



Occupational Licensing Review

Board Questionnaire

Board Name Occupational Therapy, Physical Therapy, and Athletic Trainers Board

Point of Contact Missy Anthony, Executive Director

Describe the board's primary purpose, goals and objectives, and licenses issued.

The mission of the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers (OTPTAT) Board is to actively promote and protect the health of Ohioans through effective regulation of the professions of occupational therapy, physical therapy, athletic training, orthotics, prosthetics, and pedorthics.

To accomplish this mission, the Board has identified the following primary duties pursuant to Ohio Revised Code:

- Establishing and checking requirements for entry into the profession
- Adopting administrative rules
- Enforcing laws related to licensure
- Assuring continued competence of licensees

The OTPTAT Board issues the following licenses:

- Occupational Therapist (OT)
- Occupational Therapy Assistant (OTA)
- Physical Therapist (PT)
- Physical Therapist Assistant (PTA)
- Athletic Trainer (AT)
- Orthotist (LO)
- Prosthetist (LP)
- Prosthetist-Orthotist (LPO)
- Pedorthist (LPed)

Pursuant to Ohio Revised Code 4743.041, the board also issues temporary military licenses in all of these categories.

In addition to these licenses, the Board issues permission to conduct 3-D printing of open source prosthetic kits.

Describe the board's annual workload. How many staff are employed?

Currently, the OTPTAT Board has nine staff, including:

- Executive Director
- Office Professional
- Executive Assistant
- Three licensing professionals
- Enforcement Supervisor
- Investigator
- Paralegal

The staff of the Board is divided into two sections. The first is administration and licensure. An executive assistant is responsible for processing of fiscal and administrative duties, as well as supervision of the front desk and licensing staff. There is one position at the front desk who answers and redirects all incoming inquiries via phone, mail, and email. This position also processes service requests such as duplicate wall certificates and verification requests that come in. There are also three licensure staff who process applications all nine license types divided according to last name. This cross training and division of labor allows for adequate coverage when a person is out of the office. The other section of the Board is enforcement. The staff consists of an enforcement supervisor, an investigator, and a paralegal. Their work is supported legally by an assistant attorney general. All staff in the enforcement section carry a caseload, including audits for continuing education and the answering of general scope of practice inquiries. The Executive Director supervises all work, communicates with Board members, prepares for Board meetings, manages the office and budget, handles eLicense improvement requests, and many other tasks.

Currently, there are 36,731 active license holders. The Board fields daily inquiries from license holders and applicants regarding scope of practice questions, application status, complaints against license holders, and other regulatory matters. For fiscal year 2020, the Board conducted 329 investigations, most of which were related to continuing education audits.

How many new licenses does the board issue annually? How many renewed licenses are issued annually? How much does a new license cost? How much does a renewal cost?

In FY 2020, the Board issued 1,807 new licenses.

OT: 432

OTA: 218

PT: 602

PTA: 351

AT: 177

Orthotist: 8

Pedorthist: 2

Prosthetist: 5

Prosthetist-Orthotist: 11

Temporary Prosthetist-Orthotist: 1

A new license costs \$100.

All licenses are on a two-year renewal schedule that is spread out over the course of the biennium to ensure consistent revenue and workload. A renewal costs \$70. Typically, between 88%-95% of the licensees renew. The renewal deadlines are as follows:

OT: June 30 of odd numbered years

OTA: June 30 of even numbered years

PT: January 31 of even numbered years

PTA: January 31 of odd numbered years

AT: September 30 of even numbered years

OPP: January 31 odd numbered years

3-D printing: January 31 of even numbered years

In the past 5 years, has there been any consideration to lower the licensure cost?

Effective 2018, the legislature consolidated the orthotics, prosthetics, and pedorthics licenses within the OTPTAT Board after the elimination of the Orthotics, Prosthetics and Pedorthics (OPP) Board. The OTPTAT Board felt strongly that the fees for OPP licensees should have parity with the other OTPTAT licensees. This resulted in fee reductions, some of them significant such as the renewal fee decreasing from \$200 annually to \$70 biennially.

Fee Type	OTPTAT Board	Former OPP Board
Initial Application (endorsement or examination)	\$100	\$100
Reinstatement	\$100	\$100
Renewal	\$70 biennially	\$200 annually (was \$400 prior to FY 2018)
License Upgrade/Consolidation	\$50	\$50
License verification	\$15	\$25
Duplicate Wall Certificate	\$10	\$25
CE Application	\$25	\$50
Late fee	Not permitted	\$100

July 1, 2013 was the last change in licensing costs for the bulk of the licenses. At that time, the Board lowered the renewal cost from \$80 to \$70. This biennial fee has remained unchanged since that decrease eight years ago.

How much revenue is procured from the licensure fees? What does this revenue fund?

Nearly all of the Board's revenue is from licensure fees. This revenue is deposited in Fund 4K90 like most of the other occupational licensing boards. The revenue funds board operations, including payroll, DAS fees (such as IT and rent), state audit fees, eLicense Ohio operations, Board member travel, and other miscellaneous expenses, such as supplies.

Are there any federal regulations, or regulations required to be met outside of the existing licensure requirements that have to be complied with? Does federal law require the board to be renewed in some form?

None of the Board's occupations are licensed or regulated at the federal level. However, many payers, including Medicaid and Medicare, require licensure at the state level as a condition of provider participation. As healthcare providers, they must also abide by payer regulations, as well as other federal laws, such as HIPAA.

Does the board issue an examination prior to licensure? Does the board issues continuing education courses? If so, how often is continuing education necessary? If the examination or continuing education requirements are done outside the board then what determines the selection of an outside organization to host it?

Two types of examination are required:

1. A professional examination. The Board does not conduct this examination. It is performed at a national level by a professional entity.

OT/OTA: National Board of Certification of Occupational Therapy exam

PT/PTA: National Physical Therapy Exam

AT: Board of Certification of Athletic Trainers exam

LP/LO/LPO/LPed: American Board for Certification in Orthotics, Prosthetics, and Pedorthics

All of these exams are the nationally accepted test.

2. A jurisprudence exam that is focused on Ohio laws and rules.

The Board has an online exam that it has developed internally for OT/OTA/AT.

For PT/PTA, exams have been developed by the Federation of State Boards of Physical Therapy. This entity was selected due to its expertise in developing exams for physical therapy. There is no such exam for OPP.

Continuing Education:

OT and OTA: 20 hours are required each biennial renewal period. One hour must be in ethics, jurisprudence, or cultural competence.

PT: 24 hours are required each biennial renewal period. A Jurisprudence Assessment Module, worth two hours, is part of that requirement.

PTA: 12 hours are required each biennial renewal period. A Jurisprudence Assessment Module, worth two hours, is part of that requirement.

AT: 25 hours are required each biennial renewal period. One hour must be ethics.

Orthotist and Prosthetist: 25 hours are required each biennial renewal period.

Prosthetist-Orthotist: 35 hours are required each biennial renewal period.

Pedorthist: 18 hours are required each biennial renewal period.

How many other states regulate the occupation or occupations under the board's jurisdiction? Is a license required to engage in that occupation or those occupations in other states?

OT and OTA: All 50 states license

PT and PTA: All 50 states license

AT: 43 states license, 2 states certify, 4 states register, and 1 state (California) does not regulate athletic trainers at all.

Orthotics and Prosthetics: 15 states license, two states have certification requirements

Pedorthics: 11 states license, one state has certification requirements

Has the operation of the board inhibited economic growth, reduced efficiency, or increased the cost of government?

Regulation has a cost, undoubtedly. The cost of obtaining an education is the most significant, particularly when compared to the expense of the licensure fee, exam, background check fee, and any other miscellaneous costs for the Board application. For a medical profession these costs should be compared to the importance of public protection.

Are there any licenses that are no longer issued by the board?

No.

Is there anything that the board would like to see changed or implemented in regards to occupational licensing within the scope of this legislative review?

Not at this time.

Has the board recommended statutory changes to the general assembly that would benefit the public as opposed to the persons regulated by the board, if any, and have those recommendations and other policies been adopted and implemented?

Yes.

1. The Board requested an additional pathway for licensure in orthotics and prosthetics. When licensure initially began, practitioners with different training were grandfathered in for Ohio. But the grandfathering expired and other practitioners in other states who wanted to come to OHio had no way to meet Ohio's licensing standards. The Board sought, and the legislature passed, an alternate pathway to licensure according to unique and exceptional qualifications. There will be several people licensed under this pathway in the near future. This will benefit the public by increasing access to licensed professionals.

2. The Board supported the passage of the OT and PT licensure compact bills (Senate Bills 5 and 7). This will benefit the public by increasing access to licensed professionals.

3. The FY 22-23 budget as proposed includes a handful of language changes being sought by the Board to clean up several provisions of law that are no longer in use and are confusing to license holders and other items aimed at improving the disciplinary statute for the board. The outcome of these provisions is unknown at this time.

1. OTPTAT Board members are currently permitted by law to serve an additional sixty days after the expiration of their term on August 27. This is helpful in giving the Governor's office appropriate time to thoroughly vet the appointments to find well-qualified candidates. This amendment would simply extend the sixty days to ninety in order to cover the November Board meeting.

2. The statute governing occupational therapy references a limited permit and license escrow option which are no longer offered by the OTPTAT Board. This often causes confusion for our licensees. The limited permit was previously a way for people to start practicing prior to passing the national exam. The Board decided many years ago that allowing someone to practice prior to passage of the exam is a risk to the public and eliminated the permit. The Board recently eliminated the option to escrow a license because the steps to restoring the license were identical to those of reinstating an expired license. Eliminating this option reduced administrative confusion and streamlined the path for licensees. This amendment is being proposed to clean up the statute related to these options.

3. The statute for physical therapy requires, as a part of the license application process, a physical description and photograph. The Board has no need for these records, and this submission causes occasional delays in application processing, as the photos received are oftentimes unusable. The Board does not need to have to continue to store these photographs when they have little value to Board operations, so this submission is proposed for elimination.

4. The physical therapy statute also includes antiquated language requiring a minimum level of credits in certain academic categories. As physical therapy programs have evolved to the doctorate degree, the required academic categories have changed and no longer match what is in statute. The Board would like to replace this reference with a requirement that a person has graduated from a program accredited by an agency approved by the Board. This aligns Ohio's law with the Model Practice Act for physical therapy. A second change for physical therapist assistant education is also suggested.

5. The Board sometimes sees cases where a licensee is court involved for an offense for which the court has ordered intervention in lieu of a conviction. In such cases, an offense, sometimes of a felonious nature, has been committed, but the person is not required to report it to the Board, nor can the Board necessarily take action on the license as a result. Most often, it is the desire of the Board to mirror and support the intervention required by the Court and not to add additional requirements. Clarifying statute to allow the Board to take action due to a judicial finding of eligibility for intervention in lieu of conviction would enhance the Board's enforcement powers to support a court's findings. This amendment is based on Medical Board statute.

6. References to sexual conduct being the basis for disciplinary action varies between the OT, PT, AT, and OPP Sections. The Board recently had a case where enforcement was made more difficult because the PT statute only references sexual conduct, which was too narrow a definition for the incident that had occurred. This amendment proposes to cross reference the definitions for both sexual conduct and sexual contact across all parts of the statute to ensure the Board has sufficient authority for discipline for egregious offenses of a sexual nature.

7. In 2018, the OTPTAT Board took over regulation of orthotics, prosthetics, and pedorthics (OPP) after the former OPP Board was eliminated. Over the past two years, the Board has identified several weaknesses in the disciplinary statute governing these professions. This amendment proposes to align the OPP statute (ORC 4779) with the OTPTAT law (4755) in the following three ways:

a. Explicitly allows for investigations to be held confidential.

b. Allows the board to discipline a licensee for action taken by another state on a license and clarifies the actions the Board may take to include fines and corrective actions.

c. Allows for the cost of an administrative hearing to be paid by the licensee being sanctioned if there is a sanction.

Is the preservation of the board and the board's licenses necessary to protect the public's health, safety, or welfare?

Yes. All of the professions regulated by the OTPTAT Board can be hands-on professions who work with vulnerable populations, such as the elderly, school-aged kids, and people with disabilities. The Board is an important tool to shut down bad practitioners. Without an entity such as the Board, these individuals could bounce from job to job and continue to do harm unchecked.

All of these professions require specific education in order to develop the skills to practice, and it is the Board that checks to make sure such requirements are met. These are basic duties of the Board that the public general expects of its health care practitioners.

Could the public be protected or served in an alternate or less restrictive manner? If applicable, please identify any licenses or functions of the board that could be eliminated or consolidated.

The Board would not recommend any loosening of restrictions at this time.

Any additional notes or comments the board believes the committee should be aware of?

The OTPTAT Board is constantly seeking to reduce the barriers to practicing across state lines. The Board fully supported the Physical Therapy licensure compact (SB 5) and Occupational Therapy licensure compact (SB 7). Compacts are an important tool to allow a state to retain its own jurisdiction for practice in its state while streamlining processes and enhancing mobility across state lines.