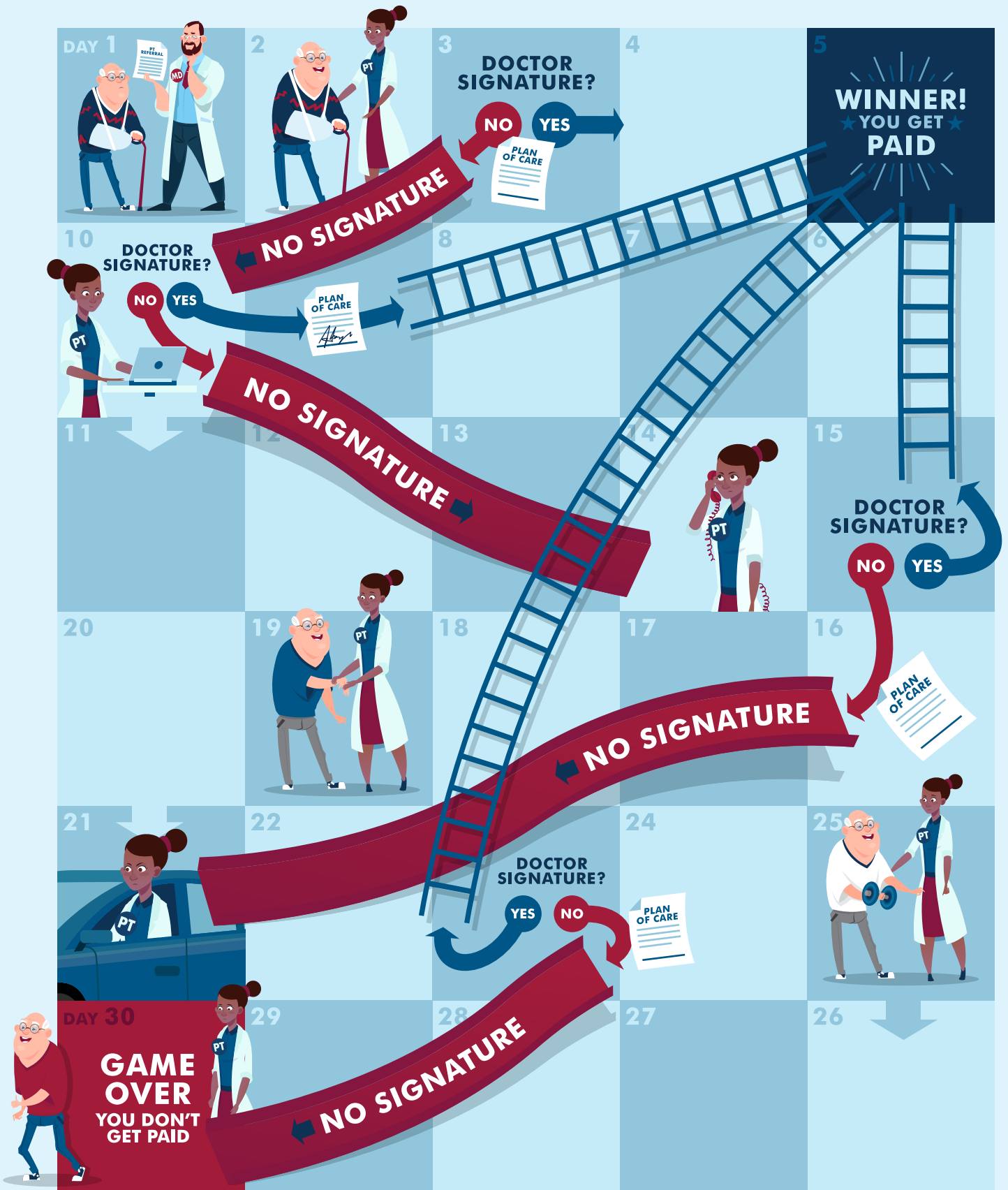


# PUT PATIENTS OVER PAPERWORK IN PHYSICAL THERAPY

Current Medicare regulations impose significant burdens on physical therapists. When senior patients need physical therapy (PT), restrictive rules require physical therapists to navigate a lengthy, cumbersome process to receive reimbursement for the medically-necessary treatments they provide.

When a patient is in pain, their doctor may refer them to PT. After examining the patient, the physical therapist will create a detailed plan of care tailored to his or her needs. But, even after receiving the referral for PT, Medicare requires therapists to gain physical approval on the plan of care, which can take weeks and dedicated staff to track down approvals even when the physician has already recommended PT.

All the while, the physical therapist treats the patient at the risk of not being reimbursed if the referring physician fails to sign the patient's plan of care.



**MEDICARE: REFINE REGULATORY REQUIREMENTS RESTRICTING DELIVERY OF PHYSICAL THERAPY**

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