

Meeting Minutes

Teleconference

IOWA BOARD OF RESPIRATORY THERAPY

November 20, 2012

Lucas State Office Building, 5th Floor Conference Room #526, Des Moines, Iowa

Reason for Conference Call: Due to state budgetary constraints and the need to ensure the most efficient use of state resources, this board meeting will be held by conference call pursuant to Iowa Coda 21.8. The meeting will be accessible to members of the public through attendance at the origination site.

Call to Order:

The meeting was called to order at 10:00am by Mary Tyrrel, Chair.

Roll Call:

Members Present:

Mary Tyrrel
Kerry George
Arlene Lee
Lisa Kingery
Dr. Akshay Mahadavia – Joined meeting at 10:15am

Staff Present:

Tony Alden
Barb Huey
Marvin Firch
Meghan Gavin
Barb Christiansen

Public Present:

None

Review Agenda:

No changes were made to the agenda

Approval of Minutes:

A motion was made by to approve the meeting minutes of May 15, 2012. George/Lee.

Public Comment:

None

Reports:

Chair: Nothing to report

Board Executive – Tony reported on Executive Order 80.

When Board's need to notice rules, the Department head, Dr. Miller-Meeks will review the proposed rules to determine if a stakeholder group will need to be initiated to provide comment on the proposed rules. Meghan explained the purpose of the order is to give rule making agencies more input from the public when creating rules. The Board maintains the same authority to notice and adopt rules that they had before. The stakeholders group does not have authority to veto your rules but merely makes recommendations and provides input. This is a new process and it remains to be seen how much of an effect it will have on the Boards rule making process. Any time this Board proposes new administrative rules it's important to get input from the public.

Secure mail – Tony discussed secure mail and asked if members are able to utilize the system. Tony reported that the attachments sent to you through secure mail will disappear in 14 days so you will need to save to your hard drive. Tony or Marvin Firch can assist you with secure mail questions or problems.

Tony attended the National Board of Respiratory Care meeting in August. NBRC will offer one combined exam for CRT and RRT available in 2015. Some administrative rules may need to be changed to reflect the new exam name. Also, there was some discussion about 5 programs left that only prepare students for CRT. In a year those programs should be preparing for both CRT and RRT exams. I expect we may see more therapists in Iowa attaining the RRT certification. There was also discussion regarding the AASM registered sleep technologist exam. The American Board of Sleep Medicine had made a push to multiple states to accept the new exam. The consensus from the representative from the various states in attendance at the meeting was that the exam was not accredited and they did not approve it.

Dr. Mahadavia joined the meeting.

Bureau Chief: Barb reported regarding the polysomnographic technicians. The polysomnographic lobbyist met with Dr. Miller-Meeks and presented a letter that listed positive reasons why the profession should be licensed. We expect they will be lobbying the legislature for licensure again this year. We haven't seen any new proposed legislation. Tony will keep the Board updated on this issue.

Meghan Gavin: No report

Old Business:

Concurrent/Unattended respiratory care: The Board reviewed two documents prepared by the American Association for Respiratory Care (AARC). The documents are primarily geared towards health facilities and give best practices for respiratory care practice and staffing. A section of the documents presents potential areas of concern in the area of concurrent or unattended therapy. The Board discussed the issue and felt it would be appropriate to draft some sort of administrative rule that would clarify that therapists should not provide concurrent or unattended therapy when the treatment being provided has potential for serious side effects. Tony will work with a committee of the Board to draft proposed language for presentation and possible notice at the next meeting.

Kerry then reported that currently respiratory therapists that work in a physician's office can be reimbursed for services provided in the office only on the day the patient is seen by the physician. Legislation should be forthcoming that would allow respiratory therapists to receive reimbursement for days other than the day they were seen by the physician. This would give the patient access to care in between visits to the physician and would help reduce patient being readmitted. New Medicaid rules penalize facilities for having too many patients readmitted. This would allow therapists the opportunity to provide proper care and education to the patient, reducing the need for patients to go back to the emergency room or be readmitted to the hospital.

Administrative Rules:

ARC 0221 - Chapters 262 & 265 – The amendments add certifications to the list that can be used toward meeting the continuing education requirements for renewal of a respiratory therapy license and clarifies what is considered respiratory care when personnel engage in the setup, delivery, testing, or demonstration of respiratory therapy equipment.

No comments were received at the public hearing. The rules are now ready for adoption.

Motion to Adopt. George/Tyrrel all ayes, opposed none, motion carried. Dr. Mahadavia does not appear to be on the conference call at this time.

Closed session:

A motion was made to enter into closed session at 10: 40am. Tyrrel/Kingery Roll call taken:

Kingery
George
Lee
Mahadavia – no response
Tyrrel

Open Session: Returned to open session at 11:02am

Follow up from closed session:

Mahadavia returned to meeting.

Motion was made to close case 12-001 and 12-002. Tyrrel/Mahadavia

Future Board Meetings

February 19

May 21

August 20

November 19, 2013

A motion was made to adjourn the meeting at 11:04 George/Kingery

These minutes were approved at the February 19, 2013 Board meeting.