

Physiatric Involvement During Therapy Programs

It is the responsibility of the physiatrist to prescribe, direct, and supervise therapy programs. Physiatrists also have the responsibility to perform other treatments that may include: a comprehensive assessment of all related medical problems; manual medical techniques and therapeutic injections; prescription of medications, laboratory, radiological, therapeutic devices, and other diagnostic services; as well as psychosocial counseling and education for the patient and the family.

Rehabilitation is a dynamic process that is highly individualized and the frequency of follow-up care cannot always be known in advance. Complications of physiatric care and treatment may include adverse effects of medications, therapy, and recurrent medical and/or psychological problems. It is generally unreliable to predict the frequency of follow-up evaluations that will be needed based on an initial evaluation. It may even be necessary to perform evaluations daily for a period of time if observations are required to assess how a patient's treatment is progressing to ensure the most rapid outcome.

It is the position of the American Academy of Physical Medicine and Rehabilitation that attempts by third-party payers to limit reimbursement for physiatric visits during a specific period of prescribed therapy without adequate review and consideration of circumstances is potentially harmful to the patient and that this practice should be stopped.

Quality Assessment Subcommittee
Approved Medical Practice Committee 5/93
Approved BOG 9/93
Approved BOG 8/2012
930960