

Medicare Coverage of Outpatient Occupational Therapy, Physical Therapy, and Speech-language Pathology Services

Important: This information only applies if you have Original Medicare. If you have a Medicare Advantage Plan, check with your plan for coverage information.

Medicare Part B (Medical Insurance) covers medically necessary outpatient physical therapy, speech-language pathology, and occupational therapy services.

What will I pay for these services?

After you pay the Part B deductible, you'll pay 20% of the Medicare-approved amount for these services when they're medically necessary.

What if my services aren't medically necessary?

Medicare only pays for outpatient occupational therapy, physical therapy, and speech-language pathology services that are considered medically necessary. If the therapy services you're getting aren't medically necessary, your therapy provider can only charge you for them if they give you a written notice **before** you get the services. This notice is called an "Advance Beneficiary Notice of Noncoverage (ABN)." The ABN lets you choose whether or not you want the therapy services. If you choose to get services that **aren't** medically necessary, you have to pay the full cost for them.

Your therapy provider must tell you that your services aren't medically necessary before giving you an ABN. They can't give you an ABN only because your therapy expenses have reached a certain amount.

Who can give me these services?

- Physical therapists
- Speech-language pathologists
- Occupational therapists

Doctors and other health care professionals (like nurse practitioners, clinical nurse specialists, and physician assistants) may also offer outpatient physical therapy, speech-language pathology, and occupational therapy services.

Where can I get these services?

- Offices of privately practicing therapists
- Medical offices
- Outpatient hospital departments
- Critical access hospital outpatient departments
- Rehabilitation facilities (sometimes called “other rehabilitation facilities”)
- Comprehensive outpatient rehabilitation facilities
- Skilled nursing facilities (when Medicare Part A (Hospital Insurance) doesn’t apply)
- At home, from certain therapy providers, like privately practicing therapists and certain home health agencies (**Note:** If you’re getting therapy as part of a Medicare home health plan of care, Medicare covers it under the home health benefit instead.)

Where can I get more information?

Visit [Medicare.gov/coverage](https://www.medicare.gov/coverage) for more information. Call your State Health Insurance Assistance Program (SHIP) to get free, personalized health insurance counseling. To get the phone number for your state, visit [shiphelp.org](https://www.shiphelp.org), or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.



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You have the right to get Medicare information in an accessible format, like large print, braille, or audio. You also have the right to file a complaint if you feel you’ve been discriminated against. Visit [Medicare.gov/about-us/accessibility-nondiscrimination-notice](https://www.medicare.gov/about-us/accessibility-nondiscrimination-notice), or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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