

Good afternoon Chair and members of the Committee,

My name is Mike Landsberg, and I am a licensed Athletic Trainer practicing here in Vermont. Thank you for the opportunity to speak in support of Section 7 of H.585, which advances site-neutral billing for outpatient physical rehabilitation services, including physical therapy, occupational therapy, and athletic training.

I want to focus specifically on the inclusion of Athletic Trainers in this policy and why it is both timely and necessary for Vermont's healthcare system.

First, Vermont is facing a well-documented shortage of physical therapists, particularly in rural and underserved communities. This shortage directly translates into reduced patient access—longer wait times, delayed care, and in some cases, patients foregoing treatment altogether. These access challenges are not theoretical; they are happening now, across our state. Including Athletic Trainers as recognized rehabilitation providers helps expand the workforce immediately, without compromising quality, and ensures patients can receive timely, appropriate care.

Second, Athletic Trainers are not new to rehabilitation—we are already integrated into the continuum of musculoskeletal care. Orthopedic physicians have long recognized this value. In many orthopedic practices, Athletic Trainers are among the first providers placed alongside physical therapists to deliver rehabilitation services. This team-based model is efficient, effective, and already trusted by referring providers. Section 7 simply aligns reimbursement policy with what is already happening in clinical practice.

Third, Athletic Trainers bring a unique and highly specialized skill set, particularly in the rehabilitation of athletes and the active population. Whether it's a high school student recovering from an ACL injury, a worker trying to return to a physically demanding job, or an older adult striving to maintain mobility and independence, Athletic Trainers are trained to guide patients safely back to activity. Our expertise in functional movement, injury prevention, and return-to-play—or return-to-work—decisions fills a critical gap in Vermont's healthcare system.

However, for this policy to succeed, clarity in statutory language is essential. It is critical that Section 7 explicitly establishes **payment parity across provider types** delivering the same rehabilitation services. Without clear direction, insurers may continue to apply inconsistent reimbursement policies, undermining both access and provider participation. Site-neutral billing must mean that care is reimbursed based on the service provided—not the setting or the specific provider designation—when delivered within scope of practice.

Clear pay parity language will:

- Prevent administrative barriers and confusion among insurers
- Ensure fair and sustainable reimbursement for all qualified providers
- Encourage broader participation in-network, especially among independent and community-based practices
- Most importantly, protect patient access by expanding—not restricting—the rehabilitation workforce

In closing, Section 7 represents a practical and measurable step forward in healthcare reform. Including Athletic Trainers strengthens this policy by addressing workforce shortages, improving access, and supporting high-quality, team-based care. With clear language on payment parity, Vermont can set a strong precedent for equitable, efficient rehabilitation services.

Thank you for your time and consideration, and I am happy to answer any questions.

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