



Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board

*Occupational Therapy Section*  
*September 8, 2011*  
*9:00 a.m.*

**Members Present**

Rebecca Finni, OTR/L (arrived @ 9:46 am)  
Jean Halpin, OTR/L, Secretary  
Kimberly Lawler, OTR/L (arrived from OTERP @ 9:25 am)  
Nanette Shoemaker, COTA/L  
Mary Stover, OTR/L, Chairperson

**Staff**

H. Jeffery Barker, Investigator  
Jeffrey Rosa, Executive Director

**Guests**

Jacquelyn Chamberlin, OOTA

**Legal Counsel**

Yvonne Tertel, AAG

**Call to Order**

Mary Stover, Chairperson called the meeting to order at 9:31 a.m.

The Section began the meeting by reading the vision statement.

The Occupational Therapy Section is committed to proactively:

- Provide Education to the Consumers of Occupational Therapy Services;
- Enforce Practice Standards for the Protection of the Consumer of Occupational Therapy Services;
- Regulate the Profession of Occupational Therapy in an Ever-Changing Environment;
- Regulate Ethical and Multicultural Competency in the Practice of Occupational Therapy;
- Regulate the Practice of Occupational Therapy in all Current and Emerging Areas of Service Delivery.

**Approval of Minutes**

**Action:** Jean Halpin moved that the minutes from the July 21, 2011 meeting be approved as submitted. Nanette Shoemaker seconded the motion. Rebecca Finni was absent for the vote. The motion carried.

**Action:** Mary Stover moved to go into executive session to discuss personnel matters. Jean Halpin seconded the motion.

Mary Stover called the Roll:

**Roll Call**

Rebecca Finni	Absent
Jean Halpin	Yes
Kimberly Lawler	Yes
Nanette Shoemaker	Yes
Mary Stover	Yes

The section went into executive session at 9:37 am and came out at 9:42 am. There was no action taken.

**Special Orders**

**Election of Officers**

**Action:** Mary Stover nominated Jean Halpin to be Section Chairperson for the period beginning September 8, 2011 and ending immediately following the September 2012 Section meeting. Kimberly Lawler seconded the nomination. All members present voted to elect Jean Halpin as Section Chairperson.

**Action:** Mary Stover nominated Rebecca Finni to be Section Secretary for the period beginning September 8, 2011 and ending immediately following the September 2012 Section meeting. Kimberly Lawler seconded the nomination. All members present voted to elect Rebecca Finni as Section Secretary.

#### Appointment of Liaisons

The liaison appointments beginning September 8, 2011 and ending September 30, 2012 are:

Enforcement Division Liaison: Kimberly Lawler

Licensure Liaison: Mary Stover

Continuing Education Liaison: Nanette Shoemaker

Correspondence Liaisons: Rebecca Finni and Jean Halpin

**Action:** Rebecca Finni moved to authorize the Executive Director to accept or reject consent agreements on the Section's behalf for the period beginning September 8, 2011 and ending on September 30, 2012. Nanette Shoemaker seconded the motion. The motion carried.

**Action:** Nanette Shoemaker moved to authorize the use of signature stamps or electronic signatures by the Section Chairperson, Section Secretary, and the Executive Director for the period beginning September 8, 2011 and ending on September 30, 2012. Rebecca Finni seconded the motion. The motion carried.

**Action:** Nanette Shoemaker moved to authorize the Executive Director to make editorial changes to motions for the period beginning September 8, 2011 and ending on September 30, 2012. Nanette Shoemaker seconded the motion. The motion carried.

**Action:** Rebecca Finni moved to authorize the use of hearing officers for the period beginning September 8, 2011 and ending on September 30, 2012. Rebecca Finni seconded the motion. The motion carried.

**Action:** Nanette Shoemaker moved to authorize the staff to issue licenses to applicants with completed applications and that the Section ratify the licenses issued by the staff at the Section meeting following issuance of license for the period beginning September 8, 2011 and ending September 30, 2012. Rebecca Finni seconded the motion. The motion carried.

#### Administrative Reports

##### Continuing Education Report

**Action:** Nanette Shoemaker moved that the Section approve 95 applications and deny 1 application for contact hour approval. Rebecca Finni seconded the motion. The motion carried.

##### Licensure Report

**Action:** Kimberly Lawler moved that the Occupational Therapy Section ratify, as submitted, the occupational therapist and occupational therapy assistant licenses issued by examination, endorsement, reinstatement, and restoration by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board from July 21, 2011 through September 8, 2011, taking into account those licenses subject to discipline, surrender, or non-renewal. Jean Halpin seconded the motion. Nanette Shoemaker abstained from voting on the occupational therapy assistant examination applications for Kathleen Fullenkamp and Jodi Tobe. Kimberly Lawler abstained from voting on the occupational therapy assistant examination applications for Tabatha Shultz. The motion carried.

##### Occupational Therapist – Examination

Barbe, Kellie  
Contreras, Catherine  
Foster, Amy  
Hillman, Corrie  
Junod, Megan  
Minard, Carey  
Ripple, Lindsay  
Zinnecker, Kimberly

Brehm, Brooke  
Doemel, Lisa  
Guidetti, Jaclyn  
Huffman, Tracy  
Karam, Erin  
Mohr, Stephanie  
Trevis, Jacqueline

Buehler, Sarah  
Enser, Abby  
Hallock-Lafontaine, Kimberly  
Jarvis, Beverly  
Klang, Erika  
Oldaker, Brooke  
Watson, Amanda

Occupational Therapy Assistant – Examination

Allen, Linda	Anderson, Danica	Badovick, Emma
Benroth, Kendra	Besgrove, Erin	Blake, Matthew
Boyer, Kendra	Brown, Christina	Charlebois, Daniel
Collett, Leann	Crabill, Lyndsey	Crawford, Teresa
Daniels, Desirae	Daugherty, Lisa	Davis, Kamika
Duncan, Toni	Edwards, Daniel	Ferguson, Jessica
Foster, Heather	Frentsos, Rose	Fullenkamp, Kathleen
Gallagher, Theodore	Gottschling, Jordan	Gray, Shelly
Greenawalt, Shelly	Hall, Lisa	Harris, Joyce
Harrison, Jamie	Harvey, Monica	Hofbauer, Kimberly
Hoffman, George	Hovorka, Robert	Jacoby, Alyssa
Johnson, Melinda	Johnson, Tiffany	Kerl, Elizabeth
Kern, Cathleen	King, Jessica	Kuhlman, Jessica
Ledford, Samantha	Longmuir, Melissa	Mairose, Jessica
Martin, Kinda	Mayes, Kelsie	McClintic, Vanessa
McLaughlin, Christine	Meyer, Abby	Miller, Cheri
Miller, Jeffery	Morgan, Heidi	Musser, Hillary
Myers, Emily	Myers, Krista	Oser, Jaclyn
Page, Tina	Plottner, Kelly	Pramik, Katherine
Ricica, Jamie	Satterthwaite, Steven	Sawmiller, Jodi
Schaefer, Nicole	Schnipke, Marlene	Schroeder, Stacy
Sharrer, Ashley	Shaver, Lauren	Shultz, Tabatha
Smith, Kerri	Stracener, Michele	Strasser, Valerie
Tobe, Jodi	Walther, Shannon	Yinger, Leisa

Occupational Therapist – Endorsement

Ameredes, Samantha	Gidich, Sarah	Hrenya, Amanda
Lee, Hilary	Pearson, Elizabeth	Raiff, Traci
Suazo, Krista	Thompson, Kristen	Warnock, Mary

Occupational Therapy Assistant – Endorsement

Barnes, Anne	Bierstetel, Erin	Brousseau, Laura
Darwin, Jennifer	Glover, Gregory	Gorlock, Dennis
Hawkins, Brenda	Lamb, Leslie	Loyland, Eric

Occupational Therapist – Reinstatement

Johnson, Joanne	Mueller, Michelle	Smith, Tracee
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Occupational Therapy Assistant – Reinstatement

Daugherty, Julie	Highfield, Jessica
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Occupational Therapist – Restoration

Gallo, Tamara	Niemiec, Nicole
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Occupational Therapy Assistant – Restoration

Kovesdy, Cheryl	Lombardo, Steven
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Limited License Agreements

Mary Stover reported that Molly Gremling complied with all terms and conditions and was released from her limited license agreement.

Mary Stover reported to the Section that the applicant for occupational therapy assistant restoration File#5025224 has secured employment and will be able to proceed with the limited license agreement.

Mary Stover recommended that the Section grant an extension of six months for the limited license agreement for occupational therapist restoration file #4193200. **Action:** Jean Halpin moved that the Section grant an extension of six months for the limited license agreement for occupational therapy assistant reinstatement file #4193200. Nanette Shoemaker seconded the motion. Mary Stover abstained from voting. The motion carried. The Section granted an extension of the occupational therapist limited license agreement to six months for Renee Delventhal. The deadline to complete the terms of the limited license agreement is June 14, 2012.

Mary Stover recommended that, pursuant to rule 4755-3-12 (D)(2) of the Administrative Code, the Section offer a limited license agreement to occupational therapy assistant reinstatement applicant #5116877. **Action:** Jean Halpin moved that the Section grant a limited occupational therapy assistant license agreement to reinstatement applicant #5116877. Rebecca Finni seconded the motion. Mary Stover abstained from voting. The motion carried. Upon completion of all the required documentation, the Section will grant an occupational therapy assistant limited license agreement to Melissa Dougherty.

#### Assistant Attorney General's Report

Yvonne Tertel, AAG, had no formal report for the Section. Ms. Tertel provided education about post deliberation practices.

#### Case Review Liaison Report

The Enforcement Division opened six new cases and closed seven cases since the July 21, 2011 meeting. There are currently eight cases open. There are five consent agreements and one adjudication order being monitored.

Kimberly Lawler informed the Section that Leigh Ann Charpie and Jennifer R. Sherick have complied with all terms and conditions and were released from their disciplinary consent agreements.

#### Enforcement Actions

Kimberly Lawler recommended that the Section issue a notice of opportunity for hearing for case OT-FY12-007 for supervising an occupational therapy practitioner while the individual did not hold a valid license. **Action:** Rebecca Finni moved that the Section issue a notice of opportunity for hearing for case OT -FY12-007 for supervising an occupational therapy practitioner while the individual did not hold a valid license. Nanette Shoemaker seconded the motion. Kimberly Lawler abstained from voting. The motion carried.

Kimberly Lawler recommended that the Section issue a notice of opportunity for hearing for case OT-FY12-008 for supervising an occupational therapy practitioner while the individual did not hold a valid license. **Action:** Rebecca Finni moved that the Section issue a notice of opportunity for hearing for case OT -FY12-008 for supervising an occupational therapy practitioner while the individual did not hold a valid license. Nanette Shoemaker seconded the motion. Kimberly Lawler abstained from voting. The motion carried.

Kimberly Lawler recommended that the Section issue a notice of opportunity for hearing for case OT-FY12-009 for supervising an occupational therapy practitioner while the individual did not hold a valid license. **Action:** Rebecca Finni moved that the Section issue a notice of opportunity for hearing for case OT -FY12-009 for supervising an occupational therapy practitioner while the individual did not hold a valid license. Nanette Shoemaker seconded the motion. Kimberly Lawler abstained from voting. The motion carried.

Kimberly Lawler recommended that the Section issue a notice of opportunity for hearing for case OT-FY12-012 for departure from minimal standards of care. **Action:** Rebecca Finni moved that the Section issue a notice of opportunity for hearing for case OT -FY12-012 for departure from minimal standards of care. Nanette Shoemaker seconded the motion. Kimberly Lawler abstained from voting. The motion carried.

#### Correspondence

1. **Krista Thornton:** Ms. Thornton asked the Section questions regarding clarification on the occupational therapy assistant's role in home assessments. **Reply:** A home assessment is **not** an evaluation performed within home health services. It is an assessment typically performed prior to discharge home from an inpatient or skilled nursing rehabilitation setting. It is primarily performed to determine equipment and environmental needs for the client's safety at home. It is **not** an evaluation performed within home health services. A home assessment may be performed by an occupational therapy assistant with a current client

under an established occupational therapy treatment/intervention plan by an occupational therapist. The occupational therapy assistant can gather objective information and report observations, with or without the client and/or occupational therapist present. It is the responsibility of the occupational therapist to interpret the data gathered by the occupational therapy assistant and collaborate with the occupational therapy assistant to make recommendations. Any collaboration between the occupational therapist and occupational therapy assistant must be reflected in client documentation.

2. **Shirley Cain:** Ms. Cain asked the Section questions regarding occupational therapy assistants and aquatic therapy. **Reply:** It is the position of the Occupational Therapy Section that if the aquatic services are pursuant to an occupational therapy plan of care and billed as occupational therapy then the services can only be carried out by an occupational therapist or occupational therapy assistant who has demonstrates and documented competency in aquatic therapy techniques. If the aquatic service is not represented as occupational therapy, and if the occupational therapy practitioner happens to be qualified as an aquatic program instructor, then the Section recommends that the practitioner ensures that appropriate medical screenings and disclosure are in place to ensure the safety of the participants. Occupational therapy assistants may only treat pursuant to the occupational therapy evaluation and plan of care Occupational therapy practitioners may not treat pursuant to an evaluation and plan of care established by another discipline. Occupational therapy practitioners must demonstrate and document competency in the techniques being performed. In addition the supervising occupational therapist must document and demonstrate competency in the techniques being supervised. The Sections recommends that you check with the facility policies as they may be more restrictive than the Ohio Occupational Therapy and Physical Therapy Practice Acts. The Section recommends you contact American Occupational Therapy Association (AOTA) or the Ohio Occupational Therapy Association (OOTA) concerning training for aquatic therapy techniques.
3. **Nathan Wagner:** Mr. Wagner asked the Section for clarification on what services a non-Ohio licensed occupational therapist may provide to a client in Ohio when accompanying their client for a prosthesis training in Ohio. **Reply:** Pursuant to section 4755.05 of the Ohio Revised Code, no person who does not hold a current license under sections 4755.04 to 4755.13 of the Revised Code shall practice or offer to practice occupational therapy, or use in connection with the person's name, or otherwise assume, use, or advertise, any title, initials, or description tending to convey the impression that the person is an occupational therapist or an occupational therapy assistant. No partnership, association, or corporation shall advertise or otherwise offer to provide or convey the impression that it is providing occupational therapy unless an individual holding a current license under section 4755.04 to 4755.13 of the Revised Code is or will at the appropriate time be rendering the occupational therapy services to which reference is made. If the occupational therapist would be providing and billing for occupational therapy services with the client in the State of Ohio, the occupational therapist would need to be licensed in the state of Ohio. If the occupational therapist will only be observing and learning about the prosthetic process and not providing occupational therapy services during the one-week fitting, they would not need to apply for an Ohio license.
4. **Elizabeth Merrell:** Ms. Merrell asked the Section questions regarding PRN supervising occupational therapist and transferring the plan of care. **Reply:** According to the Occupational Therapy Section, if, for any reason, the evaluating occupational therapist will no longer be available to provide and supervise the occupational therapy care, the patient must be transferred by that occupational therapist to another occupational therapist. This includes the situation where an occupational therapist is providing temporary coverage and might only evaluate a patient and then delegate treatment to an occupational therapy assistant. The occupational therapist is terminating any further professional relationship with that patient and must transfer their responsibilities to another occupational therapist. Termination of care does not include an occupational therapist taking regularly scheduled days off or job sharing. In those situations, another occupational therapist would be providing coverage or sharing the occupational therapy responsibility. Each occupational therapy practice should determine a system that will allow for this transfer of care in situation where an occupational therapist is terminating the patient/therapist relationship. That transfer of care must be documented in the patient's medical record by identifying the new occupational therapist by name, if there is an occupational therapist, or transferring to the individual responsible for management of therapy services, if there's not an occupational therapist, for reassignment. The occupational therapist who accepted the transfer of care is then responsible for supervising all aspects of the occupational therapy

program that are delegated to occupational therapy personnel. If the patient is not transferred to another occupational therapist, the evaluating occupational therapist is responsible for the overall care of the patient, including the supervision of any occupational therapy personnel providing services to that patient. The Section recommends that you review the facility policies for clarification on the term job sharing in your specific working setting.

5. **Sharlene Mullen:** Ms. Mullen asked the Section for clarification on the supervision requirements for occupational therapy assistants. **Reply:** Supervision requires initial directions and periodic inspection of the service delivery and relevant in-service training. The supervising licensed occupational therapist need not be on-site, but must be available for consultation with the occupational therapy assistant at all times. Supervision is an interactive process; simply co-signing client documentation does not meet the minimum level of supervision. Supervision must include a review of the client assessment, reassessment, treatment plan, intervention, and the discontinuation of the intervention. The occupational therapy assistant may not initiate or modify a client's treatment plan without first consulting with the supervising occupational therapist. The supervising occupational therapist must provide supervision at least once per week for all occupational therapy assistants who are in their first year of practice. Occupational therapy assistants beyond their first year of practice must be supervised at least once per month. Evidence must be established, either in the client records or in a separate document (e.g.: collaboration log), that the supervision took place. It is the responsibility of both the supervising occupational therapist and the occupational therapy assistant to assure that adequate supervision is provided.
  
6. **Jacqueline Brown:** Ms. Brown asked the Section questions regarding whether occupational therapy assistant can perform screens, supervision requirements for occupational therapy students, and billing for re-evaluations. **Reply:** In response to your first question, it is the position of the Occupational Therapy Section that screens, or identification of candidates for therapy, may be performed by an occupational therapy assistant. The Section interprets a screen to be only data gathering and non-evaluative in nature. In accordance with rule 4755-7-03 of the Administrative Code, the occupational therapist interprets the data and makes necessary recommendations. All screens must be cosigned by the occupational therapist, and collaboration with the occupational therapist must be documented. In response to your second question, in accordance with rule 4755-7-08 (B)(13) of the Administrative Code, a licensee shall provide appropriate supervision to individuals for whom the practitioner has supervisory responsibility. This applies to both the student occupational therapist and the student occupational therapy assistant. The Section does not specifically define the word appropriate due to the multiple practice settings identified in the Occupational Therapy Practice Framework. The practice setting, acuity of the clients served, and needs of the student should be considered when establishing the supervision plan. In accordance with paragraphs (D), (E), and (H) of rule 4755-7-04 of the Administrative Code, supervision must ensure consumer protection. The supervising occupational therapist is ultimately responsible for all clients and is accountable and responsible at all times for the actions of the student occupational therapist and student occupational therapy assistant. (D) Student occupational therapist. (1) A student occupational therapist shall be supervised by an occupational therapist who has completed at least one year of clinical practice as a fully licensed occupational therapist. (2) The student occupational therapist, who is being supervised in accordance with the laws and rules governing the practice of occupational therapy, may supervise unlicensed personnel. (E) Student occupational therapy assistant. (1) A student occupational therapy assistant shall be supervised by an occupational therapist or occupational therapy assistant who has completed at least one year of clinical practice as a fully licensed occupational therapist or occupational therapy assistant. (2) The student occupational therapy assistant, who is being supervised in accordance with the laws and rules governing the practice of occupational therapy, may supervise unlicensed personnel. (H) Any documentation written by an occupational therapy assistant, student occupational therapist, or student occupational therapy assistant for inclusion in the client's official record shall be co-signed by the supervising occupational therapist. Your comment about "line of site" may be more of a payer or facility policy. The Section recommends that you refer to Medicare, Medicaid, and/or payer policies for any specific supervision requirements for billing and reimbursement in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association. In response to your last question, the Occupational Therapy Section does not have specific requirements for frequency of re-evaluation; however, your agency, accrediting bodies and reimbursement agencies may have other requirements and guidelines that need to be met for reimbursement of occupational therapy services. In accordance with rule 4755-7-08 (B)(15)(a) of

the Administrative Code, a licensee shall adhere to the minimal standards of acceptable prevailing practice. Failure to adhere to minimal standards of practice, whether or not actual injury to a client occurred, includes, but is not limited to documenting or billing for services not actually performed. It is inappropriate to bill for a re-evaluation if a re-evaluation has not been performed.

7. **Christine Skujins:** Ms. Skujins asked the Section if occupational therapy assistants can present information at the IEP meetings. **Reply:** It is appropriate for an occupational therapy assistant to attend an IEP meeting and present information concerning student progress as well as to present information about the IEP goals to be addressed by occupational therapy, based on previous collaboration between the supervising occupational therapist and the occupational therapy assistant. If, at the IEP meeting, the IEP team recommends additions or changes to the goals being addressed by occupational therapy, the supervising occupational therapist would need to review those recommendations and agree to any changes: the occupational therapy assistant could not make that decision alone, without additional collaboration between the supervising therapist and the assistant.
8. **Celeste Survoy:** Ms. Survoy asked the Section questions regarding supervision requirements for level II student occupational therapists. **Reply:** A level II occupational therapy student may only be supervised by a licensed occupational therapist. An occupational therapy student may only provide services under an occupational therapy plan of care. In accordance with rule 4755-7-08 (B)(13) of the Administrative Code, a licensee shall provide appropriate supervision to individuals for whom the practitioner has supervisory responsibility. This applies to both the student occupational therapist and the student occupational therapy assistant. The Section does not specifically define the word appropriate due to the multiple practice settings identified in the Occupational Therapy Practice Framework. The practice setting, acuity of the clients served, and needs of the student should be considered when establishing the supervision plan. In accordance with paragraphs (D) and (H) of rule 4755-7-04 of the Administrative Code, supervision must ensure consumer protection. The supervising occupational therapist is ultimately responsible for all clients and is accountable and responsible at all times for the actions of the student occupational therapist and student occupational therapy assistant. (D) Student occupational therapist. (1) A student occupational therapist shall be supervised by an occupational therapist who has completed at least one year of clinical practice as a fully licensed occupational therapist. (2) The student occupational therapist, who is being supervised in accordance with the laws and rules governing the practice of occupational therapy, may supervise unlicensed personnel. (H) Any documentation written by an occupational therapy assistant, student occupational therapist, or student occupational therapy assistant for inclusion in the client's official record shall be co-signed by the supervising occupational therapist. Your comment about "face to face" may be more of a payer or facility policy. The Section recommends that you refer to Medicare, Medicaid, and/or payer policies for any specific supervision requirements for billing and reimbursement in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association.
9. **Cindy D'Egidio:** Ms. D'Egidio asked for the Section's position regarding Medicare clients having to pay higher copays for office visits that could be provided by another vendor at a lower cost to the client. **Reply:** Your questions relate to payer policies and not to the Ohio Physical Therapy Practice Act. The Physical Therapy Section suggests that you contact the department of your facility that negotiates insurance contracts to inquire about this issue. The Section also recommends that you contact the Ohio Department of Insurance and the Attorney General's office, as well as the Ohio Chapter and Reimbursement Department of the American Physical Therapy Association. The Section agrees that as presented this situation could be an access issue and may become an issue that the Physical Therapy Section could address as a public safety issue. Therefore, please keep the Physical Therapy Section informed of what you learn. It is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice. The Section recommends that you refer to Medicare, Medicaid, and/or payer policies for any specific billing and reimbursement requirements in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association.

#### **OT/PT Joint Correspondence**

- JB1.** **Sara Wagner:** Ms. Wagner asked for the questions regarding whether there are practice limitations for individuals holding dual licensure. **Reply:** Pursuant to section 4755.04 of the Ohio Revised Code (A) "Occupational therapy" means the therapeutic use of everyday life activities or occupations with

individuals or groups for the purpose of participation in roles and situations in the home, school, workplace, community, and other settings. The practice of occupational therapy includes all of the following: (1) Methods or strategies selected to direct the process of interventions, including, but not limited to, establishment, remediation, or restoration of a skill or ability that has not yet developed or is impaired and compensation, modification, or adaptation of activity or environment to enhance performance; (2) Evaluation of factors affecting activities of daily living, instrumental activities of daily living, education, work, play, leisure, and social participation, including, but not limited to, sensory motor abilities, vision, perception, cognition, psychosocial, and communication and interaction skills; (3) Interventions and procedures to promote or enhance safety and performance in activities of daily living, education, work, play, leisure, and social participation, including, but not limited to, application of physical agent modalities, use of a range of specific therapeutic procedures to enhance performance skills, rehabilitation of driving skills to facilitate community mobility, and management of feeding, eating, and swallowing to enable eating and feeding performance; (4) Consultative services, case management, and education of patients, clients, or other individuals to promote self-management, home management, and community and work reintegration; (5) Designing, fabricating, applying, recommending, and instructing in the use of selected orthodox or prosthetic devices and other equipment which assists the individual to adapt to the individual's potential or actual impairment; (6) Administration of topical drugs that have been prescribed by a licensed health professional authorized to prescribe drugs, as defined in section 4729.01 of the Revised Code. (B) "Occupational therapist" means a person who is licensed or holds a limited permit to practice occupational therapy and who offers such services to the public under any title incorporating the words "occupational therapy," "occupational therapist," or similar title or description of services. (C) "Occupational therapy assistant" means a person who holds a license or limited permit to provide occupational therapy techniques under the general supervision of an occupational therapist. If a clinician is dually certified, when providing occupational therapy services they must follow the provision of the Ohio Occupational Therapy Practice Act. The Section recommends that you refer to Medicare, Medicaid, and/or payer policies for any specific dual certification requirements for billing and reimbursement in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association. It is the position of the Physical Therapy Section that a physical therapist/physical therapist assistant who is also licensed as another healthcare professional would not be governed by the Ohio Physical Therapy Practice Act when acting under the other license provided that the therapist/assistant is not representing themselves as a physical therapist/physical therapist assistant, and as long as the therapist/assistant is not billing or being reimbursed for physical therapy services. In providing services other than physical therapy, the physical therapist or physical therapist assistant must make it clear to the client or family that the therapist is acting only in this other capacity. The same would apply for Occupational Therapy. That is, communication must be done in such a way that if the client or family is asked, he/she could clearly testify in a legal proceeding as to the role of the individual who was providing treatment. One individual may not provide services of two different professions during the same time period. The facility must also not represent this role as being more skilled due to additional education/credentials than required for that job description. You may also wish to note that your professional liability policy (if you have one) would not cover you while acting in any capacity other than as a licensed physical therapist or physical therapist assistant. Your final question about treating the same patient in the same day as physical and occupational therapy is an insurance issue. Please refer to Medicare rules or other payer policies to answer your specific questions. Frequently asked questions that were published by the Centers for Medicare and Medicaid Services (CMS) have clearly stated that a patient cannot be charged for two separate one-on-one services during the same segment of time, regardless of skill level required.

**JB2. James Boylen:** Mr. Boylen asked the Section's whether occupational therapy assistants and physical therapists assistants can request an evaluation and treatment orders in a long term care setting as result of a screening and whether assistant's can write orders in the chart if co-signed by an occupational therapist or physical therapist. **Reply:** There is nothing in the Occupational Therapy Practice Act that prohibits any healthcare practitioner from making direct referrals to occupational therapy. However, hospital or facility policies, accrediting bodies, and/or reimbursement agencies may have other requirements and guidelines, including requiring a physician's referral and/or prescription, which need to be met for accreditation and/or reimbursement purposes. It is the position of the Occupational Therapy Section that screens, or identification of candidates for therapy, may be performed by an occupational therapy assistant. The

Section interprets a screen to be only data gathering and non-evaluative in nature. In accordance with rule 4755-7-03 of the Administrative Code, the occupational therapist interprets the data and makes necessary recommendations. All screens must be cosigned by the occupational therapist, and collaboration with the occupational therapist must be documented. No, it is not within the scope of practice for a physical therapist assistant to request a referral to evaluate and treat a patient based on results of a screening that they performed. According to rule 4755-27-03 (E)(5) of the Ohio Administrative Code, ***when practicing within the scope of physical therapy***, a physical therapist assistant may gather data about a patient to perform a screening that is non-evaluative in nature. However, interpretation of this information, including the need for a physical therapy evaluation, is the responsibility of the physical therapist. It is the position of the Physical Therapy Section that a physical therapist assistant may enter a referral in the patient records. As with all documentation by a physical therapist assistant, these entries must be co-signed by the supervising physical therapist. The physical therapist is the individual responsible for receiving, interpreting, and accepting the directive or order as part of the care of the patient.

**JB3. Diana Lashley:** Ms. Lashley asked the Sections whether a chiropractor can be hired as a physical therapist and perform duties of a physical therapist and/or occupational therapist. **Reply:** In the Developmental Disability setting, when the IEP or IFSP designate occupational therapy services, only a licensed occupational therapist or occupational therapy assistant may provide these services. Pursuant to section 4755.04 (B) & (C) of the Ohio Revised Code an “occupational therapist” means a person who is licensed to practice occupational therapy and who offers such services to the public under any title incorporating the words “occupational therapy,” “occupational therapist,” or similar title or description of service. An “occupational therapy assistant” means a person who holds a license or limited permit to provide occupational therapy techniques under the general supervision of an occupational therapist. Pursuant to 4755-3-03 (A) and (B) of the Occupational Therapy Section of the Ohio Administrative Code: (A) The education requirements described in divisions (B) and (C) of section 4755.07 of the Revised Code, shall be satisfied by completion of an education program accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) of the American Occupational Therapy Association. Occupational therapy programs which have not been accredited by (ACOTE) will be accepted provided program equivalency has been established by a recognized educational credentialing body approved by the section. (B) In accordance with the provision of the second paragraph of section 4755.09 of the Revised Code, the section may waive the educational requirements specified in paragraph (A) of this rule on the basis of job experience if all of the following conditions are met: (1) The applicant passed the NBCOT certification examination. (2) The applicant for licensure engaged in the active practice of occupational therapy as a licensed occupational therapist in another state, or if the experience occurred in a state not requiring licensure, as an occupational therapist certified by NBCOT, for a period of no less than five years immediately preceding the date the application is submitted. (3) The applicant’s licensure and/or certification are active and without restriction. (4) The applicant is foreign educated and meets the requirements of paragraph (E) of rule 4755-3-01 of the Administrative Code in addition to all other applicable paragraphs of rule 4755-3-01 of the Administrative Code. No, a chiropractor cannot represent himself/herself as a physical therapist. Section 4755.48 (C) of the Revised Code, states that no person shall use the words or letters, physical therapist, physical therapy, physical therapy services, physiotherapist, physiotherapy, physiotherapy services, licensed physical therapist, P.T., Ph.T., P.T.T., R.P.T., L.P.T., M.P.T., D.P.T., M.S.P.T., P.T.A., physical therapy assistant, physical therapist assistant, physical therapy technician, licensed physical therapist assistant, L.P.T.A., R.P.T.A., or any other letters, words, abbreviations, or insignia, indicating or implying that the person is a physical therapist or physical therapist assistant without a valid license under sections 4755.40 to 4755.56 of the Revised Code. You should also be aware that in accordance with rule 4755-27-02 (A) of the Ohio Administrative Code, only a physical therapist may supervise a physical therapist assistant.

### **Old Business**

#### **Review Chapter 3 for Five Year Rule Review in 2012**

The Board members reviewed Chapter 4755-3 of the Administrative Code, with added emphasis on rules 4755-3-03, 4755-3-04, and 4755-3-05.

#### **Standard Responses Update**

The Section reviewed the proposed changes to the standard responses. The Section will continue to work on the drafts and will finalize the changes at the November Section meeting.

### Escrow Status

The discussion of escrow status will be incorporated into the Town Hall presentation at the October 15, 2011 OOTA Conference. The feedback from the OOTA conference, OOTA survey and OTPTAT Board's Listserv survey will be reviewed at the November Section meeting.

### NBCOT Conference

The NBCOT Conference will be held on October 21-22, 2011 in Alexandria Virginia.

### **New Business**

#### ODE OT/PT Consultant

Cathy Csanyi was unable to attend the Section meeting. The Executive Director reported that he discussed with Ms. Csanyi the Board's position paper on *Determination of Appropriate Caseload for School-Based Occupational Therapy Practitioners*.

#### OOTA Escrow Survey Results

The Section reviewed the results of the survey from the Ohio Occupational Therapy Association. OOTA will incorporate this discussion into the Town Hall presentation at the October 15, 2011 OOTA Conference.

#### Retired Status

The Executive Director reported to the Section that the establishment of a retired status would require a law change. The Section requested that Mr. Rosa review other professions' laws and rules regarding retirement status.

#### OOTA Presentation – Ethical Dilemma-Social Networking

The OOTA Conference will be held on October 14-15, 2011 in Cuyahoga Falls, Ohio. Jean Halpin informed the Section that she submitted the presentation information to OOTA for the fall conference. The Section will be presenting from 4:00 pm-5:30 pm on October 14, 2011 and 10:30 am to 12:00 pm on October 15, 2011.

#### CE Credit for postings through Social Media

The Executive Director informed the Section that NBCOT has no policy or intention of issuing CE credit for social media, blogs or tweets.

#### CE Credit for Completion of Hand Therapy Certification

Based on a call from a licensee, H. Jeffrey Baker, Investigator, asked the Section if an occupational therapy practitioner could be granted CE credit for passing the Hand Therapy Certification Test. The Section discussed and reviewed the current occupational therapy practice act and determined that there is no CE equivalent for passing the Hand Therapy Certification Examination. However, an individual can submit a request for continuing education approval for the work done to prepare for the hand therapy certification examination.

#### Standard Procedures for Limited License Agreements

Mary Stover reported that there are thirty-two limited license agreements being monitored. This list included applicants that were making progress in their agreement as well as individuals who have not demonstrated any activity in their agreements or had moved into escrow status. The Section asked the Executive Director to contact all applicants who have demonstrated no activity in 2011 to obtain the applicant's intention or if the applicant would like to withdraw from the limited license process.

**Action:** Rebecca Finni moved to authorize the Executive Director to accept an applicant's application withdrawal if the individual chose to terminate a limited license agreement when contacted due to no demonstrated activity in 2011. Jean Halpin second. The motion carried.

### **Open Forum**

There were no items discussed.

### **Ohio Occupational Therapy Association (OOTA) Report**

Jacquelyn Chamberlin gave an overview of the OOTA escrow survey results.

**Items for Next Meeting**

- Escrow Status Update
- Retired Status Research Update
- Standard Responses Update
- Limited License Agreements Process Update
- File 2012 Rules Changes
- Review the term “Limited Permit” in R.C. 4755.04
- NBCOT Conference Update
- OOTA Presentation Recap
- Ethics Training

**Next Meeting Date**

The next regular meeting date of the Occupational Therapy Section is scheduled for Thursday, November 17, 2011.

**Action:** Kimberly Lawler moved to adjourn the meeting. Rebecca Finni seconded the motion. The motion carried. The meeting adjourned at 3:31 p.m.

Respectfully submitted,  
*Diane Moore*

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Mary Stover, OTR/L, Chairperson  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board, OT Section

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Jean Halpin, OTR/L, Secretary  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board, OT Section

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Jeffrey M. Rosa, Executive Director  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board

**JH:jmr:dm**