IMPROVE ACCESS TO MEDICARE REHABILITATION SERVICES

ACTION REQUESTED
Support legislation that provides distinct access to speech-language pathology and physical therapy services to ensure medically necessary care for Medicare beneficiaries with multiple functional impairments.

ISSUE: Medicare Beneficiaries Needing Speech and Physical Therapy Face Undue Barriers
Congress took historic action in 2018 by eliminating the so-called “therapy cap” on services covered by Medicare Part B. However, the combined speech therapy and physical therapy monetary thresholds that persist in the law maintain a structural barrier against patients with multiple functional impairments (e.g., strength, mobility, communication, swallowing, cognition) by limiting their access to medically necessary care.

- Speech-language pathology and physical therapy are distinct disciplines, focused on different patient needs, targeting different clinical goals and separate areas of functional impairment. However, there is only one targeted medical review (TMR) threshold of $3,000 applicable to both speech-language pathology and physical therapy combined.
- Application of a combined threshold for speech-language pathology and physical therapy services negatively impacts the most medically complex and vulnerable patients (e.g., those with ALS and Parkinson’s) that have multiple functional impairments.
- The TMR threshold replaced the ‘therapy cap’ as a way to ensure medical necessity and program compliance for claims above the $3,000.
- The “therapy cap” and combined application to speech-language pathology and physical therapy were developed in 1997, prior to speech-language pathologists having independent billing status under Medicare which was implemented in 2009.

SOLUTION: Separate Speech-Language Pathology & Physical Therapy Utilization Thresholds to Improve Access to Rehab Services
Congress must create two distinct TMR thresholds in order to effectively separate speech-language pathology from physical therapy to increase access to medically necessary rehabilitation services provided by speech-language pathologists and physical therapists. Separating speech-language pathology from physical therapy will enhance the Centers for Medicare & Medicaid Services’ (CMS) ability to focus its medical review resources on true outlier claims, rather than beneficiaries and providers working towards rehabilitation goals across multiple disciplines and functional impairments.

ASHA CONTACT:
Brian Altman, Director of Federal and Political Affairs
202-624-5951 • baltman@asha.org
takeaction.asha.org