

## The Cystic Fibrosis Institute™

Dear Congressional Leaders,

On behalf of the Cystic Fibrosis Institute and the individuals and families we serve, we would like to convey our support for the passage of the Medicare Respiratory Therapy Initiative Act.

Cystic Fibrosis (CF) is a genetic, life-shortening disease that affects the lungs and digestive tract of upwards of 30,000 children, adolescents, and adults in the United States. Those with CF have a defective gene which leads to abnormally thick and sticky mucous. In the lungs, this mucous leads to a vicious cycle of chronic lung infection and inflammation that leads to lung destruction and eventually lung death.

Respiratory therapists are healthcare professionals who work under the direction of a physician to develop treatment plans and assess options for patients with respiratory problems. In CF, respiratory therapists are crucial member of the healthcare team; they perform airway care, delivery important breathing medications, perform diagnostic procedures and conduct pulmonary rehabilitation.

Current law limits the areas in which a respiratory therapist can work because the physician has to provide *direct* supervision as the respiratory therapist furnishes a service that the physician would otherwise perform. Direct supervision means the physician has to be present in the office suite. The Medicaid Respiratory Therapy Initiative Act revises Medicare Part B coverage to permit respiratory therapists to work under the *general* supervision of the physician and to recognize respiratory therapists who work outside of the hospital. In other words, under this act, the physician would not be required to be in the office, although he or she would have to be available by phone should consultation be needed.

Although other medical and health care services are currently addressed as such in the law (i.e. nurse practitioners, physician assistants, certified nurse specialists), there is no specific language that recognizes the respiratory care profession. This legislation will expand patient access to this important member of the healthcare team, and will also provide for equality for respiratory therapists with regards to their other professional colleagues.

There has been significant change in the delivery of health care services since the Medicare statue was first enacted. Services that could once only be provided in an acute hospital setting are now being delivery in alternate care sites. This is especially true for pulmonary medicine; many respiratory therapy services that are now being furnished in the physician office setting were once only available in hospitals. Studies have shown the benefit of respiratory therapists in helping to reduced hospital admissions and improving the quality of life for those with pulmonary diseases.

The Cystic Fibrosis Institute strongly supports the Medicare Respiratory Therapy Initiative Act and encourages Congress to pass this important piece of legislation.

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