BYLAWS
of the
Alaska Health Care Commission
Adopted May 26, 2009
Amended November 16, 2010; June 21, 2013

ARTICLE I
PURPOSE

The purpose of the Alaska Health Care Commission (commission) is to provide recommendations for and foster development of a statewide plan to address the quality, accessibility, and availability of health care for all citizens of the state. (AS 18.09.010)

ARTICLE II
DUTIES AND RESPONSIBILITIES

A) In accordance with AS 18.09.070, the commission's duties are to:

1. Serve as the state health planning and coordinating body;

2. Consistent with state and federal laws, provide recommendations for and foster the development of a statewide health plan containing the following:

   A. a comprehensive statewide health care policy;

   B. a strategy for improving the health of all residents of the state that:

      i. encourages personal responsibility for disease prevention, healthy living, and acquisition of health insurance;

      ii. reduces health care costs by using savings from
         a. enhanced market forces;
         b. fraud reduction;
         c. health information technology;
         d. management efficiency;
         e. preventative medicine;
         f. successful innovations identified by other states; and
         g. other cost-saving measures;

      iii. eliminates known health risks, including unsafe water and wastewater systems;

      iv. develops a sustainable health care workforce;

      v. improves access to quality health care;

vi. increases the number of insurance options for health care services; and

3. Submit a report to the Governor and the Legislature on or before January 15 of each year regarding the commission's recommendations and activities.

ARTICLE III
MEMBERSHIP & STAFFING

A) COMPOSITION

In accordance with AS 18.09.020, the commission consists of 11 voting members appointed by the Governor and three non-voting members.

Voting members are:

1. The state officer assigned the duties of medical director for the Department of Health & Social Services, who serves as the chair of the commission;

2. One member who represents the tribal health community in the state;

3. One member who represents a statewide chamber of commerce who is not financially associated with the health care industry;

4. One member who represents the Alaska State Hospital and Nursing Home Association;

5. One member who is a health care provider and
   a. Engaged in the active practice of the health care provider's profession in the state;
   b. Licensed to practice in the state;
   c. Not affiliated with the Alaska State Hospital and Nursing Home Association;

6. One member who represents the health insurance industry in the state

7. One member who is
   a. A health care consumer;
   b. A resident of the state; and
   c. Not employed by and does not have a business interest in the health care industry;

8. One member who is a licensed primary care physician in the state and who is in the active practice of family medicine, primary care, internal medicine, or pediatric medicine;

9. One member who represents the Alaska Mental Health Trust Authority;

10. One member who represents community health centers in the state; and

11. One member who is involved in the United States Department of Veterans Affairs health care industry.

Non-voting members are:

1. One ex officio member from the house of representatives, appointed by the speaker of the house of representatives;

2. One ex officio member from the senate, appointed by the president of the senate;

3. An ex offico member representing the Office of the Governor.

B) TERM OF OFFICE

Public members of the Commission serve for staggered terms of three years, as specified in AS 18.09.030. A public member may not serve more than two consecutive terms.

C) COMPENSATION, PER DIEM, AND EXPENSES

Commission members do not receive compensation as members of the commission. Members of the commission who are not state or federal employees are entitled to per diem and travel expenses in the same manner permitted for members of state boards and commissions as authorized under AS 39.20.180. Per diem and travel expenses for members of the commission who are representatives of a state or federal agency are the responsibility of that agency.

D) RESPONSIBILITIES OF CHAIR

The Commission Chair shall:

1. Call commission meetings.
2. Set meeting agendas.
3. Preside at commission meetings.
4. Partner with the Executive Director to ensure the purpose and duties of the commission are fulfilled.
5. Ensure the performance of the Executive Director is evaluated by the commission on an annual basis.
6. Act on behalf of the commission within the limits of established commission priorities, decisions, and actions.
7. Present the commission's annual report to the Office of the Governor, the Commissioner of the Department of Health & Social Services, and the legislature.
8. Represent the commission before the legislature and other groups.
9. Establish liaisons with other groups and committees concerned with health care.

E) RESPONSIBILITIES OF MEMBERS

Commission members shall:

1. Make every effort to attend all regular meetings of the commission, and inform the Chair when unable to do so. Commission members who miss two consecutive regular meetings without cause shall be consulted by the Chair, and may be removed from the commission after missing three consecutive regular meetings without a valid excuse.
2. Assist the commission in identifying and analyzing health care issues and developing recommendations.
3. Keep informed about issues before the commission, and carefully prepare for commission meetings by reading material provided and becoming familiar with agenda topics.
4. Fully participate in, contribute to, and support commission discussions and decisions.
5. Practice active listening, show consideration for differing ideas, maintain a questioning attitude, and respectfully raise opposing viewpoints.
6. Serve on committees created by the commission to advance the purpose of the commission.
7. Follow-through on assigned tasks.
8. Identify conflict of interest situations and abstain from actions relating to them.

F) STAFF

The commission shall employ an executive director, who may not be a member of the commission. The executive director serves at the pleasure of the commission, and is in the exempt service. The executive director shall perform the duties prescribed by the commission, and assist the commission in carrying out its duties as specified in these bylaws.

The Department of Health & Social Services may assign employees of the department to serve as staff to the commission. The commission shall prescribe the duties of the staff.

ARTICLE IV
MEETINGS

A) The commission shall meet at the call of the chair at a minimum of four times per year.

B) The commission may use teleconferencing and other electronic means to the extent practicable in order to gain the widest public participation at minimum cost.

C) Meetings of the commission are open to the public in accordance with AS 44.62.310 and AS 44.62.320.

D) The commission may hold public hearings to gather information and opinions from health care consumers on matters before the commission. Hearings shall be conducted under AS 44.62.210, except that the commission shall provide public notice of hearings not less than 15 days before the conduct of the hearing and include not fewer than three notices published in the statewide news media.

ARTICLE V
COMMITTEES

A) The commission may create committees at the discretion of the commission to meet the goals and objectives established by the commission.

B) The chair of each committee shall be a commission member. Other membership requirements for each committee will be established by the commission. Committee members shall serve until completion of duties delegated by the commission.

C) Services rendered by committee members shall not be compensated, except for travel and per diem expenses as allowed for commission members as detailed in Article III.C of these bylaws.

ARTICLE VI
RECORDS AND PROCEDURES

A) Commission decisions and recommendations shall be communicated to the Office of the Governor, Commissioner of the Department of Health & Social Services and to other appropriate state agencies.

B) The commission shall keep minutes of proceedings of the commission and any committees of the commission.

C) The commission shall keep accurate and complete financial reports.

D) Records of the commission shall be kept by the commission's designated state agency, the Department of Health & Social Services.

E) All records of the commission are subject to inspection and copying as public records under AS 40.25.110 – 40.25.220.

ARTICLE VII
PARLIAMENTARY AUTHORITY

A) A quorum is required to officially convene a meeting of the commission. A quorum is a simple majority of the voting members (6 of 11 voting members must be present).

B) No person may substitute for a voting member. Proxy voting is not permitted.

C) To the greatest extent possible, decisions will be made by consensus. If a consensus is not possible and a decision is required, Robert's Rules of Order, as Revised, shall govern the deliberative and decision making process.

D) The commission may use teleconferencing and other electronic means to conduct business.

ARTICLE VIII
ETHICS AND CONFLICT OF INTEREST

A) Ethics

The provisions of the Alaska Executive Boards Ethics Act (AS 39.52) apply to all commission members, the Executive Director and staff. The pamphlet prepared by the Alaska Department of Law entitled "Code of Ethics" is designed as a guide for members in understanding the Alaska Executive Branch Ethics Act.

B) Conflict of Interest

1. A member of the commission who has a direct and substantial conflict of interest in an official action of the commission shall declare such interest on the record, and shall request to be excused from voting on such action.

2. Any person who believes that a member of the commission has a conflict of interest may so advise the Chair of the commission.

3. The Chair of the commission shall make a ruling regarding commission member ineligibility to vote on an issue due to conflict of interest. The ruling of the Chair may be overruled by a majority vote.

ARTICLE IX
AMENDMENT OF BYLAWS

These bylaws may be amended at any scheduled meeting of the commission by a majority vote of commission members provided that written notice and copies of the proposed amendment have been submitted to the members thirty (30) days prior to commission meetings and the proposed amendment is read at two (2) meetings before it is voted on.

IN WITNESS THEREOF, the foregoing bylaws are hereby adopted as the amended bylaws of the Alaska Health Care Commission, in Anchorage, Alaska, to be effective as of June 21, 2013

Ward Hurlburt 6/21/13

Ward Hurlburt, M.D., MPH — Date
Chair

Deborah L. Erickson 6/21/13

Deborah Erickson — Date
Executive Director

Original bylaws adopted May 26, 2009
Amended November 16, 2010
Amended June 21, 2013