Federal Advocacy Update – February 2025

SAFE ACT Reintroduced to Congress:

APTA-supported legislation was re-introduced in the U.S. House of Representatives that would expand the role of falls screening and prevention by physical therapists and include PT falls prevention-related services in Medicare's "welcome" visit and annual wellness visits.

Known as the **Stopping Addiction and Falls for the Elderly Act**, aka SAFE Act, the legislation would make falls screening and services conducted by PTs a part of both the "Welcome to Medicare" visit, officially titled the Initial Preventive Physical Examination, and the Medicare Annual Wellness Visit. The bill was introduced by Reps. Carol Miller, R-W.Va., and Melanie Stansbury, D-N.M. APTA strongly supports the legislation.

SAFE Act Reintroduced to Prioritize Physical Therapy-Based Falls Prevention for Older Americans

United Healthcare Medicare Advantage Prior Authorization

On January 8, 2025, UnitedHealthcare (UHC) updated the prior authorization requirement for physical, speech and occupational therapy and chiropractic services that became effective Sept. 1, 2024, for UnitedHealthcare Medicare Advantage individual and group retiree members.

Providers must continue to submit a prior authorization request for the entire plan of care, including the full duration and number of visits requested. However, for new authorization requests starting on or after Jan. 13, 2025, up to the first 6 visits of a member's initial plan of care will be covered without conducting a clinical review when the first 6 visits take place within 8 weeks of the first date of service.

Only care plans requesting more than 6 visits or care plans exceeding 8 weeks will be assessed for medical necessity. The initial consultation/evaluation still does not require prior authorization.

Medicare Advantage: Updates to prior authorization requirement for outpatient therapy and chiropractic services | UHCprovider.com

Telehealth Extension:

On Dec. 19, 2024, the U.S. House of Representatives passed a slimmed down year-end legislative package to fund the federal government until March 14, 2025. Congress extended telehealth flexibilities under the Medicare program until **March 31, 2025**. CMS is communicating to the Medicare Administrative Contractors regarding telehealth claims

processing. Therapists who bill telehealth services should be on the lookout for communications from their MAC.

Articles of Interest

<u>UHC Lessens Prior Authorization Burden for PT Visits Under Many MA Plans | APTA</u>

Top APTA News Articles of 2024 | APTA

Medicare's New Exception to the Plan of Care Certification Requirement | APTA

How Do Physicians Perceive Physical Therapy? We Asked Them | APTA