

HOWARD MARKLEIN

STATE SENATOR • 17TH SENATE DISTRICT

October 9, 2019 Senate Committee on Health and Human Services Testimony on Senate Bill (SB) 390

Good morning! Thank you Chair Testin and committee members for hearing Senate Bill 390 (SB 390), which would ratify and enter Wisconsin into the Physical Therapy Licensure Compact (PLTC).

The PTLC allows certified physical therapists in good standing to practice in multiple states by streamlining the licensing process. Allowing a multi-state license gives more freedom to physical therapists, but also would allow clinics to hire faster and fill vacancies. The PTLC removes one layer of administrative burden for professionals looking to relocate to border areas. Allowing cross state licensure will have a positive impact to rural, underserved areas of our state.

I authored this bill at the request of the Wisconsin Physical Therapy Association. Last session Rep. Stafsholt and I introduced a similar proposal in February 2018, but unfortunately ran out of time at the end of session.

The legislature has already recognized the need to eliminate unnecessary red tape for medical professionals by enrolling Wisconsin in similar compacts for nurses and physicians. This bill would extend the same benefits to physical therapists.

My district covers a large portion of southwestern Wisconsin, bordering both Illinois and Iowa. Currently, 26 other states, including neighboring Iowa, have already adopted the physical therapy licensure compact. Legislation is also being considered in Michigan, similar to my proposal. Therefore it is possible that Wisconsin resident physical therapists will soon have the same privileges in nearby states.

It is important to note that this bill keeps important safeguards in place to protect patients. By streamlining communication with other states we will be able to ensure bad actors cannot gain licensure and practice in Wisconsin. After consulting with the Physical Therapy Compact Commission (PTCC), an amendment was drafted to include FBI background checks for initial licensure in Wisconsin. This provision has been adopted by the other 26 states.

SB 390 is supported by the Wisconsin Physical Therapy Association and has received strong bipartisan support in both houses of the legislature.

Thank you again for hearing SB 390, and your timely action on the bill.



A CHAPTER OF THE AMERICAN PHYSICAL THERAPY ASSOCIATION

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October 9, 2019

To: Senate Committee on Health and Human Services

Senator Testin (Chair)

Senator Kooyenga (Vice-Chair)

Senator Jacque

Senator Erpenbach

Senator Carpenter

Re: Testimony on SB 390

Senator Testin and members of the committee, my name is Connie Kittleson and I am the Past President of the Wisconsin Physical Therapy Association. I want to thank you for the opportunity to speak in favor of Senate Bill 390.

In 2014, the Federation of State Boards of Physical Therapy determined that an interstate physical therapy licensure compact would **improve consumer access** to physical therapy services by **reducing regulatory barriers** to interstate mobility and cross—state practice. The American Physical Therapy Association was involved in the drafting of the Physical Therapy Interstate Licensure Compact (Compact) language and continues to support its implementation.

In April of 2017, after 10 states passed the compact legislation, the Compact was officially enacted. The Compact Commission formed and passed rules clarifying provisions of the legislation and governing the process associated with practicing with a Compact Privilege. The Wisconsin Physical Therapy Association supports these rules and feels that the legislation and compact rules would allow citizens greater access to services while still maintaining all our state's expectations for continued competence in physical therapy practice and jurisprudence.

The nursing and medical professions in Wisconsin have similar compacts in Wisconsin and like the Nursing Licensure Compact and the Interstate Medical Licensure Compact, this compact will allow Wisconsin to more rapidly respond to the needs of an increasingly mobile society and improve access to care while at the same time **preserving our state's regulatory authority**.

The Compact may significantly benefit **military families.** When members of our nation's military receive permanent change of station orders, there is currently significant administrative burden for their spouses to become licensed in a new state. Many military spouses pursue careers in healthcare fields such as physical therapy because these careers are portable. However, the challenge of obtaining and renewing licensure in multiple states without the existence of an interstate compact is challenging. Given that military families move 6-9 times over the course of the service member's military career, the burden is significant. The Compact would ease that burden for military spouses as well as for service members who would like to deliver pro bono care outside of their military service.

The Compact may also help patients in **underserved areas** by giving them greater access to licensed physical therapists (PTs) and physical therapist assistants (PTAs). Decreasing the regulatory burden for cross-state practice may PTs and PTAs to more easily fulfill the needs in **both urban and rural areas** that lack adequate practitioners.

Also, as healthcare begins to incorporate more delivery of care via **telemedicine**, portability of licensure will become increasingly important. The Compact can make this process less cumbersome allow for greater access to modern methods of healthcare delivery.

With passage of the Compact, Wisconsin would still preserve its regulatory authority protecting the citizens of our state. A person practicing with a Compact Privilege would practice under the laws of the state in which the patient is located. PTs and PTAs in remote states practicing with a Compact Privilege in Wisconsin would be held accountable to the same laws and standards as PTs and PTAs whose primary license is in Wisconsin.

The structure and benefits gained by implementation of the Compact have garnered broad support from a wide variety of groups including:

- Federation of State Medical Boards (FSMB)
- National Military Family Association
- American Physical Therapy Association Federal Physical Therapy Section
- American Telemedicine Association
- Citizen Advocacy Center (CAC)
- National Association for the Support of Long Term Care (NASL)
- Athletico Physical Therapy, Ltd.
- Cross Country Healthcare
- HPA The Catalyst

To date, **26** states have passed the Compact. Of those **16**, are actively issuing and accepting compact privileges. An additional 4 states, including Wisconsin, have introduced the legislation this session. The state chapters for APTA of all states bordering Wisconsin have either passed, introduced or intend to introduce the legislation.

All states that have enacted the compact or introduced the compact will be amending requirements to include FBI background checks and fingerprinting per the change in compact rules. This is consistent in the medical community, and similar requirements have been included in the enhanced nursing interstate licensure compact and the medical interstate licensure compacts that have already passed in Wisconsin. SB 390 will need to be amended to include these recently adopted rules in order for Wisconsin to be a valid compact state. We would ask for your support for BOTH SB 390 and the amendment.

The WPTA believes that now is the time for Wisconsin to pass the Physical Therapy Interstate Licensure Compact and join the states who are rapidly responding to 21st century health care needs.

I thank you for your time and for allowing me to speak. I would be happy to answer any questions that you may have.

Sincerely,

Connie Kittleson, PT, DPT

Consie Kittleson

Past President

Wisconsin Physical Therapy Association



"Get Moving, Keep Moving, Enjoy Life"

October 9, 2019

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Senator Kooyenga (Vice-Chair)

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Re: Testimony on SB 390

Senator Testin and members of the committee, my name is Dr. Brett Roberts and I am Legislative Chair of the Wisconsin Physical Therapy Association as well as a small business owner with businesses located in Central and Southwestern Wisconsin. I want to thank you for the opportunity to speak in favor of Senate Bill 390.

As an owner of multiple practices across the state, many in rural areas such as Arcadia, Plainfield, and Amherst, I understand the recruiting challenges that a rural location can create. As my colleagues have previously stated passage of this compact would help improve consumer access to physical therapy services, especially in the rural border areas of our state. With the current Opioid epidemic disproportionately impacting these rural areas, easing the regulatory burden to allow for the more timely hiring, on-boarding, and ultimately provision of services will help be a solution to the challenges we face in our rural markets.

In determining eligibility for a license, a physical therapist must pass a national board exam. This exam is based on best clinical practice and how the exam is issued and what topics are covered, is not dependent on your current geographic location. This approach to determining clinical competency, lends itself to the portability of licensure across state lines, while continuing to preserve our state's regulatory authority on the practice of physical therapy.

As the use of telemedicine in our profession continues to grow, the ability of our therapists to obtain compact privileges, will allow us to assist patients outside the borders of Wisconsin. While these patients are not direct citizens of our state, this growth will allow our business to continue to expand, making a positive economic impact in our local, often rural markets. This impact would allow for the additional hiring of employees as well as the level of benefits offered to our current employees.

To date, **26** states have passed the Compact. Wisconsin is used to be a leader in the health care arena. The WPTA believes that now is the time for Wisconsin to pass the Physical Therapy Interstate Licensure Compact and join the states who are rapidly responding to 21st century health care needs. In other words, it's time that we move "Forward" with SB 390.

I thank you for your time and for allowing me to speak. I would be happy to answer any questions that you may have.

Sincerely,

Brett Roberts, PT, DPT Legislative Committee Chair - Wisconsin Physical Therapy Association

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Wisconsin Physical Therapy Association

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Re: Testimony on SB 390

Senator Testin and members of the committee, my name is Dennis Kaster. I am the current President of the Wisconsin Physical Therapy Association. Thank you for the opportunity to speak in favor of Senate Bill 390.

The physical therapy interstate compact will help Wisconsin enter into new models of care to help our residents and allow our physical therapists more easily treat patients who might live or travel outside of our borders. It will also help physical therapists who live in border towns and healthcare facilities attract contract physical therapists to our state to help fill temporary staffing needs. The compact will allow Wisconsin physical therapists to more easily treat patients who are outside of our borders and contract therapists to come to Wisconsin if they have a license in one of the other participating states. I have been in Stevens Point for the last 22 years and have a great deal of experience in trying to meet the needs for healthcare in rural settings, which is much more difficult than in larger metropolitan areas.

Telemedicine is a new model of care which allows healthcare providers to treat patients remotely. This is especially helpful in rural areas where patients may have difficulty accessing healthcare. Many medical issues can be effectively addressed over the telephone. I was recently at a meeting in Washington DC and heard a presentation from the Veterans Administration where they have already had 16,000 patient interactions over the telephone nationwide. They plan to greatly expand this service. During this meeting it came up that a healthcare provider needs to have license privileges for the state that the patient is located in, as the service is being delivered to the patient at their location. Therefore, Wisconsin physical therapists would need licensure privileges in multiple states in order to see patients in areas outside of Wisconsin. This would be beneficial to our patients who might be traveling outside of our borders or snowbirds in another states. The compact would allow them to receive consistent healthcare even while outside of Wisconsin.

As I had mentioned, another benefit of the licensure compact is that having the compact in place will allow us to better attract contract therapists to Wisconsin. For 20 years, I was a Rehabilitation Services Director at a hospital in Stevens Point and worked with sister hospitals in northern Wisconsin. Many times we were short staffed and needed temporary staffing help to see our heavy patient loads. In northern Wisconsin it can take up to a year to recruit and hire a new physical therapist. Using contract physical therapists is a vital solution to getting patients seen, while being short staffed. With the current licensure process, it is a definite barrier in getting contract physical therapists to come to Wisconsin. There have been several instances where we had to

wait several weeks to get a contract physical therapist licensed before they could start seeing patients. Having the compact in place allows a physical therapist to obtain licensure privileges within a day or two, currently in many states. Sometimes these contract physical therapists are recruited and hired into the permanent positions that they were helping to fill. Therefore, the compact will also help us to recruit new potential physical therapists to Wisconsin.

Another benefit of the compact will be that physical therapists who live in border towns where they may work at locations on both sides of the border. Having the compact in place where the border state is one of the participating states, these physical therapists will have a much easier time in working on both sides of the border.

Having the physical therapy interstate compact will help Wisconsin be progressive in entering into new models of care, better fill physical therapy staffing needs, recruit additional physical therapists to Wisconsin, benefit physical therapists who live in border towns and most importantly, better meet the healthcare needs of Wisconsin residents.

I thank you for your time and for allowing me to speak. I would be happy to answer any questions that you may have.

Sincerely,

Dennis Kaster PT President Wisconsin Physical Therapy Association



October 9, 2019

To: Chair Testin, Members of Senate Committee on Health and Human Services

Re: Testimony on SB 390

Senator Testin and members of the committee, our names are Jeffrey Jaeggi, Pedro Zavala, and Lindsay Dolan and we are students in the UW-Madison Doctorate of Physical Therapy Program as well as active members of the Wisconsin Physical Therapy Association. We want to thank you for the opportunity to speak in favor of Senate Bill 390.

We are honored to offer the perspective of students who will be entering the profession in one to two years. Not only would an interstate physical therapy licensure compact improve consumer access to physical therapy services, but it would further open opportunities for new professionals like ourselves.

For example, Lindsay would like to start her career as a travel physical therapist, fulfilling shortages in staffing across the country. Travel physical therapists are of increasing importance for facilities, specifically clinics in rural or urban communities. Furthermore, travel physical therapists sign contracts ranging in length--anywhere from 6 weeks to 6 months. Many travel physical therapists chose to live nomadically and therefore travel between states to fulfill the staffing needs and begin their new contract. Similar to military families who move frequently, the Compact would significantly benefit travel physical therapists by lessening the administrative burden to become licensed in a new state. Therefore the Compact would increase the amount of available physical therapists and ease access to care.

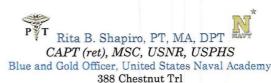
Additionally, we will begin our careers alongside the advancement and implementation of telemedicine, allowing us to practice at the cutting edge of our scope while overcoming geographic barriers. This innovative technology allows physical therapists to provide patient care in rural areas that lack access to quality healthcare in a remote and cost-efficient manner. However, in order to provide our services, physical therapists must hold a license or a compact privilege in the state their patients live. The physical therapy licensure compact would allow us to be part of telemedicine's modern service model expanding our care over multiple states. Telemedicine is a key component to help physical therapists provide care in rural areas with inadequate access in a cost-efficient manner.

Though still working hard in the classroom and on clinical rotations, we understand the importance of emerging issues in healthcare. Upon graduation, we want to be prepared to enter the physical therapy field with the most opportunities and the best outcomes for our patients. Your support in Senate Bill 390 will have a positive impact on the start of our careers as physical therapists and the future patients we treat.

We thank you for your time and for allowing us to speak. We would be happy to answer any questions that you may have.

Sincerely,

Lindsay Dolan, Core Ambassador, APTA Jeffrey Jaeggi, Chair, Student SIG Pedro Zavala, Vice Chair, Student SIG



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9 October 2019

Chair Testin, Members Senate Health Committee

Honorable Members of the Senate Health Committee,

I write to support SB 390, the Physical Therapy Licensure Compact (PTLC) legislation.

Having served in the United States Navy and the Public Health Service for a combined 28 years, I would be honored to provide my perspective on the challenges that my colleagues in the military and their spouses face as it relates to being a physical therapy provider due to frequent military ordered transfers. Yes, majority of the permanent change of station (PCS) orders are for 3-4 years however, depending on the needs of the service they are at times with in very short periods ranging from 12-18 months.

This poses much challenge not only due to the stresses of the move but also loss of or inability secure employment for the spouses. For growing families, the spouse must also work to provide for their family as the military income of young enlisted or of junior officers is often time quite inadequate. When this is compounded by having to apply for a new license so as to even apply for a job in the new location; I personally have observed that many just give up. What a terrible loss to the profession and to the community who could benefit from the skills and experience of these highly talented professionals.

To obtain a reciprocity leads to multitude of costs including but not limited to application fee, verification fee, national board examination results transfer to name a few. Still it can take as long as one year to get a license, and by that time the clinician has been out of practice thus making them less competitive.

Not only spouses, I know some active duty members seek to augment their income by working over weekends. I can personally attest to that as I had to do exactly that as a junior officer. However, although we all take a national examination for licensing every state has its own unique barriers. Thus, making the process more arduous than it needs to be.

It is highly encouraging to see the efforts the Federation of State Boards of Physical Therapy (FSBPT) along with the American Physical Therapy Association (APTA) and the Council of State Governments are proposing for the development and introduction of the Physical Therapy Licensure Compact (PTLC). I urge you to adopt and pass the PTLC to help ease the challenges of obtaining multiple licenses to practice physical therapy so that the highly qualified providers can integrate into the community and be employed to provide valuable physical therapy services.

Thank you for giving this issue your strong consideration.

Very Respectfully RBShapiro

Rita B. Shapiro

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Testimony in support of SB-390 Senate Health Committee Chairman Pat Testin

October 8, 2019

RE: Wisconsin SB-390 (Physical Therapy Compact) public hearing

Mister Chairman and Members of the Committee:

The Federation of State Boards of Physical Therapy (FSBPT) is a membership organization comprised of the 53 jurisdictional licensing boards regulating physical therapy in the United States. The Wisconsin Physical Therapy Examining Board, under the Department of Safety and Professional Services, is a member of FSBPT. FSBPT's mission is to protect the public by providing service and leadership that promotes safe and competent physical therapy practice. All 53 jurisdictional licensing boards (50 states, District of Columbia, Puerto Rico, and the United States Virgin Islands) require licensure for physical therapists and either licensure or certification for physical therapist assistants.

The PT Compact (PTC or Compact) is an initiative of FSBPT to improve access to physical therapy care. Per the Compact statutory language, a physical therapist or physical therapist assistant working under a Compact Privilege must abide by the practice laws and rules of the remote state when practicing there. There is no impact or change in the scope of practice of PTs and PTAs in Wisconsin when becoming a member of the Compact. The PTC has many benefits for Wisconsin:

- Improves access to physical therapy providers
- Increases public choice of physical therapy providers
- Preserves state-based licensure system
- Improves communication between states
 - Ensures full participation in license and disciplinary data system
 - All adverse actions and disciplinary actions will be reported regularly and shared with member states
 - Sharing of investigatory information
- Requires criminal background checks
- Improves continuity of care for the citizens of Wisconsin
- Improves licensure portability for physical therapists and physical therapist assistants
- Facilitates alternate delivery methods such as telehealth
 - Simplifies/speeds up the current process
 - Addresses portability & barriers to access
 - Ensures the understanding that practice of physical therapy occurs in the state where the patient/client is located at the time
- Requires continuing competence for all that practice under the PTC
- Improves portability for military spouses

As home to Fort McCoy, the benefits to the military family afforded by the Compact are of significance to the Wisconsin legislature. The military spouse has a choice of the state currently residing, state of the permanent change of station orders, or the state home of record to be the home state. The Compact helps the spouses of soldiers relocate and begin work with minimal delay; the Compact decreases the time to gain authorization to practice even as compared to expedited licensure laws. A Compact Privilege, the authorization to practice in a state other than the home state, can be obtained in a matter of minutes. A military spouse could wake up in the morning, get a call from the service member saying they are moving in three weeks, and have a Compact Privilege in that new state by lunchtime. Wisconsin may become a more attractive option to call home for a military family with a physical therapist or physical therapist assistant; the military spouse has piece of mind that with Wisconsin as the home state, he/she will always be able to move to a Compact state with the service member without barriers to practice.

The PTC is modeled on mutual recognition. A physical therapist or physical therapist assistant must have a license in good standing in the home state and the home state must be a member of the Compact. When a licensee wants to work in another member state (the remote state) a Compact Privilege (CP) must be obtained. The CP is the authorization to practice in the remote state and not a license. To determine eligibility for a CP, there are a few criteria that the licensee must meet: 1) Home state is in the compact 2) Hold a current license in home state 3) No current encumbrances against any license (compact or non-compact) and 4) No disciplinary action for the past 2 years. If all criteria is met the individual receives the Compact Privilege.

More and more jurisdictions are adding a Federal Bureau of Investigation (FBI) criminal history record information (CHRI), commonly referred to as a criminal background check (CBC) requirement prior to initial licensure as a physical therapist or physical therapist assistant. Thirty-four jurisdictions currently require a CBC for PT or PTA licensure which is a significant increase since initiation of the Compact. Prior to the Compact, only fifteen states required CBC and of the twenty-five PTC members, only six had FBI CBC requirement prior to joining the Compact. With one third of adults having a criminal record, and over fifteen thousand provisions in jurisdiction statutes and regulations which limit occupational licensing opportunities for individuals with criminal records, a CBC is an important screening tool for licensure.

The basis for any licensure requirement should be the interest of enhanced public protection and safety. Regulatory boards are tasked to assure health care providers are safe and competent. Physical therapists work with vulnerable individuals of all ages and walks of life, often alone with an individual when providing services. Treatment may be provided to these individuals in a variety of settings, including the home, which allows the PT and PTA access to an individual's body and private property often without any other individual on-site. Boards have typically asked for self-disclosure of a history of criminal activity on licensure applications. However, self-disclosure is not necessarily a reliable method to obtain this type of information. Requiring a CBC is a mechanism to ensure that the board is aware of the applicant's full history when determining eligibility for a license.

Recent graduates of physical therapy education programs will not be surprised by a requirement for a CBC for licensure. More and more physical therapy schools are requiring CBC as part of the admission

requirements or prior to clinical education experiences. This has been facilitated by a clinical education sites requiring CBC prior to allowing students into clinical experiences. This is not restricted to physical therapy, but has been seen in many medical professions. Some payers, including government-based payers, have restrictions based on criminal history. Additionally, CBCs are commonly performed for employment especially in settings as hospitals, schools, and long term care facilities.

The Compact administration and governance is handled by the Compact Commission. The Compact Commission is a joint public agency made up of representatives from each member state, independent of any professional association or the FSBPT. As a governmental entity, the Commission has one delegate from each member jurisdiction who is a current Board member or administrator. The Compact Commission staff verifies eligibility for a Compact Privilege per the statute and rules requirements and issues the Compact Privilege with a unique Compact Privilege number. This ensures **no additional work to issue Compact Privileges for the licensing board staff as a consequence of joining the Compact.** Although statute allows it, at this time there is no cost for Wisconsin to be a member of the Compact; the Commission voted to have \$0 in annual assessment this year. Each year, during the budget planning process, it will reevaluate this decision. An annual assessment would need to be approved by a majority of the Compact Commission.

We anticipate minimal additional costs to participate in the Compact. There is the time and the money for your Delegate to attend the annual in-person Commission meeting. Wisconsin may see a potential loss of revenue for people currently licensed in Wisconsin who may post-Compact get a Compact Privilege instead. However, any loss of revenue can be offset with Wisconsin charging an appropriate fee for the CP. There will also be a potential increase in the number of Wisconsin residents, who are currently not licensed in Wisconsin because they work elsewhere, but would need a Wisconsin home state license to be eligible for a CP anywhere else.

Thank you for the opportunity to testify in support of Wisconsin becoming a member of the Physical Therapy Compact.

Respectfully Submitted,

Nancy Kirsch, PT, DPT, PhD, FAPTA

Marrey Kirsch map

President

Federation of State Boards of Physical Therapy



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October 8, 2019

Senator Patrick Testin, Chair Wisconsin Senate Committee on Health and Human Services Room 131 South State Capitol PO Box 7882 Madison, Wisconsin 53707

Dear Chairman Testin:

On behalf of the more than 100,000 physical therapists, physical therapist assistants, and students of physical therapy who are members of the American Physical Therapy Association (APTA), I write in support of LRB 1841, which would allow Wisconsin to join the Physical Therapy Licensure Compact (PTLC).

The PTLC is a state-based solution to the challenges of interstate licensure portability for physical therapists (PTs) and physical therapist assistants (PTAs). It improves patient access to physical therapy services by giving eligible licensees in participating states a faster alternative to traditional licensure, while retaining safeguards to protect the public. Twenty-six states have already enacted the PTLC

The PTLC is needed to meet workforce needs, provide greater consumer access to physical therapy care, and address licensure portability issues. By creating a streamlined mechanism for licensed PTs and PTAs to practice across state lines, the PTLC will help connect consumers with the physical therapy services they need. The PTLC also eases the relocation process for military spouses who are PTs or PTAs.

The Physical Therapy Licensure Compact promotes public protection and enables the sharing of background check and disciplinary data among member states. It does not change the scope of practice for physical therapy in any way

Again, please support LRB 1841. Thank you for your consideration.

Sincerely,

Sharon L. Dunn, PT, PhD

Sharar L Dum

Board-Certified Clinical Specialist in Orthopaedic Physical Therapy

President