



ACNL in Action:

Nurse Leaders Making a Difference!

Association of California Nurse Leaders

March 8, 2017

In This Issue

Highlights from BRN Sunset Hearing on March 6

Republicans Introduce Health Care Replacement Plan

ACNL *Circles of Giving* Program: Supporting the Vital Work of Nurse Leaders

BRN Sunset Hearing at State Capitol

Leadership of Executive Officer Dr. Joseph Morris Recognized by Legislators

On March 6, the Board of Registered Nursing came before the Joint Sunset Review Committee. Each year, the Assembly Business and Professions and the Senate Business, Professions and Economic Development Committees hold joint sunset review oversight hearings to review the boards and bureaus under the Department of Consumer Affairs (DCA). The sunset review process provides an opportunity for the DCA, Legislature, boards and interested stakeholders to discuss the performance of the boards and make recommendations for improvements in all aspects of board activities.

In 2015, the BRN came before the Joint Sunset Committee, and after significant work behind the scenes, the Governor signed a two-year BRN sunrise bill. The 2015 process was very contentious, but this year, the tone during the hearing was much different. In 2015, the State Auditor reported on the BreZE Program. During her report, attendees watched an aggressive game of “dodge ball” between the Director of Consumer Affairs and the Director of IT, both avoiding responsibility for BreZE. While issues with BreZE continued this year, they did not take center stage at Monday’s hearing.

This year, the State Auditor discussed the BRN Enforcement Program that was part of her report released in December 2016. While the same State Auditor from 2015 presented the report, this year she acknowledged that the Board and staff had made significant progress in resolving many of the issues identified. Senator Hill and the State Auditor both recognized the outstanding leadership Dr. Joseph Morris has provided since assuming the role of Executive Officer, and his aggressive approach to resolving issues raised in the Auditor’s Report.

Since joining the BRN staff in July, Dr. Morris and his team have implemented actions to address new graduate processing times, licensure renewal and the delinquent fingerprint issue. At the hearing, Dr. Morris reported that the BreZE system was being programmed to include notification to RNs renewing their licenses that they need to submit new fingerprints via LiveScan. This system upgrade will be completed in May. It is important to remember that the BreZE system was a mandate of the Department of Consumer Affairs and not a choice for the BRN. Fortunately, Dr. Morris’ background with information systems brings credibility and expertise to the conversation.

Without question, we have work to do. Dr. Morris has reached out to ACNL on several occasions about a variety of subjects. Our members will be working with the BRN on simulation, clinical placement and licensure issues. Our testimony on Monday focused on partnership, collaboration and cooperation between the nursing profession and the BRN.

(Continued)

Marylin Stephens, Chair of ACNL's Communication/Voice Committee, requested during her testimony that the BRN, like most other states, adopt Nursys as the standard for licensure verification. Judee Berg, Executive Director for *HealthImpact*, thanked the BRN and staff for their commitment and offered the support of the state Workforce Center in addressing issues raised in the report. BJ Bartleson, VP of Nursing and Clinical Services for the California Hospital Association, recognized Stacie Beruman, Assistant Executive Officer, for her ongoing partnership and emphasized the imperative for resolving fingerprint issues. Representing academia, CACN President Philip Greiner offered support to the BRN; CACN Past President Audrey Berman was present to discuss the 30-unit option issue; and Alice Martanegara offered assistance in identifying best practices. ACNL CEO Patricia McFarland recognized the positive tone of the meeting and thanked Michael Jackson, President of BRN, the Board and Dr. Morris for their leadership. She committed to ongoing collaboration and support for the work ahead. ACNL members present also voiced support for SB 799, Senator Hill's four-year BRN sunrise bill.

Our goal in the ensuing months, as SB 799 makes its way to the Governor's desk, will be to ensure it remains a four-year sunrise bill. Our challenge will be to address Recommendation #12 in the Committee Report which states: "due to the substantial enforcement concerns which were identified by the State Auditor and reflected in the documents reviewed in this Background Paper, and in particular removing the enforcement authority of the BRN if it does not address concerns raised by the State Auditor, the Committee should consider reviewing the BRN in two years. This is to ensure that it has made progress in implementing the recommendations made in the 2016 California State Auditor Report and address other issues which have been raised by the Committees."

While the tone of Monday's meeting was collaborative and supportive, it does not guarantee our success in achieving a four-year sunrise. As nurse leaders, we must educate our elected officials about the progress and successes to date. Dr. Morris is committed to addressing the issues in the auditor and committee reports, but needs time to resolve these issues. He also requires resources, both financial and human. He suggested reporting to both houses about the BRN's progress over the next few years as an alternative to a two-year sunrise. We, as nurse leaders, must continue to work with the BRN to achieve the outcomes expected of a highly functioning board.

Overall the work of the BRN was recognized as appropriate and moving forward in a positive direction. Actions implemented have been well received. The work continues, and ACNL will be a major player as this bill moves through the Legislature.

Republicans Introduce Health Care Replacement Plan

This week, House Republicans introduced legislation to replace the Affordable Care Act (ACA), also known as Obamacare. JoAnn Webb, AONE's Vice President for Federal Relations and Policy, has provided a brief overview of the proposed "American Health Care Act," that has been dubbed, "Trumpcare." ACNL will continue to share updates on the proposed federal legislation as it moves through Congress.

Tax Credits – Republicans would replace Obamacare subsidies with age-based tax credits ranging from \$2,000 – \$4,000 to help individuals pay for coverage. The credits would begin phasing out for people who make more than \$75,000 for individuals and \$150,000 for households. They would disappear completely for individuals who earn more than \$215,000, with a cap of \$290,000 for joint filers.

(Continued)

Medicaid (MediCal in California) – The plan unveiled Monday would freeze Medicaid's expansion in 2020 and phase it out over time. The bill would also shift Medicaid from an open-ended federal matching payment to a per-capita lump sum payment. About 70 million Americans are currently covered through Medicaid, with more than 11 million gaining coverage after the ACA took effect.

Hospitals – While the bill would reinstate the disproportionate share payments that were eliminated when the ACA took effect, the planned cuts to Medicaid would likely lower hospitals' revenues and force them to ramp up their charity care spending. Hospital profit margins are currently at their highest level since before the 2008-2009 recession.

Planned Parenthood – The program would be defunded for one year under the bill, a provision that conservatives want, but risks losing the support of some moderate Republicans.

High-net worth individuals – The bill repeals a slew of ACA-related taxes, like a 3.8 percent investment tax on the well-to-do and a 0.9 percent surcharge on wages above \$250,000. The move would save the top 0.1 percent of earners about \$195,000 annually, according to the Tax Policy Center.

The device industry – The bill would repeal the 2.3 percent medical device excise tax opposed by the industry, Republicans and some Democrats. The tax, which took effect in 2013, before being suspended for two years in 2015, led to nearly 30,000 lost jobs, according to a study from the American Action Forum released last week.

Mandates – The individual and employer mandate remain but the penalties for violating them are repealed. Senate rules of reconciliation say that only budgetary items can pass with 51 votes. A policy change such as repealing the mandates outright would require 60 votes to block a filibuster.

Cost-sharing – Cost sharing subsidies, which help people pay for copays and deductibles, are repealed in 2020.

Coverage for children – Allows parents to keep their children on their insurance until they are 26.

Coverage for abortion – No one can use tax credits to purchase an insurance plan that offers abortion coverage.

Repeal of the Essential Benefits Package - to occur in 2019

As you can see from this summary, the voice of professional nursing is needed in this conversation! We must continue to advocate to protect our patients and the nurses who are vital to their care. On March 7, AONE sent a letter to all members of Congress expressing opposition to the American Healthcare Act.

[View AONE Letter to Congress](#)

(Continued)

AONE Advocacy Day in May

AONE is hosting an advocacy day in Washington DC, May 16-17. Registration and information regarding the program can be found on the AONE Advocacy website.

In addition, AONE will host an event with Michael Bechloss, best-selling author and presidential historian on April 1, 2017 at the 50th Annual Meeting in Baltimore, MD. His topic: *Inside the Modern Presidency: 50 Years that Changed America*. ACNL members who contributed to CHPAC are eligible for a free ticket. Be sure to stop by the AONE Advocacy/PAC booth to receive your ticket to the event.

ACNL's Circles of Giving: Supporting the Vital Work of Nurse Leaders!



2016, the founding year for ACNL's *Circles of Giving* program, exceeded all expectations with members donating nearly \$140,000 to further the work of our organization. Those funds represented donations by 14 percent of ACNL's membership.

Imagine what we could do if every member donated in 2017!

Members attending ACNL's recent Annual Conference in February had the opportunity to contribute to the *Circles of Giving*, but this is only the beginning of our 2017 campaign. The Philanthropic Committee has set a goal of 51 percent of our membership donating this year. Philanthropic Co-Chairs Paul Wafer and Stephanie Mearns each pledge to donate \$1 for every contribution received.

The Philanthropic Committee is calling upon all members to "pay it forward" by supporting the *Circles of Giving* program. Your donation makes a difference! In 2016, ACNL's Philanthropic Program provided \$27,000 in scholarships to members and three deserving CNSA members. Additionally, \$10,000 was earmarked to support the development of ACNL's Executive Leadership Academy.

Phase II of our Strategic Philanthropic Plan will focus on obtaining grants from foundations who share ACNL's vision and will support our work. These potential donors look more favorably on organizations with a high percentage of member support. Therefore your contribution, in any amount, is important!

The Philanthropic Committee is developing an RFP for grant writers. If we are to actualize our vision of a robust philanthropic program, we must look to experts to guide our efforts. Experienced grant writers will help us achieve this critical next step to provide funds to support the important work of nurse leaders.

For more information, or to contribute to the *Circles of Giving*, visit the ACNL website at:

<https://acnl.memberclicks.net/circles-of-giving>

Or, if you have ACNL's 2017 conference app on your mobile device, you can donate by accessing the *Circles of Giving* icon.

Support ACNL's Circles of Giving Today! Together We Make A Difference!

Did you read the February/March issue of ACNL in Action, published March 2?

[View February/March ACNL in Action](#)