

ETHICS IN MASSAGE THERAPY

ETHICS IN MASSAGE THERAPY

GOALS AND OBJECTIVES

COURSE DESCRIPTION

"Ethics in Massage Therapy" is a home study continuing education program for healthcare professionals. The course focuses on defining ethical professional behavior of Massage Therapists. Information presented includes sections on the theoretical basis for ethical decision-making, the AMTA's Code of Ethics and Standards of Practice, legal standards of behavior, and hypothetical case scenarios.

COURSE RATIONALE

This course was developed to promote and facilitate ethical behavior among therapists and other healthcare professionals in the rehabilitation setting.

COURSE GOALS

1. The student will understand the theoretical basis for ethical decision-making.
2. The student will review and be familiar with the AMTA's Code of Ethics and Standards of Practice.
3. The student will analyze and interpret hypothetical situations to determine ethical behavior.
4. The student will understand the basic rights of the patient.
5. The student will learn about the legal and ethical considerations of billing and coding.
6. The student will understand the meaning and implications of "conflict of interest".
7. The student will learn about appropriate relationships in the rehabilitation setting.

COURSE OBJECTIVES

1. Increase understanding of the process required for ethical decision-making.
2. Familiarize therapists and assistants with their profession's Code of Ethics.
3. Review and interpret the laws and rules that govern rehabilitation professionals.
4. Develop improved problem solving skills relating to ethical dilemmas.
5. Review and explain basic patient rights.
6. Examine the ethical considerations involved with billing for rehab services.
7. Discuss the meaning and implications of conflict of interest.
8. Review and examine appropriate relationships in rehabilitation.

COURSE EDITOR

Michael Niss PT

METHODS OF INSTRUCTION

Home study course available via internet or written correspondence.

CRITERIA FOR ISSUANCE OF CONTINUING EDUCATION CREDITS

A documented score of 70% or greater on the written post-test.

DETERMINATION OF CONTACT HOURS

"Ethics in Massage Therapy" will require at least 2 hours to complete. This estimate is based on the accepted standard for home study courses of approximately 10-12 pages of written text (12 pt font) per hour. The complete text of this course is 21 pages (excluding Bibliography and Post Test)

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ETHICS

The word "ethics" is derived from the Greek word *ethos* (character), and from the Latin word *mores* (customs). Together, they combine to define how individuals choose to interact with one another. In philosophy, ethics defines what is good for the individual and for society and establishes the nature of duties that people owe themselves and one another. Ethics is also a field of human inquiry ("science" according to some definitions) that examines the bases of human goals and the foundations of "right" and "wrong" human actions that further or hinder these goals.

WHY ETHICS IS IMPORTANT

Ethics is important on several levels.

- People feel better about themselves and their profession when they work in an ethical manner.
- Professions recognize that their credibility rests not only on technical competence, but also on public trust.
- At the organizational level, ethics is good business. Several studies have shown that over the long run ethical businesses perform better than unethical businesses.

ETHICS VS. MORALS

Although the terms "ethics" and "morals" are often used interchangeably, they are not identical. Morals usually refer to practices; ethics refers to the rationale that may or may not support such practices. Morals refer to actions, ethics to the reasoning behind such actions. Ethics is an examined and carefully considered structure that includes both practice and theory. Morals include ethically examined practices, but may also include practices that have not been ethically analyzed, such as social customs, emotional responses to breaches of socially accepted practices and social prejudices. Ethics is usually at a higher intellectual level, more universal, and more dispassionate than morals. Some philosophers, however, use the term "morals" to describe a publicly agreed-upon set of rules for responding to ethical problems.

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ETHICAL QUESTIONS

Ethical questions involve 1) responsibilities to the welfare of others or to the human community; or 2) conflicts among loyalties to different persons or groups, among responsibilities associated with one's role (e.g. as consumer or provider), or among principles. Ethical questions include (or imply) the words "ought" or "should".

ETHICS THEORIES

Throughout history, mankind has attempted to determine the philosophical basis from which to define right and wrong. Here are some of the more commonly accepted theories that have been proposed.

UTILITARIANISM

This philosophical theory develops from the work of Jeremy Bentham and John Stewart Mill. Simply put, utilitarianism is the theory that right and wrong is determined by the consequences. The basic tool of measurement is pleasure (Bentham) or happiness (Mill).

A morally correct rule was the one that provided the greatest good to the greatest number of people.

SOCIAL CONTRACT THEORY

Social contract theory is attributed to Thomas Hobbes, John Locke, and from the twentieth century, John Rawls. Social contract theories believe that the moral code is created by the people who form societies. These people come together to create society for the purpose of protection and gaining other benefits of social cooperation. These persons agree to regulate and restrict their conduct to achieve this end.

DEONTOLOGICAL OR DUTY THEORY

Under this theory you determine if an act or rule is morally right or wrong if it meets a moral standard. The morally important thing is not consequences but the way choosers think while they make choices. One famous philosopher who developed such a theory was Immanuel Kant (1724-1804).

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ETHICAL INTUITIONISM

Under this view an act or rule is determined to be right or wrong by appeal to the common intuition of a person. This intuition is sometimes referred to as your conscience. Anyone with a normal conscience will know that it is wrong to kill an innocent person.

ETHICAL EGOISM

This view is based on the theory that each person should do whatever promotes their own best interests; this becomes the basis for moral choices.

VIRTUE ETHICS

This ethics theory proposes that ethical behavior is a result of developed or inherent character traits or virtues. A person will do what is morally right because they are a virtuous person. Aristotle (384-322 B.C.) was a famous exponent of this view. Aristotle felt that virtue ethics was the way to attain true happiness. These are some of the commonly accepted virtues.

Autonomy: the duty to maximize the individual's right to make his or her own decisions.

Beneficence: the duty to do good.

Confidentiality: the duty to respect privacy of information.

Finality: the duty to take action that may override the demands of law, religion, and social customs.

Justice: the duty to treat all fairly, distributing the risks and benefits equally.

Nonmaleficence: the duty to cause no harm.

Understanding/Tolerance: the duty to understand and to accept other viewpoints if reason dictates.

Respect for persons: the duty to honor others, their rights, and their responsibilities.

Universality: the duty to take actions that hold for everyone, regardless of time, place, or people involved.

Veracity: the duty to tell the truth.

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HOW TO MAKE RIGHT DECISIONS

The foundation for making proper ethical decisions is rooted in an individual's ability to answer several fundamental questions concerning their actions.

1. Is it legal?

Weighing the legality of one's actions is a prudent way to begin the decision-making process. The laws of a geographic region are a written code of that region's accepted rules of conduct. This code of conduct usually defines clearly which actions are considered acceptable and which actions are unacceptable. However, a legitimate argument can be made that sometimes what is legal is not always moral, and that sometimes what is moral is not always legal. This idea is easily demonstrated by the following situation.

It is illegal for a pedestrian to cross a busy street anywhere other than at the designated crosswalk (jaywalking). A man is walking down a street and sees someone fall and injure themselves on the other side of the street. He immediately crosses the street outside of the crosswalk to attend to the injured person. Are his actions legal? Are they moral? What if by stepping into the street he causes a car to swerve and to strike another vehicle?

Admittedly, with the exception of policemen and attorneys, most people do not know all of the specific laws that govern their lives. However, it is assumed that most people are familiar with the fundamental virtues from which these laws are based, and that they will live their lives in accordance with these virtues.

2. Is it ethical?

Professional ethical behavior as it is defined in this context relates to actions that are consistent with the normative standards established or practiced by others in the same profession. For Massage Therapists, these ethical standards are documented in the American Massage Therapy Association's Code of Ethics. All Massage Therapists, even those who are not members of the AMTA, are bound to these guidelines. This is because The AMTA Code of Ethics is the accepted and de facto standard of practice throughout the profession.

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3. Is it fair?

I think most people would agree that the concept of fairness is often highly subjective. However, for these purposes, we will define fairness as meaning deserved, equitable and unbiased. Fairness requires the decision-maker to have a complete understanding of benefits and liabilities to all parties affected by the decision. Decisions that result in capricious harm or arbitrary benefit cannot be considered fair. The goal of every decision should be an outcome of relative equity that reflects insightful thought and soundness of intent.

4. Would you want others to know of your decision?

This question presents as a true reflection of the other three. Legal, ethical, and fair are defined quite differently by most people when judged in the comfort of anonymity versus when it is examined before the forum of public opinion. Most often it is the incorrect assumption that “no one will ever find out about this” that leads people to commit acts of impropriety. How would your decisions change, if prior to taking any actions, you assumed just the opposite; “other people will definitely know what I have done”. One sure sign of a poor decision is debating the possible exposure of an action instead of examining the appropriateness of it.

ETHICAL CONSIDERATIONS IN MASSAGE THERAPY

PATIENT RIGHTS

1. Confidentiality

The information contained in each patient’s medical record must be safeguarded against disclosure or exposure to nonproprietary individuals. The right to know any medical information about another is always predicated on a sound demonstration of need. Frequently, many individuals require access to information contained in a patient’s medical record. Their right to access this information is limited to only that information which is deemed necessary for them perform their job in a safe, effective, and responsible manner.

Case Study

John Jones LMT, Sue Brown (receptionist), and Mary Smith (accounts payable), are in a private office discussing the fact that they are

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treating Biff Simpson, a star NFL quarterback. John says, "I can't believe that I'm actually treating Biff Simpson." Mary asks, "How bad do you think his injury is?" John replies, "I saw his MRI report, it looks like he is going to need surgery."

Is this a breach in confidentiality?

The first questions we must ask are "What information is being disclosed and do the three individuals engaged in the conversation have a need to know this information?"

John's first statement discloses the name of person receiving care, and his second statement reveals private patient medical information. Certainly, as the client's massage therapist, John would need to know the client's name and therapy related diagnosis in order to provide care. Sue, the receptionist, may also need this information to schedule appointments and perform other essential clerical tasks. Mary, whose job it is to manage accounts payable, most likely has no compelling reason to know either the patient's identity or any of his medical information. Therefore, the disclosure to Mary of the client's identity and medical information is a breach of patient confidentiality.

2. Care Provided By Qualified Individuals

The practice of massage therapy is regulated throughout the United States. Most states, through legislation, establish minimal licensure and practice standards. This is done to protect the general public against fraud and substandard care by under-qualified practitioners. It is each massage therapist's responsibility to adhere to the standards of care and licensure requirements specific to the state in which they practice. The therapist must also ensure that all care provided not directly by them, but under their supervision, also meets these standards.

Case Study

You work in very busy outpatient rehab clinic. One of your coworkers is an aide who has worked in rehabilitation for more than 20 years. Frequently, she is called upon to perform treatments that should be done by a licensed massage therapist. The patients always give her compliments, and frequently request her to treat them. She demonstrates exceptional skills and achieves outstanding outcomes.

Is the clinic providing ethical care to its patients?

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The answer is no. In this situation, the aide's abilities and outcomes are considered irrelevant. The key sentence in the paragraph is: "perform treatments that should be done by a licensed massage therapist." The "should" in this case must not be interpreted as merely a casual suggestion but rather a legal definition regulated by the state's Massage Therapy Practice Act. Any treatment or procedure that **should** be performed by a licensed professional, **must** be performed by a licensed professional.

3. Informed Consent

Informed consent is the process by which a fully informed patient can participate in choices about their health care. It originates from the legal and ethical right the patient has to direct what happens to their body and from the ethical duty of the therapist to involve the patient in her health care.

The most important goal of informed consent is that the patient has an opportunity to be an informed participant in their health care decisions. It is generally accepted that complete informed consent includes a discussion of the following elements:

- the nature of the decision/procedure
- reasonable alternatives to the proposed intervention
- the relevant risks, benefits, and uncertainties related to each alternative
- the consequences on non-treatment
- the goals of treatment
- the prognosis for achieving the goals
- assessment of patient understanding
- the acceptance of the intervention by the patient

In order for the patient's consent to be valid, they must be considered competent to make the decision at hand and their consent must be voluntary. It is easy for coercive situations to arise in medicine. Patients often feel powerless and vulnerable. The therapist should make clear to the patient that they are participating in a decision, not merely signing a form. With this understanding, the informed consent process should be seen as an invitation for them to participate in their health care decisions. The therapist is also generally obligated to provide a recommendation and share their reasoning process with the patient. Comprehension on the part of the patient is equally as important as the information provided. Consequently, the discussion should be carried on in layperson's terms and the patient's understanding should be assessed along the way.

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Case Study

Sam is a LMT who has just received orders from a physician to begin massage to the legs of a 75-year-old woman who has recently become bed ridden and is developing edema in her lower extremities. He goes to her hospital room to provide the massage. She refuses the treatment and asks Sam to leave. Sam explains to her that her doctor has left orders for her to receive the treatment. The patient again refuses. Sam leaves and returns the next day to try again. Again, she declines treatment and he leaves.

Under the guidelines of informed consent, were the therapist's actions adequate?

The therapist's actions were not sufficient. None of the required information was offered to the patient. The most important thing the therapist failed to explain to the patient was the consequences of non-treatment. The patient cannot make an informed decision regarding therapy without this information. It could be argued that her decision to refuse therapy may have changed had she known that one of the consequences of this decision could be the development of secondary complications. (i.e. increased risk of morbidity or mortality)

4. Care Based on Medical Necessity

Therapists are obligated to propose and provide care that is based on sound medical rationale, patient medical necessity, and treatment efficacy and efficiency. It is unethical to either alter or withhold care based on other extraneous factors without the patient's knowledge and consent.

Case Study

Steve is a massage therapist who owns his own therapy clinic. He recently signed a contract with an HMO to provide massage therapy services. The contract stipulates that Steve will be compensated on a case rate basis. (A fixed amount of money per patient, based on diagnosis) Steve has performed a thorough cost analysis on this contract and has determined that the financial "breakeven" point (revenue equals expenses) on each of these patients is 5 visits. He informs his staff that all patients covered by this insurance must be discharged by their fourth visit.

Is limiting care in this manner ethical?

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No, it is not ethical. In this instance, the quantity of care is not being determined by the medical necessity of the patient. A therapist must be able to justify all of their professional decisions (such as the discharging of a patient from clinical care) based on sound clinical rationale and practices.

BILLING AND CODING

The Triad

Ethical conduct as it relates to billing and coding for rehab services, revolves around one ideological triad. The triad being: What was performed = What was documented = What was billed. All three components of the triad must always be identical. A clinician must be sure never to perform one service, and then document it or bill it as something different. To do so, represents a fraud, and it subjects the therapist to possible prosecution.

Co-payments and Deductibles

All co-payments and deductibles must be collected. In most instances, the decision on whether or not to collect this money cannot be made by the provider. The reason for this is quite simple. When a patient purchases a health insurance policy, (either as an individual or through a group plan), they are signing a legal contract that contains specific terms and stipulations. Typically, the cost of the policyholder's monthly premiums is based on the amount of coverage they have purchased and also the amount of co-payment and deductible. A high co-payment/deductible results in a lower monthly premium. Conversely, a low co-payment/deductible will result in a higher monthly premium. By not collecting the co-payment/deductible, the therapist is effectively conspiring with the patient to defraud their insurance company. (After all, doesn't the insurance company have a legitimate argument that the patient should be paying a higher monthly premium if they don't have to pay a co-payment or deductible?) The common response given by providers is "Why should the insurance company care, I'm the one who is not getting paid?" That is true, however, ultimately, the insurance company ends up paying out more because the patient, without any financial responsibility, will usually attend more therapy sessions.

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Case Study (true)

A chiropractic office located in Sunrise, Florida began offering free massages to all city employees. Everyday the facility was overflowing with policemen, maintenance workers, clerical staff, and even council members. Everyone enjoyed the free service and visited frequently. The chiropractors were able to provide this service "free" to the city employees because they billed the massage recipient's insurance and then waived their mandatory co-pay.

Soon after, the insurer began receiving the bills. The insurer in this case was the City of Sunrise itself. (The city was self-insured.)

The city then contacted the FBI to have the doctor's office investigated for insurance fraud. Numerous employees were demoted or fired for their role in the scheme. One of the doctors has been convicted on several counts of insurance fraud and the other three doctors are currently being prosecuted.

What effect do you think writing off the co-payments has on the total visits per patient and the associated charges billed to the insurer?

The answer is quite clear. Managed care companies are modeled on the fact that patients who must pay for a portion of their healthcare upon delivery, request fewer services and subsequently have lower total bills than those who pay nothing.

CONFLICTS OF INTEREST

A conflict of interest is a situation in which a person has a private or personal interest that influences the objective exercise of his or her professional duties. As a professional you take on certain responsibilities and obligations to patients, employers, and others. These obligations must take precedence over a therapist's private or personal interests.

In addition to avoiding all real instances of conflict of interest, therapists must also avoid any apparent or potential conflicts as well.

An apparent conflict of interest is one in which a reasonable person would think that the professional's judgment is likely to be compromised, and a potential conflict of interest involves a situation that may develop into an actual conflict of interest.

How do you determine if you are in a conflict of interest, whether actual, apparent, or potential? The key is to determine whether the situation you are in interferes or is likely to interfere with your independent judgment. A good test is the 'trust test': Would relevant others [my employer, my patients, professional colleagues, or the general public] trust my judgment if they knew I was in this

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situation. Trust is at the ethical heart or core of this issue. Conflicts of interest involve the abuse, actual or potential, of the trust people have placed in professionals. This is why conflicts of interest not only injure particular patients and employers, but they also damage the whole profession by reducing the trust people generally have in therapists.

Case Study

Debi Jones LMT is employed in a private massage practice. She is meeting with a vendor whose company is introducing a new over-the-counter dietary supplement. He offers her 10 bottles of the supplement to "try out" on patients. The vendor states that if Debi continues to order and dispense a certain amount of supplement each month, she will qualify to receive compensation from his company by automatically becoming a member of its National Clinical Assessment Panel.

Does this represent a conflict of interest?

Yes, there exists a conflict of interest in this situation. Debi's primary obligation is to her patient. It is her professional duty to only provide and recommend care that is appropriate and beneficial to the patient. Conflict of interest occurs when she begins to accept compensation from the vendor in direct or indirect response for her dietary supplement orders. Even if she truly believes it is the best supplement for her patient, by accepting the money she has established at least an apparent conflict of interest. Under this situation she is obligated to disclose to all parties her financial interest in recommending the product. This disclosure is necessitated because the potential for personal gain would make others rightfully question whether her objectivity was being influenced.

RELATIONSHIPS

Referral Sources

It is unethical for a massage therapist to offer **anything of value** to physicians or any other referral source **in direct or indirect response for the referral of patients or services**. This includes cash, rebates, gifts, discounts, reduced rent, services, equipment, employees, or marketing. Many mistakenly believe that it is a normal acceptable business practice to offer these things to referral sources. It is not. In most states, the practice is not only unethical, but it is also illegal. Exchanges of valued items or services between therapists and referral sources **must never have any relationship to the referral of patients**. Goodwill gifts of nominal value are acceptable provided that no correlation can be made between the magnitude or frequency of the gift giving and referral

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patterns. All business agreements and transactions should always be well documented and most importantly, **reflect fair market value**.

Case Study

Larry Jones LMT owns a private practice. Business has been poor. He decides to sublease half of his space to a Chiropractic Physician. Larry's current lease is at \$20/sq ft. The doctor wants to pay \$15/sq ft. They come to a compromise of \$17/sq ft. Larry also agrees that if the doctor refers him 10 patients per month, he'll make him the Medical Director of the facility and pay him a salary of \$500/month.

Is this an ethical arrangement?

No, this agreement is not ethical. The most notable infraction involves offering to designate the physician as Medical Director contingent upon the number of referrals he sends. This is undeniably a direct offer of cash for patients. Another area of concern is the rent. At first glance, the rent amount of \$17/sq ft seems fair because it was a compromise between the two parties. However, closer scrutiny reveals this to be unethical. The fair market value for rent has been established as \$20/ft. (Larry's current rental agreement with his landlord) By discounting the doctor \$3/sq ft on his rent, Larry is giving a referral source something of value.

Patients

A high potential for conflict of interest and loss of professional objectivity exists whenever a therapist participates in a romantic relationship with an active patient.

Therefore, it is considered highly unethical for a therapist to become romantically involved with a patient currently under their care. (refer to the AMTA's Code of Ethics)

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AMTA's Standards of Practice

Purpose Statement: These American Massage Therapy Association (AMTA) Standards of Practice were developed to assist the professional massage therapist to:

- provide safe, consistent care
- determine the quality of care provided
- provide a common base to develop a practice
- support/preserve the basic rights of the client and professional massage therapist
- assist the public to understand what to expect from a professional massage therapist

This document allows the professional massage therapist to evaluate and adapt performance in his/her massage/bodywork practice. The professional massage therapist can evaluate the quality of his/her practice by utilizing the Standards of Practice in conjunction with the Code of Ethics, the Bylaws and Policies of AMTA, and precedents set by the AMTA Grievance, Standards, and Bylaws Committees.

1. Conduct of the Professional Massage Therapist or Practitioner, hereinafter referred to as "Practitioner"

1.1 AMTA members must meet and maintain appropriate membership requirements.

1.2 Individual AMTA members who engage in the practice of professional massage/bodywork, shall adhere to standards of professional conduct, including the AMTA Code of Ethics.

1.3 The Practitioner follows consistent standards in all settings.

1.4 The Practitioner seeks professional supervision/consultation consistent with promoting and maintaining appropriate application of skills and knowledge.

2. Sanitation, Hygiene and Safety

2.1 Practitioner provides an environment consistent with accepted standards of sanitation, hygiene, safety and universal precautions.

2.2 Pathophysiology (Contraindications)

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2.2.1 The Practitioner maintains current knowledge and skills of pathophysiology and the appropriate application of massage/bodywork.

2.2.2 The Practitioner monitors feedback from the client throughout a session.

2.2.3 The Practitioner makes appropriate referrals to other reputable healthcare providers.

3. Professional Relationships with Clients

3.1 The Practitioner relates to the client in a manner consistent with accepted standards and ethics.

3.2 The Practitioner maintains appropriate professional standards of confidentiality.

3.3 The Practitioner relates to the client in a manner which respects the integrity of the client and practitioner.

3.4 The Practitioner ensures that representations of his/her professional services, policies, and procedures are accurately communicated to the client prior to the initial application of massage/bodywork.

3.5 The Practitioner elicits participation and feedback from the client.

4. Professional Relationships with Other Professionals

4.1 The Practitioner relates to other reputable professionals with appropriate respect and within the parameters of accepted ethical standards.

4.2 The Practitioner's referrals to other professionals are only made in the interest of the client.

4.3 The Practitioner's communication with other professionals regarding clients is in compliance with accepted standards and ethics.

4.4 A Practitioner possessing knowledge that another practitioner:

(1) committed a criminal act that reflects adversely on the Practitioner's competence in massage therapy, trustworthiness or fitness to practice massage therapy in other respects;

2) engaged in an act or practice that significantly undermines the massage therapy profession; or

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(3) engaged in conduct that creates a risk of serious harm for the physical or emotional well being of a recipient of massage therapy; shall report such knowledge to the appropriate AMTA committee if such information is not protected or restricted by a confidentiality law.

5. Records

5.1 Client Records

5.1.1 The Practitioner establishes and maintains appropriate client records.

5.2 Financial Records

5.2.1 The Practitioner establishes and maintains client financial accounts that follow accepted accounting practices.

6. Marketing

6.1 Marketing consists of, but is not limited to, advertising, public relations, promotion and publicity.

6.2 The Practitioner markets his/her practice in an accurate, truthful and ethical manner.

7. Legal Practice

7.1 American Massage Therapy Association members practice or collaborate with all others practicing professional massage/bodywork in a manner that is in compliance with national, state or local municipal law(s) pertaining to the practice of professional massage/bodywork.

8. Research

8.1 The Practitioner engaged in study and/or research is guided by the conventions and ethics of scholarly inquiry.

8.2 The Practitioner doing research avoids financial or political relationships that may limit objectivity or create conflict of interest.

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AMTA Code of Ethics for Massage Therapists

This Code of Ethics is a summary statement of the standards by which massage therapists agree to conduct their practices and is a declaration of the general principles of acceptable, ethical, professional behavior.

Massage therapists shall:

- Have a sincere commitment to provide the highest quality care to those who seek their professional service.
- Perform only those services for which they are qualified and represent their education, certifications, professional affiliations, and other qualifications honestly.
- Acknowledge the inherent worth and individuality of each person and, therefore, do not unjustly discriminate against clients or colleagues and work to eliminate prejudices in the profession.
- Strive for professional excellence through regular assessment of personal strengths, limitations and effectiveness and by continued education and training.
- Actively support the profession through participation in local, state, and national organizations which promote high standards of practice of massage therapy.
- Work in their communities toward the understanding and acceptance of massage therapy as a valuable health service, abide by all laws governing massage practice and work for the repeal or revision of laws detrimental to the legitimate practice of massage therapy.
- Acknowledge the confidential nature of the professional relationship with a client and respect each client's right to privacy.
- Respect all ethical health care practitioners and work together amicably to promote health and natural healing.
- Conduct their business and professional activities with honesty and integrity and project a professional image in all aspects of their practices.
- Accept the responsibility to self, clients and associates to maintain physical, mental and emotional well-being.
- Respect the integrity of each person and, therefore, do not engage in any sexual conduct or sexual activities involving their clients.

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Florida Patient's Bill of Rights and Responsibilities. (abridged)

(4) RIGHTS OF PATIENTS.--Each health care facility or provider shall observe the following standards:

(a) *Individual dignity*--

1. The individual dignity of a patient must be respected at all times and upon all occasions.
2. Every patient who is provided health care services retains certain rights to privacy, which must be respected without regard to the patient's economic status or source of payment for his or her care. The patient's rights to privacy must be respected to the extent consistent with providing adequate medical care to the patient and with the efficient administration of the health care facility or provider's office. However, this subparagraph does not preclude necessary and discreet discussion of a patient's case or examination by appropriate medical personnel.
3. A patient has the right to a prompt and reasonable response to a question or request. A health care facility shall respond in a reasonable manner to the request of a patient's health care provider for medical services to the patient. The health care facility shall also respond in a reasonable manner to the patient's request for other services customarily rendered by the health care facility to the extent such services do not require the approval of the patient's health care provider or are not inconsistent with the patient's treatment.
4. A patient in a health care facility has the right to retain and use personal clothing or possessions as space permits, unless for him or her to do so would infringe upon the right of another patient or is medically or programmatically contraindicated for documented medical, safety, or programmatic reasons.

(b) *Information*--

1. A patient has the right to know the name, function, and qualifications of each health care provider who is providing medical services to the patient. A patient may request such information from his or her responsible provider or the health care facility in which he or she is receiving medical services.
2. A patient in a health care facility has the right to know what patient support services are available in the facility.

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3. A patient has the right to be given by his or her health care provider information concerning diagnosis, planned course of treatment, alternatives, risks, and prognosis, unless it is medically inadvisable or impossible to give this information to the patient, in which case the information must be given to the patient's guardian or a person designated as the patient's representative. A patient has the right to refuse this information.
4. A patient has the right to refuse any treatment based on information required by this paragraph, except as otherwise provided by law. The responsible provider shall document any such refusal.
5. A patient in a health care facility has the right to know what facility rules and regulations apply to patient conduct.
6. A patient has the right to express grievances to a health care provider, a health care facility, or the appropriate state licensing agency regarding alleged violations of patients' rights. A patient has the right to know the health care provider's or health care facility's procedures for expressing a grievance.
7. A patient in a health care facility who does not speak English has the right to be provided an interpreter when receiving medical services if the facility has a person readily available who can interpret on behalf of the patient.

(c) *Financial information and disclosure.*--

1. A patient has the right to be given, upon request, by the responsible provider, his or her designee, or a representative of the health care facility full information and necessary counseling on the availability of known financial resources for the patient's health care.
2. A health care provider or a health care facility shall, upon request, disclose to each patient who is eligible for Medicare, in advance of treatment, whether the health care provider or the health care facility in which the patient is receiving medical services accepts assignment under Medicare reimbursement as payment in full for medical services and treatment rendered in the health care provider's office or health care facility.
3. A health care provider or a health care facility shall, upon request, furnish a patient, prior to provision of medical services, a reasonable estimate of charges for such services. Such reasonable estimate shall not preclude the health care provider or health care facility from exceeding the estimate or making additional charges based on changes in the patient's condition or treatment needs.

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4. A patient has the right to receive a copy of an itemized bill upon request. A patient has a right to be given an explanation of charges upon request.

(d) *Access to health care.*--

1. A patient has the right to impartial access to medical treatment or accommodations, regardless of race, national origin, religion, handicap, or source of payment.

2. A patient has the right to treatment for any emergency medical condition that will deteriorate from failure to provide such treatment.

3. A patient has the right to access any mode of treatment that is, in his or her own judgment and the judgment of his or her health care practitioner, in the best interests of the patient, including complementary or alternative health care treatments, in accordance with the provisions of s. [456.41](#).

(e) *Experimental research.*--In addition to the provisions of s. [766.103](#), a patient has the right to know if medical treatment is for purposes of experimental research and to consent prior to participation in such experimental research. For any patient, regardless of ability to pay or source of payment for his or her care, participation must be a voluntary matter; and a patient has the right to refuse to participate. The patient's consent or refusal must be documented in the patient's care record.

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ETHICS IN MASSAGE THERAPY

POST-TEST

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ETHICS IN MASSAGE THERAPY

1. "Ethics" is derived from the Greek word "Ethos" meaning:
 - A. The law
 - B. Character
 - C. Society
 - D. Wisdom
2. Which ethics theory proposes that each person should do whatever promotes their own best interest?
 - A. Utilitarianism
 - B. Social Contract Theory
 - C. Ethical Egoism
 - D. Virtue Ethics
3. The standard of ethical conduct for a massage therapist who is not a member of the AMTA is which of the following?
 - A. State practice act
 - B. AMTA Code of Ethics
 - C. Facility policy and procedure manual
 - D. JCAHO
4. The practice of disclosing all pertinent information to a patient and then allowing them to participate in their healthcare decisions is called:
 - A. Informed consent
 - B. Veracity
 - C. Medical necessity
 - D. Conflict of interest
5. The billing and coding "Triad" refers to:
 - A. Standardized billing forms
 - B. The patient, the therapist, and the physician
 - C. The procedure that is performed, is the procedure that is documented, is the procedure that is billed.
 - D. Cervical / thoracic / lumbar
6. The "trust test" is used to determine:
 - A. Billing irregularities
 - B. Breaches in patient confidentiality
 - C. Medical necessity
 - D. Conflict of interest
7. Which of the following is ethical:

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- A. Providing your top referral source with additional clerical staff to help process his managed care referrals.
 - B. A case manager who agrees to send all her clients to you in exchange for office space in your facility.
 - C. Paying a commission to a doctor's medical assistant for each patient they refer to you.
 - D. None of the above
8. Which of the following is NOT one of the reasons the AMTA's Standards of Practice were developed?
- A. To promote the use of massage as an adjunct therapy
 - B. To assist the LMT in providing safe, consistent care
 - C. To determine quality of care provided
 - D. To assist the public to understand what to expect from a professional massage therapist
9. Which of the following is a summary statement of the standards by which massage therapists agree to conduct their practices and is a declaration of the general principles of acceptable, ethical, and professional behavior?
- A. Standards of Practice
 - B. Code of Ethics
 - C. Practice Act
 - D. Massage Therapy Bill of Rights
10. Which of the following is NOT included in the Florida Patient's Bill of Rights?
- A. The individual dignity of a patient must be respected at all times and upon all occasions.
 - B. A patient has the right to know the name, function, and qualifications of each health care provider who is providing medical services to the patient.
 - C. A patient in a health care facility who does not speak English, must always be provided with an interpreter prior to receiving medical services.
 - D. A patient has the right to receive a copy of an itemized bill upon request.