



ConnOTA Annual Spring Conference 2019  
Session and Speaker Information

## Administration Track

<p><b>Session A</b></p>	<p><b>Preparing for Medicare Payment Reform: The Skilled Nursing Facility Patient-Driven Payment Model (PDPM) – Elaine Craddy Adams MPPA, OTR/L, FAOTA</b></p>
<p>As health care reform has evolved in recent years, the focus has been on movement toward a system that supports value-based care and improved quality of care and away from a system driven by volume and payment rules. As part of this focus, the Centers for Medicare and Medicaid Services (CMS) have put forth efforts to reform the payment system for Skilled Nursing Facilities to a system that is driven by patient characteristics, factors, and care needs. As a result of these efforts, a new Medicare Skilled Nursing Facility (SNF) payment system, the Patient-Driven Payment Model (PDPM) is slated to take effect on October 1, 2019. The PDPM payment structure is based on a combination of components, including components related to nursing services, physical therapy services, occupational therapy services, speech-language pathology services, and non-therapy ancillary services, as well as an element referred to as a non-case-mix component. Certain patient characteristics and factors are specified as determinants of payment for each of the service components. For occupational therapy, these determinants include the primary reason for SNF care and the functional status of the patient. These payment reform efforts are also linked to the post-acute care reform provisions of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014, quality programs, and outcome reporting, updates to the SNF Medicare Conditions of Participation, and the CMS Patients Over Paperwork initiative. This presentation will provide an overview of the PDPM, as well as the connection with other related CMS initiatives. This session will also provide an opportunity for participants to consider and explore the potential impact of the PDPM on occupational therapy service delivery and to consider and explore ways in which to facilitate transition to the new PDPM model.</p>	
	<p>Elaine Craddy Adams, MPPA, OTR/L, FAOTA - Elaine obtained her occupational therapy degree from Quinnipiac College (now Quinnipiac University) in 1980 and earned a Master of Arts degree in Public Policy and Administration from Northwestern University in 2016. She has worked in several settings and is currently employed by Genesis Rehab Services as a Corporate Director of Regulatory Compliance. She has a working knowledge of Medicare and other health care reimbursement systems and works to keep her knowledge current regarding issues across the health care continuum. She frequently consults with the American Occupational Therapy Association regarding such issues, and also collaborates with other health care industry associations, such as the National Association for the Support of Long Term Care. She has been actively involved in advocacy efforts and has done many presentations on the local, state, and national level. She has been involved with the ConnOTA</p>

	Council on Government Affairs for many years and served on the ConnOTA Board as the Member for Government Affairs in 2010 and 2011.
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<b>Session E</b>	<b>Conversations that Matter: The Case for department of Education Credentialing – Joan Sauvigne-Kirsch Ed.D, OTR/L, Jaime Spencer, MS, OTR/L, and Serena Zeidler, OTD, OTR/L</b>
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AOTA’s Vision 2025 advocates to maximize health for all populations through effective solutions that facilitate participation in everyday living (AOTA, 2017). The school setting is the second largest practice setting for both occupational therapist and occupational therapy assistants (AOTA, 2015); however, many school practitioners are restricted in their efforts due to inequities and limited voices within school leadership positions.

School leaders influence teachers, students and families in the community to maximize achievement and success for all students. With knowledge and skill in child development, mental health, physical and social issues that impact learning and academic achievement, occupational therapists are uniquely qualified to fulfill leadership roles within the school setting (Schefkind, 2017). Formal school leadership positions would promote the professions vision to maximize our impact.

Educational credentialing is granted to most professionals who are employed within the school setting. However, occupational therapists are restricted from obtaining state department of education credentialing, which is a prerequisite for educational administration training. Issues of pay equity, job security, caseload management and career advancement could all be addressed through basic school credentialing.

The purpose of the presentation is to support Vision 2025 by proposing effective solutions to overcome barriers so that school occupational therapy practitioners can serve with equity with other school professionals and advance to school leadership positions, if so desired. This presentation will enhance participants knowledge of the barriers facing school based occupational therapists, including those aspiring to leadership positions. Participants will be able to identify specific actions that occupational therapists can take to promote their school roles and encourage discussion of equity amongst school professionals.



Joan Sauvigne-Kirsch is an Asst. Professor in the OT program at Sacred Heart Univeristy. She has 20 years of CT school practice and has presented this topic in OT Practice Magazine, and AOTA Webinar and AOTA national conference and NY and CT state conferences.

Jaime Spencer is an OT who has worked as a school based OT, consultant and blogger of the sites MissJaimeOT.com and administrator on the facebook page “USA School-Based OT’s Looking for Change.” She is currently an adjunct instructor at Touro College. Jaime has presented on this topic at AOTA national conference and NYSOTA.

Serena Zeidler is an Asst Professor in the OT Porgram at Touro College who began her work in school practice in1985. She has written on sensory processing challenges for OT practice magazine and presented on PuzzleArt, visual skills and equity for school -based practitioners.

Session I	<b>Preparing for Medicare Payment Reform: The Home Health Agency Patient-Driven Groupings Model (PDGM) – Elaine Craddy Adams MPPA, OTR/L, FAOTA and Morgan Rachel Villano, MPA, MSPS, OTR/L</b>
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As health care reform has evolved in recent years, the focus has been on movement toward a system that supports value-based care and improved quality of care and away from a system driven by volume and payment rules. As part of this focus, the Centers for Medicare and Medicaid Services (CMS) have put forth efforts to reform the payment system for Skilled Nursing Facilities to a system that is driven by patient characteristics, factors, and care needs. As a result of these efforts, a new Medicare Skilled Nursing Facility (SNF) payment system, the Patient-Driven Payment Model (PDPM) is slated to take effect on October 1, 2019. The PDPM payment structure is based on a combination of components, including components related to nursing services, physical therapy services, occupational therapy services, speech-language pathology services, and non-therapy ancillary services, as well as an element referred to as a non-case-mix component. Certain patient characteristics and factors are specified as determinants of payment for each of the service components. For occupational therapy, these determinants include the primary reason for SNF care and the functional status of the patient. These payment reform efforts are also linked to the post-acute care reform provisions of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014, quality programs, and outcome reporting, updates to the SNF Medicare Conditions of Participation, and the CMS Patients Over Paperwork initiative. This presentation will provide an overview of the PDPM, as well as the connection with other related CMS initiatives. This session will also provide an opportunity for participants to consider and explore the potential impact of the PDPM on occupational therapy service delivery and to consider and explore ways in which to facilitate transition to the new PDPM model.



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**Morgan Rachel Villano, MPA, MSPS, OTR/L** - Morgan graduated from Suffolk University in Boston with a joint degree in Public Administration and Political science in 2009. She completed a fellowship through UMASS Medical School and the Eunice Shriver Center in Waltham, MA: Leadership and Education in Neurodevelopmental Disorders, with a focus in policy development, policy implementation, funding, legislative mechanisms and advocacy within the healthcare arena with a focus on neurodevelopmental and related disorders. Her undergraduate degree is a B.S. in Occupational Therapy with a minor in Psychology from Quinnipiac College in 1998. She independently provided written and oral testimony regarding block grant funding for people with

	<p>disabilities to federal representatives in 2001. Morgan has brief lobbying experience with the Massachusetts Chapter of the National Alliance for the Mentally Ill and served on the ConnOTA Board as the Member for Government Affairs between 2014-2018. Professionally Morgan has worked as an occupational therapist in mental health, pediatrics, acute care, skilled nursing and the past nine years in homecare as a field clinician and a manager. Morgan currently is an Adjunct Instructor for Sacred Heart University's Masters of Occupational Therapy program.</p>
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