

Where the PTA payment differential started

In passing the Bipartisan Budget Act of 2018, Congress required that by January 1, 2019, the Centers for Medicare and Medicaid Services establish a modifier to indicate when an outpatient physical therapy service is furnished in whole or in part by a physical therapist assistant. The use of the modifier was mandated as of Jan. 1, 2020, for outpatient therapy providers across most settings — including private practices, skilled nursing facilities, home health agencies, outpatient hospitals, rehabilitation agencies, and comprehensive outpatient rehabilitation facilities.

Starting January 1, 2022, outpatient physical therapy services covered under the Medicare physician fee schedule that are furnished at least in part by a PTA has been paid at 85% of the applicable fee schedule rate. (A similar modifier was designated for services provided by an occupational therapy assistant, which is also subject to the 85% payment differential).

CMS requires that the modifier appear on the claim line of the service alongside the GP therapy modifier that identifies services furnished under a physical therapy plan of care. The agency also finalized a de minimis standard for determining what constitutes "in whole or in part": When more than 10% of the service is furnished by a PTA the modifier must be added.