

OCCUPATIONAL THERAPY – REFERRAL REQUIREMENTS

NOTE: Third-party payer referral requirements should be consulted in all states.

State	Citation	Referral Requirement Provision
Alabama	<p>Statute: Code of Ala. § 34-39-3</p> <p>Regulation: Ala. Admin. Code r. 625-X-9-.02</p> <p>AG Opinion 2002-107</p>	<p>"Notwithstanding any other provision of this chapter, no occupational therapy treatment programs to be rendered by an occupational therapist, occupational therapy assistant, or occupational therapy aide shall be initiated without the referral of a licensed physician, a licensed chiropractor, a licensed optometrist, or a licensed dentist who shall establish a diagnosis of the condition for which the individual will receive occupational therapy services. In cases of long-term or chronic disease, disability, or dysfunction, or any combination of the foregoing, requiring continued occupational therapy services, the person receiving occupational therapy services shall be reevaluated by a licensed physician, a licensed chiropractor, a licensed optometrist, or a licensed dentist at least annually for confirmation or modification of the diagnosis. Occupational therapists employed by state agencies and those employed by the public schools and colleges of this state who provide screening and rehabilitation services for the educationally related needs of the students are exempt from this referral requirement."</p> <p>"Code of Alabama 1975, Sec. 34-39-3, provides in part, that no occupational therapy treatment programs be rendered by an occupational therapist, occupational therapy assistant, or an occupational therapy aide shall be initiated without the referral of a physician or dentist licensed to practice in this state who shall establish a medical diagnosis of the condition for which the individual will receive occupational therapy services, except occupational therapists employed by state agencies and those employed by the public schools and colleges of this state who provide screening and rehabilitation services for the educationally related needs of the students."</p> <p>Optometrists in the State of Alabama may refer patients for occupational therapy services, establish a plan of treatment, and review said treatment to the limited extent permitted by 42 U.S.C.S. §1395x of the Social Security Act.</p>
Alaska	N/A	No referral requirements.
Arizona	N/A	No referral requirements.
Arkansas	N/A	No referral requirements.
California	<p>Statute: Occupational Therapy Practice Act, §2570.2</p> <p>Regulations: Title 16, Division 39, California Code of Regulations §4170</p>	<p>Occupational therapy services encompass occupational therapy assessment, treatment, education of, and consultation with, individuals who have been referred for occupational therapy services subsequent to diagnosis of disease or disorder (or who are receiving occupational therapy services as part of an Individualized Education Plan (IEP) pursuant to the federal Individuals with Disabilities Education Act (IDEA).</p> <p>(d) Occupational therapy practitioners shall perform occupational therapy services only when they are qualified by education, training, and experience to do so. (1) Occupational therapy practitioners shall hold the appropriate credentials for the services they provide. (2) Occupational therapy practitioners shall refer to or consult with other service providers whenever such a referral or consultation is necessary for the care of the client. Such referral or consultation should be done in collaboration with the client.</p>
Colorado	<p>Statute: CO Rev Stat 12-40.5-109</p>	<p>12-40.5-109. Limitations on authority. Nothing in this article shall be construed to authorize an occupational therapist to engage in the practice of medicine as defined in section 12-36-106; physical therapy. As defined in article 41 of this title: Vision Therapy Services or low vision rehabilitation services except under the referral, prescription, supervision, or co management of an ophthalmologist or optometrist; or any other form of healing except as authorized by this article (7) "Low Vision Rehabilitation services" means the Evaluation, diagnosis, management, and care of the low vision patient. Including low vision rehabilitation therapy Education and Interdisciplinary consultation (13) "Vision therapy services" means the assessment, diagnosis, treatment, and management of patients with vision therapy, visual training, visual rehabilitation, orthotics, or eye exercises. SECTION 9. Effective date - applicability. This act shall take effect July 1, 2008, and shall apply to the registration of occupational therapists on or after January 1, 2009.</p>
Connecticut	N/A	No referral requirements.
Delaware	<p>Statute: Del. Code §2017</p>	<p>"An occupational therapist may undertake consultation or evaluation of an individual as to the need for their services without the necessity of a referral by a licensed physician. However, an occupational therapist shall not provide occupational therapy treatment to an individual for a specific medical condition without a referral from a licensed physician unless the occupational therapy treatment is administered by the public or private school or college systems of the State."</p>
District of Columbia	N/A	No referral requirements.
Florida	N/A	No referral requirements.
Georgia	N/A	No referral requirements.
Hawaii	N/A	No referral requirements.
Idaho	N/A	No referral requirements.
Illinois	<p>Statute: 225 Illinois Compiled Statutes</p>	<p>Sec. 3.1. Referrals. A registered occupational therapist or certified occupational therapy assistant may consult with, educate, evaluate, and monitor services for clients concerning non-medical occupational therapy needs. Implementation of direct occupational therapy to individuals for their specific health care conditions shall be based upon a referral from</p>

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	75/3.1	a licensed physician, dentist, podiatrist, or optometrist. An occupational therapist shall refer to a licensed physician, dentist, optometrist, or podiatrist any patient whose medical condition should, at the time of evaluation or treatment, be determined to be beyond the scope of practice of the occupational therapist.
Indiana	SECTION 66. IC 25-23.5-3-1.5	: Sec. 1.5. (a) Except as provided in subsection (b), an occupational therapist may not provide occupational therapy services to a person until the person has been referred to the occupational therapist by a physician licensed under IC 25-22.5, a podiatrist licensed under IC 25-29, an advanced practice nurse licensed under IC 25-23, a psychologist licensed under IC 25-33, or a chiropractor licensed under IC 25-10. (b) An occupational therapist may provide the following services without a referral from a physician licensed under IC 25-22.5, a podiatrist licensed under IC 25-29, an advanced practice nurse licensed under IC 25-23, a psychologist licensed under IC 25-33, or a chiropractor licensed under IC 25-10: (1) Ergonomic or home assessment. (2) Injury or illness prevention education and wellness services. (3) Occupational therapy activities provided in an educational setting. (4) Occupational therapy activities that the board determines, after reviewing the recommendations of the committee, are appropriate to be conducted in a community based environment. 35. IC 25-23.5-3-1.5, as added by P.L.197-2007, section 66is amended to read as follows [effective July 1, 2008]: Sec. 1.5. (a) Except as provided in subsection (b), an occupational therapist may not provide occupational therapy services to a person until the person has been referred to the occupational therapist by one (1) of the following : (1) A physician licensed under IC 25-22.5. (2) A podiatrist licensed under IC 25-29. (3) An advanced practice nurse licensed under IC 25-23. (4) A psychologist licensed under IC 25-33. or (5) A chiropractor licensed under IC 25-10. (6) An optometrist licensed under IC 25-24. (b) An occupational therapist may provide the following services without a referral from a physician licensed under IC 25-22.5, a podiatrist licensed under IC 25-29, an advanced practice nurse licensed under IC 25-23, a psychologist licensed under IC 25-33, or a chiropractor licensed under IC 25-10, or an optometrist licensed under IC 25-24: (1) Ergonomic or home assessment. (2) Injury or illness prevention education and wellness services. (3) Occupational therapy activities provided in an educational setting. (4) Occupational therapy activities that the board determines, after reviewing the recommendations of the committee, are appropriate to be conducted in a community based environment.
Iowa	Statute: IA Code §148B.3A	Occupational therapy may be provided by an occupational therapist without referral from a physician, podiatric physician, dentist, or chiropractor, except that a hospital may require that occupational therapy provided in the hospital be performed only following prior review by and authorization of the performance of the occupational therapy by a member of the hospital medical staff.
Kansas	Statute: Kan. Stat. § 65-5418	Education related therapy services provided by an occupational therapist to school systems or consultation regarding prevention, ergonomics and wellness within the occupational therapy scope of practice shall not require a referral, supervision, order or direction of a physician, a licensed podiatrist, a licensed dentist or a licensed optometrist. However, when in the course of providing such services an occupational therapist reasonably believes that an individual may have an underlying injury, illness, disease, disorder or impairment, the occupational therapist shall refer the individual to a physician, a licensed podiatrist, a licensed dentist or a licensed optometrist, as appropriate.
Kentucky		No referral requirements.
Louisiana	Statute: R.S. 37 §3003 Regulation: La. Admin Code tit. 46, §4909	The occupational therapist may enter a case for the purposes of providing consultation and indirect services and evaluating an individual for the need of services. Prevention, wellness, and education related services shall not require a referral, however in workers' compensation injuries preauthorization shall be required by the employer or workers' compensation insurer or provider. Implementation of direct occupational therapy to individuals for their specific medical condition or conditions shall be based on a referral or order from a physician, or advanced practice registered nurse, dentist, podiatrist, or optometrist licensed to practice. Practice shall be in accordance with published standards of practice established by the American Occupational Therapy Association, Inc., and the essentials of accreditation established by the agencies recognized to accredit specific facilities and programs. "The occupational therapist enters a case at the request of a physician; assumes full responsibility for the occupational therapy assessment; and, in consultation with the physician, establishes the appropriate type, nature, and mode of service."
Maine	N/A	No referral requirements.
Maryland	N/A	No referral requirements.
Massachusetts	N/A	No referral requirements.
Michigan	N/A	No referral requirements.
Minnesota	N/A	No referral requirements.
Mississippi	N/A	No referral requirements.
Missouri	N/A	No referral requirements.
Montana	N/A	No referral requirements.
Nebraska	N/A	No referral requirements.
Nevada	Regulation: NAC 640A.230	"1. An occupational therapist may practice occupational therapy on a patient for specific medical conditions if the patient has been referred to the occupational therapist by a provider of health care licensed to practice in this state. 2. An occupational therapist may, without referral, provide occupational therapy services, including, without limitation,

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		<p>evaluation, planning and implementing a program of treatment, monitoring services and consultation for a person whose ability to perform the tasks of daily living is impaired by:</p> <p>(a) Developmental deficiencies;</p> <p>(b) The aging process;</p> <p>(c) Environmental deprivation;</p> <p>(d) Sensory impairment;</p> <p>(e) Psychological or social dysfunction; or</p> <p>(f) Other conditions.</p> <p>3. An occupational therapist may provide the occupational therapy services listed in subsection 2 in a nonmedical setting, including, without limitation, a residential setting, an educational setting, a vocational setting, a recreational setting, or a center that provides for the care of adults or children during the day.</p> <p>4. As used in this section:</p> <p>(a) "Consultation" includes working with providers of health care and other persons involved in the care of a patient to provide advice and services.</p> <p>(b) "Monitoring services" includes those services which are characterized by regular contact at least once per month to:</p> <p>(1) Check or regulate adaptive and positioning equipment to ensure its proper use; or</p> <p>(2) Assess the level of skills of a patient, including, without limitation, the adaptive skills of the patient.</p> <p>(c) "Specific medical conditions" includes those conditions of acute trauma, infection, disease, aging or post-surgical status where custom requires the involvement of a provider of health care."</p>
New Hampshire	<p>Statute: RSA 326-C:2</p> <p>Regulation: N.H. Code Admin. R. MED 702.01</p>	<p>Evaluation and Treatment Authorization.</p> <p>I. Consultation and evaluation by an occupational therapist may be performed without a referral. Initiation of occupational therapy services to individuals with medically related conditions shall be based on a referral from a physician or physician assistant licensed by the state board of medicine, an advanced registered nurse practitioner licensed under RSA 326-B:10, a chiropractor licensed under RSA 316-A, an optometrist licensed under RSA 327, or any other qualified health care professional who, within the scope of the professional's licensure, is authorized to refer for health care services.</p> <p>II. Prevention, wellness and education related services shall not require a referral. These services may be provided in a variety of settings such as educational, work, recreational, and residential settings and community centers for adults and children.</p> <p>"MED 702.01 Referral Required. (NOTE: these rules have not been updated to be compatible with the Practice Act changes above, which went into effect. The board is working on updating the rules.)</p> <p>(a) Occupational therapists shall receive written authorization from a licensed physician or their designated physician assistant prior to initiating a treatment program.</p> <p>(b) The authorizing physician or physician assistant shall be familiar with the client's therapeutic needs, and the written authorization for treatment shall be renewed at least once every year.</p> <p>(c) Occupational therapists may accept referrals for screening and evaluation from other health professionals or special education teams but shall not commence treatment until the requirements of (a) above are satisfied.</p> <p>(d) Occupational therapy that is provided as an educational service to a group and that is not specific to any individual may be provided without referral or authorization."</p>
New Jersey	N/A	No referral requirements.
New Mexico	N/A	No referral requirements.
New York	<p>Statute: N.Y. Education Law §7901</p> <p>Regulation: N.Y. Comp. Codes R. & Regs. Tit. 8, §76.7</p>	<p>"Such treatment program shall be rendered on the prescription or referral of a physician or nurse practitioner."</p> <p>Definition of Occupational Therapy Practice: "(d) Any treatment program described in this regulation shall be rendered on the prescription or referral of a physician."</p>
North Carolina	N/A	No referral requirements.
North Dakota	N/A	No referral requirements.
Ohio	N/A	No referral requirements.
Oklahoma	N/A	No referral requirements.
Oregon	Regulation: Or. Admin. R. 10-020	"In situations where an occupational therapist is using a modality not specifically defined in ORS 675.210(3), a physician's referral must specifically request the patient treatment."
Pennsylvania	Statute: Pa. Act 140 of 1982 - Occupational Therapy Practice Act, § 14	"An occupational therapist may enter a case for the purposes of providing indirect services, consultation, evaluating an individual as to the need for services and other occupational therapy services for conditions such as perceptual, cognitive, sensory integration and similar conditions. Implementation of direct occupational therapy to an individual for a specific medical condition shall be based on a referral from a licensed physician, licensed optometrist or a licensed podiatrist. This act shall not be construed as authorization for an occupational therapist or occupational therapy assistant to practice a branch of the healing arts except as described in this act."

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Puerto Rico	N/A	No referral requirements.
Rhode Island	N/A	No referral requirements.
South Carolina	N/A	No referral requirements.
South Dakota	N/A	No referral requirements.
Tennessee	N/A	No referral requirements.
Texas	<p>Statute: Enacted 1999 H.B.2295/S.B. 556</p> <p>Regulation: 40 TAC § 372.1</p>	<p>“PRACTITIONER'S REFERRAL. An occupational therapist may enter a case for the purposes of providing consultation and monitored services and evaluating an individual for the need of services. Implementation of direct occupational therapy to individuals for their specific health care conditions shall be based on a referral from a physician licensed by a state board of medical examiners, a dentist licensed by a state board of dental examiners, a chiropractor licensed by a state board of chiropractic examiners, a podiatrist licensed by a state board of podiatric medical examiners, or any other qualified, licensed health care professional who within the scope of the professional's licensure is authorized to refer for health care services. The professional taking an action under this section is a referring practitioner.”</p> <p>Provision of Services (a) Medical Conditions (1) Treatment for a medical condition by an occupational therapy practitioner requires a referral from a licensed referral source. (2) The referral may be an oral or signed written order. If oral, it must be followed by a signed written order. (3) If a written referral signed by the referral source is not received by the third treatment or within two weeks from the receipt of the oral referral, whichever is later, the therapist must have documented evidence of attempt(s) to contact the referral source for the written referral (e.g., registered letter, fax, certified letter, email, return receipt, etc.). The therapist must exercise professional judgement to determine cessation or continuation of treatment with a receipt of the written referral. (b) Non-Medical Conditions (1) Consultation, monitored services, and evaluation for need of services may be provided without a referral. (2) Non-medical conditions do not require a referral. However, a referral must be requested at any time during the evaluation or treatment process when necessary to insure the safety and welfare of the consumer. (c) Screening. A screening may be performed by an occupational therapy practitioner.</p>
Utah	N/A	No referral requirements.
Vermont	N/A	No referral requirements.
Virginia	N/A	No referral requirements.
Washington	<p>Statute: Enacted 1999 H.B. 1113/S.B. 5149</p> <p>Regulation: WAC 246-874-170</p>	<p>“An occupational therapist shall, after evaluating a patient and if the case is a medical one, refer the case to a physician for appropriate medical direction if such direction is lacking. Treatment by an occupational therapist of such a medical case may take place only upon the referral of a physician , osteopathic physician, podiatric physician and surgeon, naturopath, chiropractor, physician assistant, psychologist, or advanced registered nurse practitioner licensed to practice in this state.”</p> <p>(11) If, after evaluating the client, the case is a medical case, the occupational therapist shall refer the case to a physician for appropriate medical direction if such direction is lacking. (a) Appropriate medical direction shall be sought on at least an annual basis. (b) A case is not a medical case if the following is present: (i) There is an absence of pathology; or (ii) If a pathology exists, the pathology has stabilized; and (iii) The occupational therapist is only treating the client's functional deficits.</p>
West Virginia	<p>Statute: W. Va. Code §30-28-4</p>	<p>(b) A licensed occupational therapist shall not treat persons by occupational therapy or otherwise other than referral by a licensed physician or surgeon, psychologist or psychiatrist, dentist, osteopathic physician or surgeon, or chiropodist or podiatrist.</p>
Wisconsin	<p>Statute: Wis Statute 448.965</p> <p>Regulation Wis. Admin Code § OT 1.02</p> <p>Regulation: Wis. Admin. Code § OT 4.03 Standards of practice</p>	<p>Duties and powers of affiliated credentialing board. (1) The affiliated credentialing board shall promulgate rules that establish each of the following: (c) Standards of practice for occupational therapy, including a code of ethics and criteria for referral..</p> <p>Definitions. (16) “Referral and physician order” means the practice of requesting and, where applicable, ordering occupational therapy services and delegating the responsibility for evaluation and treatment to an occupational therapist.</p> <p>(2) REFERRAL AND PHYSICIAN ORDERS. (a) Evaluation, rehabilitation treatment, and implementation of treatment with individuals with specific medical conditions shall be based on a referral from a physician, dentist or podiatrist. (b) Referrals may be accepted from advanced practice nurses, chiropractors, optometrists, physical therapists, physician assistants, psychologists , or other health care professionals. (c) Although a referral is not required, an occupational therapist or occupational therapy assistant may accept a referral for the purpose of providing services which include consultation, habilitation, screening, client education, wellness, prevention, environmental assessments, and work-related ergonomic services.</p>

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		<p>(d) Physician orders shall be in writing. However, oral referrals may be accepted if they are followed by a written and signed order by the referring physician within 72 hours from the date on which the client consults with the occupational therapist or occupational therapy assistant.</p> <p>(e) Physician order or referral from another health care provider is not required for evaluation or intervention if an occupational therapist or occupational therapy assistant provides services in an educational environment, including the child's home, for children and youth with disabilities pursuant to rules promulgated by the federal individuals with disabilities education act, the department of public instruction and the department of health and family services, or provides services in an educational environment for children and youth with disabilities pursuant to the code of federal regulations.</p>
Wyoming	N/A	No referral requirements.