DEFINITION

Outpatient physical therapy services are provided when the limits under the approved State Plan are exhausted. The scope and nature of these services do not otherwise differ from Physical Therapy services furnished under the State Plan. Physical Therapy under HCBS is to be sued for habilitation or maintenance purposes or extended State Plan services.

MAINTENANCE PHYSICAL THERAPY

Maintenance physical therapy is provided when State Plan services are denied and there is not expectation that the member’s condition will improve significantly in a reasonable and predictable period of time. Maintenance physical therapy is reimbursable only under the HCBS program.

Extended State Plan physical therapy services are those defined in ARM 37.86.601. In addition to maintenance, physical therapy provided under HCBS may also be restorative in nature and be provided when State Plan therapy limits are in excess of what is allowable under State Plan Medicaid.

ELIGIBLE PROVIDERS

Physical therapy services must be provided by a licensed physical therapist. A physical therapist’s assistant, student or aide may assist in the practice of physical therapy under direct supervision of the licensed physical therapist that is responsible for and participates in the treatment program.

EFFECT ON SERVICE PLAN CARE COSTS

Only those physical therapy services provided under HCBS are included on the service plan cost sheet. The provision of State Plan physical therapy as defined in Arm 37.40.1102 should be reflected on the “Other Services and Informal Supports” section on the HCBS service plan.
SERVICE LIMITATIONS

Restorative physical therapy under HCBS may not be reimbursed until State Plan limits are met.