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S.B. 611: FIRST ANALYSIS

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Senate Bill 611 (as reported without amendment)

Sponsor: Senator Bev Hammerstrom

Committee: Economic Development, International Trade and Regulatory Affairs

Date Completed: 6-10-02

RATIONALE

The field of athletic training has evolved since the 1950s, and is considered a health profession. Working in conjunction with physicians, athletic trainers provide services in a variety of settings, such as health facilities, high schools, universities, and industrial sites. Athletic trainers may become certified by the National Athletic Trainer's Association (NATA), which requires applicants to satisfy education and experience requirements as well as pass a national certification examination, and prescribes continuing education requirements. (For more information about the NATA's requirements, please see **BACKGROUND**.) Since certification by the NATA is voluntary, many people believe that the State of Michigan also should regulate athletic trainers in order to protect the public. Current law does not prohibit anyone, such as a fitness or "personal" trainer, from holding himself or herself out as an athletic trainer, despite the person's lack of training or qualifications. According to the NATA, 41 states presently regulate the practice of athletic training in some manner, such as certification, licensure, or registration. It has been suggested that Michigan should join these states.

CONTENT

The bill would add Part 179 to the Public Health Code to provide for the registration of athletic trainers. The bill would do all of the following:

-- Require the Department of Consumer and Industry Services (DCIS) to issue an athletic trainer registration to an applicant who met the criteria for registration contained in rules promulgated under Part 179, and paid the required fees.

- -- Establish a \$20 application processing fee and a \$60 annual registration fee.
- -- Require a registered athletic trainer, when renewing registration, to submit proof that he or she successfully completed training in first aid, CPR, and foreign body obstruction of the airway, and proof that he or she met certain continuing education requirements.
- -- Require the DCIS to promulgate rules establishing minimum registration standards.
- -- Prohibit a person from calling himself or herself an athletic trainer, or using certain other titles, without being registered.
- -- Specify that Part 179 would not require new or additional third-party reimbursement for services rendered by a registered athletic trainer.

"Registered athletic trainer" would mean an individual who engaged in the prevention, assessment, treatment, and rehabilitation of athletic injuries; was under the direction and supervision of a licensed allopathic physician or a licensed osteopathic physician; and was registered under Part 179. "Athletic injury" would mean an injury sustained by an individual as a result of his or her participation in activities requiring physical strength, agility, flexibility, range of motion, speed, and stamina.

The DCIS would have to issue an athletic trainer registration to a person who applied on a form provided by the Department, met the requirements for registration contained in rules promulgated under Part 179, and paid the fees prescribed by the bill.

Page 1 of 4 sb611/0102 An annual registration could be renewed upon payment of the registration renewal fee. Beginning with the third renewal period after the bill's effective date, a registrant also would have to submit to the DCIS proof of satisfactory completion of at least eight continuing education units within a three-year period in subjects related to athletic training and approved by the Department.

In addition to meeting the continuing education requirements, a registered athletic trainer would have to submit, along with his or her application for registration renewal, proof of both of the following to the DCIS's satisfaction:

- -- That he or she had successfully completed a course of training in first aid, cardiopulmonary resuscitation (CPR), and foreign body obstruction of the airway approved by the DCIS and offered or approved by the American Red Cross, the American Heart Association, or a comparable organization.
- -- That he or she held, at the time of application for renewal and at all times during the previous registration period, a valid certification in first aid and CPR issued by the organization offering training.

The DCIS would have to promulgate rules establishing the minimum standards for registration as an athletic trainer. In promulgating those rules, the Department could consult the professional standards issued by the National Athletic Trainer's Association, the NATA Board of Certification, or another nationally recognized professional association.

Under the Code, certain words, titles, or letters, or combinations of words, titles, or letters, may be used only by those people authorized under the Code to use them, and may be used only in a way prescribed by the Code. The bill would include in that provision the use of "athletic trainer", "registered athletic trainer", "certified athletic trainer", "athletic trainer certified", "A.T.", "A.T.R.", "C.A.T.", and "A.T.C.". Beginning on the bill's effective date, a person could not use those words, titles, or letters, or similar words that indicated that the person was a registered athletic trainer, unless he or she was registered as an athletic trainer under the bill.

MCL 333.16263 et al.

BACKGROUND

(Most of the information below was obtained from the Internet site of the National Athletic Trainer's Association.)

The NATA Board of Certification (NATABOC) was incorporated in 1989 to provide a certification program for entry-level athletic trainers and recertification standards for certified athletic trainers. The NATABOC is the only accredited certification program for athletic trainers in the Unites States. Every five years, the NATABOC must undergo review and reaccreditation by the National Commission for Certifying Agencies, which is the accreditation body of the National Organization for Competency Assurance.

To become certified as an athletic trainer, a candidate must satisfy both basic requirements and section requirements (described below) and pass a three-part national certification exam.

Basic Requirements. In order to begin accumulating supervised athletic training experience hours that will be used to meet certification requirements, an athletic training student must have a high school diploma. A candidate for certification must have graduated at the baccalaureate level from an accredited college or university in the United States. (Graduates of a foreign university may petition for a substitution of this requirement.) Candidates also must have proof of current certification in CPR from an acceptable provider. At the time of application, a candidate must verify that at least 25% of the required training experience hours were obtained in actual practice and/or game coverage with football, soccer, hockey, wrestling, basketball, gymnastics, lacrosse, volleyball, rugby, and/or rodeo. In addition, the candidate's application must be endorsed by an NATABOC certified athletic trainer.

<u>Section Requirements</u>. Section 1 applies to graduates of an entry-level curriculum accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). (The CAAHEP website lists programs for athletic trainers at a number of colleges and universities in the United States, including Central Michigan University, Eastern

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Michigan University, Grand Valley State University, and Hope College.) These candidates must successfully complete the training program in not less than two academic years, and the program must include 800 hours of athletic training experience under the supervision of an NATABOC certified trainer.

Section 2 provides for an internship route to certification. These applicants must present documentation of at least 1,500 hours of athletic training experience, gained over at least two academic years, under the supervision of an NATABOC certified trainer. At least 1,000 of these hours must be attained in a traditional athletic setting at the interscholastic, intercollegiate, or professional sports level. The additional 500 hours may be from an allied clinical setting and/or sport camp setting. Each internship applicant must have successfully completed at least one formal course in each of the following: health (e.g., nutrition, health education, or substance abuse) or pathology; human anatomy; kinesiology/biomechanics; human physiology; physiology of exercise; basic athletic training; and advanced athletic training.

ARGUMENTS

(Please note: The arguments contained in this analysis originate from sources outside the Senate Fiscal Agency. The Senate Fiscal Agency neither supports nor opposes legislation.)

Supporting Argument

Athletic trainers play a critical role in meeting the needs of individuals involved in physical activity, which typically means sports but also may include activity in employment settings. According to testimony of a past-president of the Michigan Athletic Trainers Society, the practice domains in which certified athletic trainers are skilled include prevention of athletic injuries; recognition, evaluation, and immediate care; rehabilitation; health care administration; and education and guidance. Athletic trainers may be involved, for example, in health assessments identifying pre-existing or predisposing conditions; inspection and monitoring of environmental conditions and equipment; education of athletes, coaches, parents, workers, and supervisors in injury prevention and safety; medical referrals; and implementation of physician-ordered rehabilitation programs.

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In addition to the health care provided by athletic trainers, there are economic benefits from the employment of these professionals. Athletic programs have long recognized that it makes financial sense to have a qualified person on staff to intervene immediately and on-site for the majority of injuries that occur in sports, which are sprains and strains. Reducing the need for long-term care means lower costs for a school, sports team, and In industry, as well, it makes parents. economic sense to use the skills of certified athletic trainers to help prevent strains and sprains and provide early intervention when they occur. Doing so can both increase productivity and reduce workers' compensation costs.

It is clear from the rigorous NATA certification requirements that athletic trainers belong to a legitimate, recognized health profession. Also, the bill's definition of "registered athletic trainer" refers to an individual who is under the direction and supervision of a physician. State regulation of this profession is needed to protect consumers, employers, and legitimate athletic trainers. In particular, the health and economic benefits described above cannot be achieved if unqualified individuals pose as athletic trainers. Reportedly, some fitness trainers, who do not have the experience or education of athletic trainers, pass themselves off as athletic trainers. According to recent committee testimony, for example, a veterinary technician is working as an athletic trainer in the Detroit area, and a mortician is working as an athletic trainer in western Michigan. Consumers do not necessarily know how to determine whether someone calling himself or herself an athletic trainer has the proper credentials. This can lead to situations in which injuries are incorrectly treated and improper medical referrals are made. There also is the potential for liability on the part of schools, sports teams, and employers. In addition, unqualified individuals posing as athletic trainers can result in fewer jobs for legitimate trainers.

Opposing Argument

State regulation of athletic trainers is not necessary and would not be productive. Although some unqualified people no doubt are posing as athletic trainers, the nature and extent of the problem simply do not justify the

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creation of an entirely new State regulatory program that probably would not pay for itself. Furthermore, regulation by the State, whether through licensure, registration, or certification, is not a panacea, and the public should not be led to believe that regulation by itself ensures safety. Abuses continue to occur and the State's enforcement resources are limited. Schools and employers, as well as individuals in need of treatment, must take responsibility for hiring, or seeking treatment from, a qualified practitioner.

Several years ago, Governor Engler vetoed a virtually identical proposal (House Bill 4789 of 1997-98). As the Governor pointed out in his veto message, the athletic trainer profession, through its national organization, already does an excellent job of assuring that its practitioners meet the highest professional standards. Instead of relying on State regulation, anyone hiring an athletic trainer would do well to make sure that the person was NATABOC certified.

Opposing Argument

Although registration of athletic trainers would be in the public interest, the proposed definition of "athletic injury" would be too broad, and would encompass nearly any injury that resulted from physical activity, such as walking. Athletic trainers' scope of practice should be limited to their training and qualifications, which focus on injuries incurred during competitive team or individual sports.

Response: Although it might be a good idea to limit the injuries that athletic trainers may treat, the setting in which an injury occurs should make no difference. If two people sprain their ankles, for example, it should not matter whether one injury occurred in a gym and the other in a mail room. Furthermore, under the bill, a registered athletic trainer would have to be under the direction and supervision of a physician.

Legislative Analyst: Suzanne Lowe

FISCAL IMPACT

The fiscal impact of this bill is indeterminate as there is no information regarding the number of applicants; therefore, it is difficult to determine what the costs of creating this new registration program would be.

Fiscal Analyst: Maria Tyszkiewicz