MINUTES OF THE MEETING

PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE

February 5, 1977

The twelfth meeting of the Public Health, Welfare and Safety Committee began at approximately 11:15 A.M. on the above date, called to order by Chairman Stan Stephens in Room 405 of the State Capitol Building, Helena, Montana.

ROLL CALL: All members were present.

DISPOSITION OF SENATE BILL 310: Chairman Stephens announced that SB310 would not be heard in Public Health, Welfare and Safety Committee. With the sponsor's concurrence, the bill will go to Senate Local Government Committee.

CONSIDERATION OF SENATE BILL 221: Chairman Stephens then turned the meeting over to Senator Etchart, who explained his bill. The Glascow Senator introduced this bill because of a problem that has developed in Montana's smaller communities regarding our x-ray technicians. He thinks the 1975 Legislature went too far in adopting the licensure of radiologic technicians. Therefore, Senator Etchart's bill would remove the licensing requirements from the law (Sections 66-3701 through 66-3712 and Section 82A-1602.28). He then turned the meeting over to Chad Smith, who introduced proponents of the bill.

Those proponents of the bill testifying were:

- 1. Chad Smith, Montana Hospital Assn. and certain radiologists and technicians
- 2. Richard Heim, M.D., Staff Radiologist, Ronan, Plains and St. Ignatius
- 3. Jim Gerlach, M.D., Glendive
- 4. J. W. Agnew, M.D. Billings
- 5. Grant M. Winn, Executive Director, Clark Fork Valley
 Hospital, Plains
- 6. Thyle Hopstad, Administrator, Deaconess Hospital, Glascow
- 7. R. Bryce Icenoggle, x-ray technician, Clark Fork Valley Hospital, Plains
- 8. <u>William Leary</u>, Executive Vice President, Montana Hospital Association.

Before introducing others, Chad Smith further explained the bill by saying this 1975 law was passed at the insistency of those who said this would establish standards of competency of x-ray technicians. This experiment, he said, has failed. By repealing this act, a more logical means of determining the competency of these persons would be allowed to function. He thinks there is no way standards of competency can be administered in Helena through licensing. X-ray

technicians work for physicians and radiologists: their purpose is to come up with proper x-rays for that doctor. It is the higher level of expertise in the field who will instruct the technician and give on-the-job training. There is no practical way this type of supervision can be exercised through any type of licensing from Helena. The law is unnecessary and has been poorly administered. The manner in which it is written is poor. The grandfather clause of this act has not been honored. Smith introduced:

Dr. Richard Helm testified he is not opposed to the ionizing radiation nor the people using the x-ray but he is opposed to the existing law and supports any legislation dealing fairly with all facets of the use of ionizing radiation and with those people showing proficiency and competency in the use of such radiation (see Exhibit "A").

Dr. Jim Gerlack testified that he serves in many communities in their hospitals. He needs help in these hospitals but says he cannot entice AARTS to come out there. In the meantime, he has supervised the technicians in the x-ray departments and has succeeded in giving them on-the-job training to the point that they now have up-graded these departments considerably, even though the non-registered technicians do not have the two years' training and theory. They are providing a necessary service. He pointed out the problems involved in the technicians complying with the present law. Gerlach does not think many of his technicians can pass the up-coming exam. He says the licensure law will close some of the rural hospitals.

Dr. J. W. Agnew runs an x-ray school of technology. He stated the repeal of this bill will do nothing to jeopardize public health and safety which can be protected by a peer review organization which could be activated to monitor the quality of x-rays.

Grant M. Winn testified next, making the point that, essentially, the continuation of the present law will increase the cost of health care in Montana (see Exhibit "B").

Thyle Hopstad from Glasgow gave an example of how close his hospital came to closing, due to having only one person in their x-ray department - they could not find an AART or non-registered technician. Hopstad said doctors work closely with technicians in the rural hospitals - the quality of health care is not going to be increased or decreased by abiding by the current licensure act.

R. Bruce Icenoggle said though they are in a rural area, they still practice good medicine. He complained that, in the licensing, they will not take into account the on-the-job training and background. Some highly competent people have not even received a permit; they have to pay a fee to take the exam. Conversely, Icenoggle said, the application of of x-rays should be regulated; there certainly is a need for the licensing law. However, it should be as a result from input from all people, not just a small group. We have to have licensure of people, who merit this licensure. Grandfather clause is ambiguous and mis-

intrepeted by the Baord. It's time to start over again -- let's rewrite the law with input from everyone (see Exhibit "C").

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William Leary said the problem is obviously a rural hospital situation in that the hospitals in the larger cities really would not be affected by this law, they have more than one in their x-ray department. The problem exists in Montana's smaller communities where they have only one technician who provides all x-rays for the whole community. He added that there is nothing in either Medicaid or Medicare which designates the qualifications of the technicians taking the x-rays. The HEW declared a moratorium on further licensure of allied health personnel across the nation; that moratorium held for many years and why we ever let House Bill 45 pass in 1975 is beyond him. By repealing this bill, it would allow the people involved the chance to meet and jointly solve their problems, based upon what may come out as federal guidelines through the modifications in Medicare regulations currently in the process of being written.

Chad Smith further testified that even in the grandfather clause, it says that those who have been in practice five out of the last six years of the effective date of the law, October 1976, 18-month continuance period there, those that had five out of the six years after that date, many of those here today are those who have been hired during that five year period and who have been performing satisfactorily and up to the full degree of confidence expected by the radiologists for maybe 2, 3, 4 years, but still do not qualify. Smith said if further study were given to another, new licensure bill, he thought his people would support it.

Those visitors standing in support of SB221 were:

- 1. Jack Ramsey
- 2. Barbara Knudson
- 3. Jim Oliver, Administrator, St. Luke's Hospital
- 4. Donna Goodman, Billings
- 5. Richard Ojala, Administrator, Trinity Hospital
- 6. Vonny Collingwood, Billings.

Those Testifying in opposition of SB221 were:

- 1. <u>Don Pearson</u>, President, Montana Society of Radiological Technologists
- 2. Phil Harston, registered radiologist, Missoula
- 3. Jim Winter, Great Falls
- 4. Aren M. Miller, R.T., Butte Radiology Association
- 5. Mary Lou Crawford, secretary, Board of Radiologis Technologists
- 6. Larry Lofthouse, Chief Radiologist Technologist, St. Peter's.

Don Pearson, in opposing the proposed legislation, brought out the following points: (1) The x-ray fee structure in hospitals employing AARTS is no more than those institutions using technicians, so is

it better for public health to charge the same and have those less qualified working the x-ray machines? (2) Malpractice in Montana could the State ever be held liable for x-ray overexposure if we repeal this law? (3) Studies from other states having similar laws on the books have shown no shortages in employees in x-ray departments. Does Montana want to repeal this law, only to have Congress tell us what to do when it passes some proposed legislation on this very Consider the fact that many people in the U.S. are concerned about nuclear radiation - the fact is, only 5 percent of the total radiation our bodies endure comes from nuclear - 95 percent comes from radiation used in medicine. (6) As to the rural areas, Pearson does not think the rural hospitals should lower or weaken their employee qualifications simply because they are not the population center of the State. Pearson does not believe this bill should ever have gotten this far; there are three physicians on the Board who were never approached on the problem this legislation is addressing. He doesn't think the whole law should be repealed simply because no meeting has been held to go over the problems.

Phil Harston read the purpose of the bill. He said he didn't think this licensure request is too much for the public to want. The talk that, through this legislation, departments will be shut down and people out of work is just not the case. The exam has not yet been completed. It has been said the examination will be too tough for people to pass. If they are competent, they can pass. The problem of re-doing x-rays because the doctor is not satisfied with the first one, is exactly what this bill addresses. The Montana Medical Association has made no effort to meet formally with the Board to go over the problem areas of the law.

Jim Winter submitted written testimony (see Exhibit "D"). He said SB221 would eliminate any qualifications for people who operate the x-ray machines. The implementation of the law is not yet complete.

Aren M. Miller presented written testimony (see Exhibit "E").

Mary Lou Crawford, as secretary to her Association, presented written testimony concerning exactly what the present statute says, how many permits and applications have been requested to date. (See Exhibit F.)

Larry T. Lofthouse presented written testimony (see Exhibit "G").

Visitors then stood and identified themselves as opposing SB221:

- 1. Sue Treloar, R.T., Missoula
- 2. Denise Zechaun, R.D., Missoula
- 3. Larry Lofthouse, R.T., Helena
- 4. Edward Montgomery, R.T., Butte
- 5. Loretta Montgomery, R.T., Butte
- 6. Greg Bahny, Kalispell
- 7. Pam Goldberg, Butte
- 8. Kristy Sauerbier, R.T., Butte.

Chairman Stephens then asked for questions from the Committee. The point was brought out by Senator Lee that the technician taking the x-ray is supervised; that the x-ray is ordered by the attending physician; that x-rays are not indiscriminately given by registered or non-registered technicians. Senator Roberts said he thinks some of the problems with the current law may be the result of vague, imprecise draftsmanship. Senator Roberts asked Mr. Leary why his people did not try to clarify these matters rather than repeal the law, to which Leary responded that the law became effective October 1, 1976, after which they began to see the administration involved - then they started hearing from their people around the State; there was little time left to sit down and amend. Roberts asked Leary if he or his associates appeared at the rule-making proceeding where these rules were promulgated - Leary answered, no.

Senator Olson quizzed Dr. Gerlach as to the number of AARTS working for him in his area of the State - answer: 4 - to which Senator Olson asked if the doctor could say that non-registered techs have to retake more x-rays than registered - answer: no difference. then asked Harston if their Board had contacted the Montana Medical Association concerning the law - answer was negative. Senator Rasmussen asked how many states have passed similar legislation thus far - answer was 5 states, with a total of 17 states working on it. Senator Himsl established that the Montana Medical Association took a neutral stand when this law was proposed in 1975 Legislature. Senator Rasmussen asked what precipitated the law being passed in 1975 - the answer was, national interest from articles in magazines brought inquiry from citizens in MOntana to the Board. Leary said he knew of very few problems in the State prior to the 1975 law; he thought it was the Reader's Digest article which drew people's attention. Senator Norman asked Larry Lloyd from the Department of Health and Environmental Sciences if, in his personal opinion, he were aware of an improper technic being used in a hospital x-ray procedure, would the Department have the power to stop it - the opinion from Mr. Lloyd, speaking not for the Department, was The hearing was concluded on SB221.

ADJOURNMENT: With no further business at this time, the Committee adjourned to go to Session.

STAN STEPHENS, Chairman

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ROLL CALL

Note: The state of the state of

PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE

DATE: Feb. 5th 45th LEGISLATIVE SESSION - 1977 PRESENT: ABSENT: NAME: **EXCUSED:** LEE, Robert LEE 1. 2. RASMUSSEN, Tom RASMU 3. OLSON, Stuart OLSON HIMSI HIMSL, Matt WATT WATT, Robert ROBEL 6. ROBERTS, Joe 7. NORMAN, Bill, V. Chm. NORM 8. STEPHENS, Stan, Chairman STEP

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Feb. 4, 1977

TO: SINATE PUBLIC HEALTH COMPITTEE

FROM: Richard K. Helm, M.D.

SUBJECT: SB-221

As a qualified diagnostic radiologist serving the community of Ronan, Plains and St. Ignatius I would ask your support in passing SB-221 which is for repeal of the law concerning licensure of radiologic technologists created under HB-45.

I would like to emphasize that I am in no way opposed to the control of the use of ionizing radiation, commonly called x-ray nor am I opposed to licensure of those people involved in using that x-ray.

I am opposed to the current law for the following reasons:

- 1. The law is ill conceived, ill defined, contradictory and discriminatory.
- 2. There is no consideration given to licensure of qualified individuals who have had many years of practical experience under the teachings and supervision of qualified M.D.'s and in particular radiologists.
- 3. The law is distinctly discriminatory in that it excludes from any need of licensing a number of segments of the paramedical community.
- 4. The law as defined will ultimately lead to the dismissal of competent and qualified individuals thereby placing a hardship on the hospitals they serve the communities served by the hospital and the families of the individuals.
- 5. The law provides no clear cut "grandfather clause" that would grant licensure recognition of those individuals who can display competency, integrity and proficiency in their x-ray duties.

Again, let me stress that I will fully support any legislation that will deal fairly with all facets of the use of ionizing radiation and with those people who show proficiency and competency in the use of such ionizing radiation. I am personally interested in seeing that these people are properly licensed, but without discrimination. I feel that as a radiologist directly involved in the supervision and responsibility of the work performed by the various individuals, I am qualified to evaluate and attest to their proficiency or lack of proficiency.

Respectfully submitted,

Richard K. Helm, M.D.

CLARK FORK VALLEY HOSPITAL

P.O. BOX 768 • KRUGER ROAD • PLAINS, MONTANA 59859 • TEL: 406-826-3601

TO: Senate Health and Welfare Committee

SUBJECT: Statement in support of Senate Bill 221

DATE: February 5, 1977

As Executive Director of a small rural hospital and as a Medical and Radiology Technologist, I support Senate Bill 221 for the following reasons:

- Qualified radiologic technologists who have received on-the-job training and have not attended the two-year radiology school are being refused licensure.
 Many of these people are highly qualified, with years of experience and some with college degrees.
- 2. The Radiology Licensing Board has not complied with the original intention of the law in licensing qualified individuals, nor have they dealt with the issuance of licenses and permits in a fair, uniform manner.
- 3. This law creates a heavy burden for small hospitals in Montana who must use technologists, both laboratory and x-ray, in more than one department. This law will increase the cost of health care in Montana without improving the quality.
- 4. There are insufficient numbers of registered technologists to fill all the positions made available in Montana if there is no provision for licensure under a grandfather clause.

It must be made clear that I am not opposed to licensure of radiologic technologists or the control of the use of ionizing radiation. However, the law must be understandable and fair to those who are affected by it. The law must provide for licensure of qualified individuals who have comparable education and experience to those who have attended a two-year approved course in radiologic technology. House Bill No. 45 disenfranchises those radiologic technologists who have not attended the "approved" school.

Grant M. Winn

Executive Director

PAUL GERHARDT

STANDARD PLAZA BLDG.
PORTLAND, OREGON 97204
(503) 222-1641

December 13, 1976 .

Mr. Grant Winn, Administrator Clark Fork Valley Hospital Plains, Montana 58959

Re: Montana X-Ray Technologist Law

Dear Grant:

I have read the new Montana Law regarding licensure of x-ray technologists, being Chapter 336 of Montana Laws 1975. This law is an amazing document in that it appears to have been drawn very imprecisely and carelessly. For example:

- 1. RCM 66-3705 states the requirements for licensure. It requires that the applicant "have satisfactorily completed a course of study in radiologic technology approved by the Board." There is no requirement in that section calling for an examination yet later sections of the Act go into detail as to examinations.
- 2. RCM 66-3707 allows the issuance of permits for 12 months at a time, renewable annually. Such permits may be issued to people not otherwise entitled to licenses if the Board can find there is evidence of "continued regional hardship or emergency conditions." This is rather open-ended, with no standards.
- 3. RCM 66-3708 provides for the issuance of a license without an examination in certain situations, although Section 66-3705 does not require an examination. That latter section does require satisfactory completion of a course of study, however. The person who has been employed for five out of the last six years in R-T work is exempt from taking an examination (but presumably still must have gone to school) whereas a person who has worked for two out of the past three years as an R-T may evade the examination requirement if he can "demonstrate proficiency to the satisfaction of the Board." Thus, the two out of three year man must show proficiency to avoid the examination where the five out of six year person need not. However, in each case, they must have gone to school.

TO: House Public Health Committee

From: Bruce Icenoggle, Medical Technologist and X-ray Technologist Color K Fork Valley Hospital, Plains, Montana

Subject: Proponent for SB 221

Date: February 5, 1977

The basic intent of HB 45 Section 3701 through Section 3711 inclusive was to provide for better and safer application of x-ray radiation by those personall charged with it's application. Unfortunately this has not been the case. Due to the law's ambiguity, conflicting sections, and the Radiology Boards interperation of same, we have found ourselves with equally ambiguious and arbitiary decisions from the board.

The board has steadfastly refused to recognise the grandfather clause, Section 66-3708. Instead they have relegated every one involved who is not a member of the American Registry of Radiologic Technologist to a limited permit status or less. This regardless of education, training or experience. And to justify their actions the Board has sponsored the introduction of HB 300 which would essentially disenfranchise all Non-RT's. To say that only those, who have attended the approved two year x-ray training school are capable of taking adequate radiographs is highly unfair. Certianly their are many non-registered tech's who have trained under an R.T., Radiologist or both and have proven through their work that they deserve licensure. To expect us to operate in-limbo under a limited-permit status is an impossible situation.

CONCLUSION: The law has proven ambigious and unworkable. I am not attempting to infer that the application of ionizing radiation should not be regulated. There is a need for a good licensure law designed from the input of all emvolved. This includes Runal Radiologist, Private Physicians whose practices are affected, small Hospital Administrators, R.T.'s and non-R.T.'s. There needs to be a workable grandfather clause. No other professional licensure law in Montana or any other state to my knowledge has ignored the rights of those who have been preforming; adequately in the past.

CONFUSION IS IN 66-3708 LICENSE WITHOUT EXAMINATION. If employed 2 of 3 years of 5 of 6 years as a RADIOLOGIC TECHNOLOGISTS. Before a person could be licensed as a Radiologic Technologist he or she must meet the qualification of 66-3705 which state "EACH APPLICANT FOR LICENSURE AS A RADIOLOGIC TECHNOLOGIST SHALL:

(1) HAVE SATISFACTORILY COMPLETED A COURSE OF STUDY IN RADIOLOGIC TECHNOLOGY."

The Board by authority of 66-3704 adopted a rule through the Montana Administrative Procedure Act that this course of study shall be a "24 MONTH COURSE OF STUDY" which in HB 300 was an amendment to Section 66-3705.

Anyone not meeting these education qualification, plus the minimum age, moral character and non adiction to alcohol or drugs, qualified for a permit under Section 66-3704(2)

"THE BOARD MAY ISSUE A PERMIT TO AN APPLICANT NOT QUALIFYING FOR THE ISSUANCE
OF A LICENSE UNDER THE PROVISIONS OF THIS ACT, but who has demonstrated to the
satisfaction of the board the capability of performing high quality X-ray examination
without endangering public health and safety. Permits issued under provisions of
this section shall specify X-ray examination that may be performed by the holder.
Permit shall be VALID FOR A PERIOD NOT TO EXCEED (12) MONTHS, BUT MAY BE RENEWED
UNDER THE PROVISIONS FOR ORIGINAL ISSUANCE.

Subsection (4) THE BOARD SHALL ISSUE TEMPORARY PERMITS TO UNCERTIFIED PERSON
TO PRACTICE AS RADIOLOGIC TECHNOLOGIST WHEN ADEQUATE EVIDENCE IS PROVIDED THE
BOARD THAT SUCH A PERMIT IS NECESSARY BECAUSE OF A REGIONAL HARDSHIP OR EMERGENCY
CONDITION AND THAT SUCH PERSON IS CAPABLE OF PERFORMING X-ray EXAMINATION WITHOUT
ENDANGERING PUBLIC HEALTH AND SAFETY. Temporary permits shall not exceed 12 months
in duration, but may be renewed by re-establishing, to the board's satisfaction
evidence of continued regional hardship or emergency conditions.

The board has issued a license to every applicant who qualified under the provisions of 66-3705 or was a member of the American Registry of Radiologic Technologists as provided in 66-3706. All applicants upon review of their

applications were WYXNEX either issued a permit for the areas specified on the application, or if in the opinion of the board, the applicant's qualifications did not meet the boards satisfaction, then a temporary permit pending examination for permit was issued, if all fees had been paid. At this time, there are approximately 12 applicants who have not paid the necessary license or permit fees and therefore have not been issued a license, permit or temporary permit.

Instead of repealing 66-3701-3712, the Board is submitting amendments to
this committee and also to Rep. Gunderson for HB 300 to amendment the licensure
qualifications to include a classification for radiologic technician. Copies
of these amendments are hereby submitted.

Submitted by Mary Low Grawford Loud & Radiologic Vichnologics

Town Technician this law does not license technologists who technicians but licenses technologists who are tochnologists by education,

Those Charged To are those people who were granticl a germent without exam. \$30 was promised those who were insued temporary permits the opposite permit after exam is proseed & to for exam fee,

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have feel for to call the office at 449-3737
or come & akech the board records for
Compliance with sections 66-3701-3712.

February 4, 1977

Larry T. Lofthouse, R.T., N.M.T. 1630 Leslie Helena, Montana 59601

Montana State Senate State Capitol Helena, Montana 59601

SENATORS:

STAN STEPHENS, CHAIRMAN BILL NORMAN, M. D. MATT HIMSL ROBERT LEE STUART OLSON, M. D. DR. TOM RASMUSSEN JOE ROBERTS ROBERT WATT

Dear Sirs:

It has recently come to my attention that Senate Bill #221, which deals with repeal of the Radiologic Technology Licensure Act is before your committee. I respectfully request that your committee recommend that this bill not pass for the following reasons.

The purpose of licensure as implemented by the last legislature was twofold. The first purpose of the act was to improve the diagnostic quality of radiographic images. The second purpose of this act was to reduce radiation exposure to the patient.

We feel that there is a good precedent for this bill in that nurses, pharmacists and physicians themselves must be licensed within the state of Montana. As I understand it the purpose of licensure is to give patients the highest quality of patient care available.

The following charges have been made by proponents of Senate Bill #221. They have charged that there will not be enough qualified tech's. available to fill all radiologic technology positions. The radiologic technology licensure board is presently setting up training programs throughout the state to allow persons presently taking radiographs to become competent enough to take good quality radiographs with low patient radiation exposure. Areas which can show a hardship in finding qualified personnel will be allowed to continue using certified or unlicensed technologists until qualified help is available. Proponents of this bill have also stated that radiographic quality can be improved by pure review. I do not believe that this is so for the following reasons. In the 1960's a Mr. Christianson from the State Department of Health surveyed several of the x-ray facilities throughout the state. He made recommendations regarding patient exposure reduction and equipment upgrading at that time. In the 1970's when laws were passed controling radiation producing equipment, the Department of Health again started inspecting x-ray facilities. At that time Larry Lloyd found that very few of Mr. Christianson's recommendations had been followed up on because they were recommendations and were not mandatory. Even if film quality can be controlled by pure review, the protection to the patient against unnecessary radiation could not be controlled by pure review function. Several case illustrations of these unheeded recommendations are available through Larry Lloyd's office at the Department of Health.

Proponents of this bill charge that licensure of Radiologic Technologists will increase the cost of medicine. In a survey of Helena area physicians offices x-rays charges it was found that physicians offices in general but with one exception were charging as much or more for chest radiographs taken by non registered personnel and interpreted by

Senate Bill #221 February 4, 1977

Page 2

physicians who lack the three years of specialized training required by the American College of Radiology to become a Radiologist.

It is my belief that we now have an adequate method of controlling radiographic quality and patient radiation exposure that will not pose an undue hardship on anyone. This apparently was also felt in the last legislative session because there were no dissenting votes on the floors of either the House or the Senate when this bill was passed.

I strongly urge you to send Senate Bill #221 to the floor with a <u>do not pass</u> recommendation.

Sincerely,

LARRY T. LOFTHOUSE, R.T., N.M.T.

Chief Radiologic Technologist

St. Peter's Hospital Helena, Montana 59601

February 4, 1977

Don Majerus 1205 Buffalo Rd. Helena, Montana

59601

Senators
State Capitol
Helena, Montana

Lear Sirs:

As a Radiologic Technologist, I am concerned about passage of senate bill # 221. The technologists of this state have worked hard to get a fair licensure bill that will protect the people of Montana from harmful and unnecessary exposure to radiation by being X-rayed by unqualified personnel. I feel the licensing board that was established will safeguard the interests of the M.D.'s, Technologists and most of all the people of Montana. All forms of Ionizing radiation are potentially dangerous and must be adequately controlled.

Sincerely Yours,

Donald B. Majerus, R.T.

February 3, 1977

Duane R. Durkee, R.T. 1919 Oakes Street, #D Helena, Montana, 59601

State Capital Helena, Montana, 59601

Senators:

Stan Stephens, Chairman Bill Norman, M.D. Matt Himsl Robert Lee Stuart Olson, M.D. Dr. Tom Rasmussen Joe Roberts Robert Watt

I feel as a qualified radiologic technologist and an authority on the subject of Bill # 221 that much discretion must be used in passing such a bill. To have schools of radiology, proper training, and means of licensure permits us to have a high standard in the practice of medicine. Radiation can be very helpful to give the doctors a proper diagnosis of their patients, but if not used under qualified personnel can be harmful to the patient. Malpractice suits may also be limited by the licensure of radiologic technologists. Doctors may get the correct diagnosis of their patients by means of adequate x-ray examinations.

To be a qualified radiologic technologist, one must know more than just how to run the machine. One must know the anatomy of the body to position the patient properly, the chemistry of developing solutions to maintain a standard of developing films, the different kilovoltage settings of the machine, the time and mA stations of the machine, and the harmful effects of radiation to the body. If each of you knew what went on in an x-ray department for us to get proper radiographs, you would want a qualified person to perform your examination.

There have also been occasions when a patient has paid for an examination in a place where there were no qualified personnel. Those exams were not good enough for the doctor to make a diagnosis. The patient then had to have the exams repeated somewhere where the doctor knew he could get a proper examination. This was done at the expense of the patient. Would you like to pay twice to get one proper examination? Please give this bill due consideration as if you were a patient and not a doctor or hospital administrator who just wanted to put money in his own pocket.

Sincerely,

Duane R. Durkee, R.T.

State Capitol Helena, Montana 59601

TO:

SENATORS

Stan Stephens, Chairman Bill Norman, M. D. Matt Himsl Robert Lee Stuart Olson, M. D. Tom Rasmussen Joe Roberts Robert Watt

SUBJECT:

Senate Bill #221

Dear Sirs:

It has been brought to my attention that the Licensure Bill for Radiologic Technologists is being repealed. I do not feel that this is fair to the Technologists who operate the x-ray machinery or to the patients who must be x-rayed.

The Licensure Bill requires that persons who operate the x-ray machinery have a good knowledge of what they are doing, and be capable of protecting the safety and well being of the patients and themselves.

Guidelines have been set by the enactment of the Licensure Bill. Persons who operate the machinery must be qualified and have a full understanding of what they are doing. Following the enactment of the bill, Certified Technologists were required to carry on their person a license to operate the equipment and others who work for doctors were required to qualify for a permit. This permit limits the number and type of examinations to those which they were qualified to do and makes it more convenient for the doctor to make a more complete and comprehensive examination of the patient while in the office.

These exams performed by nurses in doctor's offices, and perhaps doctors themselves, are limited to the taking of chest x-rays and x-rays of the extremities. I feel that if a patient needs a more comprehensive follow-up that the patient should be referred to the Department of Radiology where certified personnel such as Radiological Technologists and Radiologists are readily available. I also feel a greater margin of safety can be maintained for all concerned.

Ma Chairman, committee members + concerned citizens. Dam here to oppose The passing of 5.8 221.

Concern for the reduction of unnecessary consumer radiation exposures the establishment of operator qualifications has been recognized by the Congress. With the enactment of the locial Security act amendments of 1912, the Congress recognized this need by requiring the development of proficiency tests for those individuals administering potentially hazardous radiation under Medicare & Medicard pregams.

significantly, the statute specified that if such services are performed by an uncredentialed operator, they shall not be reimbursable to the employer under either Medicare + Medicard. The major weakness, is a lack of authority to investigate, enforce, revoke or otherwise empose disciplinary or regulatory action. The sanctions of 14.8.559 correct this deficiency.

Significantly, the statute specifies that if such services are performed by an uncredentialed request the Congress + state ligislatures to bot on ligislature regiening licensure of diagnostic X. Law equipment coxers.

BUTTE RADIOLOGY ASSOCIATES Phone 401-723-6770 P.O. Box 3471 Butte, Montana 59701

Alan R. Belknap, M.D.

February 4, 1977

J. Michael Driscoll, M.D.

TO WHOM IT MAY CONCERN

We strongly oppose Senate Bill 221 calling for repeal of the Act providing for Licensure and Regulation of Radiologic Technologists.

In the interest of the people of the State of Montana, it is mandatory that persons administering x-ray examinations be trained in radiation safety, positioning and other basic radiologic discipline. Those best qualified are Radiographic Technologists. Administration of x-radiation by untrained persons is potentially harmful to the general population.

Repeal of the current legislation will seriously undermine the high quality of health care currently available.

Sincerely,

J. M. Driscoll, M. D.

A. R. Belknap, M.D.

SAINT VINCENT'S HOSPITAL

2915 Twelfth Avenue North Billings, Montane 59103

Telephone 252-2121

2/3/77

I support repeal of SB 244.

Pat Grundley R.T.

Kathy Lensen, R.T.

Jackfel Fears R.T.

Donna Boodman. RT.

Mary K. McJohy R.T.

Wary K. McJohy R.T.