December 18, 2019

Gift Tee, Director
Division of Practitioner Services, Hospital and Ambulatory Policy Group
Center for Medicare
Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Marge Watchorn, Deputy Director
Division of Practitioner Services, Hospital and Ambulatory Policy Group
Center for Medicare
Center for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

RE: Recognition of Physical Therapy Compact Privilege

Dear Director Tee and Deputy Director Watchorn:

The American Physical Therapy Association (APTA), representing more than 100,000 member physical therapists, physical therapist assistants, and students of physical therapy, respectfully request that the Centers for Medicare and Medicaid Services (CMS) clarify whether its regulations (42 CFR 484.115(h) and (i)) as currently written allow for recognition of physical therapists and physical therapist assistants who are licensed via the Physical Therapy Compact to satisfy federal licensure requirements.

The Physical Therapy (PT) Compact\(^1\) is an agreement between participating states that allows physical therapists and physical therapist assistants more mobility in where they practice, which increases access to care. Currently, 26 states are legally part of the PT Compact.

In order to purchase and maintain a compact privilege, a physical therapist or physical therapist assistant must meet each of these requirements:

- Hold a current, valid physical therapist or physical therapist assistant license in his or her home state of residence, which must be actively issuing compact privileges.

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\(^1\) [http://ptcompact.org/](http://ptcompact.org/)
• The home state must be a member of the PT Compact.
• The clinician cannot have any active encumbrances.
• The clinician cannot have any disciplinary action against his or her license for a period of two years.
• The state where a compact privilege is being sought must be a member of the PT Compact and must be actively issuing compact privileges.
• The clinician must successfully complete the jurisprudence requirement for the state(s) in which the clinician wants a compact privilege.

Recently, several physical therapists have had their enrollment application denied because the Medicare Administrative Contractor(s) were unable to recognize the compact privilege in order to approve enrollment. Pursuant to 42 CFR 484.115(h), CMS requires that a physical therapist be “licensed, if applicable, by the state in which practicing, unless licensure does not apply (emphasis added), and meets one of the following requirements…” Pursuant to 42 CFR 484.115(i), CMS requires that a physical therapist assistant be “licensed, registered, or certified as a physical therapist assistant, if applicable, by the state in which practicing, unless licensure does not apply (emphasis added) and meets one of the following requirements…”

42 CFR 410.60(c) puts forth special provisions for services furnished by physical therapists in private practice, stating that in order to qualify under Medicare as a supplier of outpatient physical therapy services, each individual physical therapist in private practice must be “legally authorized (if applicable, licensed, certified, or registered) (emphasis added) to engage in the private practice of physical therapy by the State in which he or she practices, and practice only within the scope of his or her license, certification, or registration.” Compact privileges are the legal equivalent of a traditional license issued by a state licensing board. The PT Compact allows eligible physical therapists and physical therapist assistants to practice in member states. Physical therapists and physical therapist assistants holding a compact privilege should have the same rights and responsibilities as those otherwise licensed, including the ability to enroll as a Medicare provider and receive reimbursement.

Therefore, we respectfully request that CMS clarify whether its regulations as currently written recognize physical therapists and physical therapist assistants who are licensed via the PT Compact as satisfying federal licensure requirements. We look forward to working together to ensure physical therapy compact privilege holders are recognized by CMS and its contractors as equivalent to traditional licensees. Should you have any questions or would like additional information, please do not hesitate to contact Kara Gainer, APTA’s Director of Regulatory Affairs, at karagainer@apta.org or 703/706-8547. Thank you for your consideration.

Sincerely,

Sharon L. Dunn, PT, PhD
Board-Certified Clinical Specialist in Orthopaedic Physical Therapy
President