

Support Access to Occupational Therapy Mental Health Services under Medicare and Medicaid

Discussion Points

Begin by explaining - Why occupational therapy in mental and behavioral health (behavioral health includes substance use disorders)? Each person explains this differently. Please take the time to develop your elevator pitch on this. Here are some key points I find useful. Remember, OT in mental health can be a very new concept to some people and they may be skeptical.

- The key outcome of occupational therapy services is to help a person maintain, learn, or regain functional capabilities – i.e., those skills they need to function independently every day.
- Difficulty with these skills of everyday living can be the result of physical, cognitive, or mental health challenges. Occupational therapy's role is to help a person engage in activities that are meaningful to them, and help them live as independently as possible, regardless of the cause.
- Occupational therapy began in mental health, but the number of practitioners in mental health settings declined over the century, with changes to reimbursement structures and treatment settings.

Details about the Bill:

Medicare

- Occupational therapy is a covered service under Medicare, and occupational therapy practitioners provide services in a variety outpatient rehabilitation settings.
- Occupational therapy practitioners are underutilized in addressing the psychosocial needs of beneficiaries in these settings - to improve functional skills and engagement in daily activities.
- This legislation requires the Secretary of HHS to provide education and outreach to stakeholders about OT's role in providing services to beneficiaries with a mental health or substance use disorder under Medicare.

Medicaid

- Occupational Therapy is a mandatory Medicaid benefit for those 0-21 and an optional benefit for adults.
- Within the 44 states with an adult OT benefit, the ability of OT practitioners to provide mental health services varies from state to state, and there is often uncertainty about whether occupational therapy practitioners can provide services to people with mental health or substance use disorders.
- This legislation requires the Secretary of HHS to issue guidance clarifying that States may cover occupational therapy services furnished to individuals under the Medicaid program for the treatment of a substance use or mental health disorder diagnosis.

Other:

- **This bill does not add a new benefit to Medicare or Medicaid.** It does not change the scope of OT services in these programs or change state scope of practice. It is simply providing education on an existing benefit.
- **This bill does not cost anything,** as it does not add any new benefits and is clarifying existing benefits, the Congressional Budget Office should score the bill as “zero.”

Circle back to why it is important:

- **Why? Workforce:** There is a documented shortage of mental health professionals, and occupational therapy practitioners remain an untapped part of this workforce.
- **Why? Focus on living meaningful, independent lives:** While medications help to soften symptoms, and talk therapy supports processing challenging emotions, occupational therapy builds success in meaningful activities that leads to both a sense of fulfillment, and increased independence.
- **Why? Expansion of Community Behavioral Health Centers:** Congress just made a multi-billion-dollar investment in community behavioral health which will be implemented at the state level. It is imperative to clear up any confusion about the ability of occupational therapy practitioners to provide and bill for these services under Medicaid, so that occupational therapy can be a part of these community services.

Senate: Please co-sponsor S. 1592 in the 118th Congress and support inclusion of these policies in any appropriate upcoming legislation.

House: Please support introduction of a companion bill in the House and inclusion of these policies in any upcoming legislation.