Support Occupational Therapy in Medicare Home Health
Medicare Home Health Flexibility Act—S.1725/H.R.3127

Discussion Points
Occupational therapy practitioners have long been recognized as critical providers of home health care; however, Medicare regulations do not permit occupational therapists to open home health therapy cases even when included in an initial plan of care. This often causes scheduling issues for home health providers and delays for patients, as only physical therapists or speech-language pathologists can open such therapy cases under current Medicare regulations. These burdens are especially significant in rural areas, where therapists may drive from 100–200 miles per day to visit clients.

The Medicare Home Health Flexibility Act (S. 1725, H.R. 3127) would specifically allow home health agencies the flexibility to use the most clinically appropriate skilled service to open cases (by conducting the required initial and comprehensive assessments). It would not alter in any way Medicare’s criteria for establishing eligibility for the home health benefit, or the need for a nurse to open a home health case that includes nursing services. This bill is bipartisan and was introduced by Senators Ben Cardin (D-MD) and Todd Young (R-IN), and by Reps. Lloyd Doggett (D-TX), Jason Smith (R-MO), Paul Tonko (D-NY), and David McKinley (R-WV).

An earlier version of the bill was found to have no impact on the federal budget by the Congressional Budget Office (CBO)—meaning Congress does not need to identify savings elsewhere or raise taxes to “pay for” the provision.

Occupational therapists are qualified to perform the initial and first comprehensive rehabilitation assessments based on their unique training and perspective, which focus on a person’s functional capabilities. Under current Medicare regulations, OTs can conduct comprehensive assessments, but only when they are the last remaining service being provided (“continuing need basis”).

Not allowing occupational therapists to open Medicare home health therapy cases erects unneeded barriers to providing patients with effective, timely, and appropriate therapy services. In areas where access to physical therapists or speech-language pathologists is limited, unnecessary restrictions preventing occupational therapists from performing the required initiating assessments can lead to delays in beneficiaries receiving home health therapy services.

This change in policy would apply to rehabilitation-only cases and be limited to instances in which skilled nursing is not identified by the ordering physician; nurses conduct the initial assessment whenever they are involved in a home health case, and this bill does not change that policy.

Your Ask:

Please cosponsor the Medicare Home Health Flexibility Act (S.1725 and H.R. 3127).