



Maryland
Hospital Association

Date: February 26, 2019

Committee: Education, Health, and Environmental Affairs

MHA Staff Contact: Jennifer Witten VP Government Affairs

Senate Bill 733 – State Board of Physicians-Registered Cardiovascular Invasive Specialists
Position: Support

Bill Summary

SB733 would authorize certain registered cardiovascular invasive specialists to perform certain functions; require a registered cardiovascular invasive specialist to be supervised by a licensed physician; establish that the failure of certain licensed physicians to provide proper supervision constitutes professional misconduct; require the State Board of Physicians to keep a list of all cardiovascular invasive specialists and adopt certain regulations to create an exemption for practice of RCIS.

MHA Position

Under Maryland's unique Total Cost of Care model with the federal government, Maryland's hospitals are working to lower healthcare costs, improve efficiencies and improve health outcomes. Maryland's hospitals are working to provide patients with the right care, at the right time, in the right setting. Cardiovascular death is the leading cause of death in the nation and in Maryland. It is critical to have programs that can respond to someone experiencing an acute cardiac attack.

In Maryland, the Maryland Institute for Emergency Medical Services Systems (MIEMSS), the State agency is responsible for coordinating Maryland's emergency medical services (EMS) has designated 24 hospitals as "Cardiac Interventional Centers. The designation as a "Cardiac Interventional Center" indicates that a hospital complies with State and Federal standards to receive patients transported by EMS who are experiencing the most common type of heart attack when an artery that supplies blood to the heart is suddenly blocked called an ST-elevation myocardial infarction, or "STEMI". For these patients, primary percutaneous coronary intervention (pPCI) as the treatment of choice because it is generally associated with fewer complications and better outcomes. These programs need a specialized team ready to respond to medical emergencies 24 hours a day, 7 days a week. To support these programs, a number of stakeholders recognized that leveraging the full skill-set of the Cath lab team is critical in providing the best care.

According to leading staffing agencies in Maryland, the number one request from hospitals for staffing is qualified cardiovascular invasive specialists (RCIS), Cath Lab nurses and Cath Lab Radiologist Technicians. Maryland state regulations do not allow these RCIS to assist the Cardiologist to their full ability, which results in issues with retainment. To address this issue, we must create a state regulatory and licensing environment that reflects the breadth of potential

trained providers available in the field. That is why we support SB733, which would allow registered, fully credentialed cardiovascular invasive specialists to work under the direct supervision of a licensed physician without the requirement of licensure. This exemption would exist for three years, after which a study would help determine next steps regarding the potential licensure of these technicians.

Howard Community College has an accredited program to educate these specialists, and this bill is supported not only by the Maryland Hospital Association and hospitals throughout the state, but also by the Maryland Board of Physicians and the American College of Cardiology.

The more than 100 professionals currently performing these procedures in Maryland fall under a classification that limits their scope of duties. This important bill would strengthen the health care workforce and enable these professionals to carry out all tasks associated with their education and specialization. All registered cardiovascular invasive specialists would be certified by a national board, Cardiovascular Credentialing International, and strictly governed by the regulations of the Maryland Health Care Commission, which provide for strict annual reviews of cardiac programs' regulatory conformance.

The Maryland Healthcare Commission, the Board of Physician's and the Maryland Hospital Association will work together to evaluate the implementation of the exemption and consider any impact on the quality of programs to report back to the General Assembly of its findings.

For these reasons, we urge you to give SB 733 a *favorable* report.