

# Advocacy: What Every Recreational Therapist Should Know and What RTs Can Do

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## Session Description

- Advocacy is an important part of every recreational therapist's job – advocacy for clients, for recreational therapy. However, we often neglect to think about advocacy in the context of legislation and governmental action. We expect that to be someone else's job – to advocate for our clients and profession in the national arena. Learn about federal public policy and the legislative process, and see what is happening at the national level that impacts you.

## **Learning Outcomes**

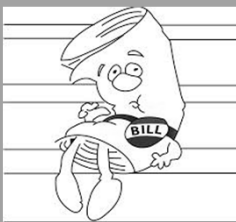
Participants will be able to:

1. Explain the basic processes involved in public policy.
2. Identify 2 issues currently impacting the field of recreational therapy.
3. Define their role and responsibilities in advocating for the field of recreational therapy.

## **Understanding Public Policy**

## Understanding Public Policy

- Public policy is often ignored, seen as boring
- Public policy goal = addressing public problems to ensure public/common good
- Healthcare one of most regulated industries
- Laws directly impact delivery of services



**What do you know about public policy and legislation?**

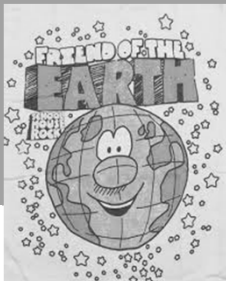
## Public Policy 101 Quiz



- Public policy refers to...
  - Government action taken in response to public problems
- The main reason government gets involved in addressing public problems is to:
  - Ensure that the public good is maintained & protected
- Each state has \_\_\_\_ senators representing its citizens.
- When I hear the word "public policy", I want to: \_\_\_\_\_
- Which age group has the highest voter turnout rates?
- The U.S. election system is called the:
  - Electoral College
- True or False: Everything I need to know about public policy, I learned from School House Rock.



## Public Policy 101



- "Policy" -> course of action
  - Language of government
  - Objective = achieving public good
  - Oriented towards a desired state/goal
  - Based on decision and information available
  - Dynamic on where at in the election cycle
  - Short term focus (2 years)

## Public Policy 101

### The Players

- Citizens... YOU!
- Organizations
- Lobbyists
- Government agencies:  
CMS, Dept. of Education,  
HHS
- Congress people – House  
of Representatives &  
Senate; committees
- President

### General

- Local vs. State vs. Federal  
governments
- HR = bills introduced in the  
House
- S = bills introduced in the  
Senate

2018 Pu  
Policy Yo  
in Review



## Public Policy Atmosphere



## Importance of Understanding Public Policy for RTs

- Informed healthcare provider
- Advocate for consumers
- Shape policy
- Implement appropriate, timely services impacted by legislation



# Legislative Issues

- Health Care – CMS, ACA, HR 626
- Disability Advocacy – HR 620, Medicaid Waivers

## Centers for Medicare and Medicaid Services (CMS)

- CMS = federal agency with budget of \$1 trillion for federal funding of health care



**\$1,000,000,000,000**



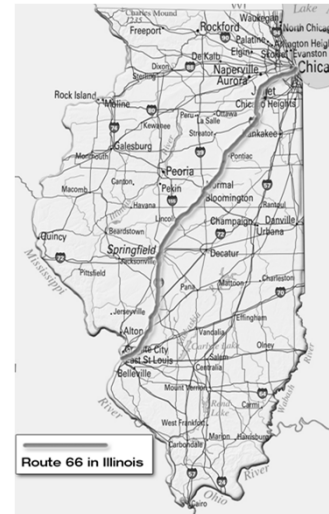
## Impact of CMS on Healthcare

- Private insurers largely take their cues from CMS regulations
- Private insurers outspend the federal government on health care nearly 2-to-1.

**\$1 trillion (feds)**  
**+ \$2 trillion (private)**  
**\$3 trillion**



## What's affecting you in Illinois?



## Health Care Reform and the Affordable Care Act



- Most significant piece of healthcare legislation since Medicare & Medicaid
- Follow up to 1993 attempt by Clinton
- Purpose: increase access to affordable healthcare insurance, thus reducing number of uninsured
  - Expand Medicaid coverage (25 states + DC, 16 alternative, 19 nothing)
  - Increase Children's Health Insurance Program (CHIP or SCHIP)

## Overview of the ACA

- Two components:
  - Patient Protection and Affordable Care Act of 2010 (PL 111-148)
  - Health Care and Education Reconciliation Act of 2010 (PL 111-152)
- Split along party lines
- Multiple revisions and pieces of legislation
- Ad-hoc legislating
- HCERA done as budget reconciliation
- Attempts to overturn
- Individual mandate repealed



## ACA Background

- All Americans must have health insurance
- Minimum essential coverage
- Tax credits to small businesses; tax penalties to larger businesses who do not offer health insurance
- Coverage of pre-existing conditions
- Requirements of mandated coverage and services by insurance companies = essential health benefits (10)

## 10 Essential Health Benefits (EHB)

1. Ambulatory services
2. Emergency services
3. Hospital coverage
4. Pediatric services (including oral & vision)
5. **Prevention & wellness (e.g. chronic disease management)**
6. Laboratory services
7. Maternal & newborn care
8. **Mental health & substance use treatment**
9. **Rehabilitation services**
10. **Habilitation services & devices**

## What does this mean for RT?

1. More access for consumers to needed health care
2. Coverage of pre-existing conditions
3. Coverage of habilitation services
4. Focus on community and home based services and care
5. Coverage of medically necessary equipment
6. Focus on wellness, health promotion and lifestyle education
7. Need for and use of EBP

## **Improve Coverage of RT**

- Currently, coverage of recreational therapy in the inpatient setting is unclear and misunderstood by many.

This problem is especially significant in the following settings:

- Inpatient Rehabilitation Facilities
  - Psychiatric Hospitals
  - Skilled Nursing Facilities (SNFs)
- RT covered in base rate of all Medicare reimbursed settings

## **HR 626 – 15<sup>th</sup> Congress**

### **Access to Inpatient Rehabilitatio n Therapy Act of 2017**

- To amend the Social Security Act to include RT among the therapy modalities that constitute intensive rehabilitation therapy services in an inpatient hospital of unit.

## 3 Hour Rule Intensity of Services Requirement



- What is the 3 Hour Rule?
  - Known officially as the "intensity of services requirement"
  - To qualify for inpatient rehabilitation, patients must be able to benefit from **3 hours of intensive therapy 5 of 7 days per week**

## The Current Problem

- CMS rejected the input from stakeholders and removed the professional judgment of the physician and treatment team to determine which therapeutic services can be used to count toward the 3 Hour Rule
- The ruling also has denied providers and consumers access to qualified modalities in the IRF setting.



## What does HR 626 do?

- Out since January 2017.
- Currently, 2 co-sponsors:
  - Thompson (R-PA)
  - Butterfield (D-NC)
- Imagine the subsequent extension of this bill across settings and funding sources
- Need to contact US Representatives to request that they co-sponsor HR 626
- **HR 626 DIES on December 31, 2018**

## HR 620 ADA Education & Reform Act of 2017



- Purpose: Amend ADA
- Passed House early 2018 (225 – 192 along party lines); to Senate
- Status: in Judiciary Subcommittee on Constitution and Civil Justice; 89 cosponsors
- 2 parts
  - Dept. of Justice to educate property owners & disability community on effective strategies for accessing public accommodations
  - Prohibits filing of civil lawsuits against businesses under ADA without following specific process
    - Written notice to owner
    - Owner has 60 days to reply on making improvements
    - 120 days to remove barriers

## Medicaid Waivers

- 1981 Federal Government created Title 19 Home and Community Based Services Program
  - Made exception to or “waived” the traditional Medicaid requirements
  - Referred to as a waiver
  - Offered alternative to institutional care.
  - Funding sources
    - 2/3 Federal funds and 1/3 State funds
- Person must meet eligibility guidelines for “regular Medicaid”
- Level of care established
  - Developmental disabilities
  - Children with disabilities
  - Older adults

## Licensure

## What is it?

- A legal, non-voluntary process regulated by state government
  - Grants permission to people in a profession to practice
  - Attests that those who are licensed have a minimum level of knowledge and skill
  - State must regulate the practice in some way
- Goal = protect the safety, health and welfare of the public by ensuring certain level of competency
- Joint Task Force on Licensure – NCTRC & ATRA
- Different than CTRS credential

## Three Terms to be Aware of...

- **Registration** -> process to verify possession of a specific credential relevant to performing tasks & responsibilities in a field
- **Certification** -> voluntary process by which NGO grants recognition to individuals who met certain predetermined qualifications/standards
- **Licensure** -> mandatory credentialing process by which a state grants permission for a person in a specific occupation to practice in a state by ensuring that the person has a minimum level of knowledge and skill to protect the public
  - From NCTRC Position Paper on Legal Regulation of the Practice of Recreational Therapy (2006)



## What is Licensure?

- Legally mandated process regulated by state governments
- State says that you cannot practice or call yourself “X professional” without a license



## Certification vs. Licensure

### Certification

- National perspective
- Voluntary (standards)
- Peer review & sanction
- Broad scope & SOP
- Less restrictive
- Protects the public
- Recognized indirectly by funding sources
- Recognized by most regulators

### Licensure

- State perspective
- Legal mandate
- Legal prosecution
- Specific scope & SOP
- More restrictive
- Protects the public
- Recognized by state as pre-condition for fund
- Recognized by all regulators

## Licensure

### More of What is it

- 4 states have licensure
  - New Hampshire
  - North Carolina
  - Oklahoma
  - Utah
- Washington and California have Title Protection Acts
- DC has registration

### The Process

- Use recognized standards
- Collaborate with NCTRC and ATRA
- Establish committee to study legislative process, needs analysis, potential sponsors
- Considerations:
  - Portability
  - Reciprocity
  - Scope of practice
  - Definitions and terminology
- Review previous legislation

## Reasons for Licensure – Why?

- Ensure RT is provided by qualified and competent practitioners
- Protect public from harm
- Demonstrate commitment to the public to be responsible



## Licensure Issues & Challenges

- Can take years
- Need right political environment
- Create legislators who are informed and supportive of profession
- Portability/reciprocity concerns

## A Call to Action

The Power of One Voice



## What every recreational therapist can do... Become an Advocate

### How can I make a difference?

- Not just about you, but about us
- Join a professional organization
- Network
- Define your philosophy
- Identify your issues and concerns
- Articulate your positions
- Make contacts with your legislators
- Gather resources and information about RT, benefits, outcomes
- Gain support of others
- VOTE
- Practice RT, using EBP



## Tips: Communicating with Legislators



### Maximize . . .

- Expertise
- Personal stories
- Passion
- Network
- Leadership
- Credibility

### To do . . .

- Use regular language
- Keep it short
- Distinguish between facts vs. values, analysis vs. advocacy
- Be practical
  - Articulate the issue
  - Translate the solution into a strategy - "this is what it means"
  - Summarize the rationale & impact - "this is why this would help"
  - Mention consequences – "this is what will happen if action is not taken"

# Questions?