



Medical Spa Services Work Group

Alaska Division of Corporations, Business and Professional Licensing

Draft Minutes for Monday, November 18, 2024, at 12:00 PM AKDT

Held via Teams videoconference

Website: <https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/MedicalSpaServicesWorkGroup>

Members Present: Eric Nimmo, MD, State Medical Board; Ashley Schaber, PharmD, Board of Pharmacy; Shannon Thompson, Board of Barbers and Hairdressers; April Erickson, APRN, Board of Nursing

Members Absent: Kenley Michaud, DDS, Board of Dental Examiners; Brian Larson, DC, Board of Chiropractic Examiners;

Staff present: Sara Chambers, facilitator; Natalie Norberg, Shane Bannarbie

Additional professional licensing board members present: Kevin McKinley, chair, Board of Barbers and Hairdressers; Danette Schloeder, chair, Board of Nursing

Invited Guests: Susanne Schmaling, Esthetics Council, Lindsay Treweiler

CALL TO ORDER

A few minutes after 12 p.m., Ms. Chambers called the meeting to order and called the roll. A quorum was established. She asked for any declarations of conflicts of interest; no member stated they had any conflicts relating to the topics on the agenda.

Ms. Chambers stated the purpose of the Work Group: It is not a policymaking committee but is tasked to learn about and potentially make recommendations to professional licensing boards regarding clarification of existing law and possible changes to statutes and regulations to enhance safe practice opportunities that have a nexus across multiple boards.

Motion by Ms. Erickson to approve the minutes of the October 31, 2024, meeting. Seconded by Dr. Nimmo. Approved by unanimous consent.

PUBLIC COMMENT

Though several members of the public were present, none indicated that they wished to provide public comment.

ADVANCED ESTHETICS

Laser Hair Removal

Lindsay Treweiler presented her research and recommendations on certified laser technician training and standards outside Alaska

- Ms. Treweiler provided her credentials:

- She completed a laser hair removal course at National Laser Institute (NLI) in Scottsdale, AZ
- 1-year certification with the radiation regulatory agency of the state
- She reviewed main points from the research she provided to the board prior to the October 31 meeting. (She gave her permission for this research to be posted on the Medical Spa Services Work Group web page.)
 - Definition of laser hair removal; ablative vs. non-ablative lasers
 - Certified Laser Technician (CLT) vs. Esthetician
 - Requirements of other states, regulatory schemes, various uses of lasers for esthetic purposes
 - Considerations for entry to practice (barriers, training, safety concerns)
 - Medical oversight

Dr. Schaber asked for more information about the relationship between the CLT and the medical director: Was it a formal collaborative practice agreement or independent contract? Ms. Treweiler said that in her practice in Arizona, she was required to have one but that medical director was not onsite and never spoke with her; she just paid the medical director monthly to meet the technical requirements of the state. The state agency with which she was registered inspected her place of business and equipment periodically.

Dr. Schaber mentioned the Board of Pharmacy's work on establishing a standard of care for pharmacists. She was interested in seeing if other boards would look into setting standards for medical spa services. Ms. Schmaling recommended having them and offered to share some examples that have been used in the last decade in other states. Ms. Chambers mentioned that it might be difficult to establish specific standards across multiple boards that encompass all advanced esthetics procedures and devices.

Dr. Nimmo recommended following the American Medical Association's definition of surgery, which included laser hair removal. He said this is likely what the Medical Board would follow.

Delegation and Supervision

The work group shifted to a discussion to clarify current statutes & regulations regarding delegation/supervision of cosmetic procedures under medical or nursing licensees. Dr. Nimmo explained that while boards have adopted guidelines, they are useful to offer clarification but are not enforceable like statutes and regulations. At their meeting last week, the Medical Board repealed two guidelines (*Delegating to Medical Assistant (Unlicensed Assistive Personnel)*; *Guidelines for Physicians in Delegating Procedures to Non-physician Personnel When Performing Certain Dermatological Procedures*) that had been superseded by 12 AAC 40.920.

The regulation requires the person delegating to be qualified to perform the procedure before delegating to another person who, in the delegating licensee's estimation, is qualified to perform the procedure. Ms. Norberg pointed out that while the person being delegated to may be qualified, the other standards in the regulation must also be met. Within this context, delegation only includes routine duties, not those requiring complex skills or knowledge. Under current law, laser hair removal, for example, might be able to be delegated if the person

performing it held a relevant license in Alaska. It likely could not be delegated to an unlicensed person.

Another change from the guideline to the regulation was moving from an “onsite” requirement to “readily available,” including availability by telecommunication.

Mr. McKinley asked about how laser tattoo removal might be considered in this conversation. He raised concern that there may be tattoo shops currently performing laser tattoo removal without medical supervision. Dr. Nimmo was unsure how tattoo removal might be affected by this regulation. Ms. Chambers mentioned that this is a great example of the type of clarity that licensees and unlicensed persons are seeking, so the work group could look into it. She also reminded listeners that this work group is tasked to discuss situations and take them back to their boards for formal interpretation, if needed. She wanted to be sure that any work group member was not personally responsible for interpreting law during the meeting and that listeners did not make business decisions based on a work group discussion.

Ms. Schmaling asked how cosmetic services are being reviewed and evaluated by boards and associations when adopting definitions or terminology relating to “surgery” or similar. How open is the Medical Board to defining according to safety standards rather than conventional definitions used in medical context. She said that under the definition of surgery, offering a patient a glass of water would qualify. Dr. Nimmo responded that the Medical Board is primarily concerned about patient safety and not the strict definition of a term—there’s a difference in impact between using lasers and offering a glass of water. He agreed that the work group should provide safety data so boards can evaluate further. Ms. Erickson agreed that the Board of Nursing would have a similar approach. Ms. Thompson said she had the same questions and concerns as Ms. Schmaling.

Ms. Erickson introduced the new position statement the Board of Nursing adopted at its November meeting: *Alaska Board of Nursing Advisory Opinion on Medical Aesthetic, Cosmetic, and Dermatologic Procedures for Registered Nurses & Licensed Practical Nurses*. While this new guideline supersedes its 2018 position statement on *Neuro Modulator Injections for Cosmetic Purposes* (i.e. botox), it appears to encompass other procedures. She stated that the board was exploring a new regulation project to look at supervision of trained but unlicensed personnel: depth, invasiveness, severity of complications all matter. The new guideline would be posted online as soon as it has been formatted properly.

Dr. Nimmo mentioned that there needs to be clarity between delegation and supervision definitions. Regardless, any invasive procedure requires initial evaluation by a medical professional to ensure the appropriateness of the procedure. Looking at 12 AAC 40.920, Ms. Norberg said that “routine” is specific to the setting. A medical spa may have different routine duties than a family practice clinic. Ms. Chambers provided the example that in some clinics, assisting in birthing babies may be routine; however, that does not mean the procedure does not require skilled training. While there may be flexibility in defining what is routine, the other provisions of the regulation must be in place. Dr. Nimmo and Ms. Erickson agreed that the delegating person is responsible for the outcome of any procedure that licensee has delegated.

PLANNING FUTURE MEETINGS

The group agreed to meet again on December 5 from 10:00 a.m. – 12:00 p.m. While they would like to pick up the topic of IV hydration, Ms. Chambers suggested that they complete their work on recommendations regarding advanced esthetics. She said that she would create a draft document for the work group to review. The work group will schedule any following meetings for January after the holidays.

Looking ahead, the work group still wishes to continue review and research of:

- Intravenous hydration

- Definition and regulation of medical spas

- Cosmetic injectables (Botox, Juvederm, etc.)

- Prescriptions such as semaglutide and sildenafil

- Nonsurgical lipolysis (cryo, injection, radiofrequency, laser, etc.)

FINAL THOUGHTS

Mr. McKinley formally welcomed Shannon Thompson as the Board of Barbers and Hairdressers representative on the work group. Ms. Palin had submitted her regrets and stepped down following the prior meeting.

The meeting adjourned at 1:50 p.m.