

AARC

Capitol Hill Day

March 7, 2011

Sunshine again in Washington, DC, what a great day! This trip has been much better, since I know a whole lot more what to expect. Our bill was reintroduced by Congressman Ross today!

First, I want to start by explaining the Medicare Part B Respiratory Therapy initiative. The goal is to allow RT's with a bachelor degree to work under general supervision instead of direct supervision, meaning the doctor does not need to be in the office. The doctors are very busy and we can do patient education for COPD, emphysema, smoking cessation, MDI usage/technique, etc... We, South Dakota, are fortunate to have the South Dakota Quitline for patient access to help, many states do not have anything available to help. There are a couple of studies that show there is a 41% decrease in readmits with an RT involved with their plan of care.

COPD is now the 3rd leading cause of death in the country. In the US there are 12 million patients that have the diagnosis of COPD, and another 12 million that are **not** diagnosed. Patients with recurring pneumonia increase the Medicare cost. Education on their disease process would help tremendously. In South Dakota there are 38,000 people with chronic bronchitis and emphysema. There are another 43,000 with adult asthma and 18,665 with pediatric asthma. Our population is 804,000 calculating out that is about 1 in 10 people in South Dakota with breathing difficulties causing hospitalizations.

“Our goal is to decrease readmissions”

Our big concern this year is the CBO score which is \$100 million over 10 years. This score was apparently developed with inaccurate information. We believe they used the AARC total membership instead of basing their numbers on the 1800 therapists working in the doctor's offices. We need to get the CBO score recalculated.

My first visit was with Rachael Knust, Senator Thune's health staff. I met Rachael last year, so she was already familiar with our bill. I was fortunate to have a patient advocate with me, Lori Palamero. Lori's father died of emphysema. The family were not told anything about the disease, what to expect, the use of home oxygen, his life expectancy. Lori impressed upon Rachel how the RT could have helped them by being in the office to explain and answer questions that the doctor did not have time for and the RN was too busy too.

My second appointment was with Hannah Hagstrom, Senator Tim Johnson's research assistant, I met her last year too. I had a COPD patient (wearing oxygen) join me for this meeting. Her name was Bunny Music, she was a ball of fire!! Bunny truly made an impression on Hannah explaining how much more the RT could do for her than the doctor. When ever a nurse or RT only see the patient, then the doctor can only bill for 85% of his regular fee because the doctor did not see the patient. This would cost less and decrease readmits.

My third visit was the best of all. I actually was able to speak to Congresswoman Kristi Noem. She is a very pleasant lady with great interest in our initiative. Her son, Booker, had trouble with Reactive Airways Disease when he was younger. Kristi Noem said this is a no brainer!!

Please continue to contact our congress people to encourage them to support our initiative. The letters are available on AARC Connect to send and it takes very little time.

Thank you for giving me this opportunity to represent you in Washington, DC. I learn so much every year, even how to ride the subway by myself if needed.

Submitted by,

Carleen Waltner, SDSRC PACT Representative

