

## Fall 2008

The best news EVER for Cardiac & Pulmonary Rehabilitation! On July 15, 2008 Congress passed H.R. 6331: the Medicare Improvements for Patients and Providers Act of 2008, now Public Law 110-275. This law creates a specific benefit category under XVIII and XIX of the Social Security Act. The new law addresses Cardiac and Pulmonary Rehabilitation and takes effect on January 1, 2010.

The significance of the new provision is that Medicare beneficiaries who have a clinical need for cardiac or pulmonary rehab services should have timely access to formal rehabilitation programs. In the past, the Centers for Medicare and Medicaid Services (CMS) have had discretionary authority on many of the key decisions regarding coverage of these services. Because of this, there have been inconsistencies in patient access and inconsistencies within the services covered by Medicare, more so with Pulmonary Rehab, across the country.

CMS has long recognized Cardiac Rehabilitation programs as a covered service, but according to the Centers for Disease Control and Prevention and numerous researchers have repeatedly emphasized that the service is dramatically underutilized, resulting in suboptimal clinical care for patients with CAD. As a result, costly, life-threatening recurrent cardiovascular events that can be potentially reduced with the appropriate and timely use of cardiac rehab services still cost patients with or without insurance benefits. For Pulmonary Rehabilitation, the new law will require CMS to provide national coverage of rehabilitation services when medically indicated by the patient's physician.

As the TACVPR is updated by the AACVPR regarding the enactment of this law, we will update you as well. This is truly exciting news for us. The efforts to improve the access for Cardiac Rehab have been about a 10 year effort for those of us providing the service. Who knows, with this law, more hospitals may *have* to provide these services for their patients.