

AARC House of Delegates Meeting

July 16 & 17th, 2015

Phoenix, Arizona

Highlights from Day One

- Military Liaisons- AARC is looking for state affiliate military liaisons. They are doing this at the National level, but would like to see if the states will do this at each state meeting as well. There will be a new item on the membership lists that the AARC sends that will indicate if someone is currently on active duty or has been in the military for recognition going forward.
- International Committee Report – 13 applicants for international fellow for 2015 and 10 host cities that applied. 3 RT's were selected and 1 physiotherapist. Thanked everyone for the continued support of the international fellow program.
- Speaker's report (John Wilgis) – Discussion about affiliates being bonded and incorporated. Need to make sure that minutes and financial reports are being shared with the AARC. This is only to serve as a repository for records for the state for future business, especially since states change leadership. These can be sent to Asha at the AARC. At very least, Treasurer should be bonded.
- AARC Executive Director Update (Tom Kallstrom) – Everything is set for the upcoming conference in Tampa, Florida in November. (see attached document for full report)
- Government Affairs report – Lots of discussion about HR 2948 Medicare Telehealth Parity Act which was re-introduced on July 7th. AARC relaunching virtual lobby week July 17-26th. There will be information on the AARC advocacy page. Asking states to participate in Virtual Lobby week. This will allow for incremental coverage of remote patient monitoring, specifically will help our practice with COPD and heart disease patients. (see attached Government affairs document for further information).
- AARC Update (Sherry Milligan) – She presented that there has not been a dues increase since 2001, which was 14 years ago. They will be increasing dues on October 1, 2015. Print level will go from \$90 to \$99, 1 + 1 will go from \$84.25 to \$89, digital will go from \$78.50 to \$89. Revenue sharing will also increase for states from \$12 to \$13. Launching new website: BeABetterRT.com
- Proposed changes to Bylaws with first reading of these and vote by delegates. Several of these passed but 2 didn't and went back to bylaws committee for review and rewording. Next step for bylaws changes will need to go to membership for full vote.

Highlights from Day Two:

- Financial Presentation from Tony Lovio, AARC Controller – States need to make sure that they are a 501(c)6, not 501(c)3. 501(C)3 is reserved for charity organizations that don't do lobbying or other government affairs. 501(c)6 is subject to paying sales tax. File 990 tax forms, but depending on size of organization may do 990EZ or 990N. 990T will need to be filed if doing advertising. Have to report all advertising income including employment ad money if collecting it. Three policies that all states should have in their P & P manuals: Whistleblower, Conflict of Interest and Record Retention (this should include articles of incorporation, bylaws and amendments, IRS tax exemption letter, past financial records, board minutes, tax returns, insurance policies, major acquisitions, banking resolutions, and check signing documents).
- Best practice presentations- given by Lois Rowland (VA)-using telemarketing for membership. Willing to share word document template for phone call script. Uses student work study at local college to do this calling. Shelley Klein (MN)-presented on using a free mobile app to improve their state meetings.
- Chartered Affiliate/Special Recognition Committee Report – Outstanding Affiliate Contributor will go to Teresa Lesser (KS), Life Membership will go to Suzanne Bollig (KS), Summit Award will go to South Carolina Society for Respiratory Care
- Student Mentoring Committee Report- welcomed 10 student guests. Continue to work on having student's sponsorship with states and funding with AARC for the program.
- President's Report (Frank Salvatore) -*Goal #1* membership-50,000 active members, currently have 38,000. Need to get state membership better; alpha program (2 years digital membership at \$70 post-graduation and discounts on testing exams), omega –over 65 years reduced with digital membership, no CRCE's; win back program – program for lapsed membership; *goal #2* public awareness-Medicaid level program, corporate partners, COPD awareness with partnership with Leonard Nemoy family; *goal #3* – advancing education – clinical ladder document on AARC website; *goal #4*-advocacy-HR2948 Medicare Telehealth Parity Week(bipartisan bill- actual recognize RT in other avenues outside the hospital)-Virtual lobby week July 17th, RRT entry level-look at our threshold in our state for RRT vs. CRT, 2 states already have done this (OH, CA) 6 others working on it; *goal #5*-international; *goal #6*-continuing education; *goal #7*-advance practice RT(APRT); *goal #8*-partnerships- need to look at partnerships with states, CoARC, NBRC, consumers, government agencies, etc.; *goal #9*- research/ARCF-journal conferences, funding 2 advanced practice scholarships for RT's getting an advanced degree and will work in the field of Alpha -1 and respiratory, annual research fellowships-every member of AARC gives \$5 to ARCF will have more than 1million to help fund research