

AARC Capitol Hill Day

April 1, 2014

Washington, DC

AARC Capitol Day on the Hill took place on April 1. The sun was shining, a little rainy but nice.

I started out my day with a surprise!! At my 10:00 AM appointment at Senator Thune's office with his health staffer, Jane Lucas, (which I had met with the last 2 years), I would have Miriam with me from the AARC office because Senator Thune is a member of the Senate Finance committee, she was late. Miriam told me to go ahead if she were late. As I discussed HR 2619 with Jane, Senator Thune came in and sat down and listened intently to my plea to help these COPD patients get the respiratory medical care that is needed to keep these patients out of the hospital and stop wasting Medicare \$\$\$\$\$\$\$\$\$\$. I discussed at length how the RT could help, such as education with MDI's to make sure they are taking it correctly. I shared the story of the Rehab patient that was annoyed by the RT that wanted to review how to take a handihaler DPI. As the RT went through the administration quickly, the patient said, "Wait, did you say pinch in on button to puncture the caplet? I have never done that!" So the RT continued and learned that the patient had this medication for over a year but was NOT getting any of the medication! After she took the medication for 2 weeks, she could actually say how much help the med was giving her. This is just one of the many stories that we hear all the time. I explained how there are so many different kinds of inhaled meds available. Just think if even 30-50% of these patients were able to take their meds as ordered by the physician. We would not have as many readmissions, therefore saving Medicare money. Senator Thune responded, "yes, it makes sense but we have to be able to show the offset with \$\$\$\$\$\$ coming in to make the difference in cost." We discussed the offsets such as, even if only 1/2 of 1% of patients were kept from being readmitted, then this would take care of the cost easily. This is my 5th year at PACT and I had never gotten to actually speak with the Senator regarding our bill. Miriam was happy to hear my spiel!

My second appointment scheduled with Representative Kristi Noem's health staffer, Peter Eckrich. I had met with Peter last year, he is the guy that had not been taking his inhaler correctly. Peter told he always takes it correctly now. Talking with Peter, we discussed the 94,129 people effected by lung disease in SD. Lung disease is prevalent in 11% of population in SD. COPD readmissions are among the most costly. We, the respiratory therapists, would teach pulmonary patient self-management in regards to using home oxygen as ordered, take medications as ordered, disease management, and correctly use their inhalers. The doctors would decide who is appropriate for this service. Not all patients are capable of self-managing their disease. I asked Peter to take this information to the congresswoman and strongly encourage her support to help these Medicare beneficiaries.

My last appointment was at Senator Tim Johnson's office with Ashley Raspor, Legislative Assistant, and Corinne Pickus, the Research Assistant. I have not ever seen, met, or talked to the Senator. I discussed HR 2619 with the staffers and answered their questions regarding the cost or offset. The projected costs are \$500 million. It is thought that about 70% of Medicare patients would qualify for self-management, then the estimated cost to Medicare for HR2619 would be \$245 million over 10 years or approximately \$25 million annually. If we could keep 1/2 of 1% of the COPD patients from being readmitted, that alone would totally offset the cost. Ashley agreed to take the information to Senator Johnson and ask for his support or to co-sponsor the bill.

Thank you very much for allowing me this opportunity to represent the SDSRC in Washington.

Respectfully submitted by Carleen Waltner, RRT