

MLE and State Recognition Talking Points

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MLE and licensure and reimbursement

- There are currently no data that indicate that MLE is related to licensure or will guarantee licensure legislation success.
- The national trend among individual states is not only one of anti-regulation, but in some cases, deregulation (eliminating existing occupational licensing structures to remove barriers to competition).
- There is no indication that MLE will mitigate potential for harm, which is a major concern for state legislators.
- All states license professions at certificate, associate, and bachelor's degree levels.
- MLE will not guarantee inclusion of music therapists as primary therapists without state recognition of education and clinical training requirements specific to a specialization area, such as mental health.
- AMTA experience indicates that a master's degree is not a criterion for reimbursement; MLE will not guarantee reimbursement from public and private insurance.
- Historically, other professions received recognition and reimbursement well before the decision to move to MLE.

Examples

- *“Occupational therapy had been around nearly 50 years when the Social Security Act Amendments became law on July 30, 1965, and established the Medicare program. OT was specifically mentioned in the law.”*
- *“In the 1970s, Medicare wanted consumer protection in home health. Not having occupational therapy licensed in all 50 states held us back, because licensure requires health professionals to meet certain standards. AOTA and state associations subsequently made state licensure a priority, which was critical to our expanding role in Medicare, setting the stage for occupational therapy's growth in health care overall.”*
<http://www.otcentennial.org/article/reflecting-on-50-years-of-occupational-therapy-in-the-medicare-program>
- *“At AOTA's April 1999 Annual Conference & Expo, the Representative Assembly passed Resolution J, “Movement to Required Post-baccalaureate Level of Education.” This resolution called for the eventual installation of a post-baccalaureate requirement for entry-level occupational therapy education.”*
- *“AOTA Accreditation Council for Occupational Therapy Education (ACOTE) voted at its August 1999 meeting that professional entry-level occupational therapy programs must be offered at the post-baccalaureate level by January 1, 2007 to receive or maintain ACOTE accreditation status.”*
<https://www.aota.org/Education-Careers/Accreditation/Overview/History.aspx>

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- “1968: Definition of outpatient physical therapy services was added to the Social Security Act of 1967, allowing reimbursement for physical therapists.”
- “1972: PL 92-03 expands scope of Medicare coverage to include qualified physical therapists in private practice.”
[http://www.apta.org/uploadedFiles/APTAorg/Downloads/PR/MedicareTimeline.pdf#search=%22PT in Medicare in 1965%22](http://www.apta.org/uploadedFiles/APTAorg/Downloads/PR/MedicareTimeline.pdf#search=%22PT%20in%20Medicare%20in%201965%22)
- “In 1966, the Louisiana legislature passed the first Physical Therapy Practice Act. Physical therapists were first licensed and regulated by the Louisiana State Board of Medical Examiners (LSBME).”
<https://www.laptboard.org/index.cfm/page/4>
- “PTs are licensed in all 50 states and the District of Columbia, Puerto Rico, and the US Virgin Islands.”
<http://www.apta.org/Licensure/>
- “Consistent with current Commission on Accreditation in Physical Therapy Education (CAPTE) criteria, the American Physical Therapy Association shall consider attainment of a post-baccalaureate degree as the minimum professional education qualification for physical therapists who graduate from a program accredited by CAPTE from 2003 to December 31, 2017. Effective January 1, 2018, the American Physical Therapy Association shall consider attainment of a Doctor of Physical Therapy degree as the minimum professional education qualification for physical therapists who graduate from a program accredited by the CAPTE in 2018 or thereafter.”
http://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/Education/EducationalDegreeQualificationsPT.pdf
- Bachelor’s level MT-BCs are receiving reimbursement for music therapy services.
- Factors that impact Reimbursement decisions include :
 - Documentation of medical or behavioral necessity
 - Evidence to support interventions for patient diagnosis
 - State recognition of profession and credential
 - Increased public demand for services

How will MLE potentially impact the states who already have licensure

- All music therapy state licenses are based on holding and maintaining the MT-BC credential. Currently licensed music therapists holding bachelor’s degrees would not be required to obtain the master’s degree for license renewal, as long as they consistently maintain the MT-BC credential through continuing education.
- States that include education details within statutes would need to seek legislation amendments to update the minimum degree requirements from “bachelor’s degree or higher” to “master’s degree or higher.”
- States that include education details within regulations would need to seek revisions to regulatory language to update the minimum degree requirements from “bachelor’s degree or higher” to “master’s degree or higher.”
- During a transition to MLE, there would be a need for legislative exemption language to ensure current MT-BCs without master’s degrees would still qualify for a state license.