

Rep. Michael Burgess, M.D. NDAA FY14 HASC Testimony

Good Morning,

I am writing to request the Committee include clarifying language as part of the FY 2014 National Defense Authorization Act to assert that certain rehabilitative therapies are included as covered services for TRICARE beneficiaries.

The President's FY 2014 Budget states that it aims to "promote health of service members and their families". I applaud the Administration's focus on supporting service-members and their families. However, there continues to be inadequacies in the health care services provided to our military members and their families.

Certain physical therapy services have been denied to TRICARE beneficiaries because TRICARE has determined the services do not fall within "traditional" physical therapy services. Specifically, therapies utilizing tools, such as a horse, have been denied to TRICARE beneficiaries because they have been misclassified as "hippotherapy".

It is crucial that TRICARE provides rehabilitative therapies that are prescribed by a patient's physician and included in a patient's individualized plan of care, authorized by his or her physical therapist. In the TRICARE Policy Manual, Section 18.2, Chapter 7, 2.1, physical therapy is described to include "The treatment by physical means, hydrotherapy, heat, or similar modalities, physical agents, bio-mechanical and neuro-physiological principles, and devices to relieve pain, restore maximum function, and prevent disabilities following disease, injury or loss of a body part."

Therefore, I would like to formally ask my colleagues on the Committee to include specific language in the Fiscal Year 2014 National Defense Authorization Act to allow TRICARE beneficiaries to receive therapies that are prescribed by a patient's physician and included in a patient's individualized plan of care, authorized by his or her physical therapist, including those performed on a balance board, ball, bolster, horse, and bench.

Thank you for your consideration and your time.

Sincerely,

Michael C. Burgess, M.D.