

**LSBME  
RESPIRATORY CARE ADVISORY COMMITTEE MINUTES**

Date: March 22, 2010      Time: 9:00am      Location: LSBME office      Recorder: S. Davis

Present: Raymond Pisani, Doug Greene, Sheila Guidry, Diana Merendino, Brett Stafford, Ken Alexander, Sue Davis; Dr. Judd Shellito, Dr. Russell Klein, Dave Vicknair

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ACTIONS
I. Call to Order/Establish Quorum	Quorum established	
II. Approval of minutes	Motion to accept: Dr. Klein 2 <sup>nd</sup> : Diana Merendino 9 yea 0 nay 0 abstain	NA
III. Advisory Opinions	None pending	NA
IV. Licensure	Mr. Vicknair has brought up the issue of licensure for students who have completed a portion of their training (eligible for the entry level exam) while not having completed their entire program. The current language for application of a license states" the applicant must be a graduate of an accredited respiratory therapy program". Currently the NBRC accepts a certificate of completion to meet eligibility requirements for some select programs. Mr. Vicknair recommends that the committee change the language in the rules and regulations to similar language accepted by the NBRC. Dr. Shellito moves that the language in	Raymond Pisani will forward the following recommendation to Mr. Phil Bergeron:  In Chapter 25 Subchapter B §2507 number 3; change the wording to read as follows  "be a graduate of a respiratory therapy program or have met the National Board of Respiratory Care's (NBRC) requirements for respiratory therapy credentialing"

	<p>Chapter 25 Subchapter B section 2507 #3 be changed to include: " or have met the NBRC's requirements for Respiratory Therapy credentialing"</p> <p>2<sup>nd</sup> by Dr. Klein</p> <p>9 yea</p> <p>0 nay</p> <p>0 abstain</p>	
V. Old Business	None	NA
VI. New Business	<p>Ms. Thiania Elliot, investigator for the LSBME, brought to the advisory committee an issue related to DME companies providing instruction to patients on respiratory care equipment/ procedures by non licensed personnel. Ms. Elliot researched the case and spoke with a Medicare representative and found that Medicare does not have guidelines to enforce state rules and regulations regarding delivery of respiratory care relative to DME equipment and companies.</p> <p>Medicare licenses companies in 3 categories; DME, DME with oxygen, DME with Respiratory Therapist. It is unclear if all types of DME companies are allowed under federal statutes to provide all respiratory equipment. Under the current Respiratory Therapy rules and regulations, the statements are vague regarding what constitutes respiratory care procedures relative to DME companies. The language is much stronger in the proposed rules and regulations.</p> <p>Ms. Elliot suggested an educational</p>	<p>Ken Alexander is to research to see if LHA has a current list of DME companies</p> <p>Raymond Pisani will send out the rules and regulations to DME companies with the new language once the proposed rules and regulations are approved.</p>

	<p>approach vs. a disciplinary approach for those DME companies not meeting the current guidelines for provision of respiratory care services.</p> <p>Dr. Shellito had concerns regarding the reasonableness of DME companies having to hire RCP's and enforcing this rule especially in light of the fact RT services are not reimbursable under the current Medicare structure.</p> <p>Ken Alexander stated that there is no regulatory agency for DME companies in our current state structure and enforcing this rule will be difficult.</p> <p>Suggestions offered by the board to minimize the need for RCP's on the DME staff is to provide training in the hospital prior to discharge by hospital based RT's and /or have an RN on staff that has been trained in the use of the equipment and patient care procedures</p> <p>Motion was made by Dr. Shellito to distribute new rules and regulations to DME companies  2<sup>nd</sup>: Dr. Klein  9 yea  0 nay  0 abstain</p>	
<p>VII. CEU Audit</p>	<p>Dr.'s Shellito and Klein dismissed at this time. CEU audit completed by the committee members. List is reflected on the attached document. All audits passed.</p> <p>During the audit Ken Alexander reviewed</p>	<p>Raymond Pisani will forward the following additions to Mr. Phil Bergeron</p> <p>Chapter 25 Subchapter F §2559 letter A;  Add "Department of Health and Hospitals (DHH), Louisiana Hospital Association</p>

	<p>the new rules relative to acceptable CE providers. It was brought to the committee's attention that the deletion of several CE providers was not in the best interest of respiratory therapy practitioners. A motion was made by Shelia Guidry to add in the new rules and regulations the following CE providers: LHA, DHH and The Joint Commission.  2<sup>nd</sup> by Brett Stafford  6 yea  0 nay  1 abstain  (Ken Alexander recused himself from this vote due to his alliance with LHA)</p>	<p>(LHA) and The Joint Commission”  The language will read as follows:” Any program, course, seminar, workshop or other activity meeting the standard prescribed by §2557 shall be deemed approved for purpose of satisfying continuing education requirements under this Subchapter, if sponsored or offered by one of the following agencies: The American Association for Respiratory Care (AARC), the Louisiana Society for Respiratory Care (LSRC), the American Lung Association (ALA), the American Heart Association (AHA), the American Academy of Pediatrics (AAP), The American College of Chest Physicians (ACCP), the American Thoracic Society(ATS), the Department of Health and Hospitals (DHH), Louisiana Hospital Association (LHA) or The Joint Commission.”</p>
<p>VII. Next meeting</p>	<p>Monday, June 14, 2010</p>	<p>Chair will email committee members reminder about date and location</p>
<p>IX. Adjournment</p>	<p>Motion to Adjourn: Ken Alexander  2<sup>nd</sup>: Diana Merendino  7 yes 0 no 0 abstain</p>	<p>Meeting was adjourned at 11:35 am</p>

Respectfully submitted,