

ADVOCACY ALERT

(DO NOT SEND THIS DOCUMENT TO CONGRESSPERSON)

For Educational Purposes Only

“Access to Inpatient Rehabilitation Therapy Act of 2015” H.R. 1906 has been introduced!

Congressman Glenn (GT) Thompson (R-PA) and Congressman G.K. Butterfield (D-NC) have introduced the *Access to Inpatient Rehabilitation Therapy Act of 2015* (H.R. 1906).

What is the Purpose of this Act?

It is the purpose of this Act to restore reliance on the professional judgment of the treating physician and the rehabilitation team when determining whether a Medicare patient meets the intensity of therapy requirement of an inpatient rehabilitation hospital or unit. The amendment gives patients enhanced access to the appropriate mix of medically necessary therapeutic rehabilitation services in the IRF setting, including physical therapy, occupational therapy, and, as needed, speech therapy, orthotics and prosthetics, and recreational therapy.

What does this bill do?

This bill will amend the Social Security Act by including recreational therapy among the modalities that constitute an intensive rehabilitation therapy program and can be explicitly counted toward the so-called “three hour rule” in inpatient rehabilitation hospitals and units.

Specifically, the bill adds the following new paragraph to the end of Section 1886(j) of the Social Security Act:

“(9) Including Recreational Therapy among the therapy modalities that constitute an intensive rehabilitation therapy program in a rehabilitation

facility. – The Secretary shall include recreational therapy services among the therapeutic modalities that constitute an intensive rehabilitation program in determining (pursuant to applicable regulations) whether inpatient services in a rehabilitation facility are reasonable and necessary under section 1862(a)(1)(A).”

Why is this important?

By including RT under the intensity of therapy requirement, Medicare beneficiaries in inpatient rehabilitation hospitals and units will regain access to important therapies deemed medically necessary by their treating physicians and therapists. IRFs will be better able to meet the intensity of rehabilitation therapy requirement and thus reduce the risk that patients will be inappropriately diverted into less intensive post-acute settings.

Coalition of Support

Several organizations have joined the American Therapeutic Recreation Association (ATRA) in supporting this amendment including:

American Academy of Physical Medicine and Rehabilitation
American Medical Rehabilitation Providers Association
American Academy of Orthotists and Prosthetists
Brain Injury Association of America
CARF, International (Commission on Accreditation of Rehabilitation Facilities)
Council on Brain Injury
United Spinal Association

What can you do?

1. Read the *Access to Inpatient Rehabilitation Therapy Act of 2015* (H.R. 1906).
2. Read the letter of support from AAPM&R.
3. Contact your Congressperson and ask them to cosponsor H.R. 1906. Please note that you may have to follow-up several times to gain approval from the Congressperson's office to cosponsor this legislation.

Action Requested

Step 1: Contact your U.S. Congressperson's office and find out who handles health care issues for the Congressperson. You can reach your Congressperson's office through the U.S. Capitol Switchboard at (202) 225-3121 or by going through the website:

<http://www.house.gov/representatives/find/>

Step 2: Tell your Congressperson's health staffer about H.R. 1906 and ask him or her to sign your Congressperson on as a co-sponsor in support of H.R. 1906. Ask the health staffer for his or her direct email so you can send them a copy of the H.R. 1906 and the letter of support. (See **Attached Template**) (House staffers' emails are all similar: first name.last name@mail.house.gov.) If they ask who on Capitol Hill is collecting cosponsor names, tell them to contact Matt Brennen (202) 225-5121 in Congressman Thompson's office or Saul Hernandez (202) 225-3101 in Congressman Butterfield's office.

Step 3: Urge your colleagues, clients/patients, volunteers, students, etc. to do the same. We have a short window of opportunity and need as many Congressional cosponsors as possible—we need you and your colleagues to act now! This will take the entire profession's active involvement!

If you have questions about this Advocacy Alert, please contact the ATRA Public Policy Committee Co-Chairs: Thom Skalko at skalkot@ecu.edu, and Richard Williams at williamsri@ecu.edu.