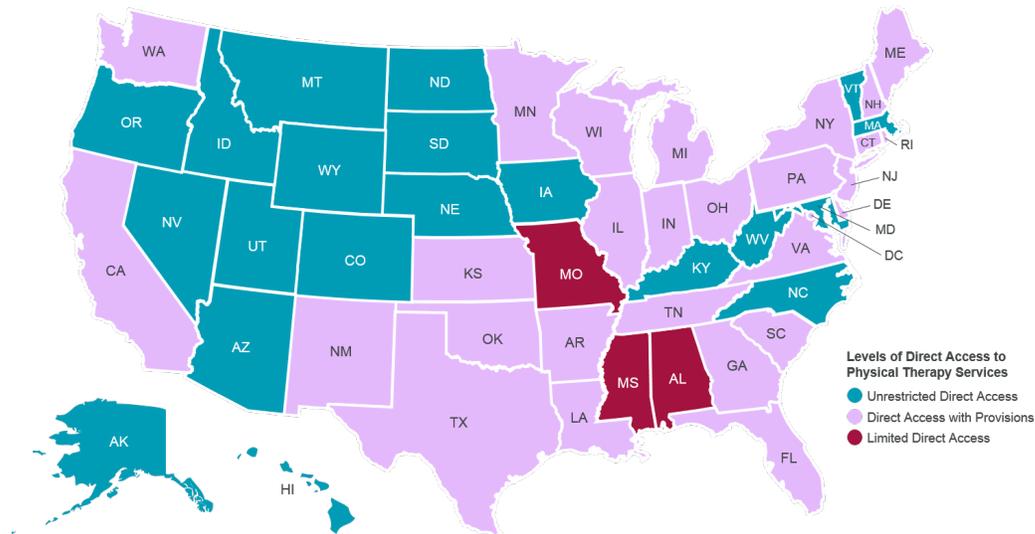


Levels of Patient Access to Physical Therapist Services in the US



Although all 50 states, Washington, D.C., and the U.S. Virgin Islands enjoy a form of direct access to physical therapist services, provisions and limitations vary among jurisdictions. This map and the key below identify each jurisdiction's level of direct access. Starting on Page 2 is a summary of the language (if any) in each state's practice act related to direct access. (Data current as of February 2021.)



Limited Patient Access (Three States)

Access to evaluation, fitness, and wellness and limited treatment only to certain patient populations or under certain circumstances (e.g., treatment restricted to patients with a previous medical diagnosis or subject of a previous physician referral).

Alabama Missouri Mississippi

Patient Access With Provisions (27 States, Washington, D.C., U.S. Virgin Islands)

Access to evaluation and treatment with some provisions such as a time or visit limit, or referral requirement for a specific treatment intervention such as needle EMG or spinal manipulation.

Arkansas	Georgia	Michigan	Ohio	Texas
California	Indiana	Minnesota	Oklahoma	U.S. Virgin Islands
Connecticut	Illinois	New Hampshire	Pennsylvania	Virginia
Delaware	Kansas	New Jersey	Rhode Island	Washington
Florida	Louisiana	New Mexico	South Carolina	Washington, D.C.
	Maine	New York	Tennessee	Wisconsin

Unrestricted Patient Access (20 States)

No restrictions or limitations whatsoever for treatment absent a referral.

Alaska	Idaho	Massachusetts	North Carolina	Utah
Arizona	Iowa	Montana	North Dakota	Vermont
Colorado	Kentucky	Nebraska	Oregon	West Virginia
Hawaii	Maryland	Nevada	South Dakota	Wyoming

State and Direct Access Enactment Year — Level of Direct Access to Physical Therapy Services

Ala., 2012 — Limited

May perform physical therapy services without a prescription or referral under the following circumstances:

- To children with a diagnosed developmental disability pursuant to the patient's plan of care.
- As part of a home health care agency pursuant to the patient's plan of care.
- To a patient in a nursing home pursuant to the patient's plan of care.
- Related to conditioning or to providing education or activities in a wellness setting for the purpose of injury prevention, reduction of stress, or promotion of fitness.

To an individual for a previously diagnosed condition or conditions for which physical therapy services are appropriate after informing the health care provider rendering the diagnosis. The diagnosis shall have been made within the previous 90 days. The physical therapist shall provide the health care provider who rendered such diagnosis with a plan of care for physical therapy services within the first 15 days of physical therapy intervention.

Alaska, 1986 — Unrestricted

No restrictions to access.

License revocation or suspension when failure to refer a patient to another qualified professional when the patient's condition is beyond PT training.

Ariz., 1983 — Unrestricted

No restrictions to access.

A physical therapist shall refer a client to appropriate health care practitioners if the PT has reasonable cause to believe symptoms or conditions are present that require services beyond the scope of practice and if PT is contraindicated.

Ark., 1997 — Provisions

Requires physician referral for bronchopulmonary hygiene, debridement, and wound care.

Calif., 1968 (Revised 2013, 2018) — Provisions

- PT must refer the patient to their physician if, at any time, the patient has signs or symptoms of a condition that requires treatment beyond the scope of practice of a physical therapist or the patient is not progressing toward documented treatment goals as demonstrated by objective, measurable, or functional improvement.
- PT shall disclose to the patient any financial interest he or she has in treating the patient and, if working in a physical therapy corporation, shall comply with Chapter 1, Article 6, commencing with Section 650.
- With the patient's written authorization, the physical therapist shall notify the patient's physician and surgeon, if any, that the physical therapist is treating the patient.
- The physical therapist shall not continue treating the patient beyond 45 calendar days or 12 visits, whichever occurs first, without receiving, a dated signature on the physical therapist's plan of care from the patient's physician, surgeon, or podiatrist indicating approval of the physical therapist's plan of care. Approval of the physical therapist's plan of care shall include an in-person patient examination and evaluation of the patient's condition and, if indicated, testing by the physician and surgeon or

podiatrist, except when providing wellness physical therapy services, or providing physical therapy services pursuant to a family service plan or individualized education plan and the individual does not have a medical diagnosis. (Effective Jan. 1, 2019)

- Must provide notice to the patient, orally and in writing, in at least 14-point type and signed by the patient indicating they are receiving direct physical therapy treatment services and may continue to receive direct physical therapy treatment services for a period of up to 45 calendar days or 12 visits, whichever occurs first, after which time a physical therapist may continue providing you with physical therapy treatment services only after receiving, a dated signature on the physical therapist's plan of care indicating approval of the physical therapist's plan of care and that an in-person patient examination and evaluation was conducted by the physician and surgeon or podiatrist.

Colo., 1988 — Unrestricted

No restrictions to access.

- Disciplinary action when failure to refer a patient to another qualified professional when the patient's condition is beyond PT training.
- Prohibits diagnosis of disease.

Conn., 2006 — Provisions

- Earned a bachelor's degree and has practiced physical therapy for at least four out of the most recent six years or earned a master's degree or higher,
- Must refer any person receiving such treatment to an appropriate licensed practitioner of the healing arts if, upon examination or reexamination, the same condition for which the person sought physical therapy does not demonstrate objective, measurable, functional improvement in a period of 30 consecutive days or at the end of six visits, whichever is earlier.
- Grade V spinal manipulation, such treatment shall only be performed upon the referral or by a licensed physical therapist who (i) earned a bachelor's degree prior to Jan. 1, 1998, and has practiced physical therapy for at least four out of the most recent six years of his or her clinical practice, or earned a master's degree or higher in physical therapy from an accredited institution of higher education, and (ii) holds a specialist certification in orthopedic physical therapy from the American Physical Therapy Association, or proof of completion of 40 hours of course work in manual therapy, including Grade V spinal manipulation.
- Prohibits diagnosis of disease.

D.C., 2007 — Provisions

Must refer patient to primary care provider if no reasonable progress is made within 30 days.

Del., 1993 — Provisions

- Permits treatment with or without referral by a licensed medical or osteopathic physician.
- Must refer patient if symptoms are present for which treatment is outside scope of PT.
- May treat a patient for up to 30 days after which a physician must be "consulted."
- Prohibits substantial modification of prescriptions accompanying a patient.

Fla., 1992 (Revised 2016) — Provisions

- Must refer patient or consult with health care practitioner if the patient's condition is outside scope of PT.
- If PT treatment is required beyond 30 days for a condition not previously assessed by a practitioner of record, the PT shall obtain a practitioner of record who will review and sign the plan.
- Requirement that practitioner of record review and sign plan of care does not apply when a patient has been physically examined by a physician licensed in another state, diagnosed by the physician as having a condition for which physical therapy is required, and the PT is treating that condition.
- Prohibits PTs from implementing plan of treatment for patients in acute care settings including hospitals, ambulatory surgical centers, and mobile surgical facilities.

Ga., 2006 (Revised 2015) — Provisions

To practice via direct access, a PT must meet one the following requirements:

- Have a doctorate in physical therapy or equivalent degree from an accredited institution plus two years of clinical practice experience.
- Have a doctorate in physical therapy or equivalent and either (a) post graduate certification, (b) American Board of Physical Therapy Specialties Board Certification; or (c) residency or fellowship training.
- Five years of clinical practice experience.

After 21 days or eight visits from the initiation of a physical therapy plan of intervention, the PT must receive a referral from the patient's physician or dentist. The day and visit limitations contained in this subparagraph does not apply:

- In the case of services provided for health promotion, wellness, fitness, or maintenance purposes, in which case the physical therapist shall refer a client seen for health promotion, wellness, fitness, or maintenance purposes to an appropriate physician if the client exhibits or develop/s signs and symptoms beyond the scope of practice of the physical therapist.
- In the case of a patient diagnosed within the previous nine months with a neuromuscular or developmental condition when the evaluation, treatment, or services are being provided for problems or symptoms associated with that previously diagnosed condition.
- In the case of a patient diagnosed within the previous 90 days with a chronic musculoskeletal condition and noted by a current relevant document from an appropriate licensed health care provider.

PTs must provide a written disclosure to direct access patients that a physical therapy diagnosis is not a medical diagnosis by a physician or based on radiological imaging and that such services might not be covered by the patient's health plan or insurer.

If dry needling treatment is going to be performed on a patient seen via direct access, the PT must first consult with the patient's physician (or physician assistant).

Hawaii, 2010 — Unrestricted

No restrictions to access.

Failing to immediately refer any patient to an appropriate health care provider if there is reasonable cause to believe that the patient's condition is beyond the physical therapist's scope of practice or is a condition for which physical therapy is contraindicated is an act professional misconduct.

Idaho, 1987 — Unrestricted

No restrictions to access.

- Prohibits the use of radiology, surgery, or medical diagnosis of disease.
- Must refer when patient condition is outside PT scope of practice.

Ill., 1988 (Revised 2018) — Provisions

- A physical therapist providing services without a referral from a health care professional must notify the patient's treating health care professional within five business days after the patient's first visit that the patient is receiving physical therapy. This does not apply to physical therapy services related to fitness or wellness, unless the patient presents with an ailment or injury.
- A physical therapist shall refer a patient to the patient's treating health care professional of record or, in the case where there is no health care professional of record, to a health care professional of the patient's choice, if:
 - The patient does not demonstrate measurable or functional improvement after 10 visits or 15 business days, whichever occurs first, and continued improvement thereafter.
 - The patient returns for services for the same or similar condition after 30 calendar days of being discharged by the physical therapist.
 - The patient's condition, at the time of evaluation or services, is determined to be beyond the scope of practice of the physical therapist.
- Wound debridement services may only be provided by a physical therapist with written authorization from a health care professional.
- A physical therapist shall promptly consult and collaborate with the appropriate health care professional anytime a patient's condition indicates that it may be related to temporomandibular disorder so that a diagnosis can be made by that health care professional for an appropriate treatment plan.

Ind., 2013 (Revised 2019) — Provisions

- May evaluate and treat for no more than 42 calendar days beginning with the date of the initiation of treatment without a referral. If additional treatment is needed, the PT shall obtain a referral from the individual's provider (physician, podiatrist, psychologist, chiropractor, dentist, nurse practitioner, or physician assistant).
- Order or referral from a physician, osteopath, or chiropractor required for spinal manipulation. Referring physician, osteopath, or chiropractor must have examined the patient before issuing the order or referral. "Spinal manipulation" defined as "a method of skillful and beneficial treatment by which a physical therapist uses direct thrust to move a joint of the patient's spine beyond its normal range of motion, but without exceeding the limits of anatomical integrity."
- Order or referral from physician, osteopath, or podiatrist required for sharp debridement. "Sharp debridement" defined as "the removal of foreign material or dead tissue from or around a wound, without anesthesia and with generally no bleeding, through the use of: (A) a sterile scalpel; (B) scissors; (C) forceps; (D) tweezers; or (E) other sharp medical instruments; in order to expose health tissue, prevent infection, and promote healing."

Iowa, 1988 — Unrestricted

No restrictions to access.

- Permits evaluation and treatment with or without a referral from a physician, podiatric physician, dentist or chiropractor, except that a hospital may require that PT evaluation and treatment provided in the hospital be done only upon prior review by and authorization of a member of the hospital's medical staff.
- Prohibits PTs from practicing operative surgery or osteopathic or chiropractic manipulation or administering or prescribing drugs or medicine.

Kan., 2007 (Revised 2013) — Provisions

- May evaluate and initiate treatment on a patient without a referral. If providing treatment without a referral and patient is not progressing toward documented treatment goals as demonstrated by objective, measurable, or functional improvement, or any combination thereof, within 10 visits or 15 business days from the initial treatment visit following the initial evaluation visit, the PT shall obtain a referral from an appropriate licensed health care practitioner (physician, podiatrist, physician assistant, advanced practice registered nurse, chiropractor, dentist, or optometrist).
- When a patient self-refers to a PT, the PT shall provide written notice to the patient, prior to the commencement of treatment, that a physical therapy diagnosis is not a medical diagnosis by a physician.
- Wound debridement may only be performed after approval is obtained from a physician or other licensed health care practitioner.
- A hospital or ambulatory surgery center may require a physician order or referral for physical therapy services for a patient currently being treated in such facility.
- Physical therapists may provide, without a referral, services which do not constitute treatment for a specific condition, disease or injury to: (1) Employees solely for education and instruction related to workplace injury prevention; or (2) the public for the purpose of fitness, health promotion and education.
- Physical therapists may provide services without a referral to special education students who need physical therapy services to fulfill the provisions of their individualized education plan or individualized family service plan.

Ky., 1987 — Unrestricted

No restrictions to access.

- Must refer to a physician or dentist when patient condition is beyond scope of practice.
- When basis for treatment is referral, the PT may confer with the referring physician, podiatrist, dentist or chiropractor.

La., 2016 — Provisions

May perform physical therapy services without a prescription or referral under the following circumstances:

- All PTs who have a DPT or five years of clinical practice experience are eligible to implement physical therapy treatment with or without a prescription or referral for 30 calendar days.
- After 30 days a referral is required by a physician, dentist, podiatrist, or chiropractor, unless there is measurable or functional improvement.

Maine, 1991 — Provisions

When treating a patient without referral from a doctor of medicine, osteopathy, podiatry, dentistry, or chiropractic, the PT:

- Cannot make a medical diagnosis.
- Must refer the patient to a licensed doctor of medicine, osteopathy, podiatry, dentistry, or chiropractic if no improvement in the patient is documented within 30 days of initiation of treatment.
- Must consult or refer the patient to a licensed doctor of medicine, surgery, osteopathy, podiatry, dentistry, or chiropractic if treatment is required beyond 120 days.

Without a referral PT may not apply manipulative thrust to the vertebrae of the spine or administer drugs.

- Employers are not liable for charges under workers' compensation for services unless the employee has been referred to the PT.
- Must make referral when beyond the scope of PT practice.

Md., 1979 — Unrestricted

No restrictions to access.

Mass., 1982 — Unrestricted

No restrictions to access.

- Regulation sets PT Code of Ethics as standard for referral relationships. PT will refer to a licensed practitioner of medicine, dentistry or podiatry if symptoms are present of which PT is contraindicated or which symptoms are indicative of conditions for which treatment is outside scope of PT practice. PT will also provide ongoing communication with the licensed referring practitioner.

PT must disclose to patient any financial interest if the referring source derives income from the PT services.

Mich., 1978 (Revised 2017) — Provisions

May provide treatment without a prescription from a licensed physician, etc. under the following conditions:

- For 21 days or 10 treatments, whichever occurs first. The physical therapist must determine the patient's condition requires physical therapy before delegating interventions to a physical therapist assistant.
- The patient is seeking physical therapy services for purposes of injury prevention or promoting fitness.
- Must refer the patient to an appropriate healthcare professional if there is reasonable cause to believe that symptoms or conditions are present that require services beyond the scope of practice of physical therapy.
- Must consult with an appropriate healthcare professional if the patient does not show reasonable response to treatment in a time period consistent with the standards of practice as determined by the Board of Physical Therapy.

Minn., 1988 (Revised 2008) — Provisions

- Medical diagnosis prohibited.
- Patient may be treated by a physical therapist without an order or referral from a physician, chiropractor, dentist, podiatrist, or advanced practice nurse for up to 90 days.
- Allows a physical therapist, who has been licensed for less than one year, to provide physical therapy without referral when working in collaboration with a physical therapist who has more than one year of experience.

- Physical therapist must refer a patient to a licensed health care professional at any time during care if the patient's condition is beyond the scope of the physical therapist.
- Allows direct access without time limits for patients being treated for prevention, wellness, education, or exercise.

Miss., 2006 — Limited

May perform physical therapy services without a prescription or referral under the following circumstances:

- To children with a diagnosed developmental disability pursuant to the patient's plan of care.
- As part of a home health care agency pursuant to the patient's plan of care.
- To a patient in a nursing home pursuant to the patient's plan of care.
- Related to conditioning or to providing education or activities in a wellness setting for the purpose of injury prevention, reduction of stress or promotion of fitness.
- To an individual for a previously diagnosed condition or conditions for which physical therapy services are appropriate after informing the health care provider rendering the diagnosis. The diagnosis must have been made within the previous 180 days. The physical therapist shall provide the health care provider who rendered the diagnosis with a plan of care for physical therapy services within the first 15 days of physical therapy intervention.

Mo., 1999 — Limited

Physical therapists may:

- Provide educational resources and training develop fitness or wellness programs for asymptomatic persons or provide screening or consultative services.
- Treat any person with a recurring self-limited injury within one year of diagnosis by an approved health care provider or a chronic illness that has been previously diagnosed by an approved health care provider. The physical therapist shall:
 - Contact the patient's current approved health care provider within seven days of initiating physical therapy services under this subsection.
 - Not change an existing physical therapy referral available to the physical therapist without approval of the patient's current approved health care provider.
 - Refer to an approved health care provider any patient whose medical condition at the time of examination or treatment is determined to be beyond the scope of practice of physical therapy.
 - Refer to an approved health care provider any patient whose condition for which physical therapy services are rendered under this subsection has not been documented to be progressing toward documented treatment goals after six visits or fourteen days, whichever first occurs.

Notify the patient's current approved health care provider prior to the continuation of treatment if treatment rendered under this subsection is to continue beyond 30 days. The physical therapist shall provide such notification for each successive period of 30 days.

Mont., 1987 — Unrestricted

No restrictions to access.

- PT evaluation and treatment procedures may be performed by a licensed PT without referral.
- License revocation if PT practices beyond the scope and limitation of training and education.

Neb., 1957 — Unrestricted

No restrictions to access.

- Performing procedures outside of the scope of PT practice constitutes unprofessional conduct.

Nev., 1985 — Unrestricted

No restrictions to access.

- Physical therapy does not include the diagnosis of physical disabilities, the occupation of a masseur who massages only the superficial soft tissues of the body, and chiropractic adjustment.

N.H., 1988 — Provisions

A physical therapist shall refer a patient or client to appropriate health care practitioners when:

- The physical therapist has reasonable cause to believe symptoms or conditions are present that require services beyond the scope of practice.
- Physical therapy is contraindicated.
- There is no documented improvement within 25 calendar days of the initiation of treatment.

N.J., 2003 — Provisions

A physical therapist shall refer a patient to a health care professional licensed to practice dentistry podiatry or medicine and surgery in this state or other appropriate licensed health care professional:

- When the physical therapist doing the examination evaluation or intervention has reason to believe that physical therapy is contraindicated, or symptoms or conditions are present that require services outside the scope of practice of the physical therapist.
- When the patient has failed to demonstrate reasonable progress within 30 days of the date of the initial treatment.

Not more than 30 days from the date of initial treatment of functional limitation or pain, a physical therapist shall inform the patient's licensed health care professional of record regarding the patient's plan of care. In the event there is no identified licensed health care professional of record, the physical therapist shall recommend that the patient consult with a licensed health care professional of the patient's choice. In a school setting, the schedule of physical therapy services shall be reported to the child study team by the physical therapist within 30 days of the date of initial treatment.

N.M., 1989 (Revised 2015) — Provisions

A PT evaluate and treat absent a referral; however, the PT must refer a patient to the patient's licensed health care provider if, after 30 days of initiating physical therapist intervention, the patient has not made measurable or functional improvement with respect to the primary complaints. If the patient is making measurable progress and improving, the 30-day limit does not apply.

Additionally, the 30-day proviso does not apply to:

- Treatment provided for a condition related to a chronic neuromuscular or developmental condition for a patient previously diagnosed as having a chronic neuromuscular or developmental condition.
- Services provided for health promotion, wellness, fitness.
- Services provided to a patient who is participating in a program pursuant to an individual education plan or individual family service plan under federal law.

N.Y., 2006 — Provisions

- Treatment can be rendered by a Licensed PT without a referral for 10 visits or 30 days, whichever comes first.
- Licensed PT must have practiced PT on a full-time basis for no less than three years; be of at least twenty-one years of age.
- PT must provide written notification that services without a referral might not be covered by the patient's health plan or insurer; notification must state that said services might be covered by health plan or insurer with a referral. Must keep a copy of the written notification in the patient's file.

N.C., 1985 (Revised 2019) — Unrestricted

No restrictions to access.

- Medical diagnosis of disease or treatment beyond the scope of physical therapy must be referred as specified in G.S. 90-270.35.
- Failure to refer to a licensed medical doctor or dentist when patient's condition is beyond scope of PT practice is considered unlawful practice.

N.D., 1989 — Unrestricted

No restrictions to access.

- License revocation when failure to refer to a licensed health care professional any patient whose medical condition is beyond the scope of PT practice.

Ohio, 2004 — Provisions

- Must have a master's degree or two years' experience.
- If no progress in 30 days, must refer to appropriate health care provider.
- PT shall inform the patient's health care provider within five days of initial evaluation.
- If orthotics are needed, PT is limited to certain applications of orthotic devices.

Okla. — Provisions

- Evaluation and treatment allowed without a referral for 30 days.
- Referral is required for workers' compensation claims.

Ore., 1993 (Revised 2005, 2007, 2013) — Unrestricted

No restrictions to access.

A licensed physical therapist shall immediately refer a person being treated by the licensed physical therapist to a provider of care if the person exhibits symptoms:

- That require treatment or diagnosis by a provider of medical care.
- For which physical therapy is contraindicated.
- That the physical therapist does not know how to treat.
- For which treatment is outside the scope of practice of physical therapy.

Pa., 2002 — Provisions

- Licensee may apply to the board for a certificate of authorization to practice physical therapy under this act without the required referral.
- A certificate of authorization to practice physical therapy without a referral under subsection (a) shall not authorize a physical therapist either to treat a condition in any person which is a nonneurologic, nonmuscular, or nonskeletal condition or to treat a person who has an acute cardiac or acute pulmonary condition unless the physical therapist has consulted with the person's licensed physician, dentist or podiatrist regarding the person's condition and the physical therapy treatment plan or has referred the person to a licensed physician, dentist or podiatrist for diagnosis and referral.
- The certificate of authorization shall be displayed by the certificate holder in a manner conspicuous to the public.
- The renewal of the certificate of authorization shall coincide with the renewal of the license of the licensee.
- A physical therapist with a certificate of authorization may treat a person for up to 30 days from the date of the first treatment. A physical therapist shall not treat a person beyond 30 days from the date of the first treatment unless he or she has obtained a referral from a licensed physician, dentist or podiatrist.

R.I., 1992 — Provisions

- Must disclose to the patient in writing the scope and limitations of the practice of physical therapy and shall obtain their consent in writing.
- Must refer the patient to a doctor of medicine, osteopathy, dentistry, podiatry, or chiropractic within 90 days after the treatment commenced (unless the treatment has concluded).
- Must have one-year clinical experience to practice without referral.

S.C., 1998 — Provisions

- In the absence of a referral, must refer the patient to a licensed medical doctor or dentist if providing PT services beyond 30 days after the initial evaluation.
- Must refer patient to a licensed medical doctor or dentist if patient's condition is beyond scope of PT.

S.D., 1986 — Unrestricted

No restrictions to access.

Tenn., 1999 (Revised 2007, 2020) — Provisions

- In the absence of a referral by a doctor of medicine, chiropractic, dentistry, podiatry, or osteopathy, the physical therapist may conduct a initial evaluation and may provide physical assessments or instruction, including a recommendation of exercise to an asymptomatic person.
- In emergency situations, may provide assistance to a person to the best of their ability; immediately afterward referring the person to the appropriate health care practitioner.
- May treat a patient without referral when, within the scope of PT practice, the following are met:
 1. The patient's physician has been notified.
 2. If within 30 days the PT determines that the patient has made no progress, the PT discontinues services and refers the patient to a physician.
 3. Services are not provided beyond 90 days without the PT consulting with the patient's physician.
 4. If the patient was previously diagnosed by a physician with chronic, neuromuscular, or developmental conditions, and the evaluation, treatment, or services are being provided for

problems or symptoms associated with one or more of those previously diagnosed conditions, then 2 and 3 above do not apply.

5. If the PT believes the patient has symptoms or conditions that require services beyond the scope of PT practice, that reasonable therapeutic progress is not being achieved, or that treatment is contraindicated, the PT refers the patient to appropriate health care practitioners.

Texas, 1991 (Revised 2019, 2021) — Provisions

A physical therapist may evaluate and treat a patient without a referral for up to 10 days under the following conditions:

- The physical therapist has been licensed to practice for at least one year, and
- Is covered by professional liability insurance in the minimum amount required by the board.
- Prohibits the diagnosis of disease.

A physical therapist may evaluate and treat a patient without a referral for no more than 15 days under the following conditions:

- The PT possesses a doctoral degree.
- Has completed a residency or fellowship.
- Possesses a certification from an entity approved by the licensing board.

A physical therapist who treats a patient without a referral shall obtain from the patient a signed disclosure on a form prescribed by the board in which the patient acknowledges that:

- Physical therapy is not a substitute for a medical diagnosis by a physician.
- Physical therapy is not based on radiological imaging.
- A physical therapist cannot diagnose an illness or disease.
- The patient's health insurance may not include coverage for the physical therapist's services.

Utah, 1985 — Unrestricted

No restrictions to access

- Prohibits diagnosis of disease, surgery, acupuncture, or X-ray for diagnostic or therapeutic uses.

Vt., 1988 — Unrestricted

No restrictions to access.

Va., 2001 (Revised 2007, 2015, 2021) — Provisions

A physical therapist who has completed a doctor of physical therapy program or who has obtained a certificate of authorization pursuant to Section 54.1-3482.1 may evaluate and treat a patient for no more than 60 consecutive days after an initial evaluation without a referral under the following conditions:

- The patient is not receiving care from any licensed doctor of medicine, osteopathy, chiropractic, podiatry, or dental surgery; a licensed nurse practitioner acting in accordance with a practice agreement; or licensed physician assistant acting under supervision of a physician, for the symptoms giving rise to the presentation at the time of the presentation to the physical therapist for physical therapy services, or
- The patient is receiving care from any licensed doctor of medicine, osteopathy, chiropractic, podiatry, or dental surgery; a licensed nurse practitioner acting in accordance with a practice agreement; or licensed physician assistant acting under supervision of a physician, at the time of his presentation

to the physical therapist for the symptoms giving rise to the presentation for physical therapy services; and

- The patient identifies a licensed doctor of medicine, osteopathy, chiropractic, podiatry, or dental surgery, a licensed nurse practitioner practicing in accordance with his practice agreement, or a licensed physician assistant acting under the supervision of a licensed physician from whom he is currently receiving care.
 - The patient gives written consent for the physical therapist to release all personal health information and treatment records to the identified practitioner.
 - The physical therapist notifies the practitioner identified by the patient no later than 14 days after treatment commences and provides the practitioner with a copy of the initial evaluation along with a copy of the patient history obtained by the physical therapist.
- Treatment for more than 60 consecutive days after evaluation of such patient shall only be upon the referral of a physician, osteopath, chiropractor, podiatrist, or dentist, nurse practitioner (in accordance with their practice agreement), or a physician assistant acting under the supervision of a licensed physician. A physical therapist may contact the practitioner identified by the patient at the end of the 30-day period to determine if the practitioner will authorize additional physical therapy services until such time as the patient can be seen by the practitioner.
 - A physical therapist shall not perform an initial evaluation of a patient under this subsection if the physical therapist has performed an initial evaluation of the patient under this subsection for the same condition within the immediately preceding 60 days.
 - A physical therapist who has not completed a doctor of physical therapy program or who has not obtained a certificate of authorization pursuant to Section 54.1- 3482.1 may conduct a one-time evaluation of a patient, but provide no treatment, without a referral. The PT must immediately refer the patient to an appropriate provider if needed.

Note: A PT may provide physical therapy services via direct access with no restrictions for student athletes in a school setting; workplace ergonomics; IEPs of special education students; wellness, fitness, and health screenings; and prevention of disabilities, impairments, and functional limitations.

Invasive procedures within the scope of practice of physical therapy shall always be performed only under the referral or direction of a physician, osteopath, chiropractor, podiatrist, or dentist, nurse practitioner (in accordance with their practice agreement), or a physician assistant acting under the supervision of a licensed physician.

Wash., 1988 — Provisions

- A physical therapist may only provide treatment utilizing orthoses that support, align, prevent, or correct any structural problems intrinsic to the foot or ankle by referral or consultation from an authorized health care practitioner.
- No restriction on the ability of any insurance entity or any state agency or program from limiting or controlling the utilization of physical therapy services using any type of gatekeeper function.
- Must refer patients when symptoms or conditions are beyond the scope of practice.

W.Va., 1984 — Unrestricted

No restrictions to access.

Prohibits electromyography examination and electrodiagnostic studies other than the determination of chronaxia and strength duration curves except under the supervision of a physician electromyographer and electrodiagnostician.

Wis., 1989 — Provisions

Written referral of a physician, chiropractor, dentist, or podiatrist required except if a PT provides services:

- In schools to children with exceptional education needs.
- As part of a home health care agency.
- To a patient in a nursing home pursuant to the patient's plan of care.
- Related to athletic activities, conditioning or injury prevention.
- To an individual for a previously diagnosed medical condition after informing the individual's physician, chiropractor, dentist or podiatrist who made the diagnosis.

Physical Therapy Examining Board Regulations

Written referral is not required for the following services related to the work, home, leisure, recreational, and educational environments:

- Conditioning.
- Injury prevention and application of biomechanics.
- Treatment of musculoskeletal injuries except for acute fractures or soft tissue avulsions.

Must refer a patient to a physician, chiropractor, dentist, podiatrist, or other appropriate health care practitioner if services needed are beyond the scope of physical therapy.

Physical therapists providing services pursuant to a referral shall communicate with the referring physician, chiropractor, dentist, or podiatrist as necessary to ensure continuity of care.

Wyo., 2003 (Revised 2019) — Unrestricted

No restrictions to access.

- Must refer to physician if symptoms or conditions require services beyond the scope of physical therapy or if physical therapy is contraindicated.