
Call to Order – Allen R. Jones, Jr., PT, DPT, Board President

- Welcome and Introductions
- Emergency Egress Procedures
- Mission of the Board

Approval of Minutes – pages 1-12

- Board Meeting – February 13, 2018
- Formal Hearing – February 13, 2018
- Legislative Regulatory Committee Meeting – April 10, 2018

Ordering of Agenda

Public Comment

The Board will receive public comment related to agenda items at this time. The Board will not receive comment on any pending regulation process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

Agency Report – David E. Brown, DC

Presentation

- Liability Coverage for Board Members – **Don LeMond, Director, Division of Risk Management, Department of the Treasury**

Staff Reports

- Executive Director’s Report – **Corie E. Tillman Wolf – pages 13-34**
- Discipline Report – **Lynne Helmick**

Committee and Board Member Reports

- Board of Health Professions Report – **Allen R. Jones, Jr., PT, DPT – pages 35-41**
- Legislative/Regulatory Committee – **Sarah Schmidt, PTA – pages 42-63**
 - Consideration of Recommendations from the Legislative/Regulatory Committee
 - Recommendations Regarding Questions from Licensees and Board Guidance
 - School-based Physical Therapy and Services to Students with 504 Plans
 - Supervision of PT and PTA Students in Clinical Settings
 - Performance of Certain Tasks or Treatments in Home Health Setting
 - Recommendations Regarding Revisions to Direct Access Patient Attestation Form
 - Recommendations Regarding Guidance Documents

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- Repeal of Guidance Documents
 - **Guidance Document 112-3**, Board Guidance for Conduct of an Informal Conference by an Agency Subordinate
 - **Guidance Document 112-5**, Board guidance on acceptance of TOEFL iBT as equivalent to TOEFL and TSE examinations, adopted October 28, 2005, readopted January 19, 2007
 - **Guidance Document 112-6**, Board guidance on licensure of kinesiotherapists as physical therapists, adopted July 11, 2003, readopted January 19, 2007
 - **Guidance Document 112-8**, Board guidance on review of non-routine applications from non-approved schools, adopted March 7, 2003, readopted January 19, 2007
 - Readoption of Guidance Documents
 - **Guidance Document 112-4**, Board guidance on requirement for licensure for instructors in a physical therapy program, adopted July 11, 2003, readopted January 19, 2007
 - **Guidance Document 112-14**, Electromyography (EMG) and Sharp Debridement in Practice of Physical Therapy, adopted October 26, 2007
 - **Guidance Document 112-15**, Supervision of unlicensed support personnel in any setting, adopted April 3, 2009
 - **Guidance Document 112-16**, Guidance on the Use of Your Professional Degree in Conjunction with Your Licensure Designation, revised August 26, 2010
 - **Guidance Document 112-20**, Guidance on Supervising Students in Non-Approved Programs, adopted November 16, 2012
 - Revisions to Guidance Documents
 - **Guidance Document 112-7**, Board guidance on physical therapists and Individualized Educational Plans in public schools, November 15, 2002
 - **Guidance Document 112-10**, Board guidance on credit for continuing education, revised November 16, 2012
 - **Guidance Document 112-11**, Board guidance on functional capacity evaluations, adopted August 20, 2004, readopted January 19, 2007
 - **Guidance Document 112-12**, Physical therapy services in home health, Decision of the Board on August 20, 2004, readopted January 19, 2007
 - **Guidance Document 112-18**, Disposition of Disciplinary Cases for Practicing on Expired Licenses, February 17, 2012
 - **Guidance Document 112-19**, Physical Therapists performance of the prothrombin time and international normalized ratio (INR) tests in home health settings, adopted February 17, 2012
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- Adoption of Guidance Document
 - **Guidance Document 112-24**, Board Guidance for Supervision of Physical Therapy Students in Clinical Settings
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Legislation and Regulatory Actions - Elaine Yeatts - pages 64-65

- Report of 2018 General Assembly
 - Legislative Report
-

Board Action and Discussion

- Consideration of Physical Therapy Licensure Compact and Legislation for 2019
 - Administrative and Budget Considerations - **Corie E. Tillman Wolf - pages 66-93**
 - Consideration of FSBPT Alternate Approval Process
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Next Meeting - August 16, 2018

Meeting Adjournment

This information is in **DRAFT** form and is subject to change. The official agenda and packet will be approved by the public body at the meeting and will be available to the public pursuant to Virginia Code Section 2.2-3708(D).

Meeting Minutes

**DRAFT UNAPPROVED MINUTES
VIRGINIA BOARD OF PHYSICAL THERAPY
MEETING MINUTES**

The Virginia Board of Physical Therapy convened for a Board meeting on Tuesday, February 13, 2018 at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room #2, Henrico, Virginia 23233.

BOARD MEMBERS PRESENT

Allen R. Jones, Jr., PT, DPT, President
Arkena L. Dailey, PT, DPT, Vice President
Sarah Schmidt, PTA, MPH
Elizabeth Locke, PT, PhD
Mira H. Mariano, PT, PhD, OCS
Tracey Adler, PT, DPT
Susan Palmer, MLS

STAFF PRESENT FOR ALL OR PART OF MEETING

Corie Tillman Wolf, Executive Director
Lynne Helmick, Deputy Executive Director
Sarah Georgen, Licensing and Operations Manager
Laura Mueller, Program Manager
Erin Barrett, Assistant Attorney General, Board Counsel
Elaine Yeatts, Senior Policy Analyst

GUESTS PRESENT

Kim Small, VisualResearch, Inc.
Ron Barbato, Board of Directors, Federation of State Boards of Physical Therapy (FSBPT)
Jeff Rosa, Managing Director – Post Licensure Services, FSBPT
Elizabeth Carter, Ph.D., Executive Director, Board of Health Professions

CALLED TO ORDER

Allen R. Jones, Jr., President, called the Board meeting to order at 9:30 a.m.

Board members and staff introduced themselves. With seven Board members present, a quorum was established.

Dr. Jones read the mission of the Board.

Dr. Jones provided reminders to the Board members and audience regarding microphones, sign in sheets, computer agenda materials, and breaks.

Ms. Tillman Wolf then read the emergency egress instructions.

ACCEPTANCE OF MINUTES

Upon a motion by Dr. Locke, and properly seconded by Ms. Schmidt, the Board voted to accept meeting minutes from November 17, 2017. The motion passed unanimously.

ORDERING OF AGENDA

Ms. Tillman Wolf requested that the Agency Director's Report be provided by Elaine Yeatts in Dr. Brown's absence. She also requested to add a Board Counsel report to the end of the proposed agenda. Lastly, Ms. Tillman Wolf stated that Mr. Kauder would be unable to attend the meeting; however, Ms. Small would provide the report on the Sanctioning Reference Points manual.

Upon a **MOTION** by Dr. Dailey, and properly seconded by Ms. Schmidt, the Board voted to accept the agenda as amended. The motion passed unanimously.

PUBLIC COMMENT PERIOD

There was no public comment.

AGENCY DIRECTOR'S REPORT- Elaine Yeatts, Sr. Policy Analyst

Ms. Yeatts announced that appointments that have been made by Governor Northam, including Dr. Daniel Carey, as Secretary of Health and Human Resources, and Martin Figueroa, as Deputy Secretary of Health and Human Resources. Dr. Brown was reappointed as Director of DHP.

In order to promote continuity of agency operations, Lisa Hahn has been hired as the Chief Operating Officer of the agency. Ms. Yeatts announced that Barbara Allison-Bryan, MD has been appointed by the Governor to the open position of DHP's Deputy Director. Dr. Allison-Bryan's start date is expected to be March 1, 2018.

Ms. Yeatts reported that DHP has leased additional space on the first floor of the Perimeter Center for overflow of current departments. She reported that the move into that space is expected in the Spring of 2018.

PRESENTATIONS

Liability Coverage for Board Members – Don LeMond, Director, Division of Risk Management, Department of the Treasury

Mr. LeMond was not present at the meeting, and the meeting proceeded in his absence.

PT Licensure Compact and Alternate Approval Pathway – Jeff Rosa, Managing Director – Post Licensure Services, Federation of State Boards of Physical Therapy, Ron Barbato, PT, FSBPT Board of Directors

Mr. Rosa and Mr. Barbato provided an overview of the PT Licensure Compact and Alternate Approval Pathway. Dr. Adler requested additional information on the fees associated with the compact. Mr. Rosa indicated that the current fee to purchase a privilege is \$45.00. States may charge an additional fee above that amount; based upon a review of other states' fees, FSBPT has been recommending a fee in the range of \$40. Mr. Rosa offered to provide statistics regarding the number of Virginia residents practicing in another jurisdiction who are not licensed by the Virginia Board of Physical Therapy, which could assist the board in determining the appropriate fee for compact licensure in the future.

Dr. Locke requested further clarification on the requirements of additional board staff to process compact licenses and Mr. Rosa stated that the impact would be minimal as the process may be more streamlined. Mr. Barbato indicated that additional staff was not needed in Kentucky.

Ms. Tillman Wolf requested information on the Compact licensure as it related to background checks of applicants. Mr. Rosa spoke to the ongoing effort to require member states to require background checks. Ms. Yeatts stated that legislation beyond the Compact language would be required through the General Assembly to require background checks for Virginia licensees.

Mr. Rosa and Mr. Barbato provided a brief overview of the Alternate Approval Pathway for licensure. Dr. Adler requested additional information on the fees associated with the proposed process and Mr. Rosa stated that there would be no additional cost associated to the Board or the applicant.

Ms. Tillman Wolf requested additional information on the appeal process for the lifetime attempts to take the examination, and Mr. Rosa stated that the Board's current process would remain unchanged.

BREAK

Dr. Jones called for a break at 10:50 a.m. The meeting reconvened at 10:59 a.m.

STAFF REPORTS

Executive Director's Report - Corie Tillman Wolf, Executive Director

Corie Tillman Wolf, Executive Director, began her report by introducing a new staff member, Sarah Georgen, Licensing and Operations Manager.

Ms. Tillman Wolf announced the new DHP logo launched in 2018. Ms. Tillman Wolf also announced that Lisa Hahn is the new Chief Operating Officer for DHP.

Ms. Tillman Wolf presented the Expenditure and Revenue Summary as of December 31, 2017.

Cash Balance as of June 30, 2017	\$ 1,457,317
FY18 Revenue	63,560
Less Direct & In-Direct Expenditures	<u>282,268</u>

Cash Balance November 30, 2017 \$ 1,238,609

Ms. Tillman Wolf provided the following updates from the Federation of State Boards of Physical Therapy (FSBPT):

- Regulatory training for Board members and Board staff – June 8-10, 2018 – Alexandria, VA. Priority is given to first-time attendees. Please let Board staff know if Board members are interested in attending.
- The 2018 Annual Meeting is scheduled for October 2018 in Reston, Virginia. The Board will be required to elect a Voting Delegate and Alternate Delegate by May 1, 2018. Presentation Proposals for the 2018 meeting are due March 14, 2018.

Ms. Tillman Wolf presented licensure statistics that included the following information:

Licensure Statistics – All Licenses

License	Q2 FY 2018	Q1 FY 2018	Change +/-
Direct Access Certification	1,184	1,178	6
Physical Therapist	8,144	8,032	112
Physical Therapist Assistant	3,407	3,346	61
Total	12,735	12,556	179

Licenses/Registrations Issued January 1 – December 31, 2017

License Type	Number
Direct Access Certification	50
Physical Therapist	841
Physical Therapist Assistant	340

Ms. Tillman Wolf provided the January 2018 PT examination results that included the following information:

	# Who Took Exam	# Passed	1 st Time Test Takers	Repeat Test Takers	# Failed	1 st Time Testers	Repeat Test Takers

U.S. Applicants	35	29	27	2	6	0	6
Non-CAPTE Applicants	3	1	1	0	2	1	1
Total	38	30	28	2	8	1	7

Ms. Tillman Wolf provided the following statistics regarding the Exam Passage Rates for the PT Exam for Virginia Candidates:

- October 25, 2017 PT Exam
 - 70.0% pass
 - 30.0% fail
- July 18-19, 2017 PT Exam
 - 88.9% pass
 - 11.1% fail
- April 26, 2017 PT Exam
 - 93.7% pass
 - 6.27% fail
- January 26, 2017 PT Exam
 - 78.1% pass
 - 21.9% fail

Ms. Tillman Wolf provided the following statistics regarding the Virginia Performs – Customer Satisfaction Survey Results:

- Q3 17 – 100%
- Q4 17 – 98.9%
- Q1 18 – 97.3%
- Q2 18 – 100%

Ms. Tillman Wolf thanked Laura Mueller for her continued work on behalf of the Board in providing outstanding customer service to applicants and licensees.

Ms. Tillman Wolf provided the following regarding planned focus areas for staff in 2018:

- Sanctioning Reference Points – finalize and implement updates to worksheets
- Guidance Documents – Review and update as needed
- Dissemination of Information to Licensees and Applicants – Newsletters, E-mail blasts, Updates to website, Presentations

Ms. Tillman Wolf had the following reminders and staff notes:

- Mileage Reimbursement has increased to \$0.545/mile as of January 1, 2018.

Ms. Tillman Wolf reminded Board members to let staff know if there are changes in contact information. She thanked the Board members for their hard work and dedication.

The Board meeting dates for 2018 are:

- May 1, 2018 at 9:30 a.m.
- August 16, 2018 at 9:30 a.m.
- November 13, 2018 at 9:30 a.m.

With no further questions, Ms. Tillman Wolf concluded her report.

Discipline Report – Lynne H. Helmick, Deputy Executive Director

Lynne Helmick, Deputy Executive Director, reported on the current number of open cases, percentage of cases closed in one year, and the average days to close a case. The Board reviewed information related to discipline cases and performance measures.

- **47 Open Cases**
 - 4 in APD
 - 1 in Formal
 - 16 in Investigation
 - 26 in Probable Cause
 - 7 licensees are in Compliance Monitoring.

Virginia Performs (Q1 2018):

- The Clearance Rate was 25%. The Board received 8 patient care cases and closed 3 cases.
- The Pending Caseload over 250 days was at 35%, which is over the 20% goal (9 cases).
- The percentage of cases closed within 250 days was 100%. The goal is 90%.

Ms. Helmick provided information on the categories of cases processed by the Board in FY2017, Q1, and Q2 2018.

With no further questions, Ms. Helmick concluded her report.

COMMITTEE AND BOARD MEMBER REPORTS

Board of Health Professions Report – Allen R. Jones, Jr., PT, DPT

Dr. Jones provided a brief report of the Board of Health Professions. Minutes of the meeting were provided to Board members in the agenda packets.

Upon a **MOTION** by Dr. Mariano, and properly seconded by Dr. Locke, the Board voted to approve the report as provided. The motion passed unanimously.

LEGISLATIVE AND REGULATORY ACTIONS – Elaine Yeatts

Report of 2018 General Assembly and Legislative Report

Ms. Yeatts provided a brief overview of the 2018 General Assembly bills and current regulatory actions that could affect the Board.

OLD BUSINESS

Update on Sanctioning Reference Points (SRP) Project – Adoption of Revised SRP Manual as Guidance Document 112-17 – Kim Small, VisualResearch, Inc.

Ms. Small provided the Board with a presentation of the status of the Sanctioning Reference Points Project and an overview of edits made to the Sanctioning Reference Points manual.

Upon a **MOTION** by Dr. Locke, and properly seconded by Ms. Schmidt, the Board voted to adopt the revised Sanctioning Reference Points manual as Guidance Document 112-17. The motion passed unanimously.

NEW BUSINESS

Healthcare Workforce Data Survey – Requested Addition of Question Regarding Telehealth – Elizabeth Carter, Ph.D.

Dr. Carter reported that FSBPT had requested the Board to consider adding a question to the Healthcare Workforce Data Center voluntary survey of licensees regarding the use of telehealth in physical therapy practice. Dr. Carter stated that the question may be a question to consider adding to the surveys for other professions, given the growing use of telehealth.

Upon a **MOTION** by Dr. Dailey, and properly seconded by Dr. Locke, the Board voted to include a question on telehealth in the Healthcare Workforce Data Center survey. The motion passed unanimously.

Questions from Licensees – Corie Tillman Wolf

Ms. Tillman Wolf requested the Board members to review questions from licensees received by Board staff, for the purposes of providing additional guidance and/or interpretation for Board staff, and to inform Board members of the types of questions commonly received. Board members engaged in some discussion of the questions received. Dr. Jones requested that the Regulatory/Legislative Committee review all provided questions and then provide the full board with a recommendation of response. Ms. Yeatts further commented that the Board should review and update or readopt its aging Guidance Documents, which could be updated to further address questions and provide guidance to licensees.

Federation of State Boards of Physical Therapy (FSBPT) 2018 Delegates and Funded Administrator Voting

Ms. Tillman Wolf requested the Board to vote on the Federation of State Boards of Physical Therapy (FSBPT) 2018 Delegates for the upcoming year. Dr. Jones called for volunteers and requested further discussion by the Board. Dr. Locke voiced her willingness to represent the Board

at the Annual Meeting. Following discussion, Board members agreed that the voting delegate be the Board President at the time of the event, with Dr. Locke as the alternate delegate. Ms. Tillman Wolf will attend as the Funded Administrator.

BREAK

Lunch break – Dr. Jones called for a lunch break at 12:17 p.m. The Board reconvened at 12:51 p.m.

Board Counsel Report – Erin Barrett, Assistant Attorney General

CLOSED MEETING

Dr. Locke moved that the Board convene a closed meeting pursuant to Section 2.2-3711(A)(7) of the *Code of Virginia* for consultation with legal counsel employed or retained by the Board regarding specific legal matters requiring the provision of legal advice by such counsel. Additionally, she moved that Corie Tillman Wolf, Lynne Helmick, and Sarah Georgen attend the closed meeting because their presence in the closed meeting was deemed necessary and would aid the Board in its consideration of this topic. Dr. Dailey and Ms. Schmidt were not present for the closed meeting.

OPEN MEETING

Dr. Locked move to certify that the Board heard, discussed, or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened.

NEXT MEETING

The next meeting date is May 1, 2018.

ADJOURNMENT

With all business concluded, the meeting was adjourned at 12:59 p.m.

Allen R. Jones, Jr., PT, DPT

Corie Tillman Wolf, Executive Director

Date

Date

DRAFT UNAPPROVED

**VIRGINIA BOARD OF PHYSICAL THERAPY
FORMAL ADMINISTRATIVE HEARING
MINUTES**

**Tuesday, February 13, 2018
1:00 P.M.**

**Department of Health Professions
9960 Mayland Drive, Suite #300
Henrico, Virginia 23233**

CALL TO ORDER: The Formal Administrative Hearing of the Board of Physical Therapy was called to order at 1:12 p.m.

MEMBERS PRESENT: Allen Jones, Jr., P.T., PhD., Chair
Tracey Adler, P.T., DPT
Mira Mariano, P.T., PhD, OCS
Elizabeth Locke, P.T., PhD
Susan Szasa Palmer, Citizen Member

BOARD COUNSEL: Erin L. Barrett, Assistant Attorney General

DHP STAFF PRESENT: Kathy Petersen, Senior Discipline Operations Manager
Candace Carey, Discipline Operations Assistant
Sarah Georgen, Licensing & Operations Manager

OTHERS PRESENT: Stuart Shaw
Kelsey Collier

COURT REPORTER: Crane-Snead and Associates

PARTIES ON BEHALF OF THE COMMONWEALTH: Julia Bennett, Assistant Attorney General
Mykl Eagan, Adjudication Specialist

COMMONWEALTH WITNESS: Stephanie Fried, DHP Senior Investigator

MATTER SCHEDULED: Walter M. Ward
P.T. Reinstatement Applicant
License No.: 2305-006157 - Suspended
Case No.: 180174

ESTABLISHMENT OF A QUORUM:

With five (5) members of the Board present, a quorum was established.

DISCUSSION:

Mr. Ward did not appear before the Board in accordance with the Notice of Formal Hearing dated January 11, 2018, and he was not represented by counsel. Mr. Ward contacted the Board the morning of the hearing stating he would not be able to make it to the hearing. The Board considered this as a request for a continuance, which was objected to by the Commonwealth and denied by the Chair. The Board received evidence and sworn testimony from a witness called by the Commonwealth regarding the matters as set forth in the Statement of Allegations.

CLOSED SESSION:

Upon a motion by Tracey Adler, and duly seconded by Elizabeth Locke, the Board voted unanimously to convene a closed meeting at 1:43 p.m., pursuant to §2.2-3711 (A) (27) of the Code of Virginia, for the purpose of deliberation to reach a decision in the matter of Walter M. Ward, P.T. Reinstatement Applicant. Additionally, she moved that Ms. Barrett, Ms. Petersen, Ms. Carey and Ms. Georgen attend the closed meeting as their presence in the closed meeting was deemed necessary and would aid the Board in its deliberations.

RECONVENE:

Upon a motion by Tracey Adler, and duly seconded by Elizabeth Locke, the Board unanimously voted to reconvene at 1:58 p.m.

CERTIFICATION:

Tracey Adler certified that the matters discussed in the closed session met the requirements of §2.2-3712 of the Code of Virginia. The Board reconvened in open session.

DECISION:

Upon a motion by Tracey Adler and duly seconded by Mira Mariano, the Board denied Mr. Ward's request for reinstatement to practice as a physical therapist in the Commonwealth of Virginia. It was further Ordered that his license be continued on indefinite suspension for a period of not less than twenty-four months.

VOTE:

The vote was unanimous.

ADJOURNMENT:

The Board adjourned at 2:07 p.m.

Allen Jones, Jr., P.T., PhD.
Chair

Kathleen A. Petersen
Senior Discipline Operations Manager

Date

Date

Executive Director's Report

Virginia Department of Health Professions Cash Balance As of February 28, 2018

	<u>116- Physical Therapy</u>
Board Cash Balance as June 30, 2017	\$ 1,457,317
YTD FY18 Revenue	106,955
Less: YTD FY18 Direct and Allocated Expenditure	<u>381,116</u>
Board Cash Balance as February 28, 2018	<u><u>1,183,155</u></u>

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 11600 - Physical Therapy
For the Period Beginning July 1, 2017 and Ending February 28, 2018

Account Number	Account Description	Amount	Budget	Amount	
				Under/(Over) Budget	% of Budget
4002400	Fee Revenue				
4002401	Application Fee	90,445.00	154,250.00	63,805.00	58.64%
4002406	License & Renewal Fee	7,595.00	10,000.00	2,405.00	75.95%
4002407	Dup. License Certificate Fee	730.00	550.00	(180.00)	132.73%
4002409	Board Endorsement - Out	6,975.00	5,900.00	(1,075.00)	118.22%
4002421	Monetary Penalty & Late Fees	1,000.00	5,235.00	4,235.00	19.10%
4002432	Misc. Fee (Bad Check Fee)	140.00	35.00	(105.00)	400.00%
	Total Fee Revenue	106,885.00	175,970.00	69,085.00	60.74%
4003000	Sales of Prop. & Commodities				
4003020	Misc. Sales-Dishonored Payments	70.00	-	(70.00)	0.00%
	Total Sales of Prop. & Commodities	70.00	-	(70.00)	0.00%
	Total Revenue	106,955.00	175,970.00	69,015.00	60.78%
5011110	Employer Retirement Contrib.	7,422.20	11,610.00	4,187.80	63.93%
5011120	Fed Old-Age Ins- Sal St Emp	3,816.17	6,584.00	2,767.83	57.96%
5011130	Fed Old-Age Ins- Wage Earners	225.55	796.00	570.45	28.34%
5011140	Group Insurance	720.71	1,128.00	407.29	63.89%
5011150	Medical/Hospitalization Ins.	20,423.78	33,274.00	12,850.22	61.38%
5011160	Retiree Medical/Hospitallzatn	649.27	1,016.00	366.73	63.90%
5011170	Long term Disability Ins	363.08	568.00	204.92	63.92%
	Total Employee Benefits	33,620.76	54,976.00	21,355.24	61.16%
5011200	Salaries				
5011230	Salaries, Classified	55,666.44	86,060.00	30,393.56	64.68%
5011250	Salaries, Overtime	116.97	-	(116.97)	0.00%
	Total Salaries	55,783.41	86,060.00	30,276.59	64.82%
5011300	Special Payments				
5011310	Bonuses and Incentives	450.00	-	(450.00)	0.00%
5011340	Specified Per Diem Payment	950.00	3,250.00	2,300.00	29.23%
5011380	Deferred Compnstn Match Pmts	105.00	768.00	663.00	13.67%
	Total Special Payments	1,505.00	4,018.00	2,513.00	37.46%
5011400	Wages				
5011410	Wages, General	2,948.40	10,395.00	7,446.60	28.36%
	Total Wages	2,948.40	10,395.00	7,446.60	28.36%
5011930	Turnover/Vacancy Benefits		-	-	0.00%
	Total Personal Services	93,857.57	155,449.00	61,591.43	60.38%
5012000	Contractual Svcs				
5012100	Communication Services				
5012110	Express Services	13.96	5.00	(8.96)	279.20%
5012140	Postal Services	2,427.48	10,000.00	7,572.52	24.27%
5012150	Printing Services	126.28	600.00	473.72	21.05%
5012160	Telecommunications Svcs (VITA)	98.45	1,000.00	901.55	9.85%
5012170	Telecomm. Svcs (Non-State)	114.58	-	(114.58)	0.00%
5012190	Inbound Freight Services	1.43	-	(1.43)	0.00%

Total Communication Services	2,782.18	11,605.00	8,822.82	23.97%
5012200 Employee Development Services				
5012210 Organization Memberships	2,500.00	2,500.00	-	100.00%
5012240 Employee Training/Workshop/Conf	-	1,000.00	1,000.00	0.00%
Total Employee Development Services	2,500.00	3,500.00	1,000.00	71.43%
5012300 Health Services				
5012360 X-ray and Laboratory Services	-	300.00	300.00	0.00%
Total Health Services	-	300.00	300.00	0.00%
5012400 Mgmnt and Informational Svcs				
5012420 Fiscal Services	98.32	18,000.00	17,901.68	0.55%
5012440 Management Services	289.64	4,000.00	3,710.36	7.24%
5012470 Legal Services	-	300.00	300.00	0.00%
Total Mgmnt and Informational Svcs	387.96	22,300.00	21,912.04	1.74%
5012500 Repair and Maintenance Svcs				
5012520 Electrical Repair & Maint Srvc	-	25.00	25.00	0.00%
5012530 Equipment Repair & Maint Srvc	586.60	-	(586.60)	0.00%
Total Repair and Maintenance Svcs	586.60	25.00	(561.60)	2346.40%
5012600 Support Services				
5012630 Clerical Services	-	19.00	19.00	0.00%
5012640 Food & Dietary Services	172.00	750.00	578.00	22.93%
5012650 Laundry and Linen Services	26.70	-	(26.70)	0.00%
5012660 Manual Labor Services	102.11	700.00	597.89	14.59%
5012670 Production Services	883.44	2,245.00	1,361.56	39.35%
5012680 Skilled Services	9,292.68	13,000.00	3,707.32	71.48%
Total Support Services	10,476.93	16,714.00	6,237.07	62.68%
5012800 Transportation Services				
5012820 Travel, Personal Vehicle	2,291.01	3,000.00	708.99	76.37%
5012840 Travel, State Vehicles	-	1,500.00	1,500.00	0.00%
5012850 Travel, Subsistence & Lodging	107.52	1,500.00	1,392.48	7.17%
5012880 Trvl, Meal Reimb- Not Rprtble	59.25	300.00	240.75	19.75%
Total Transportation Services	2,457.78	6,300.00	3,842.22	39.01%
Total Contractual Svcs	19,191.45	60,744.00	41,552.55	31.59%
5013000 Supplies And Materials				
5013100 Administrative Supplies				
5013120 Office Supplies	543.57	1,000.00	456.43	54.36%
Total Administrative Supplies	543.57	1,000.00	456.43	54.36%
5013300 Manufctrng and Merch Supplies				
5013350 Packaging & Shipping Supplies	-	50.00	50.00	0.00%
Total Manufctrng and Merch Supplies	-	50.00	50.00	0.00%
5013500 Repair and Maint. Supplies				
5013530 Electrcal Repair & Maint Matr	-	15.00	15.00	0.00%
Total Repair and Maint. Supplies	-	15.00	15.00	0.00%
5013600 Residential Supplies				
5013620 Food and Dietary Supplies	-	200.00	200.00	0.00%
Total Residential Supplies	-	200.00	200.00	0.00%
5013700 Specific Use Supplies				
5013730 Computer Operating Supplies	-	10.00	10.00	0.00%
Total Specific Use Supplies	-	10.00	10.00	0.00%
Total Supplies And Materials	543.57	1,275.00	731.43	42.63%
5014000 Transfer Payments				

5014100	Awards, Contrib., and Claims				
5014130	Premiums	195.00	-	(195.00)	0.00%
	Total Awards, Contrib., and Claims	195.00	-	(195.00)	0.00%
	Total Transfer Payments	195.00	-	(195.00)	0.00%
5015000	Continuous Charges				
5015100	Insurance-Fixed Assets				
5015160	Property Insurance	-	29.00	29.00	0.00%
	Total Insurance-Fixed Assets	-	29.00	29.00	0.00%
5015300	Operating Lease Payments				
5015340	Equipment Rentals	2.44	-	(2.44)	0.00%
5015350	Building Rentals	3.21	-	(3.21)	0.00%
5015390	Building Rentals - Non State	4,646.39	8,275.00	3,628.61	56.15%
	Total Operating Lease Payments	4,652.04	8,275.00	3,622.96	56.22%
5015500	Insurance-Operations				
5015510	General Liability Insurance	-	107.00	107.00	0.00%
5015540	Surety Bonds	-	7.00	7.00	0.00%
	Total Insurance-Operations	-	114.00	114.00	0.00%
	Total Continuous Charges	4,652.04	8,418.00	3,765.96	55.26%
5022000	Equipment				
5022100	Computer Hrdware & Sftware				
5022170	Other Computer Equipment	122.76	-	(122.76)	0.00%
5022180	Computer Software Purchases	193.53	-	(193.53)	0.00%
	Total Computer Hrdware & Sftware	316.29	-	(316.29)	0.00%
5022200	Educational & Cultural Equip				
5022240	Reference Equipment	16.00	60.00	44.00	26.67%
	Total Educational & Cultural Equip	16.00	60.00	44.00	26.67%
5022600	Office Equipment				
5022610	Office Appurtenances	-	35.00	35.00	0.00%
	Total Office Equipment	-	35.00	35.00	0.00%
	Total Equipment	332.29	95.00	(237.29)	349.78%
	Total Expenditures	118,771.92	225,981.00	107,209.08	52.56%
	Allocated Expenditures				
20600	Funeral/TCIA/PT	72,857.15	105,923.30	33,066.15	68.78%
30100	Data Center	41,686.31	91,951.37	50,265.06	45.34%
30200	Human Resources	7,830.67	18,609.70	10,779.03	42.08%
30300	Finance	41,184.57	51,756.11	10,571.54	79.57%
30400	Director's Office	18,362.91	26,183.70	7,820.79	70.13%
30500	Enforcement	33,104.60	69,162.72	36,058.12	47.86%
30600	Administrative Proceedings	15,076.32	21,567.32	6,491.00	69.90%
30700	Impaired Practitioners	756.18	1,150.77	394.59	65.71%
30800	Attorney General	6,200.00	8,267.04	2,067.04	75.00%
30900	Board of Health Professions	10,025.59	14,874.33	4,848.74	67.40%
31100	Maintenance and Repairs	-	434.88	434.88	0.00%
31300	Emp. Recognition Program	60.17	299.22	239.05	20.11%
31400	Conference Center	5,928.67	6,063.70	135.03	97.77%
31500	Pgm Devlpmnt & Implmntn	9,271.29	14,601.04	5,329.74	63.50%
	Total Allocated Expenditures	262,344.44	430,845.20	168,500.76	60.89%
	Net Revenue in Excess (Shortfall) of Expenditures	\$ (274,161.36)	\$ (480,856.20)	\$ (206,694.84)	57.02%



CHECKLIST AND INSTRUCTIONS FOR APPLICATION FOR LICENSURE BY ENDORSEMENT TO PRACTICE PHYSICAL THERAPY

SUBMIT THE FOLLOWING:

- APPLICATION** – This application will not be considered until all sections have been completed; must be 18 years of age to apply. You may need to submit supporting documentation regarding your responses to the licensure questions. Please refer to the application for more information.
- FEE** – All fees are non-refundable.

The fee for application for Physical Therapists is \$140.00.

The fee for application for Physical Therapist Assistants is \$100.00.

Make check or money order payable to the Treasurer of Virginia.
- EXAM SCORES** - Contact the Federation of State Boards of Physical Therapy (FSBPT) at (888) 461-6905 – 124 West Street, South, 3rd Floor, Alexandria, Virginia 22314 or <https://www.fsbpt.org/> to request your National Physical Therapy/Physical Therapy Assistant examination scores to be transferred to the board. Your request may require your candidate ID number. If you took the computerized exam, your candidate ID number is your social security number. If you took the paper/pencil exam, you will need to contact the state in which you took the exam for your ID number.
- NATIONAL PRACTITIONER DATA BANK (NPDB)** – You will need to request a current self query report from the NPDB. There are processing fee for each entity for this service. You may request the report through their website at www.npdb.hrsa.gov.
- CONTINUING EDUCATION** – Submit evidence of completion of 15 hours of continuing education for each year in which you held a license in another U.S. jurisdiction, or 60 hours obtained within the past four years.
- VERIFICATION OF ACTIVE PRACTICE** – Evidence of clinical practice with a current, unrestricted license issued by another U.S. jurisdiction. Your employer must provide a written letter on company letterhead of your clinical practice verifying dates of employment and the number of hours worked with their original signature.
- VERIFICATION OF STATE LICENSURE** – Provide written verification from the issuing regulatory authority, in all jurisdictions, in which you have ever held a license, including expired, inactive, and current licenses. Contact each State regarding processing fees.
- TRANSCRIPT** – OFFICIAL transcripts must be received from your school to include school seal, date of graduation, and program completed.

TRAINEESHIP REQUIREMENTS

A physical therapist seeking endorsement or as described in regulation 18VAC112-20-65B.6. who has not actively practiced physical therapy for at least 320 hours within the four years immediately preceding his application for licensure shall:

1. Successfully complete 320 hours in a traineeship in accordance with requirements in 18VAC112-20-140; or
2. Document that he attained at least Level 2 on the FSBPT assessment tool within the two years preceding application for licensure in Virginia and successfully complete 160 hours in a traineeship in accordance with the requirements in 18VAC112-20-140.

A Physical Therapist Assistant seeking licensure by endorsement who has not actively practiced physical therapy for at least 320 hours within the four years immediately preceding his application for licensure shall successfully complete 320 hours in a traineeship in accordance with the requirements in 18VAC112-20-140.

Download the appropriate traineeship application and Regulations at <http://www.dhp.virginia.gov/PhysicalTherapy/>

GENERAL INFORMATION ABOUT THE APPLICATION PROCESS

1. It is unlawful to practice as a PT/PTA in Virginia until you have been issued a Virginia license or until you have been issued written authorization from the board office to serve a traineeship under the direct supervision of a licensed physical therapist in Virginia.
2. Applications received without the required processing fee will be returned to the sender.
3. Faxed documents will not be accepted; only original documents will be accepted.
4. Once all documentation has been received, the licensing process takes approximately 10 **business** days. Board staff will contact you at the email address provided on your application with a status update.
5. Applications will remain on file with the board for one year from the date of receipt. If, at the end of one (1) year, licensure/certification/registration is not issued, the applicant shall reapply in accordance with the requirements of the Regulations.
6. The Board will notify the candidates in writing within 5 to 7 **business** days after the Board has received the examination results.



CHECKLIST AND INSTRUCTIONS FOR APPLICATION FOR LICENSURE BY ENDORSEMENT TO PRACTICE PHYSICAL THERAPY (Graduate of a Non-Approved Program)

SUBMIT THE FOLLOWING:

- APPLICATION** – This application will not be considered until all sections have been completed; must be 18 years of age to apply. You may need to submit supporting documentation regarding your responses to the licensure questions. Please refer to the application for more information.

- FEE** – All fees are non-refundable.

The fee for application for Physical Therapists is \$140.00.

The fee for application for Physical Therapist Assistants is \$100.00.

Make check or money order payable to the Treasurer of Virginia.

- VERIFICATION OF ACTIVE CLINICAL PRACTICE**– Evidence of clinical practice with a current, unrestricted license issued by another U.S. jurisdiction. Your employer must provide a written letter on company letterhead of your clinical practice verifying dates of employment and the number of hours worked with their original signature.
- VERIFICATION OF STATE LICENSURE** – Provide written verification from the issuing regulatory authority, in all jurisdictions, in which you have ever held a license, including expired, inactive, and current licenses. Contact each State regarding processing fees.
- EXAM SCORES** - Contact the Federation of State Boards of Physical Therapy (FSBPT) at (888) 461-6905 – 124 West Street, South, 3rd Floor, Alexandria, Virginia 22314, to request your National Physical Therapy/Physical Therapy Assistant examination scores to be transferred to the board. Your request may require your candidate ID number. If you took the computerized exam, your candidate ID number is your social security number. If you took the paper/pencil exam, you will need to contact the state in which you took the exam for your ID number.
- NATIONAL PRACTITIONER DATA BANK (NPDB):** – You will need to request a current self query report from the NPDB. You may request the report through their website at www.npdb.hrsa.gov.
- CONTINUING EDUCATION**– Submit evidence of completion of 15 hours of continuing education for each year in which you held a license in another U.S. jurisdiction, or 60 hours obtained within the past four years.
- CREDENTIALS EVALUATION** - In addition to the application, candidates must provide satisfactory evidence that the curriculum from which they graduated is substantially equivalent to that approved by the Commission on Accreditation in Physical Therapy Education (CAPTE). The board will accept as such evidence/verification, credentials from the Foreign Credentialing Commission on Physical Therapy (FCCPT), Post Office Box 25827, Alexandria, VA 22313 (703) 684-8406 or from the International Consultants of Delaware, Inc. (ICD), Post Office Box 8629, Philadelphia, PA 19101-8629.
PLEASE NOTE: Virginia does not accept PTA evaluations for applicants who have been trained as physical

therapists.

- TOEFL/TSE and/or TOEFL iBT – Candidates must provide verification of English language proficiency by passage of the Test of English as a Foreign Language (TOEFL), Test of Spoken English (TSE) or TOEFL iBT, the Internet-based tests of listening, reading, speaking, and writing or by review of evidence that the applicant’s physical therapy program was taught in English or that the native tongue of the applicant’s nationality is English.

TRAINEESHIP REQUIREMENTS

The traineeship is a prerequisite for licensure. As required in the Regulations 18 VAC 112-20-50, a graduate of a non-approved physical therapist or physical assistant program must serve a full-time 1,000 hour traineeship, at a board approved facility under the direct supervision of a physical therapist currently licensed in Virginia. The traineeship requirement may be waived, at the discretion of the Board, if the applicant can verify, in writing, the successful completion of one (1) year of clinical physical therapy practice as a licensed physical therapist or physical therapist assistant in the United States, its territories or the District of Columbia, or Canada. Any PT/PTA seeking endorsement or who has not actively practiced for at least 320 hours within the four years immediately preceding his application shall first successfully complete a traineeship. The appropriate traineeship application and Regulations are online at www.dhp.virginia.gov.

GENERAL INFORMATION ABOUT THE APPLICATION PROCESS

If the applicant has been recently licensed in another state/jurisdiction over one (1) year - then the application for licensure by endorsement is required – not the application for licensure by examination

1. It is unlawful to practice as a PT/PTA in Virginia until you have been issued a Virginia license or until you have been issued written authorization from the board office to serve a traineeship under the direct supervision of a licensed physical therapist in Virginia.
2. Virginia is unable to license a person trained as a Physical Therapist to become licensed as a Physical Therapist Assistant unless they have also graduated from a Physical Therapist Assistant education program [§54.1-3478]
3. Applications received without the required processing fee will be returned to the sender.
4. Faxed documents will not be accepted; only original documents will be accepted.
5. Once all documentation has been received, the licensing process takes approximately 10 **business** days. Board staff will contact you at the email address provided on your application with a status update.
6. Applications will remain on file with the board for one year from the date of receipt. If, at the end of one (1) year, licensure/certification/registration is not issued, the applicant shall reapply in accordance with the requirements of the Regulations.
7. The Board will notify the candidates in writing within 5 to 7 **business** days after the Board has received the examination results.



Virginia Department of
Health Professions
Board of Physical Therapy

9960 Mayland Drive, Suite 300
Henrico, Virginia 23233
www.dhp.virginia.gov/PhysicalTherapy

(804) 367-4674 (Tel)
(804) 527-4413 (Fax)
Email:
ptboard@dhp.virginia.gov

APPLICATION FOR LICENSURE BY ENDORSEMENT TO PRACTICE PHYSICAL THERAPY

MARK ONLY ONE BOX:

- Physical Therapist - \$140.00 FEE
 Physical Therapist Assistant - \$100.00 FEE

All fees must be paid by check or money order made payable to the Treasurer of Virginia. All fees are non-refundable.

(PLEASE PRINT IN BLUE OR BLACK INK)

FIRST NAME		MIDDLE NAME		LAST NAME AND SUFFIX	
DATE OF BIRTH MM DD YY		SOCIAL SECURITY NO. OR VA CONTROL NO.*			
ADDRESS OF RECORD**: STREET			CITY	STATE	ZIP CODE
ALTERNATE PUBLIC ADDRESS***: STREET			CITY	STATE	ZIP CODE
HOME PHONE:		WORK PHONE:		MOBILE PHONE:	
E-MAIL ADDRESS					
GRADUATION DATE MM DD YY	DEGREE		COLLEGE/UNIVERSITY AND CITY, STATE		

*In accordance with §54.1-116 Code of Virginia, you are required to submit your Social Security Number or your control number issued by the Virginia Department of Motor Vehicles. If you fail to do so, the process of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided by law. Federal and state law requires that this number be shared with other state agencies for child support enforcement activities. **NO LICENSE WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS.**

**The address information you provide is your address of record with the Board. Please be advised that all notices from the board, to include renewal notices, licenses, and other legal documents, will be sent to the address of record provided. If you provided a different public address, this information is not subject to public disclosure under the Freedom of Information Act and will not be sold or distributed for any other purpose.

***This address is subject to public disclosure under the Freedom of Information Act. You may provide an address other than a residence, such as a Post Office Box or a practice location if you wish.

APPLICANTS DO NOT USE SPACES BELOW THIS LINE – FOR OFFICE USE ONLY

APPROVED BY _____

LICENSE NUMBER	PENDING NUMBER	BASE STATE	RECEIPT NUMBER
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ACTIVE CLINICAL PRACTICE: Clinical Practice must be professional practice during the five (5) years immediately preceding application for licensure in Virginia with a current, unrestricted license issued by another U.S. jurisdiction. For the purpose of this section, active clinical practice is defined at least 2,500 hours of patient care over a five-year period immediately preceding the application for licensure in Virginia. Your employer must provide verification on letterhead of your clinical practice in patient care.

List in chronological order all professional physical therapy active clinical practice for the past five (5) years immediately preceding application for licensure in Virginia. Practice must be with a current, unrestricted license issued in U.S. providing patient care. (You may use additional paper if needed).

DATES OF PRACTICE		BUSINESS NAME, ADDRESS, AND TELEPHONE NUMBER OF ACTIVE CLINICAL PRACTICE
From (MM/YY)	To (MM/YY)	

OUT OF STATE LICENSURE: List all jurisdictions in which you have been issued a license to practice as a physical therapist or physical therapist assistant: *active, inactive, or expired*. Indicate license number and date issued. You will need to provide written verification from the issuing regulatory authority, in all jurisdictions, in which you have ever held a license, including expired, inactive, and current licenses. Contact each State regarding processing fees. (You may use additional paper if needed).

STATE/JURISDICTION	LICENSE NUMBER	ISSUE DATE / STATUS

LICENSURE QUESTIONS

Any supporting documentation related to the questions below should be submitted to:
 Virginia Board of Physical Therapy
 Perimeter Center
 9960 Mayland Drive, Suite 300
 Henrico, VA 23233

	YES	NO
1. Have you ever been denied to sit for a physical therapy or physical therapy assistant licensure exam? If yes, submit notices, orders, etc., from the regulatory authority authorized to take such actions.	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever taken the NPTE examination?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever been denied a physical therapy or physical therapy assistant license? If yes, submit notices, orders, etc., from the regulatory authority authorized to take such actions.	<input type="checkbox"/>	<input type="checkbox"/>
4. Have you applied for licensure in another jurisdiction and have not received licensure or are you currently applying for licensure in another jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
5. Have you ever been convicted of a violation of /or pled Nolo Contendere to any federal, state or local statute, regulation, or ordinance, or entered into any plea bargaining relating to a felony or misdemeanor? Including convictions for driving under the influence; excluding traffic violations.		
Attach your original criminal history record, a certified copy of any final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision, and any other information you wish to be considered with your application (i.e. information on the status of incarceration, parole, or probation, reference letters documentation of rehabilitation, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever had any of the following disciplinary actions taken against your license to practice PT or PTA or any such actions pending? (a) suspension/revocation (b) probation (c) reprimand/cease and desist (d) had your practice monitored (e) monetary penalty? If yes, submit notices, orders, etc., from the regulatory authority authorized to take such actions.	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you had any malpractice suits brought against you in the last ten years? Provide details. Letters must be submitted by your attorney regarding malpractice suits.	<input type="checkbox"/>	<input type="checkbox"/>
8. Have you requested a current report (Self Query) from NPDB?	<input type="checkbox"/>	<input type="checkbox"/>
MILITARY SERVICE	YES	NO
9. Are you active-duty military?	<input type="checkbox"/>	<input type="checkbox"/>
10. Did you relocate with a spouse who is the subject of a military transfer to the Commonwealth of Virginia?	<input type="checkbox"/>	<input type="checkbox"/>
ADDITIONAL LICENSURE QUESTIONS	YES	NO
A. Within the past five years, have you exhibited any conduct or behavior that could call into question your ability to practice in a competent and professional manner? Please provide a full explanation on a separate page.	<input type="checkbox"/>	<input type="checkbox"/>
(A.2) Within the past five years, have you sought or been directed to seek treatment for your conduct or behavior?	<input type="checkbox"/>	<input type="checkbox"/>
B. Within the past five years, have you been disciplined by any entity? Please provide a full explanation and any associated orders or letters from the entity.	<input type="checkbox"/>	<input type="checkbox"/>
(B.2) Within the past five years, have you sought or been directed to seek treatment for your conduct or behavior?	<input type="checkbox"/>	<input type="checkbox"/>
C. Do you currently have any physical condition or impairment that affects or limits your ability to perform any of the obligations and responsibilities of professional practice in a safe and competent manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing Physical Therapist or Physical Therapist Assistant.	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide a full explanation. (NOTE: The Board may request a letter from your current treatment provider addressing your current condition and ability to safely practice. You may consider providing this documentation with your application, or have your provider send this documentation directly to the Board.)	<input type="checkbox"/>	<input type="checkbox"/>

YES NO

D. Do you currently have any mental health condition or impairment that affects or limits your ability to perform any of the obligations and responsibilities of professional practice in a safe and competent manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing Physical Therapist or Physical Therapist Assistant.

If yes, please provide a full explanation. (NOTE: The Board may request a letter from your current treatment provider addressing your current condition and ability to safely practice. You may consider providing this documentation with your application, or have your provider send this documentation directly to the Board.)

E. Do you currently have any condition or impairment related to alcohol or other substance use that affects or limits your ability to perform any of the obligations and responsibilities of professional practice in a safe and competent manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing Physical Therapist or Physical Therapist Assistant.

If yes, please provide a full explanation. (NOTE: The Board may request a letter from your current treatment provider addressing your current condition and ability to safely practice. You may consider providing this documentation with your application, or have your provider send this documentation directly to the Board.)

F. Within the past 5 years, have any conditions or restrictions been imposed upon you or your practice to avoid disciplinary action by any entity?

If yes, please provide a full explanation and any associated orders or letters from the entity. (NOTE: The Board may request a copy of a current participation contract and summary of compliance and/or documentation of successful completion. You may consider providing this documentation with your application, or have the program send this documentation directly to the Board.)

AFFIDAVIT OF APPLICANT

I certify that I have carefully read the laws and regulations related to the practice of Physical Therapy, which are available at <http://www.dhp.virginia.gov/PhysicalTherapy> and I fully understand that funds submitted as part of the application process shall not be refunded.

I certify by my signature below: I am the person applying for licensure/certification/registration and meet the qualifications required by Virginia law and regulations. Further, I certify the information provided on this application has been personally provided and reviewed by me, and that statements made on the application are true and complete. I understand that providing false or misleading information, as well as omitting information, in response to information required in this application or as part of the application process is considered falsification of the application and may be grounds for denial of or taking disciplinary action against an existing license/certificate/registration.

I agree to the above certification.

Signature of Applicant

Date



CHECKLIST AND INSTRUCTIONS FOR APPLICATION FOR LICENSURE BY EXAMINATION TO PRACTICE PHYSICAL THERAPY

SUBMIT THE FOLLOWING:

- APPLICATION – This application will not be considered until all sections have been completed; must be 18 years of age to apply. You may need to submit supporting documentation regarding your responses to the licensure questions. Please refer to the application for more information.
- FEE – All fees are non-refundable.

The fee for application for Physical Therapists is \$140.00.

The fee for application for Physical Therapist Assistants is \$100.00.

Make check or money order payable to the Treasurer of Virginia.

- PROOF OF PROFESSIONAL EDUCATION – OFFICIAL transcripts must be received from your school to include school seal, date of graduation, and program completed before licensure will be issued. If you are within 60 days of completing your degree requirements, you may submit the Educational Authorization Form that must be completed by your professional school in order to be allowed to sit for the Examination. This Educational Authorization Form may not be used in lieu of official transcripts. OFFICIAL transcripts are required in order to issue licensure.
- EXAM REGISTRATION – Please go the FSBPT website at www.fsbpt.org to register for the examination online.
- SPECIAL ACCOMMODATIONS – Applicants seeking special accommodations must submit the following documentation to the Board:
1. A letter of request from the applicant that specifies the testing accommodations being requested and a written report of an evaluation within the preceding two years from a qualified licensed health professional which states a diagnosis of the disability, describes the disability and recommends specific accommodations.
 - The evaluation should include a professionally recognized diagnosis of the disability and identification of the standardized and professionally recognized tests/assessments given (e.g., Woodcock-Johnson, Wechsler Adult Intelligence Scale).
 2. A written statement from the Dean or Department Head of your educational institution which describes any testing accommodations made while the student was enrolled in the program.

The Special Accommodation Request must be submitted at the time of application. If the applicant is unsuccessful on the examination, request for special accommodations must be submitted each time the applicant requests to take the examination; however, documentation from the qualified licensed health professional is not required on additional requests to re-sit for examination.

- TRAINEESHIP REQUIREMENTS - This form is optional, unless you intend to work in Virginia prior to receiving the results of your examination. After your application and fee to sit for the examination has been received and approved, a traineeship application may be approved by the board. The approved traineeship authorizes an unlicensed graduate PT/PTA to work as a trainee under the direct supervision of a Virginia licensed physical therapist at a facility, which

employs one or more licensed therapists. The traineeship may not begin prior to the date of approval and shall terminate two days following receipt by the candidate of the licensure examination scores. The purpose of this traineeship is to allow the PT/PTA to work for the time period between approval of the application by the board until receipt of the examination results. No traineeship application will be approved prior to approval of the licensure by examination application. However, approval of both applications may occur simultaneously.

You must be registered with the Federation of State Boards of Physical Therapy (FSBPT) to take the exam for Virginia, before the traineeship application will be reviewed for approval.

- EXAMINATION RESULTS** - The minimum passing score on the examination shall be established by the board. The FSBPT will provide the results of the examination to the Virginia Board of Physical Therapy. The board will notify the candidate by mail of the results - **DO NOT TELEPHONE THE BOARD OFFICE TO REQUEST RESULTS, unless** you have not heard from the board at least two weeks after taking the exam. Neither scores nor pass/fail status will be released by telephone. An abundance of phone calls can delay the processing of scores, thereby lengthening the time for notification. Candidates who pass the examination will be granted a Virginia license and a certificate sent to the address of record. Candidates who do not pass the examination will be notified in writing. The Board of Physical Therapy will not report your scores to another state. At your direct request to the FSBPT and payment of their required fees, the FSBPT will report your scores to a designated state. The FSBPT telephone number is (888) 461-6905.

GENERAL INFORMATION ABOUT THE APPLICATION PROCESS

1. It is unlawful to practice as a PT/PTA in Virginia until you have been issued a Virginia license or until you have been issued written authorization from the board office to serve a traineeship under the direct supervision of a licensed physical therapist in Virginia.
2. Applications received without the required processing fee will be returned to the sender.
3. Faxed documents will not be accepted; only original documents will be accepted.
4. Once all documentation has been received, the licensing process takes approximately 10 **business** days. Board staff will contact you at the email address provided on your application with a status update.
5. Applications will remain on file with the board for one year from the date of receipt. If, at the end of one (1) year, licensure/certification/registration is not issued, the applicant shall reapply in accordance with the requirements of the Regulations.
6. The Board will notify the candidates in writing within 5 to 7 **business** days after the Board has received the examination results.



EDUCATIONAL AUTHORIZATION FORM

Submit this form to your school for verification that you are within 60 days of completion of degree requirements and instruct them to return the completed form directly to the Virginia Board of Physical Therapy.

NOTE TO APPLICANTS: This does not replace official transcripts for the application process. This form is required if you have not yet received your degree but are within 60 days of fulfilling the requirements. Licensure will not be issued until official transcripts are received confirming the degree. The Board will not release the test scores until the official transcript is received.

(For graduates of approved programs only)

FIRST NAME	MIDDLE NAME	LAST NAME AND SUFFIX	
DATE OF BIRTH MM DD YY	SOCIAL SECURITY NO. OR VA CONTROL NO.*		
ADDRESS OF RECORD**: STREET		CITY	STATE ZIP CODE
HOME PHONE:	WORK PHONE:	MOBILE PHONE:	
E-MAIL ADDRESS			
Course of Study		Effective Date	
Degree		Name of Institution	

I certify that the above listed information is correct and the listed is within sixty (60) days of completing the degree requirements of the above listed information.

Signature of Dean or Department Head

Date



Virginia Department of
Health Professions
Board of Physical Therapy

9960 Mayland Drive, Suite 300
Henrico, Virginia 23233
www.dhp.virginia.gov/PhysicalTherapy

(804) 367-4674 (Tel)
(804) 527-4413 (Fax)
Email:
ptboard@dhp.virginia.gov

APPLICATION FOR LICENSURE BY EXAMINATION TO PRACTICE PHYSICAL THERAPY

MARK ONLY ONE BOX:

- Physical Therapist - \$140.00 FEE
 Physical Therapist Assistant - \$100.00 FEE

All fees must be paid by check or money order made payable to the Treasurer of Virginia. All fees are non-refundable.

(PLEASE PRINT IN BLUE OR BLACK INK)

FIRST NAME		MIDDLE NAME	LAST NAME AND SUFFIX	
DATE OF BIRTH MM DD YY		SOCIAL SECURITY NO. OR VA CONTROL NO.*		
ADDRESS OF RECORD**: STREET		CITY	STATE	ZIP CODE
ALTERNATE PUBLIC ADDRESS***: STREET		CITY	STATE	ZIP CODE
HOME PHONE:	WORK PHONE:		MOBILE PHONE:	
E-MAIL ADDRESS				
GRADUATION DATE MM DD YY	DEGREE	COLLEGE/UNIVERSITY AND CITY, STATE		

*In accordance with §54.1-116 Code of Virginia, you are required to submit your Social Security Number or your control number issued by the Virginia Department of Motor Vehicles. If you fail to do so, the process of your application will be suspended and fees will not be refunded. This number will be used by the Department of Health Professions for identification and will not be disclosed for other purposes except as provided by law. Federal and state law requires that this number be shared with other state agencies for child support enforcement activities. **NO LICENSE WILL BE ISSUED TO ANY INDIVIDUAL WHO HAS FAILED TO DISCLOSE ONE OF THESE NUMBERS.**

**The address information you provide is your address of record with the Board. Please be advised that all notices from the board, to include renewal notices, licenses, and other legal documents, will be sent to the address of record provided. If you provided a different public address, this information is not subject to public disclosure under the Freedom of Information Act and will not be sold or distributed for any other purpose.

***This address is subject to public disclosure under the Freedom of Information Act. You may provide an address other than a residence, such as a Post Office Box or a practice location if you wish.

APPLICANTS DO NOT USE SPACES BELOW THIS LINE – FOR OFFICE USE ONLY

APPROVED BY _____

LICENSE NUMBER	PENDING NUMBER	BASE STATE	RECEIPT NUMBER
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OUT OF STATE LICENSURE: List all jurisdictions in which you have been issued a license to practice as a physical therapist or physical therapist assistant: *active, inactive, or expired*. Indicate license number and date issued. You will need to provide written verification from the issuing regulatory authority, in all jurisdictions, in which you have ever held a license, including expired, inactive, and current licenses. Contact each State regarding processing fees. (You may use additional paper if needed).

STATE/JURISDICTION	LICENSE NUMBER	ISSUE DATE / STATUS

LICENSURE QUESTIONS

Any supporting documentation related to the questions below should be submitted to:

Virginia Board of Physical Therapy

Perimeter Center

9960 Mayland Drive, Suite 300

Henrico, VA 23233

	YES	NO
1. Have you ever been denied to sit for a physical therapy or physical therapy assistant licensure exam? If yes, submit notices, orders, etc., from the regulatory authority authorized to take such actions.	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you ever taken the NPTE examination?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever been denied a physical therapy or physical therapy assistant license? If yes, submit notices, orders, etc., from the regulatory authority authorized to take such actions.	<input type="checkbox"/>	<input type="checkbox"/>
4. Have you applied for licensure in another jurisdiction and have not received licensure or are you currently applying for licensure in another jurisdiction?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you ever been convicted of a violation of /or pled Nolo Contendere to any federal, state or local statute, regulation, or ordinance, or entered into any plea bargaining relating to a felony or misdemeanor? Including convictions for driving under the influence; excluding traffic violations.		
Attach your original criminal history record, a certified copy of any final order, decree, or case decision by a court or regulatory agency with lawful authority to issue such order, decree, or case decision, and any other information you wish to be considered with your application (i.e. information on the status of incarceration, parole, or probation, reference letters documentation of rehabilitation, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever had any of the following disciplinary actions taken against your license to practice PT or PTA or any such actions pending? (a) suspension/revocation (b) probation (c) reprimand/cease and desist (d) had your practice monitored (e) monetary penalty? If yes, submit notices, orders, etc., from the regulatory authority authorized to take such actions.	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you had any malpractice suits brought against you in the last ten years? Provide details. Letters must be submitted by your attorney regarding malpractice suits.	<input type="checkbox"/>	<input type="checkbox"/>
8. Do you wish to request an accommodation for taking the NPTE according to the Americans with Disabilities Act (ADA)?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please see the instructions for licensure by examination for details.		

MILITARY SERVICE**YES NO**9. Are you active-duty military? 10. Did you relocate with a spouse who is the subject of a military transfer to the Commonwealth of Virginia? **ADDITIONAL LICENSURE QUESTIONS****YES NO**A. Within the past five years, have you exhibited any conduct or behavior that could call into question your ability to practice in a competent and professional manner?
Please provide a full explanation on a separate page. (A.2) Within the past five years, have you sought or been directed to seek treatment for your conduct or behavior? B. Within the past five years, have you been disciplined by any entity?
Please provide a full explanation and any associated orders or letters from the entity. (B.2) Within the past five years, have you sought or been directed to seek treatment for your conduct or behavior? C. Do you currently have any physical condition or impairment that affects or limits your ability to perform any of the obligations and responsibilities of professional practice in a safe and competent manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing Physical Therapist or Physical Therapist Assistant.

If yes, please provide a full explanation. (NOTE: The Board may request a letter from your current treatment provider addressing your current condition and ability to safely practice. You may consider providing this documentation with your application, or have your provider send this documentation directly to the Board.)

D. Do you currently have any mental health condition or impairment that affects or limits your ability to perform any of the obligations and responsibilities of professional practice in a safe and competent manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing Physical Therapist or Physical Therapist Assistant.

If yes, please provide a full explanation. (NOTE: The Board may request a letter from your current treatment provider addressing your current condition and ability to safely practice. You may consider providing this documentation with your application, or have your provider send this documentation directly to the Board.)

E. Do you currently have any condition or impairment related to alcohol or other substance use that affects or limits your ability to perform any of the obligations and responsibilities of professional practice in a safe and competent manner? "Currently" means recently enough so that the condition could reasonably have an impact on your ability to function as a practicing Physical Therapist or Physical Therapist Assistant.

If yes, please provide a full explanation. (NOTE: The Board may request a letter from your current treatment provider addressing your current condition and ability to safely practice. You may consider providing this documentation with your application, or have your provider send this documentation directly to the Board.)

F. Within the past 5 years, have any conditions or restrictions been imposed upon you or your practice to avoid disciplinary action by any entity?

If yes, please provide a full explanation and any associated orders or letters from the entity. (NOTE: The Board may request a copy of a current participation contract and summary of compliance and/or documentation of successful completion. You may consider providing this documentation with your application, or have the program send this documentation directly to the Board.)

AFFIDAVIT OF APPLICANT

I certify that I have carefully read the laws and regulations related to the practice of Physical Therapy, which are available at <http://www.dhp.virginia.gov/PhysicalTherapy> and I fully understand that funds submitted as part of the application process shall not be refunded.

I certify by my signature below: I am the person applying for licensure/certification/registration and meet the qualifications required by Virginia law and regulations. Further, I certify the information provided on this application has been personally provided and reviewed by me, and that statements made on the application are true and complete. I understand that providing false or misleading information, as well as omitting information, in response to information required in this application or as part of the application process is considered falsification of the application and may be grounds for denial of or taking disciplinary action against an existing license/certificate/registration.

I agree to the above certification.

Signature of Applicant

Date



CHECKLIST AND INSTRUCTIONS FOR APPLICATION FOR LICENSURE BY EXAMINATION TO PRACTICE PHYSICAL THERAPY (Graduate of a Non-Approved Program)

SUBMIT THE FOLLOWING:

- APPLICATION** – This application will not be considered until all sections have been completed; must be 18 years of age to apply. You may need to submit supporting documentation regarding your responses to the licensure questions. Please refer to the application for more information.

- FEE** – All fees are non-refundable.

The fee for application for Physical Therapists is \$140.00.

The fee for application for Physical Therapist Assistants is \$100.00.

Make check or money order payable to the Treasurer of Virginia.

- PROOF OF PROFESSIONAL EDUCATION** – Submit a notarized copy of your diploma with an English translation.

- CREDENTIALS EVALUATION** - In addition to the application, candidates must provide satisfactory evidence that the curriculum from which they graduated is substantially equivalent to that approved by an accrediting agency approved by the Virginia Board of Physical Therapy. The board will accept as such evidence/verification, credentials from the Foreign Credentialing Commission on Physical Therapy (FCCPT), Post Office Box 25827, Alexandria, VA 22313 (703) 684-8406 or from the International Consultants of Delaware, Inc. (ICD), Post Office Box 8629, Philadelphia, PA 19101-8629. PLEASE NOTE: Virginia does not accept PTA evaluations for applicants who have been trained as physical therapists.

- TOEFL/TSE and/or iBT** – Candidates must submit proof of proficiency in the English language by supplying proof of a passing grade on the Test of English as a Foreign Language (TOEFL), Test of Spoken (TSE) and/or iBT. TOEFL may be waived upon evidence of English proficiency. To attest to your ability to speak and understand English as it relates to physical therapy, English proficiency may be documented by a letter from the college or university stating courses/curriculum is taught in the English language and examinations are given English.

- SPECIAL ACCOMMODATIONS** – Applicants seeking special accommodations must submit the following documentation to the Board:

1. A letter of request from the applicant that specifies the testing accommodations being requested and a written report of an evaluation within the preceding two years from a qualified licensed health professional which states a diagnosis of the disability, describes the disability and recommends specific accommodations.
 - The evaluation should include a professionally recognized diagnosis of the disability and identification of the standardized and professionally recognized tests/assessments given (e.g., Woodcock-Johnson, Wechsler Adult Intelligence Scale).
2. A written statement from the Dean or Department Head of your educational institution which describes any testing accommodations made while the student was enrolled in the program.

The Special Accommodation Request must be submitted at the time of application. If the applicant is unsuccessful on the examination, request for special accommodations must be submitted each time the applicant requests to take the examination; however, documentation from the qualified licensed health professional is not required on additional requests to re-sit for examination.

- TRAINEESHIP REQUIREMENTS** - The traineeship is a prerequisite for licensure. As required in the Regulations, 18 VAC 112-20-50, a graduate of a non-approved Physical Therapist program must serve a full-time 1,000-hour traineeship under the direct supervision of a licensed Physical Therapist in Virginia before licensure is issued.

No traineeship application will be approved prior to approval of the licensure by examination application. However, approval of both applications may occur simultaneously.

- EXAMINATION RESULTS** - The minimum passing score on the examination shall be established by the board. The FSBPT will provide the results of the examination to the Virginia Board of Physical Therapy. The board will notify the candidate by mail of the results - **DO NOT TELEPHONE THE BOARD OFFICE TO REQUEST RESULTS**, *unless* you have not heard from the board at least two weeks after taking the exam. Neither scores nor pass/fail status will be released by telephone. An abundance of phone calls can delay the processing of scores, thereby lengthening the time for notification. Candidates who pass the examination will be granted a Virginia license and a certificate sent to the address of record. Candidates who do not pass the examination will be notified in writing. The Board of Physical Therapy will not report your scores to another state. At your direct request to the FSBPT and payment of their required fees, the FSBPT will report your scores to a designated state. The FSBPT telephone number is (888) 461-6905.

GENERAL INFORMATION ABOUT THE APPLICATION PROCESS

If the applicant has been recently licensed in another state/jurisdiction over one (1) year - then the application for licensure by endorsement is required – not the application for licensure by examination

1. It is unlawful to practice as a PT/PTA in Virginia until you have been issued a Virginia license or until you have been issued written authorization from the board office to serve a traineeship under the direct supervision of a licensed physical therapist in Virginia.
2. Virginia is unable to license a person trained as a Physical Therapist to become licensed as a Physical Therapist Assistant unless they have also graduated from a Physical Therapist Assistant education program [§54.1-3478]
3. Applications received without the required processing fee will be returned to the sender.
4. Faxed documents will not be accepted; only original documents will be accepted.
5. Once all documentation has been received, the licensing process takes approximately 10 **business** days. Board staff will contact you at the email address provided on your application with a status update.
6. Applications will remain on file with the board for one year from the date of receipt. If, at the end of one (1) year, licensure/certification/registration is not issued, the applicant shall reapply in accordance with the requirements of the Regulations.
7. The Board will notify the candidates in writing within 5 to 7 **business** days after the Board has received the examination results.

Board of Health Professions Report



Board of Health Professions Full Board Meeting

**February 27, 2018
10:00 a.m. - Board Room 4
9960 Mayland Dr, Henrico, VA 23233**

In Attendance

- Lisette P. Carbajal, Citizen Member
- Helene D. Clayton-Jeter, OD, Board of Optometry
- Kevin Doyle, EdD, LPC, LSATP, Board of Counseling
- Yvonne Haynes, LCSW, Board of Social Work
- Mark Johnson, DVM, Board of Veterinary Medicine
- Allen R. Jones, Jr., DPT, PT, Board of Physical Therapy
- Derrick Kendall, NHA, Board of Long-Term Care Administrators
- Trula E. Minton, MS, RN, Board of Nursing
- Martha S. Perry, MS, Citizen Member
- Maribel E. Ramos, Citizen Member
- Herb Stewart, PhD, Board of Psychology
- Jacquelyn Tyler, RN, Citizen Member
- Laura P. Verdun, MA, CCC-SLP, Board of Audiology & Speech-Language Pathology
- James D. Watkins, DDS, Board of Dentistry
- James Wells, RPh, Citizen Member

Absent

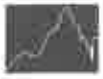
- Ryan Logan, RPh, Board of Pharmacy
- Junius Williams, Jr., MA, Board of Funeral Directors and Embalmers
- Vacant – Board of Medicine

DHP Staff

- Elizabeth A. Carter, Ph.D., Executive Director BHP
- Lisa Speller Davis, Board of Nursing, DHP
- Lisa R. Hahn, MPA, Chief Operating Officer DHP
- Jaime Hoyle, Executive Director Behavioral Sciences Boards
- Leslie Knachel, Executive Director for the Boards of Audiology & Speech Language Pathology, Optometry and Veterinary Medicine
- Diane Powers, Communications Director DHP
- Yetty Shobo, PhD, Deputy Executive Director BHP
- Peggy Wood, HPMP Program Manager, DHP
- Elaine Yeatts, Senior Policy Analyst DHP

OAG Representative

- Charis Mitchell, Assistant Attorney General



- Presenters** Janet Knisely, Ph.D., Administrative Director VAHPMP
Neal Kauder, VisualResearch
Kim Small, VisualResearch
- Speakers** No speakers signed-in
- Observers** Ryan LaMura, Virginia Hospital and Healthcare Association
- Emergency Egress** Dr. Carter

Call to Order

- Chair:** Dr. Clayton-Jeter **Time** 10:08 a.m.
- Quorum** Established

Public Comment

Discussion

There was no public comment

Approval of Minutes

- Presenter** Dr. Clayton-Jeter

Discussion

The December 7, 2017 Full Board meeting minutes were approved with no revisions. All members in favor, none opposed.

Welcome

- Presenter** Dr. Clayton-Jeter

Dr. Clayton-Jeter announced the names of the new board members: Lisette Carbajal, Citizen Member and Maribel Ramos, Citizen Member. Reappointed board members: Mark Johnson, DVM, Board of Veterinary Medicine; Derrick Kendall, NHA, Board of Long Term Care; and Herb Stewart, PhD, Board of Psychology. All were welcomed and thanked for their commitment in serving the Commonwealth.

Directors Report

- Presenter** Lisa Hahn, Chief Operating Officer

Discussion

Ms. Hahn reported that Dr. Barbara Allison-Bryan has become the new Deputy Director for DHP, and Marvin Figueroa and Jeanna Boyle are the new Secretary of Health and Human Resources' Deputies. She also informed the members of her new position as the DHP Chief Operating Officer. She presented Prescription Monitoring Program (PMP) data revealing a number of positive trends in response to efforts to combat opioid abuse. For example, one of the charts showed that the total number of individuals receiving high dose of morphine declined by about 22% in a year period. Similarly, there was a 45%



decline in pain reliever prescription from quarter four of FY 2016 to quarter four of FY 2017. The slides presented are on the PMP website.

Members encouraged spreading the good PMP news. Ms. Powers informed them about some of the ways Communications is currently disseminating the information and the various media organizations that have published on the issue in the state. Ms. Hahn emphasized that Virginia’s comprehensive approach in dealing with the opioid crisis is key to the successes achieved.

Ms. Hahn also informed attendees about the building renovations and expanded space soon to be available for DHP on two floors.

Legislative and Regulatory Report

Presenter Ms. Yeatts

Discussion

Ms. Yeatts advised the Board of updates to regulations and General Assembly legislative actions relevant to DHP.

Health Practitioners Monitoring Program (HPMP)

Presenter Ms. Wood & Dr. Knisely

Discussion

Ms. Wood and Dr. Knisely presented information on how practitioners recruitment, intake and assessment processes, monitoring methods, participant statistics, and the latest activities to improve online accessibility.

Executive Directors Report

Presenter Dr. Carter

Board Budget

Dr. Carter stated that the Board is operating within budget.

Agency Performance

Dr. Carter reviewed the agencies performance measures in relation to clearance rate, age of pending caseload and time to disposition.

Sanction Reference Points(SRP) - Update

Mr. Kauder and Ms. Small presented on some of their recent work using SOLVER, a simulation big data software, to revise the sanction reference worksheets. New variables identified will be presented to the different Boards and affected Boards can decide whether to accept proposed revisions.

Lunch Break 12:05 p.m. – 12:20 p.m.



Practitioner Self-Referral

Presenter Ms. Haynes

Discussion

Ms. Haynes presented on the request from Procreate Fertility Center of Virginia, PLLC, regarding whether they can include a pharmacy in which one of the founders has interest in the list of pharmacies provided to clients. She recommended that after thorough research: pursuant to VAC 75-20-60 (E), and if the providers follow the procedures stated in their letter, as well as in the opinion provided to them, the providers will not make a referral to the pharmacy within the meaning of the Act.

On properly seconded motion by Mr. Jones, Ms. Hayne's recommendation was ratified. All member voted in favor, none opposed.

Regulatory Research Committee

Presenter Mr. Wells

Discussion

Mr. Wells updated the Board on the work of the Committee and the draft report that was approved in the meeting earlier in the morning. He shared that the seven criteria that will be assessed to make a decision and the committee will meet next on June 26, 2018.

Policy and Procedures Update

Presenter Dr. Carter

Discussion

Dr. Carter presented information on policies and procedures regarding BHP, specifically in relation to sunrise reviews. According to the Council for Licensure, Enforcement, and Regulation (CLEAR), only 14 states, including Virginia, have sunrise statutes. She informed the Board that the materials for those states have been provided to the Regulatory Research Board for identifying best practices that Virginia may adopt.

Healthcare Workforce Data Center

Presenter Dr. Shobo

Discussion

Dr. Shobo provided a PowerPoint presentation that she presented at the annual Southern Demographics Association meeting that utilized DHP HWDC data. She also advised the Board that the center is up to



date on all survey reports and posting of the workforce briefs and is in the process of preparing the reports for professions with December license renewals.

Board Reports

Presenter Dr. Clayton-Jeter

Board of Audiology & Speech Language Pathology

No report provided.

Board of Counseling

Dr. Doyle shared the board has started registering Mental Health Professionals and Peer Recovery experts.

Board of Dentistry

Dr. Watkins shared that the Board is revisiting having a minimum criteria for licensure because of recent changes regarding national examinations.

Board of Funeral Directors & Embalmers

Mr. Williams was not present. No report provided.

Board of Long Term Care Administrators

No report provided.

Board of Medicine

Board seat currently vacant. No report provided.

Board of Nursing

Ms. Minton presented information on the current legislation at the General Assembly regarding more autonomy for Nurse Practitioners. She also shared the BON is discussing the revisions in the Nurse Compact Licensure and also examining, based on data from the National Board, how Virginia's BON compares to other states' nursing boards with regards to efficiency, discipline, etc.

Board of Optometry

Dr. Clayton-Jeter presented data on optometrists: licensees, practitioners in the state, practitioners out of state, number of complaints, etc. She shared that the Board is reviewing licensing fees and also recently adopted emergency regulation for prescribing opioids.

Board of Pharmacy

Mr. Logan was not present. No report provided.

Board of Physical Therapy

Dr. Jones, Jr. discussed that the Board is reviewing the PT Compact Licensure and SRP revisions.



Board of Psychology

Dr. Stewart reported that the board is currently reviewing national examinations, continuing education, and requirements for doctoral programs, and accreditation. The board is also updating the standard of conduct with respect to scope of practice of psychologists. Additionally, the board has requested that its interdisciplinary workgroup examine the issue of conversion therapy to develop consistency. The board is also examining the issue of interstate practice using telehealth.

Board of Social Work

Ms. Haynes stated that there is legislation currently at the General Assembly on having separate licensure for Bachelor’s in Social Work and Master’s in Social Work for the non-clinical social work licensees. The board is also considering the length of time licensee applicants have to pass the national examination, number of attempts, etc. before they have to go back for supervision.

Board of Veterinary Medicine

Dr. Johnson reported that the board has noticed that there are more discipline cases and they are more complex. In addition, the board is currently doing continuing education audits.

New Business

Presenter Dr. Clayton-Jeter

Dr. Doyle presented to the Board that the Board of Counseling is considering recommending that DHP consider a legislative proposal for 2019 on criminal background checks for licensees of all boards.

Dr. Carter shared that BON is currently obtaining background checks because of the requirements of the Interstate Nursing Compact.

June 26, 2018 Next Full Board Meeting

Presenter Dr. Clayton-Jeter

Dr. Clayton-Jeter announced the next Full Board meeting date as June 26, 2018

Adjourned 1: 49 p.m.

Chair Helene Clayton-Jeter, OD

Signature: _____ Date: ____/____/____

Board Executive Director Elizabeth A. Carter, Ph.D.

Signature: _____ Date: ____/____/____

Legislative/Regulatory Committee Report

Current Direct Access Patient Attestation Form

PATIENT ATTESTATION FORM

1. Legal Full Name (Please Print or Type)

First	Middle	Last	Suffix or Maiden
Address	City	State	Zip Code
Contact Phone Number ()	Alternate Phone Number ()		
Email address:			

2. Patient Information

Patient's chief complaint (why patient is seeking physical therapy care)

Please Check One Below:

- a) I am not under the care of a doctor of medicine, osteopathy, chiropractic, podiatry, dental surgery, licensed nurse practitioner, or licensed physician assistant for the symptoms listed on this form and wish to seek physical therapy care at this time.
- b) I am under the care of a doctor of medicine, osteopathy, chiropractic, podiatry, dental surgery, licensed nurse practitioner, or licensed physician assistant for the symptoms listed on this form and wish to seek physical therapy care at this time. The Practitioner identified on this form will be provided a copy of the initial evaluation and a copy of patient history obtained by the physical therapist within 14 days. (Fill out section 3 below)

3. Practitioner of Record.

If after receiving physical therapy care for 30 consecutive days for the condition for which I sought treatment does not improve, I intend to seek further treatment and evaluation from the practitioner listed below.

Additionally, I consent to the release of my personal health and treatment records to the listed practitioner.

Practitioner's Full Name & Address: 	Practitioner's Contact Phone Number's: Office () Fax () Email:
Date	Signature of Patient

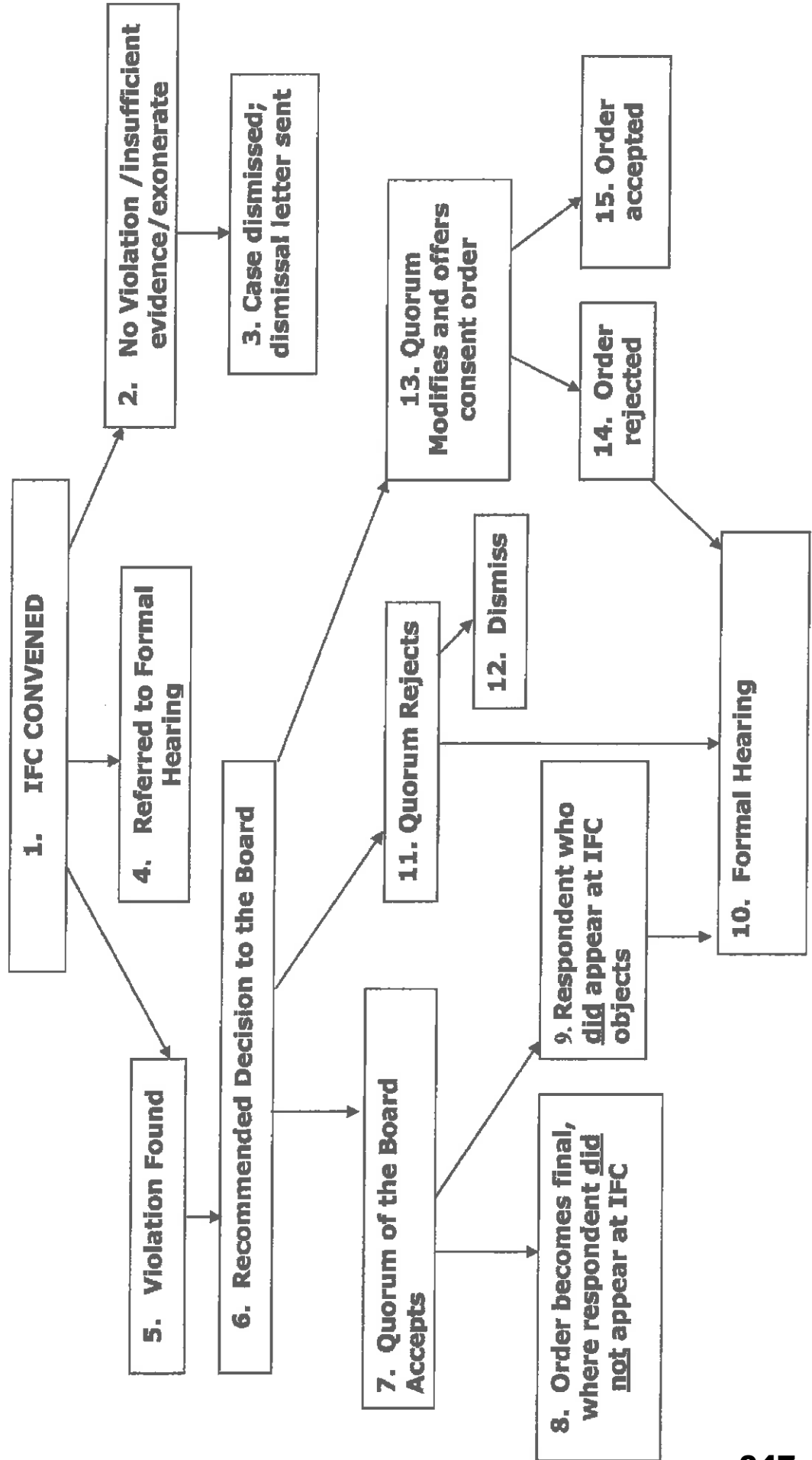
Legislative/Regulatory Committee Report

Current Guidance Documents

- **Recommended for Repeal**
 - **Guidance Document 112-3**, Board Guidance for Conduct of an Informal Conference by an Agency Subordinate
 - **Guidance Document 112-5**, Board guidance on acceptance of TOEFL iBT as equivalent to TOEFL and TSE examinations, adopted October 28, 2005, readopted January 19, 2007
 - **Guidance Document 112-6**, Board guidance on licensure of kinesiotherapists as physical therapists, adopted July 11, 2003, readopted January 19, 2007
 - **Guidance Document 112-8**, Board guidance on review of non-routine applications from non-approved schools, adopted March 7, 2003, readopted January 19, 2007
- **Recommended for Readoption**
 - **Guidance Document 112-4**, Board guidance on requirement for licensure for instructors in a physical therapy program, adopted July 11, 2003, readopted January 19, 2007
 - **Guidance Document 112-14**, Electromyography (EMG) and Sharp Debridement in Practice of Physical Therapy, adopted October 26, 2007
 - **Guidance Document 112-15**, Supervision of unlicensed support personnel in any setting, adopted April 3, 2009
 - **Guidance Document 112-16**, Guidance on the Use of Your Professional Degree in Conjunction with Your Licensure Designation, revised August 26, 2010
 - **Guidance Document 112-20**, Guidance on Supervising Students in Non-Approved Programs, adopted November 16, 2012
- **Recommended for Revisions**
 - **Guidance Document 112-7**, Board guidance on physical therapists and Individualized Educational Plans in public schools, November 15, 2002

- **Guidance Document 112-10**, Board guidance on credit for continuing education, revised November 16, 2012
- **Guidance Document 112-11**, Board guidance on functional capacity evaluations, adopted August 20, 2004, readopted January 19, 2007
- **Guidance Document 112-12**, Physical therapy services in home health, Decision of the Board on August 20, 2004, readopted January 19, 2007
- **Guidance Document 112-18**, Disposition of Disciplinary Cases for Practicing on Expired Licenses, February 17, 2012
- **Guidance Document 112-19**, Physical Therapists performance of the prothrombin time and international normalized ratio (INR) tests in home health settings, adopted February 17, 2012

Guidance for Conduct of an Informal Conference by an Agency Subordinate of a Health Regulatory Board at the Department of Health Professions



Narrative explanation of Flow Chart on Delegation to an Agency Subordinate

This describes the process in which a subordinate hears a case at an informal conference up to a case that may be referred to a formal hearing.

1. Pursuant to a notice, the designated agency subordinate (“subordinate”) will convene the informal conference (“IFC”) before a subordinate is conducted in the same manner as an IFC before a committee of the board. Following the presentation of information by the parties, the subordinate will consider the evidence presented and render a recommended decision regarding the findings of fact, conclusions of law, and if appropriate, the sanction to be imposed.
2. The subordinate may recommend that the respondent be exonerated, that there be a finding of no violation, or that insufficient evidence exists to determine that a statutory and/or regulatory violation has occurred.
3. If the subordinate makes such a finding, the case is dismissed and a dismissal letter is issued to the respondent notifying him of the determination.
4. The subordinate may decide that the case should be referred to a formal hearing. A hearing before the board would then be scheduled and notice sent to the respondent.
5. The subordinate may determine that a violation has occurred and recommend the findings of fact and conclusions of law along with an appropriate sanction.
6. With the assistance of APD, the subordinate drafts a recommended decision, which includes the findings of fact, conclusions of law and sanction. The recommendation is provided to the respondent and to the board and must be ratified by a quorum of the board.
7. If a quorum of the board accepts the recommended decision and:
 8. If the respondent did not appear at the IFC, the board’s decision becomes a final order that can only be appealed to a circuit court; or
 - 9-10. If the respondent did appear at the IFC and objects to the order, he may request a

Guidance document: 112-3
Board of Physical Therapy

formal hearing before the board. A case referred to a formal hearing proceeds in the same manner as cases considered by special conference committees convened pursuant to Va. Code § 54.1-2400(10). If the respondent who appeared at the IFC does not request a formal hearing, the order becomes final after a specified timeframe.

11. A quorum of the board may reject the recommended decision of the subordinate, in which case:

The board may decide to refer the case for a formal hearing (10); or the board may decide to dismiss the case and a dismissal letter is issued to the respondent notifying him of the decision of the board (12).

13. A quorum of the board may modify the subordinate's recommended decision, and a consent order reflecting the modified decision is presented to the respondent:

If the respondent accepts the consent order, it is duly entered (15); or if the respondent rejects the consent order (14), the case proceeds to a formal hearing before the board (10).

Acceptance of TOEFL iBT as Equivalent

**Decision of the Board at a Meeting
on
October 28, 2005**

The Board decided to deem the TOEFL iBT to be an equivalent examination to the TOEFL and TSE examinations for English proficiency for physical therapy applicants from schools that are non-approved.

Licensure of Kinesiotherapists

**BOARD OF PHYSICAL THERAPY
EXCERPTS OF MINUTES OF GENERAL BOARD MEETING
on
Friday, July 11, 2003**

Request for interpretation:

The Board received an inquiry regarding the licensure of kinesiotherapists as physical therapists. The Board stated that kinesiotherapy requires a different curriculum and those graduates cannot be licensed as physical therapists.

**Credential Committee to Review Non-routine Applications from Non-approval
Schools**

**BOARD OF PHYSICAL THERAPY
EXCERPTS OF MINUTES OF GENERAL BOARD MEETING
on
Friday, March 7, 2003**

Applications from Applicants of Non-Approved Schools

With a properly seconded motion by Mr. Styron, the Board directed staff to send all non-routine applications of applicants of non-approved physical therapy school to the Credentials Committee for review and recommendation.

Requirement for License for Instructors in Physical Therapy Program

Decision of the Board at a Meeting

on

July 11, 2003

The Board advised that an academic institution may use an instructor that does not hold a license as a physical therapist provided that the nature of the course instruction does not involve the practice of physical therapy as defined in § 54.1-3473 of the Code of Virginia.

Board of Physical Therapy

Guidance on Electromyography (EMG) and Sharp Debridement in the Practice of Physical Therapy

Electromyography (EMG)

Electromyography (EMG) is an invasive procedure and, in accordance with § 54.1-3482 of the Code of Virginia, requires physician referral and direction. A physician order for EMG should be in writing; if the initial referral is received orally, it must be followed up with a written referral. The procedure is an advanced skill and only within the scope of practice for those physical therapists who have had specialized, post-professional preparation and training.

Sharp Debridement

Sharp debridement is an invasive procedure and, in accordance with § 54.1-3482 of the Code of Virginia, requires physician referral and direction. Sharp debridement requires specific skills and training in wound care and on-going evaluation by the physical therapist. If, in the professional judgment of the physical therapist responsible for the patient, the physical therapist assistant has the competency, advanced skills, and post entry-level training to perform sharp debridement, it may be delegated to the assistant.

**Board of Physical Therapy
Supervision of unlicensed support personnel in any setting**

If a Physical Therapist is asked to provide a plan of care and sign off on care provided to patients by unlicensed support personnel (regardless of the title of such personnel) in any setting, then the PT is fully responsible for the actions of the unlicensed support personnel performing PT tasks. The tasks assigned must be under the direct supervision of the PT/PTA, meaning he or she is physically present and immediately available. The tasks assigned must be non-discretionary and can not require the exercise of professional judgment. If the tasks assigned in the plan of care are to be carried out in such a manner or at a location in which direct supervision from the PT/PTA is not possible, then the PT who developed the plan of care and signed off on the plan of care may be in violation of the regulations governing the practice of physical therapy, specifically 18VAC112-20-10 and 18VAC112-20-100.

Board of Physical Therapy

Guidance on the Use of Your Professional Degree in Conjunction with Your Licensure Designation

If initials designating an educational degree are used in connection with your name, they should be written in addition to and following your licensure designation of PT or PTA.

Professional designations are set forth in § 54.1-3481 of the Code of Virginia, as follows:

A. It shall be unlawful for any person who is not licensed under this chapter, or whose license has been suspended or revoked or who licensure has lapsed and has not been renewed, to use in conjunction with his name the letters or words "R.P.T.," "Registered Physical Therapist," "L.P.T.," "Licensed Physical Therapist," "P.T.," "Physical Therapist," "Physio-therapist," "P.T.T.," "Physical Therapy Technician," "P.T.A.," "Physical Therapist Assistant," "Licensed Physical Therapist Assistant," or to otherwise by letters, words, representations or insignias assert or imply that he is a licensed physical therapist. The title to designate a licensed physical therapist shall be "P.T." The title to designate a physical therapist assistant shall show such fact plainly on its face.

**Board of Physical Therapy
Guidance on Supervising Students in Non-Approved Programs**

Physical therapy (PT) programs

- A physical therapist may provide direct supervision to a student who is satisfying clinical educational requirements in a non-approved PT program that has been granted the Candidate for Accreditation status from the Commission on Accreditation in Physical Therapy Education (CAPTE).

Physical therapist assistant (PTA) programs

- A physical therapist or a physical therapist assistant may provide direct supervision to a student who is satisfying clinical education requirements in a non-approved PTA program that has been granted the Candidate for Accreditation status from CAPTE.

**BOARD OF PHYSICAL THERAPY
EXCERPTS OF MINUTES OF GENERAL BOARD MEETING**

Friday, November 15, 2002

Request for Interpretation

Physical Therapists in Public Schools Regarding the Direct Access.

Mr. Roberts, Assistant Attorney General, explained that the law does permit a physical therapist to conduct an evaluation on a student to be considered for an Individualized Educational Plan.

Guidance on Credit for Continuing Education

Board of Physical Therapy

Excerpts of Minutes of General Board Meetings

Requests for Interpretation on continuing education credits

July 12, 2002 Meeting

The Board advised that it would consider one credit hour of a college course to be equivalent to 15 contact hours of continuing education.

May 7, 2004 Meeting

The Board voted that:

Research and preparation for the clinical supervision experience or teaching of workshops or courses in a classroom setting constitutes Type 2 activities.

Classroom teaching of physical therapy topics and clinical supervision constitutes Type 2 activities.

Providers approved by other state licensing boards may be considered Type 1 programs.

November 16, 2012 Meeting

The board advised that it would grant one (1) contact hour as Type 2 activities for every 40 hours of clinical instruction.

Functional Capacity Evaluations

BOARD OF PHYSICAL THERAPY EXCERPTS OF MINUTES OF GENERAL BOARD MEETING

Friday, August 20, 2004

Functional capacity evaluations by Physical Therapist Assistant's (PTA's):

In response to a question about whether PTA's can perform functional capacity evaluations, the Board cited its definition of evaluation as provided in 18 VAC 112-20-10 of its regulations, which states that evaluations are only performed by physical therapists.

Physical Therapy in Home Care

BOARD OF PHYSICAL THERAPY

**Decision of the Board on
August 20, 2004**

Physical Therapy services in home health:

The Board reviewed a letter regarding use of aides to provide therapy services in a home health setting. The Board cited 18 VAC 112-20-100 (A&B) and emphasized the physical therapist's and physical therapist assistant's responsibilities in providing services. The regulation cites the requirement for direct supervision of support personnel by the licensed professionals. Also, the Board referred the inquirer to the definition of direct supervision in 18 VAC 112-20-10 and the responsibilities of patients in 18 VAC 112-20-120 of the regulations.

The Board also reviewed a letter asking whether the scope of practice of physical therapy changes in a home setting environment. The Board cited Code § 54.1-3473, defining the "practice of physical therapy;" the definition of practice does not change or alter with different practice settings.

VIRGINIA BOARD OF PHYSICAL THERAPY
DISPOSITION OF DISCIPLINARY CASES FOR PRACTICING ON EXPIRED
LICENSES

The Board of Physical Therapy delegates to the Executive Director for the Board the authority to offer a prehearing consent order to resolve disciplinary cases in which a Physical Therapist or Physical Therapist Assistant has been found to be practicing with an expired license.

Disciplinary Action for Practicing with an Expired License

The Board adopts the following guidelines for resolution of cases of practicing with an expired license:

Cause	Possible Action
First offense; 90 days or less	Confidential Consent Agreement
First offense; 91 days to 6 months	Consent Order; Monetary Penalty of \$1000
First offense; 6 months to one year	Consent Order; Monetary Penalty of \$1500
First offense; over 1 year	Consent Order; Monetary Penalty of \$2500
Second offense	Consent Order; Monetary Penalty of \$2500

VIRGINIA BOARD OF PHYSICAL THERAPY

Physical Therapists performance of the prothrombin time and international normalized ratio (INR) tests in home health settings

The Board of Physical Therapy offers the following guidance in response to PT's or PTA's performing INR's in home health settings:

The performance of finger stick blood specimens is a medical act that may be delegated to "technician personnel" who have been "properly trained" (§ 54.1-2901 of the Code of Virginia). If a PT or PTA performs a finger stick INR, he or she is acting as "technician personnel" and not as a physical therapist because the act is not within the scope of practice of physical therapy. The INR must be performed with a physician's order and the PT or PTA must be properly trained and competent and must make it clear to the patient that the procedure is not physical therapy. When the PT or PTA performs a finger stick, he or she should communicate the results to a nurse so that the nurse can interpret and communicate the results to the physician to make medication modifications. Since the physical therapist is acting in the role of "technical personnel," he or she cannot bill for his or her time as physical therapy.

The following are key guidance points:

- Performing INR's is not considered within the scope of physical therapy
- A PT or PTA must be properly trained in the administration of INR's which must be performed in accordance with a physician's order
- A PT or PTA cannot charge as a physical therapist for performing INR's

Legislation and Regulatory Actions

- **Report on Regulatory Actions**

**Agenda Item: Regulatory Actions - Chart of Regulatory Actions
(As of April 18, 2018)**

Board	Board of Physical Therapy	
Chapter	Action / Stage Information	
<u>[18 VAC 112 - 20]</u>	Regulations Governing the Practice of Physical Therapy	Practice of dry needling <u>Proposed</u> – at Secretary's Office for 111 days
<u>[18 VAC 112 - 20]</u>	Regulations Governing the Practice of Physical Therapy	Type 2 credit for attendance at board meetings or hearings <u>Fast-track</u> – at Secretary's office for 85 days

Physical Therapy Licensure Compact

1 **PHYSICAL THERAPY LICENSURE COMPACT**

2 **SECTION 1. PURPOSE**

3 The purpose of this Compact is to facilitate interstate practice of physical therapy with the goal
4 of improving public access to physical therapy services. The practice of physical therapy occurs in
5 the state where the patient/client is located at the time of the patient/client encounter. The Compact
6 preserves the regulatory authority of states to protect public health and safety through the current
7 system of state licensure.

8 This Compact is designed to achieve the following objectives:

- 9 1. Increase public access to physical therapy services by providing for the mutual
10 recognition of other member state licenses;
- 11 2. Enhance the states' ability to protect the public's health and safety;
- 12 3. Encourage the cooperation of member states in regulating multi-state physical
13 therapy practice;
- 14 4. Support spouses of relocating military members;
- 15 5. Enhance the exchange of licensure, investigative, and disciplinary information
16 between member states; and
- 17 6. Allow a remote state to hold a provider of services with a compact privilege in that
18 state accountable to that state's practice standards.

19 **SECTION 2. DEFINITIONS**

20 As used in this Compact, and except as otherwise provided, the following definitions shall apply:

- 21 1. **“Active Duty Military”** means full-time duty status in the active uniformed
22 service of the United States, including members of the National Guard and
23 Reserve on active duty orders pursuant to 10 U.S.C. Section 1209 and 1211.

- 24 2. **“Adverse Action”** means disciplinary action taken by a physical therapy
25 licensing board based upon misconduct, unacceptable performance, or a
26 combination of both.
- 27 3. **“Alternative Program”** means a non-disciplinary monitoring or practice
28 remediation process approved by a physical therapy licensing board. This
29 includes, but is not limited to, substance abuse issues.
- 30 4. **“Compact privilege”** means the authorization granted by a remote state to allow
31 a licensee from another member state to practice as a physical therapist or work
32 as a physical therapist assistant in the remote state under its laws and rules. The
33 practice of physical therapy occurs in the member state where the patient/client is
34 located at the time of the patient/client encounter.
- 35 5. **“Continuing competence”** means a requirement, as a condition of license
36 renewal, to provide evidence of participation in, and/or completion of,
37 educational and professional activities relevant to practice or area of work.
- 38 6. **“Data system”** means a repository of information about licensees, including
39 examination, licensure, investigative, compact privilege, and adverse action.
- 40 7. **“Encumbered license”** means a license that a physical therapy licensing board
41 has limited in any way.
- 42 8. **“Executive Board”** means a group of directors elected or appointed to act on
43 behalf of, and within the powers granted to them by, the Commission.
- 44 9. **“Home state”** means the member state that is the licensee’s primary state of
45 residence.

- 46 10. **“Investigative information”** means information, records, and documents
47 received or generated by a physical therapy licensing board pursuant to an
48 investigation.
- 49 11. **“Jurisprudence Requirement”** means the assessment of an individual’s
50 knowledge of the laws and rules governing the practice of physical therapy in a
51 state.
- 52 12. **“Licensee”** means an individual who currently holds an authorization from the
53 state to practice as a physical therapist or to work as a physical therapist assistant.
- 54 13. **“Member state”** means a state that has enacted the Compact.
- 55 14. **“Party state”** means any member state in which a licensee holds a current
56 license or compact privilege or is applying for a license or compact privilege.
- 57 15. **“Physical therapist”** means an individual who is licensed by a state to practice
58 physical therapy.
- 59 16. **“Physical therapist assistant”** means an individual who is licensed/certified by a
60 state and who assists the physical therapist in selected components of physical
61 therapy.
- 62 17. **“Physical therapy,” “physical therapy practice,” and “the practice of**
63 **physical therapy”** mean the care and services provided by or under the direction
64 and supervision of a licensed physical therapist.
- 65 18. **“Physical Therapy Compact Commission” or “Commission”** means the
66 national administrative body whose membership consists of all states that have
67 enacted the Compact.

68 19. **“Physical therapy licensing board” or “licensing board”** means the agency of
69 a state that is responsible for the licensing and regulation of physical therapists
70 and physical therapist assistants.

71 20. **“Remote State”** means a member state other than the home state, where a
72 licensee is exercising or seeking to exercise the compact privilege.

73 21. **“Rule”** means a regulation, principle, or directive promulgated by the
74 Commission that has the force of law.

75 22. **“State”** means any state, commonwealth, district, or territory of the United
76 States of America that regulates the practice of physical therapy.

77 **SECTION 3. STATE PARTICIPATION IN THE COMPACT**

78 A. To participate in the Compact, a state must:

- 79 1. Participate fully in the Commission’s data system, including using the
80 Commission’s unique identifier as defined in rules;
- 81 2. Have a mechanism in place for receiving and investigating complaints
82 about licensees;
- 83 3. Notify the Commission, in compliance with the terms of the Compact and
84 rules, of any adverse action or the availability of investigative information
85 regarding a licensee;
- 86 4. Fully implement a criminal background check requirement, within a time
87 frame established by rule, by receiving the results of the Federal Bureau of
88 Investigation record search on criminal background checks and use the
89 results in making licensure decisions in accordance with Section 3.B.;
- 90 5. Comply with the rules of the Commission;

91 6. Utilize a recognized national examination as a requirement for licensure
92 pursuant to the rules of the Commission; and

93 7. Have continuing competence requirements as a condition for license
94 renewal.

95 B. Upon adoption of this statute, the member state shall have the authority to obtain
96 biometric-based information from each physical therapy licensure applicant and submit this
97 information to the Federal Bureau of Investigation for a criminal background check in accordance
98 with 28 U.S.C. §534 and 42 U.S.C. §14616.

99 C. A member state shall grant the compact privilege to a licensee holding a valid
100 unencumbered license in another member state in accordance with the terms of the Compact and
101 rules.

102 D. Member states may charge a fee for granting a compact privilege

103

104 **SECTION 4. COMPACT PRIVILEGE**

105 A. To exercise the compact privilege under the terms and provisions of the Compact,
106 the licensee shall:

107 1. Hold a license in the home state;

108 2. Have no encumbrance on any state license;

109 3. Be eligible for a compact privilege in any member state in accordance
110 with Section 4D, G and H;

111 4. Have not had any adverse action against any license or compact privilege
112 within the previous 2 years;

113 5. Notify the Commission that the licensee is seeking the compact privilege
114 within a remote state(s);

- 115 6. Pay any applicable fees, including any state fee, for the compact
116 privilege;
- 117 7. Meet any jurisprudence requirements established by the remote state(s) in
118 which the licensee is seeking a compact privilege; and
- 119 8. Report to the Commission adverse action taken by any non-member state
120 within 30 days from the date the adverse action is taken.
- 121 B. The compact privilege is valid until the expiration date of the home license. The
122 licensee must comply with the requirements of Section 4.A. to maintain the compact
123 privilege in the remote state.
- 124 C. A licensee providing physical therapy in a remote state under the compact
125 privilege shall function within the laws and regulations of the remote state.
- 126 D. A licensee providing physical therapy in a remote state is subject to that state's
127 regulatory authority. A remote state may, in accordance with due process and that state's
128 laws, remove a licensee's compact privilege in the remote state for a specific period of
129 time, impose fines, and/or take any other necessary actions to protect the health and
130 safety of its citizens. The licensee is not eligible for a compact privilege in any state until
131 the specific time for removal has passed and all fines are paid.
- 132 E. If a home state license is encumbered, the licensee shall lose the compact
133 privilege in any remote state until the following occur:
- 134 1. The home state license is no longer encumbered; and
- 135 2. Two years have elapsed from the date of the adverse action.

136 F. Once an encumbered license in the home state is restored to good standing, the
137 licensee must meet the requirements of Section 4A to obtain a compact privilege in any
138 remote state.

139 G. If a licensee's compact privilege in any remote state is removed, the individual
140 shall lose the compact privilege in any remote state until the following occur:

- 141 1. The specific period of time for which the compact privilege was removed
142 has ended;
- 143 2. All fines have been paid; and
- 144 3. Two years have elapsed from the date of the adverse action.

145 H. Once the requirements of Section 4G have been met, the license must meet the
146 requirements in Section 4A to obtain a compact privilege in a remote state.

147 **SECTION 5. ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES**

148 A licensee who is active duty military or is the spouse of an individual who is active duty
149 military may designate one of the following as the home state:

- 150 A. Home of record;
- 151 B. Permanent Change of Station (PCS); or
- 152 C. State of current residence if it is different than the PCS state or home of record.

153 **SECTION 6. ADVERSE ACTIONS**

154 A. A home state shall have exclusive power to impose adverse action against a
155 license issued by the home state.

156 B. A home state may take adverse action based on the investigative information of a
157 remote state, so long as the home state follows its own procedures for imposing
158 adverse action.

159 C. Nothing in this Compact shall override a member state's decision that
160 participation in an alternative program may be used in lieu of adverse action and
161 that such participation shall remain non-public if required by the member state's
162 laws. Member states must require licensees who enter any alternative programs in
163 lieu of discipline to agree not to practice in any other member state during the
164 term of the alternative program without prior authorization from such other
165 member state.

166 D. Any member state may investigate actual or alleged violations of the statutes and
167 rules authorizing the practice of physical therapy in any other member state in
168 which a physical therapist or physical therapist assistant holds a license or
169 compact privilege.

170 E. A remote state shall have the authority to:

- 171 1. Take adverse actions as set forth in Section 4.D. against a licensee's
172 compact privilege in the state;
- 173 2. Issue subpoenas for both hearings and investigations that require the
174 attendance and testimony of witnesses, and the production of evidence.
175 Subpoenas issued by a physical therapy licensing board in a party state for
176 the attendance and testimony of witnesses, and/or the production of
177 evidence from another party state, shall be enforced in the latter state by
178 any court of competent jurisdiction, according to the practice and
179 procedure of that court applicable to subpoenas issued in proceedings
180 pending before it. The issuing authority shall pay any witness fees, travel

181 expenses, mileage, and other fees required by the service statutes of the
182 state where the witnesses and/or evidence are located; and
183 3. If otherwise permitted by state law, recover from the licensee the costs of
184 investigations and disposition of cases resulting from any adverse action
185 taken against that licensee.

186 F. Joint Investigations

187 1. In addition to the authority granted to a member state by its respective
188 physical therapy practice act or other applicable state law, a member state
189 may participate with other member states in joint investigations of
190 licensees.

191 2. Member states shall share any investigative, litigation, or compliance
192 materials in furtherance of any joint or individual investigation initiated
193 under the Compact.

194 **SECTION 7. ESTABLISHMENT OF THE PHYSICAL THERAPY COMPACT**
195 **COMMISSION.**

196 A. The Compact member states hereby create and establish a joint public agency known
197 as the Physical Therapy Compact Commission:

- 198 1. The Commission is an instrumentality of the Compact states.
199 2. Venue is proper and judicial proceedings by or against the Commission
200 shall be brought solely and exclusively in a court of competent jurisdiction
201 where the principal office of the Commission is located. The Commission
202 may waive venue and jurisdictional defenses to the extent it adopts or
203 consents to participate in alternative dispute resolution proceedings.

204 3. Nothing in this Compact shall be construed to be a waiver of sovereign
205 immunity.

206 B. Membership, Voting, and Meetings

207 1. Each member state shall have and be limited to one (1) delegate selected
208 by that member state's licensing board.

209 2. The delegate shall be a current member of the licensing board, who is a
210 physical therapist, physical therapist assistant, public member, or the
211 board administrator.

212 3. Any delegate may be removed or suspended from office as provided by
213 the law of the state from which the delegate is appointed.

214 4. The member state board shall fill any vacancy occurring in the
215 Commission.

216 5. Each delegate shall be entitled to one (1) vote with regard to the
217 promulgation of rules and creation of bylaws and shall otherwise have an
218 opportunity to participate in the business and affairs of the Commission.

219 6. A delegate shall vote in person or by such other means as provided in the
220 bylaws. The bylaws may provide for delegates' participation in meetings
221 by telephone or other means of communication.

222 7. The Commission shall meet at least once during each calendar year.
223 Additional meetings shall be held as set forth in the bylaws.

224 C. The Commission shall have the following powers and duties:

225 1. Establish the fiscal year of the Commission;

226 2. Establish bylaws;

- 227 3. Maintain its financial records in accordance with the bylaws;
- 228 4. Meet and take such actions as are consistent with the provisions of this
- 229 Compact and the bylaws;
- 230 5. Promulgate uniform rules to facilitate and coordinate implementation and
- 231 administration of this Compact. The rules shall have the force and effect
- 232 of law and shall be binding in all member states;
- 233 6. Bring and prosecute legal proceedings or actions in the name of the
- 234 Commission, provided that the standing of any state physical therapy
- 235 licensing board to sue or be sued under applicable law shall not be
- 236 affected;
- 237 7. Purchase and maintain insurance and bonds;
- 238 8. Borrow, accept, or contract for services of personnel, including, but not
- 239 limited to, employees of a member state;
- 240 9. Hire employees, elect or appoint officers, fix compensation, define duties,
- 241 grant such individuals appropriate authority to carry out the purposes of
- 242 the Compact, and to establish the Commission's personnel policies and
- 243 programs relating to conflicts of interest, qualifications of personnel, and
- 244 other related personnel matters;
- 245 10. Accept any and all appropriate donations and grants of money, equipment,
- 246 supplies, materials and services, and to receive, utilize and dispose of the
- 247 same; provided that at all times the Commission shall avoid any
- 248 appearance of impropriety and/or conflict of interest;

- 249 11. Lease, purchase, accept appropriate gifts or donations of, or otherwise to
250 own, hold, improve or use, any property, real, personal or mixed; provided
251 that at all times the Commission shall avoid any appearance of
252 impropriety;
- 253 12. Sell convey, mortgage, pledge, lease, exchange, abandon, or otherwise
254 dispose of any property real, personal, or mixed;
- 255 13. Establish a budget and make expenditures;
- 256 14. Borrow money;
- 257 15. Appoint committees, including standing committees composed of
258 members, state regulators, state legislators or their representatives, and
259 consumer representatives, and such other interested persons as may be
260 designated in this Compact and the bylaws;
- 261 16. Provide and receive information from, and cooperate with, law
262 enforcement agencies;
- 263 17. Establish and elect an Executive Board; and
- 264 18. Perform such other functions as may be necessary or appropriate to
265 achieve the purposes of this Compact consistent with the state regulation
266 of physical therapy licensure and practice.

267 D. The Executive Board

268 The Executive Board shall have the power to act on behalf of the Commission according
269 to the terms of this Compact

- 270 1. The Executive Board shall be composed of nine members:

- 271 a. Seven voting members who are elected by the Commission from the
272 current membership of the Commission;
- 273 b. One ex-officio, nonvoting member from the recognized national physical
274 therapy professional association; and
- 275 c. One ex-officio, nonvoting member from the recognized membership
276 organization of the physical therapy licensing boards.
- 277 2. The ex-officio members will be selected by their respective organizations.
- 278 3. The Commission may remove any member of the Executive Board as
279 provided in bylaws.
- 280 4. The Executive Board shall meet at least annually.
- 281 5. The Executive Board shall have the following Duties and responsibilities:
- 282 a. Recommend to the entire Commission changes to the rules or bylaws,
283 changes to this Compact legislation, fees paid by Compact member states
284 such as annual dues, and any commission Compact fee charged to
285 licensees for the compact privilege;
- 286 b. Ensure Compact administration services are appropriately provided,
287 contractual or otherwise;
- 288 c. Prepare and recommend the budget;
- 289 d. Maintain financial records on behalf of the Commission;
- 290 e. Monitor Compact compliance of member states and provide compliance
291 reports to the Commission;
- 292 f. Establish additional committees as necessary; and
- 293 g. Other duties as provided in rules or bylaws.

- 294 E. Meetings of the Commission
- 295 1. All meetings shall be open to the public, and public notice of meetings
- 296 shall be given in the same manner as required under the rulemaking
- 297 provisions in Section 9.
- 298 2. The Commission or the Executive Board or other committees of the
- 299 Commission may convene in a closed, non-public meeting if the
- 300 Commission or Executive Board or other committees of the Commission
- 301 must discuss:
- 302 a. Non-compliance of a member state with its obligations under the
- 303 Compact;
- 304 b. The employment, compensation, discipline or other matters, practices or
- 305 procedures related to specific employees or other matters related to the
- 306 Commission's internal personnel practices and procedures;
- 307 c. Current, threatened, or reasonably anticipated litigation;
- 308 d. Negotiation of contracts for the purchase, lease, or sale of goods,
- 309 services, or real estate;
- 310 e. Accusing any person of a crime or formally censuring any person;
- 311 f. Disclosure of trade secrets or commercial or financial information that is
- 312 privileged or confidential;
- 313 g. Disclosure of information of a personal nature where disclosure would
- 314 constitute a clearly unwarranted invasion of personal privacy;
- 315 h. Disclosure of investigative records compiled for law enforcement
- 316 purposes;

317 i. Disclosure of information related to any investigative reports prepared by
318 or on behalf of or for use of the Commission or other committee charged
319 with responsibility of investigation or determination of compliance issues
320 pursuant to the Compact; or

321 j. Matters specifically exempted from disclosure by federal or member state
322 statute.

323 3. If a meeting, or portion of a meeting, is closed pursuant to this provision,
324 the Commission's legal counsel or designee shall certify that the meeting
325 may be closed and shall reference each relevant exempting provision.

326 4. The Commission shall keep minutes that fully and clearly describe all
327 matters discussed in a meeting and shall provide a full and accurate
328 summary of actions taken, and the reasons therefore, including a
329 description of the views expressed. All documents considered in
330 connection with an action shall be identified in such minutes. All minutes
331 and documents of a closed meeting shall remain under seal, subject to
332 release by a majority vote of the Commission or order of a court of
333 competent jurisdiction.

334 F. Financing of the Commission

335 1. The Commission shall pay, or provide for the payment of, the reasonable
336 expenses of its establishment, organization, and ongoing activities.

337 2. The Commission may accept any and all appropriate revenue sources,
338 donations, and grants of money, equipment, supplies, materials, and
339 services.

340 3. The Commission may levy on and collect an annual assessment from each
341 member state or impose fees on other parties to cover the cost of the
342 operations and activities of the Commission and its staff, which must be in
343 a total amount sufficient to cover its annual budget as approved each year
344 for which revenue is not provided by other sources. The aggregate annual
345 assessment amount shall be allocated based upon a formula to be
346 determined by the Commission, which shall promulgate a rule binding
347 upon all member states.

348 4. The Commission shall not incur obligations of any kind prior to securing
349 the funds adequate to meet the same; nor shall the Commission pledge the
350 credit of any of the member states, except by and with the authority of the
351 member state.

352 5. The Commission shall keep accurate accounts of all receipts and
353 disbursements. The receipts and disbursements of the Commission shall be
354 subject to the audit and accounting procedures established under its
355 bylaws. However, all receipts and disbursements of funds handled by the
356 Commission shall be audited yearly by a certified or licensed public
357 accountant, and the report of the audit shall be included in and become
358 part of the annual report of the Commission.

359 G. Qualified Immunity, Defense, and Indemnification

360 1. The members, officers, executive director, employees and representatives
361 of the Commission shall be immune from suit and liability, either
362 personally or in their official capacity, for any claim for damage to or loss

363 of property or personal injury or other civil liability caused by or arising
364 out of any actual or alleged act, error or omission that occurred, or that the
365 person against whom the claim is made had a reasonable basis for
366 believing occurred within the scope of Commission employment, duties or
367 responsibilities; provided that nothing in this paragraph shall be construed
368 to protect any such person from suit and/or liability for any damage, loss,
369 injury, or liability caused by the intentional or willful or wanton
370 misconduct of that person.

371 2. The Commission shall defend any member, officer, executive director,
372 employee or representative of the Commission in any civil action seeking
373 to impose liability arising out of any actual or alleged act, error, or
374 omission that occurred within the scope of Commission employment,
375 duties, or responsibilities, or that the person against whom the claim is
376 made had a reasonable basis for believing occurred within the scope of
377 Commission employment, duties, or responsibilities; provided that nothing
378 herein shall be construed to prohibit that person from retaining his or her
379 own counsel; and provided further, that the actual or alleged act, error, or
380 omission did not result from that person's intentional or willful or wanton
381 misconduct.

382 3. The Commission shall indemnify and hold harmless any member, officer,
383 executive director, employee, or representative of the Commission for the
384 amount of any settlement or judgment obtained against that person arising
385 out of any actual or alleged act, error or omission that occurred within the

386 scope of Commission employment, duties, or responsibilities, or that such
387 person had a reasonable basis for believing occurred within the scope of
388 Commission employment, duties, or responsibilities, provided that the
389 actual or alleged act, error, or omission did not result from the intentional
390 or willful or wanton misconduct of that person.

391

392 SECTION 8. DATA SYSTEM

393 A. The Commission shall provide for the development, maintenance, and utilization
394 of a coordinated database and reporting system containing licensure, adverse action, and
395 investigative information on all licensed individuals in member states.

396 B. Notwithstanding any other provision of state law to the contrary, a member state
397 shall submit a uniform data set to the data system on all individuals to whom this Compact is
398 applicable as required by the rules of the Commission, including:

- 399 1. Identifying information;
- 400 2. Licensure data;
- 401 3. Adverse actions against a license or compact privilege;
- 402 4. Non-confidential information related to alternative program participation;
- 403 5. Any denial of application for licensure, and the reason(s) for such denial;
- 404 and
- 405 6. Other information that may facilitate the administration of this Compact,
406 as determined by the rules of the Commission.

407 C. Investigative information pertaining to a licensee in any member state will only be
408 available to other party states.

409 D. The Commission shall promptly notify all member states of any adverse action
410 taken against a licensee or an individual applying for a license. Adverse action information
411 pertaining to a licensee in any member state will be available to any other member state.

412 E. Member states contributing information to the data system may designate
413 information that may not be shared with the public without the express permission of the
414 contributing state.

415 F. Any information submitted to the data system that is subsequently required to be
416 expunged by the laws of the member state contributing the information shall be removed from
417 the data system.

418 **SECTION 9. RULEMAKING**

419 A. The Commission shall exercise its rulemaking powers pursuant to the criteria set
420 forth in this Section and the rules adopted thereunder. Rules and amendments shall become
421 binding as of the date specified in each rule or amendment.

422 B. If a majority of the legislatures of the member states rejects a rule, by enactment
423 of a statute or resolution in the same manner used to adopt the Compact within 4 years of the
424 date of adoption of the rule, then such rule shall have no further force and effect in any member
425 state.

426 C. Rules or amendments to the rules shall be adopted at a regular or special meeting
427 of the Commission.

428 D. Prior to promulgation and adoption of a final rule or rules by the Commission,
429 and at least thirty (30) days in advance of the meeting at which the rule will be considered and
430 voted upon, the Commission shall file a Notice of Proposed Rulemaking:

- 431 1. On the website of the Commission or other publicly accessible platform;
432 and
433 2. On the website of each member state physical therapy licensing board or
434 other publicly accessible platform or the publication in which each state
435 would otherwise publish proposed rules.
- 436 E. The Notice of Proposed Rulemaking shall include:
- 437 1. The proposed time, date, and location of the meeting in which the rule will
438 be considered and voted upon;
439 2. The text of the proposed rule or amendment and the reason for the
440 proposed rule;
441 3. A request for comments on the proposed rule from any interested person;
442 and
443 4. The manner in which interested persons may submit notice to the
444 Commission of their intention to attend the public hearing and any written
445 comments.
- 446 F. Prior to adoption of a proposed rule, the Commission shall allow persons to
447 submit written data, facts, opinions, and arguments, which shall be made available to the public.
- 448 G. The Commission shall grant an opportunity for a public hearing before it adopts a
449 rule or amendment if a hearing is requested by:
- 450 1. At least twenty-five (25) persons;
451 2. A state or federal governmental subdivision or agency; or
452 3. An association having at least twenty-five (25) members.

453 H. If a hearing is held on the proposed rule or amendment, the Commission shall
454 publish the place, time, and date of the scheduled public hearing. If the hearing is held via
455 electronic means, the Commission shall publish the mechanism for access to the electronic
456 hearing.

457 1. All persons wishing to be heard at the hearing shall notify the executive
458 director of the Commission or other designated member in writing of their
459 desire to appear and testify at the hearing not less than five (5) business
460 days before the scheduled date of the hearing.

461 2. Hearings shall be conducted in a manner providing each person who
462 wishes to comment a fair and reasonable opportunity to comment orally or
463 in writing.

464 3. All hearings will be recorded. A copy of the recording will be made
465 available on request.

466 4. Nothing in this section shall be construed as requiring a separate hearing
467 on each rule. Rules may be grouped for the convenience of the
468 Commission at hearings required by this section.

469 I. Following the scheduled hearing date, or by the close of business on the
470 scheduled hearing date if the hearing was not held, the Commission shall consider all written and
471 oral comments received.

472 J. If no written notice of intent to attend the public hearing by interested parties is
473 received, the Commission may proceed with promulgation of the proposed rule without a public
474 hearing.

475 K. The Commission shall, by majority vote of all members, take final action on the
476 proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking
477 record and the full text of the rule.

478 L. Upon determination that an emergency exists, the Commission may consider and
479 adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that
480 the usual rulemaking procedures provided in the Compact and in this section shall be
481 retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90)
482 days after the effective date of the rule. For the purposes of this provision, an emergency rule is
483 one that must be adopted immediately in order to:

- 484 1. Meet an imminent threat to public health, safety, or welfare;
- 485 2. Prevent a loss of Commission or member state funds;
- 486 3. Meet a deadline for the promulgation of an administrative rule that is
487 established by federal law or rule; or
- 488 4. Protect public health and safety.

489 M. The Commission or an authorized committee of the Commission may direct
490 revisions to a previously adopted rule or amendment for purposes of correcting typographical
491 errors, errors in format, errors in consistency, or grammatical errors. Public notice of any
492 revisions shall be posted on the website of the Commission. The revision shall be subject to
493 challenge by any person for a period of thirty (30) days after posting. The revision may be
494 challenged only on grounds that the revision results in a material change to a rule. A challenge
495 shall be made in writing, and delivered to the chair of the Commission prior to the end of the
496 notice period. If no challenge is made, the revision will take effect without further action. If the
497 revision is challenged, the revision may not take effect without the approval of the Commission.

498 **SECTION 10. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT**

499 A. Oversight

500 1. The executive, legislative, and judicial branches of state government in
501 each member state shall enforce this Compact and take all actions
502 necessary and appropriate to effectuate the Compact’s purposes and intent.

503 The provisions of this Compact and the rules promulgated hereunder shall
504 have standing as statutory law.

505 2. All courts shall take judicial notice of the Compact and the rules in any
506 judicial or administrative proceeding in a member state pertaining to the
507 subject matter of this Compact which may affect the powers,
508 responsibilities or actions of the Commission.

509 3. The Commission shall be entitled to receive service of process in any such
510 proceeding, and shall have standing to intervene in such a proceeding for
511 all purposes. Failure to provide service of process to the Commission shall
512 render a judgment or order void as to the Commission, this Compact, or
513 promulgated rules.

514 B. Default, Technical Assistance, and Termination

515 1. If the Commission determines that a member state has defaulted in the
516 performance of its obligations or responsibilities under this Compact or
517 the promulgated rules, the Commission shall:

518 a. Provide written notice to the defaulting state and other member states of
519 the nature of the default, the proposed means of curing the default and/or
520 any other action to be taken by the Commission; and

- 521 b. Provide remedial training and specific technical assistance regarding the
522 default.
- 523 2. If a state in default fails to cure the default, the defaulting state may be
524 terminated from the Compact upon an affirmative vote of a majority of the
525 member states, and all rights, privileges and benefits conferred by this
526 Compact may be terminated on the effective date of termination. A cure of
527 the default does not relieve the offending state of obligations or liabilities
528 incurred during the period of default.
- 529 3. Termination of membership in the Compact shall be imposed only after all
530 other means of securing compliance have been exhausted. Notice of intent
531 to suspend or terminate shall be given by the Commission to the governor,
532 the majority and minority leaders of the defaulting state’s legislature, and
533 each of the member states.
- 534 4. A state that has been terminated is responsible for all assessments,
535 obligations, and liabilities incurred through the effective date of
536 termination, including obligations that extend beyond the effective date of
537 termination.
- 538 5. The Commission shall not bear any costs related to a state that is found to
539 be in default or that has been terminated from the Compact, unless agreed
540 upon in writing between the Commission and the defaulting state.
- 541 6. The defaulting state may appeal the action of the Commission by
542 petitioning the U.S. District Court for the District of Columbia or the
543 federal district where the Commission has its principal offices. The

544 prevailing member shall be awarded all costs of such litigation, including
545 reasonable attorney's fees.

546 C. Dispute Resolution

547 1. Upon request by a member state, the Commission shall attempt to resolve
548 disputes related to the Compact that arise among member states and
549 between member and non-member states.

550 2. The Commission shall promulgate a rule providing for both mediation and
551 binding dispute resolution for disputes as appropriate.

552 D. Enforcement

553 1. The Commission, in the reasonable exercise of its discretion, shall enforce
554 the provisions and rules of this Compact.

555 2. By majority vote, the Commission may initiate legal action in the United
556 States District Court for the District of Columbia or the federal district
557 where the Commission has its principal offices against a member state in
558 default to enforce compliance with the provisions of the Compact and its
559 promulgated rules and bylaws. The relief sought may include both
560 injunctive relief and damages. In the event judicial enforcement is
561 necessary, the prevailing member shall be awarded all costs of such
562 litigation, including reasonable attorney's fees.

563 3. The remedies herein shall not be the exclusive remedies of the
564 Commission. The Commission may pursue any other remedies available
565 under federal or state law.

566 **SECTION 11. DATE OF IMPLEMENTATION OF THE INTERSTATE**
567 **COMMISSION FOR PHYSICAL THERAPY PRACTICE AND ASSOCIATED**
568 **RULES, WITHDRAWAL, AND AMENDMENT**

569 A. The Compact shall come into effect on the date on which the Compact statute is
570 enacted into law in the tenth member state. The provisions, which become effective at that time,
571 shall be limited to the powers granted to the Commission relating to assembly and the
572 promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers
573 necessary to the implementation and administration of the Compact.

574 B. Any state that joins the Compact subsequent to the Commission's initial adoption
575 of the rules shall be subject to the rules as they exist on the date on which the Compact becomes
576 law in that state. Any rule that has been previously adopted by the Commission shall have the
577 full force and effect of law on the day the Compact becomes law in that state.

578 C. Any member state may withdraw from this Compact by enacting a statute
579 repealing the same.

580 1. A member state's withdrawal shall not take effect until six (6) months
581 after enactment of the repealing statute.

582 2. Withdrawal shall not affect the continuing requirement of the withdrawing
583 state's physical therapy licensing board to comply with the investigative
584 and adverse action reporting requirements of this act prior to the effective
585 date of withdrawal.

586 D. Nothing contained in this Compact shall be construed to invalidate or prevent any
587 physical therapy licensure agreement or other cooperative arrangement between a member state
588 and a non-member state that does not conflict with the provisions of this Compact.

589 E. This Compact may be amended by the member states. No amendment to this
590 Compact shall become effective and binding upon any member state until it is enacted into the
591 laws of all member states.

592 **SECTION 12. CONSTRUCTION AND SEVERABILITY**

593 This Compact shall be liberally construed so as to effectuate the purposes thereof. The
594 provisions of this Compact shall be severable and if any phrase, clause, sentence or provision
595 of this Compact is declared to be contrary to the constitution of any party state or of the
596 United States or the applicability thereof to any government, agency, person or circumstance
597 is held invalid, the validity of the remainder of this Compact and the applicability thereof to
598 any government, agency, person or circumstance shall not be affected thereby. If this
599 Compact shall be held contrary to the constitution of any party state, the Compact shall
600 remain in full force and effect as to the remaining party states and in full force and effect as
601 to the party state affected as to all severable matters.

602