



NOTICE OF PUBLIC MEETING GOVERNMENT AFFAIRS COMMITTEE

AUGUST 30, 2012

1:30 p.m. 2525 Natomas Park Drive, Suite 120 Sacramento, CA 95833

AGENDA

4	$C \times I \cdot I$. TO ORDER
1.	CALL	. IU URDER

- 2. Physical Therapy: Direct Access: Other States' Laws
- 3. BCE Mission Statement
- 4. Government Relations: Strategic Plan
- 5. Legislative Bill Tracking
- 6. Policies and Procedures for Preparing Legislative Bill Analyses
- 7. Policies and Procedures for Determining Positions and Testifying on Legislation
- 8. BCE's Attendance at Other Boards' Meetings
- 9. BCE Interest in Having Presentations at Board Meetings by State Associations and Colleges
- 10. BCE Interest in Issuing Proclamations to Recognize Individuals for Their Achievements
 Consistent with the Board's Consumer Protection Mission
- 11. PUBLIC COMMENT
- 12. FUTURE AGENDA ITEMS
- 13. ADJOURNMENT

GOVERNMENT AFFAIRS COMMITTEE

Hugh Lubkin, D.C., Chair Julie Elginer, Dr.PH Heather Dehn, D.C.

The Board of Chiropractic Examiners' paramount responsibility is to protect California consumers from the fraudulent, negligent, or incompetent practice of chiropractic care.

A quorum of the Board may be present at the Committee meeting. However, Board members who are not on the committee may observe, but may not participate or vote. Public comments will be taken on agenda items at the time the specific item is raised. The Committee may take action on any item listed on the agenda, unless listed as informational only. All times are approximate and subject to change. Agenda items may be taken out of order to accommodate speakers and to maintain a quorum. The meeting may be cancelled without notice. For verification of the meeting, call (916) 263-5355 or access the Board's Web Site at www.chiro.ca.gov.

The meeting facilities are accessible to individuals with physical disabilities. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Marlene Valencia at (916) 263-5355 ext. 5363 or e-mail marlene valencia@chiro.ca.gov or send a written request to the Board of Chiropractic Examiners, 2525 Natomas Park Drive, Suite 260, Sacramento, CA 95833. Providing your request at least five (5) business days before the meeting will help to ensure availability of the requested accommodation.

T-(916) 263-5355 F (916) 263-5369 TT/TDD (800) 735-2929 Consumer Complaint Hotline (866) 543-1311 Board of Chiropractic Examiners 2525 Natomas Park Drive, Suite 260 Sacramento, California 95833-2931 www.chiro.ca.gov

APPENDIX M

Direct Access to Physical Therapist Services, by State

Current as of January 2011

Direct patient access to physical therapy services is legal in the majority of U.S. jurisdictions. Treatment may be provided without a referral and without restrictions in 16 states ("unrestricted"); and without a referral but with certain restrictions in 29 states ("limited"). Three states permit a physical therapist to conduct a patient evaluation without a referral but do not permit treatment without a referral. Two states require a referral for evaluation as well as treatment. While state law may permit treatment without a referral, payers may still require a referral.

Physical therapists must determine a diagnosis regarding the patient's specific condition for which they will be providing treatment intervention before making patient management decisions. A diagnosis from a referral source does not negate the physical therapist's responsibility to arrive at a diagnosis specific to the condition for which the therapist's treatment plan and intervention will be directed. The evaluative and diagnostic process should also include a prognosis or an expectation of outcome, and the time needed to achieve it, associated with treatment intervention. The end result of the evaluative process is the design of the treatment intervention. The physical therapist regularly assesses the effects of the treatment intervention, making any needed modifications to the intervention to achieve the desired outcome.

State	Туре	Year	Provisions	Citation
Alabama	No Direct Access		No access	
Alaska	Unlimited	1986	No restrictions to access.	
Arizona	Unlimited	1983	No restrictions to access.	
Arkansas	Limited	1997	The therapeutic intervention of bronchopulmonary hygiene and debridement of wounds require a physician referral before initiation of treatment.	A.C.A § 17-93-102
California	Limited	1968	No referral requirement in statute or board regulations. 1965 California Attorney General Opinion (AG Opinion No. 65-21) states that a physical therapist may practice without a physician's referral provided that a diagnosis is obtained from a diagnostician.	
Colorado	Unlimited	1988	No restrictions to access.	

AMENDED IN ASSEMBLY AUGUST 20, 2012

AMENDED IN ASSEMBLY JUNE 18, 2012

AMENDED IN SENATE JANUARY 26, 2012

AMENDED IN SENATE MAY 24, 2011

AMENDED IN SENATE MAY 9, 2011

AMENDED IN SENATE MARCH 30, 2011

SENATE BILL

No. 924

Introduced by Senators Price, Walters, and Steinberg (Coauthors: Assembly Members Chesbro, Fong, Knight, Morrell, and Wieckowski)

February 18, 2011

An act to amend Sections 2406 and 2690 of, and to add Sections 2406.5, 2620.1, and 2694.5 to, the Business and Professions Code, and to amend Section 13401.5 of the Corporations Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

SB 924, as amended, Price. Physical therapists: direct access to services: professional corporations.

(1) Existing law, the Physical Therapy Practice Act, creates the Physical Therapy Board of California and makes it responsible for the licensure and regulation of physical therapists. The act defines the term "physical therapy" for its purposes and makes it a crime to violate any of its provisions.

This bill would specify that patients may access physical therapy treatment directly, and would, in those circumstances, require a physical therapist to refer his or her patient to another specified healing arts practitioner if the physical therapist has reason to believe the patient has a condition requiring treatment or services beyond that scope of practice, and, with the patient's written authorization, to notify the patient's primary physician and surgeon, if any, that the physical therapist is treating the patient. The bill would prohibit a physical therapist from treating a patient beyond 30 business days or 12 visits, whichever occurs first, unless the physical therapist receives a specified authorization patient obtains a diagnosis from a person with a physician and surgeon's certificate or from a person with a podiatric medicine certificate and acting within his or her scope of practice. The bill would require a physical therapist, prior to the initiation of treatment services, to provide a patient with a specified notice concerning the limitations on the direct treatment services.

(2) Existing law regulating professional corporations provides that certain healing arts practitioners may be shareholders, officers, directors, or professional employees of a medical corporation or a podiatric medical corporation, subject to certain limitations.

This bill would add licensed physical therapists and licensed occupational therapists to the list of healing arts practitioners who may be shareholders, officers, directors, or professional employees of those corporations. The bill would also provide that specified healing arts licensees may be shareholders, officers, directors, or professional employees of a physical therapy corporation. The bill would require, except as specified, that a medical corporation, podiatry corporation, and physical therapy corporation provide patients with a specified disclosure notifying them that they may seek physical therapy treatment services from any physical therapy provider. The bill would also make conforming changes to related provisions.

Because the bill would specify additional requirements under the Physical Therapy Practice Act, the violation of which would be a crime, it would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

3 SB 924

The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares that an individual's access to early intervention to physical therapy treatment may decrease the duration of a disability, reduce pain, and lead to a quicker recovery.

SEC. 2. Section 2406 of the Business and Professions Code is amended to read:

2406. A medical corporation or podiatry corporation is a corporation that is authorized to render professional services, as defined in Sections 13401 and 13401.5 of the Corporations Code, so long as that corporation and its shareholders, officers, directors, and employees rendering professional services who are physicians and surgeons, psychologists, registered nurses, optometrists, podiatrists, chiropractors, acupuncturists, naturopathic doctors, physical therapists, occupational therapists, or, in the case of a medical corporation only, physician assistants, marriage and family therapists, or clinical social workers, are in compliance with the Moscone-Knox Professional Corporation Act, the provisions of this article, and all other statutes and regulations now or hereafter enacted or adopted pertaining to the corporation and the conduct of its affairs.

With respect to a medical corporation or podiatry corporation, the governmental agency referred to in the Moscone-Knox Professional Corporation Act is the board.

SEC. 3. Section 2406.5 is added to the Business and Professions Code, to read:

2406.5. (a) A medical corporation or podiatry corporation that is authorized to render professional services, as defined in Sections 13401 and 13401.5 of the Corporations Code, shall disclose to its patients, orally and in writing, when initiating any physical therapy treatment services, that the patient may seek physical therapy treatment services from a physical therapy provider of his or her choice who may not necessarily be employed by the medical or podiatry corporation.

(b) This disclosure requirement shall not apply to any medical corporation that contracts with a health care service plan with a license issued pursuant to the Knox-Keene Health Care Service Plan Act of 1975 (Chapter 2.2 (commencing with Section 1340) of Division 2 of the Health and Safety Code) if the licensed health

SB 924 —4—

3 4

5

10

11 12

13

15

16

17 18

19

20

21 22

23

24

25

26

27

28 29

30

31

32 33

34

35

36 37

38

39

40

1 care service plan is also exempt from federal taxation pursuant to 2 Section 501(c)(3) of the Internal Revenue Code.

- SEC. 4. Section 2620.1 is added to the Business and Professions Code, to read:
 - 2620.1. (a) In addition to receiving wellness and evaluation services from a physical therapist, a person may initiate physical therapy treatment directly from a licensed physical therapist provided that the treatment is within the scope of practice of physical therapists, as defined in Section 2620, and that all the following conditions are met:
 - (1) If, at any time, the physical therapist has reason to believe that the patient has signs or symptoms of a condition that requires treatment beyond the scope of practice of a physical therapist, the physical therapist shall refer the patient to a person holding a physician and surgeon's certificate issued by the Medical Board of California or by the Osteopathic Medical Board of California or to a person licensed to practice dentistry, podiatric medicine, or chiropractic.
 - (2) The physical therapist shall comply with Article 6 (commencing with Section 650) of Chapter 1 of Division 2.
- (3) With the patient's written authorization, the physical therapist shall notify the patient's primary physician and surgeon, if any, that the physical therapist is treating the patient.
- (4) With respect to a patient initiating physical therapy treatment services directly from a physical therapist, the physical therapist shall not continue treating that patient beyond 30 business days or 12 visits, whichever occurs first, without-receiving, the patient obtaining a diagnosis from a person holding a physician and surgeon's certificate from the Medical Board of California or the Osteopathic Medical Board of California, or from a person holding a certificate to practice podiatric medicine from the California Board of Podiatric Medicine and acting within his or her scope of practice, a dated signature on the physical therapist's plan of care indicating approval of the physical therapist's plan of care. Approval of the physical therapist's plan of care shall include an appropriate patient examination by the person holding a physician and surgeon's certificate from the Medical Board of California or the Ostcopathic Medical Board of California, or by the person holding a certificate to practice podiatric medicine from the California Board of Podiatric Medicine and acting within his or

__5__ SB 924

her scope of practice. For purposes of this paragraph, "business day" means any calendar day except Saturday, Sunday, or the following business holidays: New Year's Day, Washington's Birthday, Memorial Day, Independence Day, Labor Day, Columbus Day, Veterans Day, Thanksgiving Day, and Christmas Day.

- (b) The conditions in paragraphs—(1),—(2), (3); and (4) of subdivision (a) do not apply to a physical therapist when providing evaluation or wellness physical therapy services to a patient as described in subdivision (a) of Section 2620 or treatment provided upon referral or diagnosis by a physician and surgeon, podiatrist, dentist, chiropractor, or other appropriate health care provider acting within his or her scope of practice. Nothing in this subdivision shall be construed to alter the disclosure requirements of Section 2406.5.
- (c) Nothing in this section shall be construed to expand or modify the scope of practice for physical therapists set forth in Section 2620, including the prohibition on a physical therapist diagnosing a disease.
- (d) Nothing in this section shall be construed to require a health care service plan, insurer, workers' compensation insurance plan, or any other person or entity, including, but not limited to, a state program or state employer, to provide coverage for direct access to treatment by a physical therapist.
- (e) When a person initiates physical therapy treatment services directly pursuant to this section, the physical therapist shall not perform physical therapy treatment services without first providing the following written notice, orally and in writing, on one page, in at least 14-point type, and obtaining a patient signature on the notice:

Direct Physical Therapy Treatment Services

You are receiving direct physical therapy treatment services from an individual who is not a physician, but who is a physical therapist licensed by the Physical Therapy Board of California.

Under California law, you may continue to receive direct physical therapy treatment services for a period of 30 business days or 12 visits, whichever occurs first, after which time a physical therapist may continue providing you with physical therapy treatment services only after receiving, from a person holding a

physician and surgeon's certificate issued by the Medical Board of California or by the Osteopathic Medical Board of California, or from a person holding a certificate to practice podiatric medicine from the California Board of Podiatric Medicine and acting within his or her scope of practice, a dated signature on the physical therapist's plan of care indicating approval of the physical therapist's plan of care.

If you have received direct physical therapy treatment services for a duration of 30 business days or 12 visits, whichever occurs first, from a physical therapist, it may constitute unprofessional conduct for that physical therapist or for another physical therapist to provide direct physical therapy treatment services without receiving from a person holding a physician and surgeon's certificate issued by the Medical Board of California or by the Osteopathic Medical Board of California, or from a person holding a certificate to practice podiatric medicine from the California Board of Podiatric Medicine and acting within his or her scope of practice, a dated signature on the physical therapist's plan of care, indicating approval of the physical therapist's plan of care.

Some health plans and insurers will not pay for direct physical therapy treatment services without a medical diagnosis or referral. Please check with your health plan or insurer if you have questions about coverage for direct physical therapy treatment services.

Under California law, you may continue to receive direct physical therapy treatment services for an initial period without obtaining a diagnosis from a physician or podiatrist. This initial period is 30 business days or 12 visits, whichever occurs first. In order for a physical therapist to continue treating you beyond this initial period, you must obtain a diagnosis from a physician or podiatrist.

If you have received direct physical therapy treatment services from a physical therapist for the initial period of 30 business days or 12 visits, whichever occurs first, it may constitute unprofessional conduct for that physical therapist to continue treating you beyond this initial period without a diagnosis from a physician or podiatrist.

[Patient's Signature/Date]

—7— SB 924

SEC. 5. Section 2690 of the Business and Professions Code is amended to read:

2690. A physical therapy corporation is a corporation that is authorized to render professional services, as defined in Sections 13401 and 13401.5 of the Corporations Code, so long as that corporation and its shareholders, officers, directors, and employees rendering professional services who are physical therapists, physicians and surgeons, podiatrists, acupuncturists, naturopathic doctors, occupational therapists, speech-language pathologists, audiologists, registered nurses, psychologists, and physician assistants are in compliance with the Moscone-Knox Professional Corporation Act, this article, and all other statutes and regulations now or hereafter enacted or adopted pertaining to the corporation and the conduct of its affairs.

With respect to a physical therapy corporation, the governmental agency referred to in the Moscone-Knox Professional Corporation Act is the board.

SEC. 6. Section 2694.5 is added to the Business and Professions Code, to read:

2694.5. A physical therapy corporation that is authorized to render professional services, as defined in Sections 13401 and 13401.5 of the Corporations Code, shall disclose to its patients, orally and in writing, when initiating any physical therapy treatment services, that the patient may seek physical therapy treatment services from a physical therapy provider of his or her choice who may not necessarily be employed by the physical therapy corporation.

SEC. 7. Section 13401.5 of the Corporations Code is amended to read:

13401.5. Notwithstanding subdivision (d) of Section 13401 and any other provision of law, the following licensed persons may be shareholders, officers, directors, or professional employees of the professional corporations designated in this section so long as the sum of all shares owned by those licensed persons does not exceed 49 percent of the total number of shares of the professional corporation so designated herein, and so long as the number of those licensed persons owning shares in the professional corporation so designated herein does not exceed the number of persons licensed by the governmental agency regulating the designated professional corporation:

- 1 (a) Medical corporation.
- 2 (1) Licensed doctors of podiatric medicine.
- 3 (2) Licensed psychologists.
- 4 (3) Registered nurses.
- 5 (4) Licensed optometrists.
- 6 (5) Licensed marriage and family therapists.
- 7 (6) Licensed clinical social workers.
- 8 (7) Licensed physician assistants.
- 9 (8) Licensed chiropractors.
- 10 (9) Licensed acupuncturists.
- 11 (10) Naturopathic doctors.
- 12 (11) Licensed professional clinical counselors.
- 13 (12) Licensed physical therapists.
- 14 (13) Licensed occupational therapists.
- 15 (b) Podiatric medical corporation.
- 16 (1) Licensed physicians and surgeons.
- 17 (2) Licensed psychologists.
- 18 (3) Registered nurses.
- 19 (4) Licensed optometrists.
- 20 (5) Licensed chiropractors.
- 21 (6) Licensed acupuncturists.
- 22 (7) Naturopathic doctors.
- 23 (8) Licensed physical therapists.
- 24 (9) Licensed occupational therapists.
- 25 (c) Psychological corporation.
- 26 (1) Licensed physicians and surgeons.
- 27 (2) Licensed doctors of podiatric medicine.
- 28 (3) Registered nurses.
- 29 (4) Licensed optometrists.
- 30 (5) Licensed marriage and family therapists.
- 31 (6) Licensed clinical social workers.
- 32 (7) Licensed chiropractors.
- 33 (8) Licensed acupuncturists.
- 34 (9) Naturopathic doctors.
- 35 (10) Licensed professional clinical counselors.
- 36 (d) Speech-language pathology corporation.
- 37 (1) Licensed audiologists.
- 38 (e) Audiology corporation.
- 39 (1) Licensed speech-language pathologists.
- 40 (f) Nursing corporation.

- 1 (1) Licensed physicians and surgeons.
- 2 (2) Licensed doctors of podiatric medicine.
- 3 (3) Licensed psychologists.
- 4 (4) Licensed optometrists.
- 5 (5) Licensed marriage and family therapists.
- 6 (6) Licensed clinical social workers.
- 7 (7) Licensed physician assistants.
- 8 (8) Licensed chiropractors.
- 9 (9) Licensed acupuncturists.
- 10 (10) Naturopathic doctors.
- 11 (11) Licensed professional clinical counselors.
- 12 (g) Marriage and family therapist corporation.
- (1) Licensed physicians and surgeons.
- 14 (2) Licensed psychologists.
- 15 (3) Licensed clinical social workers.
- 16 (4) Registered nurses.
- 17 (5) Licensed chiropractors.
- 18 (6) Licensed acupuncturists.
- 19 (7) Naturopathic doctors.
- 20 (8) Licensed professional clinical counselors.
- 21 (h) Licensed clinical social worker corporation.
- 22 (1) Licensed physicians and surgeons.
- 23 (2) Licensed psychologists.
- 24 (3) Licensed marriage and family therapists.
- 25 (4) Registered nurses.
- 26 (5) Licensed chiropractors.
- 27 (6) Licensed acupuncturists.
- 28 (7) Naturopathic doctors.
- 29 (8) Licensed professional clinical counselors.
- 30 (i) Physician assistants corporation.
- 31 (1) Licensed physicians and surgeons.
- 32 (2) Registered nurses.
- 33 (3) Licensed acupuncturists.
- 34 (4) Naturopathic doctors.
- 35 (j) Optometric corporation.
- 36 (1) Licensed physicians and surgeons.
- 37 (2) Licensed doctors of podiatric medicine.
- 38 (3) Licensed psychologists.
- 39 (4) Registered nurses.
- 40 (5) Licensed chiropractors.

- 1 (6) Licensed acupuncturists.
- 2 (7) Naturopathic doctors.
- 3 (k) Chiropractic corporation.
- 4 (1) Licensed physicians and surgeons.
- 5 (2) Licensed doctors of podiatric medicine.
- 6 (3) Licensed psychologists.
- 7 (4) Registered nurses.
- 8 (5) Licensed optometrists.
- 9 (6) Licensed marriage and family therapists.
- 10 (7) Licensed clinical social workers.
- 11 (8) Licensed acupuncturists.
- 12 (9) Naturopathic doctors.
- 13 (10) Licensed professional clinical counselors.
- 14 (1) Acupuncture corporation.
- 15 (1) Licensed physicians and surgeons.
- 16 (2) Licensed doctors of podiatric medicine.
- 17 (3) Licensed psychologists.
- 18 (4) Registered nurses.
- 19 (5) Licensed optometrists.
- 20 (6) Licensed marriage and family therapists.
- 21 (7) Licensed clinical social workers.
- 22 (8) Licensed physician assistants.
- 23 (9) Licensed chiropractors.
- 24 (10) Naturopathic doctors.
- 25 (11) Licensed professional clinical counselors.
- 26 (m) Naturopathic doctor corporation.
- 27 (1) Licensed physicians and surgeons.
- 28 (2) Licensed psychologists.
- 29 (3) Registered nurses.
- 30 (4) Licensed physician assistants.
- 31 (5) Licensed chiropractors.
- 32 (6) Licensed acupuncturists.
- 33 (7) Licensed physical therapists.
- 34 (8) Licensed doctors of podiatric medicine.
- 35 (9) Licensed marriage and family therapists.
- 36 (10) Licensed clinical social workers.
- 37 (11) Licensed optometrists.
- 38 (12) Licensed professional clinical counselors.
- 39 (n) Dental corporation.
- 40 (1) Licensed physicians and surgeons.

- 1 (2) Dental assistants.
- 2 (3) Registered dental assistants.
- 3 (4) Registered dental assistants in extended functions.
- 4 (5) Registered dental hygienists.
- 5 (6) Registered dental hygienists in extended functions.
- 6 (7) Registered dental hygienists in alternative practice.
- 7 (o) Professional clinical counselor corporation.
- 8 (1) Licensed physicians and surgeons.
- 9 (2) Licensed psychologists.
- 10 (3) Licensed clinical social workers.
- 11 (4) Licensed marriage and family therapists.
- 12 (5) Registered nurses.
- 13 (6) Licensed chiropractors.
- 14 (7) Licensed acupuncturists.
- 15 (8) Naturopathic doctors.
- 16 (p) Physical therapy corporation.
- 17 (1) Licensed physicians and surgeons.
- 18 (2) Licensed doctors of podiatric medicine.
- 19 (3) Licensed acupuncturists.
- 20 (4) Naturopathic doctors.
- 21 (5) Licensed occupational therapists.
- 22 (6) Licensed speech-language pathologists.
- 23 (7) Licensed audiologists.
- 24 (8) Registered nurses.
- 25 (9) Licensed psychologists.
- 26 (10) Licensed physician assistants.
- SEC. 8. No reimbursement is required by this act pursuant to
- 28 Section 6 of Article XIIIB of the California Constitution because
- 29 the only costs that may be incurred by a local agency or school
- 30 district will be incurred because this act creates a new crime or
- 31 infraction, eliminates a crime or infraction, or changes the penalty
- 32 for a crime or infraction, within the meaning of Section 17556 of
- the Government Code, or changes the definition of a crime within
- 34 the meaning of Section 6 of Article XIIIB of the California
- 35 Constitution.

BOARD OF CHIROPRACTIC EXAMINERS MISSION STATEMENT

The Board of Chiropractic Examiners' paramount responsibility is to protect California consumers from the fraudulent, negligent, or incompetent practice of chiropractic care.

Wisconsin Board of Veterans Alfairs Veteran Lifetime Achievement Award Proclamation

WHEREAS, James C. Allen, MD, was born July 25, 1928 in Janesville, Wisconsin, and served in the U.S. Army Signal Corps from 1952 to 1954 during the Korean War; and

WHEREAS, he was awarded the United Nations Service Medal, the Korean Service Medal, the National Defense Service Medal, the Good Conduct Medal, and a Meritorious Unit Citation; and

WHEREAS, he is a graduate of the Marquette University School of Medicine (Medical College of Wisconsin), engaged in postgraduate work in London, England, Boston, Massachusetts, and Vienna, Austria, and holds a specialty certification in Ophthalmology and is licensed by the Wisconsin Board of Medical Examiners and the National Board of Medical Examiners; and

WHEREAS, he was employed by the Department of Ophthalmology at the University of Wisconsin—Madison from 1967 to 2000, holding the ranks of Assistant and Associate Professor and serving as the Coordinator of Ophthalmology Inpatient Care; and

WHEREAS, in addition to his teaching and research duties during his professional career at the UW, he was an active member of a host of professional societies, served as a professional journal reviewer and editor, was a member of numerous UW Medical School Committees, wrote a profuse number of professional papers, articles, book contributions and reviews, and abstracts, made countless professional talks and presentations, invented an important Ophthalmological medical instrument, and received many honors and awards, including several outstanding teacher awards; and

WHEREAS, he treated veterans at the William S. Middleton Memorial Veterans Hospital in Madison from 1967 to 2000, is currently a Professor Emeritus at the UW-Madison School of Medicine and a Consultant for the William S. Middleton Memorial Veterans Hospital, has served as a consultant to establish Glaucoma Screening Programs at the Federal VA Hospital in Tomah and the Wisconsin Veterans Home at Union Grove, and has participated in numerous glaucoma screening events in southern Wisconsin over the past forty years; and

WHEREAS, based upon his medical diagnostic and research skills, he was the moving force behind Congress' recently passed Dr. James C. Allen Veteran Vision Equity Act, which enables veterans who have a complete loss of sight in one eye due to a service-connected injury to receive increased disability compensation if they begin to lose sight in the other eye, regardless of whether that loss of sight was originally service-connected; and

WHEREAS, he is a member of the American Legion, Veterans of Foreign Wars, Disabled American Veterans, Blinded Veterans Association, and Veterans for Peace.

NOW, THEREFORE, I, Peter J. Moran, Chair of the Wisconsin Board of Veterans Affairs, proclaim **Dr. James C. Allen** as the recipient of the Wisconsin Board of Veterans Affairs Veteran Lifetime Achievement Award on this 20th day of February 2008.

PETER J. MORAN Board Chair