

CS FOR HOUSE BILL NO. 195(FIN)

IN THE LEGISLATURE OF THE STATE OF ALASKA

THIRTY-FOURTH LEGISLATURE - SECOND SESSION

BY THE HOUSE FINANCE COMMITTEE

Offered: 5/15/26

Referred: Today's Calendar

Sponsor(s): REPRESENTATIVES MINA, Gray, Prax, Story, Eischeid

A BILL

FOR AN ACT ENTITLED

1 "An Act changing the term 'physician assistant' to 'physician associate'; relating to
2 physician associates; relating to collaborative practice agreements for pharmacists;
3 relating to the prescription of opioid overdose drugs; relating to the prescription and
4 administration of drugs and devices by pharmacists; relating to reciprocity for
5 pharmacists; amending the definition of 'practitioner'; and providing for an effective
6 date."

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

8 * **Section 1.** AS 08.02.130(e) is amended to read:

9 (e) A physician, podiatrist, osteopath, or physician **associate** [ASSISTANT]
10 licensed under AS 08.64 may prescribe, dispense, or administer through telehealth
11 under this section a prescription for a controlled substance listed in AS 11.71.140 -
12 11.71.190 if the physician, podiatrist, osteopath, or physician **associate** [ASSISTANT]
13 complies with state and federal law governing the prescription, dispensing, or

1 administering of a controlled substance.

2 * **Sec. 2.** AS 08.02.130(j)(1) is amended to read:

3 (1) "health care provider" means

4 (A) an audiologist or speech-language pathologist licensed
5 under AS 08.11; a behavior analyst licensed under AS 08.15; a chiropractor
6 licensed under AS 08.20; a professional or associate counselor licensed under
7 AS 08.29; a dental hygienist licensed under AS 08.32; a dentist licensed under
8 AS 08.36; a dietitian or nutritionist licensed under AS 08.38; a naturopath
9 licensed under AS 08.45; a marital and family therapist licensed under
10 AS 08.63; a physician licensed under AS 08.64; a podiatrist, osteopath, or
11 physician **associate** [ASSISTANT] licensed under AS 08.64; a direct-entry
12 midwife certified under AS 08.65; a nurse licensed under AS 08.68; a
13 dispensing optician licensed under AS 08.71; an optometrist licensed under
14 AS 08.72; a pharmacist licensed under AS 08.80; a physical therapist or
15 occupational therapist licensed under AS 08.84; a psychologist or
16 psychological associate licensed under AS 08.86; or a social worker licensed
17 under AS 08.95;

18 (B) a physician licensed in another state; or

19 (C) a member of a multidisciplinary care team who is licensed
20 in another state;

21 * **Sec. 3.** AS 08.02.130(j)(4) is amended to read:

22 (4) "member of a multidisciplinary care team" means an audiologist,
23 speech-language pathologist, behavior analyst, professional counselor, dietitian,
24 nutritionist, naturopath, marital and family therapist, podiatrist, osteopath, physician
25 **associate** [ASSISTANT], nurse, pharmacist, physical therapist, occupational therapist,
26 psychologist or psychological associate, advanced nurse practitioner, or social worker
27 who is a member of a team coordinated by a physician licensed in another state who
28 meets the requirements of (b)(3) of this section;

29 * **Sec. 4.** AS 08.02 is amended by adding a new section to article 3 to read:

30 **Sec. 08.02.150. Regulation of collaborative practice agreements.** (a) The
31 department or a board may not

1 (1) require a pharmacist to pay a fee to enter into, or provide patient
2 care services under, a collaborative practice agreement;

3 (2) require department or board approval of a collaborative practice
4 agreement;

5 (3) define the nature and scope of patient care services a pharmacist
6 provides under a collaborative practice agreement; or

7 (4) otherwise regulate collaborative practice agreements.

8 (b) In this section,

9 (1) "collaborative practice agreement" means a collaborative practice
10 agreement authorized under AS 08.80.337(a); and

11 (2) "patient care services" has the meaning given in AS 08.80.337(d).

12 * **Sec. 5.** AS 08.36.355(c) is amended by adding a new paragraph to read:

13 (4) "opioid overdose drug" has the meaning given in AS 17.20.085(g).

14 * **Sec. 6.** AS 08.36.355 is amended by adding a new subsection to read:

15 (d) A licensee who issues a prescription for an opioid to a patient shall offer
16 the patient a prescription for an opioid overdose drug if

17 (1) the prescription is for an opioid that exceeds a three-day supply;

18 (2) the prescription is for a total daily opioid dosage representing a
19 morphine milligram equivalent of 50 milligrams or more;

20 (3) the patient is concurrently prescribed a benzodiazepine; or

21 (4) the patient has a history of overdose or substance use disorder.

22 * **Sec. 7.** AS 08.64.010 is amended to read:

23 **Sec. 08.64.010. Creation and membership of State Medical Board.** The
24 governor shall appoint a board of medical examiners, to be known as the State
25 Medical Board, consisting of five physicians licensed in the state and residing in as
26 many separate geographical areas of the state as possible, one physician **associate**
27 [ASSISTANT] licensed under AS 08.64.107, and two persons with no direct financial
28 interest in the health care industry.

29 * **Sec. 8.** AS 08.64.101(a) is amended to read:

30 (a) The board shall

31 (1) except as provided in regulations adopted by the board under (b) of

1 this section, examine and issue licenses to applicants;

2 (2) develop written guidelines to ensure that licensing requirements are
3 not unreasonably burdensome and the issuance of licenses is not unreasonably
4 withheld or delayed;

5 (3) after a hearing, impose disciplinary sanctions on persons who
6 violate this chapter or the regulations or orders of the board;

7 (4) adopt regulations ensuring that renewal of licenses is contingent on
8 proof of continued competency on the part of the licensee;

9 (5) under regulations adopted by the board, contract with private
10 professional organizations to establish an impaired medical professionals program to
11 identify, confront, evaluate, and treat persons licensed under this chapter who abuse
12 alcohol, other drugs, or other substances or are mentally ill or cognitively impaired;

13 (6) adopt regulations that establish guidelines for a physician or
14 physician **associate** [ASSISTANT] who is rendering a diagnosis, providing treatment,
15 or prescribing, dispensing, or administering a prescription drug to a person without
16 conducting a physical examination under AS 08.64.364; the guidelines must include a
17 nationally recognized model policy for standards of care of a patient who is at a
18 different location than the physician or physician **associate** [ASSISTANT];

19 (7) require that a licensee who has a federal Drug Enforcement
20 Administration registration number register with the controlled substance prescription
21 database under AS 17.30.200(n).

22 * **Sec. 9.** AS 08.64.106 is amended to read:

23 **Sec. 08.64.106. Delegation of routine medical duties.** The board shall adopt
24 regulations authorizing a physician, podiatrist, osteopath, or physician **associate**
25 [ASSISTANT] licensed under this chapter to delegate routine medical duties to an
26 agent of the physician, podiatrist, osteopath, or physician **associate** [ASSISTANT].
27 The regulations must

28 (1) require that an agent who is not licensed under this chapter may
29 perform duties delegated under this section only if the agent meets applicable
30 standards established by the board;

31 (2) require that a physician, podiatrist, osteopath, or physician

1 **associate** [ASSISTANT] may not delegate duties related to pain management and
 2 opioid use and addiction; and

3 (3) define the phrase "routine medical duties."

4 * **Sec. 10.** AS 08.64.107 is amended to read:

5 **Sec. 08.64.107. Regulation of physician associates [ASSISTANTS].** The
 6 board shall adopt regulations regarding the licensure of physician **associates**
 7 [ASSISTANTS] and the medical services that they may perform, including the

8 (1) educational and other qualifications, including education in pain
 9 management and opioid use and addiction;

10 (2) application and licensing procedures;

11 (3) scope of activities authorized; and

12 (4) responsibilities of the supervising or training physician.

13 * **Sec. 11.** AS 08.64.170(a) is amended to read:

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

16 (1) a physician **associate** [ASSISTANT] may examine, diagnose, or
 17 treat persons under the supervision, control, and responsibility of either a physician
 18 licensed under this chapter or a physician exempted from licensing under
 19 AS 08.64.370;

20 (2) a person who is licensed or authorized under another law of the
 21 state may engage in a practice that is authorized under that law; and

22 (3) a person may perform routine medical duties delegated under
 23 AS 08.64.106.

24 * **Sec. 12.** AS 08.64.360 is amended to read:

25 **Sec. 08.64.360. Penalty for practicing without a license or in violation of**
 26 **law.** Except for a physician **associate** [ASSISTANT] or a person licensed or
 27 authorized under another law of the state who engages in practices for which that
 28 person is licensed or authorized under that law, a person practicing medicine or
 29 osteopathy in the state without a valid license or permit is guilty of a class A
 30 misdemeanor. Each day of illegal practice is a separate offense.

31 * **Sec. 13.** AS 08.64.363(c) is amended by adding a new paragraph to read:

1 (4) "opioid overdose drug" has the meaning given in AS 17.20.085(g).

2 * **Sec. 14.** AS 08.64.363 is amended by adding a new subsection to read:

3 (d) A licensee who issues a prescription for an opioid to a patient shall offer
4 the patient a prescription for an opioid overdose drug if

5 (1) the prescription is for an opioid that exceeds a three-day supply;

6 (2) the prescription is for a total daily opioid dosage representing a
7 morphine milligram equivalent of 50 milligrams or more;

8 (3) the patient is concurrently prescribed a benzodiazepine; or

9 (4) the patient has a history of overdose or substance use disorder.

10 * **Sec. 15.** AS 08.64.364(a) is amended to read:

11 (a) The board may not impose disciplinary sanctions on a physician or
12 physician **associate** [ASSISTANT] for rendering a diagnosis, providing treatment, or
13 prescribing, dispensing, or administering a prescription drug that is not a controlled
14 substance to a person without conducting a physical examination if

15 (1) the physician, physician **associate** [ASSISTANT], or another
16 licensed health care provider in the medical practice is available to provide follow-up
17 care; and

18 (2) the physician or physician **associate** [ASSISTANT] requests that
19 the person consent to sending a copy of all records of the encounter to the person's
20 primary care provider if the prescribing physician or physician **associate**
21 [ASSISTANT] is not the person's primary care provider and, if the person consents,
22 the physician or physician **associate** [ASSISTANT] sends the records to the person's
23 primary care provider.

24 * **Sec. 16.** AS 08.64.364(b) is amended to read:

25 (b) The board may not impose disciplinary sanctions on a physician or
26 physician **associate** [ASSISTANT] for prescribing, dispensing, or administering a
27 prescription drug that is a controlled substance if the requirements under (a) of this
28 section and AS 08.64.363 are met.

29 * **Sec. 17.** AS 08.64.364(c) is amended to read:

30 (c) Notwithstanding (a) and (b) of this section,

31 (1) a physician may not prescribe, dispense, or administer an abortion-

1 inducing drug under (a) of this section unless the physician complies with
2 AS 18.16.010; and

3 (2) a physician or physician **associate** [ASSISTANT] may not
4 prescribe, dispense, or administer a prescription drug in response to an Internet
5 questionnaire or electronic mail message to a person with whom the physician or
6 physician **associate** [ASSISTANT] does not have a prior physician-patient
7 relationship.

8 * **Sec. 18.** AS 08.64.369(d) is amended to read:

9 (d) In this section, "health care professional" includes an emergency medical
10 technician certified under AS 18.08, health aide, physician, nurse, mobile intensive
11 care paramedic licensed under AS 18.08, and physician **associate** [ASSISTANT], but
12 does not include a practitioner of religious healing.

13 * **Sec. 19.** AS 08.65.140 is amended to read:

14 **Sec. 08.65.140. Required practices.** The board shall adopt regulations
15 regarding the practice of direct-entry midwifery. At a minimum, the regulations must
16 require that a certified direct-entry midwife

17 (1) recommend, before care or delivery of a client, that the client
18 undergo a physical examination performed by a physician, physician **associate**
19 [ASSISTANT], or advanced practice registered nurse who is licensed in this state;

20 (2) obtain informed consent from a client before onset of labor;

21 (3) comply with AS 18.15.150 regarding taking of blood samples,
22 AS 18.15.200 regarding screening of phenylketonuria (PKU), AS 18.50.160 regarding
23 birth registration, AS 18.50.230 regarding registration of deaths, AS 18.50.240
24 regarding fetal death registration, and regulations adopted by the Department of
25 Health concerning prophylactic treatment of the eyes of newborn infants;

26 (4) not knowingly deliver a woman with certain types of health
27 conditions, prior history, or complications as specified by the board.

28 * **Sec. 20.** AS 08.68.265 is amended to read:

29 **Sec. 08.68.265. Supervision of practical nurses.** A practical nurse shall work
30 under the supervision of a licensed registered or advanced practice registered nurse, a
31 licensed physician, a licensed physician **associate** [ASSISTANT], or a licensed

1 dentist.

2 * **Sec. 21.** AS 08.68.700(a) is amended to read:

3 (a) A registered nurse licensed under this chapter may make a determination
4 and pronouncement of death of a person under the following circumstances:

5 (1) an attending physician, an attending advanced practice registered
6 nurse, or an attending physician **associate** [ASSISTANT] has documented in the
7 person's medical or clinical record that the person's death is anticipated due to illness,
8 infirmity, or disease; this prognosis is valid for purposes of this section for not more
9 than 120 days from the date of the documentation;

10 (2) at the time of documentation under (1) of this subsection, the
11 physician, the advanced practice registered nurse, or the physician **associate**
12 [ASSISTANT] authorized in writing a specific registered nurse or nurses to make a
13 determination and pronouncement of the person's death; however, if the person is in a
14 health care facility and the health care facility has complied with (d) of this section,
15 the physician, the advanced practice registered nurse, or the physician **associate**
16 [ASSISTANT] may authorize all nurses employed by the facility to make a
17 determination and pronouncement of the person's death.

18 * **Sec. 22.** AS 08.68.700(b) is amended to read:

19 (b) A registered nurse who has determined and pronounced death under this
20 section shall document the clinical criteria for the determination and pronouncement in
21 the person's medical or clinical record and notify the physician, the advanced practice
22 registered nurse, or the physician **associate** [ASSISTANT] who determined that the
23 prognosis for the patient was for an anticipated death. The registered nurse shall sign
24 the death certificate, which must include the

25 (1) name of the deceased;

26 (2) presence of a contagious disease, if known; and

27 (3) date and time of death.

28 * **Sec. 23.** AS 08.68.700(c) is amended to read:

29 (c) Except as otherwise provided under AS 18.50.230, a physician or
30 physician **associate** [ASSISTANT] licensed under AS 08.64 or an advanced practice
31 registered nurse licensed under this chapter shall certify a death determined under (b)

1 of this section within 24 hours after the pronouncement by the registered nurse.

2 * **Sec. 24.** AS 08.68.700(d) is amended to read:

3 (d) In a health care facility in which a physician, an advanced practice
4 registered nurse, or a physician associate [ASSISTANT] chooses to proceed under (a)
5 of this section, written policies and procedures shall be adopted that provide for the
6 determination and pronouncement of death by a registered nurse authorized by a
7 physician, an advanced practice registered nurse, or a physician associate
8 [ASSISTANT] under this section. A registered nurse employed by a health care
9 facility and authorized by a physician, an advanced practice registered nurse, or a
10 physician associate [ASSISTANT] to make a determination and pronouncement of
11 death under this section may not make the determination or pronouncement unless the
12 facility has written policies and procedures implementing and ensuring compliance
13 with this section.

14 * **Sec. 25.** AS 08.68.705(d) is amended by adding a new paragraph to read:

15 (4) "opioid overdose drug" has the meaning given in AS 17.20.085(g).

16 * **Sec. 26.** AS 08.68.705 is amended by adding a new subsection to read:

17 (e) An advanced practice registered nurse who issues a prescription for an
18 opioid to a patient shall offer the patient a prescription for an opioid overdose drug if

19 (1) the prescription is for an opioid that exceeds a three-day supply;

20 (2) the prescription is for a total daily opioid dosage representing a
21 morphine milligram equivalent of 50 milligrams or more;

22 (3) the patient is concurrently prescribed a benzodiazepine; or

23 (4) the patient has a history of overdose or substance use disorder.

24 * **Sec. 27.** AS 08.72.276 is amended by adding new subsections to read:

25 (c) A licensee who issues a prescription for an opioid to a patient shall offer
26 the patient a prescription for an opioid overdose drug if

27 (1) the prescription is for an opioid that exceeds a three-day supply;

28 (2) the prescription is for a total daily opioid dosage representing a
29 morphine milligram equivalent of 50 milligrams or more;

30 (3) the patient is concurrently prescribed a benzodiazepine; or

31 (4) the patient has a history of overdose or substance use disorder.

1 (d) In this section, "opioid overdose drug" has the meaning given in
2 AS 17.20.085(g).

3 * **Sec. 28.** AS 08.80.030(b) is amended to read:

4 (b) In order to fulfill its responsibilities, the board has the powers necessary
5 for implementation and enforcement of this chapter, including the power to

6 (1) elect a president and secretary from its membership and adopt rules
7 for the conduct of its business;

8 (2) license by examination or by license transfer the applicants who are
9 qualified to engage in the practice of pharmacy;

10 (3) assist the department in inspections and investigations for
11 violations of this chapter, or of any other state or federal statute relating to the practice
12 of pharmacy;

13 (4) adopt regulations to carry out the purposes of this chapter;

14 (5) establish and enforce compliance with professional standards and
15 rules of conduct for pharmacists engaged in the practice of pharmacy;

16 (6) determine standards for recognition and approval of degree
17 programs of schools and colleges of pharmacy whose graduates shall be eligible for
18 licensure in this state, including the specification and enforcement of requirements for
19 practical training, including internships;

20 (7) establish for pharmacists and pharmacies minimum specifications
21 for the physical facilities, technical equipment, personnel, and procedures for the
22 storage, compounding, and dispensing of drugs or related devices, and for the
23 monitoring of drug therapy, including independent monitoring of drug therapy;

24 (8) enforce the provisions of this chapter relating to the conduct or
25 competence of pharmacists practicing in the state, and the suspension, revocation, or
26 restriction of licenses to engage in the practice of pharmacy;

27 (9) license and regulate the training, qualifications, and employment of
28 pharmacy interns and pharmacy technicians;

29 (10) license and regulate the qualifications of entities and individuals
30 engaged in the manufacture or distribution of drugs and related devices;

31 (11) establish and maintain a controlled substance prescription

1 database as provided in AS 17.30.200;

2 (12) establish standards for the independent prescribing and
3 administration of vaccines and related emergency medications under AS 08.80.168,
4 including the completion of an immunization training program approved by the board
5 and an epinephrine auto-injector training program under AS 17.22.020(b);

6 (13) establish standards for the independent prescribing and dispensing
7 by a pharmacist of an opioid overdose drug under AS 17.20.085, including the
8 completion of an opioid overdose training program approved by the board;

9 (14) require that a licensed pharmacist who **prescribes, administers,**
10 **or** dispenses a schedule II, III, or IV controlled substance under federal law to a
11 person in the state register with the controlled substance prescription database under
12 AS 17.30.200(n);

13 (15) establish the qualifications and duties of the executive
14 administrator and delegate authority to the executive administrator that is necessary to
15 conduct board business;

16 (16) license and inspect the facilities of pharmacies, manufacturers,
17 wholesale drug distributors, third-party logistics providers, and outsourcing facilities
18 located outside the state under AS 08.80.159;

19 (17) license Internet-based pharmacies providing services to residents
20 in the state;

21 (18) adopt regulations pertaining to retired pharmacist status.

22 * **Sec. 29.** AS 08.80.110 is amended to read:

23 **Sec. 08.80.110. Qualifications for licensure by examination.** An applicant
24 for licensure as a pharmacist shall

25 (1) be fluent in the reading, writing, and speaking of the English
26 language;

27 (2) be a graduate of a college in a degree program approved by the
28 board;

29 (3) pass an examination or examinations given by the board or
30 acceptable to the board under the score transfer process administered by the National
31 Association of Boards of Pharmacy;

1 (4) have completed internship training or another program that has
 2 been approved by the board or demonstrated to the board's satisfaction that the
 3 applicant has experience in the practice of pharmacy that meets or exceeds the
 4 minimum internship requirements of the board; **and**

5 **(5) receive education in pain management and opioid use and**
 6 **addiction, unless the applicant has demonstrated to the satisfaction of the board**
 7 **that the applicant does not currently hold a valid federal Drug Enforcement**
 8 **Administration registration number; an applicant may include past professional**
 9 **experience or professional education as proof of professional competence.**

10 * **Sec. 30.** AS 08.80.145 is amended to read:

11 **Sec. 08.80.145. Reciprocity; license transfer.** If another jurisdiction allows
 12 licensure in that jurisdiction of a pharmacist licensed in this state under conditions
 13 similar to those in this section, the board may license as a pharmacist in this state a
 14 person licensed as a pharmacist in the other jurisdiction if the person

15 (1) submits a written application to the board on a form required by the
 16 board;

17 (2) is at least 18 years of age;

18 (3) possesses at the time of the request for licensure as a pharmacist in
 19 this state the qualifications necessary to be eligible for licensure in this state;

20 (4) has engaged in the practice of pharmacy for at least one year
 21 immediately before applying for a license under this section;

22 (5) presents proof satisfactory to the board that the person is currently
 23 licensed as a pharmacist in the other jurisdiction and does not currently have a
 24 pharmacist license suspended, revoked, or otherwise restricted except for failure to
 25 apply for renewal or failure to obtain the required continuing education credits;

26 (6) has passed an examination approved by the board that tests the
 27 person's knowledge of Alaska laws relating to pharmacies and pharmacists and the
 28 regulations adopted under those laws; [AND]

29 (7) **meets the requirements of AS 08.80.110(5); and**

30 (8) pays all required fees.

31 * **Sec. 31.** AS 08.80.157(j) is amended to read:

1 (j) This section does not apply to the offices of physicians, osteopaths,
 2 podiatrists, physician **associates** [ASSISTANTS], advanced nurse practitioners,
 3 dentists, veterinarians, dispensing opticians, or optometrists.

4 * **Sec. 32.** AS 08.80.165 is amended to read:

5 **Sec. 08.80.165. Continuing education requirements.** The board shall
 6 establish requirements for continuing education in pharmacy that must be satisfied
 7 before a license issued under this chapter may be renewed. **The continuing education**
 8 **requirements must include at least two hours of education in pain management**
 9 **and opioid use and addiction during the concluding licensing period. The board**
 10 **may exempt a licensee from the requirement to receive at least two hours of**
 11 **education in pain management and opioid use and addiction if the licensee**
 12 **demonstrates to the satisfaction of the board that**

13 **(1) the licensee's practice does not include pain management and**
 14 **opioid prescription or administration; or**

15 **(2) the licensee does not currently hold a valid federal Drug**
 16 **Enforcement Administration registration number.**

17 * **Sec. 33.** AS 08.80.337(a) is amended to read:

18 (a) A pharmacist may, under a collaborative practice agreement with a written
 19 protocol approved by a practitioner **who is not a pharmacist**, provide patient care
 20 services. **The collaborative practice agreement must define the nature and scope**
 21 **of patient care services the pharmacist may provide under the agreement.**

22 * **Sec. 34.** AS 08.80.337(b) is amended to read:

23 (b) A pharmacist may independently provide patient care services for

24 (1) general health and wellness;

25 (2) disease prevention; or

26 (3) a condition that

27 (A) is minor and generally self limiting;

28 **(B) does not require a new diagnosis;**

29 **(C) requires a new diagnosis only if**

30 **(i) the pharmacist uses** [(B) HAS] a test [THAT IS
 31 USED] to guide **the pharmacist's** diagnosis or clinical decision-

1 making; and

2 (ii) the test is waived under 42 U.S.C. 263a (Clinical
3 Laboratory Improvement Amendments of 1988); or

4 (D) [(C)] falls under a statewide standing order from the chief
5 medical officer in the Department of Health.

6 * **Sec. 35.** AS 08.80.337(d) is amended to read:

7 (d) In this section, "patient care services"

8 (1) means medical care services, including the prescription or
9 administration of a drug or device to a patient, that are given in exchange for
10 compensation and intended to achieve outcomes related to the cure or prevention of a
11 disease, elimination or reduction of a patient's symptoms, or arresting or slowing of a
12 disease process;

13 (2) does not include the prescription or administration of the
14 following drugs unless the drug is being used for the treatment of an opioid use
15 disorder in a clinic:

16 (A) a schedule IA or IIA controlled substance under state
17 law or a schedule II controlled substance under federal law;

18 (B) a drug that may only be prescribed or administered
19 after completing a certified education program required by

20 (i) the manufacturer; or

21 (ii) the United States Food and Drug
22 Administration, including by a risk evaluation and mitigation
23 strategy; or

24 (C) a drug that is not generally available at pharmacies and
25 may only be dispensed at a pharmacy that

26 (i) is authorized by the manufacturer to dispense the
27 drug; or

28 (ii) meets a requirement to dispense the drug under
29 federal law.

30 * **Sec. 36.** AS 08.80.337 is amended by adding a new subsection to read:

31 (e) A pharmacist prescribing or administering a drug or device under this

1 section shall recognize the limits of the pharmacist's education, training, and
 2 experience and consult with and refer to other practitioners as appropriate.

3 * **Sec. 37.** AS 08.80.400 is amended to read:

4 **Sec. 08.80.400. Other licensees not affected.** This chapter does not affect the
 5 practice of medicine by a licensed medical doctor and does not limit a licensed
 6 medical doctor, osteopath, podiatrist, physician associate [ASSISTANT], advanced
 7 practice registered nurse, dentist, veterinarian, dispensing optician, or optometrist in
 8 supplying a patient with any medicinal preparation or article within the scope of the
 9 person's license.

10 * **Sec. 38.** AS 08.80.480(30) is amended to read:

11 (30) "practice of pharmacy" means the interpretation, evaluation, and
 12 dispensing of prescription drug orders in the patient's best interest; participation in
 13 drug and device selection, drug administration, drug regimen reviews, and drug or
 14 drug-related research; provision of patient counseling and the provision of those acts
 15 or services necessary to provide pharmaceutical care; the independent prescribing,
 16 dispensing, and administration of drugs in accordance with AS 08.80.168; providing
 17 patient care services in accordance with AS 08.80.337; the responsibility for
 18 compounding and labeling of drugs and devices except labeling by a manufacturer,
 19 repackager, or distributor of nonprescription drugs and commercially packaged legend
 20 drugs and devices; proper and safe storage of drugs and devices; and maintenance of
 21 proper records for them;

22 * **Sec. 39.** AS 08.80.480 is amended by adding a new paragraph to read:

23 (40) "opioid" includes the opium and opiate substances and opium and
 24 opiate derivatives listed in AS 11.71.140 and 11.71.160.

25 * **Sec. 40.** AS 09.55.560(2) is amended to read:

26 (2) "health care provider" means an acupuncturist licensed under
 27 AS 08.06; an audiologist or speech-language pathologist licensed under AS 08.11; a
 28 chiropractor licensed under AS 08.20; a dental hygienist licensed under AS 08.32; a
 29 dentist licensed under AS 08.36; a nurse licensed under AS 08.68; a dispensing
 30 optician licensed under AS 08.71; a naturopath licensed under AS 08.45; an
 31 optometrist licensed under AS 08.72; a pharmacist licensed under AS 08.80; a

1 physical therapist or occupational therapist licensed under AS 08.84; a physician or
 2 physician **associate** [ASSISTANT] licensed under AS 08.64; a podiatrist; a
 3 psychologist and a psychological associate licensed under AS 08.86; a hospital as
 4 defined in AS 47.32.900, including a governmentally owned or operated hospital; an
 5 employee of a health care provider acting within the course and scope of employment;
 6 an ambulatory surgical facility and other organizations whose primary purpose is the
 7 delivery of health care, including a health maintenance organization, individual
 8 practice association, integrated delivery system, preferred provider organization or
 9 arrangement, and a physical hospital organization;

10 * **Sec. 41.** AS 09.65.300(c)(1) is amended to read:

11 (1) "health care provider" means a physician, physician **associate**
 12 [ASSISTANT], dentist, dental hygienist, osteopath, optometrist, chiropractor,
 13 registered nurse, practical nurse, advanced practice registered nurse, naturopath,
 14 physical therapist, occupational therapist, marital and family therapist, psychologist,
 15 psychological associate, behavior analyst, assistant behavior analyst, licensed clinical
 16 social worker, athletic trainer, certified direct-entry midwife, licensed professional
 17 counselor, or licensed associate counselor;

18 * **Sec. 42.** AS 09.65.340(d)(1) is amended to read:

19 (1) "health care provider" means a licensed physician, osteopath,
 20 dentist, advanced nurse practitioner, physician **associate** [ASSISTANT], nurse, village
 21 health aide, or pharmacist operating within the scope of the health care provider's
 22 authority;

23 * **Sec. 43.** AS 09.68.120 is amended to read:

24 **Sec. 09.68.120. Definition of death.** An individual is considered dead if, in the
 25 opinion of a physician licensed or exempt from licensing under AS 08.64 or a
 26 registered nurse authorized to pronounce death under AS 08.68.700, based on
 27 acceptable medical standards, or in the opinion of a mobile intensive care paramedic,
 28 physician **associate** [ASSISTANT], or emergency medical technician authorized to
 29 pronounce death based on the medical standards in AS 18.08.089, the individual has
 30 sustained irreversible cessation of circulatory and respiratory functions, or irreversible
 31 cessation of all functions of the entire brain, including the brain stem. Death may be

1 pronounced in this circumstance before artificial means of maintaining respiratory and
2 cardiac function are terminated.

3 * **Sec. 44.** AS 11.41.470(1) is amended to read:

4 (1) "health care worker" includes a person who is or purports to be an
5 acupuncturist, advanced practice registered nurse, anesthesiologist, certified direct-
6 entry midwife, chiropractor, dentist, health aide, hypnotist, massage therapist, mental
7 health counselor, midwife, nurse, occupational therapist, occupational therapy
8 assistant, osteopath, naturopath, physical therapist, physical therapist assistant,
9 physician, physician **associate** [ASSISTANT], psychiatrist, psychological associate,
10 psychologist, radiologist, religious healing practitioner, surgeon, x-ray technician, or a
11 substantially similar position;

12 * **Sec. 45.** AS 11.71.900(20) is amended to read:

13 (20) "practitioner" means

14 (A) a physician, dentist, advanced practice registered nurse,
15 optometrist, veterinarian, scientific investigator, or other person licensed,
16 registered, or otherwise permitted to distribute, dispense, conduct research with
17 respect to, or to administer or use in teaching or chemical analysis a controlled
18 substance in the course of professional practice or research in the state;

19 **(B) a pharmacist prescribing or administering a controlled**
20 **substance in the course of professional practice in the state; or**

21 **(C)** [(B)] a pharmacy, hospital, or other institution licensed,
22 registered, or otherwise permitted to distribute, dispense, conduct research with
23 respect to, or to administer a controlled substance in the course of professional
24 practice or research in the state;

25 * **Sec. 46.** AS 12.55.135(k)(3) is amended to read:

26 (3) "medical professional" means a person who is an advanced practice
27 registered nurse, anesthesiologist, chiropractor, dental hygienist, dentist, health aide,
28 nurse, nurse aide, mental health counselor, osteopath, physician, physician **associate**
29 [ASSISTANT], psychiatrist, psychological associate, psychologist, radiologist,
30 surgeon, or x-ray technician, or who holds a substantially similar position.

31 * **Sec. 47.** AS 13.52.065(a) is amended to read:

1 (a) A physician, an advanced practice registered nurse, or a physician
2 **associate** [ASSISTANT] may issue a do not resuscitate order for a patient of the
3 physician, the advanced practice registered nurse, or the physician **associate**
4 [ASSISTANT] with the consent of the patient or the parent or guardian of the patient
5 if the patient is under 18 years of age. The physician, the advanced practice registered
6 nurse, or the physician **associate** [ASSISTANT] shall document the grounds for the
7 order in the patient's medical file.

8 * **Sec. 48.** AS 13.52.065(c) is amended to read:

9 (c) The department shall develop standardized designs and symbols for do not
10 resuscitate identification cards, forms, necklaces, and bracelets that signify, when
11 carried or worn, that the carrier or wearer is an individual for whom a physician, an
12 advanced practice registered nurse, or a physician **associate** [ASSISTANT] has issued
13 a do not resuscitate order.

14 * **Sec. 49.** AS 13.52.065(d) is amended to read:

15 (d) A health care provider other than a physician, an advanced practice
16 registered nurse, or a physician **associate** [ASSISTANT] shall comply with the
17 protocol adopted under (b) of this section for do not resuscitate orders when the health
18 care provider is presented with a do not resuscitate identification, an oral do not
19 resuscitate order issued directly by a physician, an advanced practice registered nurse,
20 or a physician **associate** [ASSISTANT] if the applicable hospital allows oral do not
21 resuscitate orders, or a written do not resuscitate order entered on and as required by a
22 form prescribed by the department.

23 * **Sec. 50.** AS 13.52.065(f) is amended to read:

24 (f) A do not resuscitate order may not be made ineffective unless a physician,
25 an advanced practice registered nurse, or a physician **associate** [ASSISTANT] revokes
26 the do not resuscitate order, a patient for whom the order is written and who has
27 capacity requests that the do not resuscitate order be revoked, or the patient for whom
28 the order is written is under 18 years of age and the parent or guardian of the patient
29 requests that the do not resuscitate order be revoked. Any physician, advanced practice
30 registered nurse, or physician **associate** [ASSISTANT] of a patient for whom a do not
31 resuscitate order is written may revoke the do not resuscitate order if the person for

1 whom the order is written requests that the physician, the advanced practice registered
2 nurse, or the physician **associate** [ASSISTANT] revoke the do not resuscitate order.

3 * **Sec. 51.** AS 13.52.080(a) is amended to read:

4 (a) A health care provider or health care institution that acts in good faith and
5 in accordance with generally accepted health care standards applicable to the health
6 care provider or institution is not subject to civil or criminal liability or to discipline
7 for unprofessional conduct for

8 (1) providing health care information in good faith under
9 AS 13.52.070;

10 (2) complying with a health care decision of a person based on a good
11 faith belief that the person has authority to make a health care decision for a patient,
12 including a decision to withhold or withdraw health care;

13 (3) declining to comply with a health care decision of a person based
14 on a good faith belief that the person then lacked authority;

15 (4) complying with an advance health care directive and assuming in
16 good faith that the directive was valid when made and has not been revoked or
17 terminated;

18 (5) participating in the withholding or withdrawal of cardiopulmonary
19 resuscitation under the direction or with the authorization of a physician, an advanced
20 practice registered nurse, or a physician **associate** [ASSISTANT] or upon discovery of
21 do not resuscitate identification **on** [UPON] an individual;

22 (6) causing or participating in providing cardiopulmonary resuscitation
23 or other life-sustaining procedures

24 (A) under AS 13.52.065(e) when an individual has made an
25 anatomical gift;

26 (B) because an individual has made a do not resuscitate order
27 ineffective under AS 13.52.065(f) or another provision of this chapter; or

28 (C) because the patient is a woman of childbearing age and
29 AS 13.52.055 applies; or

30 (7) acting in good faith under the terms of this chapter or the law of
31 another state relating to anatomical gifts.

1 * **Sec. 52.** AS 13.52.100(c) is amended to read:

2 (c) An individual who is a qualified patient, including an individual for whom
 3 a physician, an advanced practice registered nurse, or a physician **associate**
 4 [ASSISTANT] has issued a do not resuscitate order, has the right to make a decision
 5 regarding the use of cardiopulmonary resuscitation and other life-sustaining
 6 procedures as long as the individual is able to make the decision. If an individual who
 7 is a qualified patient, including an individual for whom a physician, advanced practice
 8 registered nurse, or physician **associate** [ASSISTANT] has issued a do not resuscitate
 9 order, is not able to make the decision, the protocol adopted under AS 13.52.065 for
 10 do not resuscitate orders governs a decision regarding the use of cardiopulmonary
 11 resuscitation and other life-sustaining procedures.

12 * **Sec. 53.** AS 13.52.300 is amended to read:

13 **Sec. 13.52.300. Optional form.** The following sample form may be used to
 14 create an advance health care directive. The other sections of this chapter govern the
 15 effect of this or any other writing used to create an advance health care directive. This
 16 form may be duplicated. This form may be modified to suit the needs of the person, or
 17 a different form that complies with this chapter may be used, including the mandatory
 18 witnessing requirements:

19 ADVANCE HEALTH CARE DIRECTIVE

20 Explanation

21 You have the right to give instructions about your own health
 22 care to the extent allowed by law. You also have the right to name
 23 someone else to make health care decisions for you to the extent
 24 allowed by law. This form lets you do either or both of these things. It
 25 also lets you express your wishes regarding the designation of your
 26 health care provider. If you use this form, you may complete or modify
 27 all or any part of it. You are free to use a different form if the form
 28 complies with the requirements of AS 13.52.

29 Part 1 of this form is a durable power of attorney for health
 30 care. A "durable power of attorney for health care" means the
 31 designation of an agent to make health care decisions for you. Part 1

1 lets you name another individual as an agent to make health care
2 decisions for you if you do not have the capacity to make your own
3 decisions or if you want someone else to make those decisions for you
4 now even though you still have the capacity to make those decisions.
5 You may name an alternate agent to act for you if your first choice is
6 not willing, able, or reasonably available to make decisions for you.
7 Unless related to you, your agent may not be an owner, operator, or
8 employee of a health care institution where you are receiving care.

9 Unless the form you sign limits the authority of your agent,
10 your agent may make all health care decisions for you that you could
11 legally make for yourself. This form has a place for you to limit the
12 authority of your agent. You do not have to limit the authority of your
13 agent if you wish to rely on your agent for all health care decisions that
14 may have to be made. If you choose not to limit the authority of your
15 agent, your agent will have the right, to the extent allowed by law, to

16 (a) consent or refuse consent to any care, treatment, service, or
17 procedure to maintain, diagnose, or otherwise affect a physical or
18 mental condition, including the administration or discontinuation of
19 psychotropic medication;

20 (b) select or discharge health care providers and institutions;

21 (c) approve or disapprove proposed diagnostic tests, surgical
22 procedures, and programs of medication;

23 (d) direct the provision, withholding, or withdrawal of artificial
24 nutrition and hydration and all other forms of health care; and

25 (e) make an anatomical gift following your death.

26 Part 2 of this form lets you give specific instructions for any
27 aspect of your health care to the extent allowed by law, except you may
28 not authorize mercy killing, assisted suicide, or euthanasia. Choices are
29 provided for you to express your wishes regarding the provision,
30 withholding, or withdrawal of treatment to keep you alive, including
31 the provision of artificial nutrition and hydration, as well as the

1 provision of pain relief medication. Space is provided for you to add to
 2 the choices you have made or for you to write out any additional
 3 wishes.

4 Part 3 of this form lets you express an intention to make an
 5 anatomical gift following your death.

6 Part 4 of this form lets you make decisions in advance about
 7 certain types of mental health treatment.

8 Part 5 of this form lets you designate a physician to have
 9 primary responsibility for your health care.

10 After completing this form, sign and date the form at the end
 11 and have the form witnessed by one of the two alternative methods
 12 listed below. Give a copy of the signed and completed form to your
 13 physician, to any other health care providers you may have, to any
 14 health care institution at which you are receiving care, and to any health
 15 care agents you have named. You should talk to the person you have
 16 named as your agent to make sure that the person understands your
 17 wishes and is willing to take the responsibility.

18 You have the right to revoke this advance health care directive
 19 or replace this form at any time, except that you may not revoke this
 20 declaration when you are determined not to be competent by a court, by
 21 two physicians, at least one of whom shall be a psychiatrist, or by both
 22 a physician and a professional mental health clinician. In this advance
 23 health care directive, "competent" means that you have the capacity

24 (1) to assimilate relevant facts and to appreciate and
 25 understand your situation with regard to those facts; and

26 (2) to participate in treatment decisions by means of a
 27 rational thought process.

28 PART 1

29 DURABLE POWER OF ATTORNEY FOR 30 HEALTH CARE DECISIONS

31 (1) DESIGNATION OF AGENT. I designate the

1 following individual as my agent to make health care decisions for me:

2 _____
3 (name of individual you choose as agent)

4 _____
5 (address) (city) (state) (zip code)

6 _____
7 (home telephone) (work telephone)

8 OPTIONAL: If I revoke my agent's authority or if my agent is
9 not willing, able, or reasonably available to make a health care decision
10 for me, I designate as my first alternate agent

11 _____
12 (name of individual you choose as first alternate agent)

13 _____
14 (address) (city) (state) (zip code)

15 _____
16 (home telephone) (work telephone)

17 OPTIONAL: If I revoke the authority of my agent and first
18 alternate agent or if neither is willing, able, or reasonably available to
19 make a health care decision for me, I designate as my second alternate
20 agent

21 _____
22 (name of individual you choose as second alternate agent)

23 _____
24 (address) (city) (state) (zip code)

25 _____
26 (home telephone) (work telephone)

27 (2) AGENT'S AUTHORITY. My agent is authorized
28 and directed to follow my individual instructions and my other wishes
29 to the extent known to the agent in making all health care decisions for
30 me. If these are not known, my agent is authorized to make these
31 decisions in accordance with my best interest, including decisions to

1 provide, withhold, or withdraw artificial hydration and nutrition and
 2 other forms of health care to keep me alive, except as I state here:

3 _____
 4 _____
 5 _____

6 (Add additional sheets if needed.)

7 Under this authority, "best interest" means that the benefits to you
 8 resulting from a treatment outweigh the burdens to you resulting from
 9 that treatment after assessing

10 (A) the effect of the treatment on your physical,
 11 emotional, and cognitive functions;

12 (B) the degree of physical pain or discomfort
 13 caused to you by the treatment or the withholding or withdrawal
 14 of the treatment;

15 (C) the degree to which your medical condition,
 16 the treatment, or the withholding or withdrawal of treatment,
 17 results in a severe and continuing impairment;

18 (D) the effect of the treatment on your life
 19 expectancy;

20 (E) your prognosis for recovery, with and
 21 without the treatment;

22 (F) the risks, side effects, and benefits of the
 23 treatment or the withholding of treatment; and

24 (G) your religious beliefs and basic values, to
 25 the extent that these may assist in determining benefits and
 26 burdens.

27 (3) WHEN AGENT'S AUTHORITY BECOMES
 28 EFFECTIVE. Except in the case of mental illness, my agent's authority
 29 becomes effective when my primary physician determines that I am
 30 unable to make my own health care decisions unless I mark the
 31 following box. In the case of mental illness, unless I mark the

1 following box, my agent's authority becomes effective when a court
 2 determines I am unable to make my own decisions, or, in an
 3 emergency, if my primary physician or another health care provider
 4 determines I am unable to make my own decisions. If I mark this box [
 5], my agent's authority to make health care decisions for me takes effect
 6 immediately.

7 (4) AGENT'S OBLIGATION. My agent shall make
 8 health care decisions for me in accordance with this durable power of
 9 attorney for health care, any instructions I give in Part 2 of this form,
 10 and my other wishes to the extent known to my agent. To the extent
 11 my wishes are unknown, my agent shall make health care decisions for
 12 me in accordance with what my agent determines to be in my best
 13 interest. In determining my best interest, my agent shall consider my
 14 personal values to the extent known to my agent.

15 (5) NOMINATION OF GUARDIAN. If a guardian of
 16 my person needs to be appointed for me by a court, I nominate the
 17 agent designated in this form. If that agent is not willing, able, or
 18 reasonably available to act as guardian, I nominate the alternate agents
 19 whom I have named under (1) above, in the order designated.

20 PART 2

21 INSTRUCTIONS FOR HEALTH CARE

22 If you are satisfied to allow your agent to determine what is best
 23 for you in making health care decisions, you do not need to fill out this
 24 part of the form. If you do fill out this part of the form, you may strike
 25 any wording you do not want. There is a state protocol that governs the
 26 use of do not resuscitate orders by physicians, advanced practice
 27 registered nurses, physician associates [ASSISTANTS], and other
 28 health care providers. You may obtain a copy of the protocol from the
 29 Alaska Department of Health. A "do not resuscitate order" means a
 30 directive from a licensed physician, advanced practice registered nurse,
 31 or physician associate [ASSISTANT] that emergency cardiopulmonary

1 resuscitation should not be administered to you.

2 (6) END-OF-LIFE DECISIONS. Except to the extent
3 prohibited by law, I direct that my health care providers and others
4 involved in my care provide, withhold, or withdraw treatment in
5 accordance with the choice I have marked below: (Check only one
6 box.)

7 (A) Choice To Prolong Life

8 I want my life to be prolonged as long as
9 possible within the limits of generally accepted health care
10 standards; OR

11 (B) Choice Not To Prolong Life

12 I want comfort care only and I do not want my
13 life to be prolonged with medical treatment if, in the judgment
14 of my physician, I have (check all choices that represent your
15 wishes)

16 (i) a condition of permanent
17 unconsciousness: a condition that, to a high degree of
18 medical certainty, will last permanently without
19 improvement; in which, to a high degree of medical
20 certainty, thought, sensation, purposeful action, social
21 interaction, and awareness of myself and the
22 environment are absent; and for which, to a high degree
23 of medical certainty, initiating or continuing life-
24 sustaining procedures for me, in light of my medical
25 outcome, will provide only minimal medical benefit for
26 me; or

27 (ii) a terminal condition: an
28 incurable or irreversible illness or injury that without the
29 administration of life-sustaining procedures will result in
30 my death in a short period of time, for which there is no
31 reasonable prospect of cure or recovery, that imposes

1 severe pain or otherwise imposes an inhumane burden
2 on me, and for which, in light of my medical condition,
3 initiating or continuing life-sustaining procedures will
4 provide only minimal medical benefit;

5 [] Additional instructions: _____
6 _____

7 (C) Artificial Nutrition and Hydration. If I am
8 unable to safely take nutrition, fluids, or nutrition and fluids
9 (check your choices or write your instructions),

10 [] I wish to receive artificial nutrition and
11 hydration indefinitely;

12 [] I wish to receive artificial nutrition and
13 hydration indefinitely, unless it clearly increases my suffering
14 and is no longer in my best interest;

15 [] I wish to receive artificial nutrition and
16 hydration on a limited trial basis to see if I can improve;

17 [] In accordance with my choices in (6)(B)
18 above, I do not wish to receive artificial nutrition and hydration.

19 [] Other instructions: _____
20 _____

21 (D) Relief from Pain.

22 [] I direct that adequate treatment be
23 provided at all times for the sole purpose of the
24 alleviation of pain or discomfort; or

25 [] I give these instructions:
26 _____
27 _____

28 (E) Should I become unconscious and I
29 am pregnant, I direct that _____
30 _____
31 _____

1 (7) OTHER WISHES. (If you do not agree with any of
2 the optional choices above and wish to write your own, or if you wish
3 to add to the instructions you have given above, you may do so here.) I
4 direct that

5 _____
6 _____
7 Conditions or limitations: _____
8 _____.

9 (Add additional sheets if needed.)

10 PART 3

11 ANATOMICAL GIFT AT DEATH

12 (OPTIONAL)

13 If you are satisfied to allow your agent to determine whether to
14 make an anatomical gift at your death, you do not need to fill out this
15 part of the form.

16 (8) Upon my death: (mark applicable box)

17 [] (A) I give any needed organs, tissues, or
18 other body parts, OR

19 [] (B) I give the following organs, tissues, or
20 other body parts only _____
21 _____

22 [] (C) My gift is for the following purposes
23 (mark any of the following you want):

24 [] (i) transplant;

25 [] (ii) therapy;

26 [] (iii) research;

27 [] (iv) education.

28 [] (D) I refuse to make an anatomical gift.

29 PART 4

30 MENTAL HEALTH TREATMENT

31 This part of the declaration allows you to make decisions in

1 advance about mental health treatment. The instructions that you
2 include in this declaration will be followed only if a court, two
3 physicians that include a psychiatrist, or a physician and a professional
4 mental health clinician believe that you are not competent and cannot
5 make treatment decisions. Otherwise, you will be considered to be
6 competent and to have the capacity to give or withhold consent for the
7 treatments.

8 If you are satisfied to allow your agent to determine what is best
9 for you in making these mental health decisions, you do not need to fill
10 out this part of the form. If you do fill out this part of the form, you
11 may strike any wording you do not want.

12 (9) PSYCHOTROPIC MEDICATIONS. If I do not
13 have the capacity to give or withhold informed consent for mental
14 health treatment, my wishes regarding psychotropic medications are as
15 follows:

16 _____ I consent to the administration of the following
17 medications: _____

18 _____ I do not consent to the administration of the
19 following medications: _____

20 Conditions or limitations: _____
21 _____.

22 (10) ELECTROCONVULSIVE TREATMENT. If I do
23 not have the capacity to give or withhold informed consent for mental
24 health treatment, my wishes regarding electroconvulsive treatment are
25 as follows:

26 _____ I consent to the administration of electroconvulsive
27 treatment.

28 _____ I do not consent to the administration of
29 electroconvulsive treatment.

30 Conditions or limitations: _____
31 _____.

1 (11) ADMISSION TO AND RETENTION IN
2 FACILITY. If I do not have the capacity to give or withhold informed
3 consent for mental health treatment, my wishes regarding admission to
4 and retention in a mental health facility for mental health treatment are
5 as follows:

6 _____ I consent to being admitted to a mental health facility
7 for mental health treatment for up to _____ days. (The number of
8 days not to exceed 17.)

9 _____ I do not consent to being admitted to a mental health
10 facility for mental health treatment.

11 Conditions or limitations: _____

12 _____.

13 OTHER WISHES OR INSTRUCTIONS

14 _____

15 _____

16 _____

17 Conditions or limitations: _____

18 _____.

19 PART 5

20 PRIMARY PHYSICIAN

21 (OPTIONAL)

22 (12) I designate the following physician as my primary
23 physician:

24 _____

25 (name of physician)

26 _____

27 (address) (city) (state) (zip code)

28 _____

29 (telephone)

30 OPTIONAL: If the physician I have designated above is
31 not willing, able, or reasonably available to act as my primary

1 physician, I designate the following physician as my primary physician:

2 _____
3 (name of physician)

4 _____
5 (address) (city) (state) (zip code)

6 _____
7 (telephone)

8 (13) EFFECT OF COPY. A copy of this form has the
9 same effect as the original.

10 (14) SIGNATURES. Sign and date the form here:

11 _____
12 (date) (sign your name)

13 _____
14 (print your name)

15 _____
16 (address) (city) (state) (zip code)

17 (15) WITNESSES. This advance care health directive
18 will not be valid for making health care decisions unless it is

19 (A) signed by two qualified adult witnesses who
20 are personally known to you and who are present when you sign
21 or acknowledge your signature; the witnesses may not be a
22 health care provider employed at the health care institution or
23 health care facility where you are receiving health care, an
24 employee of the health care provider who is providing health
25 care to you, an employee of the health care institution or health
26 care facility where you are receiving health care, or the person
27 appointed as your agent by this document; at least one of the
28 two witnesses may not be related to you by blood, marriage, or
29 adoption or entitled to a portion of your estate upon your death
30 under your will or codicil; or

31 (B) acknowledged before a notary public in the

1 state.

2 ALTERNATIVE NO. 1

3 Witness Who is Not Related to or a Devisee of the Principal

4 I swear under penalty of perjury under AS 11.56.200
5 that the principal is personally known to me, that the principal signed or
6 acknowledged this durable power of attorney for health care in my
7 presence, that the principal appears to be of sound mind and under no
8 duress, fraud, or undue influence, and that I am not

9 (1) a health care provider employed at the health care
10 institution or health care facility where the principal is receiving health
11 care;

12 (2) an employee of the health care provider providing
13 health care to the principal;

14 (3) an employee of the health care institution or health
15 care facility where the principal is receiving health care;

16 (4) the person appointed as agent by this document;

17 (5) related to the principal by blood, marriage, or
18 adoption; or

19 (6) entitled to a portion of the principal's estate upon the
20 principal's death under a will or codicil.

21 _____
22 (date) (signature of witness)

23 _____
24 (printed name of witness)

25 _____
26 (address) (city) (state) (zip code)

27 Witness Who May be Related to or a Devisee of the Principal

28 I swear under penalty of perjury under AS 11.56.200
29 that the principal is personally known to me, that the principal signed or
30 acknowledged this durable power of attorney for health care in my
31 presence, that the principal appears to be of sound mind and under no

1 duress, fraud, or undue influence, and that I am not

2 (1) a health care provider employed at the health care
3 institution or health care facility where the principal is receiving health
4 care;

5 (2) an employee of the health care provider who is
6 providing health care to the principal;

7 (3) an employee of the health care institution or health
8 care facility where the principal is receiving health care; or

9 (4) the person appointed as agent by this document.

10 _____
11 (date) (signature of witness)

12 _____
13 (printed name of witness)

14 _____
15 (address) (city) (state) (zip code)

16 ALTERNATIVE NO. 2

17 State of Alaska

18 _____ Judicial District

19 On this ____ day of _____, in the year
20 _____, before me, _____

21 (insert name of notary public) appeared

22 _____, personally known to me (or

23 proved to me on the basis of satisfactory evidence) to be the person

24 whose name is subscribed to this instrument, and acknowledged that

25 the person executed it.

26 Notary Seal

27 _____
28 (signature of notary public)

29 * **Sec. 54.** AS 13.52.390(13) is amended to read:

30 (13) "do not resuscitate order" means a directive from a licensed
31 physician, advanced practice registered nurse, or physician **associate** [ASSISTANT]

1 that emergency cardiopulmonary resuscitation should not be administered to a
2 qualified patient;

3 * **Sec. 55.** AS 13.52.390(24) is amended to read:

4 (24) "life-sustaining procedures" means any medical treatment,
5 procedure, or intervention that, in the judgment of the primary physician, advanced
6 practice registered nurse, or physician **associate** [ASSISTANT], when applied to a
7 patient with a qualifying condition, would not be effective to remove the qualifying
8 condition, would serve only to prolong the dying process, or, when administered to a
9 patient with a condition of permanent unconsciousness, may keep the patient alive but
10 is not expected to restore consciousness; in this paragraph, "medical treatment,
11 procedure, or intervention" includes assisted ventilation, renal dialysis, surgical
12 procedures, blood transfusions, and the administration of drugs, including antibiotics,
13 or artificial nutrition and hydration;

14 * **Sec. 56.** AS 13.52.390(31) is amended to read:

15 (31) "physician **associate** [ASSISTANT]" means an individual
16 licensed under AS 08.64.107.

17 * **Sec. 57.** AS 14.30.141(e) is amended to read:

18 (e) In this section, "health care provider" means a licensed physician,
19 advanced practice registered nurse, physician **associate** [ASSISTANT], village health
20 aide, or pharmacist operating within the scope of the health care provider's authority.

21 * **Sec. 58.** AS 17.20.085(g)(1) is amended to read:

22 (1) "health care provider" means a licensed physician, osteopath,
23 dentist, advanced nurse practitioner, physician **associate** [ASSISTANT], nurse, village
24 health aide, or pharmacist operating within the scope of the health care provider's
25 authority;

26 * **Sec. 59.** AS 18.08.087 is amended to read:

27 **Sec. 18.08.087. Disclosure of medical records.** When requested for the
28 purpose of evaluating the performance of an emergency medical technician, mobile
29 intensive care paramedic, or physician who provided emergency medical care or other
30 assistance to a sick or injured person, a licensed physician, advanced practice
31 registered nurse, or physician **associate** [ASSISTANT] may disclose to an emergency

1 medical technician, a mobile intensive care paramedic, or physician the medical or
2 hospital records of a sick or injured person to whom the paramedic, technician, or
3 physician is providing or has rendered emergency medical care or assistance.
4 However, the disclosing physician, advanced practice registered nurse, or physician
5 **associate** [ASSISTANT] shall limit disclosure under this section to the records that
6 are considered necessary by the discloser for evaluation of the paramedic's,
7 technician's, or physician's performance in providing the emergency medical care or
8 assistance. A mobile intensive care paramedic, emergency medical care technician, or
9 physician to whom confidential records are disclosed under this section may not
10 further disclose the information to a person not entitled to receive that information
11 under this section or another law.

12 * **Sec. 60.** AS 18.08.089(a) is amended to read:

13 (a) A mobile intensive care paramedic licensed under this chapter, a physician
14 **associate** [ASSISTANT] registered or licensed under AS 08.64.107, or an emergency
15 medical technician certified under this chapter may make a determination and
16 pronouncement of death of a person under the following circumstances:

17 (1) the mobile intensive care paramedic or emergency medical
18 technician is an active member of an emergency medical service certified under this
19 chapter;

20 (2) neither a physician licensed under AS 08.64 nor a physician
21 exempt from licensure under AS 08.64 is immediately available for consultation by
22 radio or telephone communications;

23 (3) the mobile intensive care paramedic, physician **associate**
24 [ASSISTANT], or emergency medical technician has determined, based on acceptable
25 medical standards, that the person has sustained irreversible cessation of circulatory
26 and respiratory functions.

27 * **Sec. 61.** AS 18.08.089(b) is amended to read:

28 (b) A mobile intensive care paramedic, physician **associate** [ASSISTANT], or
29 emergency medical technician who has determined and pronounced death under this
30 section shall document the clinical criteria for the determination and pronouncement
31 on the person's emergency medical service report form and notify the appropriate

1 medical director or collaborative physician as soon as communication can be
 2 established. The paramedic, physician **associate** [ASSISTANT], or emergency
 3 medical technician shall provide to the person who signs the death certificate the

4 (1) name of the deceased;

5 (2) presence of a contagious disease, if known; and

6 (3) date and time of death.

7 * **Sec. 62.** AS 18.08.089(c) is amended to read:

8 (c) Except as otherwise provided under AS 18.50.230, a physician licensed
 9 under AS 08.64 shall certify a death determined under (b) of this section within 24
 10 hours after the pronouncement by the mobile intensive care paramedic, physician
 11 **associate** [ASSISTANT], or emergency medical technician.

12 * **Sec. 63.** AS 18.15.310(a) is amended to read:

13 (a) The withdrawal of blood for a test under AS 18.15.300 - 18.15.320 shall be
 14 performed in a medically approved manner. Only a physician or physician **associate**
 15 [ASSISTANT] licensed under AS 08.64, registered or advanced practice registered
 16 nurse, licensed practical nurse, or certified emergency medical technician may
 17 withdraw blood specimens for the purposes of AS 18.15.300 - 18.15.320.

18 * **Sec. 64.** AS 18.15.395(11) is amended to read:

19 (11) "health care practitioner" means a physician, advanced practice
 20 registered nurse, or physician **associate** [ASSISTANT] licensed or otherwise
 21 authorized to practice their respective professions in this state;

22 * **Sec. 65.** AS 18.15.395(12) is amended to read:

23 (12) "health care provider" means any person that provides health care
 24 services; "health care provider" includes a hospital, medical clinic or office, special
 25 care facility, medical laboratory, physician, pharmacist, dentist, physician **associate**
 26 [ASSISTANT], nurse, paramedic, emergency medical or laboratory technician,
 27 community health worker, and ambulance and emergency medical worker;

28 * **Sec. 66.** AS 18.20.095(e)(2) is amended to read:

29 (2) "licensed staff member" means a person who is employed by the
 30 hospital to provide direct patient care and who is licensed or certified in the state as a
 31 physician or physician **associate** [ASSISTANT] under AS 08.64, direct-entry midwife

1 under AS 08.65, nurse or nurse aide under AS 08.68, or physical therapist or
2 occupational therapist under AS 08.84;

3 * **Sec. 67.** AS 18.29.190(9) is amended to read:

4 (9) "tier II health care professional" means a person who spends not
5 less than 50 percent of the person's time on direct patient health care services and who
6 is licensed or exempt from licensure in the state as a dental hygienist, advanced
7 practice registered nurse, registered nurse, physician **associate** [ASSISTANT],
8 physical therapist, professional counselor, associate counselor, board certified
9 behavior analyst, marital and family therapist, clinical social worker, or other health
10 care professional as determined by the commissioner;

11 * **Sec. 68.** AS 18.50.230(c) is amended to read:

12 (c) The medical certification shall be completed and signed within 24 hours
13 after death by the physician, the advanced practice registered nurse, or the physician
14 **associate** [ASSISTANT] in charge of the patient's care for the illness or condition that
15 resulted in death except when an official inquiry or inquest is required and except as
16 provided by regulation in special problem cases.

17 * **Sec. 69.** AS 18.65.310(m) is amended to read:

18 (m) The department shall provide a method for a person to designate
19 voluntarily on an identification card that the person has a disability, including a
20 cognitive, mental, neurological, or physical disability, or a combination of those
21 disabilities. The department shall create a discreet symbol to place on the
22 identification card of a person requesting the designation. The method must provide a
23 means by which the person may cancel the designation. The department may not
24 charge a fee solely for the designation. To receive the designation, the person shall
25 provide proof of the disability from a person licensed as a physician or physician
26 **associate** [ASSISTANT] under AS 08.64, as a naturopath under AS 08.45, as an
27 advanced practice registered nurse under AS 08.68, or as a licensed psychologist
28 under AS 08.86. Notwithstanding (a) of this section, the department may charge a fee
29 of \$5 for replacement of a valid identification card with a new identification card with
30 a disability designation and may charge a fee of \$5 for replacement of an identification
31 card with a disability designation with a new identification card without a disability

1 designation.

2 * **Sec. 70.** AS 18.67.020(a) is amended to read:

3 (a) The Violent Crimes Compensation Board is composed of three members to
4 be appointed by the governor. One of the members shall be designated as chair by the
5 governor. At least one member must be a medical or osteopathic physician, a
6 physician **associate** [ASSISTANT], or an advanced nurse practitioner licensed to
7 practice in this state or retired from practice in this state, and one member must be an
8 attorney licensed to practice in this state or retired from practice in this state.

9 * **Sec. 71.** AS 21.36.090(d) is amended to read:

10 (d) Except to the extent necessary to comply with AS 21.42.365 and
11 AS 21.56, a person may not practice or permit unfair discrimination against a person
12 who provides a service covered under a group health insurance policy that extends
13 coverage on an expense incurred basis, or under a group service or indemnity type
14 contract issued by a health maintenance organization or a nonprofit corporation, if the
15 service is within the scope of the provider's occupational license. In this subsection,
16 "provider" means a state licensed physician, physician **associate** [ASSISTANT],
17 dentist, osteopath, optometrist, chiropractor, advanced practice registered nurse,
18 pharmacist, naturopath, physical therapist, occupational therapist, marital and family
19 therapist, psychologist, psychological associate, licensed clinical social worker,
20 licensed professional counselor, licensed associate counselor, certified direct-entry
21 midwife, or dental hygienist holding an advanced practice permit.

22 * **Sec. 72.** AS 21.42.351(b)(2) is amended to read:

23 (2) "health care professional" means a health aide, physician, nurse,
24 and physician **associate** [ASSISTANT], but does not include a practitioner of
25 religious healing;

26 * **Sec. 73.** AS 23.30.395(3) is amended to read:

27 (3) "attending physician" means one of the following designated by the
28 employee under AS 23.30.095(a) or (b):

- 29 (A) a licensed medical doctor;
30 (B) a licensed doctor of osteopathy;
31 (C) a licensed dentist or dental surgeon;

1 (D) a licensed physician associate [ASSISTANT] acting under
 2 supervision of a licensed medical doctor or doctor of osteopathy;

3 (E) a licensed advanced practice registered nurse; or

4 (F) a licensed chiropractor;

5 * **Sec. 74.** AS 28.10.181(d) is amended to read:

6 (d) Vehicles owned by veterans with disabilities, including persons disabled in
 7 the line of duty while serving in the Alaska Territorial Guard, or other persons with
 8 disabilities. Upon the request of a person with a disability that limits or impairs the
 9 ability to walk, as defined in 23 C.F.R. 1235.2, the department shall (1) register one
 10 motor vehicle in the name of the person without charge; and (2) issue a specially
 11 designed registration plate that displays (A) recognition of the disabled veteran if the
 12 applicant's disability originated from the applicant's service with the Alaska Territorial
 13 Guard or the armed forces of the United States; (B) the international symbol of
 14 accessibility (the wheelchair logo); and (C) if the applicant is a veteran, the Alaska and
 15 United States flags and red, white, and blue colors. A person who is not otherwise
 16 qualified under this subsection, but who meets the qualifications of a disabled veteran
 17 under AS 29.45.030(i), may register one motor vehicle without charge, and the
 18 department shall issue a specially designed registration plate that displays recognition
 19 of the disabled veteran that does not display the international symbol of accessibility
 20 and does not carry with it special parking privileges. A disabled veteran who
 21 otherwise qualifies for a registration plate under this subsection may elect to receive a
 22 plate under (p) or (q) of this section for which the person is otherwise qualified that
 23 does not display the international symbol of accessibility and does not carry with it
 24 special parking privileges. A disabled person who otherwise qualifies for a registration
 25 plate under (2)(B) of this subsection may elect to receive a plate under another
 26 provision of this section for which the person is otherwise qualified that does not
 27 display the international symbol of accessibility and does not carry with it special
 28 parking privileges. For purposes of this subsection, proof of disability may be
 29 provided by a person licensed as a speech-language pathologist under AS 08.11, as a
 30 chiropractor under AS 08.20, as a physician or physician associate [ASSISTANT]
 31 under AS 08.64, as an advanced practice registered nurse under AS 08.68, or as a

1 physical therapist or occupational therapist under AS 08.84.

2 * **Sec. 75.** AS 28.15.111(d) is amended to read:

3 (d) The department shall provide a method, at the time that a driver's license is
 4 issued, by which the owner of a license may voluntarily designate on the license that
 5 the owner has a disability, including a cognitive, mental, neurological, or physical
 6 disability, or a combination of those disabilities. The department shall create a discreet
 7 symbol to place on the driver's license of a person requesting the designation. The
 8 method must provide a means by which the owner may cancel the designation. The
 9 department may not charge a fee solely for the designation. To receive the designation,
 10 the person shall provide proof of the disability from a person licensed as a physician or
 11 physician **associate** [ASSISTANT] under AS 08.64, as a naturopath under AS 08.45,
 12 as an advanced practice nurse under AS 08.68, or as a licensed psychologist under
 13 AS 08.86. The department may charge a fee of \$5 for replacement of a valid driver's
 14 license with a new driver's license with a disability designation and may charge a fee
 15 of \$5 for replacement of a driver's license with a disability designation with a new
 16 driver's license without a disability designation.

17 * **Sec. 76.** AS 33.30.901(10) is amended to read:

18 (10) "health care provider" means

19 (A) a physician **associate** [ASSISTANT] licensed to practice in
 20 the state and working under the direct supervision of a licensed physician or
 21 psychiatrist;

22 (B) a mental health professional as defined in AS 47.30.915; or

23 (C) an advanced practice registered nurse as defined in
 24 AS 08.68.850;

25 * **Sec. 77.** AS 47.17.290(14) is amended to read:

26 (14) "practitioner of the healing arts" includes athletic trainers,
 27 chiropractors, mental health counselors, social workers, dental hygienists, dentists,
 28 health aides, nurses, nurse practitioners, certified nurse aides, occupational therapists,
 29 occupational therapy assistants, optometrists, osteopaths, naturopaths, physical
 30 therapists, physical therapist assistants, physicians, physician **associates**
 31 [ASSISTANTS], psychiatrists, psychologists, psychological associates, audiologists

1 and speech-language pathologists licensed under AS 08.11, hearing aid dealers
 2 licensed under AS 08.55, marital and family therapists licensed under AS 08.63,
 3 behavior analysts, assistant behavior analysts, religious healing practitioners,
 4 acupuncturists, and surgeons;

5 * **Sec. 78.** AS 47.30.705(a) is amended to read:

6 (a) A peace officer, health officer, mental health professional, or physician
 7 **associate** [ASSISTANT] licensed by the State Medical Board to practice in this state
 8 who has probable cause to believe that a person is gravely disabled or is suffering
 9 from mental illness and is likely to cause serious harm to self or others of such
 10 immediate nature that considerations of safety do not allow initiation of involuntary
 11 commitment procedures set out in AS 47.30.700, may cause the person to be taken
 12 into custody by a peace officer or health officer and delivered to the nearest crisis
 13 stabilization center, crisis residential center, evaluation facility, or treatment facility. A
 14 person taken into custody for emergency evaluation may not be placed in a jail or
 15 other correctional facility except for protective custody purposes and only while
 16 awaiting transportation to a crisis stabilization center, crisis residential center,
 17 evaluation facility, or treatment facility. However, protective custody under this
 18 section may not include placement of a minor in a jail or secure facility. The peace
 19 officer, health officer, mental health professional, or physician **associate**
 20 [ASSISTANT] shall complete an application for examination of the person in custody
 21 and be interviewed by a mental health professional at the crisis stabilization center,
 22 crisis residential center, evaluation facility, or treatment facility.

23 * **Sec. 79.** AS 47.30.838(a) is amended to read:

24 (a) Except as provided in (c) and (d) of this section, an evaluation facility or
 25 designated treatment facility may administer psychotropic medication to a patient
 26 without the patient's informed consent, regardless of whether the patient is capable of
 27 giving informed consent, only if

28 (1) there is a crisis situation, or an impending crisis situation, that
 29 requires immediate use of the medication to preserve the life of, or prevent significant
 30 physical harm to, the patient or another person, as determined by a physician,
 31 physician **associate** [ASSISTANT], or advanced practice registered nurse; the

1 behavior or condition of the patient giving rise to a crisis under this paragraph and the
 2 staff's response to the behavior or condition must be documented in the patient's
 3 medical record; the documentation must include an explanation of alternative
 4 responses to the crisis that were considered or attempted by the staff and why those
 5 responses were not sufficient; and

6 (2) the medication is ordered by a physician, physician **associate**
 7 [ASSISTANT], or advanced practice registered nurse; the order

8 (A) may be written or oral and may be received by telephone,
 9 facsimile machine, or in person;

10 (B) may include an initial dosage and may authorize additional,
 11 as needed, doses; if additional, as needed, doses are authorized, the order must
 12 specify the medication, the quantity of each authorized dose, the method of
 13 administering the medication, the maximum frequency of administration, the
 14 specific conditions under which the medication may be given, and the
 15 maximum amount of medication that may be administered to the patient in a
 16 24-hour period;

17 (C) is valid for only 24 hours and may be renewed by a
 18 physician, physician **associate** [ASSISTANT], or advanced practice registered
 19 nurse for a total of 72 hours, including the initial 24 hours, only after a
 20 personal assessment of the patient's status and a determination that there is still
 21 a crisis situation as described in (1) of this subsection; upon renewal of an
 22 order under this subparagraph, the facts supporting the renewal shall be written
 23 into the patient's medical record.

24 * **Sec. 80.** AS 47.37.180(b) is amended to read:

25 (b) The certifying physician, physician **associate** [ASSISTANT], advanced
 26 practice registered nurse, spouse, guardian, or relative of the person to be committed,
 27 or any other responsible person, may make a written application for commitment
 28 under this section, directed to the administrator of the approved public treatment
 29 facility. The application must state facts to support the need for emergency treatment
 30 and be accompanied by a physician's, physician **associate's** [ASSISTANT'S], or
 31 advanced practice registered nurse's certificate supporting the need for emergency

1 treatment and stating that the physician, physician associate [ASSISTANT], or
2 advanced practice registered nurse has examined the person sought to be committed
3 within two days before the certificate's date.

4 * **Sec. 81.** AS 47.37.180(f) is amended to read:

5 (f) A copy of the written application for commitment and of the physician's,
6 physician associate's [ASSISTANT'S], or advanced practice registered nurse's
7 certificate, and a written explanation of the person's right to legal counsel, shall be
8 given to the person within 24 hours after commitment by the administrator, who shall
9 provide a reasonable opportunity for the person to consult with legal counsel.

10 * **Sec. 82.** AS 47.37.190(a) is amended to read:

11 (a) A spouse or guardian, a relative, the certifying physician, physician
12 associate [ASSISTANT], advanced practice registered nurse, or the administrator in
13 charge of an approved public treatment facility may petition the court for a 30-day
14 involuntary commitment order. The petition must allege that the person is an alcoholic
15 or drug abuser who (1) has threatened, attempted to inflict, or inflicted physical harm
16 on another and that unless committed is likely to inflict physical harm on another; or
17 (2) is incapacitated by alcohol or drugs. A refusal to undergo treatment does not
18 constitute evidence of lack of judgment as to the need for treatment. The petition must
19 be accompanied by a certificate of a licensed physician, physician associate
20 [ASSISTANT], or advanced practice registered nurse who has examined the person
21 within two days before submission of the petition, unless the person whose
22 commitment is sought has refused to submit to a medical examination, in which case
23 the fact of refusal must be alleged in the petition. The certificate must set out the
24 physician's, physician associate's [ASSISTANT'S], or advanced practice registered
25 nurse's findings of the examination in support of the allegations of the petition.

26 * **Sec. 83.** AS 47.37.200(a) is amended to read:

27 (a) At the hearing for a 30-day commitment required under AS 47.37.190(b),
28 the court shall hear all relevant testimony, including, if possible, the testimony of at
29 least one person who has examined the person whose commitment is sought under
30 AS 47.37.180(b) or 47.37.190(a). The person whose commitment is sought shall be
31 present unless the court believes that being present is likely to be injurious to the

1 person, in which case the court may conduct the hearing telephonically. The court may
2 examine the person in open court, or, if advisable, examine the person out of court. If
3 the person has refused to be examined under AS 47.37.180(b) or 47.37.190(a), the
4 person shall be given an opportunity to request examination by a court-appointed
5 licensed physician, physician associate [ASSISTANT], or advanced practice
6 registered nurse. If the person fails to request a medical examination and there is
7 sufficient evidence to believe that the allegations of the petition are true, or, if the
8 court believes that more medical evidence is necessary, the court may issue a
9 temporary order committing the person to a private or public facility for a period of
10 not more than five days for purposes of a diagnostic examination.

11 * **Sec. 84.** AS 08.80.337(c) is repealed.

12 * **Sec. 85.** The uncodified law of the State of Alaska is amended by adding a new section to
13 read:

14 REVISOR'S INSTRUCTION. If SB 89, as passed by the Thirty-Fourth Alaska State
15 Legislature, is enacted into law, the revisor of statutes shall replace all occurrences of
16 "physician assistant" in SB 89 with "physician associate," except for occurrences of
17 "physician assistant" when used in "Accreditation Review Commission on Education for the
18 Physician Assistant" and "National Commission on Certification of Physician Assistants."

19 * **Sec. 86.** The uncodified law of the State of Alaska is amended by adding a new section to
20 read:

21 CONDITIONAL EFFECT. Sections 7, 10, 12, 56, 60, 73, and 76 of this Act take
22 effect only if SB 89, as passed by the Thirty-Fourth Alaska State Legislature, is not enacted
23 into law.

24 * **Sec. 87.** Sections 4 - 6, 13, 14, 25 - 30, 32 - 36, 38, 39, 45, and 84 of this Act take effect
25 January 1, 2027.