



American Hospital
Association®

ACTIONALERT

Tuesday, January 27, 2015

NEED ACTION FROM	<i>Rural hospital leaders</i>
ACTION.	<i>Contact your senators to co-sponsor S. 257</i>
WHEN.	<i>Immediately</i>
WHY	<i>Establishes a default standard of general supervision for outpatient therapeutic services among other priorities</i>

Senate Introduces Bill to Protect Access to Rural Therapy Services S. 257

Sens. Jerry Moran (R-KS), Jon Tester (D-MT) and John Thune (R-SD) today introduced the Protecting Access to Rural Therapy Services (PARTS) Act (S.257) which would protect access to outpatient therapeutic services, such as application of a cast or splint to a finger, simple wound debridement, and cardiac and pulmonary rehabilitation services. Specifically, this AHA-supported bill, S.257, would:

- Adopt a default standard of “general supervision” (rather than “direct supervision”) by a physician or non-physician practitioner (NPP) for outpatient therapeutic services;
- Create an exemption process using a provider advisory panel to identify those outpatient services risky and complex enough to require direct supervision;
- Ensure that for critical access hospitals (CAHs), the definition of “direct supervision” is consistent with the CAH conditions of participation that allow a physician or NPP to present within 30 minutes of being called; and
- Holds hospitals and CAHs harmless from civil or criminal action regarding the Centers for Medicare & Medicaid Services’ retroactive reinterpretation of “direct supervision” requirements for the period 2001 through 2015.

The AHA will work with rural hospitals to garner support for S. 257. Contact your senators and urge them to support S. 257, and educate your representative about the supervision policy using the [AHA Factsheet](#).

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