

Political Action News

PACT Report

By Joe Dwan, MS, RRT

Many of the AARC PACT people met at the AARC Convention in New Orleans on December 6th. Cheryl West and Jill Eicher, our AARC lobbyists, discussed the current climate in Washington and the status of HR 2905 and it's companion bill S 2707. Once again we will travel to Washington DC in March to lobby our Congressmen/women and Senators.

With the end of the current Congressional session, these bills must be re-introduced in both the House and the Senate. So we'll need to again obtain sponsors for both bills. Hopefully, you remember that these bills will allow RTs to be reimbursed for home visits, as a substitute for RNs or PTs, under the Medicare Home Health regulations. We've worked on this for several years and some success, but didn't get them passed. However, they now need to be re-introduced and then voted on, passing both House & Senate, then signed by the president.

Ron Wyden, OR Senator, has just been named to the Senate Finance Committee. According to the Oregonian (12/13/04), Wyden has been working towards this prestigious position for several years. With his appointment, Oregon's two senators are now both on the Senate Finance Committee, which is one of the two most powerful committees in the Senate. This has not happened in many, many years.

Great time to write to both Oregon Senators, asking them to sponsor and support HR 2905 & S 2707. Remember, it only takes 5 minutes to go to the OSRCNW.org website, click on "Advocacy Alert" to access Capital Connections, type in your zip code, write a short note saying you are a RT asking for sponsorship/support to help our pts in the home. With both of our Oregon Senators on the Finance Committee, we might have a chance to pass this legislation.

In Oregon: Measure 35 was defeated by one percent of the voters statewide. Dr John Moorhead, President of OMA, said that physicians will take this issue to the state legislative leadership and the governor to work on "alternative legislative solutions to the malpractice insurance crisis in Oregon".

Under the EMTALA (Emergency Medical Treatment and Labor Act), CMS (Centers for Medicare & Medicaid Services) now states that ER's won't have to ask a patient's citizen/immigration status to receive reimbursement. Under the previously proposed CMS plan, hospitals would have been required to ask the immigration status of pts seeking care.

Two lawsuits have been filed in Oregon against non-profit hospitals, along with lawsuits against more than 70 hospitals nationwide and the AHA (American Hospital Association). The class action lawsuits are about hospital's billing and collection practices for the uninsured. In response, the AHA is asking hospitals to talk publicly about their community involvement as well as their high quality health care. The AHA also has a website, www.caringforcommunities.org to focus on issues & challenges hospitals encounter. The www.aha.org is also a resource.

Governor Kulongoski submitted his 2005-7 recommended budget to the legislature this month. He has identified six principles for Oregon's future; including basic health needs be met for all Oregonians. The Governor has asked Agencies involved in providing covered services and activities to identify if they are mandated activities outside the governor's or legislator's control, how many people the program will serve, what the program will accomplish for Oregonians, and how the programs will be measured to assure they are serving their purpose.

A report titled "Physician Workforce in Oregon 2004: A Snapshot:" has been issued by the Center for Rural Health, OHSU. The report identifies an "unprecedented decline in overall growth of physician practices and a possible shortage in availability of various specialties." Rural counties of NW OR had 104 physicians/100,000 population whereas Portland has 302 physicians/100,000 population. NW and Eastern Oregon show the fewest number of physicians/100,000 population. The report also shows the physician population is aging, just as the AARC Manpower survey shows the RT population is aging.

The President signed into law a fiscal year 2005 spending bill that places a moratorium on enforcement of the 75% rule for inpatient rehab services and prevents funds from being used to administer or enforce a TB standard that would force hospitals to conduct annual fit-testing of N-95 respirators. The bill includes \$495 million for Ntl Bioterrorism Hospital Preparedness (\$6 mill for OR), \$152 mil for nurse education & Nurse Reinvestment Act programs. For details on the 75% rule, go to http://www.hospitalconnect.com/aha/key_issues/rehab/content/rehabadvocacyday1.pdf.