Legislative Analysis



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PHYSICAL THERAPY PRESCRIPTIONS

Senate Bill 380 as passed by the Senate

Sponsor: Sen. Tom George

House Committee: Health Policy Senate Committee: Health Policy

First Analysis (11-29-05)

BRIEF SUMMARY: The bill would allow a physician's assistant to write a prescription for physical therapy services.

FISCAL IMPACT: There may be fiscal implications for the state as a payor of medical care services for Medicaid participants and for employees if Senate Bill 380 results in an increase in usage of non-physician providers for services that may result in a prescription referral to a physical therapist. Some savings could result because physician's assistant services are provided at a lesser charge than physician services; however, in order to achieve overall savings, the appropriateness of the diagnosis and the level of physical therapy services resulting from physician's assistant referrals would need to be sustained at the same level as when subject to a physicians' care.

THE APPARENT PROBLEM:

A physician's assistant is a licensed health care professional who provides to patients a wide range of health care services under the delegation and supervision of a physician. However, a physician's assistant cannot currently write a prescription for a patient to receive physical therapy services. Under the Public Health Code, physician's assistants are licensed as a "subfield" of medicine, and the code prohibits a person who holds a subfield license from prescribing physical therapy services. Some feel that this creates an unnecessary burden and time delay in requiring a physician to sign off on the physical therapy prescription. Legislation has been offered to remove the prohibition and allow physician's assistants to order physical therapy for the patients they treat.

THE CONTENT OF THE BILL:

A physical therapist may treat an individual only upon the prescription of a person holding a license, other than a subfield license, issued under Part 166 (dentist), Part 170 or 175 (M.D. or D.O.), or Part 180 (podiatrist). Similarly, hospitals may require physical therapists to practice in the hospital only upon the prescription of the same licensed individuals. Senate Bill 380 would amend the Public Health Code (MCL333.17820 and 333.17822) by striking the phrase "other than a subfield license" in both provisions to allow those with a subfield license (namely, physician's assistants) to also prescribe physical therapy services.

ARGUMENTS:

For:

Among other things, physician's assistants can diagnose and treat illnesses and prescribe medications. However, PAs cannot currently write a prescription for physical therapy services. The bill merely eliminates the extra step of needing a physician to sign the order for physical therapy and so should reduce delays in treatment experienced by some patients. According to a representative of the Michigan Academy of Physician Assistants, the bill would not increase, or change in any way, the scope of practice of a PA. It also would not change the level of physician supervision required by state law.

Against:

Some are concerned that if physician's assistants can order physical therapy without the signature of a supervising physician, that the numbers of referrals to physical therapists will increase. Since physical therapy is expensive, this could increase overall health care costs to insurers and employers.

Response:

Physician's assistants already refer patients to other medical specialists for care. Referring a patient for physical therapy would not differ substantially from what they already do. Furthermore, physicians do provide oversight over the care provided by the PAs in their offices and would be aware if a physician's assistant was prescribing physical therapy that was not medically necessary or appropriate. And, since services provided by a physician's assistant are less costly than when provided by physicians, the bill could result in a cost savings to insurers and employers.

POSITIONS:

The Michigan Academy of Physician Assistants supports the bill. (11-29-05)

A representative of the Michigan Physical Therapy Association indicated support for the bill. (11-29-05)

A representative of the Michigan Osteopathic Association indicated support for the bill. (11-29-05)

A representative of the Michigan State Medical Society indicated a position of neutrality on the bill. (11-29-05)

A representative of the Michigan Department of Community Health indicated a position of neutrality on the bill. (11-29-05)

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[■] This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.