

Dear Congressional Leaders,

On behalf of the Cystic Fibrosis Foundation, we would like to convey our support for the passage of the Medicare Respiratory Therapy Initiative Act.

Cystic fibrosis (CF) is an inherited, life-threatening disease that affects the lungs and digestive systems of about 30,000 children and adults in the United States. Those with cystic fibrosis have a defective gene that causes the body to produce unusually thick, sticky mucus. This mucus clogs the lungs and leads to life-threatening lung infections.

Respiratory therapists perform a crucial task in the treatment of cystic fibrosis, working under the direction of a physician to develop treatment plans and assess options for the patient. They perform airway care, deliver medication, perform diagnostic procedures such as pulmonary function studies, and conduct pulmonary rehabilitation, all critical components of care for those with CF.

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. Current law limits the areas in which a respiratory therapist can work because the physician has to provide *direct* supervision when the respiratory therapist furnishes a service the physician would otherwise personally perform. Direct supervision means the physician has to be present in the office suite. Under the Medicare Respiratory Therapy Initiative Act, the physician would not be required to be in the office, although he or she would have to be available by phone for consultation if needed.

Although other medical and health care services are currently addressed as such in the law, such as nurse practitioners, physician assistants, and certified nurse specialists, there is no specific benefit that recognizes the respiratory care profession. Not only would this legislation expand patient access to respiratory therapists, it would also provide parity for respiratory therapists in regards to their other professional colleagues.

There has been significant change in the delivery of health care services since the Medicare statute was first enacted. Services that once could only be provided in an acute hospital setting are now being delivered in alternate care sites. This is especially true for pulmonary medicine and respiratory therapy services that are being furnished in the physician office setting today. Studies have shown the efficacy of respiratory therapists in helping to reduce hospital admissions and improving the quality of life for those suffering from pulmonary diseases.

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

Sincerely,

Robert J. Beall, Ph.D.

Robert & Dale

President and Chief Executive Officer

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Vice President, Government Affairs