

OFFICIAL STATEMENT

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The Role of Physical Therapists in Medication Management

As States continue to formulate their policies on the role of physical therapists in medication management as related to homecare, APTA would like to clarify our position, as well as, provide reference to the federal Medicare home health policy.

APTA believes and it has been acknowledged in federal guidance that it is within the scope of the physical therapist to perform a patient screen in which medication issues are assessed even if the physical therapist does not perform the specific care needed to address the medication issue. The physical therapist is competent and qualified to serve as case manager and facilitate coordination of care with physicians and nurses.

APTA has a position statement adopted by its House of Delegates which states: *“Physical therapist patient/client management integrates an understanding of a patient’s/client’s prescription and nonprescription medication regimen with consideration of its impact upon health, impairments, functional limitations, and disabilities. The administration and storage of medications used for physical therapy interventions is also a component of patient/client management and thus within the scope of physical therapist practice.*

Physical therapy interventions that may require the concomitant use of medications include, but are not limited to, agents that:

*Reduce pain and/or inflammation
Promote integumentary repair and/or protection
Facilitate airway clearance and/or ventilation and respiration
Facilitate adequate circulation and/or metabolism
Facilitate functional movement”.*

In addition, within the Normative Model of Physical Therapist Professional Education: Version 2004, Pharmacology is a primary content area and includes:

Pharmacokinetic principles
Dose-response relationships
Administration routes
Enhancement of transdermal drug absorption
Absorption and distribution
Biotransformation and excretion
Factors affecting pharmacokinetics
Potential drug interactions
Pharmacodynamics

Also, within the Guide to Physical Therapist Practice (included in the Patient/Client Management Model), medications are gathered from the patient/client history. This includes: medications for current condition; medications previously taken for current condition; and medications for other conditions.

The position of APTA has been formally recognized and adopted into the Medicare Home Health Outcomes Assessment Instrument, known as OASIS-C. In March 2009 OASIS-C training materials and conferences, the Center for Medicare and Medicaid Services (CMS) specifically addressed the question of whether the physical therapist could complete OASIS item M2000 regarding medications. In its response, CMS consistently referred to APTA's position as laid out in the above paragraphs. In fact, a link to APTA's position is readily accessible in the Medicare OASIS tools and resources provided on the CMS website (http://www.cms.gov/HomeHealthQualityInits/06_OASISC.asp#TopOfPage).

Therefore, APTA strongly urges State entities to duly note and recognize the role of the physical therapists in medication management (i.e. screening, evaluation, collection of information, identification of adverse events/reactions, and education) in the home. APTA is more than willing to work with any State entity to ensure that all home health policies reflect the appropriate role of physical therapists in medication management.

If you have further questions regarding APTA's position, please contact Roshunda Drummond-Dye, JD Regulatory and Payment Counsel at (703) 706-8549 or roshundadrummond-dye@apta.org.

