The FACTS About Certified Athletic Trainers and The National Athletic Trainers' Association

This document corrects misinformation frequently cited about Certified Athletic Trainers (ATCs). It is provided to all interested in the facts about the athletic training profession in the 21st century. Readers should note the treatment of an adolescent or adult person does not change simply because the injury or treatment location changes. Whether the person is on a soccer field or manufacturing floor, athletic trainers are qualified and capable of developing treatment plans and recognizing conditions that require physician referral.

1. FACT: All athletic trainers have a bachelor's degree from an accredited college or university. Athletic trainers are health care professionals similar to physical, occupational, speech, language and other therapists.

ALL certified or licensed athletic trainers **must have a bachelor's or master's degree** from an accredited college or university. Degrees are complementary to accredited athletic training majors and include established academic curricula. Athletic trainers' bachelor's degrees are in pre-medical sciences, kinesiology, exercise physiology, biology, exercise science or physical education. Academic programs are accredited through an independent process by the Commission on Accreditation of Athletic Training Education (CAATE) via the Joint Review Committee on Educational Programs in Athletic Training (JRC-AT).

2. FACT: The following educational content standards are required for athletic training degree programs:

- Acute care of injury and illness
- Assessment of injury and illness
- Exercise physiology
- General medical conditions and disabilities
- Health care administration
- Human anatomy
- Human physiology
- Kinesiology/biomechanics
- Medical ethics and legal issues
- Nutritional aspects of injury and illness
- Pathology of injury and illness
- Pharmacology
- Professional development and responsibilities
- Psychosocial intervention and referral
- Risk management and injury/illness prevention
- Statistics and research design
- Strength training and reconditioning
- Therapeutic exercise and rehabilitative techniques
- Therapeutic modalities
- Weight management and body composition

The competency areas are as follows:

- Risk Management and Injury Prevention
- Pathology of Injury and Illness
- Assessment and Evaluation
- Acute Care of Injury and Illness
- Pharmacology
- Therapeutic Modalities
- Therapeutic Exercise
- General Medical Conditions and Disabilities
- Nutritional Aspects of Injury and Illness
- Psychosocial Intervention and Referral
- Health Care Administration
- Professional Development and Responsibilities

3. FACT: 70 percent of athletic trainers have a master's degree or doctorate.

Certified athletic trainers are highly educated. Seventy (70) percent of AT credential holders have a master's degree or more advanced degree. Reflective of the broad base of skills valued by the athletic training profession, these master's degrees may be in athletic training (clinical), education, exercise physiology, counseling or health care administration or promotion. This great majority of practitioners who hold advance degrees is comparable to other allied health care professionals.

4. FACT: Athletic trainers know and practice the medical arts at the highest professional standards.

Athletic trainers specialize in injury and illness prevention, assessment, treatment and rehabilitation for all physically active people, including the general public.

5. FACT: Athletic trainers are regulated and licensed health care workers.

While practice act oversight varies by state, the athletic trainer practices under state statutes recognizing them as health care professionals similar to physical therapists, occupational therapists and other health care professionals. Athletic training licensure/regulation exists in 44 states, with aggressive efforts underway to pursue licensure in the remaining states. Athletic trainers practice under the direction of physicians.

6. FACT: An independent national board certifies athletic trainers.

The independent Board of Certification Inc. (BOC) nationally certifies athletic trainers. Athletic trainers must pass an examination and hold a bachelor's degree to become an Athletic Trainer, Certified (ATC). To retain certification, credential holders must obtain 80 hours of medically related continuing education credits every three years and adhere to Membership Standards. The BOC is accredited by the National Commission for Certifying Agencies.

7. FACT: Athletic trainers are recognized allied health care professionals.

ATs are highly qualified, multi-skilled allied health care professionals and have been part of the American Medical Association's Health Professions Career and Education Directory for more than a decade. Additionally, the American Academy of Family Physicians, American Academy of Pediatrics and American Orthopaedic Society for Sports Medicine – among others – are all strong clinical and academic supporters of athletic trainers.

8. FACT: More than 50 percent of NATA's certified athletic trainer members work outside of school athletic settings and provide services to people of all ages.

Certified athletic trainers work in physician offices as physician extenders. They also work in rural and urban hospitals, hospital emergency rooms, urgent and ambulatory care centers, military hospitals, physical therapy clinics, high schools, colleges/universities, commercial settings, professional sports teams and performing arts companies. They are multi-skilled health care workers who, like others in the medical community with science-based degrees, are in great demand because of the continuing and increasing shortage of registered nurses and other health care workers. The skills of ATs have been sought and valued by sports medicine specialists and other physicians for more than 50 years. As the U.S. begins its fight against the obesity epidemic, it is important that people have access to health care professionals who can support lifelong physical activity.

9. FACT: Athletic trainers have designated CPT/UB Codes.

The American Medical Association (AMA) granted Current Procedural Terminology (CPT) codes for athletic training evaluation and re-evaluation (97005, 97006) in 2000. The codes became effective in 2002. In addition, the American Hospital Association established Uniform Billing (UB) codes — or revenue codes — for athletic training in 1999, effective 2000.

10. FACT: CPT and UB codes are not provider specific.

The AMA states that the term "provider," as found in the Physical Medicine section of the CPT code, is a general term used to define the individual performing the service described by the code. According to the AMA, the term "therapist" is not intended to denote any specific practice or specialty field. Physical therapists and/or any type of therapists are not the exclusive providers of general physical medicine examinations, evaluations and interventions. Similar to the athletic training evaluation and re-evaluation codes, other therapists have their own specific evaluation codes.

11. FACT: ATs improve patient functional and physical outcomes.

Results from a nationwide Medical Outcomes Survey conducted 1996-1998 demonstrate that care provided by ATs effects a significant change in all outcomes variables measured, with the greatest change in functional outcomes and physical outcomes. The investigation indicates that care provided by ATs generates a change in health-related quality of life patient outcomes. (ref: Albohm MJ, Wilkerson GB. An outcomes assessment of care provided by certified athletic trainers. J Rehabil. Outcomes Meas. 1999; 3(3):51-56.)

12. FACT: ATs frequently work in rural, frontier and medically underserved areas and with people of all ages.

ATs are accustomed to working in urgent care environments that have challenging — sometimes even adverse — work and environmental conditions. The athletic training tradition and hands-on clinical and academic education combine to create a health care professional who is flexible and inventive — ideal managers of patient care and health care delivery. ATs are generally an alternative — not an additional — provider of physical medicine therapies. ATs are an "or" not an "and"; therefore, costs for providing therapy are not increased with the use of athletic training services.

13. FACT: ATs specialize in patient education to prevent injury and re-injury and reduce rehabilitative and other health care costs.

Recent studies, reports, outcomes measures surveys, total joint replacement studies and many other case studies demonstrate how the services of ATs save money for employers and improve quality of life for patients. For each $1 invested in preventive care, employers gained up to a $7 return on investment according to one NATA survey. The use of certified athletic trainers supports a consumer-driven health care economy that increases competition in order to reduce patient and disease costs. Through the use of proper rehabilitation and evaluation, athletic trainers prevent re-injury. The patient's standard of care is enhanced, not sacrificed, with ATs.

14. FACT: ATs provide the same or better outcomes in clinical settings as other providers.

Results of a comparative analysis of care provided by certified athletic trainers and physical therapists in a clinical setting indicated ATs provide the same levels of outcomes, value and patient satisfaction as physical therapists in a clinical setting (ref: Reimbursement of Athletic Training by Albohm, MJ; Campbell, Konin, pp.25). Patient satisfaction ratings are more than 96 percent when treatment is provided by ATs.

15. FACT: The National Athletic Trainers' Association represents 30,000 members.

The National Athletic Trainers' Association (NATA), founded in 1950, represents more than 30,000 members of the international profession. Of the total membership, 25,000 are ATs, representing more than 80 percent of all athletic trainers practicing in the United States. Annual membership retention averages 92 percent. NATA accurately claims the distinction of representing the great majority of athletic training professionals.

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Testimonials From Employers and AT Friends

Legislators and Regulators

“As a state legislator concerned with health policy, affordable and accessible health care for all people is my primary concern. We must look for innovative solutions to providing health care because of the increasing shortages of nurses and other health care workers. One of the best ways to deliver health care services in the community is to better utilize certified athletic trainers. Athletic trainers are multi-skilled allied health care professionals who provide a unique combination of injury and illness treatment and rehabilitation with a substantial dose of injury prevention and general wellness.”

-- Representative Jerry Krummel, Oregon House of Representatives, District 26

Occupational and Industrial

"Our company has had a certified athletic trainer on site since 2000 and since that time we have recognized the tremendous upside in the tangible and intangible benefits of this addition, including a savings of more than $245,000 in just 2002 alone in health care-related expenditures. We have also experienced a decrease of 67percent for health care costs related to the low back. Additionally, our days away from work have decreased by 60 percent in the last three years. In the industrial setting these results can be best accomplished by an individual with the medical knowledge and training of an athletic trainer. We wouldn't have it any other way and will continue this program for the long term."

-- James E. Marotz, DO, Corporate Medical Director at Appleton Papers, Appleton, WI

"The certified athletic trainer is my first choice for on-site health care for our insureds. The clinical skills for treating MSD, first aid knowledge and ability to develop health/wellness programs make the AT extremely valuable. Maybe most importantly, the AT understands motivation and the psychology of performance. That seems to make a big difference. I'm designing risk control strategies based on the Sports Medicine model, and the AT is central to that model."

-- Benjamin Atkinson, Worker Compensation Director Risk Control, CNA Insurance, Chicago, IL

Physicians, Hospitals and Clinics

"The educational background of a certified athletic trainer is the perfect preparation for assisting an orthopaedic surgeon. The knowledge of musculoskeletal anatomy, function and clinical experience in the diagnosis and treatment of musculoskeletal disorders is virtually unmatched, event amongst medical students. I believe that ATs are the best physician extenders, and I use them in that role daily."

-- Ron Clark, MD, Valparaiso (IN) Orthopaedic Clinic

"I realized early on in my career that ATs are the only health care professionals who devote their entire education and professional lives to taking care of active people. My patients experience excellent outcomes as a result of therapy provided by ATs. My patients love working with them. ATs are a value added service to my practice. I could not do without them."

-- Thomas D. Kohl, MD, Family Practice Physician; Director, Sports Medicine, Comprehensive Athletic Treatment Center, Wyomissing, PA