



## **FAQs: Starting Your Own PT/OT Practice**

For more information, visit [www.preventfalls.org](http://www.preventfalls.org)

# In General

## Do I own this practice?

Yes, this physical or occupational therapy (PT/OT) practice would be 100% owned by you, the therapist.

## What is the focus of the practice?

This is ultimately your decision. Because of the widespread need and effectiveness of fall prevention PT/OT (see below), we suggest providing fall prevention and related PT or OT to older adults in their homes.

## Does StandStrong provide fall prevention PT/OT clinical training?

Yes

## Can I provide other types of PT/OT?

Yes. You are not restricted to fall prevention PT/OT. You can provide any PT/OT permitted under your practice act. For example, you can provide post-surgery PT for joint replacements.

## Where are services provided?

In patient's homes.

## Can I also provide PT/OT in an outpatient clinic?

Yes, if you lease the space.

## Who sets my schedule?

You do. You choose whether to work part or full-time, morning, evenings, only weekdays and/or on weekends. It is your practice and your schedule.

## What equipment will I need?

- Vehicle (covered by typical auto insurance)
- Laptop
- Mobile phone (with hotspot function)

## What scheduling/documentation system do we use and what is the cost?

WebPT (for scheduling and documentation) at a cost to you of about \$100/month.

## Does StandStrong guarantee a minimum amount of income?

No. This is your practice and as owner/provider you are responsible for generating your own income. StandStrong provides the practice support services listed below.

# Fall Prevention

## Why fall prevention?

- Fall prevention is the leading cause of fatal and non-fatal injuries among people who are 65 and older
- Numerous studies show that PT/OT can help reduce the chances of falling by over 50%\*
- Medicare, Medicare Advantage Plans and commercial payers cover skilled PT/OT for fall prevention

## Does research support PT/OT for fall prevention?

Yes, overwhelming research clearly shows that PT/OT and related exercise can substantially reduce the chances of falling. JAMA recently published a systematic review of 283 randomized clinical trials of fall prevention interventions for participants aged 65 and over showing that PT/OT reduced the chances of falling by over 50%.

## What PT/OT is provided to help prevent falls?

- Balance, strength and gait training
- A home falls risk assessment with recommendations for reducing fall risks (e.g., grab bars, rug removal)

## What other interventions have been proven to help prevent falls?

- Vision screen
- Medication screen

## How many older adults can benefit from fall prevention PT/OT?

- Virtually any person who has had a decline in his or her balance or leg strength due to age, injury or disease can benefit from fall prevention PT/OT. It is safe to assume that at least 50% of Medicare patients over 70 can benefit from falls prevention PT/OT.
- Also, Parkinson's and stroke patients can benefit from fall prevention PT/OT.

## Is PT/OT for fall prevention covered by Medicare?

Yes. Medicare will cover PT/OT to help prevent falls if a patient has fallen in the past 12 months, or has experienced a decrease in balance or leg strength that affects his or her ability to confidently walk or stand, or uses a cane or walker and would like to walk without either. Basically, Medicare pays for skilled therapy necessary improve a patient's condition or to prevent or slow further deterioration of a patient's condition.

## Will Medicare Advantage plans cover fall prevention PT/OT?

Yes, Medicare Advantage plans cover PT/OT that would otherwise be covered by Medicare. Also, some Medicare Advantage plans provide additional benefits for fall prevention, such as grab bar installation and copay waivers.



# What is StandStrong and what does it do?

## What is StandStrong?

StandStrong provides practice setup and support services to therapists providing fall prevention and other PT/OT services.

## What PT/OT practice setup and support services does StandStrong provide?

- Form the legal entity (typically limited liability company) for your practice
- Assist with obtaining federal employer identification number and filing S corporation election
- Guidance for establishing practice bank account(s) and banking
- Credentialing with Medicare and other payers
- Contracting with Medicare Advantage plans and other commercial payers
- Clinical training for fall prevention PT/OT
- Fall prevention PT/OT coding and documentation training
- Dedicated “preventfalls.org” email address, local phone number and local fax number
- WebPT setup and fall prevention documentation templates
- HIPAA compliance guidance
- All required patient notification and intake forms with instructions
- Copay, coinsurance, deductible and self-pay collection process
- Answer patient phone calls
- Patient scheduling
- Insurance coverage verification and authorization
- Requesting and processing physician approval of plan of care
- Billing and collection
- Billing and collection reports
- Use of StandStrong marketing collateral
- Listing on StandStrong website
- Ongoing guidance on federal, state and local regulations that impact fall prevention and other PT/OT treatment and billing
- HR guidance and other support
- IT support
- Regular updates on the latest fall prevention research results and public and private fall prevention initiatives
- Outcomes survey form and data compilation/reporting
- Patient satisfaction survey form and compilation/reporting of results
- Progress report form for physicians

## What does StandStrong charge?

StandStrong charges the following fees:

- A fee of \$5,000 for the setup, contracting and credentialing services described above, payable in five monthly installments of \$1,000 each
- The monthly cost for WebPT EHR and scheduling system (about \$100)
- 15% of collections

If you hire another provider, StandStrong charges \$1,500 to credential and provide setup services for each additional provider.

StandStrong is also reimbursed for filing fees paid on behalf of your practice (e.g., limited liability company formation fees charged by state government which are about \$300) and third-party email encryption services (about \$100 per year).

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# Financial

## How much will it cost me to start this practice?

We expect that your out of pocket start-up costs will be about \$8,000 based on the following budget:

- Contracting/credentialing/start-up fee to StandStrong=\$5,000
- Printing costs (business cards, flyers, etc.)=\$3,000

## What are some other marketing costs?

At your option, you can send direct mail pieces, advertise in local senior and other publications, set up your own website and undertake other marketing activities. These costs will vary, but we can provide recommendations on what marketing activities are likely to be most cost effective.

## How much income can I expect during the first year?

- This all depends on your marketing success and how hard you are willing to work. It is reasonable to expect that payments per patient visit will average \$100 and that each patient will be seen for an average of 7 visits. If you average 15 new patient referrals per month, each patient is seen for an average of 7 visits and payments average \$100/visit, your monthly payments (after payment of the 15% fee to StandStrong) will be about \$9,000/month.
- Given that this is a start-up, you should be willing and able to earn very little income during the first year.

## Will I be paid for travel expenses and time?

No, Medicare will pay you under the physician fee schedule which pays for typical PT/OT codes, such as 97110, 97140 and 97530. There is no separate payment for travel expenses or travel time. Commercial insurers pay in a similar manner.

## Does StandStrong guarantee that all payers will include you in their network?

No. We will enroll you with Medicare which contracts with all licensed PT/OTs who have not committed regulatory violations. Medicare Advantage plans and other commercial payers are not required to include all providers in their networks, but we anticipate that most Medicare Advantage plans will accept new network members.

## Can I hire another therapist to help?

- Yes. You can add another therapist as an employee or contractor. If you decide to add one or more additional therapists, we generally recommend hiring these therapists as employees.
- StandStrong charges \$1,500 for credentialing and other start-up services for each additional provider.

## Can I hire a PTA or COTA to help?

The Medicare outpatient PT/OT rules that we bill under require a PT to be onsite when a PTA is treating and an OT to be onsite when a COTA is treating. So, it is not practical to hire a PTA or COTA to treat patients in their homes because Medicare will require a therapist to be at the home too.

# Marketing

## Who is responsible for marketing your new practice to potential referral sources?

You are. You must be comfortable marketing your services to physicians and other potential sources of patients, such as assisted living centers.

## What types of physicians refer for fall prevention and related services?

Primary care physicians, gerontologists, neurologists (especially for Parkinson's and stroke patients), orthopaedic surgeons and physiatrists.

## What are other potential sources of patients?

- Assisted living facilities
- Retirement communities
- Skilled nursing facilities

# Regulatory

## Is this a home health agency?

No. These home-based PT/OT services are covered by Part B of Medicare under basically the same rules and payment rates for PT/OT in a private outpatient clinic.

## Do patients need to be homebound?

No. Because Medicare covers these services under the same rules as private outpatient PT/OT clinics and not under the home health agency rules, the patients do not need to be home bound.

## Can PTAs and COTAs start their own practice?

No. We are submitting claims to Medicare under Part B which requires a physical therapist to be onsite when a PTA is treating and an occupational therapist to be onsite when a COTA is treating. Because therapy is provided in a patient's home, it is not economically feasible for a PTA or COTA to treat with a therapist onsite.

\* Tricco, et al (2017). Comparisons of interventions for preventing falls in older adults. JAMA, 218(17): 1687-1699. doi: 10.1001/jama.2017.15006. (<https://jamanetwork.com/journals/jama/fullarticle/2661578?resultClick=1>). Physical therapists can play a major role in reducing fall risk for older adults. Physical therapists are specifically educated in assessment and management of risk factors, such as strength and balance impairment, gait and ADL limitations, home hazards and footwear. Clinical practice guidelines provide that (1) all older adults should be screened for fall risk, (2) multifactorial assessments targeting an individual's risk factors should be conducted on those who screen positive, and (3) tailored interventions should be implemented to address identified risk factors. Avin KG, Hanke TA, Kirk-Sanchez N, et al. Management of falls in community-dwelling older adults: clinical guidance statement from the Academy of Geriatric Physical Therapy of the American Physical Therapy Association. Phys Ther. 2015; 95:815-834. (<https://www.ncbi.nlm.nih.gov/pubmed/25573760>). Stevens JA, Lee R. The Potential to Reduce Falls and Avert Costs by Clinically Managing Fall Risk. Am J Prev Med 2018;55(3):290-297. ([https://www.ajpmonline.org/article/S0749-3797\(18\)31759-8/fulltext](https://www.ajpmonline.org/article/S0749-3797(18)31759-8/fulltext)).