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Practice Setting	PT Student		PTA Student	
	Part A	Part B	Part A	Part B
Physical Therapist in Private Practice	N/A	X ¹	N/A	X^1
Certified Rehabilitation Agency	N/A	X ¹	N/A	\mathbf{X}^{1}
Comprehensive Outpatient Rehabilitation Facility	N/A	X ¹	N/A	X ¹
Skilled Nursing Facility	\mathbf{Y}^1	X 1	Y ²	X 1
Hospital	Y^3	X 1	Y ³	X 1
Home Health Agency	NAR	X 1	NAR	X 1
Inpatient Rehabilitation Facility	Y ⁴	N/A	Y ⁴	N/A

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Y: ReimbursableX: Not ReimbursableN/A: Not Applicable

NAR: Not Addressed in Regulation. Please defer to state law.

Y¹: Reimbursable: The minutes of student services count on the Minimum Data Set. Medicare no longer requires that the professional therapist (the PT) provides line-of-sight supervision. It is now the authority of the supervising therapist to determine the appropriate level of supervision for the student, but the student is still considered an extension of the therapist, not an individual practitioner. In addition, the rules from FY2011 regarding the student services based on PT/PTA supervision and whether minutes can be recorded as individual, concurrent, or group therapy minutes remain the same. (RAI Version 3.0 Manual, September 2011).

Examples:

In order to record the minutes as individual therapy when a therapy student is involved in the treatment of a resident, only one resident can be treated by the therapy student and the supervising therapist or assistant (for Medicare Part A and Part B). Under Medicare Part A, the supervising therapist or assistant cannot be treating or supervising other individuals. The resident and student no longer need to be within the line-of-sight supervision of the supervising therapist. It is within the supervising therapist's authority to determine the appropriate level of supervision for the student.

Under Medicare Part A, when a therapy student is involved with group therapy treatment, and one of the following occurs, the minutes may be coded as group therapy:

- The therapy student is providing the group treatment at the appropriate level of supervision as determined by the supervising therapist and the supervising therapist or assistant is not treating any residents and is not supervising other individuals (students or residents); or
- The supervising therapist/assistant is providing the group treatment and the therapy student is not providing treatment to any resident.

Under Medicare Part B, when a therapy student is involved with group therapy treatment, and one of the following occurs, the minutes may be coded as group therapy:

- The therapy student is providing group treatment and the supervising therapist or assistant is present and in the room and is not engaged in any other activity or treatment; or
- The supervising therapist or assistant is providing group treatment and the therapy student is not providing treatment to any resident.

Documentation: APTA recommends that the physical therapist co-sign the note of the physical therapist student and state the level of supervision that the PT determined was appropriate for the student and how/if the therapist was involved in the patient's care.

 \mathbf{Y}^2 : Reimbursable: The minutes of student services count on the Minimum Data Set. However, Medicare requires that the PT/PTA provide line-of-sight supervision of physical therapist assistant (PTA) student services as appropriate within their state scope of practice. See \mathbf{Y}^1

Documentation: APTA recommends that the physical therapist and assistant should co-sign the note of physical therapist assistant student and state that the PT/PTA was providing line of sight supervision of the student and was involved in the patient's care. Also, the documentation should reflect the requirements as indicated for individual therapy, concurrent therapy, and group therapy see \mathbf{Y}^{1} .

Y³: This is not specifically addressed in the regulations, therefore, please defer to state law and standards of professional practice. Additionally, the Part A hospital diagnosis related group (DRG) payment system is similar to that of a skilled nursing facility (SNF) and Medicare has indicated very limited and restrictive requirements for student services in the SNF setting.

Documentation: Please refer to documentation guidance provided under \mathbf{Y}^1

Y⁴: This is not specifically addressed in the regulations, therefore, please defer to state law and standards of professional practice. Additionally, the inpatient rehabilitation facility payment system is similar to that of a skilled nursing facility (SNF) and Medicare has indicated very limited and restrictive requirements for student services in the SNF setting.

X 1: B. Therapy Students

1. General

Only the services of the therapist can be billed and paid under Medicare Part B. The services performed by a student are not reimbursed even if provided under "line of sight" supervision of the therapist; however, the presence of the student "in the room" does not make the service unbillable.

EXAMPLES:

Therapists may bill and be paid for the provision of services in the following scenarios:

- The qualified practitioner is present and in the room for the entire session. The student participates in the delivery of services when the qualified practitioner is directing the service, making the skilled judgment, and is responsible for the assessment and treatment.
 - The qualified practitioner is present in the room guiding the student in service delivery when the therapy student and the therapy assistant student are participating in the provision of services, and the practitioner is not engaged in treating another patient or doing other tasks at the same time.
 - The qualified practitioner is responsible for the services and as such, signs all documentation. (A student may, of course, also sign but it is not necessary since the Part B payment is for the clinician's service, not for the student's services).

2. Therapy Assistants as Clinical Instructors

Physical therapist assistants and occupational therapy assistants are not precluded from serving as clinical instructors for therapy students, while providing services within their scope of work and performed under the direction and supervision of a licensed physical or occupational therapist to a Medicare beneficiary.

Documentation: APTA recommends that the physical therapist or physical therapist assistant complete documentation.