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# OHIP – Changes in Coverage for Physiotherapy Services

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**The government is making changes to OHIP coverage for physiotherapy services to improve access for people most in need.**

**Effective April 1, 2005 government-funded physiotherapy services are available for people who are:**

- Seniors 65 and over
- Aged 19 and under
- Residents of long-term care homes at any age
- Needing physiotherapy services in their home or after being hospitalized at any age
- Ontario Disability Support Program, Family Benefits and Ontario Works recipients of any age

**Changes don't affect physiotherapy services currently provided by**

- Hospitals
- Community Care Access Centres
- Workplace Safety and Insurance Board

The government will also expand services beginning in April so that more long-term care homes across Ontario are able to offer physiotherapy to residents. The government will also increase physiotherapy services in rural and northern communities.

Ontarians aged 20 to 64 will continue to have access to coverage if they require physiotherapy after overnight hospitalization,

if they require services in their home or if they reside in a long-term care home. All Ontario Disability Support Program, Family Benefits and Ontario Works recipients will be covered regardless of age.

All other people aged 20 to 64 will no longer receive coverage for physiotherapy.

Ontarians with private insurance should check to see if their plan has coverage for physiotherapy.

## Frequently Asked Questions

### **Q. When do these changes take effect?**

Changes to coverage are effective April 1, 2005.

The government will be expanding services beginning in April so that more long-term care homes across Ontario are able to offer physiotherapy to residents.

The government will also increase physiotherapy services in rural and northern communities.

### **Q. Will my employer or my insurance company now pay for the whole cost of these services?**

This depends on the employer's insurance policy. Individuals should speak with their

employers about their plan.

**Q. How many physiotherapy visits are insured?**

A maximum of 50 visits per year are insured for patients requiring physiotherapy after they are discharged from hospital. Seniors 65 and over and people under 20 are covered for up to 100 visits per year.

**Q. Will Ontarians receiving social assistance be insured?**

Yes. All recipients of Ontario Works and Family Benefits, regardless of age, will be insured.

**Q. Will Ontarians with disabilities be insured?**

Recipients of the Ontario Disability Support Program are funded regardless of age.

Ontarians aged 20 to 64 will continue to be covered if they require physiotherapy after overnight hospitalization, if they require services in their home or if they live in a long-term care home.

**Q. Will a Workplace Safety and Insurance Board (WSIB) recipient of physiotherapy services be affected?**

No, changes do not affect services provided through WSIB.

**Q. What about a child who requires physiotherapy?**

All individuals 19 and under will continue to be insured.

**Q. Will a resident of a long-term care home who is not a senior be insured?**

Yes.

**Q. Will physiotherapy services be covered for inpatients at hospitals?**

Physiotherapy services will still be covered for hospital in-patients. Outpatient services if provided by a hospital are not affected.

**Q. What about physiotherapy services for day surgery patients?**

People over 65 and 19 and under, recipients of Ontario Disability Support Program, Family Benefits or Ontario Works and those who require out-patient physiotherapy provided by the hospital such as follow-up to day surgery will be covered.

Individuals aged 20 to 64 will only be covered if they were admitted overnight. They will not be covered for outpatient services including follow-up to day surgery. Ontarians with private insurance should check to see if their plan has coverage for physiotherapy.

**Q. Am I covered if I'm having elective surgery?**

Yes, if you are 65 or older or 19 and under. Individuals aged 20 to 64 discharged after an overnight stay will be covered for services provided by a designated physiotherapy clinic as long as they were referred by the hospital physician who treated them.

**Q. What about the person who has a sports injury, is not hospitalized and requires physiotherapy?**

These people will not be covered unless they are over 65 or 19 and under, a recipient of the Ontario Disability Support Program, Family Benefits or Ontario Works or if a physician has requested in-home service.

**Q. What about the person who was taken to the Emergency Department with an injury but was not admitted to hospital?**

People over 65 and 19 and under, recipients of Ontario Disability Support Program, Family Benefits or Ontario Works and people whose physician has requested in-home physiotherapy services will be covered.

People aged 20 to 64 discharged after an overnight stay will receive coverage for physiotherapy at a designated OHIP-insured physiotherapy clinic if the patient has been referred by the hospital physician who treated them.

People aged 20 to 64 who are taken to the ER, or receive outpatient treatment such as day surgery, after they leave the hospital will not be covered. These Ontarians may have private insurance coverage for physiotherapy or may have to pay for it themselves.

**Q. What if I am being discharged from the hospital and require physiotherapy?**

People aged 20 to 64 discharged after an overnight stay will receive physiotherapy by a designated clinic as long as they were referred by the hospital physician who treated them.

**Q. What about physiotherapy services through Community Care Access Centres (CCACs)?**

These changes to coverage do not affect physiotherapy services provided by hospitals and Community Care Access Centres.

CCACs assess patients' needs, determine eligibility, and arrange for a variety of services including physiotherapy. Most patients receive CCAC services in their homes.

To be eligible for CCAC physiotherapy services the client's needs cannot be met by out-patient services, like community physiotherapy clinics.

**Q. If I'm under 65 and need physiotherapy in my home, am I eligible for coverage?**

Yes. You must have a condition or injury that requires you to receive in-home physiotherapy. Either your doctor will refer you for these services or they will be arranged through your local CCAC.

**Q. What about an individual who has a chronic illness who requires physiotherapy?**

They will receive coverage if they are 65 and over, 19 and under, living in a long-term care home, receiving this service through a CCAC, or are a recipient of the Ontario Disability Support Program, Ontario Works, or Family Benefits.

Other people aged 20 to 64 who have a chronic disease will not be covered. Ontarians with private insurance should check to see if their plan has coverage for physiotherapy.

**Q. Will individuals who are receiving physiotherapy services (a pre-planned program) be charged for sessions after April 1, 2005 or will they be able to finish the pre-planned program without paying?**

People over 65 and 19 and under, recipients of the Ontario Disability Support Program, Family Benefits or Ontario Works, long-term care residents, and people who have a physician referral for in-home or post-hospitalization physiotherapy services, regardless of age will continue to have public coverage.

All other people aged 20 to 64 will no longer receive coverage for physiotherapy. Ontarians with private insurance should check to see if their plan has coverage for physiotherapy.

**Q. How much does OHIP cover for these services?**

OHIP covers the \$12.20 fee for all insured services up to a total of 100 visits per year for people 65 and over and those 19 and under. Patients discharged from hospital will be covered for a maximum of 50 physiotherapy services per year.

In addition, OHIP covers the \$24.40 fee for the initial physiotherapy visit to home care and long-term care patients.

Clinics may also charge patients assessment fees and reassessment fees. This charge is not and has never been covered by OHIP. Individuals should speak with their physiotherapist regarding the fees.

**Q. How can I find a designated OHIP-insured physiotherapy clinic?**

You can ask your physiotherapist or doctor or you can find more information on the College of Physiotherapists of Ontario website [www.collegept.org](http://www.collegept.org) or by contacting the Ministry of Health and Long-Term Care at the following number and websites.

**Note:** Eligibility for all services continues to depend on medical need. Where services beyond the identified maximums may be required a process based on medical need is being developed. Information on this will be communicated separately.

**Find out more**

For information about health services and resources:  
[www.health.gov.on.ca](http://www.health.gov.on.ca)

For consumer-friendly health tips and information:  
[www.HealthyOntario.com](http://www.HealthyOntario.com)

INFOline: 1-800-268-1154 toll free in Ontario  
TTY: 1-800-387-5559

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