



Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board

*Physical Therapy Section*  
*March 5, 2015*  
*9:30 a.m.*

**Members Present**

Lynn Busdeker  
Matthew Creed  
Erin Hofmeyer  
Karen Holtgreffe  
Ronald Kleinman, Chair  
James Lee  
Chad Miller  
Trevor Vessels, Public Member  
Jennifer Wissinger

**Legal Counsel**

Melissa Wilburn, AAG

**Call to Order**

Ronald Kleinman, Chair, called the meeting to order at 9:31 a.m.

**Approval of Minutes**

**Action:** Karen Holtgreffe moved that the minutes from the January 8, 2015, meeting be approved as amended. Lynn Busdeker seconded the motion. The motion carried.

**Discussion of Law and Rule Changes**

The Executive Director informed the Section that the public rules hearing will be held at the May 2015 Section meeting.

**Administrative Reports**

**Licensure Applications**

**Action:** Chad Miller moved that the Physical Therapy Section ratify, as submitted, the individuals approved by the Occupational Therapy, Physical Therapy, and Athletic Trainers Board to sit for the National Physical Therapy Examination for physical therapists and physical therapist assistants from January 8, 2015 through March 5, 2015, taking into account those individuals subject to discipline, surrender, or non-renewal. Mr. Miller further moved that the following persons be licensed as physical therapists/physical therapist assistants pending passage of the National Physical Therapy Examination and Ohio Jurisprudence Examination. Matthew Creed seconded the motion. The motion carried.

**Physical Therapist – Examination**

Arcuri, Cristina  
Blanton, Thomas  
Etler, Nathan  
Miller, Sarah  
Stephens, Megan  
Wirt, Alisha

Ballman, Matthew  
Camarato, Jaclyn  
Frelek, Malgorzata  
O'Rear, Stephen  
Suen, Lucy  
Wisniewski, Sarah

Banta, Julie  
Crockett, Cody  
Mandia, Juanito  
Stephens, Megan  
Westbrook, Adrienne

**Physical Therapist Assistant – Examination**

Adams, Nicholas  
Brown, Tammy  
Creque, Catherine  
Devereaux, Paula

Allicock, Nicole  
Cheh, Thomas  
Csincsak, Holly  
Gagle, Derek

Beres, Andrea  
Chukwulobe, Nathan  
Delzeith, Teresa  
Grossnickle, Marc

Guggenbiller, Destinee  
Harrison, Anthony  
James, Tamika  
Matras, Lori  
Morgan, Ryan  
Pawson, Stephanie  
Rybak, Bella  
Shihabi, Nabil  
Spray, Scott  
Wittenberg, Joseph  
Wurster, Shannon

Harris, Alexis  
Haser, Brittany  
Jaros, Theresa  
McCarley, Rachel  
Nwaneri, Stanley  
Petrovic, Zoran  
Santus, Olivia  
Simpson, Lindsay  
St. Johns, Robert  
Wojihowski, Madison

Harris, Jenna  
Hoyt, Grant  
Kantura, Lindsey  
Moore, Patricia  
Paolucci, Michael  
Riedel, Montgomery  
Sensius, Daniel  
Slapnick III, Paul  
Wirrig, Marissa  
Wright, Andrew

**Action:** Chad Miller moved that the Physical Therapy Section ratify, as submitted, the physical therapist and physical therapist assistant licenses issued by endorsement and reinstatement by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board from January 8, 2015 through March 5, 2015, taking into account those licenses subject to discipline, surrender, or non-renewal. Lynn Busdeker seconded the motion. The motion carried.

Physical Therapist – Endorsement

Anderson, William  
Hayes, Katie  
Lucente, Regina  
Slusher, Jay  
Tatum, Jonathan

Angalich, George  
Hopkins, Teresa  
Parker, Catherine  
Smith, Carly  
Theys, Lucas

Estes, Heather  
Jones, Kara  
Romich, Stephanie  
Snyder, John

Physical Therapist Assistant – Endorsement

Alfareh, Jebr  
Lewis, Kaveana  
Olorenshaw, Elizabeth  
Welsh, Wendy

Amis, Stephen  
Long, Michelle  
Taylor, Emily  
Xi, Sheila

Dixon, Carolyn  
Moran, Ciarra  
Tressler, Tamatha

Physical Therapist Reinstatement

Turner, Amy

Wallace, Rachael

Physical Therapist Assistant Reinstatement

Aluisia, Jeanne  
Eck, Pamela  
Hatfield, Jennifer  
McGinnis, Matthew  
Richards, Katie  
Wilke, Amanda

Bell, Yolanda  
Eckert, Scott  
Hollo, Suzanne  
Munson, David  
Tarver, Rosalyn

Dowler, Misty  
Gratkowski, Halle  
Marinelli, Melanie  
Prusak, Edward  
Testa, Deedra

Testing Accommodations Requests

**Action:** Chad Miller moved that the Section ratify, as submitted, the testing accommodation of additional time: time and a half and separate room for physical therapist assistant reinstatement file #5439784 based on the documentation provided. Lynn Busdeker seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Melanie Marinelli.

Chad Miller recommended that the Section grant the testing accommodation of additional time: time and a half for physical therapist assistant examination file #5438355 based on the documentation provided. **Action:** Lynn Busdeker moved that the Section approve the testing accommodation of additional time: time and a half for physical therapist assistant examination file #5438355 based on the documentation provided. Karen Holtgreffe seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Schanelle K. Griggs.

Chad Miller recommended that the Section grant the testing accommodation of additional time: 30 minutes for physical therapist assistant examination file #5424127 based on the documentation provided. **Action:** Lynn Busdeker moved that the Section approve the testing accommodation of additional time: 30 minutes for physical therapist assistant examination file #5424127 based on the documentation provided. Matthew Creed seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Joshua R. Ousley.

Chad Miller recommended that the Section grant the testing accommodation of additional time: time and a half and separate room for physical therapist assistant examination file #5440831 based on the documentation provided. **Action:** Lynn Busdeker moved that the Section approve the testing accommodation of additional time: time and a half and separate room for physical therapist assistant examination file #5440831 based on the documentation provided. Matthew Creed seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Nycole L. Brooks.

Chad Miller recommended that the Section grant the testing accommodation of additional time: 30 minutes and separate room for physical therapist assistant examination file #5442157 based on the documentation provided. **Action:** Karen Holtgreffe moved that the Section approve the testing accommodation of additional time: 30 minutes and separate room for physical therapist assistant examination file #5442157 based on the documentation provided. Lynn Busdeker seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Christopher Ruthemeyer.

Chad Miller recommended that the Section grant the testing accommodation of additional time: 30 minutes and separate room for physical therapist assistant examination file #5442928 based on the documentation provided. **Action:** Matthew Creed moved that the Section approve the testing accommodation of additional time: 30 minutes and separate room for physical therapist assistant examination file #5442928 based on the documentation provided. Lynn Busdeker seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Amu Goad.

Chad Miller recommended that the Section grant the testing accommodation of additional time: double time for physical therapist assistant examination file #5442957 based on the documentation provided. **Action:** Karen Holtgreffe moved that the Section approve the testing accommodation of additional time: double time for physical therapist assistant examination file #5442957 based on the documentation provided. Matthew Creed seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Mason Conde.

Chad Miller recommended that the Section grant the testing accommodation of additional time: time and a half for physical therapist examination file #5444994 based on the documentation provided. **Action:** Lynn Busdeker moved that the Section approve the testing accommodation of additional time: time and a half for physical therapist examination file #5444994 based on the documentation provided. Karen Holtgreffe seconded the motion. Chad Miller abstained from voting. The motion carried. The Section granted the testing accommodation request for Lauren Enns.

#### Continuing Education Liaison Report

Erin Hofmeyer had no formal report for the Section.

#### Assistant Attorney General's Report

Melissa Wilburn, AAG, gave a brief report regarding future guidance that the Attorney General's Office will provide to boards and commissions regarding potential impact from the Supreme Court's decision in FTC vs. North Carolina Dental Board.

#### Case Review Liaison Report

Karen Holtgreffe reported that the Enforcement Division closed four and opened nine new cases since the January 8, 2015, meeting. There are twenty-six cases currently open. There are fourteen disciplinary consent agreements and one adjudication order being monitored.

Karen Holtgreffe informed the Section that Phillip Wells, PTA, complied with all terms and conditions and was released from his disciplinary consent agreements.

### **Enforcement Actions**

Karen Holtgreffe recommended that the Section accept the consent agreement for case PT- LD-15-001 in lieu of going to a hearing. **Action:** Matthew Creed moved that the consent agreement for case PT- LD-15-001 be accepted in lieu of going to a hearing. Lynn Busdeker seconded the motion. Karen Holtgreffe and Chad Miller abstained from voting. Ronald Kleinman voted no, all other members present voted yes. The motion carried. The Section accepted the consent agreement for James Richard Blair II, PTA Examination Applicant.

Chad Miller recommended that the Section accept the consent agreement for case PT-FY14-014 in lieu of going to a hearing. **Action:** Lynn Busdeker moved that the consent agreement for case PT-FY14-014 be accepted in lieu of going to a hearing. James Lee seconded the motion. Karen Holtgreffe and Chad Miller abstained from voting. The motion carried. The Section accepted the consent agreement for Amy Brehm, PTA.

Chad Miller recommended that the Section accept the consent agreement for case PT-FY15-021 in lieu of going to a hearing. **Action:** James Lee moved that the consent agreement for case PT-FY15-021 be accepted in lieu of going to a hearing. Matthew Creed seconded the motion. Karen Holtgreffe and Chad Miller abstained from voting. Lynn Busdeker voted no, all other members present voted yes. The motion carried. The Section accepted the consent agreement for Brittany Overman, PT.

### **Correspondence**

- 1. Andrea Cornell, PT, DPT:** Dr. Cornell asked the Section if a physical therapist can treat a client if no one else is in the room. **Reply:** The Ohio Physical Therapy Practice Act is silent on this topic. However, best practice would be to have another person present in the clinic while you are treating a patient, especially if the patient is of the opposite gender. Third party payer policies may be more restrictive than the Ohio Physical Therapy Practice Act.
- 2. Christina Loy, PTA:** Ms. Loy asked the Section if physical therapists assistants can perform Epley maneuver. **Reply:** It is the position of the Ohio Physical Therapy Section that physical therapist assistants can perform the Epley maneuver as a treatment technique for a patient with a known vestibular diagnosis. The physical therapist assistant, however, is not permitted to evaluate a vestibular condition under the Ohio Physical Therapy Practice Act, since rule 4755-27-02 (B) of the Administrative Code clearly states that the physical therapist assistant cannot perform evaluations. Also, according to rule 4755-27-02 (E) of the Administrative Code, the physical therapist may assign treatment procedures beyond the scope of entry level physical therapist assistant practice in accordance with the physical therapist assistant's ability, provided that both the supervising physical therapist and the physical therapist assistant have documented training and demonstrated competency in the procedure. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person's name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS. "L" should not be used in front of "PT" or "PTA" since no one may use the "PT" or "PTA" credential in Ohio without a valid license.
- 3. Marcus Taylor:** Mr. Taylor asked the Section if non licensed physical therapy personnel can have ownership in a private practice physical therapy clinic. **Reply:** The provision of legal advice is outside the scope of the Physical Therapy Section Therefore, the Section recommends that you contact your legal counsel regarding your question.
- 4. Emily Bruskotter, PT:** Ms. Bruskotter asked the Section if physical therapists are required to notify the client's physician that the therapist is providing health, wellness, or prevention services. **Reply:** In response to your first question, informing the patient's physician within 5 business days of an evaluation taking place is part of the direct access law. Third party payer policies may be more restrictive than the Ohio Physical Therapy Practice Act. The therapist must follow the more restrictive policy in any patient situation. There is nothing in the Ohio Physical Therapy Practice Act that prohibits a physical therapist or physical therapist assistant from giving health and wellness lectures, demonstrations, or general information on the benefits of

different types of exercise provided the practitioner is knowledgeable in the content. Health screenings at public health fairs may also be performed, and specific treatment recommendations are not provided other than a recommendation to consult with health care providers. Fitness tests with results compared to norms, can be performed by laypeople, students, physical therapists, or physical therapist assistants. However, under current Ohio law, a physical therapy practitioner providing fitness or wellness services to individual clients or groups must follow regulations for physical therapy practice if the services are represented as physical therapy, if the provider is identified as a physical therapist or physical therapist assistant, or if he/she signs “PT” or “PTA” after his/her name. If any of these conditions exists, the physical therapist must perform an evaluation prior to providing services, must maintain documentation of care provided. If physical therapist assistants, other licensed personnel, or students are involved in providing fitness or wellness services as physical therapy, rules in the Ohio Administrative Code for delegation and supervision apply. If fitness or wellness programs or group exercises are not represented as physical therapy, they do not fall under the jurisdiction of the Physical Therapy Practice Act. While physical therapists or physical therapist assistants providing such services may include their educational degrees in published materials, they should not use the credentials “PT” or “PTA” and should not state that the programs are led by physical therapists or physical therapist assistants. The Physical Therapy Section recommends that the appropriate medical screenings are in place prior to exercise to ensure the safety of the participants, but the fitness/wellness records should be stored separately from physical therapy or medical records.

5. **Marcella Ragonese:** Ms. Ragonese asked the Section if physical therapist assistants can measure and document pulse ox reading during ambulation with or without the use of oxygen. **Reply:** There is nothing in the Physical Therapy Practice Act that prohibits a physical therapist or physical therapist assistant from taking pulse oximetry measures. Even though not part of the physical therapy plan of care, a measure of pulse ox may be performed as an administrative task by any healthcare professional. However, no procedure should be performed by a physical therapist or physical therapist assistant unless the practitioner demonstrates competence in that procedure. A physical therapist assistant is also unable to interpret the findings of the pulse oximetry. As with all procedures, the physical therapist and/or physical therapist assistant may want to check with the facility policies and procedures to determine if any form of physician order is required. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person’s name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS. “L” should not be used in front of “PT” or “PTA” since no one may use the “PT” or “PTA” credential in Ohio without a valid license.
6. **Dale Reckless:** Mr. Reckless asked the Section questions regarding supervision requirements for physical therapist assistants providing job coaching. **Reply:** In response to your questions regarding providing consultative services in Ohio, yes, the physical therapist and physical therapist assistant would be required to hold a valid Ohio license to provide these services. It is the position of the Physical Therapy Section that if it is called physical therapy, then all the laws and rules governing the practice of physical therapy apply. Division (A)(3) of section 4755.40 of the Revised Code states that the practice of physical therapy includes **providing consultative services**. Supervision for a physical therapist assistant does not require the supervising physical therapist to be on-site or on location. The supervising physical therapist must be available by telecommunication at all times and able to respond appropriately to the needs of the patient. If the provider is identified as a physical therapist or physical therapist assistant, or if he/she signs “PT” or “PTA” after his/her name, the physical therapist must perform an evaluation prior to providing services, must maintain documentation of care provided, and must notify the client’s primary physician if working without a physician referral. If physical therapist assistants, other licensed personnel, or students are involved in providing fitness, wellness, or injury prevention coaching services as physical therapy, rules in the Ohio Administrative Code for delegation and supervision apply. No part of these services may be delegated to unlicensed personnel.
7. **Ken Marshall, PT:** Mr. Marshall asked the Section if physical therapist can receive private pay if the client’s insurance covered has been exhausted. **Reply:** It is the position of the Ohio Physical Therapy Section that a facility/agency may establish policies on whether the physical therapist or physical therapist assistant may continue physical therapy services after the patient has exhausted his/her insurance benefits.

The Section recommends that you refer to Medicare or other payer policies for any specific requirements or policies in your setting for a patient or family to pay for therapy services by a physical therapist. However, pursuant to section 4755.47 (A)(5) of the Ohio Revised Code, all licensed physical therapists must follow the code of ethical conduct for physical therapists and physical therapist assistants established in rule 4755-27-05 of the Ohio Administrative Code. Paragraph (B)(5)(e) of this rule states that “Providing treatment interventions that are not warranted by the patient’s condition, or continuing treatment beyond the point of reasonable benefit to the patient” would be a “failure to adhere to minimal standards of practice, whether or not actual injury to a patient occurred.” The Physical Therapy Section recommends that the primary physical therapist evaluate whether self-pay, out-of-network, or maintenance services are of “reasonable benefit to the patient.” You may also contact the Ohio Chapter or Reimbursement Department of the American Physical Therapy Association for more information on self pay.

8. **Kristin Thomas, PT:** Ms. Thomas asked the Section if physical therapists can use acupressure as a therapeutic modality in physical therapy practice. **Reply:** There is nothing in the Physical Therapy Practice Act that prohibits a physical therapist from using acupressure as a treatment technique. As with any treatment technique, the therapist must have training and be able to demonstrate competency in the technique. In regards to the healing touch technique, it is the position of the Physical Therapy Section, that this technique does not meet the definition of physical therapy services. The Physical Therapy Section recommends that you should be able to provide a reasonable rationale, which includes safety and effectiveness for the selection of that procedure, when utilizing any new treatment technique.
9. **Laura Wolfrum, PTA:** Ms. Wolfrum asked the Section if physical therapist assistants can perform internal pelvic muscle treatment. **Reply:** It is the position of the Physical Therapy Section that internal pelvic treatments are evaluative in nature and require ongoing reassessment. This does not fall within the scope of practice of a physical therapist assistant.
10. **Dyani Stengel, PT:** Ms. Stengel asked the Section whether a prescription for biofreeze is required when used as part of the physical therapy plan of care and if physical therapists can write a prescription. **Reply:** In regards to your first question, the Ohio Physical Therapy Practice Act is silent on this topic. However, biofreeze is an over the counter topical analgesic and no prescription is needed by a patient or physical therapy provider to obtain biofreeze. Your medical facility and or insurance providers may be more restrictive regarding the requirements for the use biofreeze in the clinic setting and may require a physician’s order for the use of biofreeze. Physical Therapists cannot write prescriptions for medications. Biofreeze is an over the counter topical analgesic and does not require a formal prescription to obtain. However, if the medical center states an order needs to be in the chart to use this product, then the medical center can determine what providers are acceptable to write this order. If the medical center permits a physical therapist make an "order" for use of biofreeze in the chart, then this is acceptable as there is actually no formal prescription required to obtain/use biofreeze. However for medications that do require a formal prescription, physical therapists cannot write prescriptions for medications Physical therapists can only write prescriptions for items such as adaptive equipment, durable medical equipment (DME), and physical therapy treatment programs including exercise and the use of modalities. The Section also recommends that you refer to the Ohio State Board of Pharmacy for clarification on the appropriate use of non-prescription medications and how those provisions apply to the practice of physical therapy. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person’s name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS.
11. **Erin Shamblin, PT, DPT:** Dr. Shamblin asked the Section if biofreeze is consider a prescribed medication and asked if physical therapists can write orders to use biofreeze in physical therapy practice. **Reply:** In regards to your first question, the Ohio Physical Therapy Practice Act is silent on this topic. However, biofreeze is an over the counter topical analgesic and no prescription is needed by a patient or physical therapy provider to obtain biofreeze. Your medical facility and or insurance providers may be more restrictive regarding the requirements for the use biofreeze in the clinic setting and may require a physicians order for the use of biofreeze. Physical Therapists can not write prescriptions for medications. Biofreeze is an over the counter topical analgesic and does not require a formal prescription to obtain. However, if the medical center states an order needs to be in the chart to use this product, then the medical

center can determine what providers are acceptable to write this order. If the medical center permits a physical therapist make an "order" for use of biofreeze in the chart, then this is acceptable as there is actually no formal prescription required to obtain/use biofreeze. However for medications that do require a formal prescription, physical therapists cannot write prescriptions for medications Physical therapists can only write prescriptions for items such as adaptive equipment, durable medical equipment (DME), and physical therapy treatment programs including exercise and the use of modalities. The Section also recommends that you refer to the pharmacy laws governed by the Ohio State Board of Pharmacy for clarification on the appropriate use of non-prescription medications and how those provisions apply to the practice of physical therapy.

12. **Heather Jennings, PT, DPT:** Dr. Jennings asked the Section questions regarding the use of rehab aides patient scheduling. **Reply:** Rule 4755-27-01 of the Administrative Code defines unlicensed personnel as any person who is on the job trained and supports the delivery of physical therapy services. Rule 4755-27-03 of the Administrative Code describes the routine duties that assist in the delivery of physical therapy care and operations that may be assigned to unlicensed personnel. The rule on delegation to unlicensed personnel is intended to limit the involvement of unlicensed personnel in direct patient care to assisting the physical therapist or physical therapist assistant as “a second pair of hands on the same patient.” For example, the unlicensed aide may assist a physical therapist or physical therapist assistant in transferring a patient who requires the support of two people for a safe transfer, or the unlicensed aide may guard a patient while the therapist steps back to assess the patient’s gait pattern. It is NOT intended that unlicensed personnel provide a component of physical therapy treatment to patient A while the physical therapist or physical therapist assistant treats patient B or performs other activities, e.g. documentation. A physical therapist or physical therapist assistant may provide administrative oversight of an unlicensed aide who is providing restorative or maintenance care in a nursing home after the termination of a physical therapy plan of care. Third party payer policies and/or federal regulations may be more or less restrictive than the Ohio Physical Therapy Practice Act. In any situation, licensees should follow the more restrictive policies. Although Medicare regulations for skilled nursing Part A permit therapy aides to perform physical therapy services provided that a physical therapist provides “line of sight” supervision, that practice is illegal in Ohio. In Ohio, therapy aides (unlicensed personnel) are not permitted to perform physical therapy services, other than serving as the second pair of hands as described in the previous paragraph of this letter. In response to your second question regarding scheduling of patients, the Ohio Physical Therapy Practice Act is silent on this matter. The Physical Therapy Section does not regulate caseload levels or dictate scheduling format. However, the Section requires the physical therapist to ensure appropriate patient management based on the unique needs of the clients, taking into account the complexity of the patient population. The ultimate responsibility for care of the patient lies with the evaluating physical therapist, regardless of whether the therapist or physical therapist assistants provide follow-up treatment. In any given period of time, a physical therapist must not provide or supervise care for a higher number of patients than that for which skilled care by licensed practitioners can be delivered. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person’s name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, DPT, OCS.
13. **Matthew Tester, PTA:** Mr. Tester asked the Section if physical therapist assistants can complete the objective portion of the final discharge report. **Reply:** It is the position of the Physical Therapy Section that physical therapist assistants may gather and summarize objective information; however, they may not interpret this data. It is the responsibility of the physical therapist to interpret and make recommendations for the purpose of discharge development. If there is collaboration between the physical therapist and the physical therapist assistant, the collaboration must be reflected in the patient documentation, but only the physical therapist may document the discharge evaluation and recommendations in the discharge summary. Even if the discharge evaluation and recommendations for follow-up care are included in the initial evaluation, a discharge summary must still be completed to document final discharge date and disposition. The discharge summary may refer to the last treatment note for patient status. Rule 4755-27-03 (B)(5) of the Ohio Administrative Code states that physical therapist assistants are not qualified to perform the discharge evaluation and complete the final discharge summary. Discharge planning and the completion of the discharge evaluation are the responsibility of the supervising physical therapist and may be performed

and documented by the physical therapist in a reasonable timeframe prior to discharge. The physical therapist assistant may provide care per that discharge assessment and plan and may document objective information about that care, but the physical therapist must then complete the final discharge summary. The ultimate responsibility for care of the patient lies with the evaluating physical therapist. Relying solely on information gathered by the physical therapist assistant during treatment does not constitute a reassessment, and may not fulfill the physical therapist's obligation to provide the appropriate standard of care. Likewise, the physical therapist assistant has a legal obligation, in the overall care of the patient, to make sure the review and assessment is performed by the physical therapist to meet the same standard of care.

### **Joint Correspondence**

**JB1. Jennifer Bluck, PT:** Ms. Bluck asked the Occupational and Physical Therapy Sections questions regarding supervision requirements for occupational therapy assistants and physical therapist assistants. **Reply:** This letter is in response to your correspondence regarding supervision requirements for occupational therapy assistants and physical therapist assistants. Please be aware that the regulation of these professions is undertaken by two separate entities. In accordance with rule 4755-27-04 (C)(2) of the Administrative Code, supervision of the physical therapist assistant does not require that the supervising physical therapist be physically on-site. The supervising physical therapist must be available by telecommunication at all times and able to respond appropriately to the needs of the patient. Third party payer policies may be more or less restrictive than the Ohio Physical Therapy Practice Act. You should always follow the more restrictive requirements when they differ. In all practice settings, the performance of selected interventions by the physical therapist assistant must be consistent with safe and legal physical therapy practice. In addition, the following factors must be taken into account: Complexity and acuity of the patient's/client's needs; Proximity and accessibility to the physical therapist; Supervision available in the event of emergencies or critical events; Type of setting in which the service is provided. Pursuant to rule 4755-7-01 of the Administrative Code, the supervising occupational therapist must determine that the occupational therapy assistant possesses a current license to practice occupational therapy prior to allowing him or her to practice. The occupational therapy assistant is also responsible for making sure the supervising occupational therapist possesses a current license to practice occupational therapy prior to providing supervision of occupational therapy treatment. Supervision/collaboration 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 and collaboration with the occupational therapy assistant at all times. Supervision is an interactive and collaborative 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 evaluating and/or supervising occupational therapist of record. The evaluating and/or supervising occupational therapist of record 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. Collaboration between the occupational therapy assistant and the occupational therapist must be reflected in the patient documentation. However, third party payer policies, and/or facility policies may be more restrictive than the Ohio Occupational Therapy Practice Act.

**JB2. Katie Russell, PTA:** Ms. Russell asked the Occupational and Physical Therapy Sections questions regarding occupational and physical therapists releasing professional liability from a caseload. **Reply:** Pursuant to section 4755.47 (A)(5) of the Revised Code, all licensed physical therapists must follow the code of ethical conduct for physical therapists and physical therapist assistants established in rule 4755-27-05 of the Ohio Administrative Code. Paragraph (B)(5)(h) of this rule cites "Abandoning the patient by inappropriately terminating the patient practitioner relationship by the licensee" as a "failure to adhere to the minimal standards of acceptable prevailing practice." It is the position of the Physical Therapy Section that if for any reason, the evaluating physical therapist will no longer be available to provide and supervise the physical therapy services, the evaluating physical therapist must transfer the patient to another physical therapist. This includes situations where a physical therapist's sole responsibility is to evaluate a patient either due to temporary coverage or as terms of their employment. The evaluating physical therapist in this instance must complete and document the transfer of their responsibilities to another physical therapist to provide and supervise the physical therapy services for the patient. Termination of care does not include a

physical therapist taking regularly scheduled days off or job sharing. Each physical therapy practice should determine a system that will allow for this transfer of care in situations where a physical therapist is terminating the patient/therapist relationship. That transfer of care must be documented in the patient's medical record by identifying the new physical therapist by name or transferring to the physical therapist supervisor for reassignment. The physical therapist that has accepted the transfer of care is then responsible to supervise all aspects of the physical therapy program that are delegated to physical therapy personnel, including co-signing physical therapist assistant documentation. If the patient is not transferred to another physical therapist, the evaluating physical therapist is responsible for the overall care of the patient including the supervision of any physical therapy personnel providing services to that patient. For occupational therapists, the law is similar. In accordance with rule 4755-7-08 (C)(2) of the Ohio Administrative Code, a licensee shall transfer the care of the client, as appropriate, to another health care provider in either of the following events: (a) Elective termination of occupational therapy services by the client; or (b) Elective termination of the practitioner-client relationship by the licensee. If, for any reason, the evaluating occupational therapist will no longer be available to provide and supervise the occupational therapy care, the client 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 client and then delegate treatment to an occupational therapy assistant. The occupational therapist is terminating any further professional relationship with that client 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 client/therapist relationship. That transfer of care must be documented in the client'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 client is not transferred to another occupational therapist, the evaluating occupational therapist is responsible for the overall care of the client, including the supervision of any occupational therapy personnel providing services to that client.

**JB3. James Boylen, OTR/L:** Mr. Boylen asked the Occupational and Physical Therapy Sections questions regarding transferring occupational and physical therapy plan of care. **Reply:** Pursuant to section 4755.47 (A)(5) of the Revised Code, all licensed physical therapists must follow the code of ethical conduct for physical therapists and physical therapist assistants established in rule 4755-27-05 of the Ohio Administrative Code. Paragraph (B)(5)(h) of this rule cites "Abandoning the patient by inappropriately terminating the patient practitioner relationship by the licensee" as a "failure to adhere to the minimal standards of acceptable prevailing practice." It is the position of the Physical Therapy Section that if for any reason, the evaluating physical therapist will no longer be available to provide and supervise the physical therapy services, the evaluating physical therapist must transfer the patient to another physical therapist. This includes situations where a physical therapist's sole responsibility is to evaluate a patient either due to temporary coverage or as terms of their employment. The evaluating physical therapist in this instance must complete and document the transfer of their responsibilities to another physical therapist to provide and supervise the physical therapy services for the patient. Termination of care does not include a physical therapist taking regularly scheduled days off or job sharing. Each physical therapy practice should determine a system that will allow for this transfer of care in situations where a physical therapist is terminating the patient/therapist relationship. That transfer of care must be documented in the patient's medical record by identifying the new physical therapist by name or transferring to the physical therapist supervisor for reassignment. The physical therapist that has accepted the transfer of care is then responsible to supervise all aspects of the physical therapy program that are delegated to physical therapy personnel, including co-signing physical therapist assistant documentation. If the patient is not transferred to another physical therapist, the evaluating physical therapist is responsible for the overall care of the patient including the supervision of any physical therapy personnel providing services to that patient. 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 client/therapist relationship. That transfer of care must be documented in the client'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 client is not transferred to another occupational therapist, the evaluating occupational therapist is responsible for the overall care of the client, including the supervision of any occupational therapy personnel providing services to that client.

**JB4. Robin Pearce, OTA:** Ms. Pearce asked the Occupational and Physical Therapy Sections for clarification on when to discharge a client, if the client is reached maximum potential and the payor source wants to continue treatment. **Reply:** The physical therapist's professional judgement determines the patient's readiness for discharge. It is the position of the Physical Therapy Section that physical therapists have a legal and ethical obligation to make every effort to follow through with the plan of care established for the patients. Pursuant to section 4755.47 (A)(5) of the Revised Code, all licensed physical therapists must follow the code of ethical conduct for physical therapists and physical therapist assistants established in rule 4755-27-05 of the Administrative Code. Paragraph (B)(9) of rule 4755-7-08 of the Administrative Code states that an occupational therapy practitioner shall exercise sound judgment and act in a trustworthy manner in all aspects of occupational therapy practice. Regardless of practice setting, the occupational therapy practitioner shall maintain the ability to make independent judgments. A licensee shall strive to effect changes that benefit the client. Paragraph (C)(16) of this rule states that a licensee shall safeguard the public from underutilization or overutilization of occupational therapy services. You may also wish to review information about the *Jimmo v Sebelius* settlement agreement at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPPS/Downloads/Jimmo-FactSheet.pdf>. If, in his/her professional opinion, the occupational therapist does not expect the client to further benefit from continuing occupational therapy services, the occupational therapist must clearly document and communicate to the interdisciplinary team that the therapist disagrees with continuing occupational therapy services. If the manager, interdisciplinary team, and/or client/client's family decides to continue occupational therapy services after such communication, the occupational therapist may continue to provide services after the client is made aware that no further benefit is expected. In this situation, the occupational therapist would not be in violation of rule 4755-7-08 (C)(1)(b) of the Administrative Code.

**JB5. Sue Salamido:** Ms. Salamido asked the Occupational and Physical Therapy Sections if only licensed occupational and physical therapists can perform range of motion exercises on medically fragile students. **Reply:** Yes, you are correct that performing range of motion exercises on medically fragile students *may constitute physical therapy*. All the laws and rules governing the practice of physical therapy would apply. However, the activities that teachers and educational personnel complete during the school day are not physical therapy services and must not be represented as such. These activities may include range of motion if the supervising physical therapist feels the unlicensed individual has demonstrated competency to perform this activity. Rule 4755-27-03(C) of the Ohio Administrative Code identifies writing the plan of care as a responsibility that the physical therapist performs and that cannot be delegated to others. Physical therapists who work in a school setting must write a plan of care that is separate from the IEP indicating how services will be provided to support the goals and benchmarks that the IEP team has determined require physical therapy services for successful completion. Part of this plan of care may be to instruct the teacher and educational aides or attendants in activities to be completed on a daily basis much as a home program would be designed for the parents. In accordance with rule 4755-7-03 (D) of the Ohio Administrative Code, licensed occupational therapy practitioners may delegate non-treatment tasks to unlicensed personnel. Some examples of allowable delegation include department maintenance, transport of clients, and preparation of work area, assisting with client's personal needs during treatment, assisting in the construction of adaptive equipment and splints, and other clerical or administrative functions. (1) Unlicensed personnel may only perform specific tasks which are neither evaluative, task selective, nor recommending in nature. The occupational therapist, occupational therapy assistant, student occupational therapist, or student occupational therapy assistant may delegate such tasks only after ensuring that the unlicensed personnel has been appropriately trained for the performance of the tasks. As range of motion is not in the specified limited list above, it may be performed by unlicensed personnel after appropriate training.

**JB6. Rebecca Sparks, PT:** Ms. Sparks asked the Occupational and Physical Therapy Sections if occupational and physical therapy practitioners required to obtain a NPI number. **Reply:** It is the position of the Ohio Occupational Therapy Section that an occupational therapy practitioner is required to hold a valid, current license in the State of Ohio to serve any clients residing in Ohio. The Occupational Therapy Section does not have a requirement for licensees to obtain a National Provider Identifier. However, other agencies, accrediting bodies, and/or reimbursement agencies may have additional requirements and guidelines that need to be met for accreditation and/or reimbursement of occupational therapy services. A requirement to obtain an NPI would appear to fall into this category. A physical therapist is required to comply with governmental and payer policies in billing procedures. Your question regarding the use of NPI numbers relates to payer policies rather than to the Ohio Physical Therapy Practice Act. The Physical Therapy Section recommends that you consult with the payer. According to section 4755.56 (C) of the Ohio Revised Code; Each physical therapist licensed under this chapter who renders or supervises physical therapy, and each health care professional licensed in this state who renders services in accordance with section 4755.50 of the Revised Code designated as physical therapy, shall provide a patient, when the patient is responsible for submitting a claim to a governmental health care program or third-party payer, with the physical therapist's or health care professional's national provider identifier and a written explanation of the provisions of divisions (B)(1) and (D) of this section. You can obtain additional information about the NPI at:<http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/NationalProvIdentStand/index.html?redirect=/NationalProvIdentStand/>. You can submit an online application for the NPI at: <https://npes.cms.hhs.gov/NPPES/Welcome.do>. On another topic, the Physical Therapy Section is working to educate physical therapists and physical therapist assistants in the correct credentials to use in professional signatures. Since PT or PTA is the regulatory designation allowing practice, rule 4755-27-07 of the Administrative Code requires that only those letters should immediately follow the person's name. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS. "L" should not be used in front of "PT" or "PTA" since no one may use the "PT" or "PTA" credential in Ohio without a valid license.

### **Old Business**

#### **Retreat Planning**

The Section retreat will be held on April 8, 2015, in Atwell Hall at Ohio State University. The retreat will begin at 9:00am. The retreat topics will include: medication reconciliation, use of credentials when conducting health/wellness programs, offering incentives, signatures for online documentation, telehealth in physical therapy practice, and a review of the Section's disciplinary guidelines.

### **New Business**

#### **Notification to Teach Physical Therapy without an Ohio License**

The Executive Director created a form to track non-Ohio licensed physical therapists who are teaching in Ohio in accordance with section 4755.482 (B) and (C) of the Ohio Revised Code. Under that statute, a non-Ohio licensed physical therapist can teach for up to one year without an Ohio license. The Board will post the form on the website and notify all program directors of the form.

#### **Testing Accommodation Approvals for Retake Candidates**

Chad Miller recommend that the Section give the Licensure Liaison the authority to approve testing accommodation requests in-between Section meetings, provided that the testing accommodation requested is the same as the accommodation previously approved by the Section and the documentation is still valid. **Action:** Karen Holtgreffe moved that the Section give the Licensure Liaison the authority to approve testing accommodation requests in-between Section meetings, provided that the testing accommodation requested is the same as the accommodation previously approved by the Section and the documentation is still valid. Lynn Busdeker seconded the motion.

### **Open Forum**

Lynn Busdeker informed the Section that she was contact by an individual who wants to write a novel about physical therapy. Lynn Busdeker will forward her responses to the novelist's questions prior submitting her response.

**Ohio Physical Therapy Association (OPTA) Report**

Victoria Gresh reported that the OPTA's bill to allow physical therapists to make a diagnosis for physical therapy will be introduced to the House of Representatives. OPTA hopes that the Board supports the proposed legislation. Ms. Gresh further informed the Section that Karen Holtgreffe will be presenting at the OPTA Annual Conference. Ms. Gresh also informed the Section that OPTA's Advocacy Day will be held on April 9, 2015.

**Federation of State Boards for Physical Therapy (FSBPT) Report**

The Executive Director informed the Board that FSBPT will give a presentation regarding continuing competence at the July 2015 Section meeting.

**Items for Next Meeting**

- Rules Hearing
- Executive Director Evaluation

**Next Meeting Date**

The next regular meeting date of the Physical Therapy Section is scheduled for Thursday, May 7, 2015.

**Adjournment**

There being no objections, Ronald Kleinman adjourned the meeting at 12:00 pm.

Respectfully submitted,  
*Diane Moore*

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Ronald Kleinman, PT, Chair  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board, PT Section

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James Lee, PT, DPT, Secretary  
Ohio Occupational Therapy, Physical Therapy,  
and Athletic Trainers Board, PT Section

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

**JL:jmr:dm**