The More Things Change
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The new era of health care continues to develop before our eyes. As the Affordable Care Act hits its implementation and enrollment milestones and health care providers and systems focus on the triple aim, we also need to remember our foundations and what has served us well throughout our history. Over the past year as everyone in health care is adopting the new buzzwords, I’ve been reminded that we have two words that we do not embrace with the passion and commitment that has longed served us as physical therapists. The two defining words for the past ninety plus years of our professional journey have been disability and rehabilitation. We have an opportunity to be leaders, demonstrate impact, and embrace our ability to change individuals and communities through advancing the field of rehabilitation and through focus on the individuals with disabilities that need our services the most.

This summer two policy issues re-focused our attention on our role as leaders in rehabilitation and our responsibility to be advocates for public policies for individuals with disabilities. First, APTA hosted its annual rehabilitation research fly-in. This partnership with the Section on Research places physical therapist researchers in Washington DC to learn more about the federal appropriations process and to lobby for increasing the awareness of the impact of rehabilitation on communities and the need for continued funding. This year we added an APTA-AOTA Congressional briefing with Dr. Pam Duncan and Dr. Elizabeth Skidmore discussing the return on investment on rehabilitation research in improving the lives of individuals with stroke and other neurological impairments. This briefing showed PT and OT at their best making tangible impacts on people’s ability to function in their homes, workplaces and communities. Rehabilitation doesn’t often make the list of current buzzwords in health care of the likes of accountable care organizations, innovation, prevention, or primary care, but rehabilitation is who we are and what we do. It makes an impact we can be proud of and changes the lives of our patients.

Second, Congress is re-considering its vote to ratify the Convention on Rights for Persons with Disabilities (CRPD). The Convention on the Rights of Persons with Disabilities was adopted in 2006 during the sixty-first session of the United Nations (UN) General Assembly by resolution A/RES/61/106. President Barack Obama signed the CRPD in 2009 and the Senate vote to ratify in December 2012 fell 5 votes short of achieving the needed 2/3rd majority of the US Senate. Recently, the Supreme Court’s decision in Bond v. United States has rekindled interest in bringing the treaty back up for ratification. Following the decision the Senate Foreign Relations Committee voted the treaty out of committee setting up another potential floor vote in the Senate. APTA supports ratification of the CRPD and will be engaging in efforts to demonstrate this support prior to the floor consideration. Providing equality for individuals with disabilities is who we are and what we do. APTA supported the Americans with Disabilities Act in the late 1980’s, its passage in 1990, and its 24-year history of implementation. Bringing this level of awareness and protection to the 1 billion individuals with disabilities worldwide, including almost 1 in 7 in the United States is essential for the population and profession.

Promotion of rehabilitation’s role in health care and advocacy for those that benefit from rehabilitation is our defining mission. Whether it is your advocacy on direct access, repeal of the therapy cap, elimination of self-referral or student
Get to Know Your Legislators This August

The August congressional recess begins next week and it is essential that APTA members continue to educate members of Congress about the importance of physical therapy services. APTA strongly encourages members to take advantage of opportunities to meet your legislators during the August recess. Members of Congress will be holding town hall meetings, conducting business out of their district offices, and visiting areas of their district. This year’s recess begins on August 4 and continues until September 5.

Practice Visits
Practice visits can provide a lasting impression demonstrating the power of physical therapy to your legislators first-hand. There is no better way to educate lawmakers about physical therapy than to invite them to visit your work setting. Many legislators do not have a clear idea what physical therapy is and the effect it has on their constituents. Practice visits provide lawmakers with real-life snapshots of the impacts of the Medicare therapy cap, the sustainable growth rate formula, and other policy issues. Practice visits also display the knowledge and experience that makes PTs and PTAs effective patient advocates. APTA has several resources to help you prepare for a practice visit, including our Practice Visit Guide. For more information on practice visits contact Lindsay Still at 1/800-999-2782 ext. 3170, or you can email her at lindsaystill@apta.org.

District Meetings
Connecting with your legislator while in their district is very important. It is much easier to meet face-to-face with your lawmakers during a district recess. Call your district office TODAY to set up a meeting to discuss APTA’s priority legislation over the August recess. Position papers, background information and frequently asked questions can be found on APTA’s Advocacy website. If you do not know the contact information for your legislator’s district office please visit www.house.gov or www.senate.gov, select your Representative or Senator to visit your legislator’s website (the contact information for the district office is usually at the bottom of the front page of each legislator’s website). When you call the district office, ask to speak to the scheduler.

Town Hall Meetings
House and Senate members seek opportunities in August to share with constituents what’s been going on in Washington and hear citizens’ takes on the issues. Thus, lawmakers convene town hall meetings, perhaps several, depending on the size of the district or state. These gatherings are generally small, meaning that a single well-organized group can make a big impression. Just imagine the impact a group of 10 to 20 PTs and PTAs could have at a meeting; informing a House member or senator about health care issues that affect the profession and the patients and clients it serves. For more information on town hall meetings please visit the “Grassroots” tab in the Legislative Action Center or contact Lindsay Still at 1/800-999-2782 ext. 3170, or you can email her at lindsaystill@apta.org.

Fundraisers
Members of Congress will also be holding fundraising events during the August recess. These fundraisers provide APTA members with additional opportunities to develop relationships with lawmakers. If a member of Congress supports physical therapy issues, PT-PAC, APTA’s federal political action committee, can provide financial support for Association members to attend campaign fundraisers. In fact, it is more valuable to APTA to have constituents participate in these events back home than it is to have lobbyists attend fundraisers in Washington. Not only are you a constituent who can vote for the candidate, but PAC contributions go farther at home. For example, it costs at least $1,000 a plate for APTA’s lobbyists to attend most Washington fundraisers, but that same amount might allow five or more APTA members to attend a fundraiser in a given state. For more information on getting involved in PT-PAC activities contact Michael Matlack at 1/800-999-2782 ext. 3163, or you can email him at michaelmatlack@apta.org.
If you are interested in getting involved this summer, but do not know where to start, visit APTA’s Tools for Advocates webpage. We have several resources to help you make the most of your August advocacy activities, including instructional videos, testimonials from your colleagues, and our Grassroots Toolkit. If you do not have time to meet with your legislators this summer but still want to help, download the APTA Action app and send them an email or make a donation to the PT-PAC.

**PT-PAC Launches $20 Campaign: Get More Traction with Your $20 Action**

Since 2007, APTA member participation in PT-PAC has slowly declined, from 11.7% to 7.4% in 2013. If you break that down by PTs, PTAs, and students you find the following:

- 14.4% to 9.8% PTs
- 7.0% to 3.2% PTAs
- 3.5% to 2.2% Students

Deeply concerned by this alarming trend, we surveyed more than 6,000 members about PT-PAC. What we found is that many APTA members would support PT-PAC every year but many members had questions or had misconceptions of how PT-PAC worked. To answer some of these questions, PT-PAC recently published articles in its monthly newsletter to answer the following questions:

- How Does PT-PAC Impact Legislation?
- How Are Contributions Decided for Candidates Running for Congress?
- PT-PAC Survey Results
- Federal PAC law – What Can PT-PAC Do?

We hope that you will join our efforts to impact legislation in Congress by supporting our $20 campaign. If every APTA member donated $20 each year, the physical therapy profession would be the largest health care provider PAC in the country. Think about the possibilities and changes we could make in Congress and for our patients.

**Return on Investment with Rehabilitation Research: Fly-in and Congressional Briefing**

This year, APTA’s Section on Research had another successful Fly-In! 10 PT researchers from across the country kicked off the event by traveling to Washington to meet with more than 30 Representatives and Senate offices to discuss the value of rehabilitation research as it relates to the profession of physical therapy. APTA researchers were tasked with educating Capitol Hill staff on how rehabilitation science makes a positive contribution to the improvement of Americans suffering from disabilities and expressed the importance of the significant role the National Institutes of Health (NIH) plays in this arena.

In addition, PT researchers were also asked to urge their elected representatives to co-sponsor Senate Bill S. 1027, the Rehabilitation Improvement Act of 2013. This bipartisan legislation was introduced by Senators Mark Kirk (R-IL) and Tim Johnson (D-SD) to enhance the stature and visibility of rehabilitation research science at NIH. S. 1027 sends a powerful directive that we can and must improve the quality of life of persons with disabilities and chronic conditions by enhancing medical rehabilitation research at NIH and, by so doing, improving the provision of rehabilitation services and devices.

The Hill visits concluded with a congressional briefing focusing on rehabilitation science and its impact to the economy. Justin Moore, APTA VP, Public Policy, Practice & Professional Affairs led the congressional briefing, which included the distinguished speakers: Congressman Lee Terry (R-02/NE), Co-Chair of the Bipartisan Disability Caucus; APTA speaker Dr. Pam Duncan, Wake Forest School of Medicine; and AOTA Speaker Dr. Beth Skidmore, University of Pittsburgh. The Briefing culminated with a question and answer session which allowed input and questions from congressional
Concussions and Traumatic Brain Injury Heating Up in Congress

Mild traumatic brain injury, including concussions is a growing public health problem that demands immediate attention. APTA has promoted the awareness and education of concussions and mild traumatic brain injury (mTBI) across the lifespan, particularly in the areas of wounded warriors and youth sports. Through work with the Centers for Disease Control and Prevention (CDC), the White House, and through legislative efforts, APTA seeks to gain recognition for this issue and the physical therapists role.

Youth Sports Concussion

On November 19, 2013, Representatives Tim Bishop (D-NY) and George Miller (D-CA) reintroduced the Protecting Student Athletes from Concussions Act (H.R. 3532), legislation that establishes guidelines around prevention, identification, treatment, and management of concussions in school-age children, and acknowledges the role that physical therapists (PTs) have in evaluating and treating these injuries.

The legislation would require states to implement concussion safety and management plans that include return-to-play requirements and academic supports. Additionally, the bill requires that any student who suffers a concussion be immediately removed from any participation in school sports until he or she receives a written release from a health care professional. Physical therapists are explicitly listed as one of the professionals qualified to make these return-to-play decisions. APTA has been working with legislators to introduce a Senate companion bill to this legislation.

Traumatic Brain Injury

The Traumatic Brain Injury Reauthorization Act (H.R. 1098), legislation that APTA has supported for a number of years, passed the United States House of Representatives on June 24th. This legislation will provide funding to the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), and the Health Resources and Services Administration (HRSA) for TBI research and programs supporting individuals with brain injury. APTA’s support of this legislation is part of an overall push to bring attention to physical therapists role in TBI treatment and rehabilitation in general. APTA is also part of the Joining Forces Initiative and it participates in the Congressional Brain Injury Awareness Day every March.

Recently, Senator Hatch (R-UT) introduced a Senate version of the TBI Reauthorization Act (S. 2539). This legislation, of which APTA is supportive, would do many of the same things as H.R. 1098, while requesting additional reports on TBI in Children. On July 23rd, this legislation passed favorably out of the Senate Committee on Health, Education, labor, and Pensions Committee. The next step will be consideration by the full Senate and, hopefully, passage.

Proposed CMS Rule Would Reduce Prosthetics, Orthotics, Other DME Reimbursement

A Centers for Medicare and Medicaid (CMS) proposed rule could reduce reimbursement for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) by more than $7 billion from 2016 through 2020, largely through applying payment rates from the DMEPOS competitive bidding program in noncompetitive bidding areas. APTA has published a detailed "highlights" summary of the rule on the DMEPOS webpage, part of a suite of APTA resources on Medicare payment.

Additional proposed policies that would impact physical therapists (PTs) include:

- In 12 competitive bidding areas (CBAs), CMS would provide payment on a continuous monthly rental basis for certain items (including standard manual wheelchairs, standard power wheelchairs, and hospital beds). This payment would cover the item and ongoing maintenance and servicing, as well as replacement of supplies.
• Where payment is made in a competitive bidding program (CBP) on a capped rental basis, CMS would require contract suppliers for power wheelchairs to retain responsibility for all necessary repairs, maintenance, and servicing of any power wheelchairs they furnish under the CBP.
• CMS would identify PTs as “individuals with specialized training” to provide custom-fitted orthotics.

The public will have until September 2, 2014, to submit comments on the rule, and APTA will submit comments on behalf of its members.

**US Virgin Islands Get Direct Access, Improved PT Practice Act**

Virgin Islanders will now have improved access to physical therapist (PT) services—and a much more effective PT practice act—thanks to a new law signed by Governor John P. de Jongh, Jr, on July 11.

The new law, Act No. 760, allows for direct access to evaluation and treatment by a PT without a physician’s referral, and includes changes to the licensing law that protect the term "physical therapy" as an activity that can only be engaged in by a PT, among other improvements.

Prior to the act’s passage a physician referral was required for all PT services. The new law, which takes effect on October 9, 2014, allows for treatment without a referral for 45 days or 12 treatment visits.

“It’s been a long time coming, but consumers will now have greater access to quality healthcare provided by physical therapists,” said Virgin Islands APTA member Jerry Smith, PT, DPT, ATC. "These changes could not have happened without the work of the physical therapy community here.”

In addition to direct access, Act. No. 7620 also makes significant updates to the physical therapy practice act. Besides the protection of "physical therapy" as a term that can only describe the activities of PTs, the new law provides title protection for "DPT" and "doctor of physical therapy," an updated definition for the practice of physical therapy, an expanded board of physical therapy, and revised qualifications for licensure.

"APTA commends the work of the dedicated physical therapists in the U.S. Virgin Islands who worked for many years to bring about these legislative changes,” said APTA President Paul Rockar, Jr, PT, DPT, MS. “Improved patient access to PT services continues to be a high priority for the profession and APTA.”

Earlier this year both Oklahoma and Michigan enacted direct access legislation. The new Oklahoma law goes into effect on November 1, and the Michigan law on January 1, 2015. All 50 states, DC, and the US. Virgin Islands have now enacted laws allowing for direct access to evaluation and some level of treatment without a physician referral.

**Registration Now Open for the 2014 APTA State Policy and Payment Forum**

Registration is now open for the 2014 APTA State Policy & Payment Forum to be held Saturday, September 13 – Monday, September 15 at the Grand Hyatt in Seattle, WA. This event is designed to increase your involvement in and knowledge of state legislative and payment issues that have an impact on the practice of physical therapy, and to improve your legislative, regulatory and payment advocacy efforts at the state level. Programming will focus on physical therapy payment and legislative issues at the state level and will include presentations on current PT advocacy efforts in the states, physical therapy fair copay legislation, challenges with implementation of health care reform in the states, state licensure issues, emerging PT scope of practice issues, challenges to PTs performing dry needling, a case study on state legislation allowing PTs to ordering imaging, infringement from other providers, and much more! The State Policy & Payment Forum will also have two featured luncheon speakers: Washington State Rep. Laurie Jenkins and Dr. Mark McClellan, Director of Health Care Innovation and Value Initiative at the Brookings Institute. There is event open to only to APTA members. You must register online as there will be no onsite registration in Seattle. For additional information and to register online go to: [www.apta.org/stateforum](http://www.apta.org/stateforum).
Colorado chapter member Dr. Ira Gorman, PT, PhD, MSPH was recently appointed by Colorado Senate President Morgan Carroll to the newly created Colorado Commission on Affordable Health Care. The commission, which was created this year by Colorado Senate Bill 187, is a bipartisan 12-member commission and is tasked with studying the impact of health care reform implementation, including health care costs, quality of care, health plan availability, copayments and deductibles, and the impact of Medicaid expansion. The commission, whose membership was highly sought after by many groups and individuals, will meet for three years with the aim of recommending proposed legislation before July 1, 2017. Dr. Gorman is president of the APTA Health Policy / Administration Section and is a member of the Regis University faculty. He is also a member of the APTA Public Policy & Advocacy Committee. The Colorado Chapter worked hard advocating for Dr. Gorman’s appointment to the Commission.