



July 24, 2007

United States Senate
Washington, D.C. 20510
Attn: Health LA

RE: Patient Support for S. 543

Dear Senator:

The purpose of this letter is to provide the Medicare beneficiary's perspective on the appropriateness of the 75 Percent Rule, which is used to classify inpatient rehabilitation hospitals and units. The Coalition to Preserve Rehabilitation (CPR) is a national coalition that represents consumers, clinicians, and membership organizations with the goal of preserving access to appropriate rehabilitation services so that individuals with disabilities, injuries, or chronic conditions, regardless of age, may regain and/or maintain their maximum level of function and independent living.

In recent days, you may have seen advertisements regarding the 75% Rule placed in Capitol Hill publications by the provider associations representing the nation's nursing homes and hospitals. Although providers clearly have an interest in the outcome of the pending 75% Rule legislation, we would like to convey the thoughts of patients and rehabilitation clinicians in this debate.

Under the Medicare program, each patient is entitled to medically reasonable and necessary health care services—sometimes this means services provided in inpatient rehabilitation hospitals and units and sometimes it means services provided in skilled nursing facilities. We neither support nor oppose inpatient rehabilitation hospitals and units per se; nor do we support or oppose skilled nursing facilities per se. What we oppose are categorical statements such as the statement appearing in the AHCA ad in the July 19th issue of *Roll Call*: "Support Continued and Full Implementation of the 75% Rule. It's good for patients..."

The 75 percent rule is not good for patients who need intensive multidisciplinary rehabilitation and/or close medical supervision and meet the criteria for admission to inpatient rehabilitation hospitals and units, as determined by physicians. As you know, the 75% Rule classification criteria for inpatient rehabilitation hospitals and units requires providers to maintain a particular percentage of patients receiving treatment in one or more of 13 conditions specified by CMS in order to receive enhanced payment. The effect of this rule is that patients are turned away (i.e., denied access) based on arbitrary compliance levels, rather than their actual medical needs and physician determinations, jeopardizing access to medically necessary services and resulting in potentially diminished and ultimately costly outcomes.

**COALITION TO PRESERVE REHABILITATION
1501 M STREET, NW, 7TH FLOOR • WASHINGTON, D.C. 20005
P:(202) 349-4290 • F:(202)785-1756 • WWW.PRESERVEREHAB.ORG**

To reiterate, we strongly support access to medically reasonable and necessary rehabilitative services in the appropriate setting, whether that setting is an inpatient rehabilitation hospital or unit, skilled nursing facility, or on an outpatient basis. **We strongly oppose, however, the use of an arbitrary quota-based rule established by government bureaucrats that has the effect of restricting access to intensive rehabilitative services in inpatient settings based solely on a patient's diagnosis, rather than on their total rehabilitative and medical needs.** Patients must receive appropriate services that will enable them to function as fully as possible in their homes and communities.

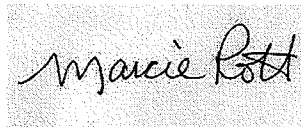
Because the 75% Rule arbitrarily restricts access to appropriate rehabilitative care, we strongly oppose further escalation of the Rule's compliance percentage. We support swift enactment of S.543 which holds the compliance threshold at 60%, codifies the federal medical necessity standard for inpatient rehabilitation in statute, and extends consideration of a patient's comorbid conditions when assessing compliance with the 75% Rule.

Thank you for your consideration,

CPR Steering Committee



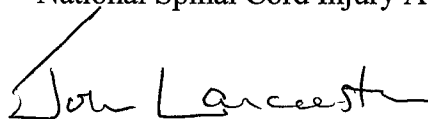
Judith Stein
Center for Medicare Advocacy, Inc.



Marcie Roth
National Spinal Cord Injury Association



Andy Imparato
American Association of People with Disabilities



John Lancaster
National Council on Independent Living



Peter Wilderotter
Christopher and Dana Reeve Foundation