President’s Message

As I begin my term as your President, I cannot tell you how excited I am to be working so closely with the Association, and how busy we are as we move forward with Direct Patient Access. There have been many debates over this issue throughout the years, but the fact is that direct patient access is clearly the right move to make for the citizens of Louisiana. Over the last few months, we have participated in a legislative resolution study, have met with numerous State Senators and Representatives, and have presented nearly 100 research articles and statistical fact sheets that reflect how direct patient access is safe, that it is cost effective, that less visits were used per incident with direct patient access, and that the earlier the treatment is started the faster the issues is resolved (less visits). With increasing medical insurance cost and the lack of adequate health care providers, the citizens of LA should have a choice in who they select as their health care provider. Direct patient access is currently allowed in 43 states, and Louisiana is one of the seven states with the most restricted access to care for patients. Our patients deserve better!

So what does this mean to every physical therapist? With removing the referral requirement, you may continue to practice the same way you have always practiced, performing detailed evaluations, treating what is appropriate, constantly reassessing your patients, and making referrals when it is necessary. This is what we do every day on the job: making sure our patients are safe, that they are progressing, making treatment modifications, co-treating with other professionals when needed, and if necessary referring the patient out to the appropriate care.

(continued on page 4)
2015 BOARD OF DIRECTORS

Officers

President
Joe Shine
(w) 985/653-9242
joe@performancept.com

Immediate Past President
Beth Ward
(c) 318/470-9427
bethwardpt@gmail.com

Vice President
Paul Hildreth
revdrpaul1@cox.et

Secretary
Jane Eason
JEason@lsuhsc.edu

Treasurer
Judith Halverson
(w) 504/371-9314
jlynee@rocketmail.com

Chief Delegate
David Qualls
(w) 337/527-0255
dqualls@quallscopt.com

Delegates
• Greg LeBlanc; greg@brptlake.com
• Jane Eason; JEason@lsuhsc.edu
• Paul Hildreth; revdrpaul1@cox.net
• Alternate: Gregg Jones; greggj@crossgates.com

PTA Caucus Representative
Victoria McDowell
225/936-6147
Victoria16579@aim.com

Government Affairs Chair
Cristina Faucheux
(w) 225/654-8208
cristina@moreaupt.com

Nominations Chair
Amelia Leonard
(w) 504/671-6239
aleona@dcc.edu

District Chairs
Alexandria
Eric Ingram
ericingrampt@me.com
318/518-8911

Baton Rouge
Danielle Morris
(h) 225/892-5198
daniellemorrispt@yahoo.com

Houma
VACANT

Lafayette
Jennifer Watson
(w) 337/781-3244
j_watson77@cox.net

Lake Charles
Marianne Daigle
med9546@cox.net
337/344-9865

Monroe
Jake McKenzie
jacobmckenzie@gmail.com
318/548-5034

New Orleans
Matt Powers
mpowerspt@gmail.com

North Shore
Jeffrey Cresson
jeffrey.cresson@gmail.com

Crystal Cook
crystal@rehabdynamicsllc.com

Shreveport
Julie Harris
(w) 318/813-2970
jdani1@lsuhsc.edu

Bayou Bulletin Publisher Information

The Bayou Bulletin is published six times a year by the LPTA. Copy and advertising inquiries should be directed to LPTA. Advertising rate sheets and deadlines for each issue are available upon request.

Newsletter Chairman, Claire Melebeck, DPT
Newsletter Editor, LPTA Executive Office
Louisiana Physical Therapy Association
8550 United Plaza Blvd., Suite 1001
Baton Rouge, LA 70809
P: (225) 922-4614 F: (225) 408-4422
Email the office at office@lpta.org or Claire at cmeleb1@gmail.com
www.lpta.org

LPTA MEMBERSHIP

Please continue to encourage your fellow PTs, PTAs and students to join or renew their APTA/LPTA membership!

“Each One Reach One!”

Active members
Current 775

Life Members
Current 33

Students
Current 292

PTAs
Current 111

Total
Current 1,211

If you are interested in “opting out” of receiving hard copies of the Bayou Bulletin and receiving your Bulletin in full color by email, please reply to the office (office@lpta.org) with the Subject line “Opting Out.” Make sure you include your name, member number and a contact number in case we need clarification. Join us in “Opting Out!”
UPCOMING EVENTS

2016

February 17-20, 2016
Combined Sections Meeting
Anaheim, CA

March 11-13, 2016
LPTA Spring Meeting
Hilton, Lafayette, LA

March 15, 2016
PT Legislative Day
(PT Day at the Capitol)
LA State Capitol Memorial Hall

April 3-5, 2016
Federal Advocacy Forum
Washington D.C.

June 8-11, 2016
NEXT Conference and Exposition
Nashville, TN

September 9-11, 2016
LPTA Fall Meeting
Baton Rouge, LA

September 17-18, 2016
APTA State Policy & Payment Forum
Pittsburgh, PA

California Dreaming: Ride the wave of excitement to Anaheim for the leading conference and career-building event of the year in physical therapy. CSM 2016 will bring together more than 10,000 professionals from around the nation.

- Stimulating Days
- Exceptional Programming
- Unlimited Networking
- Packed Exhibit Hall
- 10,000+ Attendees
- Disneyland & the Beach

NEXT is leading-edge event for physical therapy professionals with trend-setting programming, innovative content, and exclusive access to the profession’s forward thinkers.

Dave Pariser Memorial Scholarship Fund

To make an online contribution to the Scholarship fund, go to the Foundation website and at the top right hand side of the page, there is a purple box with the words “Donate Now”. Choose the amount of the donation and choose the designated fund, the Dave Pariser Memorial Scholarship Fund.

http://www.lsuhealthfoundation.org/

Or you can mail to the Dave Pariser Memorial Scholarship Fund:

The Foundation for the LSU Health Sciences Center
450A South Claiborne Avenue
New Orleans, LA 70112
Direct patient access does not change our scope of practice, but removes the barrier citizens of Louisiana have in seeking the care they choose to have.

The main opposition is patient safety. As reported by HPSO, the largest insurance carrier, there is no incidence of increase claims or cost. Not only are we safe, we are frequently screening our patients for medical problems on a regular basis, especially in home health settings and wound care. Physical therapist are often considered the “eyes and ears” of the medical team in many different settings. If the patient is not appropriate for physical therapy or beyond your specific skill level, then by virtue of our practice act, you would refer out to the most appropriate person.

A frequent response I hear is that “direct patient access will not affect me because I work in a hospital, nursing home, or a school system.” This could not be farther from the truth. How many times have we seen an order for one issue, but find we can work on other issues, such as balance and fall protection during the same treatment time as required Medicare. Physical therapists and physical therapist assistants are asked to provide pro-bono work to the under insured and poor of Louisiana, but this is not possible with our current restrictive guidelines. Remember, we treat a person, not a diagnosis, and we should be able to do this without an order. We are frequently asked by friends and family members for advice on what may be bothering them, and what may be the appropriate course of treatment. As a health care professional, we should be able to offer our professional opinion, give direction, and make recommendations without fear. Many physical therapists take for granted that the years of education and experience we have play a huge role in injury prevention and in rehabilitation of many citizens for return to ADL issues, which allows them to return to a productive and meaningful life. For those who do not feel comfortable treating under direct patient access do not have to, but therapists should have the option. There is no other profession like physical therapy, so stand up and be proud!

The biggest winners with direct patient access are the citizens of Louisiana, our patients, our friends and family. They should have the right to choose physical therapy as their choice of treatment professional. It is cost effective. So many people have acute conditions that do not get addressed due to long wait times to see a physician, higher specialty office visit cost, and unnecessary expensive test. Acute conditions become chronic when they are not addressed in a timely manner. Healthy citizens lead to a healthier and more financially productive society. We cannot do this alone. We need your help. Come aboard for the big win, and join the movement toward Direct Patient Access.

In closing, I have to thank Beth Ward, PT, DPT, our past president, who has lead us to this point in our journey, and who continues to work with us hand-in-hand. She is an inspiration to so many physical therapists and physical therapist assistants. I feel fortunate to be surrounded by several past LPTA presidents who have reached out to offer their support, and who work diligently behind the scenes. We have a great group of professional and innovative thinkers sitting on our Board, and in our governmental affairs group. Being part of the LPTA has helped me grow professionally, and continues to spark my excitement to be a Physical Therapist in Louisiana. I thank you all, and I look forward to working together as we move the profession forward. It is a great time to be a physical therapist and physical therapist assistant in Louisiana!

Respectfully submitted,
Joe Shine, PT, DPT, LPTA President
**Patient Access at the State Level**

**The Problem:** While state law generally allows patients to seek evaluation and treatment from a licensed physical therapist without a prescription or referral from a physician, patients are limited in their ability to do so in 7 states, including Louisiana, by arbitrary and unnecessary restrictions. These restrictions are typically in the form of time and visit limits, previous diagnosis requirements, limited patient populations, or requiring a referral for certain types of treatment. These restrictions do not recognize the professional training and expertise of the licensed physical therapist nor do they serve the needs of those patients who require physical therapy but whose care is unnecessarily interrupted by these restrictions.

**The Solution:** Amend current statutes at the state level to remove arbitrary limitations on direct access to physical therapy services.

**Rationale:** In the age of health care reform, state legislatures continue to seek solutions that will expand access to the health care services the citizens of their state need while also addressing the growth in health care costs. One of the most effective tools for cost control and increased access is easily attainable yet often overlooked and underutilized by the legislatures - that of direct access to the services of non-physician health care professionals.

Physical therapy is the case in point. Entry into the profession and practice of the profession are stringently regulated by all states, and as highly trained health care professionals, physical therapists have a proven track record of effectively treating millions of patients. Physical therapists are well-qualified, both through formal education and clinical training, to evaluate a patient’s condition, assess his or her physical therapy needs and, if appropriate, safely and effectively treat the patient. Physical therapists are also well-qualified to recognize when patients demonstrate conditions, signs and symptoms that should be evaluated by other health care professionals before therapy is instituted. Physical therapists recognize when it is appropriate to refer patients to these other health care professionals for consultation.

Forty three states have all recognized the safety and benefits of direct access to physical therapy by removing from their statutes, all or some of the referral requirements or provisions for a physical therapy evaluation and treatment. However, your state laws continue to include out-dated and unnecessary barriers to direct patient care by physical therapists, please consider the benefits of reform. By amending the physical therapy practice act in your state, you will be providing your constituents with an additional entry point into the traditional medical system, increased choice in the selection of a health care professional, access to less expensive and more timely care, and a simple, yet, extremely effective way to meet the goals of increased access and cost containment.

*For additional information on direct access, please contact LPTA’s Governmental Affairs Chair Cristina Faucheux at cristina@moreaupt.com.*
Current Direct Access in Louisiana

LA-2003: May perform physical therapy services without a prescription or referral under the following circumstances:

- To children with a diagnosed developmental disability pursuant to the patient’s plan of care.
- As part of a home health care agency pursuant to the patient’s plan of care.
- To a patient in a nursing home pursuant to the patient’s plan of care.
- Related to conditioning or to providing education or activities in a wellness setting for the purpose of injury prevention, reduction of stress, or promotion of fitness.
- To an individual for a previously diagnosed condition or conditions for which physical therapy services are appropriate after informing the health care provider rendering the diagnosis.
- The diagnosis shall have been made within the previous ninety days. The physical therapist shall provide the health care provider who rendered such diagnosis with a plan of care for physical therapy services within the first fifteen days of physical therapy intervention.

Message from LPTA Lobbyist

We will have very busy legislative calendar in 2016. Governor John Bel Edwards has announced that he will call a Special Legislative Session on February 14, 2016 to address the looming state budget shortfall. The Special Session will last three weeks and will be followed by the Regular Session of the Louisiana Legislature, beginning March 14, 2016. The Regular Session will be very active for the Louisiana Physical Therapy Association as we work to pass legislation to provide for patient access to physical therapy services. It is critical that our membership be engaged in the process and communicate with their local elected legislators during the Regular Session.

Stay tuned for updates through our Legislative Alert and Legislative Update emails. You will receive important and timely information that will help ensure our voices are heard by the legislators. Remember, when you see the Legislative Alert email, it means you need to act immediately. This will be your cue that something important is happening and your engagement is critical.

We will also be using a new platform to help you communicate with your legislators. It is called Voter Voice. You will receive information soon on this new communications platform. All you will have to do is click through the link and sign up. It's free and provide an effective and easy way to get messages to your elected officials.

David Tatman, The Tatman Group
P.O. Box 82531, Baton Rouge, LA 70884
3043 Old Forge Drive, Baton Rouge, LA 70809
Phone: (225) 767-7640 Fax: (225) 767-7648
District and Component News!

**PROPSED LPTA BYLAWS AMENDMENT**

The LPTA Bylaws Committee will propose the following bylaw amendment at the Spring Business meeting on March 12, 2016 in Lafayette. The LPTA Bylaws Committee moves to amend the Revised 2014 LPTA Bylaws by adding the following to Article IV. Membership, Section 2. Rights and Privileges of Members:

**B. Physical Therapist Assistant, Retired Physical Therapist Assistant and Life Physical Therapist Assistant shall have one (1) vote at the Chapter membership meetings and any authorized absentee voting.**

The new section would then read:

**SECTION 2. Rights and Privileges of Members**

**A. The rights and privileges of the Chapter's members shall be identical to those established in the Association bylaws.**

**B. Physical Therapist Assistant, Retired Physical Therapist Assistant and Life Physical Therapist Assistant shall have one (1) vote at the Chapter membership meetings and any authorized absentee voting.**

Contact Gail Pearce with further questions. e-mail: gmp5050@aol.com

(see page 10 for another proposed bylaws amendment)

**Message from LPTA Government Affairs Chairman**

Dear LPTA Member:

Grassroots involvement is vital to advancing the physical therapy profession in Louisiana. The LPTA Key Contact program has focused on pairing every state legislator with a physical therapist/physical therapist assistant/student. Your Legislator may not yet have a Key Contact assigned to them. Please join the team of volunteers dedicated to engaging with Legislators! This year is especially important that we have key contacts for every legislator as we move forward with legislation to improve patient access to our services.

Legislators have varying degrees of understanding of physical therapy. They need to learn from you. Our Key Contact program was developed so that when your senator or representative hears the words “physical therapy” they visualize you, your clinic, your patients, and your place of work. David Tatman, LPTA Lobbyist, and I will provide you with all the training and guidance necessary for successful advocacy.

Please consider joining the growing LPTA Key Contact program so that your state legislator can better understand and appreciate the value of physical therapy. Being a key contact will require minimal time per month, the main duties are agreeing to set up an initial face to face visit with the legislator and calling their office on important issues. Contact Cristina Faucheux, (cristina@moreaupt.com) with any questions or to sign up as a Key Contact.

Thank you for your interest in advancing the LPTA Advocacy Agenda!

Cristina Faucheux, PT, COMT
### KEY Contacts Still Needed!!

#### Senators

<table>
<thead>
<tr>
<th>District</th>
<th>Senator</th>
<th>LPTA District</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sharon Hewitt (new)</td>
<td>Houma</td>
</tr>
<tr>
<td>8</td>
<td>John A. Alario, Jr.</td>
<td>Houma</td>
</tr>
<tr>
<td>20</td>
<td>Norbert N. &quot;Norby&quot; Chabert</td>
<td>Houma</td>
</tr>
<tr>
<td>34</td>
<td>Francis Thompson</td>
<td>Monroe</td>
</tr>
<tr>
<td>3</td>
<td>Jean-Paul J. Morrell</td>
<td>New Orleans</td>
</tr>
<tr>
<td>4</td>
<td>Wesley Bishop (new)</td>
<td>New Orleans</td>
</tr>
<tr>
<td>7</td>
<td>Troy Carter (new)</td>
<td>New Orleans</td>
</tr>
</tbody>
</table>

#### Representatives

<table>
<thead>
<tr>
<th>District</th>
<th>Representative</th>
<th>LPTA District</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>Ronnie Edwards (new)</td>
<td>Baton Rouge</td>
</tr>
<tr>
<td>66</td>
<td>Rick Edmonds (new)</td>
<td>Baton Rouge</td>
</tr>
<tr>
<td>67</td>
<td>Patricia Haynes Smith</td>
<td>Baton Rouge</td>
</tr>
<tr>
<td>95</td>
<td>Sherman Q. Mack</td>
<td>Baton Rouge</td>
</tr>
<tr>
<td>101</td>
<td>Gary Carter (new)</td>
<td>Baton Rouge</td>
</tr>
<tr>
<td>51</td>
<td>Beryl Amedee (new)</td>
<td>Houma</td>
</tr>
<tr>
<td>52</td>
<td>Gordon Dove</td>
<td>Houma</td>
</tr>
<tr>
<td>53</td>
<td>Tanner Magee (new)</td>
<td>Houma</td>
</tr>
<tr>
<td>54</td>
<td>Jerry Gisclair</td>
<td>Houma</td>
</tr>
<tr>
<td>55</td>
<td>Jerome Richard</td>
<td>Houma</td>
</tr>
<tr>
<td>58</td>
<td>Edward J. Price</td>
<td>Houma</td>
</tr>
<tr>
<td>84</td>
<td>Patrick Connick</td>
<td>Houma</td>
</tr>
<tr>
<td>36</td>
<td>Mark Abraham (new)</td>
<td>Lake Charles</td>
</tr>
<tr>
<td>16</td>
<td>Katrina R. Jackson</td>
<td>Monroe</td>
</tr>
<tr>
<td>17</td>
<td>Marcus L. Hunter</td>
<td>Monroe</td>
</tr>
<tr>
<td>19</td>
<td>Charles R. Chaney</td>
<td>Monroe</td>
</tr>
<tr>
<td>20</td>
<td>Steve E. Pylant</td>
<td>Monroe</td>
</tr>
<tr>
<td>21</td>
<td>John F. &quot;Andy&quot; Anderson</td>
<td>Monroe</td>
</tr>
<tr>
<td>80</td>
<td>Joseph P. Lopinto</td>
<td>New Orleans</td>
</tr>
<tr>
<td>85</td>
<td>Bryan Adams</td>
<td>New Orleans</td>
</tr>
<tr>
<td>87</td>
<td>Rodney Lyons</td>
<td>New Orleans</td>
</tr>
<tr>
<td>93</td>
<td>Helena Moreno</td>
<td>New Orleans</td>
</tr>
<tr>
<td>97</td>
<td>Joeseph Bouie</td>
<td>New Orleans</td>
</tr>
<tr>
<td>99</td>
<td>Jimmy Harris (new)</td>
<td>New Orleans</td>
</tr>
<tr>
<td>74</td>
<td>Scott M. Simon</td>
<td>North Shore</td>
</tr>
<tr>
<td>75</td>
<td>Malinda White (new)</td>
<td>North Shore</td>
</tr>
<tr>
<td>89</td>
<td>Reid Falconer (new)</td>
<td>North Shore</td>
</tr>
<tr>
<td>90</td>
<td>Gregory Cromer</td>
<td>North Shore</td>
</tr>
<tr>
<td>11</td>
<td>Patrick Jefferson</td>
<td>Shreveport</td>
</tr>
<tr>
<td>13</td>
<td>Jack McFarland (new)</td>
<td>Shreveport</td>
</tr>
<tr>
<td>23</td>
<td>Kenny R. Cox</td>
<td>Shreveport</td>
</tr>
</tbody>
</table>

### Download APTA Action App!

The App provides supporters with tools and information to educate and inform members of Congress, healthcare providers, and consumers about the physical therapy profession. The application enables users to take action from a smartphone, providing access to:

- A schedule of upcoming Congressional and APTA events; A list of important talking points for legislative issues;
- Built-in Take Action Center for voicing your support on important legislation before the US Congress; Live-sharing of multi-media on social media networks; Live Twitter updates; A variety of advocacy videos; A Congressional directory; The ability to make PAC donation from your mobile device
- NEW is access to Louisiana State issues; Talking points for Patient Access; A method of sending out information as to when our Patient Access Bill will be moving through the Legislative Process.

**Search "APTA Action" in your Apple or Google Play app store to download the app today!**
Direct Access in Practice

In 2009, APTA conducted a survey of physical therapist members in select chapters to determine (1) the extent to which direct access is being used and promoted by physical therapists, (2) the variation in its use in different practice settings and geographical locations, and (3) the reasons for the variation. In addition, respondents were asked to provide input on strategies that are being used to successfully implement direct access.

The survey results provide interesting data which will be useful in determining the types of resources and activities to help increase the use of direct access in physical therapist practice. This Executive Summary (.pdf) (members only) provides a condensed version of the survey results along with recommendations. For more detailed survey results, contact practice-dept@apta.org.

APTA developed the following resources to promote the use of direct access in physical therapist practice. These resources are for physical therapists in states in which some level of direct access is allowed by state law. Physical therapists should be able to use these resources in clinical settings and with patient populations where direct access is not restricted by state or federal regulations, employer restrictions, payer, or compliance requirements.

**Direct Access in Hospital-Based Settings**
Allowing patients to have direct access to physical therapist services in hospital-based outpatient settings has become a priority for many physical therapists. The process for implementing this change is specific to each setting but often depends upon the relationships between the physical therapist and both the hospital administration and the medical community.

Additionally, there are specific Medicare regulations that dictate how order for rehabilitation must be handled in hospitals that participate in the Medicare program. These regulations apply to all patients receiving rehabilitation services in Medicare certified hospitals, including non-Medicare beneficiaries. A resource is available which provides an explanation of this regulation and suggestions for compliance.

**Direct Access and Medicare**
Medicare beneficiaries are able to go directly to physical therapists (PT) without a referral or a visit to a physician.

**Payment for Physical Therapist Services with Direct Access**
Managed care contracts and insurance companies often have no requirements for a referral for physical therapy. Check your contract or payer policy to be sure. Many insurance companies now recognize the cost savings and improved access to care that come with direct access and do not require a referral for payment. Don't assume that there is a referral requirement unless you know for sure. If you have questions about payment for physical therapist services provided without referral, or if you are able to share information about payment for services in your region or clinical setting, contactcarmenelliott@apta.org.

**Marketing Resources for Direct Access**
As a part of the new branding initiative, APTA has developed public relations and marketing resources to help physical therapists market directly to consumers and other potential sources of patient/client referrals, including patient handouts. Be sure to download the "Choosing Your Physical Therapist" handout to leave in your waiting room.

One of the goals of APTA's "Move Forward" branding initiative is to promote the profession of physical therapy to the outside community with important messages regarding the role of the physical therapist in improving movement. For more information on the branding campaign, visit BrandBeat.
Second set of Amendments to LPTA Bylaws

The current version of the LPTA Bylaws has several confusing sections as a result of our revision done in 2015. The APTA Parliamentarian has recommended the following changes. These changes must be voted on by the membership at a duly called meeting provided a quorum is present:

1. Move that Article VIII COMMITTEES, Section 4. Nominating Committee. Duties and responsibilities 1.c. be amended by striking out “in uneven numbered years” and insert “every three years” after the word elected so that it will read:

   C. Chief Delegate in uneven numbered years to be elected (every 3 years) for a term of (3) years.

   Proviso: This will go into effect during the 2017 Fall Election

2. Move that Article VIII COMMITTEES, Section 4. Nominating Committee, Duties and Responsibilities 1.d. be amended by striking out “one-half” and insert “one-third” so that it will read:

   d) Chapter Delegates annually. Each year the membership shall vote for one-half (one-third) the number of delegates allotted. Each term shall be for three (3) years. Proviso: This will go into effect at the Fall 2016 Election

3. Move that Article VIII Committees, Section 4. Nominating Committee, Duties and Responsibilities 1.e. be amended by striking out “in uneven numbered years” and insert “every third year” after the word elected so that it would read:

   e) Representative to the Physical Therapist Assistant Caucus in uneven numbered years, to be elected (every third year) for a term of three (3) years. Proviso: This will go into effect at the Fall 2017 Meeting.

Please contact Gail Pearce (gmp5050@aol.com) with any questions or concerns.

Direct Access In Hospital-Based Outpatient Settings

Medicare has specific regulations that may impact physical therapists who wish to provide direct access services in hospital-based outpatient settings. These requirements are part of Medicare’s Conditions of Participation (CoP) which describe the standards of patient care that a hospital must comply with in order for a hospital to participate in the Medicare program.

These requirements are separate and distinct from the requirements for payment that are familiar to most physical therapists that require that the physician sign the physical therapist’s Plan of Care for each patient. It is important to note that Medicare CoPs apply not only to services provided to Medicare beneficiaries but to services provided to ALL patients (Medicare and non-Medicare patients) in both inpatient and outpatient settings.

In 2012, CMS issued a policy stating that outpatient services in hospitals may be ordered (and patients may be referred for hospital outpatient services) by a practitioner who is:

- Responsible for the care of the patient;
- Licensed in, or holds a license recognized in the jurisdiction where he/she sees the patient;
- Acting within his/her scope of practice under State law; and
- Authorized by the medical staff to order the applicable outpatient services under a written hospital policy that is approved by the governing body. This includes both practitioners who are on the hospital medical staff and who hold medical staff privileges that include ordering the services, as well as other practitioners who are not on the hospital medical staff, but who satisfy the hospital’s policies for ordering applicable outpatient services and for referring patients for hospital outpatient services.

In April 2015, CMS issued Transmittal 137 that provides more specificity in the Conditions of Participation Interpretive Guidelines with regard to types of providers who may order outpatient rehabilitation services in the hospital setting. Essentially, the guidance specifies that in addition to physicians, nurse practitioners, physician assistants, and clinical nurse specialists may order rehabilitation services in the outpatient hospital setting in accordance with hospital policy and state scope of practice. The guidance also includes a list of providers, such as clinical social workers and psychologists, who would not generally be qualified to order rehabilitation services. Physical therapists are not expressly named in the interpretive guidance.

(continued on page 12)
Senate Concurrent Resolution No. 19  
Report of Findings and Recommendations to the Louisiana Legislature

Executive Summary Senate Concurrent Resolution 19 (SCR 19) by Senator Mills, enacted during the 2015 regular session of the Louisiana Legislature, created the Physical Therapy Patient Access Review Committee for the purpose of investigating “the potential benefits of removing the current restrictions tied to patient access to a physical therapist’s services by allowing direct patient access to a physical therapist’s services without restrictions and report its findings and make recommendations to the legislature.”

SCR 19 specified twenty-five stakeholder members of the committee. The committee conducted a total of five meetings in the late summer and fall of 2015 the last of which was held on November 18, 2015. All meetings were scheduled to last approximately four hours and each member of the committee was offered an open opportunity to present information, evidence, and arguments relevant to the issue before the committee.

The presentations offered by committee members produced a set of ten arguments in support of direct patient access to a physical therapist’s services without restrictions and a set of three arguments against direct patient access to a physical therapist’s services without restrictions.

The information, evidence, and arguments presented by individual committee members were discussed and debated by the committee but committee votes were not taken to either accept or reject any of the arguments presented. Lists of evidence and arguments offered for discussion by the committee members is provided in the body of this report.

Committee Recommendation

After completion of all committee presentations and discussions a single recommendation to the Louisiana Legislature was offered (by motion) and approved by the committee:

“There is a clear and obvious benefit to ‘remove the current restrictions tied to patient access to a physical therapist's services by allowing direct patient access to a physical therapist's services without restrictions’ as stated on page 2, paragraph 4 of SCR No 19 with ‘restriction’ defined as the need for referral and prescription to access physical therapy.”

(continued on page 12)
Patient Access in Louisiana

The purpose of this legislation is about giving patients the access to choose the provider of their choice. Talking points from the SCR 19:

- 2015 Legislation authored by Senator Freddie Mills SCR 19 mandated a study to investigate the potential benefits of removing the current restrictions tied to patient access. The committee consisted of 25 members.
- The committee passed a motion (with only 3 opposing votes) that there is a clear and obvious benefit to ‘remove the current restrictions tied to patient access to a physical therapist’s services by allowing direct patient access to a physical therapist’s services without restrictions.’
- Physical Therapists are allowed to evaluate a patient without a referral, however, we must have a referral to initiate treatment. 43 states, DC and the Virgin Islands have Direct Access.
  - 18 states have unrestricted patient access
  - 27 states have direct access with treatment provisions
  - 7 states (including Louisiana) have restricted patient access
- Physical therapists in the United States Military successfully practice in a direct patient access model.
- All licensed physical therapists (including the physical therapists trained in Louisiana, those in the military and those that practice in a current direct patient access states) are educated under the same model of a Commission on Accreditation in Physical Therapy Education (CAPTE) accredited program at a doctorate level and pass a national licensure exam.
- HPSO, the largest professional liability carrier for physical therapists in the United States has concluded there is no increased risk to the public when patients access physical therapy without a referral. Insurance premiums are NOT different based on the level of access.
- Removing the unnecessary barrier for patients to access physical therapy services is NOT an expansion of scope in practice for physical therapists. This simply addresses how care is accessed.
- In Louisiana each licensed physical therapist is obligated to the law and rules of the Louisiana Physical Therapy Practice Act AND rule 303c at all times: “if during evaluation, reassessment, or screening, the PT finds that treatment is outside the scope of his knowledge, experience, or expertise, the PT shall notify the patient or client and provide a referral to an appropriate healthcare practitioner”.
- Evidence clearly demonstrates unrestricted patient access is safe.
- Unrestricted patient access is cost effective and NOT a mandate for reimbursement or payment from private insurance.

(continued from Hospital-Based on bottom of page 10)

It is important to point out that several states have additional laws that may impact the delivery of services in hospital-based settings. It is necessary for physical therapists to be aware of laws and regulations that govern not only the practice of physical therapy but also the delivery of services in hospitals. State departments of health often have laws and regulations that govern hospital practice. Compliance departments in hospitals may be helpful during this process. View list of Practice Acts by State.

APTA is reviewing the implications of this change in the Hospital Conditions of Participation Interpretive Guidelines for Hospital Outpatient services to assess the impact on physical therapy services. If you have any questions regarding APTA’s involvement on this issue, please contact advocacy@apta.org.
Report on HCR 170 Committee

Representative Patricia Smith successfully authored House Concurrent Resolution 170 during the 2015 Legislative session, which created the Louisiana Statewide Healthcare Delivery System Study task force to investigate the status of access to healthcare in Louisiana and to make recommendations regarding the healthcare system. The Louisiana Physical Therapy Association secured a seat on that committee, and appointed me as their representative. The premise of the committee’s work is that, although there have been reports and studies produced in the state with regard to individual entities studying access to care, there has not been a comprehensive study that addresses multiple access to health care.

The task force is composed of twenty-four representatives of healthcare constituencies. These include, but are not limited to, representatives of primary care providers and educators of primary care, allied health and health policy providers; insurers; medical, nursing and allied health professional organizations; advocacy groups, public members; and, mental and behavioral health providers. We are responsible for submitting two written reports of findings and recommendations concerning Louisiana’s system of healthcare delivery to the legislature; the first of which is due on or before February 1, 2016. The committee’s second and final report, comprising an evaluation of Louisiana’s system of healthcare delivery and recommendations for improving the state’s healthcare system.

The task force initially met on Friday, July 31, 2015, and subsequently, September 11, November 13, and January 8. The Committee identified six components of the healthcare system: leadership/governance, health financing, health information systems, human resources/workforce, essential medical technologies and service delivery. It became readily apparent that the scope of the content was significantly greater than the resources and time available to meet the charge. There is no central repository for these data, and the committee recognized that the initial action is to identify what we currently know about healthcare in Louisiana. Three health services system core indicators were identified as priority indicators, and sub-committees were formed. These include: health workforce, health service delivery and health systems financing. I am assigned to the workforce sub-committee. Committee members were asked to provide any studies or reports from our agencies that contain data related Louisiana healthcare. These data are made available on Google docs, and significant individual data are presented at our meetings. I was able to provide a lot of data from the APTA related to several of the topics.

The workforce committee held a conference call meeting on October 15, 2015, where focus areas for the sub-committee were identified:

1.) Pipeline for workforce; 2.) Scope of practice; 3.) Funding; 4.) Longevity/retention; 5.) Rural workforce; 6.) Labor shortage areas; 7.) Workforce demand/forecast

The sub-committee’s plan of action includes:

• Review of existing data available on workforce; • Identify and relevant data that is missing which the subcommittee needs to access; • Identify data that would also be applicable to another subcommittee; • Collect information from HCR 170 members about current or ongoing efforts that are related to this subcommittee’s tasks; • Review existing performance measures for workforce; • Recommend key systems performance measures, whether or not they are currently being used

At the meeting on January 8, 2016, Representative Smith stated that she will ask for an extension, and she feels confident that it will be granted. The sub-committees were charged to meet before the next Task Force meeting to report on the progress made. That meeting has not yet been scheduled.

Respectfully submitted by Kitty Krieg
**District and Component News!**

**Alicia Pruitt, Membership Chair**

Don’t forget our membership drive! 65 new members in the 65th year! Please encourage a colleague to join! Joining before the spring meeting will knock $65 off of the registration! Please feel free to contact the LPTA office or myself if you have any questions.

Currently, we have 1,211 members in the LPTA! Although our membership has declined over the past couple of months, our membership is larger than this time last year. The holidays are a busy and expensive season! If you (or someone you know) decided to let your membership lapse, then please reconsider. Now is the time to be a PT/PTA in the state of Louisiana! We cannot make the difference necessary to transform the lives of our patients, our profession, or ourselves unless we come together! We need all hands on deck! Get to work! If we all get one colleague to join, imagine the amount of work we could accomplish! May your new year be filled with success, blessings, and joy!

**Jenn Watson, Lafayette District Chair**

The Lafayette District had another successful PT Pub Night in Crowley at Fezzo’s on January 26th. There was rich discussion on patient access and its affect on therapists in the school system to those in private practice. We’re excited about the connections being made through this avenue. We will be having our next Pub Night in March with more details to follow.

The next traveling jurisprudence course in Lafayette will be held in conjunction with the LPTA Spring Meeting on Sunday, March 13th.

If you have any questions about activities happening in the Lafayette District or would like to make something happen, please contact me at j_watson77@cox.net.

**Danielle Morris, Baton Rouge District Chair**

Our lobbyist, David Tatman, joined the January Baton Rouge District meeting to help members prepare for upcoming legislative efforts designed to gain improved patient access to physical therapy. Thanks to everyone who participated, and please continue to spread the word. Our district looks forward to upcoming events in Baton Rouge as the legislative session approaches. Join the momentum!! See you at the capitol!

**Matthew Powers, New Orleans District Chair**

The New Orleans District Meeting and PT Pub Night on January 28th was a huge success. Updates were given on the current legislative push for direct patient access. Many of our New Orleans PTs and students have volunteered to be key contacts and to meet with local legislatures. Our goal is to have all of our key contacts matched and meetings with legislatures completed before the special session begins. Thanks to the support from our members this goal is very much attainable. We look forward to being active in advocating for our profession over the next month leading up to the regular legislative session.
LSUHSC Department of Physical Therapy & Embody Physiotherapy & Wellness, LLC

Presents

Lower Quarter Contributions to Lumbopelvic Pain

Susan C. Clinton PT DScPT OCS WCS FAAOMPT

Date/Time: Saturday, April 16, 2016 – 8am-4:30pm
6.5 CEUs have been applied for LA PT license requirements

This course is offered for the benefit of the “Dave Pariser Memorial Scholarship Fund”
Join us - attend this course - send in a donation – sponsor a student
Support our future student leaders!

Place: LSUHSC Department of Physical Therapy
1900 Gravier St., 7th Floor New Orleans, LA 70112
Phone: 504-568-4288
Cost: $225.00 for licensed clinicians and $100.00 for students

Registration Form: Fill out and return with your check to the above address. Checks should be made to the “Foundation for the LSU Health Sciences Center”. On the memo line, indicate the “Dave Pariser Memorial Scholarship Fund”.

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
<tr>
<td>Email:</td>
</tr>
<tr>
<td>Number of registrants and total amount:</td>
</tr>
<tr>
<td>Donation amount:</td>
</tr>
</tbody>
</table>
Past President’s Message

To the Members of LPTA:

Over the past four plus years, I have thoroughly enjoyed serving as your President. I have learned so very much across the spectrum of service to LPTA/APTA. Making connections with people throughout the state and the nation serving our profession has enriched my life.

Because of my diagnosis of Stage IV lung cancer back in July, my future is uncertain. I have completed 6 rounds of induction chemo while continuing to work and serve, but soon will begin radiation treatments in Houston, and then maintenance chemo which may leave me unable to travel and serve at the level to which I have become accustomed. I know LPTA needs a strong leader at this momentous time in moving the profession forward, so I have made the very difficult decision to step aside to a consultative role as Past President. The full Board approved the vacancy effective January 3, 2016, and voted to approve Joe Shine to finish out my term.

You are all in very capable hands with Joe Shine at the helm, and he has already stepped up to begin his service as your new President. I look forward to assisting him and the Board in any way I can.

Below are some of the initiatives that LPTA brought forward during my term in office, and I want you all to keep in mind that none of this could have occurred without the amazing support and cooperation of LPTA’s Board of Directors, strong association management with Bland O’Connor and his assistants, and the support of staff at APTA:

• Move toward improved consumer access to physical therapist services including improved network of key contacts, fundraising, informational videos, planned legislation for 2016
• Successfully defended the profession from encroaching legislation from massage therapists and athletic trainers
• Added a physical therapist to the Workers Comp Advisory Council
• Membership promotional video
• Membership surveys
• Re-worked strategic plan with new mission and vision
• Bylaws revision modifying quorum and adding a year to delegate terms
• Website upgrade with career center
• Gave full measure to the Foundation’s Center of Excellence (CoHSTAR)
• Established a working Ethics Committee
• Celebrated Sharon Dunn’s rise to the top and LPTA’s 65th anniversary
• Improved relations with licensure board
• Established Dave Pariser Student Service Award
• Budgeted to send a student each year to the Federal Advocacy Forum
• Upcoming vote to allow PTAs a full vote at the Chapter level
• Record attendance at Spring and Fall Meetings
• Improved communication with FB/Twitter/upgrade to the Bayou Bulletin

The most impressive thing I have learned over the course of my Presidency is that the volunteer leaders and staff at APTA and LPTA work very hard for all physical therapists, physical therapist assistants, and students on every aspect of care we provide to our patients. We serve because we love transforming society one patient at a time as we optimize their movement to improve their quality of life.

You as members make a difference. Thank you for your membership. Thank you for allowing me to serve as your President over these past four years. I appreciate your thoughts and prayers as I navigate these uncharted waters fighting this unexpected cancer. My goal is for you to stay informed and stay involved so that the LPTA continues to grow. Best wishes to you all in 2016!

It’s a great time to be a PT or PTA in the state of Louisiana!

Respectfully submitted by: Beth Ward, PT, DPT
Help the NC Physical Therapy Association Defend Patients’ Access to Care In the Dispute Over Dry Needling

The North Carolina Board of Physical Therapy Examiners has decided that dry needling is within the scope of practice of physical therapy. The American Physical Therapy Association, the Federation of State Boards of Physical Therapy, and the majority of U.S. states all agree. Despite all this, the North Carolina Acupuncture Licensing Board in September 2015 filed a lawsuit to make dry needling unavailable to patients who benefit from it. The members of the Acupuncture Board launched their lawsuit to prevent physical therapists from competing against acupuncturists. Their lawsuit seeks an order declaring that dry needling by physical therapists is the unauthorized practice of acupuncture—a Class 1 misdemeanor.

On October 7th, the NCPTA’s lawyers filed a lawsuit in federal court on behalf of NCPTA members and their patients. Our lawsuit quotes public records that show Acupuncture Board members using their government positions to stamp out dry needling—that is, to crush competition from physical therapists. Worse, the Acupuncture Board did these things at the specific request of the Acupuncture Association. Our lawsuit asks the federal courts to hold the Acupuncture Board and its members accountable. The NCPTA is committed to defending our members and their patients for as long as it takes. To do this, though, we need your help.

Please consider donating at https://www.gofundme.com/defenddryneedling to support our North Carolina PT colleagues.

“PTPN has been a great asset to my company, and I would definitely recommend it to any other practice because of all the built-in benefits PTPN brings.” — Cristina Faucheux, PT, Moreau Physical Therapy

PTPN members have access to more patients and more revenue through our contracts with major insurance providers, large employers and workers’ comp companies. PTPN will also:

> Save you thousands of dollars yearly through preferred vendor discounts.

> Advocate for fair pay & quality care via our lobbyist in Washington DC and the PTPN Political Action Center.

> Help you identify new revenue streams to counter declining reimbursements from other sources.

It pays to join PTPN. To learn more, contact Kim Bueche Hardman at 225-927-6888 or kbueche@ptpnla.brcoxmail.com.

Functional Biomechanics of the Lower Quarter: Implications for the Evaluation and Treatment of Musculoskeletal Disorders
Saturday & Sunday, March 12-13

COURSE DESCRIPTION: Altered lower quarter mechanics can frequently contribute to various musculoskeletal conditions. Understanding how abnormal limb function can contribute to the mechanisms of specific joint dysfunction is essential for the evaluation and treatment of common orthopaedic disorders. This evidence-based course will review the anatomy and mechanics of the lower kinetic chain, particularly in relation to specific pathologies of the ankle, knee and hip. Emphasis will be placed on current research findings in the areas of gait analysis, lower limb function, and joint biomechanics. Implications for the evaluation and treatment of various musculoskeletal conditions will be addressed.

COURSE OBJECTIVES: At the conclusion of the course the participant will be able to: 1. Describe the normal anatomy and biomechanics of the foot/ankle, knee and hip. 2. Describe the normal interactions of the hip, knee, ankle and foot during functional movements. 3. Describe common lower movement impairments during functional movements. 4. Describe the current research literature related to the mechanisms of lower extremity injury. 5. Plan appropriate treatment interventions based on a biomechanical assessment of the lower extremity.

COURSE INSTRUCTOR: Christopher M. Powers, PhD, PT, FACSM, FAPTA Dr. Powers is the founder and owner of the Movement Performance Institute in Los Angeles. In addition, he is a Professor in the Department of Biokinesiology & Physical Therapy, and Co-Director of the Musculoskeletal Biomechanics Laboratory at the University of Southern California. He holds joint appointments in the departments of Radiology and Orthopaedic Surgery within the Keck School of Medicine. Dr. Powers received his Bachelors degree in Physical Education from the University of California, Santa Barbara in 1984, his Masters degree in Physical Therapy from Columbia University in 1987, and a Ph.D. in Biokinesiology in 1996 from USC. Dr. Powers did his post-doctoral training at the Orthopaedic Biomechanics Laboratory, University of California, Irvine. is now in his second term in that role.

Support the LPTA PAC/PAIF and attend the Saturday Fundraising Event! Tickets are only $100 and can be purchased at the conference. You can also donate online at www.lpta.org! More information on the PAC/PAIF event coming soon!
Spring Meeting General Information

Registration is now available online! Go to the LPTA website, www.lpta.org, and follow the links to the online registration system.

ACCOMMODATIONS: Doubletree by Hilton Hotel Lafayette 1521 West Pinhook Rd Lafayette, LA 70503 (800) 445-8667. $109.00 per night (Double); $119.00 per night (Single) Registrants must make their own room reservations. Please identify yourself with the “Louisiana Physical Therapy Association” to receive the group rate. Please reserve your room early. The hotel guarantees rooms at the above rates only for reservations made on or before February 19, 2016. However, this is based on availability. Please call them for availability regardless of when arrangements are made.

ELIGIBILITY: Physical Therapists, Physical Therapist Assistants, PT Students, PTA Students, Athletic Trainers, other licensed healthcare professionals, and PT Office Staff.

CONTINUING EDUCATION HOURS: 16 hours total available:
• Friday 3 hour clinical/preventive course: Documentation to Meet Legal, Ethical and Payment Requirements—LPTA Ethics Committee
• Saturday/Sunday 11 hour clinical/preventive course: Functional Biomechanics of the Lower Quarter Implications for the Evaluation and Treatment of Musculoskeletal Disorders—Christopher M Powers, PT, PhD, FACSM, FAPTA
• Sunday 2 hour Ethics course: James E. Reagan, Ph.D.
• Sunday 2 hour Jurisprudence/Town Hall — Louisiana Physical Therapy Board

REGISTRATION: Register by February 25, 2016 to receive the discounted early bird registration rate. Enclose all registration fees with your form. Cancellations may be made through February 25, 2016 without penalty. After February 25th, a $50.00 cancellation fee will apply up to 48 hours prior to the Meeting, after which all fees are forfeit. Registration in advance of the conference must be received by March 4, 2016. After which, on-site registration will be available at the DoubleTree by Hilton in Lafayette on Friday, March 11 from 12:30 pm—7:30 pm; on Saturday, March 12 from 7:00 am—6:00 pm and on Sunday, March 13 from 7:30 am—2:30 pm. Exhibit hall passes do not include drink tickets for the Welcome Reception or a luncheon ticket. Drink tickets can be purchased at the registration desk. Although provisions will be made for unregistered members to attend the business meeting, lunch on Saturday will be served only to registrants and to those who purchase a luncheon ticket.

WELCOME RECEPTION: The Welcome Reception will be held on Friday, March 11, 2016 from 6:00 pm till 7:30 pm in the exhibit hall. Take this opportunity to catch up with colleagues and visit with our exhibitors!

CONTINENTAL BREAKFAST: Continental breakfast will be served on Saturday and Sunday morning. Saturday morning breakfast will be in the Exhibit Hall, Sunday morning breakfast will be in the registration area.

COMMITTEE MEETINGS: Committee Meetings are tentatively scheduled on Friday evening at 4:00 pm following the Friday afternoon Ethics Course and before the Open Forum at 5:00 pm. We will let you know ASAP it there is a change of time and dates.

(continues on page 20)
(continued from page 19)

**LPTA OPEN FORUM:** The Open Forum will be held on Friday, March 11, 2016 from 5:00 pm—6:00 pm. All are invited to attend. Please make plans to join us as we will have a Legislative Training Session to discuss how to meet with your Legislator (see the top of page 21).

**BUSINESS MEETING AND LUNCH:** The Business Meeting and Luncheon will be held on Saturday, March 12, 2016 from 12:30 pm—1:45 pm. The purpose of this meeting is to inform you of the accomplishments LPTA has made over the past year and the future direction of LPTA. The Dave Pariser Student Service Award will be presented at the Business Meeting.

**DRESS ATTIRE:** During the Spring educational seminar and business meeting of the LPTA, we will have several special guests in attendance and we will be in Lafayette during a busy time. To help promote the Physical Therapy community as a doctoring profession, and as independent practitioners, we are asking all attendees to dress similar to business casual attire for the weekend courses. Suggested attire would include: collared shirts, blouses, casual pants or jeans in good repair with appropriate shoes or sandals. T-shirts, shorts, scrubs and flip flops are discouraged. Thank you for joining us as we Move Forward!

**GOING GREEN!** We are pleased to announce that the LPTA is going green. The Spring Meeting lecture notes will be emailed and available on the website ahead of time for you to download and look at. Note booklets are available at an additional cost of $20. No Wi-Fi or power source will be provided during the meeting. Come prepared!

**Documentation to Meet Legal, Ethical and Payment Requirements**  
**Friday, March 11**

**COURSE DESCRIPTION:** This course will help therapists in all practice settings understand the legal documentation requirements in Louisiana as prescribed by the PT Practice Act and Rules and Regulation; Ethical considerations related to APTA Code of Ethics when documenting patient encounters; Clinical documentation requirements to meet CMS and insurer payment criteria and Billing and Coding requirements when submitting bills for payment.

**COURSE OBJECTIVES:** At the completion of the course participants will be able to: 1. Identify the La.PT Board’s documentation requirements as defined in the Board’s Rules and Regulation. 2. Understand and apply clinical documentation requirements for demonstrating Medical Necessity and Skilled PT Services, and avoid payment denials by CMS and other insurers. 3. Identify billing and coding requirements in the practice of PT and operation of a practice. 4. Identify ethical standards related to documentation of Physical Therapy services; understand Fraud and Abuse and how to avoid violations of the APTA Code of Ethics related to documentation.

**COURSE INSTRUCTOR:** Rick Coogler, PT, ATC, MHS, COMT; Becky Legé, PT, COS-C; Rusty Eckel, PT; Rebekah Winters, PT; and Kirk Nelson, PT, PhD.
Join us for Legislative Training Session during the Spring Meeting, tentatively scheduled for 5:30 pm Friday March 11, and at 10:00 am Saturday March 12. This meeting session will prepare you on how to meet with your legislator, understanding our position, and how to handle the difficult questions. The brief session will be action packed and very informative. More information will be posted at the registration desk.

Jurisprudence/Town Hall—FREE Course
Sunday, March 13

(This is a course offered by the LPTB and is of no charge to licensees who wish to attend.)

COURSE DESCRIPTION: This course is an inter-active seminar for licensees to understand the Practice Act and Rules and Regulations that govern the practice of physical therapy in the state of Louisiana. Participants will learn about the Board's process of investigating complaints that are submitted to the Board and the process of discipline. The Board will provide information on Rules for clarification and Participants are welcome to ask questions to the Board Members regarding clarification on Rules. The second half of the seminar is dedicated to a Town Hall component, which is an open forum to discuss topics of the audience's choosing, which can range from board updates to national trends in physical therapy. LPTA representatives are present during the Town Hall component to answer questions that are outside the scope of the Board, such as payment, billing and potential advances in the practice.

COURSE OBJECTIVES: At the completion of this course participants will: 1. Understand the process for submitting a complaint and the Board action that follows. 2. Understand the Rules and Regulations that govern the practice. 3. Understand current activities of the board and other activities relative to the practice.

COURSE INSTRUCTOR: TBD

This is a call for motions for the Spring Meeting.
Please submit to the LPTA office at office@lpta.org!
A Transformative Year. And We're Just Getting Started!

Dear Colleagues:

It's hard to believe another year is drawing to a close. In the last 6 months, as your new president, I have had the honor to meet and learn from many of you, and embrace the partnership we share as members of APTA. It is a partnership I find critical to success as we work to achieve our vision.

"Transforming society by optimizing movement to improve the human experience." Those words—our vision—inspired excitement across the organization and its components when the House of Delegates adopted them in 2013. But the vision is more than just words. Together, we've drawn on that excitement and worked to translate it into meaningful action. Action that will serve as the foundation for achieving our vision.

Looking back on 2015, I am so proud of the many landmark strides we've made together. I feel compelled to briefly touch on some of the highlights.

In 2015, we worked to transform society through our consumer outreach and education campaigns, generating more than 2,500 mentions in digital and print media across the nation and a record 1.5 million visits to our consumer website, MoveForwardPT.com. Through successful federal and state advocacy, the sustainable growth rate (SGR) was repealed, and 21 million Americans now have better access to physical therapy thanks to improved direct access laws throughout the country. There are now more than 40 clinical practice guidelines under development that will help you navigate the evolving practice environment. Also this year, APTA was inspired to see members of the association step up to create the Global PT Day of Service, an event aimed at connecting us with our communities. We were pleased to support this transformative grassroots effort, which drew participation in all 50 states and 24 countries around the world. Conceived of and executed by early-career members, this effort and others like it will bring our vision to reality.

There is so much more, and I encourage you to explore this 2015 Year in Review webpage, which includes a podcast, infographics, and other resources, to see how you and your association lived up to the promise of transforming society. The most important point, after all, is the story it tells of our collective efforts to make a meaningful impact on our patients and clients, our profession, and the world around us through the transformative power of physical therapy.

In my travels and talks as APTA president, I have many times heard and spoken the words "we're better together." It's not a new concept but it's an important one. One that rings true. We could not have achieved any of this without the work, support, and camaraderie of our members and components.

Finally, as we proceed on our path to achieving our vision, it is important to remember to take a moment not only to savor our accomplishments but also to celebrate life, enjoy the holiday season, rejoice in each other, and, perhaps most important, embrace our loved ones, as they are indeed part of the society we strive to transform.

All the very best to you, and here's to a happy, healthy, and prosperous New Year!

Very sincerely,
Sharon Dunn, APTA President
5 Transformational Numbers

40
Clinical practice guidelines in development by APTA and its sections.

1,000+
PTs, PTAs, and students who rallied for their profession and patients at PT Day on Capitol Hill.

11,000
PTs practicing under improved scope of practice and title protection.

1.5 million
Visitors who learned about the benefits of physical therapy at MoveForwardPT.com.

21 million
People with improved direct access to physical therapy thanks to successful state advocacy.