



MoCLS Annual Board/Leadership Meeting
La Vista Conference Center
Omaha, Nebraska
April 3, 2013
Minutes

Attendees: Renee Setina **President**, Debbie Baudler **President-Elect**, Sharon Duessel **Secretary** (prepared minutes), Danyel Anderson **1st Year Board Director**, Sarah Schumacher **2nd Year Board Director**, John Koenig **GAC/PAC**, Brian Holt **Student Director/Student Forum Chair**, Rita Heuert **Scientific Assembly Chair**

Absent:, Kelci Cortrecht, April Hansen, Nancy Reddig, Shelly Schoeberlein, Alese Furnald, Lucia Johnson, Tim Randolph, Donna Duberg, James Purnell, and Becky Boothe

Guests: Norma Clinton

- I. Board Meeting called to order on April 3, 2013 at 1900.**
- II. Approval of January 19, 2013 Board Teleconference Minutes.**
 - a. John motioned to approve January 19, 2013 Board Teleconference Minutes as written.
 - i. Danyel seconded Motion
 - ii. Discussion
 1. Need to add the membership numbers under the membership report.
 - b. John motioned to approve the January 19, 2013 Board Teleconference Minutes as amended once membership numbers added.
 - i. Danyel seconded.
 - ii. All in favor, none apposed
 - iii. Motion to approve the January 19, 2013 Board Teleconference Minutes as amended once membership numbers added passed on 04/03/2013 at 1905.
- III. Treasurer's report – April Hansen**
 - a. See attached report
 - b. MoCLS account has a balance of \$13,022.77 as of April 2, 2013.
 - i. Annual PACE bill is \$325.00
 - ii. Student Legislative day reimbursement \$248.70
 - iii. New total will be 12,599.00, once current debits are issued.

- c. Will need to have a Finance Committee meeting about the budget before the National Conference.
 - i. The Finance Committee consists of the President-Elect, President, Past-President, and Treasurer.
- d. Renee suggests increasing the legislative day budget line item for next year.
- e. John motioned to table the budget until the Finance Committee can review it and then the Board will vote on it prior to the end of the fiscal year.
 - i. Rita seconded.
 - 1. No discussion initiated
 - 2. All in favor, none opposed
 - ii. Motion to table the budget until the Finance Committee can review it and Board will vote on it prior to the end of the fiscal year passed on April 3, 2013 at 1911.

IV. President's report – Renee

- a. Attended Missouri Legislative Day along with the National Legislative Days. As ASCLS PAC chair, National Legislative Days paid for by ASCLS.
 - i. Met with every committee member in the Senate and House at the Missouri Legislative Days.
- b. Registration Chair for the Quad State Meeting
- c. Licensure Update
 - i. Biggest opposition is the Missouri Hospital Association and Family Practitioners
 - ii. The Licensure Bill has sponsors in both the House and Senate
 - iii. Senate Committee Chair is Senator Jay Wasson
 - 1. Introduced the issue of pursuing legally required certification instead of licensure.
 - 2. House Committee Chair is Representative Eric Burlison.
 - 3. Senator Bob Dixon explained that there are 3 levels of title protection in Missouri: Registration, Certification, and Licensure.
 - iv. Licensure is ideal, but there are advantages to pursuing legally required Certification
 - 1. Pursuing certification shows that we only wish to ensure a high quality of care to patients.
 - 2. There is a lot of debate concerning the proposed change in practice for the Nurse Practitioners and Physician Assistants. This has made the word "Licensure" a sensitive topic.
 - 3. There will be no licensing board meaning the state would inspect suspected violations
 - 4. Will still include the grandfather clause
 - v. Virginia started the idea of pursuing certification instead of licensure.

- vi. We will need to consider the specialty areas, such as Cord Blood Bank, HLA.

V. President Elect report – Debbie

- a. See attached report
- b. Goals for the upcoming year as President
 - i. Wants to meet with the Financial Committee before National.
 - ii. Roster
 - 1. Will need at least the President and Treasurer turned into National by June 1st (double check due date)
 - 2. Will need to be Excel Spreadsheet and Word Format
 - 3. Has been highlighting people on the membership list from areas where we need representation.
 - a. Mindy Alcorn from Cape Girardeau, MO
 - b. Jackie Ensley from Mississippi Valley
 - c. Bring Samantha Whittaker (St.Lukes) back in
 - d. Brian Holt to transition to First Year Professional
 - e. Some of the graduating students involved in committees
 - f. Matt, Anthony
 - g. Maggie Kane, Elizabeth Jones, Marissa James also to be contacted.
 - h. Uthay for Scientific Assembly or Bylaws
 - iii. Ideas for the newly designed website
 - 1. Individual Position Descriptions
 - 2. Leadership page with contact info, only available to leadership.

VI. Past President Report

- a. No report submitted.

VII. 1st Year Board Director – Danyel Anderson

- a. Sent emails to lapsed members
- b. Will be rescheduling the meeting with Green County Medical Board Physicians to discuss licensure and working together to improve patient care.

VIII. 2nd Year Board Director – Sarah Schumacher

- a. Handbook is a work in progress, currently the only person working on this
- b. Hope to have job descriptions done by the end of the year.
 - i. Doesn't have experience with every position.
 - ii. Resend the descriptions to the members holding those positions
- c. Bylaws, SOPs, and Handbook breakdown
 - i. Bylaws are the basic skeleton, SOP's are the specifics. The Handbook includes the different regions, the history of ASCLS, position descriptions, list of past Presidents, and the previous winners of the Member of the Year Award.

- IX. First Year Professional**
 - a. No report submitted.

- X. Student Director report**
 - a. No report submitted.

- XI. Nominations Committee report**
 - a. 2013-2014 Slate**
 - i. Sharon Duessel as President Elect
 - ii. Rita Heuertz as Secretary
 - iii. Kelci Cortrecht as 1st Year Board Member
 - iv. Tim Randolph and John Koenig for the Nominations Committee.
 - 1. Lucia Johnson was the 3rd elected by write-in and run-off election

- XII. Awards report- Renee Setina**
 - a. Brian Holt awarded the Key to the Future.
 - b. Sarah Schumacher awarded the 2012-2013 New Professional of the Year
 - c. Tim Randolph awarded the 2012-2013 Member of the Year
 - d. Omicron Sigma
 - i. Sharon Duessel, Shelly Schoeberlein, April Hansen, Danyel Anderson, Sarah Schumacher, Mary Lou Vehige, Alese Furnald, Lucia Johnson

- XIII. PAC/Government Affairs/Licensure report – John Koenig**
 - a. See attached report and leave-behinds

- XIV. Membership report**
 - a. No report submitted

- XV. TRMSF report**
 - a. Candy Bar Fundraising was a big success
 - i. A big thanks to Lucia for donating all of the candy bars and putting this fundraiser together
 - b. Maybe raffle off a Chocolate Bouquet for MoKAN

- XVI. By-Laws Committee report/Nominations – Mary Lou Vehige**
 - a. See attached report

- XVII. Publications report/Website – Sharon Duessel**
 - a. Website-In progress
 - i. To attempt Word Press instead of Dreamweaver
 - b. Will create a new Facebook page
 - c. Sent a spring newsletter out to membership

- i. Will be doing a supplemental edition about the Quad State Meeting.
 - 1. Will include the members with milestone membership years.
- ii. Editor is free to edit any articles submitted to the newsletter
- iii. List who the editor is
- iv. OTC students to do a shoe drive for Randolph World Ministries.
 - 1. Danyel will submit an article that has an email address, mailing address, and specifics of shoes requested.

XVIII. Promotion of the Profession Report

- a. No report submitted

XIX. District Representative reports

- a. St. Louis – James Purnell
 - i. No report submitted
- b. Columbia – Alese Furnald
 - i. No report submitted
- c. Springfield/Joplin – Vacant
- d. Kansas City/ Poplar Bluff – Vacant
- e. Cape Girardeau/Hannibal-Kirksville – Vacant

XX. New Business

- a. Planning meeting/retreat, July 20th?
 - i. Send a doodle
 - ii. Lake of the Ozarks is a viable option since closer than Branson
 - iii. Perhaps a Condo instead of a conference/hotel rooms.
 - iv. Debbie to call Tan-Tar-A Resort and the Four Seasons to compare rates.
 - v. April Hansen may have connections at Lake of the Ozarks
- b. 2014 Spring Meeting-MoKAN
 - i. It is Missouri's turn to host.
 - ii. Will Lucia Chair the meeting?
- c. National meeting in Houston
 - i. Debbie unable to attend entire conference. Will be able to attend the President Elect Meeting on Tuesday. Will need an alternate delegate to take her place at the House of Delegates.
 - 1. President – Elect meeting consists of meeting the Chairs of the National Committees and learn what they are asking of each President for the upcoming year, meet all of the other Incoming State Presidents, and go over the calendar for upcoming year.
- d. Business Meeting – April 4th, 2013
 - i. Inform membership of decision to table the budget
 - ii. Announce Election results
 - iii. Decide on Delegates
 - 1. President, President-elect, New Professional, and Student are pre-slated

- 2. Will need to have two at-large delegates based on our membership numbers (usually the President-Elect-Elect is an automatic at-large delegate for MoCLS) and alternates
- iv. Gavel transfer

XXI. Debbie motioned to adjourn Board Meeting

- a. Motion seconded by Sarah
 - i. All in favor, none opposed
- b. Board Meeting adjourned on 04/03/2013 at 2103.



Missouri Organization for Clinical Laboratory Science

Name: Debbie Baudler

Board Position: President-elect

2012-2013 ACTIVITIES: (List 3-5 activities necessary to accomplish your goals)

- **1. Become familiar with the duties of the President and assist the President as necessary.**
Progress on activity #1: trying to learn the activities by watching Renee. Only received a copy of my job duties in January.
- **2. Submit working budget for next year's activities to Finance Committee prior to Annual Business Meeting.**
Progress on activity #2: Will need to get together with April and the finance committee this summer
- **3. Prepare Presidential goals for presentation at the Annual Spring Meeting.**
Progress on activity #3: One goal is to get a written copy of all job descriptions from Mary Lou prior to Annual Meeting in Houston.
- **4. Serve as a delegate to the ASCLS Annual Meeting.**
Progress on activity #4: I plan to attend the Annual Meeting in Houston.
- **5. Attend State and Region VI Board Meetings.**
Progress on activity #5: I attended the November Region 6 meeting in Kansas City and will attend the next Region 6 meeting April 8th. I have attended the fall and winter MoCLS board meetings.



Missouri Organization for Clinical Laboratory Science

MoCLS April Board Meeting
LaVista, Nebraska
April 4, 2013
Government Affairs Report
John Koenig

As a member of ASCLS GAC committee I participated in monthly GAC conference calls and the face to face meetings at ASCLS National Meeting in LA and the Leg Day meeting in Washington DC. I shared Missouri licensure information with the ASCLS GAC and National Office.

As Region VI GAC Chair I shared information and Minutes from monthly GAC meetings with the state GAC reps for the five states in the Region, as well as, the Region Council.

The four states will be raffling off baskets at the Quad Meeting to raise money for PAC.

I attended the ASCLS Leg Day and Hill Visits with the assistance of the MoCLS Scholarship Fund and greatly appreciate the support. We went two the Hill with two issues this year and I have attached the Leave Behinds we left at each office we visited.

- 1. Clinical Laboratory Payment Cuts Jeopardize Patient Safety!**
- 2. Laboratory Personnel Jobs Are Available Nationwide Reauthorize the Workforce Investment Act Including Provisions that Support Laboratory Training Programs**

I urge you to read these leave behinds.



Clinical Laboratory Payment Cuts Jeopardize Patient Safety!

Members of ASCLS, AMT, AGT, ASCP and CLMA are committed to ensuring access to high quality laboratory testing for all Americans. We have joined together to urge you to let us help you meet the challenges and achieve the goals of this Congress related to the Medicare program. However, we must emphasize that the current trend of cuts to the clinical laboratory fee schedule is jeopardizing our ability to serve our patients.

We as laboratory services practitioners provide the laboratory tests that serve as the foundation for the diagnosis and clinical management of conditions like heart disease, pediatric conditions including leukemia, cancer, diabetes, kidney disease, and infectious diseases as well as management of chronic health conditions. Cuts in laboratory reimbursement threaten our ability to meet the needs of physicians and patients, for not only seniors but for all Americans. With the level of cuts we are sustaining we cannot hire qualified individuals to perform and interpret these tests, integrate new science into medicine and keep the hundreds of hospital, community and regional laboratories across the United States that provide these services open.

Clinical laboratories suffered deep cuts as a result of health reform. The law included a direct and immediate cut to the Part B Clinical Lab Fee Schedule of 1.75 percent each year from 2011 through 2015. This nine percent cut is the largest cut among all Part B providers. Clinical laboratories also received another cut through the productivity adjustment—one of only a few providers subject to an immediate adjustment in 2011—resulting in an additional 11 percent cut over ten years. Together, the direct cut and the productivity adjustment result in a cumulative 20 percent cut over ten years. Laboratory reimbursement was also cut an additional 2% to help pay for the postponement of the physician SGR cuts in the Middle Class Tax Relief and Job Creation Act of 2012 and will now get **another** 2 percent cut to the fee schedule as a result of sequestration, beginning April 1, 2013.

While less than two percent of all Medicare spending goes to clinical laboratory tests, our reimbursement has been subject to significant freezes in payments and cuts over the last two decades. Medicare payment amounts for clinical laboratory services have been reduced by about 40 percent in real (inflation adjusted) terms over the past 20 years.

Today's Practice

The cost of clinical laboratory services has increased significantly in the last 25 years, while the clinical laboratory fee schedule has been cut severely. Today, clinical laboratories are paid only 75 percent of the 1984 level when adjusted for inflation. This constitutes a real reduction in reimbursement and not just a reduction in the rate of increase that has been experienced by other health care services. The shrinking Medicare clinical diagnostic laboratory reimbursement is not keeping pace with the changes in cost, technology, complexity and delivery of services that we have provided over the past two decades.

Without the appropriate level of reimbursement, hospital and clinic laboratories are struggling to keep up with the needs of the patients they serve:

- the lack of funds mean vacancies go unfilled,
- instrumentation purchases are delayed,
- new genetic and molecular tests are not offered, and
- consultations to control utilization of laboratory services are not available.

In the end this will actually cost the health care system, and Medicare, more because:

- tests will be sent to reference laboratories increasing cost to hospitals and clinics,
- the lack of information from the laboratory requires the utilization of more expensive diagnostic and monitoring procedures
- less preventive care testing leads to treatment costs which will cost thousands of dollars more

It is essential that Congress recognize that we cannot continue the quality care for which laboratory professionals are renowned without the appropriate level of reimbursement.



I Am Your Medical Laboratory Professional

*The laboratory community is a large, critical component of the health care team. Our role in the delivery of health care is a dramatic one. We play a vital role in the detection, diagnosis, and treatment of disease, spanning the continuum of health care. Laboratory tests serve as the foundation for the diagnosis and management of conditions like cardiac disease, HIV, cancer, diabetes, kidney disease and infectious diseases. **Laboratory test results contribute up to medical decision making every day in every setting in this country.***

I, or someone like me, have touched you hundreds of times, but you never saw me, never felt me. I give you hope, provide joy, and unfortunately, deliver bad news. I am never there to share in your excitement or comfort you in your times of sorrow. However, I still feel these emotions from a distance.

My tasks are limitless, but always behind the scenes. I know that because of me, the world is a better place.

I am a Laboratory Scientist. I am the one who discovered a pregnancy in the couple who had a slim hope of ever bearing a child, but was not there to “high-five” them. I gave closure to thousands of families of the 9/11 disaster by identifying the remains of their loved ones, but was not there to share their tears. I personally discovered a terrorist’s weapon of choice, Anthrax, but could not bask in the limelight.

I discovered that the lump in your sister’s, wife’s, or mother’s breast was not cancer after all (or was). I found your disease early enough for a successful recovery or at least in time for you to wrap up loose ends.

I recognized when you needed more iron, less medication and a better diet. I identified a perfect match for the donor heart you so desperately needed. I supply most of the evidence your physician uses to diagnose your ills. But I never get to tell you so. Till now.



Laboratory Personnel Jobs Are Available Nationwide Reauthorize the Workforce Investment Act Including Provisions that Support Laboratory Training Programs

Congressional Action/Support Requested

- Support pending legislation reauthorizing the Workforce Investment Act (WIA)
- Include provisions in the WIA that support the expansion of two and four year laboratory training programs

Why is Federal Support of the Laboratory Workforce Needed?

Patient access to quality health care services relies in large part, on an adequate supply of well-trained allied health professionals. There are medical laboratory science jobs available nationwide. Unfortunately, despite the availability of jobs, the field of medical laboratory science is plagued by a severe workforce shortage, marked in large part to an insufficient number of qualified trained personnel to fill available slots.

The U.S. Department of Labor's (DOL) Bureau of Labor Statistics estimates that there will be almost 11,000 laboratory technologist/technician job openings annually through 2018. Unfortunately, the programs preparing tomorrow's laboratory workforce train only about a third of what is needed. Fewer than 5,000 individuals are graduating each year from accredited training programs.

Over the last two decades, our nation's ability to train new laboratory practitioners has deteriorated markedly and we have been unable to meet the demand for their services. According to the National Accrediting Agency for Clinical Laboratory Sciences (NAACLS), the number of accredited medical laboratory technology programs, the programs that train medical laboratory scientists and technicians has steadily declined. Right now, NAACLS reports medical laboratory scientist programs and medical laboratory technician programs across the nation are at risk for closing.

Laboratory educational programs prepare people for careers that routinely provide the critical information that contributes to life and death decisions. Unfortunately they are expensive to run and require small classes taught by qualified professionals. Hospitals, which used to conduct most of this education, have shifted their resources and closed most of their programs. Some state governments have determined that the programs are too expensive to run because of small class size and the investment in laboratory infrastructure needed to adequately train our students. Here are just a few of the programs that have closed in recent years: Arizona State University; the University of South Alabama; the University of Wisconsin, Madison; Western Carolina University; and the University of Nevada, Las Vegas.

Reauthorize the WIA

Workforce legislation is making its way through the House of Representatives. The Skills Act, Supporting Knowledge and Investing in Lifelong Skills (SKILLS) Act ([H.R. 803](#)), introduced by Rep. Virginia Foxx (NC-5) which has been marked-up and voted out of the House Committee on Education and the Workforce and has passed in the full House. In

addition, HR 798, introduced by Representatives John Tierney, George Miller, and Ruben Hinojosa was reintroduced as the Workforce Investment Act of 2013. It too seeks to address the nation's workforce needs and job training as an integral part of putting the nation back to work. At present there is no companion bill introduced in the Senate.

In reauthorizing the Workforce Investment Act (WIA), Congress should include provisions that make institutions of higher learning partners in job creation initiatives. This can be accomplished by including provisions in a reauthorized WIA that make public institutions of higher education automatically eligible as job-training providers. Provisions should be included that designate medical laboratory personnel education programs as one of a group of preferred programs where large number of jobs vacancies exist. Congress must close the gaps between workforce training, adult basic education and postsecondary education to give individuals the skills and knowledge they need in today's economy.

The survival and growth of medical laboratory professional education programs is essential to meet the growing health care needs of our nation's population.

Laboratory Personnel Jobs Are Available Nationwide!

Reauthorization of the Workforce Investment Act is critical. It provides the best possible route to secure jobs and to stabilize the nation's clinical education and training programs, helping to fill job vacancies in laboratory medicine. These vacancies are career-oriented science-based jobs that will help our nation care for an aging population.

At a time when individuals are losing their jobs, factories are being shut down and entire industries are being eliminated, laboratory medicine is growing by leaps and bounds.

Personnel shortages that health care is experiencing raise concern about laboratory staff workload and turnover. Today, increasing numbers of laboratory professionals are working second jobs or extra shifts. Personnel turnover is also an increasing problem. With competition for qualified laboratory personnel intensifying, annual turnover rates for some categories of laboratory personnel exceed 20 percent. Because of the difficulty in finding qualified staff, medical laboratories are increasingly turning to temporary staff (many of whom may already be working full- or part-time clinical laboratory jobs) to handle the patient testing workload.

Another trend feeding the shortage is the aging of laboratory professionals, reflecting the slowing pace at which younger, newly trained laboratory professionals are entering the field. Approximately 40 percent of the laboratory workforce is within ten years of retirement.

What Impact Do Laboratory Professionals Have on Patient Care?

The contributions laboratory professionals make to patient care cannot be overstated. Laboratory professionals play a critical role in patient care. Laboratory testing performed by educated and skilled laboratory practitioners is the foundation for most medical diagnoses and treatments. Thus, ensuring patients have access to the qualified laboratory professionals needed to provide prompt, quality testing services is imperative to quality care.



Missouri Organization for Clinical Laboratory Science

Board Report Board/Leadership Meeting April 2, 2013

NAME: Mary Lou Vehige

LEADERSHIP POSITIONS:

- AGENDA ITEM #9: Nominations Committee Member
 1. Prepared and sent a "Call for Nominations" the end of January 2013. Received no responses to this call.
 2. Assisted in preparing a slate of candidates for the 2013-14 elected positions.

- AGENDA ITEM #12: Bylaws Chair
 1. Continuing work on MoCLS Standard Operating Procedures (SOPs) for coordination and consistency with Bylaws. Plan completion with recommendations by summer planning meeting.

- AGENDA ITEM #18a: MO Legislative Day
 1. Participated in the MoCLS Missouri Legislative Day with Renee Setina, Tim Randolph, and Carol Truby-Bisges on January 29, 2013. Spoke with and/or left materials concerning licensure of clinical laboratory personnel with eight Representatives (7 members of the Professional Registration and Licensing Committee; the 8th my district representative) and four Senators on the Financial and Governmental Organizations and Elections Committee. All were open to discussion, most were positive, some committed to support if a bill made it to committee. None committed to be a bill sponsor this legislative session.

NOTE: I will not be attending the ASCLS Annual Meeting in Houston, TX.



Missouri Organization for Clinical Laboratory Science

2013 Spring Leadership Report

Name: Tim R. Randolph Leadership Position: Leadership Development

Brief Definition of Position:

Create systems and materials to recruit young members into ASCLS/MoCLS, grow their involvement and understanding of the organization, and improve the evolution of junior members as they move up the ranks.

2012-2013 GOALS:

1. Increase conversion of student member to professional member in MoCLS
2. Improve organizational understanding of ASCLS/MoCLS across leadership
3. Improve succession planning in MoCLS

2012-2013 ACTIVITIES:

1. Increase conversion of student member to professional member in MoCLS
 - a. Create database for MLT & MLS program directors in MO - COMPLETE
 - b. Send student related MoCLS info AND CALENDAR to program directors to encourage student involvement – IN PROGRESS
 - c. Create one annual student event in central MO – NOT STARTED
 - d. Promote student related events at MoCLS spring meeting – LEADERSHIP DEVELOPMENT WORKSHOP
 - e. Create inexpensive ways to get students to the meeting – DID FOR SLU
 - f. Create student email list and correspond periodically – NOT DONE
 - g. Invite students to the state version of Leadership Academy – DID FOR SLU
2. Improve organizational understanding & retention of ASCLS/MoCLS leadership
 - a. Promote annual planning meeting – COMPLETED FOR 2013
 - b. Create documents and strategies for planning meeting – NOT DONE
 - c. Create and deliver sessions/documents at MoCLS spring meeting – NOT DONE – WILL INVESTIGATE WITH JAN
 - d. Promote ASCLS Leadership Academy - COMPLETED
 - e. Create a state version of Leadership Academy – WORK WITH IOWA
3. Improve succession planning in MoCLS
 - a. Create documents & timeline to improve succession planning – NOT DONE
 - b. Integrate documents & timeline into planning meeting, spring meeting and leadership meetings. – IN PROGRESS