

An Update From the California Chapter of the American College of Cardiology Board of Directors

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The California Chapter of the American College of Cardiology (CA ACC) Board of Directors Meeting and Legislative Session was held in Sacramento on May 11, 2016. Along with an incredible group of passionate and motivated District Councillors, Committee Chairs, and chapter leadership, we were fortunate to have Assembly Member Jim Wood, Chair of the Health Committee, and Assembly Member Brian Maienschein, Vice Chair of the Health Committee, address our leadership and participate in a question-and-answer session. The discussion focused on the physician shortage in rural areas of California, the scope of practice for nurse practitioners, and pending legislation that could severely limit balance billing for

out-of-network services (Assembly Bill [AB] No. 533).

Paul Teirstein, MD, FACC, Certification and Licensure, Chair, briefed the California State Assembly leaders on Oklahoma State Legislature's Senate Bill 1148, which was signed by the Oklahoma Governor Mary Fallin on April 11, 2016, that states

Nothing in the Oklahoma Licensure and Supervision Act shall be construed as to require a physician to secure a Maintenance of Certification (MOC) as a condition of licensure, reimbursement, employment or admitting privileges at a hospital in this state. For the purposes of this subsection, "Maintenance of

Certification (MOC)" shall mean a continuing education program measuring core competencies in the practice of medicine and surgery and approved by a nationally recognized accrediting organization."

We presented information to Assembly Members Wood and Maienschein that AB 533 would force in-network deep discounting on out-of-network providers, forcing them to become, functionally, in-network providers with none of the benefits. The CA ACC and California Medical Association are working to find a common-sense solution to this dilemma.

Following the discussion of AB 533, the Board moved to the topic

of scope of practice. There was agreement that nurse practitioners and other advanced health care providers are an important part of the Health Care Team. That being said, it was the general opinion that, with the differences in training (intensity, duration, and spectrum) between physicians and nurse practitioners and among nurse practitioners themselves, patients can be best served with a scope of practice provided to individual nurse practitioners based on their unique training and experience in coordination with a supervising physician.

Among the Committee Chairs updating the Board were

- Pranav M. Patel, MD, FACC, Quality Initiatives
- Paul Teirstein, MD, FACC, Certification and Licensure
- Rose Cohen, MD, MSc, FACC, Women in Cardiology
- Evelyn Taverna, NP, CNS, and Kelly Matsuda, PharmD, Cardiovascular Team
- Seema K. Pursnani, MD, MPH, FACC, Technology and Innovation
- Ashok Krishnaswami, MBBS, FACC, Geriatric Cardiology
- William B. Ricks, MD, FACC, Cardiology PAC
- Nassir Azimi, MD, FACC, Public Relations

- Garwood Gee, MD, FACC, Educational Foundation
- Anthony Hilliard, MD, FACC, Early Career

Attendees at the May meeting also included Dipti Itchhaporia, MD, FACC, Ramin Manshadi, MD, FACC, Asher Kimchi, MD, FACC, Vimal I. Nanavati, MD, FACC, Gerald Bourne, MD, FACC, Teresa Daniele, MD, FACC, Kamran Shamsa, MD, FACC, William R. Lewis, MD, FACC, Anant Vyas, MBBS, FACC, David Filsoof, MD, FACC, and lobbyist Tim Madden. ■