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| BILL ANALYSIS |

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| C.S.H.B. 1080 |
| By: White |
| Human Services |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE**  It has been suggested that treatment by a physical therapist significantly improves patient outcomes while minimizing the costs associated with surgery and the long-term use of opioids or other prescription pain medications. Concerns have been raised regarding the requirement for a patient to obtain a prior referral for treatment by a physical therapist. C.S.H.B. 1080 seeks to address these concerns by removing the barrier of prior referral in order to increase access to care. |
| **CRIMINAL JUSTICE IMPACT**  It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY**  It is the committee's opinion that rulemaking authority is expressly granted to the Texas Board of Physical Therapy Examiners in SECTION 3 of this bill. |
| **ANALYSIS**  C.S.H.B. 1080 amends the Occupations Code to remove the authorization for a physical therapist to treat a patient for an injury or condition that was the subject of a prior referral under certain conditions and authorizes instead a physical therapist to treat a patient for an injury or condition in a manner described by statutory provisions relating to the practice of physical therapy without a referral if the physical therapist:   * has been licensed to practice physical therapy for at least one year; * is covered by professional liability insurance in the minimum amount required by Texas Board of Physical Therapy Examiners rule; and * either possesses a doctoral degree in physical therapy from an appropriately accredited program or institution or has completed at least 30 hours of continuing competence activities in the area of differential diagnosis.   The bill requires the physical therapist to obtain a referral from a referring practitioner before the physical therapist may continue treatment that exceeds 30 consecutive calendar days. The bill removes the cap on the number of sessions a physical therapist may treat a patient as an alternative to a maximum period of 30 consecutive calendar days of treatment and requires the physical therapist to obtain a referral from a referring practitioner before continuing treatment exceeding that period. The bill requires the board, not later than November 1, 2019, to adopt rules necessary to implement the bill's provisions. |
| **EFFECTIVE DATE**  September 1, 2019. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE**  While C.S.H.B. 1080 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.  The substitute does not include provisions relating to prior authorization request procedures for physical therapy services in Medicaid and the child health plan program. The substitute instead revises provisions relating to the practice by a physical therapist to authorize a physical therapist to treat a patient in a specified manner if the physical therapist meets certain criteria. The substitute requires the board to adopt rules to implement the authorization.  The substitute changes the bill's effective date. |
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