

# Legislative Analysis



## PHYSICAL THERAPY AMENDMENTS

Mary Ann Cleary, Director  
Phone: (517) 373-8080  
<http://www.house.mi.gov/hfa>

**Senate Bill 690 (Substitute S-1)**  
**Sponsor: Sen. John Moolenaar**

**Senate Bill 691 (Substitute S-1)**  
**Sponsor: Sen. Rebekah Warren**

**Senate Bill 693 (Substitute S-1)**  
**Sponsor: Sen. Dave Hildenbrand**

**Senate Bill 692 (Substitute S-1)**  
**Sponsor: Sen. Tom Casperson**

**Senate Bill 694 (Substitute S-1)**  
**Sponsor: Sen. Mike Green**

**House Committee: Health Policy**  
**Senate Committee: Health Policy**

**Complete to 6-2-14**

## A SUMMARY OF SENATE BILLS 690-694 AS PASSED BY THE SENATE 5-20-14

Senate Bill 690 would allow a person to self-refer to a physical therapist for either a limited number of treatments or for the purpose of preventing injury or promoting fitness.

Senate Bills 691-694 would amend various laws to allow coverage for physical therapy services under health insurance plans, prudent purchaser agreements, worker's compensation, and automobile no-fault insurance to be provided only under a prescription by a physician, dentist, or podiatrist.

Senate Bill 690 is tie-barred to Senate Bills 691-694, and those bills are each tie-barred to it. A bill cannot become law unless a bill to which it is tie-barred also is enacted.

Senate Bill 690 would amend the Public Health Code (333.17820 and 333.17824) to allow a physical therapist or physical therapy assistant to treat a patient without a prescription by a health care professional (defined to mean a physician, dentist, or podiatrist) under either of the following circumstances:

- For 21 days or 10 treatments, whichever occurs first. Before delegating PT interventions to a PT assistant, the physical therapist must determine that the patient's condition requires physical therapy.
- The patient is seeking PT services to prevent injury or promote fitness.

A physical therapist treating a patient without a prescription would have to refer the patient to an appropriate health care professional for treatment if the PT has reasonable cause to believe that symptoms or conditions are present that require services beyond the PT's scope of practice. If the patient does not show reasonable response to treatment in a time period consistent with the standards of practice as determined by the Board of

Physical Therapy, the PT would have to consult with an appropriate health care professional. These requirements are virtually identical to those already required of PTs when providing services under a prescription.

The bill would also add the titles of "Doctor of Physiotherapy" and "Doctor of Physical Therapy" to the list of protected titles of which only persons authorized under the code may use.

Senate Bills 691-694 amend various statutes to specify that insurers would not have to provide benefits or reimburse for services provided by a physical therapist, or by a physical therapist assistant under the supervision of a licensed physical therapist, unless that service had been provided under a prescription from a health care professional.

*Senate Bill 691* amends the Nonprofit Health Care Corporation Reform Act (MCL 550.1502 and 550.1502a), which applies to certificates or prudent purchaser agreements offered by Blue Cross Blue Shield of Michigan.

*Senate Bill 692* amends the Prudent Purchaser Act (MCL 550.53).

*Senate Bill 693* amends the Worker's Disability Compensation Act (MCL 418.315)

*Senate Bill 694* amends the Insurance Code (MCL 500.3107b) to apply to motor vehicle personal protection insurance coverage and individual and group disability insurance prudent purchaser agreements.

#### **FISCAL IMPACT:**

The bills would not have a significant fiscal impact on the state or local units of government.

Legislative Analyst: Susan Stutzky  
Fiscal Analyst: Paul Holland

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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.