

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please reject CMS-1429-P to protect the right to choose your own health care.

CMS-1429-P-2800-Attach-2.doc

CMS-1429-P-2800-Attach-1.txt

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
Offices of Strategic Operations and Regulatory Affairs**

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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

IMPACT

I am opposed to the 2--5 proposal that does not allow me to treat through a doctors or PCP referral and bill for my services.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please see attached file

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

To Whom It May Concern:

I am writing to express my concerns about the recent proposal that would limit providers of 'incident to' services in physician offices and clinics.

Trusting our physicians to make the choice of qualified providers, such as Certified Athletic Trainers who are fully trained in protocols to be administrated, is not only prudent, but is respectful to their judgment on how to best serve the Medicare patients in the most effective and judicious manner possible. There have never been restrictions placed upon physicians regarding whom he/she can utilize to provide any 'incident to' services. The physicians are fully aware that they would be legally responsible for all care ordered, and in every situation are making these decisions to help expedite care to shorten recovery times and lower expenses for the Medicare patients. Making a patient wait for further treatment until they can get into a physical therapist's office might easily lengthen the recovery time as well as cause additional expense.

Sincerely,

R. Earl Bartley M.D.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

September 22, 2004

I am a second year student physical therapist at the University of Medicine and Dentistry of New Jersey (UMDNJ). I am writing this letter in an effort to express my support for the 2005 Medicare physician fee schedule rule proposal, which was published on August 5, 2004. I strongly agree that interventions and services should be represented and reimbursed as physical therapy only when performed by a licensed physical therapist or by a physical therapist assistant under the proper supervision of a physical therapist. The American Physical Therapy Association (APTA), along with numerous committed physical therapists, have fought diligently against the use of unqualified personnel to deliver services that are considered to be and billed as physical therapy services. It is unjust and unethical to have unqualified individuals to perform such services when they are not properly educated and trained with the principles and techniques of physical therapy. It is an offense to physical therapists and student physical therapists alike, who have trained persistently for years, if any health care professional will be legally allowed to perform physical therapy interventions. Additionally, students?myself included?may be discouraged in entering the wonderful field of physical therapy if unqualified personnel will be given the right to provide such services and interventions. There will be no purpose for them to educate themselves in this field. If and when this occurs, the profession of physical therapy will lose its demand and eventually decline, which may lead to its extinction. Please do not allow this to happen. I urge you to carry out with this proposal in your final regulations.

Thank you very much for your time and considerations.

Sincerely,
Emira Cardano, SPT
University of Medicine and Dentistry of New Jersey

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
Offices of Strategic Operations and Regulatory Affairs**

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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

See attached letter.

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Submitter : Maggie Schrero Date & Time: 09/22/2004 09:09:48

Organization : LMT, NCBTMB

Category : Other Health Care Professional

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision. Therapies such as massage are especially helpful in PREVENTIVE care which in turn LOWERS MEDICAL COSTS. We beg you to NOT pass this policy whereby a physician can only refer 'incident to' services to physical therapists.

Please do not deprive the elderly of valuable healthcare services!

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

MANAGING PATIENTS ON DIALYSIS

As a provider of vascular access services to dialysis patients in a free-standing practice, I believe the proposed decrease in non-facility RVUs for thrombectomy (CPT 36870) by 27.7% may result in the need to redirect these patients with a failed vascular access to the highest cost centers for care, namely hospitals. A free-standing center must maintain an angiographic suite along with a trained personnel and supplies. Thus, there are no reduced costs to justify a reduction in RVUs. I would ask for a review of the rationale for reducing these RVUs prior to the final rule.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I have heard that this change would eliminate Massage therapists from working in or in association with Doctors and chiropractors and limit that one can only be a PT to work in these places. I am very opposed to this change and ask you to not support this. Massage therapists provide essential services in these offices and should be allowed to continue to do so.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer " incident to " services to physical therapists . All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY STANDARDS AND REQUIREMENTS

The consideration of allowing ATC (athletic trainers) to treat Medicare patients is obscene. No athletic training program covers areas of disease & rehabilitation of problems that most senior citizens are faced with. ATC's have little to no knowledge of the effects of strokes, alzheimers disease, Parkinson's, or appropriate care for arthritic conditions. Physical Therapists are trained to provide 'therapy', not ATC. Their role should specifically be in the athletic realm. Allowing ATC's to bill for services provided to Medicare beneficiaries will decrease the quality of care they recieve & possibly jeoprodize an individuals health due to ignorance in various areas of disease & injury.

Submitter : Mrs. Christina Erickson Date & Time: 09/22/2004 09:09:38

Organization : National Athletic Trainers Association

Category : Other Health Care Professional

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

September 22, 2004

Fox Valley Orthopaedic Institute
2525 Kaneville Rd.
Geneva, IL 60134

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8012

Re: Therapy ? Incident To

Dear Sir/Madam:

As a Certified Athletic Trainer (ATC) and possible future patient, I feel compelled to write this letter in opposition of proposal CMS-1429-P. I am concerned that this proposal would limit patient access to qualified health care providers of ?incident to? services, such as ATCs, in physician offices and clinics; thereby, reducing the quality of health care for physically active patients. Furthermore, limiting access to qualified health care providers will cause delays in the delivery of health care, which in turn will increase health care costs and tax an already heavily burdened health care system.

Athletic training is the health care profession that specializes in the prevention, assessment, treatment and rehabilitation of injuries to athletes and others who are engaged in everyday physical activities. Athletic trainers are multi-skilled health care professionals who can, and are, making significant contributions to health care. Athletic trainers are highly educated and fully qualified health care providers, evident in their recognition by the American Medical Association as an allied health care profession. If this proposal would pass, it would threaten the employment of many athletic trainers who are employed as physician extenders in clinics and physician offices. Therefore this proposal threatens my future employment in those settings and the value of my degree in Athletic Training. With this type of limitation artificially placed on the provision of ?incident to? services by qualified (through accredited academic programs in athletic training, a national board examination, and state practice acts) health care providers the CMS will only add to the skyrocketing health care costs, put qualified people out of work, and reduce the overall quality of health care in the United States.

In conclusion, I believe that the CMS-1429-P proposal must be rejected in order to protect the rights (the right to choose and the right for quality care) of our patients and my right as a future health care practitioner.

Sincerely,

Christina Erickson ATC/L

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physician's prescription or under his/her supervision. Limiting this service to PT's only does not meet the varied needs of patients and is not in their best interests.

Submitter : Mrs. Mary Lou Mason Date & Time: 09/22/2004 09:09:46

Organization : Namaste Massage & Lymphatic Drainage

Category : Other Health Care Professional

Issue Areas/Comments

GENERAL

GENERAL

I'm distraught that you may pass a "incident to" requirement limiting only physical therapists to treat patients with medical needs. I am a massage therapist certified in Lymphedema and bandaging and I beg you not to pass this requirement. People other than physical therapists have studied and made a life long commitment to help patients in need with medical issues.

Thank you for your time.

Mary Lou Mason LLCC CMT

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified and certified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please see attached file.

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Centers for Medicare and Medicaid Services (CMS)
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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

Concerning the face-to-face provision. I think this is an absurd provision for many types of patients and many types of products. Patients that have a permanent condition for products such as ostomy supplies, mastectomy products, urological products, diabetic supplies and many others would create a tremendous burden on everyone if they had to see a physician every time they needed supplies. I am not sure of the exact implications of the face-to-face provision with the physician but it seems totally impractical for a great deal of products that fall in the DME field. Is a simple cane going to require a Face-to-face for the patient, a \$20.00 item, where-as a phone call could take care of the referral. The patient would be inconvenienced for the appointment, put at risk for travel to the Doctor, the expense of the trip to the Doctor and possibly other family members or care givers to get them there, the time out of the busy Doctor's schedule to do all of this, the expense to Medicare for the office visit, and just the overall grief, hardship and bad will this would create for everyone. If this is what it comes down to this is ridiculous. I think there needs to be a great deal of serious thought put into this. The system is already very burdensome on all parties involved. I think in the long run it could cost much more than the cost of the DME item if it gets to complicated for beneficiaris to get what they need. A patient may decide not to go to all the trouble of an appointment to get that needed cane or walker, fall and break a hip, and then think of the expense Medicare will incur and it will happen. We need to try to make seniors lives simpler, not more complicated. Thanks for the opportunity to share my thoughts.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

All qualified health care professionals should be allowed to provide services to patients with a physician's prescription or under their supervision. As both a certified massage therapist and licensed athletic trainer, I feel strongly that this is very important. PT's are not the only professionals that can provide high quality, important incident to services.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am requesting that you do not pass this policy where a physician can only refer "incident to" services to physical therapists. All qualified health care providers need to be allowed to provide services to patients with a physicians prescription or under their supervision.

I have been involved in many situations where patients have been referred originally to a physical therapist with little or no success in treatment and then insisted that their physicians refer them for massage therapy with great results....it is disheartening to believe that a perception exists that "only physical therapists" can benefit a patient...this is simply "not true." Do the right thing and do not pass this bill.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

September 22, 2004

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8012
Re: Therapy ? Incident To

Dear Sir/Madam:

I am writing to express my concern over the recent proposal that would limit providers of ?incident to? services in physician clinics. If adopted, this would eliminate the ability of qualified health care professionals to provide these important services. In turn, it would reduce the quality of health care for our Medicare patients, increase the costs associated with these services and place an undue burden on the entire health care system.

Physicians should have the right to select the health care professional (including the Certified Athletic Trainer) who they deem is most qualified to treat the patient?s condition. Physicians should be allowed to select the provider of care based on the best interests of the patient. By allowing the Physician to select from a variety of health care providers, the patient receives the benefits of quicker, more accessible health care. Additionally, no single group of individuals should receive exclusive rights to provide Medicare services for reimbursement. To mandate that only those practitioners may provide ?incident to? care in physicians? offices would improperly remove the states? right to license and regulate the allied health care professions deemed qualified, safe and appropriate to provide health care services. Research has demonstrated that the quality of care provided by Certified Athletic Trainers in the provision of rehabilitation services is equal to that of Physical Therapists. Physical and Occupational Therapists do not ?own? the right to provide rehabilitation services. Limiting the ability of Certified Athletic Trainers to provide care to Medicare patients, will mean that physically active individuals who qualify for Medicare will no longer be able to select the most qualified professional for care of athletic related injuries.

In summary, I feel it is neither necessary nor advantageous for CMS to institute the changes proposed. This CMS recommendation is a health care access deterrent.

Sincerely,

Jason Weddle ATC M.Ed
Head Athletic Trainer
Hagerstown Community College
1140 Robinwood Dr.
Hagerstown, MD 21740

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter :

Date & Time:

09/22/2004 09:09:41

Organization :

Category :

Health Care Professional or Association

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

As stated on the National Athletic Trainers Association website, "Athletic trainers specialize in injury and illness prevention, assessment, treatment and rehabilitation for all physically active people, including the general public." Their places of employment range from physical therapy clinics, rural and urban hospitals, commercial employers, as well as physicians' offices as physician extenders. Athletic trainers have been providing therapy under the supervision of physicians in the sports setting for years as well as in physicians offices since 1991, when the American Medical Association officially recognized the athletic training certified as a member of the allied health profession.

Athletic trainers have completed courses during their education which are easily comparable to that which a physical therapist has completed, as most classes are shared between the two majors at universities across the country. At the end of these classes, an athletic training student must complete a certification test on a written and practical level, before he/she is allowed to practice.

If that isn't enough, the website O*NET Online, funded by the United States Department of Labor, which measures preparation required, level of education, and duties of many different jobs in the world of employment and rates them against each other. Occupational therapists have a Specific Vocational Preparation rating of 7 - <8, and occupational therapy assistants, as well as physical therapy assistants carrying a rating of only 4, while athletic trainers, which would be replaced by these individuals under this proposal, scored an 8+.

To single out the athletic trainer from being able to act as a physician's extender would be disqualifying a recognized member of the allied health profession who has surpassed some, if not all, of the credentials of those who are to replace them. A proposal of this caliber could only be labeled as preposterous.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

As a fellowship trained radiologist in a hospital setting I am involved in doppler hemodialysis access mapping - our radiology department is the only accredited ultrasound site on this medical campus. The nephrologists and surgeons are very pleased with our mapping services and have told us repeatedly how helpful our pre-operative imaging has been. Limiting mapping reimbursement to surgeons would severely limit access to this exam which has proven to be critical to the success of this life saving surgery. Mapping should be coded and reimbursed to include arterial and venous imaging by whatever physician is most qualified to interpret the exam!

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Junta Iguchi
7720 Howard st
Omaha, NE, 68114
September, 22nd, 2004
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8012
Re: Therapy ? Incident To
Dear Sir/Madam:

I am writing to express my concern over the recent proposal that would limit providers of ?incident to? services in physician clinics. If adopted, this would eliminate the ability of qualified health care professionals to provide these important services. In turn, it would reduce the quality of health care for our Medicare patients and ultimately increase the costs associated with this service and place an undue burden on the health care system.

During the decision-making process, please consider the following:

Athletic training students are required to take demanding classes such as evaluation, anatomy, biomechanics, physiology and modalities and exercise physiology, rehabilitation class. In addition, we are required to obtain clinical experience in Athletic training setting. These classes and clinical experience give us substantial knowledge and techniques to perform evaluation and provide rehabilitation programs to patients.

Athletic trainers are employed by almost every U.S. post-secondary educational institution with an athletic program and every professional sports team in America to work with athletes to prevent, assess, treat and rehabilitate injuries sustained during athletic competition. In addition, dozens of athletic trainers will be accompanying the U.S. Olympic Team to Athens, Greece this summer to provide these services to the top athletes from the United States. For CMS to even suggest that athletic trainers are unqualified to provide these same services to a Medicare beneficiary who becomes injured as a result of running in a local 5K race and goes to their local physician for treatment of that injury is outrageous and unjustified

In summary, it is not necessary or advantageous for CMS to institute the changes proposed. This CMS recommendation is a health care access deterrent.

Sincerely,
Junta Iguchi
Graduate student
University of Nebraska at Omaha
6001 Dodge st,
Omaha, NE 68182

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I would like to see massage therapists continue to be covered, even though i do not employ one at present. In fact, I would like to see Medicare expand coverage of Massage Therapy, as i find it a valuable tool, along with PT.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

It appears that the physical therapy - health care professionals are living in a fear based reality, they are trying to secure their own future by monopolizing the market place.

I assure this is not the first time this issue will come before the board. The fact is that the Chiropractic and Physical Therapist of Texas have each taking a turn to create laws to push their competitors out of business. This is Un-American and Un-Lawful. The single reason why their supported bills never make it past the Governors desk, is because massage therapy is not the sole domain of the Physical Therapist, (PT). Legally, the PTs nor their Medicare partners do not own the massage modalities. Doctors, (MDs DOs, and DCs) as well as Nurse Practitioners and Licensed and Registered massage practitioners are also legally have a say in this matter.

Your proposal is a veiled attempt to effectively close the history books on massage therapy?s meaningful and effective alterative healthcare choices to the American people. Think about this, why is it so important to the Physical Therapist that the Doctors Medical referral for massage stop going to their massage therapist? The answer is very simple, Physical Therapist feel vulnerable, threatened by the quality of service and the attention to details that has become the hallmark of a clinically trained massage therapist; We provide a real healthcare alternative that is both cost effective and a complimentary approach to the publics healthcare needs. Lets all work together, instead of participating in another tuff battle. And besides we need them as much as they need us.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

See attached letter.

**Department of Health and Human Services
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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am AGAINST the Proposed Changes and SUPPORT the Services of ATHLETIC TRAINERS (ATC) ability to continue as an option in Rehabilitation Services.

Submitter : Doris McBurney Date & Time: 09/22/2004 09:09:20

Organization : A-1 Home Healthcare

Category : Other Health Care Professional

Issue Areas/Comments

GENERAL

GENERAL

Mastectomy products should be excluded from the face-face prescription requirements. The effects of a mastectomy are permanent. Based on that fact, mastectomy products are necessary throughout the life of the recipient. Medicare already has parameters in place for the dispensation of these items. These parameters should be sufficient. The face-to face prescription requirement would place an undue burden on all affected Medicare beneficiaries, physicians, suppliers and Medicare as well. The face-to-face prescription requirement will require the recipient the inconvenience of a visit to the physician's time for the visit, and Medicare's payment for the visit.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

As I understand the bill under construction you are again attempting to limit the livelihood of massage & other therapeutic professionals from assisting their clients in recovering their health. With limiting them and the insurance coverages you are cutting their throats. This is unacceptable that in the United States we would have czarist russian ideologies.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

I am submitting this comment in support of the "Incident To" provision. I strongly support CMS's proposal that individuals who provide physical therapy services in physician's offices must be graduates of accredited physical therapy programs. These individuals would have the required training to provide skilled therapy services. In addition to our level of education, we all take licensure exams to ensure a certain level of understanding/knowledge of our skills.

Submitter : Mrs. Kara Pigg Date & Time: 09/22/2004 10:09:00

Organization : Advanced Rehab and Sports Medicine

Category : Physical Therapist

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

See attached letter.

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
Offices of Strategic Operations and Regulatory Affairs**

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Submitter : Mrs. Ann Hollenbeck Date & Time: 09/22/2004 10:09:54

Organization : Florida State Massage Therapy Association

Category : Other Practitioner

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

All massage therapists BEG you NOT to pass this policy whereby a physician can only refer "incident to" services to physical therapists...ALL qualified health care providers should be allowed to provide services to patients with a physicians prescription and/or under their supervision. The evidence speaks for itself re: the benefit individuals receive when treated by massage therapists! The patients report their pain is significantly reduced and they notice faster progress in the healing process with our services! Doesn't that mean less monies spent in the long run with the proper therapy applied initially?

In 12 years of practice I have personally heard this over and over- the patients wished they had been referred to us sooner!!! Please DO NOT PASS THIS POLICY IT IS NOT IN ANYBODY'S INTEREST, CERTAINLY NOT THE PATIENT'S...CERTAINLY NOT THE THERAPISTS... Thank you

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Miss. Sarah Tackett Date & Time: 09/22/2004 10:09:49

Organization : Miss. Sarah Tackett

Category : Other Health Care Professional

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

September 19, 2004

Sarah Tackett
1208 N. Knoblock # 6
Stillwater, OK 74075
Sarah.Tackett@okstate.edu

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8012

Dear Sir/Madam:

As a future Certified Athletic Trainer (ATC) and possible future patient, I feel compelled to write this letter in opposition of proposal CMS-1429-P. I am concerned that this proposal would limit patient access to qualified health care providers of 'incident to' services, such as ATCs, in physician offices and clinics; thereby, reducing the quality of health care for physically active patients. Furthermore, limiting access to qualified health care providers will cause delays in the delivery of health care, which in turn will increase health care costs and tax an already heavily burdened health care system.

Athletic training is the health care profession that specializes in the prevention, assessment, treatment and rehabilitation of injuries to athletes and others who are engaged in everyday physical activities. Athletic trainers are multi-skilled health care professionals who can, and are, making significant contributions to health care. Athletic trainers are highly educated and fully qualified health care providers, evident in their recognition by the American Medical Association as an allied health care profession. If this proposal would pass, it would threaten the employment of many athletic trainers who are employed as physician extenders in clinics and physician offices. Therefore this proposal threatens my future employment in those settings and the value of my degree in Athletic Training. With this type of limitation artificially placed on the provision of 'incident to' services by qualified (through accredited academic programs in athletic training, a national board examination, and state practice acts) health care providers the CMS will only add to the skyrocketing health care costs, put qualified people out of work, and reduce the overall quality of health care in the United States.

As an athletic training student at a nationally accredited university, I have prepared for my future. I have taken four years of undergraduate level course work as well as next fall I plan to go to graduate school. I will be prepared exceptionally well in the fields of therapeutic rehabilitation as well as therapeutic modalities. Because of CMS-1429-P, I am concerned that my future is in jeopardy, as well as my hard work and effort in the past four years may be considered insignificant by this proposal. This is terribly disheartening.

In conclusion, I believe that the CMS-1429-P proposal must be rejected in order to protect the rights (the right to choose and the right for quality care) of our patients and my right as a future health care practitioner.

Thank you for your time,
Sarah Tackett, A.A. OK License Number 344,
National Athletic Trainer's Association Member 992587
Athletic Training Student at Oklahoma State University

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

As a Certified Athletic Trainer, I am a member of a group of highly qualified health care professionals. It is insulting and degrading to think that we are sought after to care for elite athletes, but that we could lose the right to care for our active senior population.

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
Offices of Strategic Operations and Regulatory Affairs**

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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please see attachment

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
Offices of Strategic Operations and Regulatory Affairs**

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Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please see attachment

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Centers for Medicare and Medicaid Services (CMS)
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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please see attachment

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

...do not want Physical Therapists to be the only health care professionals allowed to provide medically related care to physician's patients. I would like you to consider saving the rights of professional massage therapists to work with or for medical doctors or chiropractors.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

In cases such as cricopharyngeal syndrome, vocal tremors, difficulty swallowing, severe headaches, tinnitus, TMJ syndrome and many others, CranioSacral Therapy has been shown to be the treatment of choice. Physical Therapy should not be the ONLY modality to which a physician can refer patients. Please do NOT pass this policy which excludes valuable, proven health care modalities such as Massage Therapy, CranioSacral Therapy, Yoga Therapy, Trauma Resolution Work and Accupressure. Patients are NOT one size fits all, and should be given choices which are most appropriate to their health needs. This will ultimately save you money as the most efficient method of treatment is applied.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Massage therapists graduating with therapeutic tools gravitate to health fields. Additional credits to maintain a license can increase their bag of tools. Mine included certification in orthopedic massage, and acupressure etc. I don't know why you want to limit medicare reimbursment to only Physical Therapists. There are increasing numbers of great massage therapists who can provide good service to clientele. I urge you to reconsider the decision to only allow Physical Therapists to be reimbursed by Medicare.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

It is so important that massage theapists are permitted to work with phsicians in their offices and that their services are covered by insurance. We often are able to correct the condition when other therapists are not. These services are not affordable to all and should be covered by health insurance.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

To Whom It May Concern:

It has been called to my attention that the CMS has proposed to change the reimbursement plan in regards to the licensure requirements of personnel providing therapy services. As a current Student Athletic Trainer this is a cause for concern. Certified Athletic Trainers (ATCs) are highly qualified individuals that are capable of providing care for many individuals that have been referred by a physician. It needs to be understood that ATCs work under various conditions providing care, such as modalities, rehabilitation exercises, and most importantly educate athletes/patients on the necessity of prevention of injury.

Currently ATCs work in a range of establishments including, but not limited to: physicians offices, physical therapy clinics, athletic training clinics at high school, collegiate, and professional levels, rehabilitation hospitals, and industrial companies. In these various settings ATCs are able to complete the same beneficial treatment as Physical Therapists (PT?s) or Occupational Therapists (OT?s).

With regards to the education of Athletic Trainers, an individual must graduate from an accredited program, then take a certification exam to display their practical skills and written skills. Once certification has been attained, ATC are required to participate in continuing educations credits to enable them to continually expand their knowledge and remain informed of new treatments and studies. The government has rated the preparation requirements of PT?s and ATCs equivalent and more prepared then OT, OTA, or PTA individuals.

ATCs are qualified to provide the valuable treatment they currently provide, which is how it should remain. If the CMS were to discontinue reimbursement of ATCs in clinical settings it could be detrimental to the care of individuals in specific venues. If a company has a physician that they work with, who has developed a working relationship with an ATC it would not be monetary value to reduce the care that is being provided. ATCs work with athletes and physically active people on a level of qualification equivalent to a physical therapist. If CMS were to stop reimbursement of ATCs it would only increase the demand for reimbursement of physical therapists.

Thank you for your time.

Sincerely,
Colleen Giansiracusa

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

OTHER - INCIDENT TO

I am OPPOSED to the proposed change which would restrict "incident-to" therapy to physical therapists. Patients and physicians should be given a choice among qualified health care professionals to provide appropriate services. Please DO NOT pass this policy.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Centers for Medicare and Medicaid Services
Department of Health and Human Services
Attention: CMS-14290-P
P.O. Box 8012
Baltimore, MD 21244-8012

Re: Therapy ? Incident To

Dear Sir/Madam:

I am writing to express my concern over the recent proposal that would limit providers of "incident to" services in physician offices and clinics. If adopted, this would eliminate the ability of certain qualified health care professionals to provide these services, and potentially increase the cost associated with providing rehabilitative services.

"Incident to" has, since the inception of Medicare, been utilized by physicians to allow others, under the direct supervision of the physician, to provide services as an adjunct to the physician's professional services. Physicians may delegate care of their patients to qualified therapy providers, including athletic trainers, whom the physician deems knowledgeable and trained to provide treatment. All certified athletic trainers are highly educated with a minimum bachelor's or master's degree from an accredited university. Seventy percent have a master's degree or higher. The athletic training curriculum is rigorous and the standards of accreditation are maintained by an independent process through the Commission on Accreditation of Allied Health Education Programs.

To allow only physical therapists, occupational therapists, and speech and language pathologists to provide "incident to" outpatient therapy services would improperly provide these groups exclusive rights to Medicare reimbursement. This appears to be a way of channeling patients and treatment dollars to physical therapists at the expense of patients who may be able to receive services at a lesser cost from athletic trainers, and at the expense of athletic trainers who may have difficulty finding employment that is commensurate with their education and training.

CMS, in proposing this change, offers no evidence that there is a problem that is in need of fixing. By all appearances, this is being done to appease the interests of a single professional group who would seek to establish themselves as the sole provider of therapy services.

Athletic trainers are employed by almost every U.S. post-secondary educational institution with an athletic program and every professional sports team in America to prevent, assess, treat, and rehabilitate orthopedic injuries. For CMS to suggest that athletic trainers are not qualified to provide these same services to a Medicare beneficiary who becomes injured and goes to their local physician for treatment is unjustified.

In summary, it is not necessary or advantageous for CMS to institute the changes proposed. This CMS recommendation is a health care access deterrent.

Sincerely,

Marilyn Mangus, MS, ATC, R

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

Therapy-Incident To, We do not want you to pass this policy where a physican can only refer 'incidents to' services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicans' prescription or under their supervision. So many patients referred by cardiologists for mitral valve syndrome problems and from general physicans for other problems to complementary care practitioners, benefit from the complementary health care services according to those physicians. Thank you for listening and in advance for your help, very much appreciated!

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am a private practicing physical therapist located in a physician's office. I have been a therapist for nearly 30 years. I strongly support CMS's proposal to have established requirements of individuals providing therapy in a physician's office. I support the requirement that these individuals providing therapy be graduates of accredited professional physical therapist programs, or certified physical therapist assistant programs. Physical therapists are professionally educated at the college or university level in programs accredited by the Commission on Accreditation of Physical Therapy. All physical therapy programs offer at least a master's degree, and the majority will offer the doctor of physical therapy (DPT) degree by 2005. Licensure is a valuable and appropriate standard to govern the practice of physical therapy in any office. As licensed health care providers in every jurisdiction in which they practice, physical therapists are fully accountable for their professional actions. The delivery of so-called "physical therapy services" by unqualified personnel is harmful to the patient in terms of ineffective treatment, financial ineffectiveness, potential bodily harm (tissue damage, causing unnecessary pain, etc.).

In addition, if the therapy cap scheduled to become effective in January 2006 becomes a reality, then patients could exceed his/her cap on therapy without ever receiving services from a physical therapist. This cap has been unfortunately set at approximately \$1500 per year. I have had many patients who would have exceeded the cap for one condition. And many elderly have complications with more than one injury--fall, fracture a hip, fall again, fracture an arm or wrist, sprain an ankle, sustain a head injury with subsequent dizziness, then another fall, etc. etc. etc. All this would be limited within that one \$1500 cap--under the heading of "physical therapy" provided by ANYONE giving the treatment unless CMS opposes the use of unqualified personnel providing physical therapy services and billed as physical therapy services.

I believe that physical therapists and physical therapist assistants under the supervision of physical therapists are the only practitioners who have the education and training to furnish physical therapy services. Unqualified personnel should NOT be providing physical therapy services.

Thank you for consideration of these comments.

Sincerely,
Cindy Bartell, P.T.

Submitter : Mrs. Mary Ann Frontzak Date & Time: 09/22/2004 10:09:42

Organization : Downers Grove South H.S.

Category : Other Health Care Professional

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I'm against the proposed regulation changes. I encourage your recognition of Certified Athletic Trainers as a provider of rehabilitative services.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am very concerned that patients will have access to massage therapy care, as is appropriate to their conditions. When physicians refer for massage care, this law appears to prevent medicare recipients from obtaining that care. My father is now exclusively on Medicare, and if he weren't able to receive massage care, he would suffer greatly from pain in his neck and back due to arthritis. Repeated visits to physical therapists have offered him no relief. Thank you for your consideration of my remarks, and again I urge you to NOT LIMIT "Therapy-Incident To" to physical therapists only.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please see attached.

**Department of Health and Human Services
Centers for Medicare and Medicaid Services (CMS)
Offices of Strategic Operations and Regulatory Affairs**

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Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I have visited a message therapist regularly over the past 2 years for a knee injury from 20 years ago. She has helped to the point where I currently have no pain. This is more than the 2 knee surgeries and 3 sets of injections accomplished, all administered by a doctor and covered under my insurance plan. Please DO NOT DELETE COVERAGE UNDER MEDICARE FOR MESSAGE THERAPY. It serves a definite need not addressed by either doctors or physical therapists. Thank you for the consideration of this matter.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

September 16, 2004

Tom Butler
Sacred Heart University
5151 Park Avenue
Fairfield, CT 06825-1000

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8021

Re: Therapy ? Incident To

To Whom It May Concern:

As a future certified athletic trainer (ATC) and current athletic training student, I feel obliged to write this letter in opposition of proposal CMS-1429-P. I am certain that this proposal will hurt my future profession and colleagues in athletic training by decreasing the amount of jobs for athletic trainers. If there is a decrease in jobs for ATC's in physician based settings than the supply of athletic trainers will surpass the demand. Athletic trainers work with athletes, the active population, including the medicare population, in schools, clinical, corporate settings, as well as in the offices of physicians. The scope of practice of an athletic trainer is to rehabilitate those who are injured, and to treat any person who is suffering from an injury. Preventing athletic trainers from billing for these services under a physician will decrease the athletic trainer's scope of practice. This proposal will disrupt many of the relationships that athletic trainers have with physicians preventing the athletic trainer from rehabilitating a physician's patients in their office, schools, and clinics.

An athletic trainer is an extremely qualified rehabilitative therapist. Denying an athletic trainer from rehabilitating those under a physicians care not only hurts the athletic trainer, but it hurts the people they may treat and the entire health care system by not letting the patient receive the best possible treatment. The patient will be forced to receive care from a lesser-educated health care professional, such as a physical therapist assistant, occupational therapist, or occupational therapists assistant. The U.S. Department of Labor states that an athletic trainer has an equivalent educational preparation than that of a physical therapist, and surpasses that of occupational therapist, occupational therapists assistant, and physical therapists assistant. I am not only very concerned for athletic trainers, but for the well being of anyone seeking therapy. If this Medicare proposal is passed than physicians will be sending their patients to a PTA, OT, or OTA instead of a more highly qualified athletic trainer.

In conclusion, I am sure that the CMS-1429-P proposal will harm our health care system, especially athletic trainers, as well as anyone who seeks health care. Since many companies follow what Medicare and Medicaid does a passing of this proposal will force more physicians to send their patients to lesser-qualified health care providers, and these patients may not get the therapy they need and deserve.

Sincerely,

Thomas Butler, SAT

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I strongly urge you not to pass this legislation requiring that physicians refer patients only to physical therapists for massage therapy. All qualified health care providers including licensed and/or certified massage therapists should be able to provide these services to patients who require them with a doctor's prescription or under a doctor's supervision. Don't limit access to such a necessary service, please!

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

please see attachment.

Attachment #2859

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8012
Re: Therapy – Incident To

Dear Sir/Madam:

I am a physician writing to express my concern over the recent proposal that would limit providers of “Therapy-incident to” services in physician offices and clinics. If adopted, this would eliminate the ability of qualified health care professionals to provide these important services. I have worked with certified athletic trainers for over 10 years and they are an integral part of our practice. It would reduce the quality of health care for our Medicare and workers’ compensation patients and ultimately make it more costly and difficult for them to receive the treatment they require.

During the decision-making process, consider the following:

- Incident to has, since the inception of the Medicare program in 1965, been utilized by physicians to allow others, under the direct supervision of the physician, to provide services as an adjunct to the physician’s professional services. A physician has the right to delegate the care of his or her patients to trained individuals (including certified athletic trainers) whom the physician deems knowledgeable and trained in the protocols to be administered. The physician’s choice of qualified therapy providers is inherent in the type of practice, medical subspecialty and patient.
- There have never been any limitations or restrictions placed upon the physician in terms of who he or she can utilize to provide ANY incident to service. Because the physician accepts legal responsibility for the individual under his or her supervision, Medicare and private payers have always relied upon the professional judgment of the physician to be able to determine who is or is not qualified to provide a particular service. It is imperative that physicians continue to make decisions in the best interests of the patients.
- In many cases, the change to “incident to” services reimbursement would render the physician unable to provide patients with comprehensive health care. The patient would be forced to see the physician and separately seek therapy, causing significant inconvenience and additional expense.
- This country is experiencing an increasing shortage of credentialed allied and other health care professionals, particularly in rural and outlying areas. If physicians are no longer allowed to utilize a variety of qualified health care professionals working “incident to” the physician, it is likely the

- patient will suffer delays in care, greater cost and a lack of local, immediate treatment.
- Patients who would now be referred outside of the physician's office would incur delays of access. In the case of rural Medicare patients, this could not only involve delays but also cost time and travel expense. Delays would hinder the patient's recovery and/or increase recovery time, which add to the medical expenditures of Medicare.
 - Curtailing to whom the physician can delegate "incident to" procedures will result in physicians performing more of these routine treatments themselves. Increasing the workload of physicians will take away from the physician's ability to provide the best possible patient care.
 - To allow only physical therapists and PT assistants, occupational therapists and OT assistants, and speech and language pathologists to provide "incident to" services would improperly provide those groups exclusive rights to Medicare reimbursement.
 - CMS offers no evidence that there is a problem that is need of fixing. By all appearances, this is being done to appease the interests of a single professional group who would seek to establish themselves as the sole provider of therapy services.
 - CMS does not have the statutory authority to restrict who can and cannot provide services "incident to" a physician office visit. This action could be construed as an unprecedented attempt by CMS to seek exclusivity as a provider of physical therapy services.
 - Independent research has demonstrated that the quality of services provided by certified athletic trainers is equal to the quality of services provided by physical therapists.
 - These issues may lead to more physician practices eliminating or severely limiting the number of Medicare patients they accept.

It is not necessary or advantageous for CMS to institute the changes proposed, and I request that the change not be implemented. This CMS recommendation is taking the decision making process out of the physician's hands. It is exactly the opposite of what CMS and the Dept. of Health and Human Services said they would do in order to keep physicians in charge of patient care.

Sincerely,

Rajeev Khanna, MD
Advanced Occupational Medical Specialists
265 W. Harrison
Bellwood, IL 60104

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.



Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I ask you to not pass this policy where a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.



Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am a licensed massage therapist and a Physical therapist assistant. Each patient should have the right to choose which professional they feel would benefit them the most. Being in two professions that benefit patients, I know a qualified licensed massage therapist can do more good then a physical therapist in certain aspects such as muscle strain, postural problems and stress related problems. I have also been on the receiving end of both physical and massage therapy and know the benefits of both. A person should be able to make a choice and not have to accept the decisions of an insurance company to deny them access to any qualified health care provider.

Thank you for allowing me to voice my opinions. I hope you will make the right decision to allow the patient equal access to quality care.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

John DiCicco MEd, ATC, CSCS
7653 N Bel Air Rd
Casa Grande, AZ 85222

<DATE>

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1429-P
P.O. Box 8012
Baltimore, MD 21244-8012

Re: Therapy ? Incident To

Dear Sir/Madam:

I am writing to express my concern over the recent proposal that would limit providers of ?incident to? services in physician clinics. If adopted,

this would eliminate the ability of qualified health care professionals to provide these important services. In turn, it would reduce the quality of health care for our Medicare patients and ultimately increase the costs associated with this service and place an undue burden on the health care system.

During the decision-making process, please consider the following:

Incident to has, since the inception of the Medicare program in 1965, been utilized by physicians to allow others, under the direct supervision of the physician, to provide services as an adjunct to the physician's professional services. A physician has the right to delegate the care of his or her patients to trained individuals (including certified athletic trainers) whom the physician deems knowledgeable and trained in the protocols to be administered. The physician's choice of qualified therapy providers is inherent in the type of practice, medical subspecialty and individual patient. There have never been any limitations or restrictions placed upon the physician in terms of who he or she can utilize to provide ANY incident to service. Because the physician accepts legal responsibility for the individual under his or her supervision, Medicare and private payers have always relied upon the professional judgment of the physician to be able to determine who is or is not qualified to provide a particular service. It is imperative that physicians continue to make decisions in the best interests of the patients.

In many cases, the change to 'incident to' services reimbursement would render the physician unable to provide his or her patients with comprehensive, quickly accessible health care. The patient would be forced to see the physician and separately seek therapy treatments elsewhere, causing significant inconvenience and additional expense to the patient.

This country is experiencing an increasing shortage of credentialed allied and other health care professionals, particularly in rural and outlying areas. If physicians are no longer allowed to utilize a variety of qualified health care professionals working 'incident to' the physician, it is likely the patient will suffer delays in health care, greater cost and a lack of local and immediate treatment.

Patients who would now be referred outside of the physician's office would incur delays of access. In the case of rural Medicare patients, this could not only involve delays but, as mentioned above, cost the patient in time and travel expense. Delays would hinder the patient's recovery and/or increase recovery time, which would ultimately add to the medical expenditures of Medicare.

Curtailing to whom the physician can delegate 'incident to' procedures will result in physicians performing more of these routine treatments themselves. Increasing the workload of physicians, who are already too busy, will take away from the physician's ability to provide the best possible patient care.

To allow only physical therapists and PT assistants, occupational therapists and OT assistants, and speech and language pathologists to provide 'incident to' services would improperly provide those groups exclusive rights to Medicare reimbursement. To mandate that only those practitioners may provide 'incident to' care in physicians' offices would improperly remove the states' right to license and regulate the allied health care professions deemed qualified.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass a policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physician's prescription or under his supervision. Thank you.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

My name is Joan Schmidt, PT. I have owned my small physical therapy practice in Brentwood, California for the last 23 years. In those 23 years as you can imagine; I have seen a lot of change in healthcare.

Therapy-incident to: I would like to express my passionate concerns re: Payment policies under the physician fee schedule for 2005. I strongly support CMS's proposed requirement that physical therapists working in physicians offices be GRADUATES of accredited professional physical therapist programs. Physical therapists and physical therapist assistants under the supervision of physical therapists are the ONLY practitioners who have the education and LICENSE to provide p.t. services. UNQUALIFIED and UNLICENSED personnel should NOT be providing physical therapy. It is FRAUD in my professional opinion in a physician's office that services are often provided by non-physical therapists and billed under the physician's providers number as physical therapy services. The delivery of so-called 'physical therapy' services by unqualified personnel is harmful to the patient and wasteful to the Medicare Program.

Physical therapists must be licensed in the states where they practice. As licensed health care providers in every jurisdiction in which they practice, physical therapists are fully accountable for their professional actions. Another huge concern is the THERAPY CAP is scheduled to become effective January 1, 2006. Under the current Medicare policy, a patient could exceed his/her cap on therapy without ever receiving services from a LICENSED physical therapist.

Thank you for your sincere support in a very serious matter. Joan Schmidt, PT 310-996-0085

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please Do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physician's prescription or under their supervision.

Massage therapy plays an important part in helping people to regain and keep their health.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision. please do not drop these, since this will affect our livelihood!

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Mrs. Carol Bilich Date & Time: 09/22/2004 11:09:29

Organization : Assoc. of Massage

Category : Other Health Care Professional

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Eighty percent of my business is based on pre and post-surgical care.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Thanks for your help!

Sincerely and best wishes in all of your endeavors to help others
Timothy Belanger, D.C.

If you wish to REPLY, reply to: timchiro@aol.com

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I beg you to NOT adopt this policy whereby a physician can only refer 'incident to' services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

PTs are not the appropriate therapists for all patients, nor is physical therapy most appropriate or cost-effective treatment for all problems. There are plenty of other competent therapists and effective treatments; it makes no sense at all to give physical therapists a monopoly over all 'incident to' services under Medicare.

Adopting this proposal will lead to a deterioration of care and rising costs. Don't do it!

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do not limit patients' available services!

Please change this policy whereby a physician can only refer "incident to" services to physical therapists to include all qualified health care providers!

Patients should rightfully have access to various health care providers with a physicians prescription or under their supervision, not only PT's!

Thank you -

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass this policy. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision. Thank you for your consideration in this matter.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do not limit physician referral for patient supplemental care to physical therapists. Properly trained massage therapists provide a valuable service to patients that most physical therapists do not or cannot. Properly implemented massage therapy has been shown in numerous legitimate studies to aid in the healing and recovery processes. Physical therapy only applies to the body's function and mobility NOT wellness, as massage therapy does. Physician's who refer patients to qualified massage therapists for supplemental care and/or recovery have demonstrated their belief in the importance of massage therapy and have undoubtedly witnessed its benefits. Physicians should have the right to continue to exercise their judgement without limiting that which already exists and works.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision. Likewise, patients should be allowed to decide for themselves "who" they would prefer to have services provided by.

Sincerely,

Kim Cheshire, LMT, FSMTA

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

As a resident of the city of Capitola, Santa Cruz County, California, I find it incredible that this county is listed as "rural" for purposes of physician reimbursement. Understandable in 1967 -- it was indeed rural then. But now?? For the past several years, it has been one of the top 10 areas nationally in "unaffordability" -- once #2 and another time #3. Median price of a house here is currently \$630,000 -- more than neighboring Santa Clara County -- and the median income is less than our neighbor. Yet it is proposed that Santa Clara, listed as "urban" (which it is) will get 25% more in M.D. reimbursement, which obviously means even fewer medical personnel will consider locating here. I urge you to make the category fit the facts. In the 30+ years since the rural designation was made, the Univ of Calif at Santa Cruz began here, the proximity to Silicon Valley gave it the name "Silicon Beach" for obvious reasons, and the population exploded. This is now an extraordinarily high-priced urban community, and saddling it with a "rural" designation means physicians are leaving for "urban" communities, and others are reluctant to settle here.

I urge you to reconsider not changing your designation -- it is unjustified, and the consequences are grossly unfair.

Submitter : Mrs. Elizabeth Wantz Date & Time: 09/22/2004 11:09:54

Organization : Mrs. Elizabeth Wantz

Category : Other Health Care Provider

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Many of us as athletic trainers treat high-profile athletes/patients. We have had just as much education at Physical Therapists in the very same fields. One can earn their degree in Physical Therapy in less time than an athletic trainer can earn their degree. It is insulting to our profession that the federal government does not consider us qualified to care for our senior population.

Submitter : Mrs. Kim Bauerle Date & Time: 09/22/2004 11:09:29

Organization : Mrs. Kim Bauerle

Category : Other Practitioner

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers SHOULD be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.



Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments**Issues 20-29**

THERAPY - INCIDENT TO

Medicare should not limit the therapy or therapy providers available to patients. Each patient is an individual and has individual needs. Where one patient may respond well to Physical Therapy from a Physical Therapist, another patient may respond poorly or worsen as a result of receiving Physical Therapy prior to Massage Therapy or another modality. For example, Physical Therapists are not trained in the various techniques of massage, trigger point therapy, craniosacral therapy, myofascial release, Rolfing, Core balancing, NeuroMuscular Therapy, etc., to the extent a Licensed Massage Therapist is. Therefore, a Physical Therapist cannot be the sole answer to many soft tissue maladies, especially in the beginning stages of many acute onset treatment protocols. Physical Therapy is very useful AFTER proper circulation has been restored, oxygenation of the contracted tissues has occurred, Myofascial restrictions and Trigger Points have been addressed- ALL BY A LICENSED MASSAGE THERAPIST. After these facets of care have been accomplished, then the Physical Therapist can, under the scope of their license, work with the patient in strengthening the muscles, restoring proper tonus to the muscles, and increasing the Range of Motion of the joints. We must ALL work together to provide the best, fastest, and most cost-effective treatments available to all patients at all times. Limiting therapy to that offered only by a Physical Therapist does not work to that end. Many times I have seen in my office patients who dutifully went to their doctor's appointments and were only prescribed Physical Therapy. They got worse and abandoned treatment as the "cure" was too painful for their compromised body systems at that stage of recovery. After receiving massage therapy and sometimes other modalities, most were able to then complete their Physical Therapy successfully and go on to be pain-free. Why? It's simple. Because performing Physical Therapy on a tight, spasmed muscle that has had the blood and nutrition squeezed out of it by the spasm only gets the patient one thing: A BIGGER, TIGHTER, MORE TONED SPASM! And more pain. Massage therapy and other modalities are very useful at various stages of treatment. No one treatment is the be all-end all of the medical community, and patients should not be penalized or denied pain-sparing treatment, no matter who the licensed professional is administering it. The doctors in their offices are well qualified to determine- by patient outcomes if by no other method- who is qualified to treat which patient by which modality and at what phase of treatment. Thank you for your time and consideration. Sincerely, Barbara Nelen, LMT, CNMT, HealthTouch Bodywork Systems, Inc. Winter Park, FL. 407-599-0200

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT allow this policy to pass -- whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physician's prescription or under their supervision. Therapeutic massage can be of immense benefit in the healing process.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you not to pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physician's prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am a massage therapist with a large clientele. They count on me and the therapy that I provide to help them not only manage pain, but increase mobility in the muscular systems. Most of my clientele use insurance to pay for treatment. This is not a productive change to the system. I am opposed to this change. I have the education to provide my clientele with a therapy that they both need and appreciate.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

Please do NOT consider passing this policy whereby a physician can only refer "incident to" services to a physical therapist. All qualified healthcare providers should be allowed to provide services to patients with a physician's prescription or under their supervision.
Sincerely,

Katharine Koeppen, RMT/MTI

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I believe that it would be counter productive to the public's health at large to restrict 'incident to' referels to physical therapist only. I'm sure a review of costs (physical therapist vs massage therapist) would reveal a substantial savings by going with the massage therapist. I have treated many clients who were tired of going to their physical therapist only because their insurance paid for it but were not getting any results. They were quite surprized with the results I was able to achieve after only one session. Don't ubnder estimate the healing power of massage. I have clients that have not gone back to their chiropractor or physical therapist after recieving my treatments. Massage is more cost effective and much more benificial systemicy than most other types of body work. Please take this response under carefull consideration. Thank you, Kevin Montagnino - Massage Therapist, CranioSacral Therapist, Reflexologist, Vita-Flex Therapist, Reiki Master, Quantim Touch Practitioner

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.



Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

I urge you to change the classification of Santa Cruz County from RURAL to URBAN. The median cost of housing here is over \$600,000. As a result it is hard to attract professionals here knowing Medicare's low rate of reimbursement.

I recently moved here and found it very hard to find a Doctor willing to take me as a patient. That does not make me very happy about being over 65.

Please give this matter serious consideration.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I disagree with the proposal to restrict the ability of Doctors to use the highly qualified Service Providers of their choice. Certified Athletic Trainers have more education and experience than Physical Therapy Assistants and Occupational Therapy Assistants. The minimum educational requirements for Certified Athletic Trainers is a Bachelor's Degree in their field of study, although most have at least a Masters degree. Their education and training affords them an independent medical knowledge for treating patients, therefore providing safe, medically sound, expedient therapies. I ask that Medicare continue to not regulate who Physicians choose to provide services for their patients.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

GENERAL

GENERAL

We do not want PTs to be the only health care professionals allowed to provide medically related care to physician's patients.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I implore you NOT to pass this policy whereby a physician can only refer "incident to" services to a physical therapist. All qualified health care professionals should be allowed to provide services to patients with a physician's prescription, or under their supervision.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I support payment for massage therapists under Medicare reimbursement. Service provided by such therapists will save Medicare money in the long run by reducing the need for payment for other services such as extended use of pain medications.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg you to NOT pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers should be allowed to provide services to patients with a physicians prescription or under their supervision.



Submitter : Mrs. Valerie Bonnell Date & Time: 09/22/2004 11:09:32

Organization : ABMP

Category : Other Health Care Professional

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

We beg that you NOT pass this policy. All qualified health care professionals should be offered the opportunity , under a physicians prescription or supervision to perform services to patients.

Thanking you for your help in this matter.
Valerie Bonnell, CMT, ABMP

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am a state LICESNED CERTIFIED Athletic Trainer. I have been performing therapy on patients for the last 10 years. I have been fortunate enough to treat youth, olympic and professional athletes. I have also been fortunate enough to treat the industrial and recreational athlete and non-athletes. I take much pride in the results I have helped these individuals attain. The MD's and my co-worker PT's have also acknowledged my outcomes. I have had MD's specifically send patients to me, 1 because I get good outcomes and 2 because they generally like the outcomes of ATC's over PT's. I also have fellow co-worker PT's use me as a source of reference, and rely on me occasionally to answer questions and demonstrate new ways of doing exercises to them. To say that an ATC does not have the required skills or education to provide skilled therapy is wrong. To pass this legislation would be a mistake and thus eliminate many highly qualified individuals from providing cost effective therapy.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I am writing to express my opinion over the proposal that would limit providers of "incident to" physician clinics. If adopted, this would eliminate the ability of qualified health care professionals to provide these important services. In turn, it would reduce the quality of health care for our Medicare patients and ultimately increase the costs associated with this service and place more of an undue burden on the healthcare system.

Please consider these points during your decision making process:

- Since 1965 physicians have been able to designate trained individuals (including certified athletic trainers) to care for patients and to carry out protocols in settings based on the type of practice, medical specialty and individual patients.

- The professional chosen by the physician has never been limited or restricted to provide ANY incident to service because the physician in accepting the legal responsibility for the individual under their supervision. In the past Medicare and private payers have always relied on the professional judgement of the physician to determine who they deem qualified to provide services in the best interest of the patients, it is important that this ability continues to be allowed in the best interest of the patient.

- In many cases the incident to allows patients to receive fast, convenient quality care that they would not be otherwise able to obtain without significant inconvenience or additional expense.

- There is a shortage of qualified medical professionals in many areas which without the "incident to" services will only continue to cause problems for patients seeking healthcare services.

- Without "incident to" services patients will often experience huge delays in care which would increase overall costs to the healthcare system because their healthcare problems will just snowball.

- Curtailing whom the physician can choose to provide "incident to" services, will require more physicians to perform the service themselves taking up more time in an already overbooked physician's schedule creating more distractions and delays in patient care.

- To allow only Physical therapists, PT assistants, Occupational therapists, and OT assistants and speech and language pathologists to provide "incident to" services would improperly provide groups exclusive rights to Medicare reimbursement. To mandate that only those practitioners could provide "incident to" care in physicians' offices would improperly remove the states' rights to regulate the allied health care professions deemed qualified, safe and appropriate to provide these services.

- CMS does not show that there is a problem with the current system. In all appearances this is being done to establish a professional group as the sole provider of therapy services.

- CMS does not have the authority to restrict what healthcare provider a patient may see in a physician's office. This could be construed as an attempt to make an exclusive provider.

- Independent research has demonstrated that the quality of services provided by a certified athletic trainer is equal to the quality of services provided by physical therapists.

- Athletic trainers are employed by almost every post secondary institution athletic program and every professional sports team in America to work with athletes to prevent, treat and rehabilitate injuries sustained during athletic competition. In addition, dozens of athletic trainers accompanied the U.S. Olympic Team to Athens to provide services to the top athletes from the United States. For CMS to even suggest that athletic trainers are unqualified to provide these same services to a Medicare beneficiary who becomes injured while running in a local 5K race and goes to their local physician is unjustified.

- These issues may lead to more physician practices eliminating or severely limiting the numbers of Medicare patients that they accept. Please deny this proposal.

Submitter : Date & Time:

Organization :

Category :

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

I work with elderly and disabled patients, providing relief of pain, improving general behavioral traits, and rehabilitative massage (RX). My clients cannot afford this option without medicare. I do not charge any more to them that I do my regular clients. I even waive the "copay". If this cannot be claimed on Medicare, My clients cannot afford these most necessary serivces.

Herb Anderson, CMT

Submitter : Margery Wells, Dipl. TOM Date & Time: 09/23/2004 12:09:00

Organization : Health Source Integrative Medicine

Category : Other Practitioner

Issue Areas/Comments

Issues 20-29

THERAPY - INCIDENT TO

Please do not pass this policy whereby a physician can only refer "incident to" services to physical therapists. All qualified health care providers need to be allowed to provide services to patients and especially with a physician's prescription.