



FAL Briefing Memo

August 2021

Capitol Hill

- On August 9, Sen. Jon Tester (D-MT) and Sen. Roger Wicker introduced S. 2676, bipartisan legislation to add physical therapists to the National Health Service Corps. The senate bill is the companion [to H.R. 3759](#), which was introduced in June by Rep. Diana DeGette (D-CO) and Rep. Kelly Armstrong (R-ND). The legislation would allow PTs to participate in the National Health Service Corps loan repayment program, an initiative that repays up to \$50,000 in outstanding student loans to certain health care professionals who agree to work for at least two years in a designated Health Professional Shortage Area. APTA is a strong supporter of extending student loan forgiveness to PTs — particularly as a way to improve access to physical therapist services in areas already experiencing shortages — and has made passage of loan forgiveness legislation a key objective in our [2021-2022 public policy priorities](#). APTA has also included addressing student debt as a part of its [overall strategic plan](#).
- On August 5, Senators Ben Ray Lujan (D-NM) and John Thune (R-SD) introduced the senate companion to the Prevent Interruptions in Physical Therapy Act (S 2612.), APTA-supported bipartisan legislation that will expand the use of locum tenens by physical therapists under Medicare. Additional original cosponsors included Senators Bob Casey (D-PA), Charles Grassley (R-IA), and Debbie Stabenow (D-MI). [As mentioned previously](#), on March 9, Rep. Gus Bilirakis (R-FL) and Rep. Paul Tolko (D-NY) introduced the house version of Prevent Interruptions in Physical Therapy Act (H.R. 1611). This legislation is aimed at advancing the goal in [APTA's Public Policy Priorities, 2021-2022](#), to expand patient access to care.
- On August 3, APTA, along with the American Occupational Therapy Association, the National Association for the Support of Long-Term Care, and the National Association of Rehabilitation Providers submitted a joint letter to Congress about the PTA payment differential included in the [proposed 2022 Medicare Physician Fee Schedule](#). The [sign-on letter to legislative leaders](#), calls on Congress to intervene to counter the effects of a system that puts patient access to needed care at serious risk. APTA news story can be viewed [HERE](#).
- APTA-endorsed legislation, the *Dr. Lorna Breen Health Care Provider Protection Act*, ([S. 610](#) and [HR 1667](#)) has passed the U.S. Senate. This legislation is aimed at suicide prevention, burnout, and mental and behavioral health conditions among health care professionals. It provides for HHS to award grants to train health care providers on suicide prevention, other behavioral health issues, and strategies to improve well-being; and establish or expand programs to promote mental and behavioral health among health care providers involved with COVID-19 response efforts. HHS must also study and develop policy recommendations on preventing burnout and improving mental and behavioral health among health care providers, removing barriers to accessing care and treatment, and identifying strategies to promote resiliency. More info at: [The Legislation | Dr. Lorna Breen Heroes Foundation \(drlornabreen.org\)](#)

Fee Schedule Advocacy Resource Roundup

- [Send Your Comments to CMS on the proposed fee schedule cut using the APTA Template](#)
- [Send Your Comments to CMS about the PTA differential using the APTA Template](#)
- [Additional resources: APTA Medicare Physician Fee Schedule Advocacy Page](#)
- [Additional resources: APTA PTA Differential Advocacy Page](#)
- [Podcast: An Early Look at the Proposed 2022 Fee Schedule](#)
- [APTA Regulatory Review: Proposed 2022 Medicare Physician Fee Schedule](#)
- [The Squeeze on Physical Therapy](#)
- [The PTA Differential Just Doesn't Add Up — Especially for Patients](#)

Advocacy Videos:

- [APTA Live on PTA Differential](#) (new!)
- [APTA Live on Medicare Fee Schedule](#) (new!)

Federal Agencies

- Falls Prevention: On July 27, APTA submitted comments CMS on an outcome electronic clinical quality measure (cecum) titled Hospital Harm – Falls with Major Injury, as part of the project Measure & Instrument Development and Support (MIDS) Patient Safety Measure Development and Maintenance. APTA argued that the area has the potential for substantial impact, but the measure needs to be based on addressing not only falls but also on risk factors for falls. The prevention of falls needs a multimodal approach by determining fall risk, assessing patient mobility, communicating this risk to all care providers and the patient, addressing the risk, assessing mobility, providing interventions including exercise and balance, and following a daily interdisciplinary mobility program.
- IRFs: On July 29, CMS issued its [final rule](#) for the Inpatient Rehabilitation Facility (IRF) Prospective Payment System for 2022 and Updates to the IRF Quality Reporting Program. CMS finalized a \$130 million, or 1.5% payment increase, as well as some minor changes.
- SNFs: Also on July 29, CMS issued its [2022 final rule](#) for Skilled Nursing Facilities. CMS punted on responding to a jump in payment tied to the Patient Drive Payment Model (PDPM) until at least FY 2023 stating that it would use feedback given in the proposed rule comments to establish a methodology for recalibrating the PDPM parity adjustment in the FY 2023 SNF proposed rule. CMS also increased payment to SNFs by \$410 million, or 1.2%.
- DMEPOS Win: CMS has exempted certain wheelchair accessories (including seating systems) and seat and back cushions of group 3 or higher complex rehabilitation power wheelchairs from fee schedule adjustments based on information from the Durable Medical Equipment, Prosthetics, Orthotics, & Supplies (DMEPOS) Competitive Billing Program (CBP). The rule permanently exempts these components from the CBP, and thus prevents a reduction in access to specialized mobility technology for Medicare beneficiaries with significant, long-term mobility impairments. APTA has advocated on the continued exemption of complex rehabilitation manual and power wheelchairs and related accessories and seating

from the CBP through our work with the [Independence Through Enhancement of Medicare and Medicaid \(ITEM\) Coalition](#).

- Hospital Outpatient: APTA is formulating comments to submit on the proposed 2022 Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs proposed rule. The proposed rule adds price transparency provisions to hospitals — specifically, an increase in civil monetary penalties for certain hospitals that do not comply with the Hospital Transparency final rule that became effective Jan. 1. The proposed rule also seeks comment on health equity and seeks comment on the future adoption of a standardized patient-reported outcome-based performance measure for elective total hip arthroplasty and total knee arthroplasty. See our story on the proposed rule [here](#).