

HEARTBEAT

THE BIMONTHLY NEWSLETTER OF THE ALASKA STATE MEDICAL ASSOCIATION

June 2025

PRESIDENT'S COLUMN

Dear Alaska State Medical Association, I would like to thank you for what you have so tirelessly stood for, the largest single Physician and Physician Assistant lead advocate in the state of Alaska. Your voice has been singular and powerful, hearing many voices and speaking as one. You have worked 78 years without complaint for the well-being



Rhene Merkouris, MD

and health of all Alaskans. You are a non-profit organization supporting Alaskan physicians and PAs through advocacy, education and networking. This work has been carried out by the doctors and physician assistants that make you up in a voluntary capacity. You have made sure in your 78 years every member has had a voice. Your executive branch is made up of specialists and primary care physicians and physician assistants across your great state. Since you are non-profit your only main expense is an amazing staff of a CEO and office manager, lawyer and lobbyist all working part-time trying to get your work done. Your executive branch donates countless hours while still keeping full-time clinics to advise, discuss and research the main issues of legislation and regulatory matters that affect the physician's ability to practice such as the change of insurance regulations like the infamous Repeal of the 80th percentile rule. Besides affecting the physicians' ability to negotiate with insurance companies, it most importantly impacts the care of our patients by increasing their cost and access. (If you do not understand this

ASMA is in serious financial distress

Most medical practices cannot afford to hire a lobbyist or invest time and personnel to rigorously follow what goes on in Juneau. That is ASMA's strength, and ASMA works for all physicians in Alaska. ASMA has a powerful voice in this arena with legislators in Juneau.

ASMA has invested heavily in current efforts to right the problems created by repeal of the 80th percentile rule and increasingly punitive actions by insurers, especially Premier Blue Cross.

Since repeal, most practices have had Premier reimbursement rates lowered to 185% of CMS. ASMA heard this month that some providers have been notified of an additional 5% decrease in reimbursement rates from Premier. Contract negotiations appear completely one-sided – Premier dictates and physicians must accept or else be out-of-network. Individual medical offices can and should file complaints with the State Division of Insurance when they see unfair insurance practices. ASMA can help, too, if we are aware. Let us know what you are seeing and hearing.

Additionally, over the past five years we have cut as many expenses as possible. We own our building and have considered selling the building but renting appropriate office space would increase our monthly costs. Our staff continue to work diligently on your behalf and have not had any salary increases since 2020.

In addition to losing ASMA's legislative efforts, the Physician Health Committee would be dissolved as well. The PHC monitors and advocates for physicians and physician assistants with health and substance use disorders that may impact their ability to practice safely. This work is done with the understanding of the State Medical Board who is not aware of the identity of voluntary participants whose licenses are protected while they meet the monitoring standards of the PHC. The PHC also monitors a few participants mandated to the PHC by the State Medical Board. The PHC can only operate under the protection of ASMA.

Without additional financial support we are facing the decision of closing ASMA. Currently we do not have adequate funds to pay staff salaries through the end of this year. All board members and Physician Health Committee members serve on a voluntary basis and get no compensation at all.

You can help by using the QR code to donate to your state medical association and its valuable services. Thank you.

SCAN TO DONATE



Every physician deserves to be insured by a company like MIEC.

As a reciprocal exchange, MIEC is entirely owned by the policyholders we protect. Our mission to protect physicians and the practice of medicine has guided us over the past 47 years. Our Patient Safety and Risk Management team continues to provide policyholders timely resources and expert advice to improve patient safety and reduce risk. To learn more about the benefits of being an MIEC policyholder, or to apply, visit **miec.com** or call **800.227.4527**.

Get a
quote
today.

Medical Malpractice coverage
for individuals, groups and facilities.
Acupuncture, Psychiatry, and other
specialty coverages available.

miec.com | 800.227.4527

Insurance
by physicians,
for physicians.™

miec

ASMA Website Info:

- For those that have not logged in yet, the site did not carry over your password. You **WILL** need to reset it in order to login.
- If you don't have an address in the "personal" field you will not receive mailings. Please login to update your profile.
- Physician images were **not** imported to the new site so please be sure you log in and upload a new photo for the OMD (Online Medical Directory).
- The system currently does not support Company Admin's uploading individual physician photos. You may email photos to Cjeanes@asmadocs.org, but please include the physician name and company so that we can be sure we're uploading to the proper profile.

HEARTBEAT

Published bimonthly by:

Alaska State Medical Association
4107 Laurel St.
Anchorage, AK 99508-5334
Phone: (907) 562-0304
Fax: (907) 561-2063
Email: asma@asmadocs.org
Website: asmadocs.org

ASMA Staff

Executive Director
& PHC Coordinator Pam Ventgen
Office Manager Cassie Jeanes

Board of Trustees

President Rhene Merkouris, MD
President-elect Mary Klix, MD
Past President Kristin Mitchell, MD
Secretary/Treasurer Leigh Cooper, DO
Sec./Treas.-elect Paula Colescott, MD
Trustee District 1 Janice Sheufelt, MD
Trustee Districts 2 & 4 Jessica Panko, MD
Trustee District 3 Christy Tuomi, DO
House Speaker Mary Ann Foland, MD
AMA Delegate Alex Malter, MD
Alt. AMA Delegate Rhene Merkouris, MD
PA Representative Christi Froiland, PA-C
Legislative Committee Eli Powell, MD
PHC Mary Ann Foland, MD
Public Health Committee - Rhene Merkouris, MD
Social Media Sherry Johnson, DO
Special Projects Steve Compton, MD

Merkouris continued from Page 1

concept, please ask questions!)

You, ASMA, have done amazing things with so little. Here is a list of your recent achievements.

You, with help, got the Prior Authorization Reform passed. Decreasing the workload in the office for medical practices and helping advance patient care.

You continue tirelessly to work on the replacement for the 80th percentile rule. What other organization would have the strength to stand toe to toe with the insurance companies??

You continue to protect the science and long hours of experience in medical school, residency and then fellowship (anywhere on average of 7-11 years of training) of Physicians and Physician Assistants by fighting the scope of practice efforts by non-physicians on a yearly basis, keeping our Alaskan patients as safe as possible under recognized federal standards.

You provide a win-win scenario with the Physician Health Committee (PHC). This entity does not exist outside of ASMA. If a Physician or PA gets a DUI or has concerns about substance use or other health issues, the PHC offers guidance, support and advocacy for the ability of the physician to practice safely and allow their patients to continue getting safe care.

You supported the passage of bills, increasing telehealth capabilities in Alaska and protected curbside consultations from undue liability.

You have supplied ongoing strong support of the WWAMI medical school and Family Practice Residency to keep our own talented doctors here to practice and care for our Alaskan residents.

You supported and provided 24/7 guidance for all health care workers during the COVID pandemic by your volunteer team working closely with public health.

You supported the startup of the educational ECHO CME series and offered interested physicians a Leadership workshop for CMEs.

ASMA, it is hard to imagine you not being here with all you offer and continuing your ability to help all Alaskans and their health care providers. Like every non-profit the resources have dwindled. It saddens me to see how your support has decreased to the effect that without donations or especially, increased participation by Your Physicians and Physician Assistants, you dear ASMA will cease to exist in December of 2025.

All health care provider lives have been improved by your efforts whether they were members or not. It is my hope, dear ASMA, that they will all see your amazing accomplishments, understanding I could only list a small part of what you have done on their behalf for the last 78 years. I WILL believe the Physicians and Physician Assistants will recognize your immense worth and will become members.

For which private care physician or physician assistant will have the time to discuss important statewide health care issues individually with members of the Alaskan legislature in Juneau, insurance companies, the medical board and their colleges across the state and speak with one large, unified voice but you dear ASMA?!

Thank You.

Sincerely,

Rhene Merkouris, MD

Alaska State Medical Association President 2025

Alaska State Medical Association

Meeting of the General Assembly

May 7, 2025

Minutes of meeting held at the BP Energy Center and on Zoom

Call to Order: The meeting was called to order at 5:35 pm by President Dr. Kristin Mitchell.

Board of Trustees attending: Drs. Foland, Sheufelt, Merkouris, Klix, Malter, Panko, Powell and PA Froiland.

Staff present: Jardell, Heyman, Davis and Ventgen.

Members Present: Jody Butto, Peter Lawrason, John Finley, Eric Miknich, Lisa Alexia, PA-C, Alexander von Hafften, Alan Swenson, Seth Kraus, Regina Fiacco, DPM, Leigh Cooper, Ilona Farr, Shannon Gulley, Gregory Gerboth, Jon McDonagh.

Minutes: The minutes of the May 1, 2024, General Assembly Meeting were approved after a motion by Foland that was seconded by Merkouris.

Alaska Comprehensive Forensic Training Academy

Angelia Trujillo, DNP, MSN, WHNP-BC, RN from the UAA School of Nursing presented an overview of training available in Alaska. This training improves practitioner communication, documentation and resources for physicians and other medical professionals who interact with patients who may have suffered trauma in the past. The first part of the training is presented virtually; the last part is hands-on. More information is available by contacting Ms. Ventgen.

Election of Officers: By unanimous vote the following officers were elected:

President: Rhene Merkouris, MD

President Elect: Mary Klix, MD

Secretary/Treasurer: Leigh Cooper, DO

Secretary/Treasurer Elect: Paula Colescott, MD

AMA Delegate: Alex Malter, MD

AMA Alternate Delegate: Rhene Merkouris, MD

Trustee for the 2nd and 4th Districts: Jessica Panko, MD

Trustee for 3rd District: Christy Tuomi, MD

Physician Assistant Representative: Christi Froiland, PA-C

Psychedelic Medicine Task Force

Dr. Colescott was planning on giving an overview of the work of the task force, but a patient emergency kept her from attending the meeting. Dr. von Hafften gave a brief description of the issue. The FDA is considering reclassifying several psychedelic drugs for therapeutic purposes. The state established a task force to look at the pending reclassification and determine if Alaska should adopt regulations to implement whatever the FDA decides. The task force that was appointed had few physicians and numerous other interested parties. There appear to be numerous concerns including the fact that the state already has an established process for rescheduling drugs and the state already has a controlled substances task force. There is also a Medicaid pharmaceuticals committee. All of these already-established entities should have a voice. The current medical evidence for use of psychedelics is thin, parts of the Psychedelic Medicine Task Force report appear contradictory, and the practicalities of use and active monitoring of a patient undergoing these therapies is doubtful. Caution is urged.

Legislative Update:

SB 121 Replacement for 80th percentile rule. This bill got a slow start due to backlog in Legislative Legal drafting section. Department of Administration also added a fiscal note, not really legitimate but another hurdle. Court case went to trial the last week of February but there is no decision yet. Sen. Bjorkman is holding the bill, he supported repeal of the 80th and seems willing to listen but isn't convinced yet that a replacement is needed. Lori Wing-Heier doesn't like the bill. This bill will not pass this session. ASMA plans lots of work over the interim in preparation for next session.

SB 122 Network Adequacy, is also sitting in Senate Labor and Commerce. This is a proactive, preventative bill as Premera has stated publicly that they want to offer narrow networks in Alaska.

SB 133 Prior Authorization Reform, is jointly supported by Hospitals, ASMA, DOI and Insurers. Expect this bill will pass this session.

SB 89 Physician Assistant bill, is in Senate Labor and Commerce, amendments pending based on Utah and North Dakota legislation. There is no draft of the amendments yet and no House version of the bill. This bill is not likely to pass this session.

SB 147 Pharmacist Prescribing bill, would modify the language from the 2022 bill that Department of Law says is too vague. This bill would allow pharmacists to independently provide patient care services for general health and wellness; disease prevention; or a condition that is minor and generally self-limiting; or has a CLIA-waived test. There was much discussion and some confusion about this bill. Upon a Motion by Miknich, seconded by Finley, the members voted unanimously to oppose this bill as written because it lacks clarity of what constitutes disease prevention and minor illness and implies that pharmacists would be practicing medicine.

The group then discussed ASMA's financial solvency amid these legislative efforts. Members also discussed the number of practices closing and suffering from current reimbursement practices and economic realities.

The meeting adjourned at 7:45 pm.

REGISTER NOW!

ALASKA HEALTH INFORMATION EXCHANGE SUMMIT

AUGUST 28

CME Opportunity

On May 7, 2025 Angelia Trujillo, Professor for the University of Alaska Anchorage College of Health presented on the Alaska Comprehensive Forensic Training Academy (ACFTA), a pioneering initiative aimed at equipping healthcare professionals with the skills and knowledge necessary to provide equitable care to all victims of violence—children, teens, adults, and elders—across Alaska.

Dr. Trujillo provided an overview of the generalist forensic training program using module-based, conceptual learning programming tailored to meet healthcare providers' needs. This blended learning program incorporates theoretical knowledge with skill competencies to ensure that healthcare personnel are confident in their knowledge and practical application of forensic skills.

The ACFTA addresses a critical gap in Alaska's healthcare system by offering trauma-informed, evidence-based training that empowers providers to deliver comprehensive care, documentation, and advocacy for individuals impacted by violence. This program was developed with the support of the Council on Domestic Violence and Sexual Assault, in collaboration with the University of Alaska Anchorage, College of Health, and has garnered positive feedback from key stakeholders and communities across the state.

The two part virtual training is recommended for Doctors, Physician assistants, Nurse practitioners, Community Health Aides, Healthcare personnel, EMTs, and Military medical personnel. Continuing education credits are available upon completion of training. The training is offered at no charge and a small \$75 fee is charged for training supplies.

To register and for more information visit uaa.alaska.edu/acfta or contact:

Angelia Trujillo, DNP, MSN, WHNP-BC, RN

Professor, School of Nursing

University of Alaska Anchorage, College of Health

3795 piper drive, HSB 325 Anchorage, AK 99507

Email: actrujillo@alaska.edu

Phone: 907-786-4693



Alaska State Medical Association would like to recognize and thank MIEC for fifty years of service with and for Alaskan physicians. The vast majority of physicians in Alaska are shareholders and policyholders with MIEC. As such, MIEC has a personal interest in providing the best coverage and, when necessary, legal defense. MIEC's excellent financial management also results in regular dividends/refunds to policyholders. Best of all is their sincere interest in supporting Alaskan physician practice. ASMA appreciates MIEC's support and ongoing commitment to Alaska.

Pharmacist Scope of Practice

Legislation passed in 2022 expanded the scope of practice for pharmacists to include:

- Independently prescribe and administer vaccines and opioid overdose reversal medications

- Be reimbursed for these services

- Clarified that pharmacists could still operate under collaborative practice agreements with physicians, allowing for team-based care

- Pharmacy technicians could administer vaccines under the supervision of a licensed pharmacist.

ASMA had no objections to this legislation.

Currently proposed legislation

SB 147/HB 195 was introduced because the Department of Law said the 2022 language was not clear enough. If passed, this bill would:

- Allow pharmacists to prescribe and administer drugs, including state and federally controlled substances.

- Require education in pain management and opioid use and addiction.

- Require continuing education in pain management and opioid use and at license renewal.

- Defines the “patient care services” that a pharmacist may provide to “achieve outcomes related to the cure or prevention of a disease, elimination or reduction of a patient’s symptoms, or arresting or slowing of a disease process.”

Current statutory language:

AS 08.80.337(d) In this section, “patient care services” means medical care services given in exchange for compensation intended to achieve outcomes related to the cure or prevention of a disease, elimination or reduction of a patient’s symptoms, or arresting or slowing of a disease process.

Proposed language:

AS 08.80.337(d) In this section, “patient care services” means medical care services, **including the prescription or administration of a drug or device to a patient, that are** given in exchange for compensation **and** intended to achieve outcomes related to the cure or prevention of a disease, elimination or reduction of a patient’s symptoms, or arresting or slowing of a disease process; **“patient care services” does not include the prescription of an abortion-inducing drug to a patient.**

ASMA physician representatives are meeting with pharmacists in the upcoming weeks to work on refining this language. Physicians support physician-led teams caring for patients.

Prior Authorization Reform Passes Legislature

From the Alaska Hospital and Healthcare Association (AHHA, formerly ASHNHA)

We are excited to share AHHA's prior authorization reform legislation (SB 133) unanimously passed the Alaska Legislature and the bill is headed to the Governor for signature. Once signed, the reforms will go into effect January 1, 2027. This caps off months of work between hospitals, providers, insurers, and regulators. It also represents a big win for our association and patients across Alaska.

AHHA wants to recognize and thank Bruce Richards from Central Peninsula Hospital for developing this legislation and bringing it to the Legislature. We also want to recognize the outstanding leadership and partnership from Insurance Director Lori Wing-Heier and Deputy Director Heather Carpenter. A special thank you to Senator Bjorkman and Representative Ruffridge, and their incredible staff, for carrying the legislation. We appreciate the **Alaska State Medical Association**, Premiera Blue Cross, Moda Health, and other insurers for coming to the table and making this bill a reality. Lastly, a major shoutout to AHHA's lobbyist Ryan Johnston for his tireless work moving SB 133 through the legislative process.

(underline and bold print added)

Included in this landmark legislation:

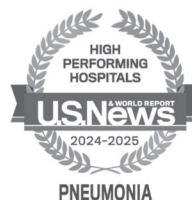
1. Improved response times when a prior authorization request is submitted: 72 hours after standard request, 24 hours after receiving an expedited request.
2. Time frames stipulated if additional information is needed.
3. Insurers must make current prior auth standards available to patients and healthcare providers.
4. The peer reviewer must have relevant clinical expertise in the specialty area or be of equivalent specialty as the requesting provider.
5. The peer reviewer must attest that he/she has read the medical records initially included in the prior authorization request.
6. Prior auth for a chronic condition is valid for 12 months and can be automatically renewed for additional 12 months. Other prior authorizations are valid for 90 days.
7. An adverse determination must include a clear explanation including specific evidence-based reasons and criteria used.
8. Provisions for electronic filing of prior auth requests.
9. Step therapy exceptions are granted if the patient underwent step therapy protocol under a previous health care insurance policy



You bring out the best in us.

Providence Alaska Medical Center is honored to be the only hospital in Alaska – and one of just 53 in the nation – recognized for both quality of care and equitable access by U.S. News & World Report, the global authority in hospital rankings. We also have been rated High Performing in the treatment of six conditions. These accolades reflect your impact on our community as we work together to serve every patient with clinical excellence and compassion.

Learn more at Providence.org/PAMCawards.



Letter: Medicaid changed health care for the better in Alaska. Don't severely cut it.

Published in the Anchorage Daily News

By Emily Olsen, MD

Published: June 19, 2025

Congress is preparing to severely cut Medicaid funding. I'm an anesthesiologist — a physician specializing in caring for patients during surgeries and procedures. I remember when Gov. Walker expanded Medicaid in 2015. I remember because it was striking to see folks finally get the care they'd been putting off for years. I remember seeing multiple patients get their gallbladders removed after years of painful symptoms, or getting back surgery after years of debilitating pain. I remember seeing a middle-aged man get his foot amputated after years of uncontrolled diabetes; after forgoing care he couldn't afford prior to Medicaid expansion.

Delivering and receiving care in Alaska is expensive. Private insurance is exceedingly expensive in our state, often pricing out folks who work full-time and people who are unable to work. Putting off care is also expensive in terms of loss of quality of life from stress, pain and even the immeasurable loss of a limb. Medicaid certainly has its issues. I'm not saying it's the magic answer to all our healthcare woes. I am saying that it adds tremendous value to our community insofar as we value the community members this program supports.

Naturopaths Using the Title 'Physician'

In February of this year ASMA became aware of a naturopath in Homer who was advertising himself as a physician. This is a violation of AS 08.45.050(3) "A person who practices naturopathy may not use the word "physician" in the person's title." This was reported to the Division of Corporations, Business and Professional Licensing, which opened an investigation. Subsequent to this initial investigation, six additional naturopaths were identified by ASMA who were using the term 'physician' in their advertising, on websites or Facebook pages. These names were also submitted to the Division. Upon investigation, the Division found that Adam Grove, Orna Izakson, Natalie Wiggins and Joanie Kirk all came into compliance with their public-facing profiles and advertisements. Annette D'Armata appears to have left Alaska and Kabran Chapek does not appear to be advertising as a physician.



THE STATE
of **ALASKA**
GOVERNOR MIKE DUNLEAVY

Department of Commerce, Community, and Economic Development

DIVISION OF CORPORATIONS, BUSINESS AND
PROFESSIONAL LICENSING

550 West Seventh Avenue, Suite 1500
Anchorage, AK 99501-3567
Main: 907.269.8162
Toll free fax: 907.269.8195

June 16, 2025

Email: pventgen@asmadocs.org

Pam Ventgen
4107 Laurel St.
Anchorage, AK 99508

Re: State of Alaska Regulation of Naturopaths - Case No.: 2025-000091

CLOSURE LETTER

Dear Ms. Ventgen,

The Division of Corporations, Business and Professional Licensing ("Division") has completed the review into the complaint you filed against Patrick Huffman.

The Division, in consultation with a designee of the Regulation of Naturopaths, reviewed your complaint along with the information obtained during the investigation and it was determined a violation of AS 08.45.050(3) occurred. This matter has been resolved with a non-disciplinary letter of advisement.

This matter is now closed in our office. Thank you for bringing this matter to our attention. Should you have any questions regarding this matter, you may contact me directly via email josh.hardy@alaska.gov or telephone (907) 375-7798.

Respectfully,

A handwritten signature in cursive script that reads "Joshua Hardy".

Joshua Hardy, Investigator
State of Alaska, Regulation of Naturopaths



Alaska State Medical Association
4107 Laurel St
Anchorage, AK 99508-5334

(Return Service Requested)

PRSRT STD
U.S. Postage
PAID
Anchorage, AK
Permit, No. 69

Heartbeat is published bimonthly for \$24 per year by the Alaska State Medical Association, 4107 Laurel St., Anchorage, AK 99508-5334. **POSTMASTER:** Send address changes to above address. Phone: (907) 562-0304. If your address changes, mail the label at right to ASMA with your new address.

Physician Support Line

1 (888) 409-0141

Free and Confidential / No appointment necessary
Open 7 days a week / 8:00 am to 1:00 am Eastern time

(You are not establishing a doctor-patient relationship, thus this is not reportable as receiving therapy services. No need to report to your medical board.)

The Mission:

To offer free and confidential peer support to American physicians and medical students by creating a safe space to discuss immediate life stressors with volunteer psychiatrist colleagues who are uniquely trained in mental wellness and also have similar shared experiences of the profession.

The line is staffed by 800 volunteer psychiatrists helping our US physician colleagues and medical students navigate the many intersections