CONSIDERATIONS FOR PRO BONO PHYSICAL THERAPY SERVICES

Solution	Issue/Concern	Notes		
I'm an employer/clinic that wants to provide pro bono services				
Use employees, not independent contractors.	Employers may not utilize independent contractors.	Misclassified workers may claim: unpaid overtime and minimum wages; premiums for missed meal and rest breaks; reimbursement		
A PT practice which provides pro bono services must do so through employees and not independent contractors, as the penalties for misclassification are great.		for work-related expenses; unpaid unemployment insurance premiums; liquidated damages; attorneys' fees; and interest.		
		California Labor Code section 226.8 provides for civil penalties ranging from \$5,000 to \$15,000 per violation. Penalties increase to \$10,000 to \$25,000 if the misclassification is willful or part of a pattern or practice.		
Use the same level of supervision you	Under the principles of respondeat superior,			
would for paid services.	an employer in California can be held			
	vicariously liable for its employees'			
Practices must train, supervise and monitor	negligence. This principle applies when:			
any pro bono services to the same extent as	A. An employee is acting within the ordinary			
paid services.	scope of their employment; and			
	B. As the result of the employee's wrongful			
	actions, someone is injured.			
I want to use students				
PT employers looking to provide pro bono	Students who have no educational or	PTs and PTAs who are interested can contact		
services should do so through an	employment connection to the clinic where	the National Association of Free and		
organization designed for students and	they volunteer create the risk of wage and	Charitable Clinics (NAFC) to locate those		
volunteers to provide pro bono services and	hour violations under California law if there is	closest to them. ¹		
have the necessary legal structure and	no educational credit and supervision in how			
liability coverage to comply with the law in	their services are implemented.	A list of organizations can be found on the CPTA and APTA websites.		

¹ See https://nafcclinics.org/.

Solution	Issue/Concern	Notes
multiple jurisdictions to avoid the risks		
imposed by California law.		
PTs and PTAs looking to volunteer their time		
should also do so through such		
organizations.		
	a PT/PTA who wants to provide pro bono serv	ices
Any pro bono PT services must be delivered	Regardless of charges or who provides care,	Providing pro bono services utilizing lesser
by experienced, competent, and thorough	PTs must comport with the standard of care	experienced practitioners can pose a greater
practitioners.	and scope of practice. The PT Board will still	risk. ²
	enforce requirements for recordkeeping,	
	supervision of aides and assistants, direct	
	access requirements, and all obligations	
	under the Physical Therapy Practice Act and	
	Regulations.	
Because these can vary, we recommend	Pro bono PT and PTA services for patients	
reviewing them with legal counsel before	who have insurance coverage with a private	
agreeing to provide service as pro bono to	commercial payer or other nonfederal third-	
ensure the services conform with the	party payer must be performed in	
agreements. Often, no special allowance for	compliance with that payer, hospital, clinic or	
a reduction in the charges is given by the	institution's payment agreements.	
private payer just because the service was		
free.		
Waiving costs for copays and/or deductibles,	Deductibles and copays for PT services are	Practitioners can run into allegations of
even with the intent of making the service	regularly considered part of the medical	insurance or billing fraud when similar
affordable to the patient, is often not	service contract and/or agreement with a	services are "valued" differently.
permitted depending on the terms and	private third-party payer, a subscriber, and	
conditions of the payment agreement.	the medical provider.	This inconsistent valuing of services can lead
		to audits and inquiries, and even allegations

² Examining a Board complaint for negligence from the perspective of a license defense lawyer, a complaint for negligence in the scenario of a pro bono patient relationship or when an intern or volunteer or trainee provides care, will be far more difficult to defend. The insinuations of cutting corners or lack of care or experience cannot be avoided.

Solution	Issue/Concern	Notes
Under private payer agreements, if a patient		of insurance fraud, and can be an admission
has a copay, the PT should attempt to		that the PT is overvaluing services.4
collect the copay. The same is true for		
charging the value of the services. The PT		
may be bound by the contract to treat		
patients equally, not charge one carrier		
more than others, and to truthfully		
represent the value of the services.		
DHHS and OIG have provided guidelines on		
how to offer hospital discounts to those who		
cannot afford their hospital bills. ³		
There are a number of exceptions and safe	If a PT is a Medicare provider, they cannot	
harbors to the federal Anti-Kickback Statute,	provide pro bono services and avoid	
but they are complex and should be	submitting a claim to Medicare. Because the	
analyzed with legal counsel. ⁵	waiver reduces the amount the patient pays	
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	more Medicare services, and thus, may be an	
	unlawful kickback.	
Practitioners and employers alike should	Requirements for liability insurance	
ensure their insurance provides such	protection do not change when the PT	
coverage before offering pro bono services.	services are free. If a claim is made arising	
	from pro bono PT service, the errors and	
	omissions liability policy for a respective PT	
	may not cover that pro bono treatment	
	depending on the specific terms and	
	conditions of the professional liability policy.	

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https://oig.hhs.gov/documents/other-guidance/908/FA021904hospitaldiscounts.pdf.
 For more information see *The Importance of Collections/Avoid Writing Off Copays*, Heidi Jannenga, DPT, WebPT at https://www.webpt.com/blog/importance-collections-avoid-writing-copays/

⁵ See 42 U.S.C. § 1320a-7b and https://www.ecfr.gov/current/title-42/chapter-V/subchapter-B/part-1001/subpart-C/section-1001.952.

Below are issues that apply to anyone providing pro bono physical therapy services, whether you are a PT, PTA, or an employer of PTs and PTAs.

Issue	Our Recommendations	Notes
Services must comply with requirements of preexisting insurance plans. Pro bono PT and PTA services for patients who have insurance coverage with a private commercial payer or other nonfederal third-party payer must be performed in compliance with that payer, hospital, clinic or institution's payment agreements.	Because these can vary, we recommend reviewing them with legal counsel before agreeing to provide service as pro bono to ensure the services conform with the agreements. Often, no special allowance for a reduction in the charges is given by the private payer just because the service was free.	
Copays or deductibles cannot be waived. Deductibles and copays for PT services are regularly considered part of the medical service contract and/or agreement with a private third-party payer, a subscriber, and the medical provider.	Waiving costs for copays and/or deductibles, even with the intent of making the service affordable to the patient, is often not permitted depending on the terms and conditions of the payment agreement. Under private payer agreements, if a patient has a copay, the PT should attempt to collect the copay. The same is true for charging the value of the services. The PT may be bound by the contract to treat patients equally, not charge one carrier more than others, and to truthfully represent the value of the services.	Practitioners can run into allegations of insurance or billing fraud when similar services are "valued" differently. This inconsistent valuing of services can lead to audits and inquiries, and even allegations of insurance fraud, and can be an admission that the PT is overvaluing services. 7

⁷ For more information see *The Importance of Collections/Avoid Writing Off Copays*, Heidi Jannenga, DPT, WebPT at https://www.webpt.com/blog/importance-collections-avoid-writing-copays/.

No Pro Bono for Medicare providers. If a PT is a Medicare provider, they cannot provide pro bono services and avoid submitting a claim to Medicare. Because the waiver reduces the amount the patient pays for services, it may induce the patient to seek more Medicare services, and thus, may be an unlawful kickback.	DHHS and OIG have provided guidelines on how to offer hospital discounts to those who cannot afford their hospital bills. There are a number of exceptions and safe harbors to the federal Anti-Kickback Statute, but they are complex and should be analyzed with legal counsel. 8	
Requirements for liability insurance protection do not change when the PT services are free. If a claim is made arising from pro bono PT service, the errors and omissions liability policy for a respective PT may not cover that pro bono treatment depending on the specific terms and conditions of the professional liability policy.	Practitioners and employers alike should ensure their insurance provides such coverage before offering pro bono services.	

⁶ https://oig.hhs.gov/documents/other-guidance/908/FA021904hospitaldiscounts.pdf.

⁸ See 42 U.S.C. § 1320a-7b and https://www.ecfr.gov/current/title-42/chapter-V/subchapter-B/part-1001/subpart-C/section-1001.952.