2012 State Credentialing News

Licensing legislation is pending or expected to be considered in the states of Kansas, New York, and the District of Columbia. These AmSECT State Liaisons can be contact for information.

**Kansas**
Denny Coyne  
grc4kansas@cox.net

**New York**
Bruce Searles  
searlesb@upstate.edu

**Dist. of Columbia**
Carla Maul  
maulccp@yahoo.com

Members can visit the Government Relations Committee page on the AmSECT homepage to find out who their State Liaison is. A member can also make application to become a State Liaison in States with a vacancy.

States Organizing to Pursue Credentialing

Efforts are underway to organize perfusion state societies, and pursue credentialing in Arizona, Colorado, and Virginia. The following persons can be contacted for information.

**Arizona**
James Ferguson  
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Donald Wilson  
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**Colorado**
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Scott Lawson  
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**Virginia**
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Thomas Blackburn  
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Erin Hartman  
erin.hartman@specialtycare.net

Meeting Of Arizona Perfusionists

The GRC’s next meeting will be in Arizona. We are meeting with organizers of the state society to answer questions about the legislative process in Arizona. The new vision for the GRC is to hold its biannual meetings in states that have a liaison and have asked for help in organizing a legislative effort. We will be meeting September 8th in the Phoenix area to answer questions, pros and cons, regarding licensure. *There is no cost to attend and NO CEUs attached. Those interested in attending need to contact James Ferguson or Donald Wilson.*

Mid-West State AmSECT Members

Jim Reagor represents the states in Region 2 for the GRC. Two states included in this region are Michigan and Minnesota, both of which have significant support among perfusionists in the pursuit of licensure. Minnesota has surveyed its membership and the majority is in support of reintroducing licensing legislation. The Minnesota society is coordinating efforts to reach out to legislators. The Michigan State Perfusion Society recently created a licensure committee, charged with gathering procedural and general information concerning the licensure process. They will be meeting in August and have invited Jim to speak. The GRC fully supports each of these states in their endeavors. If any other states in Region 2 would like to speak with Jim about licensure or any other topic please contact him at jimreagor@gmail.com.

State Bills Impacting The Profession

**Georgia** - **HB 741** - An appropriation bill funding the perfusion licensing committee.

**Kansas** - **SB 5** – Perfusion licensing. A licensing bill carried over from last year. A hearing before the House Committee is scheduled for March 1, 2012. Only the Chair of the House Committee has previously opposed a bill. The bill subject to the
hearing is the Senate passed bill. The Kansas Society has secured the endorsement of several related health groups, and the head of the Department of Health and Health Professions agency have been lined up to testify in support. No bill opponents have registered to testify against the bill.

Missouri - SB 679/HB1371 – Both grant APRN’s authority to practice the functions of a respiratory therapist. The perfusion licensing law allows respiratory therapists to perform ECMO under the supervision of a perfusionist.

New York - SB 4640/AB 4153 – Perfusion licensing.

Oklahoma - HB 2509 and SB1279 – Establish that any person NOT licensed as a perfusionist and employed as a perfusionist is subject to civil fines and imprisonment for up to one year.

South Carolina - HB 4611 - Medical Clinical Laboratory licensure bill. It includes an exemption section for other licensed or registered health care professionals performing functions within the professional's scope of practice. This includes a perfusionist acting within the scope of practice of perfusion in the support, treatment, measurement, or supplementation of the cardiopulmonary and circulatory systems. Perfusionists in South Carolina ARE NOT licensed or registered health care professionals in the state.

Minnesota - SB 1426 – A Clinical Laboratory licensure bill pending before the Senate Committee on Health and Human Services, with one hearing held to date. The bill does not have specific exemption language covering perfusion testing.

New State Liaisons

Texas
George E. Bretz, CCP gbretz@amrllp.com

Oklahoma
Hayden Miller, CCP hayden_miller@sbcglobal.net

What the Medicare “Doc Fix” Means

Perfusionists may have heard their surgeons refer to the “Doc Fix”. The recently enacted extension of the Social Security payroll tax cut included a doc fix for the rest of this year. Physicians want to repeal the Medicare Sustainable Growth Rate (SGR) method used to control the cost of all Medicare physician services. The SGR gives Congress the authority to suspend yearly decreases in payment rates, which has been regularly done. In 2010 the combined and delayed reductions, if enacted, would have been -21% in physician payment rates. For 2011 the delayed cuts increased to a -27% percent. The 2013 reduction is estimated at a -30% rate. In budgetary terms, the “pay-for” for the doc fix is future reductions in Medicare hospital DRG payments. Over the next 7 years Medicare hospital payments will be reduced by $1 billion per year. This is in addition to previous hospital payment reductions. The doc fix means continued reductions in hospital surgical procedure DRG payments for the foreseeable future. This does not bode well for hospital-employed perfusionists and contract companies. For the surgical group employed, they may breathe a bit easier for now. Regardless, continued decreases will place downward pressure on salaries and resources.

Committee Members And States

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<tr>
<th>COMMITTEE MEMBERS AND REGION</th>
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<tr>
<td>Mark Lucus Region 1 <a href="mailto:mlucas56@hotmail.com">mlucas56@hotmail.com</a></td>
<td>Alaska, Arizona, California, Colorado, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming</td>
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