

SUBJECT: Allowing patient access to physical therapy without a prior referral

COMMITTEE: Public Health — committee substitute recommended

VOTE: 10 ayes — S. Thompson, Wray, Allison, Coleman, Frank, Guerra, Ortega, Price, Sheffield, Zedler

0 nays

1 absent — Lucio

WITNESSES: For — Benjamin Keene, Mark Milligan, and Craig Tounget, Texas Physical Therapy Association; (*Registered, but did not testify*: Ben Shook, Axiom Physiotherapy; Anne Dunkelberg, Center for Public Policy Priorities; Chase Bearden, Coalition of Texans with Disabilities; Steve Koebele, Concentra; Josiah Neeley, R Street Institute; Justin Yancy, Texas Business Leadership Council; Mia McCord, Texas Conservative Coalition; Don McBeath, Texas Organization of Rural and Community Hospitals; James Harris, Texas Physical Therapy Association; Jennifer Minjarez, Texas Public Policy Foundation; Blaze Huber, The Training Room; and nine individuals)

Against — Eugene Stautberg, Texas Medical Association, Texas Orthopaedic Association; Joseph Mathews, Texas Orthopaedic Association; (*Registered, but did not testify*: Marshall Kenderdine, Texas Academy of Family Physicians; Price Ashley, Texas College of Emergency Physicians; Dan Finch, Texas Medical Association; Rachael Reed, Texas Ophthalmological Association; Bobby Hillert, Texas Orthopaedic Association; Jill Sutton, Texas Osteopathic Medical Association; Clayton Travis, Texas Pediatric Society; Bonnie Bruce, Texas Society of Anesthesiologists; Ellis Doan; Fatemeh Rezaee; Reza Rezaee; Ziba Rezaee)

BACKGROUND: Occupations Code sec. 453.301 permits a physical therapist to treat a patient for an injury or condition that was the subject of a prior referral if the physical therapist:

- has been licensed to practice physical therapy for at least one year;
- notified the referring practitioner of the therapy by the fifth business day after date therapy is begun;
- begins any episode of treatment before the first anniversary of the referral by the referring practitioner;
- treats the patient for not more than 20 treatment session or 30 consecutive calendar days, whichever occurs first, after the physical therapy episode initiated by the referral; and
- satisfies any other requirement set by the Texas Board of Physical Therapy Examiners.

Sec. 453.203 requires applicants for a physical therapist license to present evidence to the board that the applicant has completed an accredited physical therapy educational program or has completed a program equivalent to a Commission on Accreditation in Physical Therapy Education accredited program.

DIGEST:

CSHB 29 would allow qualified physical therapists to treat a patient for an injury or condition without a referral for up to 10 or 15 consecutive business days, depending on their qualifications.

In order to treat a patient without a referral, a physical therapist would have to have been licensed to practice physical therapy for at least one year and be covered by professional liability insurance in the minimum amount required by the Texas Board of Physical Therapy Examiners. A physical therapist also would have had to either possess a doctoral degree in physical therapy from an accredited program or institution or have completed at least 30 hours of continuing competence activities in the area of differential diagnosis.

Physical therapists who possessed a doctoral degree in physical therapy from an accredited program or institution and had completed a residency or fellowship could treat patients without a referral for up to 15 consecutive business days. Otherwise, a physical therapist could treat patients for up to 10 consecutive business days.

A physical therapist who treated a patient without a referral would have to obtain a signed disclosure from the patient that acknowledged that:

- physical therapy was not a substitute for a medical diagnosis by a physician;
- physical therapy was not based on radiological imaging;
- a physical therapist could not diagnose an illness or disease; and
- that the patient's health insurance might not cover the physical therapist's services.

The Texas Board of Physical Therapy Examiners would have to adopt rules necessary to implement the bill by November 1, 2019.

The bill would take effect September 1, 2019, and would apply only to treatment provided by a physical therapist on or after November 1, 2019.

**SUPPORTERS
SAY:**

CSHB 29 would allow patients to make their own decisions about their health care, lower treatment costs, decrease the use of opioids and other pain killers, and bring Texas in line with the vast majority of states that allow direct access to physical therapy treatment.

Requiring patients to schedule a doctor's appointment before being able to see a physical therapist creates an unnecessary delay in treatment that costs time and money. Because early intervention leads to better health outcomes, these delays can have significant consequences for patients' well-being. In addition, patients who receive physical therapy earlier are less likely to be prescribed and become dependent upon opioids for pain relief, so providing quicker access to physical therapy for patients who need it could lower the prevalence of opioid use for certain patients.

Texas is one of the only states that does not allow patients to be treated by a physical therapist without a prior referral, and the U.S. military has allowed direct access to physical therapy since the 1970s. The bill would allow patients more timely access to physical therapy when it was needed without creating further risks to the health or safety of those patients.

Permitting only 10 to 15 days of treatment by a physical therapist before requiring a physician's referral would ensure that patients with conditions that required a medical diagnosis or imaging would receive needed care.

**OPPONENTS
SAY:**

CSHB 29 would create a risk to patients by allowing them to seek treatment before receiving a medical diagnosis. A proper medical screening that includes diagnostic tools and imaging is necessary before treatment can be prescribed, and physical therapists do not have the training or tools to provide such a screening. Patients with serious maladies that presented as simple soreness or aches could seek treatment from a physical therapist without receiving a needed diagnosis, which could result in negative health outcomes.