The CARE Bill – What It Is, Its History, and Its Current Status

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Consumer Assurance of Radiologic Excellence Act

What is it anyway?
Simply put, it is an attempt to modify existing Health Care Laws in order to establish education, training, and experience requirements for those providing or involved in medical imaging and radiation therapy procedures.

Consumer Assurance of Radiologic Excellence Act

What is it not?
It is not a licensure Bill. States will not be required to license anyone as a result of this Bill.

Consumer Assurance of Radiologic Excellence Act

Do we really need standards?
So many of us came from straight physics or other fields. We learned and we have done well. In fact we did so well that many of us got certified in all three areas of Medical Physics.
But times change.

Those doing clinical work are no longer Physicists in Medicine, but truly are Medical Physicists – a distinct recognized profession.

We are procedural – we are legally expected to know how to do certain things.

A few changes I seen in 29 years:
- Mirrored Fluoro
- Xeroradiography
- Films
- Film Duplicators
- Plain Films
- CT

- Co-60 units
- Hand Blocks
- Wire Contours
- 2D planning
- LDR Brachy
- Postage Stamp Fields

- Linear Accelerators
- MLC
- CT Sim
- IMRT
- HDR, IVBT, Prostate Seed
- Stereotactic

The Public and Co-professionals rely on our advice and our performance.

When that happens, it becomes necessary that there be standards.

Even hair dressers have standards. To protect the public from bad hair days.
Consumer Assurance of Radiologic Excellence Act

But no one guarantees that even with standards, bad hair will not happen.

Alliance for Quality Medical Imaging and Radiation Therapy

Who’s in the Alliance?

Founding Members:
- American Society of Radiologic Technologists
- Society of Nuclear Medicine-Technologist Section

Alliance Charter Members:
- American Association of Medical Assistants
- American Association of Medical Dosimetrists
- American Association of Physicians in Medicine
- American College of Medical Physics
- American Registry of Radiologic Technologists
- Association of Educators in Radiologic Sciences
- Association of Vascular and Interventional Radiographers
- Cardiovascular Credentialing International

Who’s in the Alliance?

Joint Review Committee on Education in Cardiovascular Technology
Joint Review Committee on Education in Nuclear Medicine Technology
Joint Review Committee on Education in Radiologic Technology
Nuclear Medicine Technology Certification Board
Section for Magnetic Resonance Technologists of ISMRM
Society of Invasive Cardiovascular Professionals
Society for Radiation Oncology Administrators

(17 total)
Consumer Assurance of Radiologic Excellence Act

Problems -- Limited Scope (RT’s only), Unforeseen Specialization, No Hammer

Consumer Assurance of Radiologic Excellence Act

Past Attempts to Amend:
- 2000HR Rep. Lazio’s Bill (Introduced late in 106th Congress)

Consumer Assurance of Radiologic Excellence Act

There are currently 2 versions:
- HR 1214 Consumer Assurance of Radiologic Excellence Act (109 sponsors as of 7/3/04)
- S 1197 Consumer Assurance of Radiologic Excellence Act of 2003 (16 sponsors as of 7/03/04 – termed “the RadCare Bill”)

HR 1214 Sponsor

Sponsor - Rep. Heather Wilson (New Mexico)
Co-Sponsors - 109 as of July 3, 2004
HR 1214 CARE Act

“it is unlawful for an individual in the State to intentionally administer or plan medical imaging procedures or radiation therapy procedures to or for a patient for medical or chiropractic purposes …”

HR 1214 CARE Act

“unless the individual has obtained from the State a license, certificate, or other document that authorizes the individual to administer such procedures in the State (referred to in this section as a ‘medical radiation license’).

- medical imaging procedures
  - Excludes Dental
  - Excludes Ultrasound
  - Includes MRI
  - Includes Cardiovascular Imaging
  - Includes Chiropractic

- radiation therapy procedures
  - Includes External Beam RT
  - Includes Brachytherapy RT
  - Includes Radiopharmaceutical RT
administer

the act of directly exposing a patient to radiation via ionizing or RF radiation for purposes of medical imaging or for purposes of radiation therapy; and

the act of positioning a patient to receive such an exposure.

plan

the act of preparing for the administering of such a procedure to a patient by evaluating patient-specific or site-specific information.

plan

based on computer analysis or direct measurement of dose in order to customize the procedure for the patient and verifying appropriate dose administrations.

plan

site-specific includes setting up techniques for Medical Imaging and RT based on computer analysis or direct measurement of dose therefore includes RadOnc and Medical Dosimetrists and includes Dx and Nuc Med physicists.
HR 1214 CARE Act

- **Requirements**
  - Establish ‘medical radiation license’
  - Establish Standards for Training and Experience
  - Suffer loss of Medicaid money for failure to act (The Hammer)

HR 1214 CARE Act

- **Medical radiation license**
  - License
  - Certificate, or other document
  - Supplied by the State

HR 1214 CARE Act

- **Standards**
  - Education required
  - Training and Experience required
  - by Accredited Institutions or Programs recognized by Secretary
  - In Consultation with National Recognized Organizations

Consumer Assurance of Radiologic Excellence Act

- Senate Bill S. 1197
Sponsor

Sen. Michael B. Enzi (Wyoming)

Co-Sponsors
- Sen. Joseph R. Biden, Jr. (DE)
- Sen. Thad Cochran (MS)
- Sen. Kent Conrad (ND)
- Sen. Thomas A. Daschle (SD)
- Sen. Mark Dayton (MN)
- Sen. Christopher J. Dodd (CT)

Co-sponsors
- Sen. Byron L. Dorgan (ND)
- Sen. Richard J. Durbin (IL)
- Sen. James M. Jeffords (VT)
- Sen. Tim Johnson (SD)
- Sen. Edward M. Kennedy (MA)
- Sen. John F. Kerry (MA)
- Sen. Frank R. Lautenberg (NJ)

Co-sponsors
- Sen. Blanche Lincoln (AR)
- Sen. Mark Lunsford Fryor (AR)
- Sen. Ron Wyden (OR)

Purpose

- Ensure the safety and accuracy of medical imaging examinations and radiation therapy treatments
- House: provide public access to quality medical imaging procedures and radiation therapy procedures
Findings

- More than $3 \times 10^8$ medical imaging examinations and radiation therapy treatments are administered annually in the United States.
- Seven out of every 10 Americans undergo a medical imaging exam or radiation therapy treatment every year in the US.

Findings

- The administration of medical imaging examinations and radiation therapy treatments and the effect on individuals of such procedures have a substantial and direct effect upon public health and safety and upon interstate commerce.

Findings

- It is in the interest of public health and safety to minimize unnecessary or inappropriate exposure to radiation due to the performance of medical imaging and radiation therapy procedures by personnel lacking appropriate education and credentials.

Findings

- It is in the interest of public health and safety to have a continuing supply of adequately educated persons and appropriate accreditation and certification programs administered by State governments.
Findings

- Persons who perform or plan medical imaging or radiation therapy, including those employed at Federal facilities or reimbursed by Federal health programs, should be required to demonstrate competence by reason of education, training, and experience.

Findings

- The protection of public health and safety from unnecessary or inappropriate medical imaging and radiation therapy procedures and the assurance of efficacious procedures are the responsibilities of both the State and the Federal Governments.

Findings

- Facilities that conduct medical imaging or radiation therapy engage in and affect interstate commerce. Patients travel regularly across State lines to receive medical imaging services or radiation therapy.

Findings

- Facilities that conduct medical imaging or radiation therapy engage technicians, physicians, and other staff in an interstate market, and purchase medical and other supplies in an interstate market.
Findings


22 Years later

- 13 states do NOT require licensure of any kind.
- 37 license, regulate or register radiographers
- 28 license radiation therapists
- 22 license nuclear medicine technologists

22 Years Later

- No States regulate or license medical dosimetrists
- 8 license or require board certification of medical physicists

Purposes

- To ensure the accreditation of education programs for, and the licensure or certification of, persons who perform, plan, evaluate, or verify patient dose for medical imaging examinations and radiation therapy treatments; and
**Purposes**

- To ensure the safety and accuracy of medical imaging examinations and radiation therapy treatments.

**Quality of Medical Imaging and Radiation Therapy**

- Add to Part F, title III, Public Health Service Act (42 U.S.C. 262 et seq.)
  - Subpart 4: medical Imaging and Radiation Therapy
    - Sec. 355. Quality of Medical Imaging and Radiation Therapy

**Quality of Medical Imaging and Radiation Therapy**

- The Secretary shall establish standards to assure the safety and accuracy of medical imaging or radiation therapy. Such standards shall include licensure or certification, accreditation, and other requirements determined by the Secretary to be appropriate.

**Quality of Medical Imaging and Radiation Therapy**

- Exemptions: The standards shall not apply to
  - Physicians
  - Nurse Practitioners
  - Physician Assistants
Quality of Medical Imaging and Radiation Therapy

- Requirements for individuals:
  - Successfully completed a national examination approved by the Secretary
  - Meet such other requirements as the Secretary may prescribe.

Approved Bodies

- Secretary shall certify private nonprofit organizations or State agencies with respect to the accreditation of educational programs or the administration of examinations.

Standards

- The Secretary shall establish minimum standards for the certification of approved bodies and other additional standards as the Secretary may require.

Existing Standards

- State standards established by a State prior to the effective date of these standards shall be deemed in compliance unless the Secretary determines that they do not meet the minimum standards of the bill.
PAYMENT!
- Not later than 18 months after enactment: Medicare payment conditional on programs being in accordance with the standards.
- House: also requires adoption for Medicaid payments.

Regulations
- Not later than 18 months after the date of enactment of this section, the Secretary shall promulgate such regulations as may be necessary to implement this section.

Alliance currently working on recommendations for these regulations!

Definition: Medical Imaging
- Any procedure or article, excluding medical ultrasound procedures, intended for use in the diagnosis or treatment of disease or other medical or chiropractic conditions in humans, including diagnostic X-rays, nuclear medicine, and magnetic resonance procedures.
- House: same

Definition: Perform
- The act of directly exposing a patient to radiation via ionizing or radio frequency radiation or to a magnetic field for purposes of medical imaging or for purposes of radiation therapy.
- House: Term is “Administer”
  - does not include “or to a magnetic field”
**Definition: Perform (cont)**
- Act of positioning a patient to receive such an exposure
- House: same. Term is “Administer”

**Definition: Plan**
- With respect to medical imaging or radiation therapy, the act of preparing for the performance of such a procedure to a patient by evaluating site-specific information, based on measurement and verification of radiation dose distribution, computer analysis, or direct measurement of dose, in order to customize the procedure for the patient.

**Definition: Plan**
- House: the same

**Definition: Radiation Therapy**
- Any procedure or article intended for use in the cure, mitigation, treatment, or prevention of disease in humans that achieves its intended purpose through the emission of radiation.
- House: Any radiation procedure or article intended for the cure, mitigation, or prevention of diseases or disorders in humans
Bill passes, then what?
- Becomes effective within 18 months of passage
- 18 months to implement (total 3 years)
- Statutes developed by Secretary of HHS
- Role of CAMPEP?

Ramifications
- Greater consistency in practice
- Will not eliminate all mistakes
- More reliable hiring
- True licensure? Up to States!
- Independent billing?

Questions?

In the Words of Woody Woodpecker
"Dah, dah, dah... that's all folks!"