

Our Mission

The SDMS PAC was established to preserve and promote good government, fiscal responsibility in government and the private business enterprise system, in particular with respect to Diagnostic Medical Sonography.

To achieve our mission, the SDMS PAC is organized and exclusively operated for the purpose of soliciting and accepting voluntary personal political contributions from individual SDMS members and employees, accepting unsolicited contributions from permissible sources, and making contributions and expenditures to support or oppose the candidacy, nomination and election of candidates for federal office and for such other political purposes as authorized by law.

President's Message

Charlotte Henningsen, President, SDMS PAC

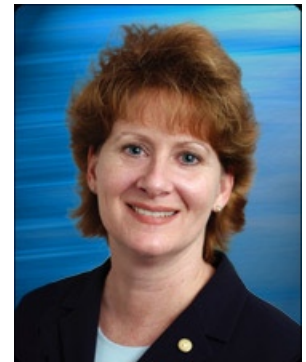
I am excited to be able to welcome you to the inaugural edition of the SDMS PAC newsletter, the *SDMS Sonography Sentinel*. I hope that you will find this newsletter your information source for updates on SDMS and sonography-related legislative initiatives.

I would like to thank the SDMS leadership, including the members of the Board of Directors and Committee chairs, for their support of the SDMS PAC. I am proud to say that we have received contributions from 100% of the SDMS leadership. This is a testimony to the commitment that the SDMS leadership has towards supporting the legislative efforts that affect the profession.

You may be asking why the SDMS decided to form a political action committee? The SDMS PAC was established to assist the advocacy efforts of the SDMS to support and promote issues related to diagnostic medical sonography at the federal level. Furthermore, the SDMS PAC will be an essential component in assisting the SDMS in representing the interests of its sonographer membership by sending a strong, unified, bipartisan message to members of Congress. It says that SDMS members are committed to support those candidates in Congress who are supportive of our issues and initiatives. We want elected officials to understand those legislative matters that are important to the SDMS, the profession, and you!

Now it is time to grow the SDMS PAC fund, so that we will have the financial support to advance our legislative agenda. If you have previously contributed to the SDMS legislative and regulatory fund, I hope that you will consider making a similar contribution to the SDMS PAC. If you have not considered the legislative and regulatory aspects of our profession in the past, I hope that you will accept my invitation to read about our initiatives in this newsletter and on the SDMS' Website. In summary, I am personally asking that you make a financial contribution to this effort supporting the SDMS PAC at <https://sdmspac.org/contribute.aspx>.

As the president of the SDMS PAC, I welcome your questions and comments at any time. You can direct any correspondence to me at info@sdmspac.org or call 214-473-8057.



cover story: President's Message • **2** SDMS PAC Facts • **3** SDMS PAC Reports CARE Bill Progress and Concerns Regarding Medicare Bill 2008's Advanced Imaging Standards • **6** What is a Political Action Committee Exactly? • The Power an SDMS' Grassroots Initiative • **7** Explore the SDMS PAC Website • **8** Hot Topics: National and State News Updates • **9** Advocacy Agents: SDMS Members Make a Difference • **11** Candidates "At a Glance"

SDMS PAC Board of Directors



Charlotte Henningsen, MS,
RT(R), RDMS, RVT, FSDMS
President



Donald Haydon, CAE
Treasurer



Joy Guthrie, DHSc, RDMS,
RDCS, RVT, RCS, RVS, ROUB
Assistant Treasurer



Stephanie Ellingson,
MS, RT(R), RDMS,
RDCS, RVT



Cindy Owen, RDMS,
RVT, FSDMS



Jean Lea Spitz, MPH,
RDMS, FSDMS



Terry Tye, MS,
RDMS, RDMS



SDMS PAC Facts

1. The SDMS PAC is bipartisan and will work to support U.S. Congress candidates who are dedicated to sonographic issues, including those who favor establishing minimum education and certification standards.
2. The SDMS PAC speaks for SDMS members representing all sonography specialties with a unified voice.
3. The SDMS PAC and the SDMS will work together in shaping and working to pass federal legislation, such as the CARE bill.
4. The SDMS PAC is an important part of the association's "tool kit" needed to achieve success with the SDMS legislative agenda.
5. The SDMS PAC disbursements to federal candidates are made only upon approval of the SDMS PAC Board of Directors.
6. The SDMS association is prohibited from contributing to federal election campaigns. Disbursements of contributions are only allowed from the SDMS PAC.
7. The SDMS PAC will be a vehicle for growing grassroots participation. Experience tells us that members who contribute to a PAC are more involved in the legislative process, make decisions that are more informed when they vote and are more likely to call or write their legislators about important professional issues.
8. Participation in the SDMS PAC is strictly voluntary. The SDMS PAC fund is a separate entity apart from the SDMS.
9. The SDMS PAC accepts individual contributions of any amount up to the legal allowable limit of \$5,000 per calendar year. (Reference: Federal Election Commission Regulations)
10. SDMS PAC contributors will get early notice of breaking political news and information in newsletters and e-mails. This information will also be available on the SDMS PAC Website: <http://www.sdmspac.org/>.
11. The SDMS members' decision to participate or not participate in the SDMS PAC will in no way affect their SDMS membership status.



The SDMS and the SDMS PAC believe that good public policy demands that all patients are provided with quality imaging services, including mandatory certification of the individual who holds the transducer.

SDMS PAC Reports CARE Bill Progress and Concerns Regarding Medicare Bill 2008's Advanced Imaging Standards

CARE bill, S. 1042, "Consistency, Accuracy, Responsibility, and Excellence in Medical Imaging and Radiation Therapy Act of 2007" (the CARE bill)

On March 13, 2008, the U.S. Senate Health Education Labor and Pensions (HELP) Committee unanimously approved the CARE bill. This bill directs the Secretary of Health and Human Services to establish standards for personnel performing medical imaging and radiation therapy services, including diagnostic medical sonographers. The language reflected in the CARE bill passed by the Senate HELP committee would require the establishment of mandatory *certification* and *education standards* for these health care professionals. The bill is awaiting Congressional action.

<http://thomas.loc.gov/cgi-bin/bdquery/z?d110:s.01042>

Medicare bill, H.R. 6331, "Medicare Improvements for Patients and Providers Act of 2008" (the Medicare bill)

The Medicare bill of 2008 became law July 15, 2008, when both the U.S. Senate and House, in a strong bipartisan showing, voted to override a Presidential veto in order to eliminate the physician Medicare reimbursement cut of 10.6 percent that took effect on July 1, 2008.

The Medicare bill also included "Section 135, Imaging Provisions" that establishes standards for personnel who perform "advanced diagnostic imaging services." As defined in the Medicare bill, these 'advanced imaging' services:

- **Include** Computed Tomography (CT) scans, Magnetic Resonance Imaging (MRIs), Nuclear Medicine and Positron Emission Tomography (PET); and
- **Exclude** X-ray, Fluoroscopy, and Ultrasound (Sonography) from the standard setting requirement.

The SDMS had concerns with the Medicare bill establishing an arbitrarily defined two-tier system for imaging services; "advanced" vs. non-advanced and objected to the exclusion of ultrasound services from the bill. This two-tier approach also appears to reflect a national trend by third-party private payers, for example, United Healthcare nationally and Blue Cross/Blue Shield of Tennessee, to differentiate between higher and lower cost diagnostic imaging services.

<http://thomas.loc.gov/cgi-bin/bdquery/z?d110:h6331>

By way of history, the SDMS supported the CARE bill as part of a 24 member "Alliance" of allied health organizations. However, after passing out of the Senate HELP Committee, the CARE bill stalled in Congress. The stall was due, in part, to the Medicare Act of 2008, which as mentioned above dealt with Medicare issues and included 'medical imaging' standards provisions.

Further, the quality control standard required within the Medicare bill for the 'advanced imaging' services was accreditation. Lab, or facility, accreditation as a quality control standard for sonography is problematic because the two largest



accrediting bodies for sonography, the Intersocietal Commission for Accreditation of Vascular Laboratories (ICAVL) and the Intersocietal Commission for Accreditation of Echocardiography Laboratories (ICAEL), do not require the person performing the sonography exam to be certified. Only the lab's technical director must be certified - but are not required to be physically present in the facility during the examination.

The take away message is that the two largest providers of imaging services (x-ray and ultrasound,) based on utilization rates, were intentionally left out of the Medicare bill; meaning, passage of the CARE bill with individual certification and education standards is all the more critical for the sonography profession.

The lack of sonographer certification requirements in the ICAVL and ICAEL accreditation processes is a significant 'Achilles Heel' for using accreditation as **the** quality standard within the sonography community. Despite repeated requests from SDMS and others, both ICAEL and ICAVL have declined to require sonographer certification as part of their accreditation program criteria.

The SDMS will continue to work with members of Congress to support passage of the CARE bill to ensure that national certification and education standards for sonography are ultimately enacted. The SDMS believes that good public policy demands that all patients are provided with quality imaging services, including mandatory certification of the individual who holds the transducer. Good public policy also dictates that patients receive quality services regardless of the imaging modality being provided.

To review the SDMS' position shared with key U.S. Senate Leadership, July 8, 2008, see the following document:



July 8, 2008

The Honorable [Senator's Name]
United States Senate

Dear Senator

Earlier this year, the Senate Health Education Labor and Pensions (HELP) Committee unanimously approved legislation, S. 1042, the "Consistency, Accuracy, Responsibility, and Excellence in Medical Imaging and Radiation Therapy Act of 2007," the CARE bill. It directs the Secretary of Health and Human Services to establish standards for medical personnel performing medical imaging and radiation therapy services. We ask that the Senate now move the CARE bill to a vote.

The Society of Diagnostic Medical Sonography (SDMS), representing over 21,000 sonographers nationwide, supports S. 1042 as it will establish minimum certification and education standards for persons providing medical imaging services including diagnostic medical sonographers.

There is some confusion regarding the CARE bill in that the Medicare bill (H.R. 6331), likely to come before the Senate this week, includes a section establishing standards for personnel who perform “advanced diagnostic imaging services.” As defined in the Medicare bill these services include: Computed Tomography (CT) scans, Magnetic Resonance Imaging (MRIs), Nuclear Medicine and Positron Emission Tomography (PET). However, this bill excludes X-ray, Fluoroscopy, and Ultrasound (Sonography) from the standard setting requirement.

Also, while the Medicare bill requires the accreditation of facilities providing “advanced diagnostic imaging services,” it does not require certification or education standards for the medical imaging personnel actually providing the service.

According to the Medicare Payment Advisory Commission (MedPAC), the establishment of standards for the personnel performing medical imaging procedures will improve the overall quality of imaging performed in the United States and it will lower Medicare expenditures by dramatically reducing payments for unnecessary or improperly performed imaging services.

In a 2001 American College of Radiology (ACR) study, researchers found: (http://www.medpac.gov/publications/congressional_reports/Mar05_EntireReport.pdf)

- X-ray and ultrasound represent approximately 75% of the diagnostic and therapeutic radiology procedures performed per Medicare non-managed care enrollees.
- The “advanced services” described above comprise only 17.8% of the medical imaging services performed on Medicare patients.

We understand that the excluded examinations are typically less expensive than the “advanced services;” however, their sheer volume represents a significant part of Medicare reimbursements.

Good public policy requires that patients are provided with quality examinations regardless of the imaging modality. By having only certified diagnostic imaging personnel performing these exams, quality improves and Medicare costs are reduced by less repeat studies.

We ask you to urge the Senate leadership to schedule S. 1042 for a vote thus ensuring Medicare beneficiaries receiving X-rays, fluoroscopy, and ultrasound medical imaging services have well-qualified personnel performing these procedures.

Sincerely,



Donald F. Haydon, CAE
Executive Director
214-473-8057
dhaydon@sdms.org



What is a Political Action Committee Exactly?

The Society of Diagnostic Medical Sonography (SDMS) recently formed a Political Action Committee (PAC) – *the SDMS PAC*. A PAC is organized for the purpose of raising and distributing money in an effort to further an organization's advocacy agenda. For example, one of the reasons the SDMS PAC was created was to provide support for passage of the CARE bill. (See the CARE bill update in a related news story in this issue of the *SDMS PAC Sentinel*.)

A PAC is a separate, segregated fund registered with the Federal Election Commission (FEC), which is established and administered by an organization, in this case, the SDMS. Every PAC has a board of directors, which includes a Treasurer. The PAC board is responsible for deciding to who will receive monies from the PAC and how much is to be disbursed. The SDMS PAC Board of Directors consists of seven positions and is responsible for disbursement decisions and ensuring that the PAC is managed in accordance with FEC rules and regulations.

The SDMS PAC can receive contributions from individuals associated with the sponsoring organization (e.g. SDMS members and employees). The members must be a U.S. citizen or a "green card" holder in order to contribute to the SDMS PAC. There are certain information disclosure requirements that must be met for contributions received of \$200 or more. For PAC contributions of \$200 or more, we must collect information from the contributor including address, employer name and occupation. Individual contributors are limited in the amount they may contribute in any given calendar year, the maximum being \$5,000 per calendar year.

The SDMS PAC is a federal PAC meaning that it can only contribute to candidates in federally held offices. Federal Election Campaign Laws state that PACs can distribute no more than \$5,000 to a candidate per election. The SDMS PAC is non-partisan meaning the PAC can distribute funds to a candidate associated with any political party.

Strict rules and regulations are in place to ensure all PAC activity complies with the Federal Election Commission's (FEC) rules and regulations. The FEC's *Campaign Guide for Corporations and labor Organizations* can be found at www.fec.gov for more information. It provides in detail, regulations, statutes, opinions, etc .

The Power of a SDMS Grassroots Initiative

The Society of Diagnostic Medical Sonography (SDMS) has long had the benefit of member involvement in legislative and regulatory efforts. Traditional advocacy activities involving SDMS members have included requests of state and federal legislators, and regulators, to address sonography-related issues such as Medicare reimbursement, establishment of quality standards, and accreditation and certification requirements.

As the SDMS has grown, our advocacy challenges are no less daunting as the healthcare environment continually changes and as federal funding for imaging services face increased scrutiny.

The SDMS, through its establishment of an SDMS Political Action Committee (PAC), is creating an even more powerful grassroots initiative by focusing on critical issues, educating members and, building on an already powerful base of support.

Over the next few months, SDMS' (U.S.) members will receive more information about the SDMS PAC and a solicitation request for an SDMS PAC fund contribution.

Growing the SDMS PAC contributions is an important component of the “tool chest” the SDMS PAC will use to advocate and educate Congress on behalf of its SDMS membership.

Successfully advancing sonographic issues, including passage of the CARE bill, ensuring appropriate Medicare standards, and addressing a host of other legislative and regulatory concerns, requires that the SDMS and the SDMS PAC speak with one “unified voice.” A unified voice allows us to act quickly as we inform and educate legislators and regulators on our issues. By focusing on the sonography profession and the SDMS membership, we should expect a greater impact on government decision-makers as we implement our advocacy initiatives.

Our ultimate goal is to reach key decision makers with our message. This is only possible if you become involved. Your grassroots involvement includes registering to vote, contributing to your SDMS PAC (even a small contribution can make a huge difference), and by contacting your elected officials when you receive SDMS member “Calls to Action.”

Watch your email for more information!

Explore the SDMS PAC Website



If you want the most up-to-date information about legislative and regulatory news that affects the sonography profession, then visit the website of the newly formed SDMS Political Action Committee (SDMS PAC) at www.sdmspac.org. The SDMS PAC website is continually ‘refreshed’ with the latest in political news, updates regarding developments that affect sonographers, and includes a comprehensive list of frequently asked questions (FAQ’s) about the SDMS PAC, and its work on behalf of SDMS members.

The SDMS PAC website’s home page starts out by providing the reasoning, which led to the formation of the SDMS PAC, and then links you to the latest news summaries and the SDMS PAC contribution’s page. You can visit the ‘About Us’ website page to view the SDMS PAC’s Board of Directors, and its Mission and Purpose statements. If you still have more questions about the SDMS PAC, there’s a link to ‘contact us’ with your questions.

From time to time, SDMS may call upon you to contact your U.S. Senators or House of Representative member about a pending issue. We have included a website page that includes helpful links to United States Senators and House members as well as the Library of Congress. Not sure who your representatives are...the SDMS PAC website includes a way for you to look up your federal and state elected officials.

Another page on the SDMS PAC Web site you should know about is the Contribution page. This is just one of the ways you can help support the SDMS PAC. All contributions to SDMS PAC are completely voluntary and in no way affect your SDMS membership status. We encourage you to visit this page and consider supporting the work of the SDMS PAC by making a contribution.

So if you haven’t visited the SDMS PAC website yet then what are you waiting for? Go to www.sdmspac.org and see what you’ve been missing.



Topics of Interest
for Sonography
Professionals

National and State News Updates

Health Information Technology

Capitol Hill Watch

“House Subcommittee Approves Legislation to Encourage Nationwide Adoption of Electronic Health Records”

June 26, 2008, *Kaiser Network.org*

The House Energy and Commerce Subcommittee on Health on Wednesday by voice vote approved a bill (HR 6357) that aims to encourage nationwide adoption of an electronic health record system, *CQ Today* reports (Wayne, *CQ Today*, 6/25). The bill would authorize \$575 million annually through fiscal year 2013 to provide grants and loans for health care providers to purchase health information technology systems.

Washington Post

“Medicare to Pay Bonuses for ‘E-Prescribing”

By Steven Reinberg, *HealthDay Reporter*

Monday, July 21, 2008; 12:00 AM

MONDAY, July 21 (HealthDay News) -- Starting next year, doctors can earn additional money from Medicare if they use electronic prescribing systems, U.S. health officials said Monday.

The bonus program, which will continue for four years, is designed to streamline the prescription process and cut down on errors. In 2009 and 2010, Medicare will give doctors an additional 2 percent bonus on top of their fee for “e-prescribing.”

http://www.washingtonpost.com/wp-dyn/content/article/2008/07/21/AR2008072102035_pf.html

National Health Workforce Policy

Association of Academic Health Centers’ press release

“New Report Warns Current Policies Will Not Avert Health Workforce Crisis”

Coordinated national planning needed to adapt to changing workforce demands and threats

WASHINGTON, July 17 - Without immediate action to develop an integrated, comprehensive, national health workforce policy, the U.S. is at risk of losing its status as the global health care leader, states a new report released by the Association of Academic Health Centers (AAHC, www.aahcdc.org).

http://www.aahcdc.org/news/files/AAHCPressRelease07_17_08.pdf

Medicare Spending on Imaging Services

GAO: MEDICARE PART B IMAGING SERVICES

“Rapid Spending Growth and Shift to Physician Offices Indicate Need for CMS to Consider Additional Management Practices”

June 2008

What GAO Found:

From 2000 through 2006, Medicare spending for imaging services paid for under the physician fee schedule more than doubled—increasing to about \$14 billion.

Spending on advanced imaging, such as CT scans, MRIs, and nuclear medicine, rose substantially faster than other imaging services such as ultrasound, X-ray, and other standard imaging.

What GAO Recommends:

To address the rapid growth in Medicare Part B spending on imaging services, GAO recommends that CMS examine the feasibility of expanding its payment safeguard mechanisms by adding more front-end approaches, such as prior authorization. HHS stated that it would need to examine the applicability of prior authorization for Medicare.

<http://www.gao.gov/highlights/d08452high.pdf>



*Terry DuBose, MS, RDMS,
FSDMS, FAIUM*

Advocacy Agents: SDMS Members Make a Difference

Profiles of SDMS Members who have become engaged in advocacy work on behalf of the SDMS and the profession

"I encourage all SDMS members to become involved in advocacy efforts that further the sonography profession. With a unified voice, we all benefit," Terry DuBose, SDMS' member said.

This edition of the SDMS PAC *Sentinel* features Terry DuBose, MS, RDMS, FSDMS, FAIUM, Program Director, Diagnostic Medical Sonography Program, University of Arkansas for Medical Sciences, Little Rock, Arkansas.

"My first activity having to do with sonographic advocacy was in the 1980s after I had started the first outpatient sonographic laboratory in Austin, Texas with a group of radiologists. This was before I joined the SDMS.

Our neighbor was a legislative assistant to a member of the Texas House of Representatives. She called me and asked, "Do you know that there is a bill on the floor of House that will affect your profession?" I did not know and asked her to fax a copy to me. It turned out to be a bill sponsored by the Texas Association of Radiologic Technologists for licensure. The bill included sonography along with radiography, but did not include any ARDMS credentialed sonographers on the proposed governing board.

I was a member of the San Antonio Ultrasound Society (SAUS), so I called the president of the SAUS. He was an officer in the Army, a physician who was very interested in sonography and supported sonographers. He became very agitated about sonography being included in a bill that would impose radiologic technologist (RT) licensure standards on sonographers without Governing Board representation. Because the bill was already out of committee, and could be called to a vote at any time, he suggested that we did not have time for a letter writing campaign, and contacts with legislators would have to be by phone. He asked me to call the SDMS in Dallas and ask them for assistance and guidance.

We then mounted a phone campaign to Texas House members. Ultimately, the Texas Radiologic Society was given an ultimatum to either remove sonography



*Texas state capital in
Austin, TX*

from the bill, or we would work to kill the bill. They agreed to the “carve out” and sonography was removed from the proposed bill.

I joined the SDMS soon after that, 1983 I think, and I published an article, “Front Damping Technique” for evaluating transducer quality in the journal, *Medical Ultrasound*; which was the predecessor of the *JDMS*. As I became more involved in the SDMS, I held several different offices in the organization, including Treasurer, Secretary, Region 3 Director, and either chaired or served on several committees for the organization.

One of the best SDMS projects that I was involved in happened after then SDMS President, **Joan Baker**, MSR, RDMS, RDCS, FSDMS, appointed me to chair the Advanced Practice Sonographer Committee. In researching what level of professional sonographers should be, I turned to my sister, a public school librarian and internet researcher extraordinaire. She suggested that I go to the U.S. Department of Labor’s “Occupation Outlook Handbook” (OOH) and read the occupational descriptions to determine where we ‘belonged’. In looking through the OOH, I realized that “sonographer” was not listed. I did a search for ‘sonographer’ and found that sonography came up in the OOH under Radiologic Technologists, as a sub-category. Toward the bottom of the web page was an email link to the OOH editors.

The editors for the OOH were contacted and information provided to them making the argument that sonography should be dealt with as an independent profession, separate and apart from radiologic technology. Shortly after that, I got a response from the OOH editors asking for assistance on drafting an entry in the OOH for sonographers. I offered my help, and suggested that the SDMS be contacted for involvement. The SDMS President, Stephen McLaughlin, as well as the SDMS office, became ‘players’ in the process, and multiple drafts were reviewed before the final version of the occupational description for Diagnostic Medical Sonography was published in the “2002-2003 Occupational Outlook Handbook” for the first time. This was an important milestone for the sonography profession as it represented the first recognition by a government entity that “Diagnostic Medical Sonography (DMS)” was an independent occupation. The entry can be found at:

<http://www.bls.gov/oco/ocos273.htm#outlook>

The next task in the OOH process is to get sonographers moved from the “Health technologists and technicians” category, up to the “Health diagnosing and treating occupations” where radiation therapists, recreational therapists, registered nurses, respiratory therapists, dietitians and nutritionists are listed. I believe that sonographers use every bit as much independent judgment in their day-to-day work as do these professions, and we have as much impact on the public’s health.

I am also quite proud of starting the accredited DMS programs at Austin Community College in 1989 and the first DMS program in Arkansas at the University of Arkansas for Medical Science in 1996. The UAMS program has students on four campuses including the medical school campus in Little Rock and the Area Health Education Centers (AHEC) in Fayetteville, Texarkana and Pine Bluff. We use interactive video to deliver lectures to all campuses, as well as web based courses and clinical records management.”



Candidates "At a Glance"

The SDMS Political Action Committee (PAC) is bipartisan, favoring no one political party over another. The SDMS PAC will not endorse any candidate, nor will it recommend for whom you should vote.

The SDMS PAC will periodically present information about candidates' views that could affect the sonography profession. We hope that by keeping you informed of critical, sonography-related issues, by sharing candidates' opinions on those issues, and by encouraging SDMS members to register to vote, we will help shape good public policy.

The presumptive Presidential candidates from the two major political parties are Democrat Barack Obama and Republican John McCain. Both have websites where their public policy positions are detailed:

Senator Barack Obama

(D-Illinois)

<http://www.barackobama.com/>

Healthcare Issues

<http://www.barackobama.com/issues/healthcare/>

- Quality, Affordable and Portable Coverage for All
- Lower costs by Modernizing the U.S. Health Care System
- Fight for New Initiatives

Senator John McCain

(R-Arizona)

<http://www.johnmccain.com/>

Healthcare Issues

<http://www.johnmccain.com/Informing/Issues/19ba2f1c-c03f-4ac2-8cd5-5cf2edb527cf.htm>

- Access to health care for every American
- Making health insurance innovative, portable and affordable
- Ensuring care for higher risk patients

Not registered to vote? It is easy, visit this website:

http://www.votesmart.org/voter_registration_resources.php

*"The price of greatness
is responsibility."*

–Winston Churchill
