

# Rehab Net News Update

R E H A B I L I T A T I O N N E T W O R K O F A R K A N S A S

## BECKY'S SCHEDULE

Jan. 1	Holiday
Jan. 14	Rehab Net Board Mtg
Jan. 16	ArPTA Planning Mtg
Jan. 18	Holiday
Jan. 19	CMSA Mtg

## Important Numbers

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## A Small Reprieve but No Final Solution on the Physician Fee Schedule

On Dec. 19, 2009, President Obama signed HR 3326, the Department of Defense Appropriations Act of 2010 which temporarily delays the 20.5% reduction in the Physician Fee Schedule until February 28, 2010 giving the Congress a little more time to possibly pass one of the other bills out there. The bill reads as follows:

### '(10) UPDATE FOR PORTION OF 2010-

'(A) IN GENERAL- Subject to paragraphs (7)(B), (8)(B), and (9)(B), in lieu of the update to the single conversion factor established in paragraph (1)(C) that would otherwise apply for 2010 for the period beginning on January 1, 2010, and ending on February 28, 2010, the update to the single conversion factor shall be 0 percent for 2010.

'(B) NO EFFECT ON COMPUTATION OF CONVERSION FACTOR FOR REMAINING PORTION OF 2010 AND SUBSEQUENT YEARS- The conversion factor under this subsection shall be computed under paragraph (1)(A) for the period beginning on March 1, 2010, and ending on December 31, 2010, and for 2011 and subsequent years as if subparagraph (A) had never applied.'

Unfortunately, the bill does not include an extension of the therapy cap exceptions process. The Patient Protection and Affordable Care Act (HR 3590) and the American's Affordable Health Choices Act (HR 3962), the US Senate's and the US House of Representatives' health care reform proposals, both contain provisions to extend the caps exceptions process.

The Centers for Medicare and Medicaid Services (CMS) is working with Congress, health care providers, and the beneficiary community to avoid disruption in the delivery of health care services and payment of claims for physicians, non-physician practitioners, and other providers of services paid under the Medicare physician fee schedule, beginning January 1, 2010. In this regard, CMS has instructed contractors to hold claims for services paid under the Medicare Physician Fee Schedule (MPFS) for the first 10 business days of January (January 1 through January 15) for 2010 dates of service. This should have minimum impact on provider cash flow because, by law, clean electronic claims are not paid any sooner than 14 calendar days (29 days for paper claims) after the date of receipt. Meanwhile, all claims for services delivered on or before December 31, 2009 will be processed and paid under normal procedures.

The holding of claims allows Medicare contractors time to receive the new updated payment files and perform necessary testing before paying claims at the new rates.



## CLINICS IN THE SPOTLIGHT

The spotlight will be back in 2010

### Rehab Net's First Owners Retreat

Rehab Net is planning their very first Owner's Retreat in combination with the Board Retreat planned on Feb. 5-6, 2010 at Winrock Conference Center on Mt. Petit Jean. Registration for the Retreat includes dinner on Feb. 5th, sleeping accommodations for Feb. 5th, Breakfast and Lunch on Feb. 6th, plus refreshments throughout the day.

The cost to attend will be \$160 for an owner or to bring your spouse the cost is \$215. Spouses can enjoy the view, hiking, biking, or working out in the state of the art gym at Winrock while the owners are meeting or can come participate in the discussions.

Friday night we will be meeting as a group prior to dinner and social time. The Board will discuss some of their plans for the year and hear feedback from the owners.

Saturday morning will start with breakfast and then roundtable discussion groups will be set up based on your topics of interest. Please indicate areas of interest on your registration form.

It has long been a tradition to create a shirt for our retreat attendees and this year will be no different so please indicate shirt sizes on your registration form as well. Registration forms should be mailed out with your December statements. I know that paying out extra money in December is hard but go ahead and register and you can pay the registration fee in February, but we must have a final count for Winrock at least two weeks prior to the retreat so please register by January 15, 2010.

Hope we see you all at Winrock!

### Physical Therapist Ranks 7th in Top 50 Best Jobs

Physical therapists ranked 7th in a list of 50 "[Best Jobs in America](#)" featured in the November issue of CNNMoney.com. The profile features an interview with APTA member **Jennifer Gamboa, PT, DPT, OCS**, and examines education requirements, job satisfaction, and salary estimates. APTA is also cited for explanation for the growing demand for the profession.

**What they do:** Restore strength, flexibility, and range of motion to people who have been sidelined by injury, illness, or disease.

**Why it's great:** Unlike many health-care professionals, physical therapists generally see great progress in their patients. "I don't just treat the symptoms--I give people the tools to get better," says Jennifer Gamboa, an orthopedic physical therapist in Arlington, Va. Plus, there's no overnight or shift work.

Medical advances that allow a growing number of people with injuries and disabilities to survive are spurring demand, says Marc Goldstein, senior director of research at the American Physical Therapists Association. And hey, baby boomers' knees aren't getting any younger: An aging population means more chronic conditions that need physical therapy treatment.

**Drawbacks:** The impact of health reform on the profession is a wild card. Can be physically demanding.

**Pre-reqs:** A master's degree, plus certification and state licensing. Many employers prefer a doctor of physical therapy degree.

#### Physical Therapist Stats

10 year job growth      27% from 2006-216

Total Current Jobs      181,000

#### Quality of Life Ratings

Personal Satisfaction      A

Job Security      B

Future Growth      A

Benefit to Society      A

Low Stress      C

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**Letter From the Editor**

I just want to remind you all dues went up to \$165 a month this month.

This year is starting out very busy and if all the meetings aren't enough to keep me busy, I have been summoned for Jury Duty. I feel so special.

I will start up doing more clinic visits and file reviews shortly but due to my jury duty plans may change at a minutes notice.

I am excited that this year thanks to the ArPTA I will be able to attend the Combined Sections Meeting in San Diego and go out to the APTA offices in April to learn more about their different departments. I look forward to being able to help you better with national issues and communications with the APTA.

I hope the New Year brings you all great things and I hope the Legislators solve our Medicare woes quickly.

Becky A. Sewell  
Executive Director

**Terry Malone, PT, MSPT, EdD, ATC, FAPTA  
Returns to Arkansas  
Feb. 27, 2010**

Back by popular demand is Dr. Terry Malone. This Spring he will be presenting his Knee Rehabilitation Course for Rehabilitation Network of Arkansas

Location:  
Hilton Garden Inn  
805 Amity Road  
Conway, AR

**Office Manager's Network**

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We have secured a room rate of \$89 if you wish to drive up the night before. We have once again opened this meeting up to non-members for a price so tell your friends about the course. If you have not already received a brochure on the course, you should be receiving it shortly.

Rehab Net will have a lunch meeting along with the course.

## PRACTICE POINTERS: Is a Mentoring Program Worth Your Time? See What the Experts Say

### *Arm your therapists with the right tools from the start.*

(reprinted from Eli Rehab Report, 2009, Vol. 16, No. 12)

Tired of a high therapist turnover or frustrated, unproductive new hires? A mentoring program for new recruits may have crossed your mind. But is it just feel-good fluff that takes up more time? The experts don't think so.

"Mentoring is absolutely necessary for a new graduate entering the work force," says **Ron Barbato, PT**, administrative director of rehabilitation services for Ephriam McDowell Health in Danville, Ky. "There really is no substitute for experience when it comes to navigating the dynamics of providing therapy in the challenging healthcare environment."

"When a therapist graduates, he is expected to be an expert; however, expertise requires knowledge and experience," points out **Steve Passmore, PT, MS**, president of Healthy Recruiting Tools in Murray, Ky. "The graduate should not be 'coddled' and led along," but having someone to "quietly watch over his shoulder" or to "discuss difficult patients with" is very beneficial, he says.

Mentoring programs are a "good thing," says **Pauline Franko, PT, MCSP**, president of

Encompass Consulting and Education in Tamarac, Fla. **Extra perk:** You may find that giving veteran therapists the opportunity to be mentors boosts their morale, too

### **Select Your Mentors With Care**

Mentoring programs are a great concept, agrees **Lynn Steffes, PT**, president of Steffes & Associates in New Berlin, Wis., "but many practices try to implement it without real insight into what it means or how to maintain it ... that is an area we should explore more." "Seek out the seasoned veterans and those that have proven themselves as leaders, educators, and are themselves confident in their ability and specialty," Barbato advises.

**Tip:** "I strongly believe that the position of mentor should be a voluntary position," Barbato adds. "Mentoring takes time, effort, and energy, and the individual must understand that to give the individual a good mentoring experience."

"Rehab companies I was associated with had rehab consultants to work with all the therapists on clinical choices," Passmore recalls. "We chose therapists with a passion for their profession and years of experience to be clinical consultants."

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### Therapy Cap and Exceptions Process Still Not Resolved

CMS continues to work with Congress on significant legislation which affects the Medicare program. We believe some or all of these provisions may be extended as part of this legislation. We encourage you to monitor activity on the Hill and stay apprised of the status of potential legislation. In the meantime, if such legislation is enacted, Medicare will notify its contractors to again process claims consistent with the extended provisions.

Claims for services furnished on or before December 31, 2009, will be processed under normal conditions.

For services provided on or after January 1, 2010, health care providers may choose, to the extent possible, to hold their claims (that is, not submit their claims to Medicare) until it becomes clearer as to whether new legislation will be enacted to extend these provisions. If legislation is enacted, claims submission for affected services may resume. Otherwise, claims submitted with dates of service on or after January 1, 2010, will not be paid in accordance with expiring provisions because there would no longer be any statutory basis for such payment.

CMS is committed to maintaining open lines of communication with all affected providers and stakeholders on this issue. Finally, be on the alert for more information about this and other legislative provisions which may affect you.

Rehab Net will do its best to keep you informed of all new developments. We also encourage you to pass on any information you find regarding this matter.

**Rehab Net and the American Physical Therapy Association is disappointed in Congress's failure to pass legislation ensuring care for our seniors, but we continue to hope they pass something soon.**

