

2020

Licensure Portability Resource Guide



FSBPT

Ethics & Legislation Committee

Foreign Educated Standards

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Introduction

In the current health care environment, portability of licensed individuals is a critical issue. The Federal Government has communicated concern about the current portability barriers and there have been several bills submitted to Congress in attempts to address this issue (military spouses, dual licensure system, etc). With the changing health care system, evolution of physical therapy education, mobile communications between patient and client, mobility of patients accessing care, large healthcare corporations/insurance companies, and advent of new ways in which to deliver care such as telehealth, the ability of a clinician to practice across jurisdictional boundaries with minimal barriers is an issue coming to the forefront.

State boundaries and differences in licensure and practice requirements are identified barriers to access to health care. Acknowledging that some regulatory requirements are completely appropriate, the significant issue regarding licensure portability is overcoming *unnecessary* licensure barriers. The FSBPT definition of licensure portability is *“the ability to obtain licensure or recognition with minimal regulatory barriers to practice in multiple jurisdictions.”*

Even making some small changes to improve licensure portability positively impacts public protection by potentially:

- increasing patient access to qualified providers
- improving the continuity of care for patients as they relocate or vacation
- enhancing disciplinary data and improving notification(s)
- improving information sharing between jurisdictions

In 2012, the Federation of State Boards of Physical Therapy (FSBPT) Delegate Assembly passed a motion requesting the Board of Directors bring back portability tools to the 2013 Delegate Assembly. This guide is one resource jurisdictions may consult for suggestions to improve licensure portability.

Getting Started

Jurisdictions that would like to make improvements in the portability of licenses and the mobility of physical therapists should review the following list of potential ways to improve licensure portability. Many of the items have an impact even by an individual jurisdiction, independent of any other jurisdiction's actions.

1. Licensure Process and Application Requirements

Review and evaluate licensure requirements for unnecessary regulatory barriers. There may be processes that increase licensure processing times that served a purpose at one time but may no longer be necessary. (Examples: personal interviews, Board approval of routine applications rather than the licensing staff processing and granting the license for those with a clean

application). Removing unnecessary barriers that have no impact on public protection increase the efficiency of licensure and licensure portability.

2. Licensure Exemptions

Jurisdictions should review and evaluate licensure exemptions currently in the jurisdiction's practice act. The use of licensure exemption should be judicious, as the motivation for regulating a profession is protecting the public from incompetent providers. These exemptions play an important role in allowing licensed physical therapists to move freely and carry out their professional responsibilities for a limited time in a jurisdiction where they are not licensed. However, the small number of persons that fit into these limited categories combined with the time constraints (60 days) results in little overall impact on the mobility of the profession as a whole. Some of the more common exemptions, and a partial list of those found in the Model Practice Act, are listed below (see MPA for all exemptions):

- A person in an entry-level professional education program approved by the board who is satisfying supervised clinical education requirements related to the person's physical therapist education while under onsite supervision of a physical therapist.
- A physical therapist who is practicing in the United States Armed Services, United States Public Health Service or Veterans Administration pursuant to federal regulations for jurisdiction licensure of healthcare providers.
- A physical therapist who is licensed in another jurisdiction of the United States or credentialed to practice physical therapy in another country if that person is teaching, demonstrating or providing physical therapy services in connection with teaching or participating in an educational seminar of no more than 60 days in a calendar year.
- A physical therapist who is licensed in another jurisdiction of the United States if that person is providing consultation by telehealth, as defined in [Definitions, Article 1.02], to a physical therapist licensed under this [act].
- A physical therapist who is licensed in a jurisdiction of the United States or credentialed in another country, if that person by contract or employment is providing physical therapy to patients/clients affiliated with or employed by established athletic teams, athletic organizations or performing arts companies temporarily practicing, competing or performing in the jurisdiction for no more than 60 days in a calendar year.

3. Licensure Verification from other jurisdictions

The processes and processing times for jurisdictions to complete verification of licensure for other jurisdictions varies greatly. The processes also vary widely. Jurisdictions should consider furnishing and allowing electronic verifications in order to speed up the licensing process. Rules requiring paper verifications are antiquated and should be considered for updating. At least

one jurisdiction is operating paperless verifications thus other states have already had to make allowances for the licensees from that state. Additionally jurisdictions may choose to consider ways to utilize the public records access available on Board websites to verify licenses quickly and efficiently.

4. NPTE Score Minimums pre-dating universal pass rate

In 1996, all member jurisdictions adopted the uniform passing score for the NPTE, which is criterion referenced and is widely accepted as the methodology for establishing performance standards for high-stakes examinations. This was a huge step forward in allowing greater mobility of PTs and PTAs throughout the U.S. However, some states still have requirements that vary for those that tested prior to the universal pass rate. At this time, PTs and PTAs that tested prior to 1996 have over 15 years of experience and a license history. When a PT tested before 1996 attempts to move and does not meet the jurisdictions test score requirement, they are unable to become licensed without re-testing. The therapist's continuing education, experience, etc. are not taken into account for licensure and the jurisdiction may lose a qualified licensee and potential taxpayer. Jurisdictions should consider changing any language that has a specific score requirement prior to 1996 to more general language such as the examples from Oregon and Texas.

OREGON Pre Rule Change Language:

(5) Have passed the physical therapist or physical therapist assistant examination provided by a Board-approved examination service with the following minimum overall passing score:

(a) For applicants examined February 1, 1996 and thereafter, the minimum overall passing score shall be based on a formula using the criterion-referenced scoring system verified by a Board-approved examination service;

(b) For applicants examined from January 5, 1983 through January 31, 1996, the minimum overall passing score shall be based on a formula using the national average raw score minus two average standard errors of measurement as determined by the Board;

(c) For applicants examined from January 1, 1976 through January 4, 1983, the minimum overall passing score shall be 1.5 standard deviation below the national average raw score verified by a Board-approved examination service;

(d) For applicants examined from January 1, 1961 through December 31, 1975, the passing of a written examination which in the opinion of the Board is substantially equivalent to the examination given by a Board-approved examination service;

(e) For applicants examined prior to January 1, 1961, the passing of an examination of the American Registry of Physical Therapists, or the passing of a written examination which in the opinion of the Board is substantially equivalent to the examination of the American Registry of Physical Therapists.

Post Rule Change Language:

- (5) Have passed the physical therapist or physical therapist assistant examination provided by a Board-approved examination service.

TEXAS Post Rule Change Language:

- (b) Requirements. An applicant seeking licensure by endorsement must:
 - (1) meet the requirements as stated in §329.1 of this title (relating to General Licensure Requirements and Procedures);
 - (2) submit a passing score on the National Physical Therapy Examination sent directly to the board by the board-approved reporting service, or scores on the Registry Examination sent directly to the board by the American Physical Therapy Association; and**
 - (3) provide verification of license from every jurisdiction in which the applicant has held or still holds a license, sent directly to the board by the issuing jurisdiction. The board may accept web-based verification in place of verification sent by another jurisdiction if the board is satisfied that the applicant's license(s) is/are valid.

5. Examination, Licensure & Disciplinary Database (ELDD) Participation

If every jurisdiction reported their licensure and disciplinary information, complete with social security number and date of birth, to the FSBPT ELDD there would be greater assurance that a new applicant's full licensure history is provided to the state. The report with the NPTE score transfer would include any disciplinary actions lodged against the applicant; jurisdictions would not have to rely on self-reporting for this information. Jurisdictions could easily find out where licensees have held licenses and with such robust information, feel that the need for verification is no longer necessary eliminating this sometimes time-consuming step. Additionally, full ELDD participation generally creates improved information sharing, better research capability, and improved public protection by identifying those applicants with disciplinary history.

6. Physical Therapy Licensure Compact

The Physical Therapy Compact (PTC) is an initiative of FSBPT to improve access to physical therapy care. The PTC is a mutual recognition model; a physical therapist or physical therapist assistant must have a license in good standing in the home state and the home state must be a member of the Compact. The purpose of the PTC is to increase consumer access to physical therapy services by reducing regulatory barriers to interstate mobility and cross-state practice.

When a licensee wants to work in another member state (the remote state), a Compact Privilege (CP) must be obtained. The CP is the authorization to practice in the remote state and not a license. To be eligible for a CP, the licensee must meet certain criteria:

- Home state is in the compact;
- Hold a current license in home state;
- No current encumbrances against any license (compact or non-compact); and

- No disciplinary action for the past 2 years.

The PTC officially enacted on April 25, 2017, when the tenth jurisdiction became a member. As of August 2020, twenty-eight jurisdictions are now members. For the most up to date list of member jurisdictions, refer to www.ptcompact.org.

7. Facilitating Licensure by Endorsement of Physical Therapists and Physical Therapist Assistants Who Have Graduated from non-CAPTE Educational Programs

Jurisdictions have an obligation to ensure that all physical therapists and physical therapist assistants meet the requirements for licensure¹ and are safe and competent in their practice. However, those regulatory requirements should not create unnecessary licensure barriers preventing qualified people from entering the workforce.

Physical therapists and physical therapist assistants from non-CAPTE educational programs currently holding a license in a US jurisdiction, regardless of how long they have been licensed or worked, often face burdensome, time-consuming requirements when attempting to become licensed by endorsement in another jurisdiction. Often, the licensure process is delayed while the PT/PTA is required to repeat steps that were completed for the initial US license. Jurisdictions may want to review the current requirements for endorsement of physical therapists/physical therapist assistants from non-CAPTE educational programs, with an unencumbered license and proven history in another US jurisdiction, and question if those requirements are necessary for public protection.

The FSBPT Foreign Educated Standards Committee recommends the following elements for endorsement regulation for physical therapists/physical therapist assistants that graduated from a non-CAPTE accredited program:

1. Non-CAPTE applicants should meet the same requirements for endorsement as CAPTE applicants (other than CAPTE education) in addition to specific requirements for non-CAPTE applicants. For clarity, jurisdictions should list all endorsement requirements for non-CAPTE applicants in one comprehensive list rather than reference other section of statute or regulation.
2. Credentials Review: If a physical therapist/physical therapist assistant was evaluated and found to be equivalent using the most current Coursework Tool at the time of his/her licensure in a jurisdiction, then a re-evaluation of credentials is not necessary and should not be required. The board where endorsement licensure is sought should receive a copy of the initial evaluation from the licensing board or the credentialing agency that performed the credential evaluation.

3. TOEFL: The individual should provide verification of a passing score achieved on the TOEFL required at the time of licensure in a jurisdiction. This requirement may be waived for the applicant that meets the active practice/active work exemption below.
4. Supervised Clinical Practice (for PT) or Supervised Clinical Work (for PTA): A verification of supervised clinical practice/ supervised clinical work completed in a jurisdiction as a requirement for licensure. The jurisdiction in which the supervised clinical practice/supervised clinical work was performed shall send verification to the jurisdiction where endorsement licensure is sought including:
 - Number of hours completed under supervision
 - Qualified supervisor- licensed PT or PTA (PTA may not supervise a PT)
 - Facility approved by the board
 - Performance evaluated (Performance Evaluation Tool (for PTs) or other)

This requirement is waived for the applicant that meets the active practice/active work exemption below.

5. Verification of completion of educational coursework including an assessment, offered by a US accredited institution, on the United States Healthcare System. This requirement is waived for the applicant that provides verification of a completed supervised clinical practice/ supervised clinical work above or meets the active practice/active work exemption below.

Active practice/active work Exemption: Active physical therapist practice or work as a physical therapist assistant in a United States jurisdiction, of not fewer than 1,000 hours per year, in 3 of the last 5 years. Licensee must provide verification of active practice/active work that may include:

- a) Employer verification of employment
- b) Records of billing, patient treatment
- c) Other, as approved by the Board

8. Future: Support a Common Licensure Application Service (CLAS)

The Common Licensure Application Service would provide a single application recognized from jurisdiction to jurisdiction, which could have state specific addendum, if required.

This would be a web based, online application system designed, developed, maintained, and administered by FSBPT. This online application service would be for all licensees and jurisdictions to use for initial, renewal and endorsement applications. Jurisdictions will be able to access through a single interface.

The online application service would encompass all of the common needs of the jurisdictions, and jurisdictions could submit an addendum linked to the Common Application as needed, and be accessible to that jurisdiction specifically.

9. Future: Support a Credentials Verification Service

The credentials verification, a service potentially provided by the Federation to licensees for a fee, in which all documents core to professional licensure, could be digitized and retained from entry to the profession to retirement. The FSBPT would develop, implement and maintain a service for applicants to send documents for verification, authentication, digitization, storage and retrieval available to jurisdictions or applicants later. In the future Jurisdictions could arrange to digitize their current hard copy files.

Conclusion

While we can never predict the future, it is clear that license portability will be an issue for years to come. With the increased pressure from multiple sources to improve licensure portability and remove unnecessary barriers, changes to current licensure models seem inevitable. Physical therapy regulators have the opportunity to be on the cusp of the change and be driving the changes rather than having the changes dictated to them.

ⁱ For purposes of this document licensure shall mean licensure or certification of the physical therapist assistant