February \_\_, 2019

Mr. Patrick Shanahan

Acting Secretary

Department of Defense

1400 Defense Pentagon

Washington, DC 20301

***Submitted electronically***

Dear Acting Secretary Shanahan:

I am writing in response to the request for comments on the Department of Defense (DoD) Office of the Secretary’s proposed rule RIN 0720–AB72 regarding proposed revisions to add physical therapy assistants (PTAs) and occupational therapy assistants (OTAs) as TRICARE-authorized providers. I strongly support the proposed rule.

Occupational therapy practitioners work in all settings to help people across the lifespan participate in the things they want and need to do through the therapeutic use of everyday activities. Occupational therapy practitioners address critical areas of physical, cognitive, and psychosocial function and consider self-care needs, participation capacity, mental health status, social supports, and environmental demands. As an occupational therapist or therapy assistant … [PLEASE FILL IN WITH YOUR EXPERIENCE AS AN OT OR OTA, IN PARTICULAR WITH TRICARE PATIENTS]

As an occupational therapy practitioner, my main concern is that patients who require medically necessary occupational therapy have access to occupational therapy services. This proposed rule would help improve TRICARE beneficiaries’ access to these services by increasing the number of qualified providers of occupational therapy services.

OTAs have long been recognized by the Centers for Medicare and Medicaid Services as qualified providers of occupational therapy services. I support the proposal to tie OTA qualifications under the TRICARE program to Medicare’s requirements. In addition, I support the proposal for TRICARE’s OTA supervision requirements to match Medicare’s as found in Chapter 15 of the Medicare Benefit Policy Manual. In order to be consistent with Medicare policy, I encourage the DoD to clarify in the final rule that “direct supervision” (required in private practice only) does not require the supervising occupational therapist to be in the room with the OTA, as stated in the proposed rule. Rather, Medicare’s definition of “direct supervision” requires the supervising occupational therapist to be in the office suite.

While I support the proposal to follow Medicare’s requirements regarding reimbursement of services provided by OTAs, I recommend that the DoD clarify in the final rule how OTA services are billed. In facility settings, therapy services are billed under the facility’s or organization’s provider ID number, not the supervising therapist’s provider ID. OTA services should be billed under the TRICARE-authorized supervising occupational therapist’s provider ID, or in a facility, under the facility’s or organization’s provider ID.

I encourage the DoD to adopt the proposed rule and promptly revise the necessary TRICARE manuals without delay in order to allow OTAs to begin treating TRICARE beneficiaries as soon as possible and help improve access to occupational therapy services.

Thank you for the opportunity to comment on the proposed addition of OTAs and PTAs to the TRICARE program.

Sincerely,­­­­­­

[ADD YOUR NAME

YOUR TITLE

YOUR FACILITY NAME]