

EXHIBIT 79

MODEL LETTER TO INDIVIDUALS REQUESTING TO PARTICIPATE IN MEDICARE AS OCCUPATIONAL THERAPISTS IN INDEPENDENT PRACTICE

Name of Individual
Street Address
City, State, ZIP Code

Dear _____:

This is in response to your inquiry regarding participation in the Medicare program as an occupational therapist in independent practice (OTIP). As a result of a change in Title XVIII of the Social Security Act (the Act), out-patient occupational therapy services (OOT) under Medicare include, effective July 1, 1987, the services of an (OTIP) when the services are furnished in the therapist's office or in the Medicare beneficiary's residence. Patients are accepted for treatment on the order of a physician and the services must be furnished under a plan established by a physician or occupational therapist which is periodically reviewed by a physician. To participate in the Medicare program as an OTIP you must meet the enclosed requirements.

The statutory basis for the OOT services benefit is found at section 1861(g) of the Act. Section 1861(g) gives the term "outpatient occupational therapy services" the meaning of "outpatient physical therapy services" by substituting "occupational" for "physical" each place it appears in 1861(p) of the Act. Although the outpatient therapy services benefit became effective July 1, 1987, final rules establishing specific Medicare requirements for an OTIP have not yet been published. Therefore, we are using guidelines, policies and procedures based on the existing process used to establish the eligibility of physical therapists in independent practice, (including compliance with State and local licensure requirements) to determine the eligibility of individuals requesting to participate in the Medicare program as OTIPs. Requirements, forms, instructions and procedures applicable to physical therapists in independent practice have been modified as appropriate to make them applicable to OTIPs. We anticipate that the final requirements and approval process for occupational therapists will be similar to the existing requirements and approval process for physical therapists. All occupational therapists who wish to participate as independent practitioners must be approved as being in compliance with the enclosed requirements in order to qualify for payment under this provision of the Act. If more than one office is maintained by an individual occupational therapist (including therapists in group practices and those who have formed partnerships and corporations), each **office** must meet the pertinent requirements.

If you relocate your office you must contact this agency for a determination concerning whether the new location meets the pertinent Medicare requirements.

(Name)

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(Date)

Please complete the enclosed Request to Establish Eligibility and return all but the last copy to this agency so that an initial determination may be made on your request for participation. You will be contacted regarding this determination, and informed of any additional procedures that must be undertaken.

The **(State Agency)** is responsible for determining compliance with Medicare regulations and certifying its findings to the CMS regional office, which will make the decision as to whether you qualify for participation in the Medicare program. An OTIP participating in the Medicare program under this approval process on the effective date of the final requirements, will continue to be eligible to participate until a determination is made concerning compliance with the final requirements.

Please direct any questions you may have about this program to **(State agency)**.

Sincerely yours,

State agency

Enclosure