

Government Affairs:

**Missouri Society PACT Co-Chairs Make a Trip to Washington DC on Behalf of our Patients and Respiratory Therapists: March 10-11<sup>th</sup>, 2008**

Ronda Bradley, MS RRT

**Respiratory Care Initiative**

Joan Kohorst and Ronda Bradley, Co-Chairs of the Legislative Committee for the MSRC Spent two days in Washington DC meeting with Senate and Congressional offices on behalf of pulmonary patients and the profession of respiratory therapy. The primary objective was to ask for Co-Sponsorship and support for the Respiratory Care Initiative (HR 3968 and S 2704) For more information on this initiative see article below:

**Trip to Washington DC**

Joan and Ronda spent the first day in Washington meeting with the other members of the national committee obtaining briefings from the AARC, hearing from Legislators and patient advocacy groups. The second day was spent on “the Hill”. They met with Legislative Assistants in all nine Congressmen/women and both Senators’ offices. Most offices were extremely receptive to the bills, in part, due to the significant need for access to care by respiratory therapist outside of the hospital and the low expected cost of the bill. However, no one committed to co-sponsorship on the first visit. Now the work began with follow up e-mails and calls to offices to ask our Legislators to continue to consider Co-sponsoring the bill.

**Our first Positive response with Co-Sponsorship commitment from Congressman Todd Akin!**

Two days after returning to St.Louis, Joan and Ronda received notification from Congressman Todd Akin’s (R-2<sup>nd</sup> District), Legislative Assistant (Lauren Ellis), the Congressman had decided to support the initiative by Co-Sponsoring HR 3968! On behalf of the respiratory therapist and pulmonary patients of the state of Missouri, the MSRC would like to thank Mr. Akin for his support of pulmonary patients and fiscally responsible solutions to healthcare issues.

**More Work Ahead and Challenge to Patient Care Advocates**

We are hopeful this is the first in successfully obtaining co-sponsorship from the other 8 congressional districts and both senate offices. Would it not be amazing to see a bi-partisan showing of all 11 seats in the state of Missouri supporting this important patient care initiative??!! If this were accomplished, it would surely show that Missourians are able to put aside other political differences for the good of patients in our state and throughout the country. The MSRC Legislative committee is asking for your help! Please contact your Congressman/woman and Senators to ask for their support in Co-Sponsorship of these bills. Especially if you live in District 2, please contact Congressman Todd Akin’s office to thank him for the support of this important healthcare initiative. [http://akin.house.gov/contact\\_dc.shtml](http://akin.house.gov/contact_dc.shtml)

### **Information on 2008 Respiratory Therapy Initiative.**

Remember these two bill numbers HR 3968 and S 2704! These are the house and senate bill numbers for the respiratory care initiative. This initiative, if passed into law, would update the Medicare Statute to allow Registered Respiratory Therapists with a minimum of a Bachelor's Degree (Degree not specific to respiratory care), to provide reimbursable services as an extension of a physician's practice under Medicare Part B.

**How would this work?** Basically, the qualified RRT would be "employed" by a physician, physician's practice, or healthcare provider under the medical direction of a physician. The qualified RRT would be able to provide diagnostics, education, prescription, etc, in line with our current scope of practice. The Medicare part B billing would be at 80% of the allowable for that same service provided by a physician.

**Who would this benefit?** There are many different groups who would benefit from this new coverage. They would include, but are not limited to:

**Patients!** Two primary groups of patients would see significant benefit. 1. Patients in rural communities who do not have access to a pulmonologist on a regular bases, if ever. The qualified RRT would be more accessible and provide a level of expertise which could only benefit patient care. 2. Home bound patients or those with limited access to mobility. Although details would have to be address, a qualified RRT could provide a "house call" on behalf of the physician. Patients who have significant technology dependencies, such as home ventilation, could definitely benefit from this. How many times have you heard a family member, patient, or physician say, "If they would have just had a respiratory therapist at home, (this patient) may not have had to be admitted to the hospital!"?

**Respiratory Therapist!** This is a great opportunity for ALL respiratory therapists in elevation and recognition of our profession, professionalism and expertise. New and exciting opportunities lie ahead for all therapists as we expand our roles outside of the hospital.

**Physicians!** This is an excellent opportunity for pulmonary physicians as well as D.O.s and Family practice physicians. They would all then have the opportunity to employ and partner with qualified RRTs to bring a level of expertise to their current practices. This would allow them to provide improved care to more patients in a fiscally responsible manner. Many groups including the American Thoracic Society have written letters of support for our initiative.

### **What can I do to help?? WRITE, CALL, FAX!**

Write your Congressman/woman and ask them to Co-sponsor this house bill. We have NO co-sponsors from Missouri as of yet (12/14/07).

Write your Senators: Senator Kit Bond and Senator Claire McCaskill. Ask them to sponsor a companion bill to HR3968.

**I have never been much for Politics and would not know where to start!** Not to worry. You can simply go to the AARC website: [www.aarc.org](http://www.aarc.org) follow the link to Capital Connection and draft a letter from there. The AARC has even provided sample language for you to use in your e-mail.

**Do it today! Please don't wait. Your letters are needed today.**

For more information on this and other important legislation affecting our practice and patients, check out the Capital Connection on the AARC we site or contact one of your Government Affairs Co-Chairs:

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