



American Physical Therapy Association
New Hampshire Chapter

NEWSLETTER

February 2009

In This Issue...

- The President's Column
Page 1
- Board Member List
Page 2
- Chief Delegate Report
Page 2
- Evening Lecture Series
Page 3
- Legislation Update
Page 3

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The President's Column: Guest Editorial

Marc M. Lacroix, PT, MBA, NHA
February 2009

I am often asked why I am a member of APTA and why I devote the time I do in serving the organization. The answer is simple, I believe in the work we do as physical therapists and physical therapists assistants. I love to see patients leave an institution and return home, return to work or just be able to move pain free.

Unknown to many therapists are the efforts needed to hold at bay the threats to being able to practice as our patients deserve. These are in the form of payment policies from insurance companies and legislative efforts by others. An example of a payment threat is the Medicare cap. Although there is currently an exception process, if the hard cap returns, the sickest and frailest of patients we see would be in danger of not receiving all the services we can provide to help them. An example of a legislative threat came this year when chiropractors submitted a bill which would in effect prevent physical therapists from performing a grade 5 mobilization or manipulation.

It is only through the collective efforts of an organization these threats can be avoided. It takes the efforts of local individuals working with the national organization so they can share experiences of other states and their vast resources of knowledge.

Another reason I am a member of APTA is the vast resources of the <http://www.apta.org> website. A few years ago, I began a job in a new practice environment. Although I had been a manager for many years, there were many rules, regulations, best practices to which I was unfamiliar. I was able to find the standards and policies of the national organization and use their interpretation of rules and regulations to insure that our clinics were in compliance. When I had a question, I was able to email or call the appropriate person at APTA and obtain the information that I needed.

There is now an online directory of the staffers at national APTA http://www.apta.org/AM/Template.cfm?Section=General_Info_and_Updates_1&Template=/aptaapps/miscStuff/roster/deptstaffList.cfm to help you navigate to the correct person to ask your question. When I email a question,

President's Message, contin. page 4

Spread the Word:

Upcoming Continuing Education

- April 16 *Safety First: Implications for Older Adults with Low Vision*
 - May 7 *Operating Room of the Future*
 - June 4 *Designing a Sports Rehabilitation Program 101*
- Check out NHAPTA.org for more information

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Chief Delegate Report

Marc M. Lacroix, PT, MBA, NHA

March 2009

At Combined Section Meeting each February, there is a meeting of the chief delegates where components gather to share their thoughts on what to bring up for motions at the June House of Delegates. There undoubtedly will be more added and also a few of these ideas may never make it on the house floor as motions but here is a summary of some of the more notable ideas.

I have written about a motion where APTA would set up a monthly dues automatic deduction from your account to maintain membership. This has caused several logistical issues at APTA. Part of the issues are with needed technology, part of the issues are with member benefits and the logistics (could I join for one month to receive a member discount for a course and than cancel the next month). Arkansas is thinking of placing a motion on the floor to rescind the mandate APTA develop such a program.

The Arizona contingent is proposing having all publications be electronic only by 2015. It is unclear if this would include section publications as well as APTA publications. They also want to have APTA offer clinical instructor certification courses free of charge or charge only for the expenses.

The board of directors has been working on a new code of ethics. Once they approve, it needs to go to the House of Delegates for approval. I have not

Chief Delegate, contin. page 4

ELECTRONIC NEWSLETTER

New Hampshire Chapter APTA

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SCHEDULE

February: Legislative Bulletin / Calendar of Events

August: Reports; Caucus; National House of

Delegates; Legislative

December: Election Results; Annual Meeting

Evening Lecture Series

Judy Thackaberry PT, MPT, GCS

A lecture on Hip Arthroplasty has been added to our Evening Lecture Series: What? A total hip arthroplasty without precautions? Yes, the future is now.

Dr. Jeffrey Wiley of Concord Orthopedics is currently performing an anterior approach to total hip arthroplasty and would like to pass on his perspective of this procedure to NH therapists. The NHAPTA Continuing Education Committee has added an extra Evening Lecture for the 2009 series for this topic.

The lecture will take place on Thursday evening May 21, 2009 from 7:00 - 9:00 p.m. It will be at Concord Hospital in Conference Room A. The cost is \$25 for APTA members, \$42 for non-members (\$5 extra at the door). There will be a registration form (coming soon!) available at nhapta.org.

Please share this exciting new with your peers. We hope to see many of you at the lecture as we continue to learn and be the best we can be for our patients.



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Legislation Update

Marc M. Lacroix, PT, MBA, NHA

March 2009

2009 has been a busy year in the New Hampshire Legislature for physical therapy. As the economy has become more difficult it seems as if many professions are looking to increase their opportunity for increased revenue. Some of these professions look to infringe upon physical therapy and the reputation we have and look to try to get a piece of our pie or to take some of the pie away.

I often hear of therapists and assistants who do not join NHAPTA stating the dues are high and the benefits they receive do not match the dues. The positive outcomes achieved on the below described issues would not have been possible without the resources and expertise of our national organization and our local New Hampshire lobbyist. For the profession to advance itself and not fall behind, we need to resources of APTA. Please post this article where ever you work and ask your coworkers to read about some of the efforts being made in New Hampshire on behalf of all physical therapists and physical therapists assistants.

For the past 2 years we have been working with the veterinarians on a concept to qualify those who would practice "animal physical therapy". The issue from the physical therapy view is some animal clinics were advertising they performed animal physical therapy. The actual treatment was being provided by non physical therapist. The clinics were utilizing physical therapy as a generic term. We believe physical therapy is a protected term and those who practice have a unique skill set. The veterinarians on the other side believe animal physical therapy is very different the human physical therapy and physical therapists who hold themselves out to be an animal physical therapist should have additional training. The two years of meetings allowed us to come to agreement where animal physical therapy can only be practiced by physical therapists (or assistants under the supervision of a physical therapists) and the vets would set some standards as to the minimal amount of education in animal physical therapy a PT requires to call themselves an animal physical therapist. This bill has now passed in the NH House and is heading for the senate.

Legislation Update, contin. page 5

President's Message, Continued from page 1

it is rare not to receive an answer within 48 hours.

Locally in New Hampshire, we continually look for ways to serve the profession. In the past year, we have stepped up our state government affairs activity and have built a grass roots network of rehab administrators and private practitioners and their staff. We have renewed alliances with AOTA and ASHA and strengthened our relationship with the NH Hospital Association.

We have updated our web site www.nhapta.org (hopefully it is live as you read this) to make it user friendly, contain more information, current information and have added a members only section. We have updated our list serve so we now reach 85% of you via email in real time with our updates from CMS and other news you may find helpful. We continue to sponsor a wellness workout during PT month to fund a scholarship program for therapy and assistant students. We meet with students during the school year and talk about the resources of APTA and how we can help them.

If you have any thoughts on how we can support you better, please feel free to contact me or our office.

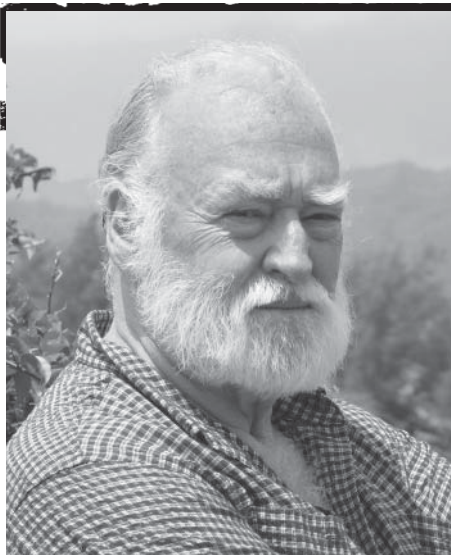
Chief Delegate, Continued from page 2

seen the draft of the code of ethics and as I write this, the March board of directors meeting is being held this weekend so more information may be available as you read this.

Massachusetts believes it is time to develop a model of advanced clinical practice to prepare a therapists to order diagnostic tests, prescribe some medications and so on.

Pennsylvania wants APTA to look at and propose some type of gap education for foreign trained PT's. Since the DPT is quickly becoming the standard (92% of all programs will be there in 2011), and very few foreign programs are at the DPT level, how can we help those PT's to practice in the states.

Please be sure to attend a caucus near you for more current information about the house of delegates.



John F. Barnes, PT, LMT, NCTMB

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Legislation, Continued from page 3

The athletic trainers beginning a national initiative which was successful in Vermont last year proposed a bill mandating athletic trainers be reimbursed if performing a service which would be reimbursed if another profession performed it. This appears clearly aimed at allowing athletic trainers to get reimbursed when working in a doctors office or sports clinic. The issues NHAPTA have to do with mandates and how this becomes operationalized by insurance companies. In Vermont, the insurance companies have now included AT's in the same category as PT's and OT's so if there is a dollar cap limit or a visit limit in their policy, a visit and payment to an AT could toward the therapy benefit. We also do not believe this is the time for any profession to be mandated. In New Hampshire only one other profession (midwives) is mandated reimbursement, all the others are optional. Physical therapists have proven their worth for the care we provide and are reimbursed based on the results we obtain and the demand from the consumer. We believe AT's should go the same route. The vote in the Senate is expected to be held March 11. We expect

this bill to pass and as I write this are considering our strategy for when this bill goes to the House. In the meantime, we look forward to contacting the athletic trainers in an attempt to reach a compromise position with them.

The last bill NHAPTA has spent time with this year involved a bill the chiropractors placed forward. This bill would allow the chiropractic board to place educational hours as a criteria for competence on performing manipulation for any profession in the state of NH. There were statements from the chiropractors who testified of safety concerns, PT's not being properly trained and potential harm. NHAPTA discussed our educational standards, our safety record, our research on the subject and the legal aspect of one profession owning a treatment modality. No one should own manipulation such as no one owns therapeutic exercise or electrical stimulation. The subcommittee which voted last week overwhelmingly agreed with NHAPTA and voted 5-0 to defeat this bill.