuing in a four-year period.

12 AAC 40.352. LAPSED PARAMEDIC LICENSES. (a) A mobile intensive care paramedic license which has been lapsed for between one and five years will, in the board's discretion, be reissued, if the applicant submits

(1) a new and complete application as required by 12 AAC 40.300, documenting compliance with 12 AAC 40.310;

(2) documentation that the continuing medical education requirements of 12 AAC 40.350(a)(1) have been met for the entire period the license has been lapsed; and

(3) the fees required by 12 AAC 02.250.

(b) A mobile intensive care paramedic whose license has been lapsed for one year or more but who has been licensed and actively practicing in another state or country may apply for a provisional license under 12 AAC 40.356 and pay the fees required by 12 AAC 02.250.

(c) A mobile intensive care paramedic license which has been lapsed for less than one year will be reinstated by the board if the applicant submits

(1) documentation that all continuing medical education requirements of 12 AAC 40.350 have been met; and

(2) the penalty for reinstatement fee required by 12 AAC 02.105(6) and all renewal fees required by 12 AAC 02.250.

12 AAC 40.355. TEMPORARY PERMITS. (a) A member of the board may issue a temporary mobile intensive care paramedic permit to an applicant who

- (1) meets the requirements of 12 AAC 40.64.310; and
- (2) submits verification of sponsorship by a physician sponsor.
- (b) A temporary permit is valid for eight months or until the board meets and considers the application, whichever occurs first.
- (c) The board will, in its discretion, renew a temporary permit for good cause, one time only.
- (d) A temporary permit will be withdrawn by the board if the sponsorship of the physician sponsor is withdrawn.
- (e) "Temporary Permit" means a permit issued by a member of the board to an individual who has applied for licensure, has fulfilled the requirements set out in 12 AAC 40.310 and is awaiting the next meeting of the board for consideration of the application.

12 AAC 40.356. PROVISIONAL LICENSE. (a) A provisional license will, in the board's discretion, be issued to an applicant who meets the requirements of (b) of this section.

(b) An applicant for a provisional licensure as a mobile intensive care paramedic must

- (1) be 19 years of age or older;
- (2) be a high school graduate;
- (3) have successfully completed an approved curriculum under 12 AAC 40.320 which included didactic, clinical, and field training;
- (4) be currently certified, or licensed, as a paramedic in another state;
- (5) not be currently under suspension or revocation as a mobile intensive care paramedic, the subject of an unresolved investigation, complaint review procedure, or disciplinary proceeding undertaken by a certifying or licensing agency in another state; and
- (6) submit written verification from the National Registry of Emergency Medical Technicians that the applicant is in the process of complying with 12 AAC 40.310(7).

(c) An application for a provisional license must include written verification, on a form approved by the department, from the applicant's previous physician sponsor, attesting that the applicant is capable of performing the activities listed in 12 AAC 40.370(a) including any other specific emergency procedures authorized by the supervising physician sponsor.

(d) The board will, in its discretion, require the applicant to provide any additional documentation necessary to verify the education or experience of the applicant.

(e) A provisional license is valid for eight months or until the board meets and considers the application, whichever occurs first.

(f) The board will, in its discretion, renew a provisional license one time only at the request of the applicant's physician sponsor.

(g) The board will revoke a provisional license if the physician sponsor withdraws sponsorship, or if the board is notified that the provisional licensee has failed the examination for licensure.

12 AAC 40.360. GROUNDS FOR SUSPENSION, REVOCATION OR REFUSAL TO ISSUE A LICENSE. The board, after compliance with the Administrative Procedure Act (AS 44.62), will, in its discretion, revoke, suspend, or refuse to issue a license for

- (1) fraud or deceit in obtaining a license required by this chapter;
- (2) habitual abuse of alcoholic beverages or depressants, or illegal use of hallucinogenic or stimulant drugs as defined by AS 17.12.150(3) or the use of narcotic drugs as defined by AS 17.10.230(1);
- (3) violation of the Controlled Substances Act (PL 91-513; 84 Stat. 1242) or any other federal law pertaining to medical practice and drugs;
- (4) gross misconduct by a licensee in the performance of his or her duties as a mobile intensive care paramedic which tends to endanger life or limb;
- (5) practice beyond the scope authorized by the sponsor physician.

12 AAC 40.370. SCOPE OF AUTHORIZED ACTIVITIES.

(a) A licensed mobile intensive care paramedic, when under the supervision of a sponsor physician, may perform the activities listed in this subsection. The direct supervision of these activities may be delegated when caring for a patient in a hospital under the direct supervision of a physician, or at the scene of a medical emergency when voice contact is monitored by a physician and direct communication is maintained, on the order of the physician, or when under the specific standing order of a physician. The activities are

- (1) performing cardiopulmonary resuscitation and defibrillation;
- (2) initiating and maintaining intravenous routes using approved intravenous techniques and solutions;
- (3) performing pulmonary ventilation by approved methods;
- (4) performing gastric suction by intubation;
- (5) obtaining blood for laboratory analysis;
- (6) applying rotating tourniquets;
- (7) administering parenterally, orally, or topically any approved agents or solutions;
- (8) performing other emergency procedures authorized by a supervising physician.

(b) A person enrolled in a mobile intensive care paramedic training program may perform the activities set out in (a) of this section insofar as:

- (1) the activities are required as part of the training program;
 - (2) the activities which take place in a hospital are supervised by a physician; and
 - (3) the activities which take place outside a hospital are supervised by a licensed mobile intensive care paramedic.
- (c) A person who is completing the internship required by 12 AAC 40.310(7) may perform the activities in (a) of this section for no more than six months.

12 AAC 40.380. PROHIBITED ACTS. No person may represent himself or herself as a paramedic, mobile intensive care paramedic, or emergency medical technician-paramedic unless he or she is licensed as a mobile intensive care paramedic under this chapter.

12 AAC 40.390. IDENTIFICATION. While performing the duties of a mobile intensive care paramedic, the licensee shall display over the right breast pocket of the uniform the identifying insignia prescribed by the department.

ARTICLE 5. PHYSICIAN ASSISTANTS

Section

- 400. Physician assistant registration
- 405. Temporary registration
- 406. Locum tenens authorization to practice
- 408. Authorization to practice as a physician assistant
- 410. Collaborative relationship
- 430. Performance and assessment of practice
- 440. Student physician assistant permit
- 445. Graduate physician assistant registration
- 447. Authorization to practice as a graduate physician assistant
- 450. Prescriptive authority
- 460. Identification
- 470. Renewal of a physician assistant registration
- 475. Lapsed physician assistant registration
- 480. Exemptions
- 490. Grounds for suspension, revocation or denial of registration

12 AAC 40.400. PHYSICIAN ASSISTANT REGISTRATION.
(a) A person who desires to undertake medical diagnosis and treatment or the practice of medicine in AS 08.64.380(7) as a physician

assistant shall

- (1) apply for permanent renewable registration on a form provided by the department;
 - (2) pay the appropriate fees established in 12 AAC 02.250; and
 - (3) be approved by the board.
- (b) The application must contain documented evidence of
- (1) graduation from a physician assistant program accredited by the American Medical Association Committee on Allied Health Education and Accreditation;
 - (2) a passing score on the National Board of Medical Examiner's Certifying Examination for Primary Care Physician Assistants; and
 - (3) a current certification issued by the National Commission on Certification of Physician Assistants (NCCPA); and
 - (4) compliance with continuing medical education standards established by the National Commission on Certification of Physician Assistants.
- (c) A physician assistant must be registered under this section at the time the board issued an authorization to practice in this state.

12 AAC 40.405. TEMPORARY REGISTRATION. (a) A member or designee of the board may approve a temporary physician assistant registration of an applicant who meets the requirements of 12 AAC 40.400 and 12 AAC 40.408 and pays the fee set out in 12 AAC 02.250.

(b) Temporary registration is valid for eight months or until the board meets and considers the application for permanent renewable registration, whichever occurs first.

(c) The board will, in its discretion, renew a temporary registration once only, based on good cause.

(d) An applicant who has been denied authorization to practice by the board under 12 AAC 40.408 is not entitled to temporary registration or to renew a temporary registration.

12 AAC 40.406. LOCUM TENENS AUTHORIZATION TO PRACTICE. (a) A member or designee of the board may issue a locum tenens authorization to practice to a physician assistant for the purpose of temporarily substituting for another licensed or authorized health care provider, if the applicant

- (1) applies on a form provided by the department;
- (2) pays the fee established in 12 AAC 02.250;
- (3) is a physician assistant registered under 12 AAC 40.400 or 12 AAC 40.405;

(4) documents an established collaborative relationship, under 12 AAC 40.410 (a-d) and 12 AAC 40.980, with the physician who holds the collaborative relationship with the absent physician assistant; and

(5) has the application and collaborative relationship approved by a member or designee of the board.

(b) A locum tenens authorization to practice is valid for 45 days and may be extended by a member or designee of the board for another 45 days only.

(c) A physician assistant seeking a locum tenens authorization to practice in a location other than the one in which the collaborating physician practices must submit documented evidence to the authorizing board member or designee that previous experience as a physician assistant is sufficient to meet the requirements of the location assignment.

12 AAC 40.408. AUTHORIZATION TO PRACTICE AS A PHYSICIAN ASSISTANT. (a) Unless authorized under 12 AAC 40.406, before a person can practice in this state as a physician assistant the person must

(1) apply on the current form provided by the department;

(2) pay the collaborative relationship fee established in 12 AAC 02.250;

(3) hold permanent renewable physician assistant registration or temporary registration issued under this chapter;

(4) submit documented evidence of an established collaborative relationship under 12 AAC 40.410 and 12 AAC 40.980;

(5) submit a list of all other collaborative relationships established for that physician assistant; and

(6) be approved by a member or designee of the board under (b) of this section.

(b) A temporary authorization to practice may be issued by a member or designee of the board which is valid for eight months or until the board meets to consider the authorization to practice, whichever occurs first.

(c) A temporary authorization to practice issued under this section to a physician assistant practicing in a remote location, as defined in 12 AAC 40.410(g), expires when the requirements of 12 AAC 40.410 and 12 AAC 40.980 are met.

12 AAC 40.410. COLLABORATIVE RELATIONSHIP. (a) A registered physician assistant may not practice without at least one collaborative relationship established under this chapter.

(b) Documented evidence of an established collaborative relationship consists of the plan of collaboration approved by the board under 12 AAC 40.980.

(c) A person authorized to practice as a registered physician assistant shall immediately report to the board, in writing, any change in his or her collaborative relationship.

(d) A change in a collaborative relationship automatically suspends a registered physician assistant's authority to practice under that collaborative relationship.

(e) The first time a physician assistant practices in a remote location, the physician assistant shall work 160 hours in direct patient care under the direct and immediate supervision of the collaborating physician or alternate collaborating physician within 90 days of starting practice in the remote location. The first 40 hours must be completed before the physician assistant begins practice in the remote location.

(f) A physician assistant who practices in a remote location and who has a change of collaborative physician must work 40 hours under the direct and immediate supervision of the new collaborative physician within 60 days of establishing the new collaborative relationship.

(g) In this section, "remote location" means a location in which a physician assistant practices that is 30 or more miles by road from the collaborating physician's primary office.

12 AAC 40.430. PERFORMANCE AND ASSESSMENT OF PRACTICE. (a) A person may perform medical diagnosis and treatment as a physician assistant only if registered by the board and authorized to practice under 12 AAC 40.408 and only within the scope of practice of the collaborating physician.

(b) A periodic method of assessment of the quality of practice must be established by the collaborating physician before an applicant is granted authorization to practice.

(c) Records of assessment must be maintained by the collaborating physician and will, at the board's discretion, be audited.

(d) In this section, "periodic method of assessment" means evaluation of medical care and clinic management, accomplished through at least two days each quarter of direct and personal contact at either the physician's or physician assistant's site of work and through at least monthly telephone or radio review of patient care and review of health care records.

12 AAC 40.440. STUDENT PHYSICIAN ASSISTANT PERMIT. (a) To apply for a permit to practice as a student physician assistant a person shall

(1) apply to the board on a form provided by the department;

(2) pay the fee established in 12 AAC 02.250;

(3) be enrolled in a physician assistant program accredited by the American Medical Association Committee on Allied Health

Education and Accreditation and establish, to the satisfaction of the board, that the student physician assistant will, upon graduation, meet requirements for registration established in 12 AAC 40.400;

(4) when authorized, shall display a nameplate designating that person as a "student physician assistant."

(b) A student physician assistant must be provided with continuous and on-site supervision by a registered physician assistant authorized to practice under 12 AAC 40.408 or a physician licensed in this state.

12 AAC 40.445. GRADUATE PHYSICIAN ASSISTANT REGISTRATION. (a) An applicant for registration to practice as a graduate physician assistant shall submit

(1) a complete application to the board on a form provided by the department;

(2) the fees established in 12 AAC 02.250;

(3) evidence of having graduated from a physician assistant program accredited by the American Medical Association Committee on Allied Health Education and Accreditation; and

(4) evidence of having been accepted to take the next entry level National Board of Medical Examiner's Certifying Examination for Primary Care Physician Assistants for initial certification.

(b) A graduate physician assistant registration is valid until the board receives notice that the applicant failed to take or failed to pass the NCCPA certifying examination under (a) of this section or until the first board meeting after the results of the examination are received by the board, whichever occurs first.

(c) The board will, in its discretion, reissue a graduate physician assistant registration, only in cases where the registrant was prevented from taking a scheduled examination.

(d) A registered graduate physician assistant must be authorized to practice under 12 AAC 40.447 and be provided with continuous on-site supervision by a registered physician assistant authorized to practice under 12 AAC 40.408 or a physician licensed in this state.

12 AAC 40.447. AUTHORIZATION TO PRACTICE AS A GRADUATE PHYSICIAN ASSISTANT. (a) Before a person can practice as a graduate physician assistant the person shall

(1) apply on the form provided by the department;

(2) pay the collaborative relationship fee established in 12 AAC 02.250;

(3) hold graduate physician assistant registration issued under 12 AAC 40.445;

(4) submit documented evidence of an established collaborative relationship under 12 AAC 40.410 and 12 AAC 40.980; and

(5) be approved by a member or designee of the board.

(b) When registered and authorized to practice, the registrant shall display a nameplate designating that person as a "graduate physician assistant."

12 AAC 40.450. PRESCRIPTIVE AUTHORITY. (a) The board will transmit to the Alaska Board of Pharmacy a list of all physician assistants with prescriptive authority. The list will include

(1) the name of the physician assistant;

(2) the name of the collaborating physicians; and

(5) any limitation on prescriptive authority in addition to the limitations set out in (b) and (c) of this section.

(b) A physician assistant may not prescribe Class I or II controlled substances.

(c) Prescriptive authority for Class III, IV and V controlled substances will be limited to that of the collaborative physician.

(d) A prescription written and signed by a registered physician assistant must include the collaborating physician's printed name and Drug Enforcement Administration (D.E.A.) number.

(e) The board will notify the Alaska Board of Pharmacy within 24 hours of a termination or change in a registered physician assistant's prescriptive authority.

(f) Termination of a collaborate relationship terminates a physician assistant's prescriptive authority under that relationship.

12 AAC 40.460. IDENTIFICATION. (a) A registered physician assistant authorized to practice shall conspicuously display on his or her clothing a nameplate identifying the physician assistant as a "Physician Assistant-Certified (PA-C)" and shall display at his or her customary place of employment

(1) a current state registration; and

(2) a sign of at least five by eight inches informing the public that documents showing the registered physician assistant's education and a copy of the board-approved plan of collaboration are available for inspection.

12 AAC 40.470. RENEWAL OF A PHYSICIAN ASSISTANT REGISTRATION. (a) A physician assistant registration must be renewed biennially on the date set by the department.

(b) An application for renewal must be made on the form provided by the department and must include

(1) payment of the renewal fee established in 12 AAC 02.250;

(2) documented evidence that the applicant has met the continuing medical education and recertification requirements of the NCCPA, including the NCCPA recertification examination, and is currently certified by NCCPA;

(3) verification on a form provided by the department of each authorization to practice issued under 12 AAC 40.408 under which the physician assistant is practicing.

12 AAC 40.475. LAPSED PHYSICIAN ASSISTANT REGISTRATION. (a) A physician assistant registration which has been lapsed between one and five years will, in the board's discretion, be reissued, if the applicant submits

(1) a new and complete application as required by 12 AAC 40.400;

(2) documentation that the continuing medical education requirements of 12 AAC 40.470 have been met for the entire period the registration has been lapsed; and

(3) the fees required by 12 AAC 02.250.

(b) a physician assistant registration which has been lapsed for less than one year will be reinstated by the board if the applicant submits

(1) documentation that all continuing medical education requirements of 12 AAC 40.470 have been met; and

(2) the penalty for reinstatement fee required by 12 AAC 02.105(6) and all renewal fees required by 12 AAC 02.250.

12 AAC 40.480. EXEMPTIONS. (a) Nothing in this chapter prevents or regulates the use of a community health aid in the usual and customary manner in the rural areas of the State of Alaska.

(b) Nothing in this chapter regulates, restricts, or alters the function of a person traditionally employed in an office, by a physician, in a position not regulated by the State Medical Board under AS 08.64.

12 AAC 40.490. GROUNDS FOR SUSPENSION, REVOCATION OR DENIAL OF REGISTRATION. The board, after compliance with the Administrative Procedure Act (AS 44.62), will, in its discretion, suspend, revoke or deny the registration of a physician assistant who

(1) fails to pay the fees established in 12 AAC 02.250;

(2) has obtained, or attempted to obtain, registration or authorization to practice as a physician assistant by fraud, deceit, material misrepresentation, or false statement;

(3) habitually abuses alcoholic beverages, or illegally uses depressants, hallucinogenic or stimulant drugs as defined by AS 17.12.150(3) or uses narcotic drugs as defined by AS 17.10.230(13);

(4) consistently fails to comply with 12 AAC 40.460;

(5) practices without the required collaborative relationship;

(6) represents or uses any signs, figures, or letters to represent himself or herself as a physician, surgeon, doctor, or doctor of medicine;

(7) violates any section of this chapter;

(8) is found to have demonstrated professional incompetence as defined in 12 AAC 40.970.

ARTICLE 6. GENERAL PROVISIONS

Section

960. Current address

970. Professional incompetence

980. Collaborating physician

985. General anesthetic

990. Definitions

12 AAC 40.960. CURRENT ADDRESS. A licensee shall maintain a current, valid mailing address on file with the division at all times. The latest mailing address on file for an active, inactive or lapsed license is the address of the licensee for official communications, notifications and service of legal process.

12 AAC 40.970. PROFESSIONAL INCOMPETENCE. As used in AS 08.64 and these regulations, "professional incompetence" means lacking sufficient knowledge, skills, or professional judgement in that field of practice in which the physician or physician assistant concerned engages, to a degree likely to endanger the health of his or her patients.

12 AAC 40.980. COLLABORATING PHYSICIAN. (a) A physician who establishes a collaborative relationship with a physician assistant shall submit to the board, under oath, a plan of collaboration which includes

(1) license data, including license number, date of issue, and specialty, if any, for the physician;

(2) personal data, including the name, employment, and both residence and mailing addresses of the physician assistant with whom the physician enters into a collaborative relationship;

(3) the physician's method of quality assurance, including frequency and method of contacts with the physician assistant, and a proposed system of referral;

(4) a proposed method whereby the patient, including patients who may be blind or deaf, is made aware of the level of educational attainment of the physician assistant;

(5) any limitations on the prescriptive authority of the physician assistant and a reason for them; and

(3) "license" means a license, certificate, permit, registration or similar evidence of authority issued by the division or by one of the boards listed in AS 08.01.010;

(4) "licensee" means person who holds a license issued by the division or by one of the boards listed in AS 08.01.010.

APPENDIX A**CHAPTER 20.
HOSPITALS.**

Sec. 18.20.050. Denial, suspension, or revocation of license. The department may deny, suspend, or revoke a license in a case in which it finds that there has been a substantial failure to comply with the requirements established under AS 08.64.336 or AS 18.20.060—18.20.080.

**CHAPTER 23.
HEALTH CARE SERVICES INFORMATION.**

Sec. 18.23.030. Confidentiality of records of review organization. (a) Except as provided in (b) of this section, all data and information acquired by a review organization, in the exercise of its duties and functions, shall be held in confidence and may not be disclosed to anyone except to the extent necessary to carry out the purposes of the review organization, and is not subject to subpoena or discovery. Except as provided in (b) of this section, a person described in AS 18.23.020 may not disclose what transpired at a meeting of a review organization except to the extent necessary to carry out the purposes of a review organization, and the proceedings and records of a review organization are not subject to discovery or introduction into evidence in a civil action against a health care provider arising out of the matter that is subject of consideration by the review organization. Information, documents, or records otherwise available from original sources are not immune from discovery or use in a civil action merely because they were presented during proceedings of a review organization, nor may a person who testified before a review organization or who is a member of it be prevented from testifying as to matters within the person's knowledge, but a witness may not be asked about the witness' testimony before a reviewing organization or opinions formed by the witness as a result of its hearings, except as provided in (b) of this section.

(b) Testimony, documents, proceedings, records, and other evidence adduced before a review organization that are otherwise inaccessible under this section may be obtained by a health care provider who claims that denial is unreasonable, or may be obtained under subpoena or discovery proceedings brought by a plaintiff who claims that information provided to a review organization was false and claims that the person providing the information knew or had reason to know the information was false.

(c) Nothing in this chapter prevents a person whose conduct or competence has been reviewed under this chapter from obtaining, for the purpose of appellate review of the action of the review organization, any testimony, documents, proceedings, records and other evidence adduced before the review organization.

(d) Notwithstanding the provisions of (b) and (c) of this section, information contained in a report submitted to the State Medical Board, and information gathered by the board during an investigation, under AS 08.64.336 is not subject to subpoena or discovery unless and until the board takes action to suspend, revoke, limit, or condition a license of the person who is the subject of the report or investigation.

APPENDIX B

**ALASKA RULES OF THE COURT
RULES OF EVIDENCE
ARTICLE V. PRIVILEGES**

Rule 504. Physician and Psychotherapist-Patient Privilege.

(a) **Definitions.** As used in this rule:

(1) A patient is a person who consults or is examined or interviewed by a physician or psychotherapist.

(2) A physician is a person authorized to practice medicine in any state or nation, or reasonably believed by the patient so to be.

(3) A psychotherapist is (A) a person authorized to practice medicine in any state or nation, or reasonably believed by the patient so to be, while engaged in the diagnosis or treatment of a mental or emotional condition, including alcohol or drug addiction, or (B) a person licensed or certified as a psychologist or psychological examiner under the laws of any state or nation or reasonably believed by the patient so to be, while similarly engaged.

(4) A communication is confidential if not intended to be disclosed to third persons other than those present to further the interest of the patient in the consultation, examination, or interview, or persons reasonably necessary for the transmission of the communication, or persons who are participating in the diagnosis and treatment under the direction of the physician or psychotherapist, including members of the patient's family.

(b) **General Rule of Privilege.** A patient has a privilege to refuse to disclose and to prevent any other person from disclosing confidential communications made for the purpose of diagnosis or treatment of his physical, mental or emotional conditions, including alcohol or drug addiction, among himself, his physician or psychotherapist, or persons who are participating in the diagnosis or treatment under the direction of the physician or psychotherapist, including members of the patient's family.

(c) **Who May Claim the Privilege.** The privilege may be claimed by the patient, by his guardian, guardian ad litem or conservator, or by the personal representative of a deceased patient. The person who was the physician or psychotherapist at the time of the communication is presumed to have authority to claim the privilege but only on behalf of the patient.

(d) **Exceptions.** There is no privilege under this rule:

(1) **Condition and Element of Claim or Defense.** As to communications relevant to the physical, mental or emotional condition of the patient in any proceeding in which the condition of the patient is an element of the claim or defense of the patient, of any party claiming through or under the patient, of any person raising the patient's condition as an element of his own case, or of any person claiming as a beneficiary of the patient through a contract to

APPENDIX B (Continued)

which the patient is or was a party; or after the patient's death, in any proceeding in which any party puts the condition in issue.

(2) *Crime or Fraud.* If the services of the physician or psychotherapist were sought, obtained or used to enable or aid anyone to commit or plan a crime or fraud or to escape detection or apprehension after the commission of a crime or a fraud.

(3) *Breach of Duty Arising Out of Physician-Patient Relationship.* As to a communication relevant to an issue of breach, by the physician, or by the psychotherapist, or by the patient, of a duty arising out of the physician-patient or psychotherapist-patient relationship.

(4) *Proceedings for Hospitalization.* For communications relevant to an issue in proceedings to hospitalize the patient for physical, mental or emotional illness, if the physician or psychotherapist, in the course of diagnosis or treatment, has determined that the patient is in need of hospitalization.

(5) *Required Report.* As to information that the physician or psychotherapist or the patient is required to report to a public employee, or as to information required to be recorded in a public office, if such report or record is open to public inspection, or as to information or matters contained in or reasonably raised by a report submitted under AS 08.64.336, other than information that would establish the identity of a patient, unless the court finds that it is necessary to admit the identifying information in order to serve the interests of justice.

(6) *Examination by Order of Judge.* As to communications made in the course of an examination ordered by the court of the physical, mental or emotional condition of the patient, with respect to the particular purpose for which the examination is ordered unless the judge orders otherwise. This exception does not apply where the examination is by order of the court upon request of the lawyer for the defendant in a criminal proceeding in order to provide the lawyer with information needed so that he may advise the defendant whether to enter a plea based on insanity or to present a defense based on his mental or emotional condition.

(7) *Criminal Proceeding.* For physician-patient communications in a criminal proceeding. This exception does not apply to the psychotherapist-patient privilege. (Added by Supreme Court Order 364 effective August 1, 1979; amended by Supreme Court Order 850 effective January 15, 1988)

STATE OF ALASKA

DEPARTMENT OF COMMERCE & ECONOMIC DEVELOPMENT

DIVISION OF OCCUPATIONAL LICENSING

STEVE COWPER, GOVERNOR

7TH FLOOR FRONTIER BLDG.
3601 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503
PHONE: (907) 561-2878

October 16, 1989

David Rogers, Lawyer
Box 33932
Juneau, AK 99803

Dear David,

I would like to thank you again for the opportunity to speak to the Insurance Liability Task Force last week. I enjoyed meeting with the task force and hope that the information I was able to provide was helpful.

As we discussed on the phone on October 13, I did some research on the question of the Medical Board establishing a code of ethics. Specifically I spoke with Tom Conley, M.D., who served as chairman of the Medical Board for the last 3-4 years. He retired as chairman as of June of this year. Dr. Conley explained to me that the attorney general opinion was a verbal opinion given approximately 6-7 years ago by Dick Monkman, Assistant Attorney General. Basically, the standard code of ethics for the medical profession is the American Medical Association code, a current copy of which I am enclosing for your reference. Dr. Conley explained that there were concerns years ago as to whether the AMA code promoted restraint of trade and was out of sync with the FTC rulings regarding advertising. The other concern regarding a code of ethics was that it attempted to create law outside of the normal legal procedures for codifying this type of information, and that ethics were somewhat nebulous and hard to enforce.

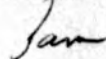
The principles of medical ethics which I am enclosing is copied from the 1989 Current Opinions of the Council on Ethical and Judicial Affairs of the American Medical Association. I will attempt to find out if there have been changes in the principles of medical ethics recently or whether this code of ethics has been in force for a number of years.

The Medical Board will be looking at the matter of a code of ethics at its next board meeting in November. I would be happy to inform you of the results of their discussion after that meeting. Meanwhile, I am still pursuing information on malpractice reporting requirements and which states require reporting of claims made and those requiring reporting of settlements, judgments and awards. Also, as I mentioned on the phone, I spoke with the hearing officer that handles a number of the

medical board cases who explained that "clear and convincing" was the standard of proof which is utilized in medical board cases.

Please feel free to keep in touch and I will forward the other information as soon as I get it.

Sincerely,



Pam Ventgen, CMA
Executive Secretary
State Medical Board

enclosure

0654M/tb

AMERICAN MEDICAL ASSOCIATION

PRINCIPLES OF MEDICAL ETHICS

PREAMBLE:

The medical profession has long subscribed to a body of ethical statements developed primarily for the benefit of the patient. As a member of this profession, a physician must recognize responsibility not only to patients, but also to society, to other health professionals, and to self. The following Principles adopted by the American Medical Association are not laws, but standards of conduct which define the essentials of honorable behavior for the physician.

- I. A physician shall be dedicated to providing competent medical service with compassion and respect for human dignity.
- II. A physician shall deal honestly with patients and colleagues, and strive to expose those physicians deficient in character or competence, or who engage in fraud or deception.
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- IV. A physician shall respect the rights of patients, of colleagues, and of other health professionals, and shall safeguard patient confidences within the constraints of the law.
- V. A physician shall continue to study, apply and advance scientific knowledge, make relevant information available to patients, colleagues, and the public, obtain consultation, and use the talents of other health professionals when indicated.
- VI. A physician shall, in the provision of appropriate patient care, except in emergencies, be free to choose whom to serve, with whom to associate, and the environment in which to provide medical services.
- VII. A physician shall recognize a responsibility to participate in activities contributing to an improved community.

STATE OF ALASKA

DEPARTMENT OF COMMERCE & ECONOMIC DEVELOPMENT

DIVISION OF OCCUPATIONAL LICENSING

STEVE COWPER, GOVERNOR

7TH FLOOR FRONTIER BLDG.
3001 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503
PHONE: (907) 561-2070

December 21, 1989

David E. Rogers
P. O. Box 33932
Juneau, Alaska 99803

Dear David:

I enjoyed talking with you again today. As we discussed on the phone, the Medical Board has no statistics which document the theory that a small percentage of physicians is responsible for the largest number of disciplinary actions. The board has seen a few physicians with repeated complaints, but we can draw no conclusions from that information as yet.

As you know, at the present time the Medical Board does not receive any malpractice data. I am therefore unable to comment on the statement that a small number of physicians are responsible for the large majority of the medical malpractice cases.

I am enclosing copies of the journal articles I mentioned. I hope you can find them useful.

If I can be of any further assistance in this matter, please do not hesitate to call me.

Sincerely,



Pam Ventgen, CMA
Executive Secretary
State Medical Board

0716M/mh

STATE OF ALASKA

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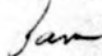
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Pam Ventgen, CMA
Executive Secretary
State Medical Board

enclosure

0654M/tb

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STATE OF ALASKA

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DIVISION OF OCCUPATIONAL LICENSING

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7TH FLOOR FRONTIER BLDG.
3601 C STREET, SUITE 722
ANCHORAGE, ALASKA 99503
PHONE: (907) 561-2878

January 16, 1990

David Rogers
P. O. Box 33932
Juneau, AK 99803

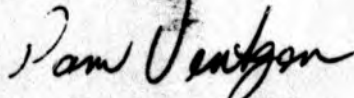
Dear David:

I received a call today from Julie in Sam Cotten's office regarding physician continuing medical education (CME) requirements. I'm enclosing a copy of the medical practice statutes and regulations and have marked those sections pertaining to CME.

Julie also asked about providers of CME programs. Most CME programs within the state are provided through the hospitals, the state medical association or local medical societies, and the physician specialty associations. There are also, of course, numerous programs provided in other states and countries by universities and medical schools, professional associations and various consulting firms, to name just a few. In October, 1988 the medical board, in cooperation with the nursing, dental and pharmacy boards and the Division of Occupational Licensing, presented a CME program dealing with the clinical management of pain. The joint boards are anticipating producing another program this coming fall. The specific topic for the upcoming program has not yet been fully identified.

I hope this provides the information you needed. If you'd like anything else, please give me a call.

Sincerely,



Pam Ventgen, CMA
Executive Secretary
State Medical Board

Enclosure

cc: Sam Cotten
Randall P. Burns

0732M

ALASKA STATE MEDICAL BOARD
ANNUAL PERFORMANCE REPORT
FISCAL YEAR 1989

Prepared by:

Pamela K. Ventgen, CMA
Executive Secretary
September 26, 1989

STATE MEDICAL LICENSING BOARD

State of Alaska
Division of Occupational Licensing
Pouch D
Juneau AK 99811

August 1, 1989

Randall P. Burns, Director
Division of Occupational Licensing
Department of Commerce & Economic Development
P. O. Box D-LIC
Juneau, AK 99811

Dear Mr. Burns:

Enclosed you will find the annual report of the State Medical Board for FY-89. The report, submitted to meet the statutory requirements under AS 08.011, is quite complete and self-explanatory.

I feel the board and the division have continued to function as a team in the pursuit of assuring that quality medical care be rendered to Alaskans. There exists excellent unity of purpose in our combined responsibility.

The board feels the loss, through retirement, of two board members, Dr. Jeffrey Partnow and Bonnie Coghlan. We will miss their valuable involvement and the historical perspective they have provided the board since 1980 and 1984 respectively. We thank them for their efforts.

Tom Conley, M.D., has stepped down as board chair as of June, 1989. The amount of time and energy he has contributed cannot be described. The remaining months of his present term will assure a smooth transition as he continues to provide relative knowledge from his personal data bank. We cannot thank him enough for his efforts.

The division personnel continue to do a wonderful job. The work load increases with each year and we would not be able to perform our responsibilities without their assistance. Pam Ventgen, executive secretary, would simply be irreplaceable. Colin Matthews is doing an excellent job under his ever increasing investigative burden. Kym Walker is as efficient and cheerful as ever. Kevin Henderson continues to do an excellent job with the regulatory changes. Matt Anderson, state Emergency Medical Services Coordinator, deserves special thanks for his work in re-writing the paramedic regulations which were recently adopted.

The implementation of the Impaired Physicians Program continues to become effective through the work of Ray Schalow, Executive Director, Alaska State Medical Association and the ASMA committee. We thank them for their efforts and look forward to making this a viable resource for rehabilitation of the impaired.

The medical board looks forward to another busy and productive year in FY 90.

Sincerely,


James W. Thompson, M.D.
Chair, State Medical Board