



Senate Fiscal Agency
P. O. Box 30036
Lansing, Michigan 48909-7536

BILL ANALYSIS



Telephone: (517) 373-5383
Fax: (517) 373-1986
TDD: (517) 373-0543

Senate Bill 1174 (as introduced 4-28-04)
Sponsor: Senator Burton Leland
Committee: Health Policy

Date Completed: 9-14-04

CONTENT

The bill would amend the Public Health Code to do the following:

- Revise the definition of "practice of physical therapy"; expand the terms related to the practice of physical therapy that are restricted in use; and define "physical therapist assistant".**
- Delete a provision that requires a prescription from a physician, dentist, or podiatrist for the treatment of a person.**
- Increase the annual license fee for a person engaging in the practice of physical therapy from \$50 to \$60; and delete the \$20 temporary license fee.**
- Require a license applicant to provide evidence that he or she met specified educational requirements.**
- Require a licensee to complete at least 40 hours of continuing education every two years to renew his or her license.**
- Establish the "Physical Therapy Professional Fund"; and require that 10% of each annual license fee be deposited into the Fund for a continuing education program.**
- Require the Department of Community Health (DCH) to promulgate rules to establish standards of ethics and standards of practice for physical therapists, and require physical therapists to adhere to the standards.**
- Require a physical therapist to refer a patient to or consult with an appropriate health care practitioner under certain circumstances.**
- Provide that Part 178 (Physical Therapy) of the Code would not require or preclude third-party reimbursement for physical therapy services or preclude a health maintenance organization (HMO), Blue Cross and Blue Shield of Michigan (BCBSM), or an insurer from requiring a member or enrollee to fulfill benefit requirements for those services.**

The bill is described below in further detail.

Practice of Physical Therapy

The Code defines "practice of physical therapy" as the evaluation of, education of, consultation with, or treatment of an individual by the employment of effective properties of physical measures and the use of therapeutic exercises and rehabilitative procedures, with or without assistant devices, for the purposes of preventing, correcting, or alleviating a physical or mental disability; treatment planning, performance of tests and measurements, interpretation of referrals, initiation of referrals, instruction, consultative services, and supervision of personnel.

The bill would refer to evaluation, education, consultation, or treatment "by a physical therapist or under the direction and responsibility of a physical therapist in compliance with rules" promulgated by the DCH regarding standards of ethics and practice (described below). Under the bill, practice of physical therapy also would include interpretation and labeling of test and measurement results, and intervention selection. The bill would delete a provision excluding from the practice of physical therapy identification of underlying medical problems or etiologies.

Under Article 15 of the Code, which regulates the licensure of health care practitioners, specific words, titles, and letters or combinations of letters are restricted in use only to people authorized to use them as prescribed in Article 15. The bill would add to these terms "doctor of physiotherapy", "doctor of physical therapy", "physiotherapy", "physical therapy assistant", "physical therapist assistant", "physiotherapy assistant", and "physiotherapist assistant".

The bill would define "physical therapist assistant" as an individual who assists a physical therapist in physical therapy intervention and is a graduate of a nationally accredited physical therapist assistant education program acceptable to the Board of Physical Therapy.

The bill would delete a provision under which a person licensed or otherwise authorized to practice physical therapy may engage in the actual treatment of an individual only upon the prescription of an individual holding a license issued under Part 166 (Dentistry), Part 170 (Medicine), Part 175 (Osteopathic Medicine and Surgery), or Part 180 (Podiatric Medicine and Surgery), or the equivalent license issued by another state.

Educational Requirements

The bill would require an individual seeking licensure to engage in the practice of physical therapy to provide satisfactory evidence to the Michigan Board of Physical Therapy that he or she either had completed a nationally accredited physical therapist educational program acceptable to the Board, or received a physical therapy degree from a postsecondary institution outside the U.S. that the Board determined was substantially equivalent to an acceptable nationally accredited program.

Beginning two years after the bill's effective date, the Board would have to require a licensee seeking renewal of a physical therapy license to furnish satisfactory evidence that during the immediately preceding two years he or she had attended at least 40 hours of Board-approved continuing education courses or programs in subjects related to the practice of physical therapy and designed to further educate licensees.

The DCH, in consultation with the Board, would have to promulgate rules requiring each license renewal applicant to complete as part of this continuing education requirement an appropriate number of hours or courses in pain and symptom management.

Physical Therapy Professional Fund

The bill would establish the Physical Therapy Professional Fund within the State Treasury. The State Treasurer would have to credit 10% of each individual annual license fee to the Fund. The money in the Fund could be spent only for the establishment and operation of the physical therapy continuing education program described above.

The State Treasurer would have to direct the investment of the Fund, and credit to the Fund interest and earnings from the investment. The Fund could receive gifts and devises and other money as provided by law. The unencumbered balance in the Fund at the close of the fiscal year would remain the Fund and would not revert to the General Fund.

Standards of Ethics and Practice

The bill would require the DCH, in consultation with the Board, to promulgate rules to establish standards of ethics and standards of practice for physical therapists. A physical therapist would have to adhere to the standards, as well as supervision guidelines established in the rules.

The bill would require a physical therapist to refer a patient to an appropriate health care practitioner if he or she had reasonable cause to believe that the patient's symptoms or conditions required services beyond the scope of practice of physical therapy. A physical therapist would have to consult with an appropriate health care practitioner if a patient did not show reasonable response to treatment in a time period consistent with the standards of practice established in the rules.

Third-Party Reimbursement

The bill specifies that Part 178 would not require or preclude third-party reimbursement for physical therapy services; and would not preclude an HMO, a health care benefit plan, BCBSM, a worker's disability compensation insurer, a health insurer, an automobile insurer, or the Medicaid program from requiring a member or enrollee to fulfill benefit requirements for physical therapy services, including prescription, referral, or preapproval.

MCL 333.16263 et al.

Legislative Analyst: Julie Koval

FISCAL IMPACT

The bill would create the Physical Therapy Professional Fund and dedicate 10% of the license fees to it. This Fund would be used to support continuing education efforts and as such would not have an impact on State or local government. According to proposed Section 17825, nothing in Part 178 would require or preclude coverage of physical therapy services by Medicaid or private insurers, so the amendments would have no fiscal impact.

Fiscal Analyst: Steve Angelotti

S0304\1174sa

This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.