State Medicaid Coverage of Occupational Therapy: Which States Have Underserved Populations in Need of Occupational Therapy Services?
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OTD 6680: Experiential Component

Mission
To advance occupational therapy practice, education, and research through standard setting and advocacy on behalf of its members, the profession, and the public.

Vision
As an inclusive profession, occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living.

Needs of AOTA
• An updated resource on Medicaid’s coverage of occupational therapy services in all states and territories
• Develop & update AOTA resources
• Attend health briefings, fundraisers, congressional hearings, & conferences
• Author the Capitol Report for OT Practice
• Lobby for occupational therapy at the state and federal level
• Write a summary of Medicaid coverage of occupational therapy
• Track Medicaid reform at state and federal level
• Support Annual Conference by volunteering & development of materials
• Track legislation on StateNet
• Write blog posts for CommunOT
• Write Health Care Policy updates for AOTA.org

GOALS
• Develop an all-encompassing resource that delineates Medicaid’s coverage for occupational therapy services for all 50 states and territories
• Update AOTA resources
• Write blog posts on health policy
• Author the Capital Report for OT Practice
• Attend Healthcare events, discussion panels, meetings, & webinars
• Lobby for OT with lawmakers
• Develop materials for and volunteer at Annual Conference events, AOTPAC, and sessions

Background
• Medicaid is a federal-state program tasked with providing health coverage to low-income families, adults, and children
• Medicaid provides health insurance to 1 in 5 Americans and is a principal payer in long-term care, among the elderly, and individuals with disability
• States run their own Medicaid programs and it is discretionary for them to cover occupational therapy
• Medicaid is an essential benefit for many individuals that are in need of occupational therapy services, therefore it is crucial to determine where coverage is restricted (American Occupational Therapy Association, 2017)
• With regard to health coverage, the Trump Administration is advocating for both work requirement implementation and short-term plans
• Work requirements via Medicaid 1115 waivers would enable states to require Medicaid beneficiaries to work for their health coverage
• Short-term plans are health insurance plans that do not provide comprehensive health coverage to beneficiaries

Outcomes

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Results/Discussion
• 18 responses to Medicaid coverage of OT survey
• 2/18 states do not receive Medicaid coverage
• 5/16 states have co-pays, with fee ranging from $2.00-$10.00
• Major challenges include low reimbursement, paperwork, and limitations in coverage
• Reimbursement rates
  • Decline across the board
  • Lack periodic review
  • Inadequate
• The paperwork involved with prior authorization is
  • Time consuming
  • Delays patient care
  • Can result in an ethical dilemma
• Coverage is most commonly limited in
  • Therapeutic services
  • Number of authorized visits
  • Number of hours of treatment
  • Settings of therapy

Conclusion
Occupational therapy is a skilled therapy needed across a variety of settings and patient populations. However, the provision of Medicaid coverage of occupational therapy contains many barriers to access for the people that may need it the most. These barriers include limitations in coverage, time-consuming paperwork, and low rates of reimbursement for OT practitioners. Because Medicaid is an essential benefit for many individuals that utilize OT services, it is crucial to determine where coverage is limited. Once this is known, only then can advocacy take place with stakeholders to reduce, if not eliminate these barriers to meet the need for occupational therapy services.

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