

**A brief history of our work with the State Medical Board and summary of the regulation changes are below.**

**Chapter 12 AAC 40.400 vs SB 115 Quick review.**

SB 115 is an Act relating to physician assistants; relating to physicians; and relating to health care insurance policies. It will change the Medical Alaska Statute and Regulation of physician assistants Article 1. State Medical Board Sect. 107.

State Medical Board PA regulations (Chapter 12 AAC 40.400) are written to implement the Alaska statute.

If there is conflict between a statute and a regulation (administrative code), the statute prevails.

**History of Regulation Change Leading to Introduction of SB 115.**

Two years ago, we created a working group with three members of the Alaska State Medical Board (SMB) for regulation modernization (Chapter 12 Administrative Code 40.400). After months of work, the representatives from the SMB presented new regulations to the remaining members of the SMB as if AKAPA had agreed to move forward. The version presented was not what we had agreed to move forward with and we were not presented with their final version until it was presented at the quarterly SMB meeting. We were not allowed to participate in that discussion. The SMB then held a special meeting to review these new proposed regulations and we were not allowed to participate. They unanimously voted to move forward to legal with their version. We were allowed 3 minutes in public comment at the following SMB quarterly meeting. We have written letters to the SMB. After realizing our voices were being silenced, we introduced Senate Bill 115. Senate Bill 115 has been openly opposed by SMB Chair, Dr. Richard Wein.

**Specific Chapter 12 AAC 40.400 Proposed Changes by Medical Board 8/30/2023.**

12 AAC 40.400 (b) (4) repealed. This was a redundant requirement for NCCPA.

12 AAC 40.400 (b) (7) amended. New language uses attestation instead of verification. Allows PAs to check box on state application.

12 AAC 40.405 language change. Temporary license changed to temporary permit.

12 AAC 40.405 (a, b, c) language change. License to permit.

12 AAC 40.405 (e) repealed. Regarding temporary permit qualification.

12 AAC 40.405. Adding section (f) (1-7) regarding temporary permit.

12 AAC 40.410 repealed and readopted. Collaborative relationship and practice agreement.

(a) New language changes from plan to practice agreement.

(1) New language stating must reflect scope of practice of the collaborating physicians.

(2) Adds requirement of plan of action if no alternative collaborating physician is named (but must be named within 3 months of agreement (b)).

- (6) Prescriptive authority still remains with collaborating physician, not based on PA training, education, and experience.
- (7) Practice agreement may be signed by physician assistant and physician electronically.
- (8) Additional requirement for description of practice, to include acts, tasks, or functions that PA **AND** physician are qualified to perform and are within the scope of expertise and clinical practice of **BOTH** the PA and collaborating physician.
- (9) Addition of description of how performance assessment of PA will be done by collaborating physician.
- (b) Alternate collaborating physician must be named and documented in practice agreement not later than 3 months after effective date.
- (c) Written notice of changes to practice agreement must be provided to SMB within 3 business days (this is changed from prior 14 day requirement).
- (e) Must be retained at the practice.
- (f) License will be changed to “unauthorized to practice” if no primary collaborating physician and an alternate is not available.
- (h) addition of podiatric medicine included in collaborative physicians ???
- (j) states PA responsible for compliance with all state and federal inventory and record keeping requirements (removes primary collaborating physician).
- (k) increases requirement of collaborating physician to be “active” to **480 hours** (from previous 200 hr requirement).

12 AAC 40.415 repealed and readopted. Remote practice location.

- (1) addition of documentation of a process for communication availability, may be videoconference, telephone, electronically or by an alternate method.
- (2) \*new requirement\* not less than **2400 hrs** of general medical practice experience obtained **within the two years prior to the beginning date of employment at the remote practice location** (eliminates the previous option for more contact if less than two years of fulltime clinical experience).
- (b) remote practice is location that is more than 30 miles by road from the nearest tertiary care facility or from the primary collaborating physician’s office.

12 AAC 40.430 repealed and readopted. Performance and assessment of practice.

- (1) within scope of practice of practice agreement.
- (2) if medical diagnosis and treatment is within the scope of practice of the primary collaborating physician.
- (b) practice agreement **MUST** include direct observation, chart review, **feedback from other health care providers or patients.**
- (2) frequency of assessments: 2 annually, if less than 2 years practice experience must do quarterly, can be in person or videoconference.
- (c) if under practice agreement for less than 3 months each year they must have at least one direct personal contact visit annually, if both in the state of Alaska this may be by videoconference.
- (d) adds PA to responsibility to maintain records of practice agreement
- (e) adds PA to responsibility to maintain assessments for at least 7 years.

(g) changes audits “not more than” to “not less than” 10 % of active PAs in Alaska.

12 AAC 40.445 (e) amended. Adds “in good standing with the state”.

12 AAC 40.450 (c) amended. Adds “within collaborating physician’s scope of practice).

12 AAC 40.450 (e) repealed & amended. Authority to prescribe, order, administer, and dispense medications. Keeps authority to “authorization of primary collaborating physician”. Language change to practice agreement. Must document in practice agreement within 10 days of effective date of practice agreement.

12 AAC 40.450 (f, h) amended. Keeps “only with authorization of the PA’s primary collaborating physician”. Language changes for practice agreement.

12 AAC 40.450 (i) repealed.

12 AAC 40.460 amended. Identification. Removes “conspicuously” in reference to clothing nameplate. (2) removes size requirement of sign documenting education is available to patients. Removes requirement of practice agreement being made available.

12 AAC 40.470 (b, 2, 3, 4) amended to “attestation” from “documented evidence”.

12 AAC 40.475 (a2, b2) attestation from “documentation”.

12 AAC 40.490 amended. Language, addition of “may” from “will, in its discretion”.  
(5) practice agreement from collaborative plan.