



Sept. 4, 2025

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Eileen M. Moynihan, M.D., FACP, FACRH
Contractor Medical Directors
Noridian, LLC
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RE: Noridian “Outpatient Therapy Certification Plan of Care” Policy Page; Update to Reflect Changes to Plan of Care Exception Finalized in CY 2025 Physician Fee Schedule Rule

Drs. Arthur Lurvey and Eileen Moynihan:

The American Physical Therapy Association (APTA) is an individual [membership](#) professional organization representing 100,000 member physical therapists (PTs), physical therapist assistants (PTAs), and students of physical therapy. The American Occupational Therapy Association (AOTA) is the national professional membership organization for 50,000 member occupational therapists (OTs), occupational therapy assistants (OTAs), and students of occupational therapy. Together, APTA and AOTA represent the collective interests of more than 500,000 therapy professionals across the nation.

We are writing to call your attention to concerns expressed from our member physical and occupational therapists related to recent updates to the following Noridian Jurisdiction E and F pages entitled “[Outpatient Therapy Certification Plan of Care](#).” The most recent update, dated July 11, 2025, omits important information related to recent significant policy changes to regulations governing plan of care certification, as addressed in the Centers for Medicare & Medicaid Services’ [CY 2025 Physician Fee Schedule](#), effective Jan. 1, 2025.

Our request relates to the information published on the required elements of a certified therapy plan of care, which specifies the following:

“Signing the plan of care completes the certification requirements and proves that a physician is involved in the care and available to certify the plan” and that a “[/]legible dated signature of the certifying physician/NPP” be present in the clinical record and available upon request.

However, in last year’s [CY 2025 Physician Fee Schedule final rule](#), effective Jan. 1, 2025, CMS modified its longstanding policy on plan of care (POC) (also referred to as “plan of treatment”) certification by adding an exception to the signature requirement for initial certification (see [89 FR 97912](#)). Applicable to claims with dates of service on or after Jan. 1, 2025, when a patient is referred for physical or occupational therapy from a physician or other qualified nonphysician practitioner, this new exception allows a signed and dated order or referral to meet the certification requirements as long as the order is in the patient’s medical record and there is evidence that the plan of care was submitted to the referring provider within 30 days of the initial evaluation (see [42 CFR 424.24\(c\)\(5\)](#)). Once the PT or OT has transmitted their POC, the onus

is on the referring provider to either sign and return the POC or indicate changes; absent either action, silence serves as meeting the signature requirement for the transmitted POC.

The language in this informational page should be updated to reflect the new plan of care signature exemption, which functionally modifies the standard for initial certification as it relates to physical and occupational therapy care under a referral. In this common circumstance, the standard can now be met when there is, in fact, no affirmative signature or documented verbal confirmation by the referring provider.

As it stands, the language on this page does not reference the updated standard and thus communicates an incomplete set of information that providers may rely on. MAC resource and policy pages, though not primary sources of rules and regulations, are valuable provider tools, relied upon for accessible and digestible breakdowns of Medicare policy. This includes physical and occupational therapists and referring providers who are among the [123,000 practitioners in the JE jurisdiction serving 3.8 million beneficiaries](#) (accounting for approximately 10.5% of the overall national Medicare FFS Part A and Part B claims volume) and 92,000 practitioners in the JF jurisdiction servicing 3 million beneficiaries (accounting for approximately 7.2% of the overall national Medicare FFS Part A and Part B claims volume).

The updated certification standard can help save these providers considerable administrative burden, as time previously spent tracking physician signatures down for payment can be replaced in certain circumstances simply by transmitting the plan of care one time and evidencing transmission in the medical documentation. The impact is even greater since most physical and occupational therapy services are delivered under a signed and dated referral and would otherwise qualify for the exception. While some practitioners may receive pertinent information through APTA, AOTA, or via periodic updates from Noridian, many rely on these web-based resources permanently housed within MAC webpages to guide their administrative operations. Unless this information is communicated accurately and effectively, countless providers may continue to operate under the outdated standard, wasting valuable time and resources that could be used to productively care for Medicare beneficiaries.

For these reasons, we ask Noridian to update its resources to reflect the recently finalized certification standard. Further, we hope you consider this request expediently, given that the exception has been available for nearly 9 months and the information outlining governing rules and regulations on this web page is not accurate or reflective of a provider's options. For convenience, we note that in Noridian's ["Outpatient Therapy Services Targeted Probe and Educate Review Results"](#), the exception is described at least briefly.¹ This language would serve as a perfectly acceptable placeholder for the page at issue, at least if Noridian seeks to develop this resource with more expansive details concerning the signature exception. Additionally, below, we offer alternative phrasing based on the language in the CY 2025 PFS final rule for Noridian's consideration.

¹ Noridian, Jurisdiction E, *Outpatient Therapy Services Targeted Probe and Educate Review Results*, Updated July 15, 2025. The description of the exception reads as follows: "For claims with a date of service of January 1, 2025, and after, there is an exception for initial certifications. This exception allows for initial certification requirements to be met if there is a signed practitioner order for therapy services and the initial plan of care was sent to the practitioner within 30 days of the initial evaluation"

(1) *Update existing language addressing the exception:*

“Timely certification of the initial plan is met when the physician/NPP certification of the plan is documented, by signature or verbal order, and dated in the 30 days following the first day of treatment (including evaluation). If the order to certify is verbal, follow it within 14 days by a signature to be timely. The patient’s medical record should include a dated notation of the order to certify the plan.

[Add Language] However, for dates of service on or after Jan. 1, 2025, when a patient is referred for rehabilitative therapy from a physician or other qualified nonphysician practitioner, the signature requirement for initial certification can be met by evidencing: (1) a signed and dated order; and (2) one-time transmission of the plan of care to the referring provider within 30 days of initial treatment.

(2) *Cite and refer providers to new regulatory language at [42 CFR 424.24\(c\)\(5\)](#).*

Conclusion

Thank you for considering this change request. Should you have any questions regarding this request, or wish to discuss this issue further, please contact Kim Karr, OTR/L, CPHQ, RAC-CT, Manager, Coding & Payment Policy at kkarr@aota.org, or Andrew Amari, JD, Sr. Specialist, Health Policy & Payment at andrewamari@apta.org.

Sincerely,



Sharon West
Director, Health Policy & Payment
American Physical Therapy Association



Heather Parsons
Vice President, Federal Affairs
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