




The Role of the Physical Therapist in National Health Care Reform





The American Physical Therapy Association (APTA) applauds recent efforts by President Obama and key leaders in the US Congress to reform health care by improving access and achieving affordable coverage for all Americans. On behalf of its more than 72,000 members and their patients, APTA stands ready to assist the Administration and Congress in achieving reform that will enhance patient care, access, and value.

Physical therapists can provide valuable contributions to the transformation of the health care delivery system by improving health care quality and outcomes through the prevention, treatment, and management of impairments and health care needs of patients. APTA's goal in reform is to ensure that the health care system is affordable, results in high-quality care, and eliminates unnecessary legal and regulatory barriers that limit access to services—providing patients with access to high-quality care provided by physical therapists.

Key Health Care Team Members

Physical therapists provide services that help restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities in patients with injury or disease. They restore, maintain, and promote overall fitness and health.

Physical therapists are the leaders in the rehabilitation that allows individuals with chronic conditions to return to productive lives. Physical therapists also are key health care team members who address prevention initiatives, such as reducing falls, improving physical activity to mitigate chronic disease and secondary health conditions, and tailoring wellness programs for populations that have chronic conditions and/or disabilities. The enhancement of rehabilitation services is a necessary focus in any reform initiative. APTA and its members are well positioned to lead in this area.

In Rehabilitation

- Physical therapists are leaders in rehabilitative services that allow individuals with injury, disease or chronic health conditions, impairments in body functions and systems, activity limitations, and participation restrictions (disabilities) to return to productive lives.
- Research shows that physical therapists can provide a cost-effective alternative for many patients who currently undergo surgery, take costly prescription drugs, or use a variety of medical devices to treat neuromusculoskeletal and cardiopulmonary problems.

In Prevention and Wellness

- Front line providers—including physical therapists—should be included in health care reform prevention initiatives.
- Physical therapists are educated to provide insight and interventions to increase physical activity among appropriate patients to reduce excess body mass, improve health status, and reduce associated chronic disease risk. For example, for patients who are obese, physical therapists develop programs that can balance the progression of exercise with the need for joint protection and safety.
- Physical therapists can lead evidence-based prevention and wellness programs implemented at the community level.

Policy recommendations that will result in improvements in the quality of care, access to services, and cost savings are included below.

Accessing Physical Therapist Services

Any reform effort, whether it is strengthening a current program and/or creating a new program, should improve coverage and ensure patients have access to qualified health care providers, including services provided by physical therapists. Ensuring patient and provider non-discrimination as a basic tenet of a minimum benefit packages for private and public plans that provide health care coverage is essential for reform. Individuals with pre-existing conditions must have access to affordable and accessible coverage from the providers of their choice as authorized by state law. Health care reform legislation should:

- Ensure access to timely, high-quality, cost-effective physical therapy services by enabling physical therapists to evaluate and treat patients without referral. Forty-eight states allow physical therapists to evaluate patients without a referral from another health care professional, and 44 states and the District of Columbia improve accessibility further by allowing physical therapists to evaluate and treat, under certain conditions, patients without a referral. The ***Medicare Patient Access to Physical Therapists Act (HR 1829/S 950)*** would improve access to the cost effective care provided by physical therapists for beneficiaries. Allowing direct access to physical therapists offers the health care delivery system great efficiencies and care options, such as prevention strategies and chronic care management.
- Repeal arbitrary limits on Medicare outpatient physical therapy, occupational therapy, and speech language pathology services by passage of the ***Medicare Access to Rehabilitation Act (S 46/HR 43)***. These per beneficiary annual limits or “therapy caps” impact patients who need care the most. Reforming the current delivery system without repeal of outdated and restrictive policies would be inconsistent with reform objectives.
- Eliminate the two-year wait period for Medicare to improve access for individuals with disabilities to physical therapist services.
- Make physical therapy, which is currently an optional Medicaid benefit, a mandated benefit under Medicaid, allowing Medicaid patients access to the rehabilitation services they need.
- Improve funding for the Indian Health Service, including scholarship and loan repayment programs. This could help ensure Native Americans and Alaska Natives have access to care provided by physical therapists.
- Include physical therapists in programs that encourage providers to practice in rural and underserved communities.

The Health Care Delivery System

Reforming how physical therapists are paid is an important factor in delivery system transformation and will help increase quality and efficiency of care. The following key payment provisions should be included:

- Physical therapists should be included in quality initiatives in all settings. Currently, physical therapists in private practice are eligible to participate in the Physician Quality Reporting Initiative (PQRI). Quality initiatives are essential for a high-performing health care system and all physical therapists, regardless of setting, should be eligible to participate in quality reporting programs.
- Bundling of payment into specific episodes of care for post-acute care services should be considered with caution. Patient safeguards to ensure access to and the appropriate utilization of rehabilitation services by qualified professionals should be a minimal standard of bundled payment proposals. Rehabilitation services are integral to the success of post-acute care programs and their objective to return individuals to the highest functional status possible.
- Any medical home model payment system should include health care professionals who serve a role in addressing the comprehensive health care needs of individuals. Physical therapists should be recognized and utilized as members of the health care team who can furnish valuable services in coordinated care models, such as medical home.
- Health care reform should include reform of the payment methodology for providers who bill under the Medicare Physician Fee Schedule. Replacing the sustainable growth rate (SGR) formula with a more accurate index of medical inflation is needed to prevent projected annual double-digit payment cuts for providers due to the SGR.
- Existing regulations governing physical therapy practice should be changed so they do not negatively impact the delivery of care. Many arbitrary regulations are inconsistent, outdated, and result in inefficiencies in the delivery system for physical therapists and the patients they serve. For example, there are different requirements depending on the practice setting for supervision of personnel, documentation, plan of care certification time frames, and physician involvement.

Addressing the Health Care Infrastructure

Using research to identify the most clinically and cost effective interventions; implementing health information technologies; and developing, maintaining, and empowering an adequate workforce in rehabilitation are priorities for APTA.

Comparative Effectiveness Research

- Physical therapist interventions in comparison to surgeries, pharmaceutical, and medical devices could provide some efficiencies in the management of chronic conditions. APTA believes this investment along with current rehabilitation research at federal agencies, such as National Institutes of Health, will only help add specificity to delivery system and payment methodologies.

Adoption of Health Information Technology

- Incentives for adoption of health information technologies to improve efficiencies, enhance quality, and reduce long-term costs should be available to providers of the full continuum of health care services, including services provided by physical therapists.

Health Care Workforce

- The demand for high quality rehabilitation services provided by physical therapists continues to grow and likely will experience its greatest growth in upcoming decades. Federal scholarship and loan repayment initiatives for students, efforts to expand faculty, and current education program funding will be critical in ensuring the physical therapist workforce meets the growing demand.

- Graduate Medical Education (GME) programs should be expanded to other clinical education programs. These funds can help hospitals, nursing homes, and physical therapist practices address the costs of quality clinical education.
- With 75% of all health care costs associated with chronic disease, it is essential that sound clinical education models be established to educate and train a quality health care workforce. In physical therapy, clinical education has begun to transition to clinical fellowships. Health care reform should include expansion of GME funding to accredited clinical fellowship programs in physical therapy.
- Physical therapists should be included under federal programs, such as the National Health Services Corps, to enhance access to essential rehabilitation care in community health centers and intervene with workforce needs through physical therapy recruitment and retention.

All physical therapists are required to receive a graduate degree—in most cases a clinical doctorate—from an accredited physical therapist program before taking the national licensure examination that allows them to practice. State licensure is required in any state in which a physical therapist practices. Physical therapists are competent health care professionals with extensive clinical experience who examine, diagnose, and prevent or treat conditions that limit the body's ability to move and function in daily life.

The case is clear that our current health care system is unsustainable for our citizens and will contribute to the deterioration of our nation's health and our economy without action. The nation's physical therapists should be considered part of the solution to this national health care crisis.

For additional information visit APTA's Health Care Reform Web page at www.apta.org.



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