

A Chapter of the American Physical Therapy Association

May 12, 2015

Stephen C.F. McDavitt PT, DPT, MS, FAAOMPT President APTA Orthopaedic Section 2920 East Ave S Ste 200 La Crosse, WI 54601

Dear Dr. McDavitt,

This report is an interim update to the Orthopaedic Section regarding our chapter's 2015 legislative efforts. Our grant award was used to fund our annual Legislative Impact Day. We had about 152 attendees for a more narrowly focused day to recruit support for cost-sharing and access to care. Totals for expenditures related to our Legislative Impact Day: \$1,969.49 (\$1,130.56 for refreshments, \$675 for facility rental, \$141.84 for van rental, \$22.09 for supplies and parking), plus another \$19,991.94 to contract with Lobbyist Melissa Johnson.

The first of the two-year biennium has been interesting. Our cost-sharing bill resulted in many negotiations over the past four months. E2SHB-1471 addresses the following key issues, despite the compromise between providers and insurers:

- Requires that a licensed physical therapist or someone from a related profession to be
 the one to review physical therapy services when making decisions about whether the
 services are medically necessary.
- Removes the ability of an insurer to require prior authorization for an evaluation/initial treatment visit.
- Ensures transparency for providers and patients about tiering.
- Removes the ability of insurers to require therapists to discount services that are not covered by the health plan.
- Requires transparency of criteria and standards for prior authorization decisions.

E2SHB 1471 passed the legislature and was delivered to the Governor for signature at the end of April. One provision in the original bill that did not survive in the final bill was a provision that an insurance copay for a rehabilitation treatment visit could be no higher than for a primary care visit. We are committed to bringing the copay provision before the legislature again next year.

Additionally, a bill to prohibit dry needling practice by physical therapists, HB 1042, was introduced by the chair of the House Health Care & Wellness Committee. This bill passed the House on February 9, 2015 by a 71 to 25 vote, but it did not make it out of the Senate Health Care Committee. PTWA testified against HB 1042 before both the House and Senate health care committees and we are relieved that the bill "died" in committee.

With the recommendation from key legislators, PTWA plans to introduce a bill next year to specifically state that dry needling is part of physical therapist scope of practice. We hope to find a bill champion for next session to support our cause. In the meantime we will work with all stakeholders to get to an agreement that defines the education and training requirements for physical therapists performing dry needling.

While the status of physical therapist dry needling in Washington state remains delicate we were charged by the PTWA membership to pursue legislative action in October of 2014.

Again, thank you for the grant to support our legislative efforts in 2015. Happily the impact has enabled the cost-sharing bill to move forward and the bill to prohibit physical therapist performance of dry needling "died" in the Senate's Health Care committee. Please feel free to contact me if you have further questions.

Sincerely,

Robin L. Schoenfeld, PT, DPT, OMT

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PTWA Vice President

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