

Tennessee Board of Radiologic Imaging and Radiation Therapy Taskforce

Tuesday, November 29, 2022

MINUTES

The meeting of the **Tennessee Board of Radiologic Imaging and Radiation Therapy Taskforce** was called to order at 9:05 a.m. in the Poplar Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Karen Munyon, Board Chair.

Board members present: Kae Fleming, RT(R)
 Karen Munyon, BSRT(T) (CT)
 Patrick Brazan, CNMT
 Jennifer Thompson, RT (R)(QM)
 Gary Podgorski, MD

Stake Holder(s) present: Scott Tongate, THA Representative
 Michelle Julian, Provider Office Representative

Staff present: Stacy Tarr, Executive Director
 Michael Varnell, Office of General Counsel
 Rene Saunders, M.D., Medical Consultant
 Rowland Mann, Board Administrator

Ms. Munyon Conducted a roll call for the Board members. Ms. Munyon called the meeting into order at 9:15 am.

Discuss revision to rules and regulations in accordance with Public Chapter 1029

Ms. Munyon conducted a roll call of taskforce members present. The meeting was called to order at 9:05 am. Ms. Munyon began the discussion of the THA redline version of the proposed rules. The section that began the discussion referred to THA comments that would allow people to operate in a modality they had been previously working in or had received on the job training for but were not certified.

Ms. Thompson brought up the statutes that set the scope of practice and the statutes state that the Board will accept the definition of scope of practice of the National Educational Organization

ASRT. Ms. Fleming asked Mr. Varnell of the legality of a grandfather clause, as she believed that was a large part of the discussion. Mr. Varnell stated that a grandfather clause is usually done by statute, but may be permissible and that if the taskforce wanted to include a grandfather clause in a draft of the rules, it could be submitted to the Attorney General's office for review. Ms. Munyon proposed that rather than a grandfather clause, providing an exemption through the rules for those who have been working in the field for a certain time frame. She described this as a one-time exemption for qualified individuals that would be available to a certain amount of time after the rules take effect. After the exemption period, any new applicants or reinstatements would go through the regular licensing process without the availability of the exemption. Ms. Fleming suggested the exemption not be available for individuals with less than 24 months since graduation from an educational program.

After further discussion, Mr. Tongate stated that the proposed rules did not define supervision. Dr. Saunders informed the Board that in other professions, supervision was defined as general supervision where the supervisor was not physically present with the supervisee, but was available to contact and in this case would be reviewing the exams that were done by the supervisee. Ms. Munyon elaborated that the Board's intention was not that the supervisor be physically next to the supervisee while exams were being performed, but that the exams would be reviewed by the supervisor.

The discussion turned to the topic of patient care. Dr. Saunders asked the Board to consider the effect on patient care and the standard of care if the Board provided exemption for current techs performing exams outside of their credentials. Ms. Julian mentioned that without the exemption it would be possible that up to twelve hundred techs who were performing CTs without credential would not be able to perform their normal work tasks and taking that many techs out of the field all at once would also negatively affect patient care. Ms. Fleming responded that while she personally did not like the idea of the exemption, she recognized the need for a compromise to keep the negative effects on patient care as low as possible. Ms. Fleming spoke of a similar situation when educational requirements were first introduced and those who had been in the field without meeting those educational requirements were allowed to keep working but, over time, left the field and were replaced with those who met the educational requirements.

Public Chapter 1029 was distributed to the taskforce members. Ms. Fleming stated in response to an earlier question from Dr. Saunders that the Public Chapter included the mandate to the Board to "Establish any other criteria for issuance of licenses that are reasonably related to the safe and competent performance of radiologic imaging and radiation therapy procedures."

The THA redline contained a request to add the AMRIT to the list of National Certification Organizations recognized by the Board. Ms. Munyon said that in past meetings, this has been discussed, and the Board decided to add the language "or equivalent" that would include the AMRIT. This language was adopted to avoid unnecessary rule changes in the future should an organization wish to be listed or a situation arose where an organization needed to be removed.

The THA redline included a request on page four for hospitals be exempt from the rule stating licenses must be posted in a location visible to all patients. The taskforce agreed that changing the language to be written as "...shall be in a location visible to all patients."

Ms. Fleming asked about a redline item on page four relating to limited scope license holders not being restricted if they meet certain qualifications. Ms. Munyon read the statute aloud that restricts these license holders from certain modalities and reiterated that the Board Rules could not go against the statute.

The THA redline contained a comment on page five to remove/revise a section of the rules relating to upgrading a license with additional modalities. Ms. Fleming said that based on the previous discussion of keeping specialty areas, this section would need to remain intact.

The THA redline contained a request on page eighteen to add the AHRA to the list of approved continuing education sponsors with the rationale that it is recognized by the ARRT. Ms. Thompson stated that CEs by the AHRA are approved by the ARRT and would be included since the ARRT is listed already. Dr. Saunders elaborated that if the course was approved or sponsored by an approved organization, there was no need to list every source for courses.

The THA redline contained an item on page 13 to remove the section related to Bone Densitometry. Ms. Thompson stated that this section would need to remain because it included the courses needed for limited scope licensure. Since limited scope licensure is being kept in the proposed rules, this section would need to remain.

The THA redline included an item on page two related to removing specialty areas. Ms. Fleming stated that because of the exemption the taskforce was discussing, the specialty areas would remain.

Ms. Munyon proposed the taskforce discuss the exemption for full scope licensees and then return to the topic of limited scope licensees. On the topic of proving competencies from a current employer and qualify for exemption, Ms. Julian suggested providing a form to applicants in order to keep the provided information standardized across the applications. The taskforce discussed the exemption and asked Mr. Varnell to read back the draft language of the proposed exemption. To allow Mr. Varnell to prepare the draft, Ms. Munyon proposed the taskforce break for lunch.

. Mr. Varnell had the draft language for the proposed exemption. The draft was read as “A onetime request for specialty area endorsement exemption will be considered for a full scope licensee during the first twelve months of rule implementation. Any such request must be made within the first twelve months of the implementation of the Board rules. Endorsement exemption requests must include verified practice in each specialty area within the twelve months immediately preceding application; proof of competency in each specialty area within the twelve months preceding application, documentation of 16 specialty area specific continuing education credits within the 12 months immediately preceding application.” Ms. Munyon asked if there was any comment on the draft. Ms. Thompson suggested adding language to indicate that the continuing education credits would be needed for each specialty area.

Ms. Munyon brought the discussion back to reviewing the THA redline document beginning on page two.

Ms. Fleming proposed restoring item six on page two but with the added language of exemption pursuant to the rule number that will contain the proposed exemption. Ms. Fleming went on to propose that because of the exemption and keeping specialty areas. Items 9, 15, and 5 on page 3 would remain as written.

Ms. Munyon suggested that the comment related to defining the scope of practice was addressed because the scope of practice was based on the ARRT scope of practice. And the section should be kept as written.

Item four on page 4 was removed in the THA redline, but the taskforce decided for it to remain as written. Sections six and seven on the same page would be removed, section 4 would be kept.

On page 6, the taskforce kept numbers five and six as written, as well as section 7b on the same page.

On the section related to the taskforce added an exemption statement following the line of the full scope exemption for the modalities allowed for limited scope license and to have the allowed modalities listed in the statement. Section three on page thirteen would stay as written.

As discussed earlier, AHRA would not be added to section d on page 18.

Ms. Munyon asked for any further comment or discussion. Ms. Julian asked if under the proposed rules, students would be able to work in the field they are studying for. Ms. Fleming stated that students would not be able to practice but could work in non-practicing roles similar to a medical assistant or aid. Ms. Munyon stated that Tennessee was not the first state to have this change occur.

Ms. Munyon asked for any other comment. She stated that completed the review of the redline and the purpose of the taskforce. Ms. Munyon asked Mr. Varnell about the next steps. Mr. Varnell said that he would make the changes to the proposed rules which would be presented to the full Board at the January 2023 meeting. After approval by the Board, the proposed rules would be submitted to the Attorney General's office. Mr. Varnell ran through the redline and the changes made by the taskforce to ensure the correct changes would be made. After verifying the needed changes, Ms. Fleming asked if Mr. Varnell knew what the expected timeline would be after the rules were approved and submitted by the Board. Mr. Varnell stated that it would be two months at least.

Ms. Munyon asked Ms. Tarr if there were any other tasks that needed to be done. Ms. Tarr stated that until the Board rules took effect, no other tasks need to be completed. Ms. Munyon thanked Mr. Tongate and Ms. Julian for their participation and input.

Ms. Fleming made a motion to adjourn the meeting and Ms. Thompson seconded. The meeting adjourned at 3:15pm.