DECEMBER 2021 FEDERAL AFFAIRS LIAISON (FAL) UPDATE

It's no surprise to anyone that 2021 was just as – if not more – challenging of a healthcare year compared to 2020. When it came to advocating for therapy legislation, the task was just as high as ever and with the impact of the pandemic, I would argue even more daunting as we considered the limitations of face-to-face meetings with legislators. Due to the hard work of countless therapists, therapist assistants, and students across the country, we are happy to say that much has been accomplished to advance therapy and care for our patients! The President recently signed legislation into law that provides for a one-year increase of new funding (through December 31, 2022) to the Medicare physician fee schedule to boost the conversion factor by 3.0% which would reduce the fee schedule cut. With the 3% funding boost to the 2022 fee schedule conversion factor by Congress, the cut to the 2022 conversion factor will be reduced from -3.75% to 0.75%. In addition, it would continue the current moratorium on the -2% sequestration until March 31, 2022, and then phase in its return. From April 1, 2022 - June 30, 2022, a -1% sequestration. Medicare sequester payment reduction would return, with the full - 2% sequestration returning on July 1, 2022.

Unfortunately, the legislative package released today does *not* include H.R. 5536, legislation that would delay and mitigate the impending PTA/OTA payment differential. APTA, AOTA, and our coalition partners are currently working to identify alternative legislative vehicles to move H.R. 5536 forward.

The Dr. Lorna Breen Health Care Providers Protection Act (H.R. 1667/S. 610) establishes grants for training health profession students or health care professionals in evidence-informed strategies to reduce and prevent suicide, burnout, mental health conditions, and substance use disorders. It also seeks to identify and disseminate evidence-informed best practices for reducing and preventing suicide and burnout among health care professionals, training health care professionals in appropriate strategies, and promoting their mental and behavioral health and job satisfaction. This will be accomplished by establishing a comprehensive study on health care professional mental and behavioral health and burnout, including the impact of the COVID-19 pandemic on such professionals' health.

Much has been done in the past year to address diversity, equity, & inclusion. The Allied Health Workforce Diversity Act (H.R. 3320/S. 1679) creates a grant program to increase opportunities for individuals from underrepresented and economically disadvantaged backgrounds in the professions of physical therapy, occupational therapy, speech-language pathology, respiratory therapy, and audiology. This legislation passed unanimously out of House Energy & Commerce Committee.

As far as grassroots efforts leading into the new year, APTA is relaunching the Student Advocacy Challenge. In the challenge, programs compete against each other by participating in advocacy activities. It would be great for Indiana therapists to promote to programs in your area. Activities can be submitted on the website and through the APTA Advocacy App.

Also, if you have at any time thought of being a Key Contact, please do not hesitate to reach out to me. I would welcome the opportunity to add you to the ranks of those who fight for our rights as therapists and the rights of our patients. If this is an idea that intrigues you, but you are a little afraid of what it entails, APTA is planning on Key Contact quarterly updates and training on the following dates: Wednesday, January 19 - 8:00 p.m. ET; Wednesday, April 13 - 8:00 p.m. ET; Wednesday, July 13 - 8:00 p.m. ET; Wednesday, October 12 - 8:00 p.m. ET. The updates will include legislative updates, training, guest speakers, and more all via Zoom which will be recorded and distributed.

If you have any questions, please reach out.

Thanks.

Blair Frye, PT, MSPT blairfrye@yahoo.com 317.679.8671