This column reviews the legislative and regulatory activity and topics of interest currently being addressed in various jurisdictions. The following topics were presented at a session at the 2014 FSBPT annual meeting.

Direct Access: Moving on Up!

Being permitted to practice without physician referral has long been a concern to PTs. With the addition of Michigan, Oklahoma and the Virgin Islands this year, currently, direct access to Evaluation & Treatment is available in 50 states and two U.S. territories (excluding Puerto Rico). However many limitations and restrictions are still present. The goal is to have unlimited direct access in all states and jurisdictions, which includes Washington, D.C., the Virgin Islands and Puerto Rico.

Oklahoma now has the ability to treat for 30 days without a referral. This bill was signed by the Governor on May 23, 2014, and went into effect November 1, 2014.

Michigan SB 690 was signed by the Governor on July 1, 2014, with an effective date of January 1, 2015. This bill gave Limited Direct Access for

- 21 days or 10 treatment visits
- Allows injury prevention and fitness promotion; no time or visit limit
- Protected the term Doctor of Physical Therapy (DPT)

Virgin Island’s original 1969 practice was modernized after working four years on the project. There is no APTA chapter in the Virgin Islands, however approximately 25 PTs working in the VI took on this fight. The bill was signed in July 2014 by all the senators. It included:

- Limited Direct Access
• MPA Definitions
• Supervised Clinical Practice for non-CAPTE graduates
• DPT as a protected term
• Composition and responsibility of the Board were updated
• Licensure Exemptions
• Licensing of PTAs

Delaware
DE SB 98 requires FBI background check and fingerprinting. Additionally, the new law requires permanent revocation of license in instance of felony sexual offense: (9) The Board shall permanently revoke the certificate to practice physical therapy or athletic training of a person who is convicted of a felony sexual offense. This language was added to all types of healthcare professionals.

Military/Veteran Licensing
The Ethics and Legislation Committee is working on Model Practice Act language to allow a state to determine the substantial equivalence of PTAs trained in the military to civilian PTAs. Typically, the PTAs trained in the military have not completed the same general education requirements and may lack some other content areas required of CAPTE graduates.

The current language in the MPA, and many state practice acts, does not allow for a PTA trained in the military to be evaluated for substantial equivalence as it specifically references CAPTE-accredited or foreign trained. One option is to change the language to non-CAPTE trained or more specifically language for military training and education to be evaluated. Ohio’s rule is a model to be considered.

Telehealth
The 50+ pieces of legislation on telehealth within the states this year mainly dealt with reimbursement.

Florida
Florida’s standards of care for telehealth providers are the same as the standard of care for healthcare professionals providing in-person healthcare services to patients. Evaluations may be performed using telehealth.

Registration of out-of-state telehealth providers states that “A healthcare professional not licensed in this state may provide healthcare services to a patient located in this state using telehealth if the telehealth provider annually registers with the applicable board, or the department, if there is no board.”

Kentucky
201 KAR 22:160 Telehealth and Telephysical therapy went into effect August 1, 2014’
Section 1: Patient Identity, Communication & Informed Consent
Section 2: Competence, Limits on Practice, Maintenance, and Retention Records
Section 3: Compliance with State Law

**Colorado Provisional Licensure for PTs requires:**
- Completion of education program.
- Practice under the supervision of a licensed PT.
- Provisional License expires 120 days after issue date.
- It is good for one-time only use.
- Governor signed this May 31, 2014.

**Washington: Spinal Manipulation**
Until recently, the state of Washington was the only state that had a specific prohibition against spinal manipulation by PTs.

Effective July 1, 2015, a PT must be issued a spinal manipulation endorsement by the Secretary of Health. An individual must be a one-year, full-time orthopedic, post-graduate with direct patient-care experience averaging 36 hour per week; and fulfill several requirements including training and supervised experience.

By November 15, 2019, the board shall report to the legislature any disciplinary actions taken against PTs for harm caused by spinal manipulation.

Also required will be: beyond six treatments a PT must consult with a non-PT healthcare practitioner authorized to perform spinal manipulation; PT may not delegate manipulation; and must have a minimum of 10 hours of CE in manipulation.

**Florida – Endorsements for FEPTs (Foreign-Educated PTs)**
Endorsements are now a bit easier for FEPTs. An individual who has been educated in a foreign country may demonstrate minimum educational qualifications by providing the following:

(a) A certified copy of the credential evaluation used by the physical therapy licensing board of another state. The evaluation must be on the appropriate Coursework Tool (CWT) adopted by the Federation of State Boards of Physical Therapy (FSBPT) and reflect the education criteria in place at the time of graduation, and;

(b) Proof of 1,000 clinical practice hours each year in the United State for five out of the last 10 years:

1. Full-time teaching of physical therapy education may count toward 250 of the 1,000 required practice hours per year.

2. Proof of clinical practice hours in the United States shall consist of submission of a written statement evidencing the number of clinical hours the applicant practiced in each of
the five years.

3. An applicant who has failed to pass the National Physical Therapy Examination by or on the fifth attempt, regardless of the jurisdiction through which the examination was taken, is precluded from licensure.

Ohio
In 2013, Ohio received Term Protection: Only individuals licensed by the physical therapy section of the Board may imply or claim to be able to practice physical therapy or provide physical therapy services.

In 2014, Military Spouse Licensing stipulated the giving of six months of temporary licensure for a military spouse meeting rule requirements.