December 7, 2000

Index: Medical Therapy Program

TO: ALL CALIFORNIA CHILDREN’S SERVICES (CCS) ADMINISTRATORS, MEDICAL DIRECTORS, MEDICAL CONSULTANTS, SUPERVISING THERAPISTS, MEDICAL THERAPY UNITS, STATE CHILDREN’S MEDICAL SERVICES (CMS) BRANCH AND REGIONAL OFFICE STAFF, AND THERAPY CONSULTANTS

SUBJECT: DUPLICATION OF PHYSICIAN OR THERAPY SERVICES BEING PROVIDED THROUGH THE CCS/ MEDICAL THERAPY PROGRAM (MTP)

BACKGROUND

The purpose of this Numbered Letter is to provide the CCS/MTP with clarification of the MTP policy relating to duplication of services provided in the MTP. It has been the policy of the MTP to “not provide physician or therapy services to a child when the child is receiving the same service for the same medical condition from another physician or therapist” (CCS Manual of Procedures, Chapter 4.8.8). Clarification of this policy is necessary due to the rapidly changing environment in which MTP services are provided. Other agencies serving the same children may be providing occupational therapy and/or physical therapy services and parents/legal guardians are seeking alternative intervention programs, which may conflict with the CCS-Approved Therapy Plan.

Medical therapy services are defined in the Interagency Regulations (Title 2, Section 60300(k) of the California Code of Regulations) as “occupational therapy or physical therapy services that require a medical prescription and are determined to be medically necessary by CCS.” MTP services are determined and prescribed by the Medical Therapy Conference (MTC) physician, or a CCS paneled physician of the appropriate specialty, who is recognized by the MTC to manage the child’s MTP eligible condition. MTP services include therapy assessment, treatment, consultation, instruction, monitoring, and oversight by the MTC physician. The purposes of these services are to achieve functional skills or prevent further loss of those skills, reduce the presence or severity of physical disability, and provide the family with skills in caring for their child through instruction and training.
A therapy plan developed by the Medical Therapy Unit (MTU) therapist represents the written recommendation for medically necessary occupational therapy or physical therapy based on the results of a therapy evaluation and consultation with the parent/legal guardian. The therapy plan is reviewed and approved by the MTC physician.

The MTP does not accept medical direction for therapy services from more than one physician or provide therapy services for a child receiving similar services from another therapy provider concomitantly. This policy is consistent with the:

- American Physical Therapy Association’s (APTA), “Guide for Professional Conduct”, Principle 3.3/B & C, the “Compendium of Interpretations and Opinions of the APTA Judicial Committee” and


The possibility of duplication of therapy services occurs when a child is receiving medically necessary therapy services from the MTP and similar services from another therapist of the same (or different) discipline, at a different location, with goals to produce the same functional outcome as those in the CCS-Approved Therapy Plan. Once the possibility of duplication of therapy services is identified, the concern must be resolved. As part of the determination, consideration must be given as to whether the services are similar to or are in conflict with the CCS-Approved Therapy Plan. The potential for conflict with the CCS-Approved Therapy Plan may also occur when an alternative intervention program developed by a non-therapist (such as a teacher or chiropractor), is being provided. When the latter situation exists, the steps to be followed for resolving what is perceived to be in conflict with the CCS-Approved Therapy Plan are the same steps identified in this Numbered Letter in the Policy Implementation Guidelines for resolution of duplication of therapy services.

POLICY GUIDELINES

Whenever possible, the MTP supports the parent’s choice to select between the CCS-Approved Therapy Plan and the therapy plan of another therapy provider of the same (or different) discipline or an alternative intervention program provided by a non-therapist. The MTP therapy staff are encouraged to consult and work in
collaboration with the other therapist or non-therapist when the therapy services or alternative program do not duplicate or conflict with the CCS-Approved Therapy Plan.

Effective the date of this letter, it is acceptable for two therapy providers of the same or different disciplines or a non-therapist providing an alternative intervention program to provide services concomitantly for a MTP eligible child. The conditions under which concomitant services may be provided are when:

1. The therapy services or alternative intervention program have been identified through the child’s Individualized Family Service Plan (IFSP), Individual Education Plan (IEP), 504 Plan, or private resources and does not duplicate or conflict with the CCS-Approved Therapy Plan.

2. Each therapist of the same (or different) discipline has a therapy plan or the non-therapist has an alternative intervention program with different goals that do not duplicate or conflict with the CCS-Approved Therapy Plan.

3. Each therapist of the same (or different) discipline has different goals and objectives which require special expertise or access to modalities/equipment, and when combined, are necessary to complete the CCS-Approved Therapy Plan.

Concomitant services for a child served by the MTP are considered a duplication of therapy services or in conflict with the CCS-Approved Therapy Plan when:

1. Each therapist of the same (or different discipline) has a therapy plan which is copied or similar in provision of services to the CCS-Approved Therapy Plan and results in over-utilization of medically necessary therapy services.

2. The therapy plan of each therapist of the same or different discipline or the non-therapist’s alternative intervention program, negates or contradict the CCS-Approved Therapy Plan and may result in harm to the child and/or allow loss of function.
3. Therapists of the same discipline divide, by frequency, the provision of therapy services identified in the CCS-Approved Therapy Plan at two separate locations resulting in the lack of consistency and daily access to the child’s treatment records maintained in the MTP chart.

POLICY IMPLEMENTATION GUIDELINES

1. The MTU therapist shall review with the Unit Supervisor/Chief Therapist or Regional Office Therapy Consultant for dependent counties, when it has been identified that a possible duplication or conflict with the CCS-Approved Therapy Plan among the various provider types may exist.

2. When the Unit Supervisor/Chief Therapist or Regional Office Therapy Consultant for dependent counties determines there is a possible duplication or conflict with the CCS-Approved Therapy Plan, the parent/legal guardian shall be offered an appointment with the MTC physician for review of all therapy services or the alternative intervention program services the child is receiving.

   a. The notification of the MTC appointment must state the purpose of the appointment and that the conference may result in a change of medically necessary occupational therapy and/or physical therapy services provided by the MTP.

   b. The local education agency (LEA), with parent's/legal guardian’s consent, shall be notified of the appointment if the child has an IEP or IFSP.

3. The MTC physician shall review the therapy services and/or the alternative intervention program being provided or recommended for the child. The review shall include available documentation that describes the therapy services provided by another therapist or the alternative intervention program provided by a non-therapist. The MTC physician shall determine if the duplication or conflict with the CCS-Approved Therapy Plan can be resolved.

4. The parent/legal guardian shall be informed by the MTC physician of the decision regarding duplication or conflict with the CCS-Approved Therapy Plan at the time of the conference.
5. If the parent/legal guardian is in agreement with the decision of the MTC physician, the MTP therapy staff will proceed with the provision of the CCS-Approved Therapy Plan and notify the LEA as defined through the Interagency Regulations.

6. If the parent/legal guardian is not in agreement with the decision of the MTC physician, the parent/legal guardian will be offered a referral to an expert physician per section 42702(a), California Code of Regulations, Title 22.

   a. The expert physician shall be asked to determine what therapy services are medically necessary while the child is concomitantly receiving additional therapy services or participating in an alternative intervention program.

   b. The county will provide the expert physician with a copy of the CCS-Approved Therapy Plan, the MTC report, and any available information describing the other therapist's services and/or the non-therapist's alternative intervention program.

   c. Upon receipt of the expert physician's report, the CCS program will provide those occupational therapy and/or physical therapy services identified by the expert physician as being medically necessary and not in conflict with the CCS-Approved Therapy Plan.

7. If the parent/legal guardian is not in agreement with the MTC physician and chooses not to have the child evaluated by the expert physician, the MTP will not provide therapy services that have been identified by the MTC physician as duplication of or in conflict with the CCS-Approved Therapy Plan.

8. If the parent/legal guardian fails to keep the MTC appointment to review the duplication/conflict of services concerns, having been given reasonable accommodation, the MTC physician shall review available documents and determine if there's duplication of, or conflict with, the CCS-Approved Therapy Plan.

   a. If no duplication or conflict is identified, the parent/legal guardian will be notified that provision of the CCS-Approved Therapy Plan will be continued.

   b. If duplication or conflict is identified, the parent/legal guardian will be notified that the CCS-Approved Therapy Plan cannot be continued pending resolution and may result in Notice Of Action (NOA). The LEA will also be notified.
c. Following notification of the decision, the parent/legal guardian can choose to follow the steps in 7 and 8 above.

If you have any questions regarding implementation of this policy, please contact the therapy consultant in the regional office.

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