DATE: June 16, 2015

TO: Michigan House Health Policy

Representative Mike Callton, Chair
Representative Henry Vaupel,
Majority Vice-Chair
Representative Thomas Hooker
Representative Ken Yonker
Representative Joseph Graves
Representative Holly Hughes
Representative Klint Kesto
Representative John Bizon
Representative Lee Chatfield
Representative Kathy Crawford

RE: Prescriptive Authority of Chiropractors over Physical Therapists, HB 4712 – OPPOSED

Thank you Chairperson Callton, Majority Vice-Chair Vaupel, Minority Vice-Chair Darany and members of the House Health Policy committee for providing me this opportunity to speak about HB 4712 which provides for prescriptive authority of chiropractors over physical therapy.

My name is Dr. Susan Talley. I am a physical therapist and was a physical therapy faculty member at Wayne State University for over 30 years including 10 years as the Program Director. I am currently the Director of the entry-level Doctor of Physical Therapy program at the University of Michigan – Flint and the President of the Michigan Physical Therapy Association (MPTA).

Physical therapists are highly-educated, licensed health care professionals who examine, evaluate, and determine a plan of care for patients with a wide variety of conditions which interfere with the individual’s ability to move, limiting their ability to participate fully in their life roles. There are 9,835 Physical Therapists and 4,125 Physical Therapist Assistants licensed to practice in Michigan (6/1/2015, LARA).

Physical therapists earn the Doctor of Physical Therapy degree after 4 years of undergraduate and 3-4 years of graduate education, including 36 weeks of clinical internships. There are 6 DPT programs and 12 PTA programs in Michigan. Admission to physical therapy programs is highly competitive.
On behalf of the MPTA, I urge you to carefully consider the impact of prescriptive authority of chiropractors over physical therapy. This is not a simple issue without consequences – it is not merely adding “164” in two places in the Physical Therapy Section 17820 of the Public Health Code. Prescription is not the same as referral! **The MPTA urges you to vote NO on HB 4712.**

This bill seeks to expand the current chiropractic scope of practice by granting chiropractors prescriptive authority over physical therapists.

Changes to the Michigan Public Health Code should be based upon consumer safety, healthcare cost, or healthcare accessibility concerns. Although HB 4712 purports to remedy a consumer access to physical therapy problem, there is, in fact, no problem to be solved.

Public Act 260 of 2014 improved consumer access to physical therapy by allowing consumers to seek evaluation and treatment by a physical therapist without a prescription from an MD, DO, DDS, or DPM for up to 10 visits or 21 days, whichever occurs first. Consequently, a **chiropractor is already currently able to refer a patient to a physical therapist** for evaluation and treatment. Should the physical therapy care need to continue beyond the time/visit limit, a prescription from the patient’s medical physician can be obtained in a timely manner.

The Michigan Public Health Code only allows a medical doctor (MD), doctor of osteopathy (DO), dentist (DDS) and podiatrist (DPM) the authority to write a prescription for physical therapy. HB 4712 would add chiropractors to this list of prescribing medical physicians. The Public Health Code currently does not allow chiropractors to prescribe any health service.

Adding chiropractors to the list of licensees who may issue a prescription for physical therapy is highly problematic for multiple reasons.

- **Michigan law limits the chiropractic scope of practice**
  - From the Chiropractic section (Part 164) of the Michigan Public Health Code related to the “practice of chiropractic”, Section 33.16401(i):
    - *The diagnosis of human conditions and disorders of the human musculoskeletal and nervous systems as they relate to subluxations, misalignments, and joint dysfunctions. Theses diagnoses shall be for the purpose of detecting and correcting those conditions and disorders or offering advice to seek treatment from other health professionals in order to restore and maintain health.*
  - Both MDs and Dos have an unlimited scope of practice under Michigan law.
Both Dentists (DDS) and Podiatrists (DPM) have an unlimited scope of practice (diagnose, prescribe medications, perform surgeries, etc) with regard to the respective anatomic region that they treat, i.e. the mouth/jaw or foot, respectively.

- The term “prescription” is NOT interchangeable with “referral”. The term “prescribe” indicates a hierarchical relationship – not a collaborative relationship. “Prescription” is a highly specific directive that legally binds the prescriber to follow exactly the intervention that has been prescribed, constraining the professional judgment of the physical therapist. Referral means the forwarding of a patient for professional services by one health care professional to another health care professional or entity.

- It is inappropriate to give statutory prescriptive authority of one limited license profession (chiropractic) over another limited license profession (physical therapy).

- “Prescription” implies that the prescriber has sufficient knowledge of the practice of the professional to whom he/she is prescribing. The practice of chiropractic as stated in the Michigan Public Health Code is a very narrow scope of practice limited to “subluxations, misalignments, and joint dysfunctions.”

- Although there is some overlap in how both professions view and treat some joint dysfunctions, the philosophical approach to these problems can differ greatly. It is inappropriate for a chiropractor to direct the care provided by a physical therapist.

- The practice of physical therapy is much broader than the practice of chiropractic. It includes the examination, evaluation and treatment of individuals with a wide variety of problems (not just joint dysfunctions) related to neuromuscular, cardiovascular/pulmonary, integumentary and musculoskeletal diseases and disorders, including individuals with conditions such as stroke, diabetes, cerebral palsy, heart failure, spinal cord injury, Parkinson’s Disease, amputations, traumatic brain injury including concussion, chronic lung disease, and various non-orthopedic surgeries.

- Physical therapists and chiropractors currently may, and do, collaborate in the care of patients. However, they are also economic competitors in the out-patient musculoskeletal market. To allow one profession to be a statutory gatekeeper to another competing profession is highly concerning. We believe that this kind of anti-
competitive legislating is inconsistent with the standard toward which Michigan is striving.

- **The Centers for Medicare and Medicaid Services (CMS), clearly state that chiropractors are not appropriately qualified to approve a physical therapy plan of care for Medicare beneficiaries.** This conclusion was reached following a mult-year, multi-state demonstration project. Granting a chiropractor the authority to write a prescription for physical therapy is bad policy from the CMS perspective.

- **If chiropractors are given prescriptive authority over physical therapy, the potential will be created for a chiropractor to hire a physical therapist and prescribe physical therapy care in his/her own chiropractic office. The chiropractor could then prescribe physical therapy services and direct the patient only to the physical therapist that the chiropractor employs. This practice limits patient choice of physical therapy provider and creates the potential for over-utilization of physical therapy services.**

We have many examples of physical therapists and chiropractors in Michigan currently working collaboratively with each other to provide patient care and improve patients’ quality of life. MPTA’s opposition to this bill should not be interpreted as directed toward the chiropractic profession as we look forward to our continuing relationship.

MPTA understands the difficulty that licensed health care providers have in achieving parity in the Public Health Code. However, trying to do so by changing another profession’s practice act is not the way to achieve this. Chiropractic prescriptive authority over physical therapy does not solve any public health issue and is not in the best interest of patient care and choice.

HB 4712 is NOT a simple change to the Michigan Public Health Code. Prescriptive authority of chiropractors over physical therapists is not good for healthcare and it is not good for Michigan.

**We urge you to VOTE NO ON HB 4712.**

Sincerely,

Susan Ann Talley, PT, DPT, PhD(c)
President, Michigan Physical Therapy Association