

FEDERAL BILLS OF NOTE:

- **S. 433** sponsored by Senators Collins, Stabenow, Kennedy, Cassidy Paul, Jones, and Shaheen has been introduced in the US Senate. This important legislation will refine payments in the new home health payment system to ensure behavioral-based payment adjustments are based on evidence and observed data, not assumptions of provider behavior. The new Patient Driven Groupings Model (PDGM) that will go into effect on January 1, 2020 is a major change in the payment system for Medicare home health services. One aspect of PDGM that is of concern is that CMS will make home health payment adjustments based on behavioral assumptions as opposed to evidence or actual provider billing data. S. 433 addresses this concern by requiring CMS to implement adjustments to home health reimbursement rates only after behavioral changes by home health agencies (HHAs) that affect Medicare spending actually occur. The bill also provides a phase-in of payment changes, limiting losses (or gains) to two percent per year to limit the risk of disruptions in care and ensure budget neutrality by 2029.
- **HR 840** (*Veterans' Access to Child Care Act*), directs the VA Secretary to provide child care assistance to an eligible veteran who is receiving 'covered health care services.' Rep Gil Cisneros (D-CA) offered an amendment HR 840, the that includes intensive health care services related to physical therapy for a service-connected disability in the definition of "covered health care services. The amendment was accepted and HR 840 was passed by the House. The bill now moves to the Senate for consideration.
- **HR 1041** sponsored by Rep. Adrian Smith (R-NE) would remove the 96-hour physician certification requirement for inpatient critical access hospital services.
- **HR 280** sponsored by Rep. Joyce Beatty (D-OH) would provide for systemic research, treatment, prevention, awareness, and dissemination of information with respect to sports-related and other concussions.
- **S 518** sponsored by Sen. Mara Cantwell (D-WA) would provide for Medicare coverage of certain lymphedema compression treatment items as items of durable medical equipment.
- **Observation Stays legislation:** Hospitals are caring for Medicare beneficiaries on "outpatient observation status" rather than admitting them as an "inpatient" – which is a billing technicality. As a result, many Medicare beneficiaries are saddled with high out-of-pocket costs for stays at skilled nursing facilities because of the classification of their referring hospital stay. As a solution, the Observation Stays Coalition is working with the House and Senate champions to reintroduce the *Improving Access to Medicare Coverage Act*. This bipartisan, bicameral legislation will allow observation stays to be counted toward the three-day mandatory inpatient stay for Medicare coverage of skilled nursing facility services. It is expected that both the House and the Senate will reintroduce this legislation in the coming weeks and has been endorsed by more than 30 organizations.

AROUND THE STATES:

- The Wyoming Legislature passed HB 6, which provides for unrestricted direct access to physical therapy services.
- A Virginia bill adopting the Physical Therapy Licensure Compact is on its way to Gov. Northam, who has until March 25 to sign or veto or the bill becomes law without his signature.

MEMBER ENGAGEMENT

- PT-PAC raised more than \$76,000 during Combined Sections Meeting. The PAC's goal is to raise \$1 million by this year.
- APTA Insider Intel: Wednesday, March 20 (2:00 pm-2:45 pm ET). [Online Registration](#).
- 2019 Federal Advocacy Forum: March 31-April 2, 2019 at the J.W. Marriott.
- The 2019 Regulatory timeline has been posted: <http://www.apta.org/FederalRulemakingTimeline/>