Coalition Urges Lawmakers To Deal With Therapy Caps Before Exceptions Process Ends

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The Therapy Cap Coalition, which includes beneficiary advocates and providers, is pushing lawmakers to, at the least, include a short-term extension of the therapy caps exception process in an upcoming continuing resolution -- though the stakeholders hope the bipartisan, bicameral repeal of the therapy caps worked out earlier this fall will still be enacted.

The current therapy cap exceptions process expires at the end of the year, and most following the issue had expected the so-called extenders -- including a provision on therapy caps -- to move alongside funding for the Children's Health Insurance Program. However, the House recently released a short-term continuing resolution to fund the government through Jan. 19 that includes CHIP funding and only the extenders passed by the House Energy & Commerce Committee. Those extenders included in the House Ways & Means' extender package outline were not included in that House continuing resolution.

"Access to critical rehabilitation services for Medicare beneficiaries suffering from stroke and other health conditions is at stake if the House and Senate fail to act before the end of the year," the groups say in a Dec. 15 letter to the House and Senate leadership of both parties. They note that lawmakers have come up with a policy to end the caps, after years of repeatedly passing exceptions processes to the caps, and that policy "is a substantial achievement after years of toiling on this issue."

The House Ways & Means and Energy & Commerce committees, as well as the Senate Finance Committee, unveiled a bipartisan framework to repeal Medicare therapy caps in October. Stakeholders at the time said the policy was based on the targeted manual medical review process that appears to be working smoothly.

The policy would repeal the Part B outpatient therapy caps, which are currently set at $1,980 for speech and physical therapy and $1,980 for occupational therapy. The policy, which was included in the House Ways & Means extender package outline and the Senate Finance Committee's draft extender package, would repeal the caps starting in 2018. However, it would still require what House lawmakers call an "appropriate modifier" on medically necessary claims over the current exceptions threshold. It would also continue targeted manual medical reviews for claims over $3,000. Targeted manual medical reviews currently kick in at $3,700 for physical and speech therapy and $3,700 in occupational therapy.

Cynthia Morton, executive vice president at the National Association for the Support of Long Term Care -- one of the groups that signed the coalition's letter -- said NASL is hopeful the policy will be included in some end-of-the-year package by Friday, but the group hasn't heard whether that will be the case, so stakeholders are nervous.

"The health and quality of life of millions of Americans is at stake if Congress does not take immediate action to stop the therapy cap from becoming reality starting January 1," said American Speech-Language-Hearing Association President Gail Richard in a statement. "For 20 years, Congress has taken temporary measures to prevent this dangerous policy from being enacted, but we are now at a critical juncture -- with patients at serious risk."

The Dec. 15 letter asks that lawmakers, at a minimum, include language in the upcoming continuing resolution to make sure that a short-term gap in coverage doesn't occur until a permanent solution can be put in place. --

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