

**Table 7: Estimated share of therapy patients exceeding alternative coverage limits
(using 1996 payment and utilization patterns)**

Assuming \$1500 of physical/speech and \$1500 occupational therapy, the following shares of therapy users would exceed their coverage:

- 12 percent of physical/speech therapy users would exceed the physical/speech therapy limit
- 19 percent of occupational therapy users would exceed the occupational therapy limit
- 14 percent of all therapy users would exceed one or the other limit

If the two limits each were set at \$2000, then:

- 9 percent of physical/speech therapy users would exceed the physical/speech therapy limit
- 15 percent of occupational therapy users would exceed the occupational therapy limit
- 10 percent of all therapy users would exceed one or the other limit

If the physical/speech therapy limit were split, and the three limits each were set at \$1500, then:

- 11 percent of physical therapy users would exceed the physical therapy limit
- 17 percent of speech therapy users would exceed the speech therapy limit
- 19 percent of occupational therapy users would exceed the occupational therapy limit
- 13 percent of all therapy users would exceed one or the other limit

If the physical/speech therapy limit were split, and the three limits each were set at \$2000, then:

- 8 percent of physical therapy users would exceed the physical therapy limit
- 13 percent of speech therapy users would exceed the speech therapy limit
- 15 percent of occupational therapy users would exceed the occupational therapy limit
- 9 percent of all therapy users would exceed one or the other limit

If a combined limit for the three therapy types were set, then:

- 7 percent of all therapy users would exceed a \$3,000 total limit
- 6 percent of all therapy users would exceed a \$3,500 total limit
- 5 percent of all therapy users would exceed a \$4,000 total limit
- 4 percent of all therapy users would exceed a \$4,500 total limit

Source: MedPAC briefing materials for Congressional committees and HCFA, summer 1998.