



**CELEBRATING 10 YEARS OF DIRECT ACCESS
TO
PHYSICAL THERAPY SERVICES**

History of Change:

- On June 2, 2006, Governor M. Jodi Rell signed into law changes in statute to allow patients to see a physical therapist directly without a physician referral. The bill went into effect on Oct 1, 2006.
- Long Road: Direct Access for PT was first considered by the CT General Assembly in 1987 and the fight continued for 7 consecutive years. Despite a concerted effort by members, there was simply too much opposition and the bill was never reported favorably from the Public Health Committee. After a 4 year hiatus, it was re-initiated in 1998.
- In spite of continued opposition from other providers, Senate Bill 164 was finally JF'd with a 19-7 vote of the Public Health Committee under the leadership of then State Senator and Public Health Committee chair Chris Murphy on March 20, 2006.
- The bill was then referred to and JF'd by the Judiciary Committee (28-8) on April 18, 2006.
- Continued negotiations yielded the final product that became PA 06-125. The bill passed the Senate on April 25th (28-8) and the House on May 2nd (108-39).

Highlights of Public Act 06-125

- It allows most physical therapists to treat patients for 6 visits or 30 days, whichever comes first, as long as they have a primary care provider. If the patient demonstrates measureable, objective, functional progress within that time the PT may continue to see the patient. If not then the patient must be referred to a physician.
- All PTs with a Masters or DPT are allowed the Direct Access noted above. Bachelors level PTs must have practiced for 4 of the past 6 years.
- Patients treated for Workers Compensation or insured auto accidents are not eligible for Direct Access care.

Benefits of Direct Access for Connecticut residents:

- Across the country, where measures have been taken to assess the benefit of directly accessing physical therapy services without a referral, visiting a physical therapist not employed by a physician-owned practice had fewer visits and lower overall costs on average than those who were referred by a physician, and especially when measured against physical therapy services owned by physicians. The services maintained continuity of care within the overall medical system and showed no difference in health care use 60 days after services were completed.
- Direct access to physical therapy services enhances communication with a patient's primary care provider by sending initial findings and ongoing progress that gives providers better information on the effectiveness of therapy or, the need for further diagnostic recommendations after thorough assessment by a physical therapist.
- Expanding the access to health care through the direct access to a physical therapist is a safe and effective approach towards not only having the correct professional assessing and treating neuro-musculo-skeletal dysfunction and movement impairment, but is reduces the time consuming and expensive approach required when patients are required to see a physician, PA or APRN first, who may have less specific training than a physical therapist in the area of movement dysfunction.
- Because physical therapists are health care professionals who help individuals maintain, restore, and improve movement towards optimum performance, they enhance quality of life issues by minimizing or correcting impairment of physical functions in a variety of settings such as senior citizen extended care facilities, school systems, industry, preschool programs, wellness centers, fitness centers, as well as out-patient facilities and hospitals.