MINUTES

MONTANA SENATE 52nd LEGISLATURE - REGULAR SESSION

COMMITTEE ON PUBLIC HEALTH, WELFARE & SAFETY

Call to Order: By Chairman Dorothy Eck, on January 14, 1991, at 1:30 p.m.

ROLL CALL

Members Present:

Dorothy Eck, Chairman (D) Eve Franklin, Vice Chairman (D) James Burnett (R) Thomas Hager (R) Judy Jacobson (D) Bob Pipinich (D) David Rye (R) Thomas Towe (D)

Members Excused: none

Staff Present: Tom Gomez (Legislative Council). Christine Mangiantini (Committee Secretary)

Please Note: These are summary minutes. Testimony and discussion are paraphrased and condensed.

Announcements/Discussion:

Chairman Dorothy Eck called the meeting to order, the roll call was duly noted. The chairman proceeded to discuss organizational rules pertaining to committee business.

The chairman recognized Senator Towe who made a motion authorizing any committee member to leave a vote with the chairman or the committee secretary on a specific bill or specific amendment of a specific bill. There being no objection the motion carried.

There being no further procedural business the committee stood at ease until 1:50 p.m.

The committee convened at 1:50 p.m. and the chairman recognized Senator Dennis Nathe for presentation of Senate Bill 54.

SENATE PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE January 14, 1991 Page 2 of 7

HEARING ON SB 54

Presentation and Opening Statement by Sponsor:

Senator Nathe opened by introducing himself and stating that SB 54 will help define occupational therapists' treatment. He continued by saying that the controversy with the bill is that for 20 years occupational therapists were reimbursed under Medicare and Medicaid for using certain modalities.

Every two years the Department of Social and Rehabilitation Services (SRS) has reviewed the reimbursement rate. SRS was including the modalities and were challenged that they were expanding the Occupational Licensing Therapy Act by including specific modalities on a reimbursable basis. This was sent to the Attorney General for an opinion. Two have been issued. The Legislature has not defined the definition of treatment for occupational therapists. The controversy is between physical therapists and occupational therapists over what therapeutic agents can be used.

Senator Nathe now asked the chairman to allow the proponents to testify.

The chairman called for testimony from the proponents.

Proponents' Testimony:

The first witness to testify in favor of SB 54 was Connie Grenz, President of the Montana Occupational Therapy Association. See Exhibit #1, written testimony from Ms. Grenz, for reference to her remarks.

The second witness to testify in favor of SB 54 was Dr. Richard Lewallan, a board certified orthopedic surgeon. See Exhibit #2, written testimony from Dr. Lewallan, for reference to his remarks.

The third witness to testify in favor of SB 54 was Mary Krenik, a nationally registered occupational therapist. See Exhibit #3, written testimony from Ms. Krenik for reference to her remarks.

The fourth witness to testify in favor of SB 54 was Thomas Nyman, a former patient of occupational therapy. See Exhibit #4, written testimony from Mr. Nyman for reference to his testimony.

The fifth witness to testify in favor of SB 54 was Pat Huber, recently retired from SRS. See Exhibit #5, written testimony from Ms. Huber for reference to her remarks.

SENATE PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE January 14, 1991 Page 3 of 7

The sixth witness to testify in favor of SB 54 was Dorinda Orrell, a patient under the practice of occupational therapy. See Exhibit 6, written testimony from Ms. Orrell for reference to her remarks.

The seventh witness to testify in favor of SB 54 was Linda Botten, an occupational therapist with an independent practice and reimbursement chairperson for the Montana Occupational Therapy Association. See <u>Exhibit #7</u> written testimony from Ms. Botten for reference to her remarks.

The eighth witness to testify in favor of SB 54 was Linda Barge, a physical therapist. See Exhibit #8, written testimony from Ms. Barge for reference to her remarks.

The ninth witness to testify in favor of SB 54 was Audrey Hensiek, supervisor of occupational therapy and a registered therapist. Ms. Hensiek stated that they use physical agents as needed in occupational therapy as a prerequisite to activity by relieving pain or retraining muscles in order to return the patient to a high level of independent functioning. Her concern as a supervisor is in retention of staff who may not be allowed to practice skills for which she feels they have been trained.

The chairman noted that the time for accepting proponent testimony had passed. She asked that any other witnesses turn in written testimony and a witness statement.

The chairman recognized Greg Duncan, attorney and lobbyist for occupational therapist, who requested that the remaining witnesses introduce themselves. The chairman consented and asked for witnesses to stand. Exhibit #9 is a copy of all witness statements from those persons who introduced themselves and turned in witness statements.

Opponents' Testimony:

The chairman called upon the opponents to SB 54 and recognized the first witness, Mr. Loren Wright, President of the Montana Chapter of Physical Therapy Association. See <u>Exhibit #10</u> written testimony from Mr. Wright for reference to his remarks.

The second witness to testify in opposition to SB 54 was Richard Gajdosik, chairperson of physical therapy department in the University of Montana. He is opposed to the bill because of its definition of occupational therapy. He finds the definition far too broad and it does not coincide with his knowledge of the educational preparation of occupational therapists. He believes this bill would allow occupation therapists to practice outside the scope of their profession in light of their basic educational preparation. SENATE PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE January 14, 1991 Page 4 of 7

See Exhibit #11 which are educational documents pertaining to the training of occupational therapists. These were collected for the committee by Mr. Gajdosik.

The third witness to testify in opposition to SB 54 was Gail Wheatley, a physical therapist and the physical therapist chair of the joint PT/OF Task Force. See Exhibit #12, written testimony from Ms. Wheatley for reference to her remarks.

The fourth witness to testify in opposition to SB 54 was Mona Jamison, an attorney and lobbyist for the Montana Chapter of the American Physical Therapy association. See Exhibit #13, a copy of section 37-11-101, Montana Code, which defines physical therapy. Ms. Jamison referred to this hand-out and SB 54 during her presentation. Ms. Jamison believes the definition in the bill is too broad. She does not think it is appropriate for an occupational therapist to use physical therapeutic agents which deal with internal bodily processes.

She continued by quoting the definition of "purposeful activity" as adopted by the American Occupational Therapy Association. She then compared this definition against the definition of physical therapy in the Montana Codes. She stated that SB 54 is so broad that it could include not only treatments denoted in the definition of physical therapy but other areas that touch upon other professions.

The fifth witness to testify in opposition to SB 54 was Gary Lusin, a physical therapist practicing in Montana. Mr. Lusin does not believe this issue is about how Dr. Lewallen can refer his patients to his occupational therapists. He continued by saying it is not about how hospitals can expand services within their occupational therapy department. He feels that professionals providing services should be properly trained to do so. He feels it is clear that occupational therapists do not have the proper education in their curriculum to provide physical therapy treatments. See <u>Exhibit #14</u>, written testimony of Mr. Lusin.

Chairman Eck noted that the time was up for opponent testimony but asked other opponents to state their name and their location. Each opponent was introduced. Exhibit 15 are copies of all witness statements turned in by persons introduced.

Questions From Committee Members:

The chairman allowed approximately 15 minutes for questions from the committee.

SENATE PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE January 14, 1991 Page 5 of 7

The chairman recognized Senator Franklin who addressed a question to Connie Granz. Senator Franklin referenced the 30 brochures collected by Dr. Gajdosik that indicate that the occupational therapy curricula does not deal with the use of physical modalities.

Ms. Grenz responded that she did not have the numbers but that they have done some surveys that show that all classes are not called physical therapeutic agents but that this material is usually covered under physical medicine and rehabilitation. She continued by saying that all the schools of occupational therapy do not have identical curriculums and that some curriculums focus more on these types of modalities that do others. She thinks there is a wide variation. The national exam tests the foundation theories of expanding on this knowledge and not the specifics of each individual treatment.

Senator Franklin followed up by summarizing Ms. Grenz comments. She commented that the licensure does not test physical agents.

Ms. Grenz responded that it does test understanding and use but not the actual demonstration.

The chairman recognized Senator Towe for a question.

Senator Towe addressed several witnesses and asked them to respond to previous comments that if the bill is passed will we in effect have made occupational therapists almost synonymous with physical therapists.

Greg Duncan, lobbyist for the occupational therapists, responded by saying he thinks there is an overlap in the two fields. He continues by saying that the dispute is focused on the overlap.

The chairman recognized Senator Towe for a follow-up question.

Senator Towe continued by asking why we are not allowing the task force time to sort the issues out and resolve the issue in an agreeable manner.

Mr. Duncan responded that the problem is not the task force but the fact that the attorney general's opinion issued last Friday prohibits the use of modalities by occupational therapist. He continued by saying that the legislation is needed right now so that occupational therapists can continue to use procedures, then go through the board for an administrative ruling to define the term "physical therapeutic agents".

The chairman recognized Senator Towe for a final follow-up question.

Senator Towe addressed Ms. Jamison regarding the attorney general's opinion.

SENATE PUBLIC HEALTH, WELFARE & SAFETY COMMITTEE January 14, 1991 Page 6 of 7

Ms. Jamison responded that under the Attorney General opinion any occupational therapist that was performing physical therapeutic procedures was doing so illegally. She continued to say that not all occupational therapists in the state are using modalities but it is occurring where occupational therapists and physical therapists are jointly working together and she feels that is what has raised the issue.

The chairman recognized Senator Pipinich for a comment.

Senator Pipinich commented that this is a board fight between the two groups. He continued by asking why the issue wasn't settled before it reached the committee.

Ms. Wheatley responded by saying they attempted to work together. She said they met in the fall but were not informed of any proposed legislation.

The chairman recognized Senator Jacobson.

Senator Jacobson suggested that because of the shortness of time and if there is an urgency to take action, it might be beneficial to have a couple members of the committee work with both sides and come back to the committee at a later date.

Chairman Eck found this a worthy suggestion. Chairman Eck asked what percentage of the occupational therapists are working with modalities.

Ms. Grenz responded that if the word "modalities" is used, then all occupational therapists use it in their practice. The term now used is therapeutic agents.

Chairman Eck then listed specific procedures like biofeedback and nerve stimulation.

Ms. Grenz estimated that about 50 percent of occupational therapists use these procedures.

Chairman Eck asked if they work under the supervision of a physician.

Ms. Grenz responded that occupational therapy can be provided without a physicians order, however, there are no third party reimbursements without a physician's directive.

Chairman Eck recognized Senator Towe for a question.

Senator Towe suggested a compromise effort by limiting use of physical therapeutic agents through the identification of body parts.

Ms. Jamison responded that the subcommittee approach is better because the issue isn't parts of the body but the specific therapeutic agents used.

Chairman Eck recognized Senator Nathe to close.

Closing by Sponsor:

Senator Nathe closed by saying that he is in full support of the creation of a subcommittee and would remind the subcommittee that as it stands now the Attorney General opinion prohibits the occupational therapists from doing treatments they are presently performing. Please keep in mind that occupational therapists also need to make a living. He references the curriculum passed out earlier in the day by Mr. Duncan to each committee member.

Chairman Eck appointed a subcommittee composed of Senators' Eve Franklin as chair and David Rye and Tom Towe. She further suggested setting the meeting at 1:00 p.m. on Wednesday, January 16. She asked several individuals from each side to put together information for the subcommittee.

There being no further business Chairman Eck moved to adjourn the committee. There being no objection the motion carried.

ADJOURNMENT

Adjournment At: 2:58 p.m.

Christine Mangiantini, Secretary

DE/cm

ROLL CALL

COMMITTEE PUBLIC HEALTH, WELFARE AND SAFETY

Date_01/14/91

NAME		PRESENT	ABSENT	EXCUSED
SENATOR BURNETT		X		
SENATOR FRANKLIN	•	х		
SENATOR HAGER	* * *	X		
SENATOR JACOBSON		X		
SENATOR PIPINICH	• •	X		
SENATOR RYE		X		
ENATOR TOWE		Х	•	
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Each day attach to minutes.

SENATE COMMISSIE C	ON PUBLIC HEALTH, WELF	A AND SAFETY	1-14-91
			SB 54
	WITNESS STATEME	INT	50 5 1
1 11	y a person testifying ntered into the record	or a person wl 1.	no wants
Date: 1-14-	7/		
Name: <u>Connie</u>	e h. Grenz		
Address: <u>Box</u> Box	508 der, M+	•	•
Telephone Number:	1110 223	0	
Representing Whom Mt Occup	? ational Therapor	Assoc	<u>\</u>
Appearing on whic SB^{2}	h proposal? ±54		
Do you: Support?	Amend?	Oppose?	
Comments:			
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

MONTANA OCCUPATIONAL THERAPY ASSOCIATION I

HONORABLE SENATORS

As president of the Montana Occupational Therapy Association I request your support for SB # 54, and offer my services to answer questions or obtain information for you. My work # is 449-8920.

SB # 54 was drawn up by the Dept. of Commerce lawyers for the Board of Occupational Therapists to legally clarify the use of Physical agent modalities by occupational therapists. Persons representing the Mt. chapter of the PT Assoc. challenged the legality of the 1985 licensure law to allow SRS/Medicaid to reimburse OTs for modalities in early 1990 which eventually led to an attorney general's review. On Friday Jan 11, 1991, Mark Rascicott finalized his stand which says;

"Occupational Therapists are not permitted by Montana law to employ heat, cold, air, light, water, electricity, or sound as therapeutic agents."

Physical Therapists are traditionally known for their use of hot packs, massage and gait training. Occupational therapists are known historically for their use of arts and crafts, and developing independence in activities of daily living hence the use of the name occupational. Both professions are over 70 years old and have been progressive in incorporating technological advances to best meet their patients' medical needs. Length of stay in hospitals has decreased due to mandatory regulations and the demand for outpatient and home health services is increasing. As services to meet the demands of the consumers evolve so have therapeutic Insurance reimbursement demands that intervention practices. show a functional outcome; therefore physical therapists have increasingly incorporated some form of ADL-activities of daily living to follow their treatment and occupational therapists have increasingly incorporated therapeutic agents to facilitate functional This was not done haphazardly. Over the years instruction outcomes. regarding various technological advances have been added to curriculums, internships, continuing education programs and vendors themselves have become highly trained in the therapeutic application of modalities or better yet are therapists. This is a high tech world and we must be allowed to advance-what language we use today may limit us tomorrow.

> CONNIE L. GRENZ OTR/L MOTA PRESIDENT

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SENATE HEALTH & WELFARE EXHIBIT NO. DATE 1-14-91 BILL NO. SB 54 by Nathe

PAGE 2

Occupational Therapy students complete a 5 year educational program with internships of 3 mo. each in physical disabilities, pedicatrics and/or psychiatry. Curriculums vary but are AMA and AOTA approved. With this BS degree they are eligible to take the American Occupational Therapy Certification Board Exam. Fortyseven jurisdictions regulate OTs based on this exam, and only one limits the use of modalities. What is being taught in the schools must be foundation for advancement.

I have been the president of the Mt. OT Assoc. for the past 6 years and a member of the Board of OTs since licensure was enacted in 1985 until Jan 1, 1991. I have watched nationally as Physical Therapists have mounted enormous efforts to restrict other professions such as chiropractors and massage therapists. I believe that the majority of the OTs and PTs in this state work as a team sharing knowledge and developing treatment plans to best provide for their patients. I know that there are many areas of overlap innately a part of our treatment approaches and that we recognize our individual abilities and limitations with high professional ethics. There are 132 licensed occupational therapists and 330 licensed physical therapists and still great areas of Mt. where persons are unable to receive either service within 100 or 200 miles.

I wish to recognize high professional ethics among Occupational Therapists in Montana. Not one consumer complaint has been received by the board in 5 years. The purpose of licensure is not only to protect patients from unprofessional care but also to assure that the care they receive will be the best care available in light of the then current standards. It also imposes upon practitioners the responsibility for assuring that licensure does not impede or prevent the organic growth of the practice in response to advances in science, technology and therapeutic methods. Please note not one claim has been filed against an occupational therapist for injury to a patient with a physical agent modality, and I remind you that of 47 jurisdictions regulating occupational therapy only one restricts the use of modalities.

Therefore I emplore you to support SB # 54 to legally clarify the use of therapeutic agents/modalities by occupational therapists for our patients' sakes.

Thank you.

CONNIE L. GRENZ OTR/L MOTA PRESIDENT ,

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SENATE HEALTH & WELFARE EXHIBIT NO. DATE 1-14-91 BILL NO. 3B 54 by Nathe. (D2 of domment)

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14th day of <u>January</u> , 1991.
Name: Richard P. Lesaren M.C.
Address: 1145 N.29.16 54. Suite 12
- Binge Mit 59101
Telephone Number: 400 - 252 - 8403
Representing whom?
Montena Medica. Association
Appearing on which proposal?
Sende Bill #54
Do you: Support? <u>×</u> Amend? Oppose?
Comments:
Please see written testimony

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

€x. # (2) 1-14-91 5B54

SUPPORT SENATE BILL #54 RICHARD LEWALLEN, MD BILLINGS, MT

SENATE HEALTH & WELFARE
exhibit no.#2
DATE 1-14-91
BILL NO. 58 54

MY NAME IS RICHARD LEWALLEN. I AM A BOARD CERTIFIED ORTHOPEDIC SURGEON. I PRACTICE IN BILLINGS, MT. I DO GENERAL ORTHOPEDIC SURGERY AND HAND SURGERY. MY WIFE IS A PHYSICAL THERAPIST AND MY OLDER SISTER IS AN OCCUPATIONAL THERAPIST PRACTICING IN ALASKA.

I REFER PATIENTS TO <u>BOTH</u> OCCUPATIONAL THERAPISTS AND PHYSICAL THERAPISTS FOR TREATMENT. NINETY-NINE PERCENT OF MY REFERRALS TO OCCUPATIONAL THERAPISTS ARE FOR HAND AND UPPER EXTREMITY PROBLEMS DISTAL TO THE ELBOW.

I AM HERE TO URGE YOUR SUPPORT OF SENATE BILL #54 TO REMEDY SOME UNCLEAR LANGUAGE IN THE ORINGINAL PRACTICE ACT.

I TRAINED AT THE MAYO CLINIC IN ROCHESTER, MN. DURING MY HAND ROTATIONS THERE, I WORKED WITH DR. DOBYNS AND DR. LINSCHEID, TWO OF THE PIONEERS AND INNOVATORS OF MODERN AMERICAN HAND SURGERY. OCCUPATIONAL THERAPY SERVICES WERE SO IMPORTANT TO THE SUCCESS OF THEIR HAND PROGRAM THAT THEY WERE LOCATED RIGHT ON THE HAND FLOOR ADJACENT TO THE EXAMINING ROOMS. MODALITIES SUCH AS HEAT, ICE, ULTRASOUND, PARAFFIN BATHS AND WHIRLPOOL WERE READILY AVAILABLE TO HEL? WITH NON-OPERATIVE AND POST-OPERATIVE CARE. WITHOUT THE ASSISTANCE OF THESE OCCUPATIONAL THERAPY SERVICES, MANY OF THEIR PATIENTS WOULD HAVE HAD STIFF AND PAINFUL HANDS. THE USE OF MODALITIES IN THE TREATMENT OF HAND PROBLEMS IS CRUCIAL TO THE MOBILIZATION OF STIFF HANDS AND THE CARE OF HAND PATIENTS.

THE SCOPE OF OCCUPATIONAL THERAPY COVERS A BROAD AREA. OCCUPATIONAL THERAPISTS INVOLVED IN DIRECT PATIENT CARE HAVE HAD ADDITIONAL TRAINING IN THOSE AREAS OF INTEREST WHICH INCLUDES TRAINING IN MODALITIES. SUPPORT SENATE BILL #54 RICHARD LEWALLEN, MD PAGE TWO Ex. 2 1-14-91 38 54

IF SENATE BILL #54 DOES NOT PASS, PATIENTS WOULD BE REQUIRED TO SEE A PHYSICAL THERAPIST FOR MODALITIES AND THEN AN OCCUPATIONAL THERAPIST FOR EXERCISE. THIS WOULD BE AN ADDED EXPENSE TO THE PUBLIC IN TERMS OF TIME, MONEY, AND HEALTH. I THINK THIS WOULD ALSO BE A RESTRICTION OF TRADE AGAINIST THE OCCUPATIONAL THERAPISTS AND MAKE IT IMPOSSIBLE FOR OCCUPATIONAL THERAPISTS TO WORK IN THE STATE OF MONTANA. FURTHERMORE, IF THIS BILL DOES NOT PASS THE STATE OF MONTANA WOULD NEED TO EXAMINE THE USE OF MANY OF THOSE SAME MODALITIES ICE, HEAT, WHIRLPOOL IN OUR SCHOOLS AND COLLEGES AROUND THE STATE. IN MY EIGHT YEARS OF PRACTICE, I HAVE NEVER HEARD A PATIENT COMPLAIN OF AN OCCUPATIONAL THERAPIST IMPROPERLY USING MODALITIES.

IN MANY LARGE INSTITUTIONS, MAYO CLINIC INCLUDED, AIDES WITH HIGH SCHOOL EDUCATIONS AND ON THE JOB TRAINING APPLY MODALITIES SUCH AS ICE, CONTRAST BATHS, HEAT, PARAFFIN BATHS, DIATHERMY, WHIRLPOOL AND HUBBARD TANKS. THESE AIDES HAVE ACCESS TO AND SUPERVISION BY PHYSICAL OR OCCUPATIONAL THERAPISTS AS NEEDED.

CERTAINLY, OCCUPATIONAL THERAPISTS WITH THEIR MEDICAL BACKGROUND AND TRAINING ARE EVEN BETTER QUALIFIED IN THE APPLICATION AND USE OF MODALITIES.

I URGE YOUR SUPPORT OF SENATE BILL #54.

ORTHOPEDIC ASSOCIATES, P.S.C.

Suite 100, Yellowstone Medical Building 1145 North 29th Street - Billings, Montana 59101

Ex. 2 1-14-91 5B 5-4

Fractures and Orthopedic Surgery Medical Telephone (406) 252-8403 Business Telephone (406) 248-7161

W T. DANIELS, M.D. R. HUARD, M.D. DORR, M.D. R.P. LEWALLEN, M.D. (Pediatric Orthopedic Surgery) J. HANSEN, M.D. (Hand Surgery)

January 10, 1991

The Honorable Senator Montana State Senate Capital Station Helena, MT 59620

RE: Your support of **Senate Bill #54**, an act to permit licensed Occupational Therapists to employ physical therapeutic agents and procedures, amending section 37-24-103, MCA; and prividing an immediate effective date.

Dear Senator

I am writing you this letter and asking you to support **Senate Bill #54.** I am an orthopedic surgeon and do a fair amount of hand surgery. I use the services of both physical therapy and occupational therapy and have found the use of an occupational therapist's services to be essential in the proper care of patients with hand problems.

I ask you to vote in support of **Senate Bill #54**, with particularly the aspect where treatment "includes, but is not limited to the use of physical therapeutic agents and procedures" on Page 1, Line 9 and 10.

Sincerely,

Sector F. fundlan . O.

Richard P. Lewallen, M.D.

RPL/cda

SENATE COMMI' LE ON PUBLIC HEALTH, WELFF AND SAFETY

Exhibit #3, 1-14-91 SB 54

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WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record. Date: $(-14-9)$
Name: INARY KRENIK Otoc
Address: BILLIGGS MT
Address: BILLINGS MT Telephone Number: 2528485
Appearing on which proposal?
Appearing on which proposal? ± 54
Do you: Support? <u>X</u> Amend?Oppose? Comments:
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

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SUPPORT SENATE BILL #54 MARY A. BORGRUD-KRENIK, OTR BILLINGS, MT SENATE HEALTH & WELFARE EXHIBIT NO. $\frac{\# 3}{2}$ DATE <u>1-14-91</u> BILL NO. <u>5B 54</u>

MY NAME IS MARY KRENIK. I AM A NATIONALLY REGISTERED, STATE LICENSED OCCUPATIONAL THERAPIST. I SPECIALIZE IN HAND THERAPY AND PRACTICE IN BILLINGS.

I HAVE A BACHELOR OF SCIENCE DEGREE IN OCCUPATIONAL THERAPY FROM THE UNIVERSITY OF NORTH DAKOTA IN GRAND FORKS. MY COURSEWORK INCLUDED SUCH CLASSES AS: BIOLOGY, ANATOMY, PHYSIOLOGY, CHEMISTRY, PSYCHOLOGY, MUSCLE FUNCTION, MEDICAL SCIENCE, RESEARCH, O.T. IN PHYSICAL DISABILITIES AND O.T. IN PSYCHO-SOCIAL ILLNESS.

TWO CLINICAL AFFILIATIONS ARE REQUIRED FOR THIS DEGREE. ONE IN A PSYCH SETTING AND ONE IN A PHYSICAL DISABILITY SETTING. I HAVE COMPLETED TWO ADDITIONAL INTERNSHIPS: ONE IN VISUAL IMPAIRMENT AT THE NORTH DAKOTA SCHOOL FOR THE BLIND AND THE OTHER AT ORTHOPEDIC ASSOCIATES IN GREAT FALLS, A HAND SPECIALTY WITH DR. CHARLES JENNINGS.

MYSELF AND OTHER OCCUPATIONAL THERAPY STUDENTS ARE TRAINED AS GENERALISTS. WE GO ON TO WORK IN A VARIETY OF SETTINGS FOR EXAMPLE REHAB UNITS, STATE HOSPITALS, NURSING HOMES AND THE PUBLIC SCHOOL SYSTEM. WE TREAT PATIENTS WITH CEREDRAL PALSEY, PATIENTS WITH MENTAL ILLNESS, PATIENTS WITH STROKES AND PATIENTS WHO HAVE HAD INJURIES AT WORK. THE BREADTH OF OUR PROFESSION IS VERY EXCITING AND QUITE FRANKLY THE REASON I CHOSE THIS FIELD.

Exhibit # 3 1-14-91 SB 54

SUPPORT SENATE BILL #54 MARY A. BORGRUD-KRENIK, OTR PAGE TWO

OCCUPATIONAL THERAPISTS MAY GO ON AND SPECIALIZE IN NUMEROUS AREAS: SUCH AS BURN CARE, CHEMICAL DEPENDENCY OR HAND REHAB. THIS COMES ABOUT THROUGH CAREER CHOICES AND CONTINUING EDUCATION OPPORTUNITIES.

MY FIRST JOB OUT OF SCHOOL WAS FOR VAUGHN, BUCHANAN AND ASSOCIATES, A PRIVATE PHYSICAL THERAPY PRACTICE, IN GREENVILLE, SC. I SET UP AND DIRECTED THEIR HAND THERPY PROGRAM. IN THIS SETTING OT'S AND PT'S WORKED SIDE BY SIDE EACH USING PHYSICAL AGENTS WHEN APPROPRIATE.

I HAVE STRATEGICALLY ATTENDED HAND THERPY COURSES EACH YEAR: COURSES AT THE INDIANAPOLIS HAND CENTER IN INDIANA, WORKSHOPS ON HAND THERAPY PUT ON BY THE FOUNDATION FOR HAND RESEARCH IN NEW YORK AND ANNUAL MEETINGS FOR THE AMERICAN SOCIETY OF HAND THERAPISTS.

I HAVE HAD THE OPPORTUNITY TO GIVE PRESENTATIONS ON A STATE AND LOCAL LEVEL REGARDING HAND TOPICS AND HAVE PUBLISHED ON REFLEX SYMPATHETIC DSYTROPHY.

THE POINT I WANT TO MAKE IN MY TESTIMONY IS THIS: OCCUPATIONAL THERAPISTS ARE TRAINED AS GENERALISTS. THEY GO ON TO WORK IN A VARIETY OF SETTINGS WITH A VARIETY OF DIAGNOSES. MY TRAINING AND CAREER GOALS BROUGHT ME TO BILLINGS . I WORK FOR FIVE OF THE FINEST SURGEONS IN THIS STATE, PROVIDING HAND THERAPY. SINCE I MOVED TO THIS STATE ALMOST THREE YEARS AGO, MY OCCUPATIONAL THERAPY TREATMENTS, WHEN APPROPIATE, INCORPORATED SUCH PHYSICAL AGENT MODALITIES AS HOT PACKS, COLD PACKS, PARAFFIN WAX, AND STERILE WHIRLPOOL.

Exhibit #3 1-14-91 SB 54

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SUPPORT SENATE BILL #54 MARY A. BORGRUD-KRENIK, OTR PAGE THREE

SENATE BILL #54 IS NOT SOMETHING NEW RATHER IT SEEKS OT REMEDY SOME UNCLEAR LANGUAGE IN THE ORIGINAL PRACTICE ACT, BY SUPPORTING IT YOU WILL ALLOW ME AND OTHER THERAPISTS TO CONTINUE TO PROVIDE QUALITY CARE TO OUR PATIENTS, YOUR CONSTITUENTS. THANK-YOU. SENATE COMMIN E ON PUBLIC HEALTH, WELFA AND SAFETY Exhibit # 4^{\prime} 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Date: 1/14/9(
Name: Thomas Nyman
Name: <u>Thomas Nyman</u> Address: <u>1412 Aug C. Billing & MT. 59102</u>
Telephone Number: 245 540%
Representing Whom?
Appearing on which proposal? ∓ 54
Do you: Support? X Amend? Oppose?
Comments:
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

SUPPORT SENATE BILL #54 TOM NYMAN, BILLINGS MT

SENATE HEALTH & WELFARE	
EXHIBIT NO. 4	
DATE 1-14-91	
BILL NO. 5854	

MT NAME IS TOM NYMAN. I'M HERE TODAY FROM BILLINGS, MT TO SUPPORT SENATE BILL #54. THIS PAST SPRING I HAD A TRAUMATIC INJURY TO MY RIGHT HAND. I CUT TENDONS AND NERVES. I HAVE HAD TWO RECONSTRUCTIVE SURGERIES AT ST. VINCENT'S HOSPITAL.

I'M GRATEFUL TO DR. LEWALLEN AND MY OCCUPATIONAL THERAPIST. TODAY AFTER INTENSIVE THERAPY, I CAN WORK AGAIN. I CAN MAKE A FIST AGAIN.

MY THERAPY HAS INCLUDED MOSTLY SPLINTING AND EXERCISE. SOMETIMES MY THERAPIST HAD ME USE THE PARAFFIN WAX BATH IN PREPARATION TO EXERCISE. IT WARMED MY HAND AND MADE IT EASIER TO EXERCISE. I THINK IT HELPED ALOT WITH THE SCAR MASSAGE TOO.

IF YOU DON'T SUPPORT OCCUPATIONAL THERAPY BILL #54. MY THERAPIST AND THERAPISTS LIKE HER IN THE STATE COULD NOT CONTINUE TO USE THEIR ADVANCED SKILLS TO HELP PATIENTS LIKE ME. THANK-YOU. SENATE COMMIN E ON PUBLIC HEALTH, WELFA AND SAFETY

Exhibit # 5 1-14-91 SB 54 *

WITNESS STATEMENT

To be completed by a person t their testimony entered into	estifying the record	or a pe	rson wl	no wan	ts	
Date: JAU 14, 1991				_		
Name: HAT HUBER	<u> </u>					
Address: <u>PIQ HONTER</u> <u>HELENA, MT</u>	۹ ب	•		<u> </u>		<u>,</u>
HELENA, MT	59601	• •			· · ·	_
Telephone Number: 44.3-9	7.381 :	•			-	
Representing Whom?		3 1 1 1	<u>)</u>		,	
Appearing on which proposal?						<u> </u>
Do you: Support? An	nend?	Opp	ose?			×.
Comments:						
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

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SENATE HEALTH & WELFARE EXHIBIT NO. <u>#5</u> DATE <u>1-14-91</u> BILL NO. <u>5B 54</u>

I am textifing in favor of SB54 I recently retired from the Department of sainer and Rehalicitation Assures at an adminuticaline office with The Midicard Survices American. Thisp duties included the management of decupational therapp services as well as other therapy service under The Medicard program. When Midlicard adopted accupational This app services modelities and other procedures usere biasbeersed under The Kragrom. The intent was to provide Malicaid clients with bacie theropy services to present or allinote developing conditioner, ilmace or point and suffering. The odministrative lister were written. bradley and locked specificity. after a long period of regogiationed week the Montana Occupational Therapy accountion, The Department revised the original rule to and spinificily and coordinate the 1. enarlacel

----- Exhibit # 5 1-14-91 SB 54 inter was par to increase or decrease current services nor simbearsement anounty. modality service, were secularlievele only eff performed in conjunction auth and allound procedure. Modalities had always been minubeers of and such considered bosic verice of acceptions the tapel. In severing the sector, the Deportment and the Martience Occupational Therapy association also consulted suith The Occupational Theropy piersure Goard and the national association of Occupation of Therapisto, all concurred that modality sizure user basic to the process of acceptional therapp. The reverse sules were adopted in the fact of 1990 ord Michicard continues to semilerer for Thise siring today. I would like to add that up to July first last quar, the date of my setirement, the Dispartment had not received one com-plaint rejarding occupation of therapy services grand and chinese or cleard. No has the Occupational therapy filencers Doard sections any complaints regarding the practice of band modalities ling an accupational therapest. as a Medicoid employee, and now an a primate. Cetagea, I have been concornel about the delivery of Theraper ser riese to those in the issters part of Atale. As you know long distances and the service of therapesto makes the according of services eftremely difficult and outild montana medicand if fealing

Mondated approach services to all digitele clienter if medically necessary. If accupational therapisto are conclude to performe the basic services of their profession, medicaid has no other because that to transport the client to the rearest medical placteories whe can provede the service - generally a practioner, in Alsead Fells or Hillings. This means the additional mileage and pir dien costs for the Client and his attendant if the client is undele to transf alone. This may be as money as teres on three trips per week for several months. These additional costs far transportation can be seminated if acceptions therapeter are allowed to perform the basic modality services authin this professione. I stewryby linge the Committees support 354 07 53 52/

-Exhibit #5 1-14-91 SB 54

-Exhibit #6 1-14-91 SB 54

WITNESS STATEMENT

i V i . . .

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 4 day of, 1991.
Name: Auge Orall
Address: 1335 Min Aplendor W
- Ozinan ME 59715
Telephone Number: 586 4066
Representing whom? Occupational thrapp assoc Boguan Lungton
Appearing on which proposal?
Devate Bill 54
Do you: Support? Amend? Oppose?
Comments:

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

January 14, 1991

SENATE HEALTH & WELFARE
EXHIBIT NO. #6
DATE 1-14-91
BILL NO. 53 54

My name is Dorinda Orrell.

I am here today to support Senate bill 54 clarifying occupational therapists' use of therapeutic agent modalities.

I have received occupational therapy for the rehabilitation of my upper extremity. My occupational therapists successfully applied functional electrical stimulation to facilitation return of movement. My occupational therapists also applied, safely and successfully, biofeedback to assist with relaxation of the muscles of my upper extremity.

I found my occupational therapists to be competent of their knowledge of these modalities and in their safe use. They were always informative of the reasons why. These units were utilized in my occupational therapy program. My doctor has supported my use of occupational therapists for my upper body rehabilitation.

I will continue to need occupational therapy in my life. I will continue to need these therapeutic agents in my recovery of my upper extremity. I will continue to choose occupational therapists to treat my upper body.

Please support this legislation in clarifying that occupational therapists are qualified to use therapeutic agents in conjunction with occupational therapy procedures.

Thank you. Dorinda Orrell

inde arel

-Exhibit # 7 1-14-91 SB 54

WITNESS STATEMENT

7

. . ·-

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14 day of $3an$, 1991.
Name: Linda Botten Ander F
Address: 122 Erik Gudy Bolewing
Bozoman, Mt 220 Rosibush lane Begridy, M. 59714
Telephone Number:Blgudy, MH. 59714
Representing whom?
MOTA As burement chair
Appearing on which proposal?
Do you: Support? Amend? Oppose?
Comments:
I greatly support senate bill 54
- we are qualified and educated
in its proper use.
- Roase Support this legislation
enclosed testimony.
\mathcal{T}

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

Occupational Therapy Associates of Bozeman, Livingston and Butte

300 N. Willson 802 H Bozeman, MT 59715 Phone (406) 586-3716

SENATE HEALTH & WELFARE
EXHIBIT NO. 7
DATE 1-14-91
BILL NO. <u>5B 54</u>

January 14, 1991

Dear Senator Eck and the Public Health Committee:

My name is Linda Botten. I have been a registered occupational therapist for 14 years and have lived in Bozeman for the last 8. I own and direct an independent practice employing 12 occupational therapists and 1 physical therapist. Today I am here to speak to you as the reimbursement chairperson of the Montana Occupational Therapy Association. This responsibility allows me to represent occupational therapists throughout the state and also act as a liaison between occupational therapists and 3rd party payers. In my role as a reimbursement chairperson, I have the opportunity to meet with state and federal payers of occupational therapy. This includes Montana Worker's Compensation, Montana Blue Cross/Blue Shield, Montana Medicaid and Montana Medicare intermediaries. In my interactions with these major payers, I have had the opportunity to specifically discuss occupational therapists' use of therapeutic agent modalities. They currently understand and accept readily the reimbursement of these modalities by occupational therapists. To my current knowledge, there has not been a denial of a claim in Montana of an occupational therapist billing for therapeutic agent modalities. In fact, the insurers readily accept the understanding that occupational therapists are qualified in their use.

There has been a continued challenge by physical therapists regarding such practices by occupational therapists, stating that 3rd party payers are confused and consider in an overlap if both professions bill. However, this is quite contrary to the actual situation as we have repeated documentation of coverage by these payers. In fact, the CPT codes (physician current procedural terminology) lists therapeutic agent modalities, and these are the codes accepted by most 3rd party payers. These codes are acceptable codes for occupational therapy and are not exclusive to the physical therapists.

To provide you with a rational perspective, Medicare has, and continues to, reimburse occupational therapists for therapeutic agent modalities.

In closing, please support this important legislation, to clarify occupational therapists use of therapeutic agent modalities.

Thank you.

Linda Botten, OTR/L

LB:mj

Occupational Therapy Associates

-Exhibit # ⊖ 1-14-91 SB 54

WITNESS STATEMENT

. 4

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14 day of January, 1991.
Dated this <u>'if</u> day of <u>January</u> , 1991. Name: <u>hinda Barge Physics Therapist</u>
Address: 210 W Hayes
Telephone Number: <u>587-7981</u>
Representing whom?
OT association
Appearing on which proposal?
5B 54
Do you: Support? Amend? Oppose?
Comments:
disagree with linguiting scope
Aisagree with limiting scope by DT practice to restrict use up
modulities

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

Occupational Therapy Associates

of Bozeman, Livingston and Butte

300 N. Willson Suite 2003 Bozeman, MT 59715 Phone (406) 586-3716

SENATE HEALTH & WELFARE
EXHIBIT NO. 8
DATE 1-14-91
BILL NO. 5B 54

January 14, 1991

To: Senator Dorothy Eck Re: SB 54 From: Linda Barge, PT

Dear Senator Eck:

It has recently come to my attention that the Montana Chapter of the American Physical Therapy Association has been seeking to limit the use of modalities by occupational therapists in their practice of occupational therapy. Not all Montana physical therapists agree with the chapter's pursuit of limiting occupational therapists in this area.

Occupational therapists, which I have worked with previously, often in hospital or rehabilitation clinic settings, have used ice, heat, parrafin, massage and other modalities in conjunction with other treatment techniques to aid in their goal of restoring function for activities of daily living (dressing, feeding, bathing, etc.). As I worked with occupational therapists, both of us members of a health care team designed to restore independence and quality to a patient's life, we were not thinking about ways to limit one another's professional practice. We worked together for the benefit of the patient.

The idea of working together and putting the patient first appears to get lost in this issue. Occupational therapists have an educational background resulting in a Bachelor of Science degree, which certainly prepares them to learn any skills necessary to use modalities. Continuing education courses are constantly available and often include both occupational and physical therapists in their target audience.

I'm discouraged by the Montana Chapter's use of members time and money to support such a negative endeavor. Alienating members of a profession that we work closely with seems short sighted and unwise. Physical therapists work to restore a patient's mobility. Occupational therapists work to restore a patient's ability to perform functional activities. Both may need to use modalities to attain their goals. I hope we can pull together for the benefit of the patient.

Lindo Brige

Linda Barge, Physical Therapist Pediatric Therapy Association

LB:mj

Occupational Therapy Associates

ENATE COMM FEE ON PUBL	LIC HEALTH, WELL E	EXHIBIT NO.	
	WITNESS STATEMENT	DATE 1-14-91 BILL NO 5854	
To be completed by a pe their testimony entered Date: ///4/9/	rson testifying or a into the record.	a person who wants	
$\int dx dx dx$			-
Name: <u>Sue Garcia, C</u> Address: <u>10 7CSCONY</u> <u>USLA</u> , MT Telephone Number: 2 51	TR/L		
Address: 10 7CGLONY	CT	ţ	_
USCA, but	59803		- •
Telephone Number: 75/	-2821	· · · · · · · · · · · · · · · · · · ·	_
Representing Whom? M. J., A	•		
Appearing on which prop 14/33 54			
Do you: Support? <u>:</u> Comments:	Amend?	Oppose?	
			-
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

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SENATE COMMIN LE ON PUBLIC HEALTH, WELFA AND SAFETY

-Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.

Date: 1-14-90

Name: Audroug Honsipt
Name: Audrey Hensiek Address: 26031/2 10 Ave 10.
Address: <u>260372 70 9406 70</u>
Billings, MT 59107.
Telephone Number: 406: 248-6561
Representing Whom?
Mentana Occupational Therapy Association
Appearing on which proposal?
Senate Bill 54
Do you: Support? Amend? Oppose?
Comments:
<u>I support Senate Bill 54</u> . If Occupational Therapists are not allowed to practice skills for which they are trained, I feel vetention of staff and recruitment of maintain to consist in the severely jerpardized

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

Marin

SENATE COMM FEE ON PUBLIC HEALTH, WELL E AND SAFETY

---Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Date: 14 Jun 91
Name: <u>Clapeth Richards</u> Address: <u>719 Parkiren Way</u> <u>Missoula</u> , Mt 59803
Address: 719 Parkiren Way
Telephone Number:
Representing Whom?
Appearing on which proposal?
Do you: Support? Amend? Oppose?
Comments:

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

January 14, 1990

To: The Honorable Senator Dorothy Eck, Chair

My name is Elspeth Richards and I've been a practicing Occupational Therapist for 14 years. As the director of the largest Occupational Therapist department in the state of Montana, I would like to make some comments regarding the issue of the use of physical agents by Occupational Therapists.

1. At our hospital, 23 Occupational Therapists work closely, daily with 26 Physical Therapists. The O.T./P.T. relationship has always been extremely good. We share information, sometimes cotreating patients. Our model, educationally, is to share information openly to any other discipline interested. It is not uncommon for a therapist to return from a workshop and share information to their peers, whatever the discipline.

I find it discouraging that some professionals choose to attack others rather than working cooperative to achieve the very best care for the patients.

I would like you to be aware, it is by no means all Physical Therapists who challenge the Occupational Therapist licensure bill. Many will not be here, write, or call, but still are supportive of the concept that, as professionals, we are skilled enough to determine the appropriate and proper use of physical agents guided by our own professional code of ethics.

2. At our hospital, we treat a wide variety of diagnoses-orthopedic, brain injuries, arthritis, neurologic patients and more. The physical agents in question have been used historically by O.T.'s and P.T.'s to improve the patients condition. Commonly, in Occupational Therapy the agent is followed by a functional activity to facilitate the extremities use in activities of daily living. It does not duplicate, but provides yet an additional opportunity for the patients to improve his or her lost skill.

3. One of my biggest concerns is that of patients care. I have recently hired a hand specialist from the internationally known Seattle Hands Surgeons Group. If she is restricted from the use of physical agents, she will choose to leave the state since it will significantly affect her treatment options.

There is a national shortage of Occupational Therapists, including hand therapists and the consumer, our patients, are the ones who will lose.

Clepith Richar Do ot R/L

SENATE COMMING & ON PUBLIC HEALTH, WELFA AND SAFETY

---Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record. Date: $1/(4/9)$
Name: <u>Karen Luttvell</u> Address: <u>3937 Stevi River Róad</u> Stwensville MT 59890
Telephone Number: 777-28/5
Representing Whom? Montana OT ASSOC.
Appearing on which proposal? $HB 54$
Do you: Support? Amend? Oppose?
Comments: Aupport the MOTA position on this
Laupport the MOTA position on this issue as I am a practicing occupational therapist in montana
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

SENATE COMMIN : E ON PUBLIC HEALTH, WELFA AND SAFETY -Exhibit # 9 1-14-91 SB 54 WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.	
Date: Jan 14, 91	
Name: Taughtuni	
Address: 328 Plymonth St.	
Mussoula, Mr. 59801	
Mussoula, MC. 59801 Telephone Number: 406 728 - 5010	
Representing Whom? State of montalia OT 5	!
Appearing on which proposal? 93 54	
Do you: Support? Amend? Oppose?	3.
Comments:	

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14 day of Imurry, 1991.
Name: Heidi Lewis
Address: 142 Alderson Ave
Billings Mt 59101
Telephone Number: 406 - 259 - 7012
Representing whom?
Montana Occupational Therapy Assn.
Appearing on which proposal? Senate Bill 54
Do you: Support? Amend? Oppose?
Comments: If p.T.'s are not allowed to use borned Modernities in the treatment et oue patients individuels around the state of MT will be deprived of the opportunity for comprehengive Quality therapy.
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Date: Jan, 14, 1991
Name: Janet Bauer
Address: 1320 9th St. So, #14
Great Fails MT 59405
Telephone Number: 771-7801
Representing Whom?
On behalf of Debra J. Ammandson - delivering. Appearing on which proposal? Written statement
Appearing on which proposal? Written statement
SB #54
Do you: Support? Amend? Oppose?
Comments:
Lee letter this date
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

-Exhibit # 9 1-14-91 SB 54

January 14, 1991

Senate Health Care Committee Chairman and Members of the Committee

As Chairman of the licensure board for occupational therapy and a practicing therapist for the past 14 years, I am writing to you today rather than attend this hearing as I am treating one of Montana's most valuable resources, its citizens. It has been extremely difficult for me to maintain a neutral position on this legislation for a number of reasons, mainly the timeliness of this issue and the diverse interests of the professionals involved. My initial reaction of learning that this bill was proceeding on January 4, was opposition, and to some extent remains the same unless changes can be made to the satisfaction of the parties involved.

It appears that the primary issue at stake here is providing quality care to our patients and the maintenance of the integrity of health care practitioners. Throughout the state, Montana as a whole cannot afford to lose any of its citizens, whether they are patients who cannot get adequate healthcare or health care providers who cannot practice their profession.

I urge the committee to hear all of the issue and allow the task force previously established to find language suitable to all parties concerned.

Again, as I stated before our patients and their welfare versus professionals and their "turf" are the issue. I have great faith that all parties involved will find a solution and help Montana remain the great state that it is for all of its citizens.

Sincerely,

al yo

Debra J. Ammondson, MOT, OTR/L Assistant Director, Physical Medicine and Rehabilitation Services Columbus Hospital SENATE COMMI' : ON PUBLIC HEALTH, WELFA AND SAFETY

Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a their testimony entered into the record. Date: $\frac{1-14-9}{1}$	a person v	vho wan	ts
Name: Uivian Osteemiller			\$ \$,
Address: <u>4222</u> <u>Mitchell</u> <u>Gilling</u> , mt 5910/	1		
Telephone Number: <u>248-1308</u>		·	
Representing Whom?		•	
Appearing on which proposal? $\frac{\# 54}{}$	· ·		
Do you: Support? Amend?	Oppose?		•
Comments:			· · ·
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

SUPPORT SENATE BILL #54 VIV OSTERMILLER, BILLINGS MT

GOOD AFTERNOON, MY NAME IS VIV OSTERMILLER. I'M FROM BILLINGS. MY ORTHOPEDIC SURGEON IS DR. JEFF HANSEN. HE REFERRED ME TO AN OCCUPATIONAL THERAPIST AFTER I CAUGHT MY ARM IN A BOX CRUSHER AT BUTTREY'S WHERE I USED TO WORK.

AFTER ONE OF MY SURGERIES -- MY HAND WAS SO SWOLLEN AND SO PAINFUL. MY THERAPIST USED ICE PACKS. THIS HELPED WITH THE SWELLING AND MADE IT ALOT MORE COMFORTABLE WHEN SHE MADE MY SPLINT.

MY THERAPIST HAS WORKED IN THIS STATE FOR OVER TWO YEARS. SHE HAS USED HOT PACKS AND COLD PACKS ALL ALONG AND HAS HELPED MANY MORE THAN THE TWO OF US YOU SEE HERE TODAY. WE'RE VERY LUCKY. I HOPE THAT YOU WILL SUPPORT #54, SO THAT OTHERS CAN CONTINUE TO GET GOOD CARE. THANK-YOU SENATE COMM FEE ON PUBLIC HEALTH, WELL & AND SAFETY

Exhibit # 9 1-14-91 SB 54 .

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Date: 1/14/91
Name: Drane Neuman CTN/L: Becca Robertion CTN/L
Address: 2327 Grt Missuch Rd
Usla MT 59403 Telephone Number: 726-4140 ; ext \$170
Representing Whom? M.O.T.A
Appearing on which proposal? HB 54
Do you: Support? <u>\</u> Amend? Oppose?
Comments: <u>See Videotape - "Physical Agents + Their</u> Use"
Comments:

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE

Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this $14'$ day of an , 1991.
Name: Kynne Exone
Address: 578 S. Rodney
Lelena MT
Telephone Number: <u>449-3899</u>
Representing whom?
07
Appearing on which proposal? $\leq \mathcal{B} \leq \mathcal{C}/$
Do you: Support? Amend? Oppose?
Comments:
The I goal of OTST PT's is the care
The pool of OTST PT's is the care
Each dissipline - although - They lack
Each dissipline - although - They lack May indeed use Therapeutic agents
y modalitie - still have different
means to abtain That ultimate goal.
The is of A set in the A
There is plenty of mork in This state
for all - Curry the haskles. Ot's are not
Friging to diest P.T.S. I work with
a PT-me mork as a tram-not at
opposing factions at's hope This case
PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY
can be recolled path factorily to all

SENATE COMM FEE ON PUBLIC HEALTH, WELL RE AND SAFETY

Billings

Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.

Date: 1-14-91

Name: Richie Rosen
Address: 845 Whispenng Pine
Billings, MT
Telephone Number: 2489374
Representing Whom?
Deaconess Medical Center
Appearing on which proposal?
Private citizen / MOTA
Do you: Support? Amend? Oppose?
Comments:
Represent Republication services including
Represent Republication services including Decupational, Physical, and Speech Therapy
at Dearones Medical Conter.
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

Exhibit # 9 1-14-91 SB 54 Riche Roen Occupational Therapist. Today I am representing the therapists from Deaconess Medical Center in Billings the are we as occ, phys, and speech therapists are dedicated to continuing to serve our patients and the community with quality, comprehensive care.

Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14 day of January, 1991.
Name: Scott A. Crawford
Address: 639 Mowell St.
Missoula, MT 59802
Telephone Number: 728-0191
Representing whom? Kritarte Citize
Appearing on which proposal? $SBS4$
Do you: Support? Amend? Oppose?
Comments: Missorda,
Manife is an OT but if undalities are
rescienced perto Attorney General's cetion,
it will serve ly limit un in Fe's a fility to
practice, and although I myrelthama
fourth-generation Montana mative who
ve true to Mon tare from out of state
to Jusue employment apportunities, he
inch be forzeilte leave the state
Mire is werely a personal example
of the Attom General's action that can
serve only to help, among other things, ende Mantan's deenouise and tax lidge as
trellasits population The AG's acriandenants
PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY
a legislative response. Support these here

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14 day of January, 1991.
Name: Janet Bauer
Address: 1320 9th St. So. #14
Great Falls, MT 59405
Telephone Number: <u>171-7801</u>
Representing whom?
MT. U.T. Ass'n; OT-PT Task Force
Appearing on which proposal? $SB = 54$
Do you: Support? Amend? X Oppose?
Comments: creating Sub-Committee
As Senate Bill # 54 is worded currently, I am
not in favor of the legislation. If the language is amended to clarify therapeutic
agents specifically related to d. t. procedures
Then I would re-consider & possibly
support legislation during this 1991 reasion
I concur with into prevented by Sail
Whenthey re: chy of OT-PT Tack Force
Vheatley re: chx of OT-PT Tack Force.

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

Exhibit # 9 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this $\frac{14}{M}$ day of $\frac{\sqrt{2}}{\sqrt{2}}$, 1991. Name: $Mary M$ (hurchill
Address: 4300 62nd Ave SW Great Fulls MT 5940K
Telephone Number: 406- 761-0092
Montana OT. Assoc.
Appearing on which proposal?
Do you: Support? Amend? Oppose?
Comments:
- Would support Servite bill 54 with an
amendment to allow a task force to
establish a cooperature effort in Inding
- proper wording the for a indiced
PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

-Exhibit #/0 1-14-91 SB 54

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this <u>M</u> day of <u>Januar</u> , 1991.
Name: Louis R. Wight, PT.
Name: Louis R. Wight, PT. Address: <u>Ro. Box 341</u>
Red hidge, 187. 59668
Red Lidge, N.T. 59068 Telephone Number: 496 1/12
Representing whom?
Mintana Chapte: ANTA
Appearing on which proposal?
Semte Bill 54
Do you: Support? Amend? Oppose?
Comments:

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY



MONTANA CHAPTER OF THE AMERICAN PHYSICAL THERAPY ASSOCIATION

January 14, 1991

To: The Senate Public Health, Welfare, and Safety Committee

Re: Senate Bill 54, A bill modifying the Occupat SENATE HEALTH & WELFARE Therapy Practice Act EXHIBIT NO. /O

Dear Chairman Eck, and Members of the Committee, DATE / -16 - 91

I am Lorin R. Wright, P.T. President of the MOHLMA $\underline{SB54}$. Chapter of the American Physical Therapy Association. The Montana Chapter represents approximately 72 percent of the practicing Physical Therapists in the State of Montana. It is the position of the Montana Chapter that we cannot support this bill as introduced.

Key Points of Testimony:

1. Physical Therapists have been asked to teach physical agents and procedures to Occupational Therapists due to their lack of knowledge in these areas.

2. Multiple attempts at opening communication over the issues were made by the Montana Chapter of the APTA which failed or were ignored by the Occupational Therapists.

3. At the request of the OT's a joint task force was formed to investigate the issues and who recommends no legislation at this time and further investigation of the problems between the professions. This legislation undermines the function and success of this task force.

4. This is a turf battle not of our choosing regrettably staged at this hearing.

5. The OT language asks not only to perform OT but PT and any thing they wish in the future.

6. This results in duplication of treatment and increased cost to patients and payors.

7. A survey of OT educational programs indicates a severe lack of educational preparation for the asked for services. They are also not tested on these items in their licensure exams.

8. The primary concern of the Montana Chapter of the APTA is to protect the public of Montana.

To provide an historical perspective on this issue, the Montana Chapter of the APTA was first made aware of a problem with Occupational Therapists using therapeutic agents when our officers were being contacted by our members



MONTANA CHAPTER 1-14-91 SB 54 OF THE

Exhibit # 10

2

AMERICAN PHYSICAL THERAPY ASSOCIATION

from several areas of the state who were being asked to instruct Occupational Therapists in their hospitals to use therapeutic agents and specific procedures. These ranged from heating and electrical modalities to joint mobilization and gait training. Our response to this was to contact the state occupational therapy association which resulted in a meeting being set which was abruptly cancelled by the occupational therapists. Further attempts to open communication by us were unanswered. Finally this last October a joint task force was established (at the request of the Occupational Therapists) with both associations appointing three members each to investigate the issues and work on mutually acceptable solutions. This process is not complete and has been undermined by this legislation. Our Chapter has voted unanimously to support the efforts of the task force and feel it is premature to be debating legislation on this issue and regretable that a turf battle which we have been forced into must take place at this hearing.

The Occupational therapists have expressed that they feel we are inhibiting their profession and taking away some things they are presently performing. This is untrue, they presently are performing activities which this body has not given statutory authority.

Our interpretation of what is being asked for in this bill is not only to practice Occupational Therapy but also Physical Therapy! This would lead to needless duplication of treatment and needless increase in costs to patients and payors. These are two necessary but separate professions requiring separate skills and therefore licensed separately.

Our research of over 30 Occupational Therapy schools indicates a severe lack of educational preparation for the use of physical therapeutic agents and procedures. This is verified by the requests from Occupational Therapists to be instructed in the use of these agents and procedures. This therefore leaves the public of Montana unprotected. The unlimited wording used in their proposed legislation would allow expansion into areas now undefined without knowledge of educational preparation. Their present wording regarding the supervision of Certified Occupational Therapy Assistants would allow delegation to even lesser educated individuals.

Even though this appears as a conflict between these two professions the primary concern must be the protection of the public.

Sincerely,

Lorin R. Wright, President Montana Chapter APTA P.O. Box 430 Red Lodge, Mt. 59068

DATE: January 14, 1991

Senate Public Health Committee TO:

Rebard boydone FROM: Richard Gajdosik, PT, PhD Associate Professor and Chairman Physical Therapy Department University of Montana

SENATE HEALTH & WELFA! EXHIBIT NO. // DATE 1-14-91

RE: Senate Bill 54

I am opposed to this Bill because it defines occupational therapy as the "use of physical therapeutic agents and procedures." I find this definition too broad and not in line with what I know about the educational preparation of occupational therapists. I want to share with you what physical agents include, how our program prepares physical therapists in the use of physical agents, and why I believe this definition is inappropriate.

Physical Therapeutic Agents include many physical agents that require in-depth study and practice prior to learning safe and effective treatment. It includes the application of superficial infrared heat and cold (such as whirlpool, hot packs, paraffin bath, light, and various cold therapies), deep heat (such as microwave and shortwave diathermy, and ultrasound therapy), electrodiagnosis and electrotherapy (such as transcutaneous electrical nerve stimulation, high voltage galvanic stimulation, functional electrical stimulation, nerve conduction velocity, electromyography and biofeedback). It also includes the application of various spinal traction procedures. Defining occupational therapy as this Bill does is too broad and would allow occupational therapist to practice outside the role and scope of their profession in light of their basic educational preparation. To my knowledge, their education does not include the study of physical agents. This I know from a recent survey we conducted. Examination of the curricula of a representative sample of 16 occupational therapy programs from throughout the United States revealed that none included formal courses in physical agents. Thus, they do not have a basic education in physical agents, and I don't believe continuing education courses alone would be adequate to cover this deficiency.

Physical therapy programs, on the other hand, include classroom instruction, laboratory practice and clinical practice of physical agents in order to meet accreditation standards and criteria. Cur students receive in-depth instruction in basic and applied sciences, including pathology and pathophysiology, in order to understand the normal physiology, abnormal physiology, indications and contraindications of the application of physical agents. Physical agents are tested on the licensure examination: I doubt that they are tested for occupational therapy licensure because they are not taught. The rigorous education we provide

Exhibit # \\ 1-14-91 SB 54

for physical therapists is done for one fundamental reason, to produce clinicians who can apply physical agents in a safe and effective manner. Meeting accreditation standards and criteria, and the licensure exam are the methods used to ensure the safety of patients, and this I am sure is a concern of yours. The safety of the public should be protected.

I find it disturbing that the occupational therapists wish to skip the basic step of a formal educational preparation, particularly in view of the academic and clinical rigors that we must meet in order to prepare physical therapists.

In closing, I believe this Bill is premature and far too openended. I Thank you, senators, for your time. Exhibit 11 also contains education requirements for Occupational Therapists from 14 schools. The originals are stored at the Montana Historical Society, 225 North Roberts, Helena, MT 59601. (Phone 406-444-4775)

WITNESS STATEMENT

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To be completed by a person testifying or a person whSENMAREN HEALTH & WELFARE their testimony entered into the record.
Dated this 14 day of Ganuary, 1991. DATE 1-14-91
Dated this 14 day of <u>January</u> , 1991. DATE 1-14-91 Name: Jail Wheatluj BILL NO. SB 54
Address: 3625 7 Ave. So.
Great Falls MT 59405
Telephone Number: 761-0471 work 453 2603 home
Representing whom?
Physical -therapists
Appearing on which proposal?
Do you: Support? Amend? Oppose?X
Comments: written
typed statement left with secretary

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MONTANA CHAPTER ^{1-14-91 SB 54}

Exhibit #12

AMERICAN PHYSICAL THERAPY ASSOCIATION

January 14, 1991

Testimony given before the Senate Public Health Committee regarding Senate Bill 54.

My name is Gail Wheatley. I am a physical therapist in Great Falls and the Physical Therapist chair of the joint PT/OT Task Force I am about to describe to you.

Following the SRS hearing in April on the use of and reimbursement for physical agents by OT's and the requested Attorney General's opinion, communication between PT and OT disintegrated in the state and was relegated to occasional barbs and lack of discussion.

I met with Deb Ammondson OT and Abby Meschberger PT in Great Falls to determine if there was a way to begin to talk about this issue and its potential for resolution. Both Chapters agreed to form a PT/OT joint Task Force comprised of 3 members each and they were appointed by respective Executive Committees.

The first meeting was held in October, and the groundwork laid. Issues were clarified on both sides and a better understanding of each other obtained. We agreed to meet again in December and continue along a dec more clearly defined avenue toward agreement. I asked Janet **Dever**, OT member of the Task Force, if any legislation was planned by the OT's. She asked her Chapter President and was told/ho. We met on December g and drew up our proposal with the agreement that legislation at that late date would not be wise and began to formulate a written plan for possible legislation in 1993. You have a copy of the final draft proposal in front of you.

No member of the joint task force had prior knowledge of this bill. The OT's were informed a few days before its introduction. This member read it in the Tribune Tuesday, January 8. Deb Ammondson has sent given me within trating that, as chair of the OT licensing Board, they also had no prior knowledge, nor was the general OT membership given an opportunity to vote.

The joint Task Force was formed in good faith to initiate dialogue with the end point being satisfactory resolution on both sides for a united front if legislation were proposed. This already-in-place mechanism was preempted and surreptitiously derailed. We believe the potential remains for continued work toward agreement and, in fact, the MT Chapter APTA, at its regular winter meeting this past weekend, unanimously voted to support the continued mission of the Task Force, regardless of whatever legislative outcome.

oral report

SB 54 Wheatley testimony Page 2

This bill contradicts all recommendations of the Task Force and no input was requested prior to introduction of this bill. The proposal indicates an immediate charge of information-gathering, with respect to education, accreditation, and licensing. Listed under Future Process is "develop an action plan for jong term formal resolution, including possible legislative activity, with cooperation of both executive boards." This was sent out under a cover letter dated January 7.

I ask you to oppose this bill in its current form and return responsibility to the Chapters and their Task Force, to carefully study our problems, potential solutions, options and areas for compromise. We need more time. We cannot decide the course of OT and PT in Montana with no joint deliberations.

Thank you.

Gail Wheatly PT

Bailer. Janet Bower, OT member of the Task Force, is in the audience, and I would like her please to stand and verify that this information, with regard to the Task Force's purpose, goals, and recommendations, is correct.

SENATE HEALTH & WELFARE EXHIBIT NO. <u>13</u> DATE <u>1-14-91</u> WITNESS STATEMENT BILL NO. <u>SB 54</u>
To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this <u>14</u> day of <u>famlen</u> , 1991. Name: <u>Man</u> <u>faminan</u>
Address: Power Block ye
Neling, mt 59601
Telephone Number: (406) 112-5581
Representing whom?
mt. Chapter of american DT association
Appearing on which proposal?
SB 54
Do you: Support? Amend? Oppose?_X
Comments:
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PT 127's do not have ed.
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

13.

37-11-101

PROFESSIONS AND OCCUPATIONS

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Part 1

General

37-11-101. Definitions. Unless the context requires otherwise, in this chapter the following definitions apply:

(1) "Physical therapy" means the evaluation, treatment, and instruction of human beings to detect, assess, prevent, correct, alleviate, and limit physical disability, bodily malfunction and pain, injury, and any bodily or mental conditions by the use of therapeutic exercise and rehabilitative procedures for the purpose of preventing, correcting, or alleviating a physical or mental disability.

(2) "Physical therapist" or "physiotherapist" means a person who practices physical therapy.

(3) "Physical therapy student" or "physical therapy intern" means an individual enrolled in an accredited physical therapy curriculum and who, as part of his professional, educational, and clinical training, is practicing in a physical therapy setting under the direction, guidance, and observation of a licensed physical therapist.

(4) "Physical therapy assistant" means a person who is a graduate of an accredited curriculum approved by the board and who assists a physical therapist in the practice of physical therapy and whose activities require an understanding of physical therapy.

(5) "Physical therapy practitioner", "physical therapy specialist", "physiotherapy practitioner", or "manual therapists" are equivalent terms, and any derivation of the above or any letters implying the above are equivalent terms; any reference to any one of them in this chapter includes the others but does not include certified corrective therapists or massage therapists.

(6) "Physical therapy aide" means a person who aids in the practice of physical therapy and whose activities require on-the-job training and supervision by a licensed physical therapist who must be available for periodic checks during any procedure or treatment involving a patient.

(7) "Board" means the board of physical therapy examiners provided for in 2-15-1858.

(8) "Department" means the department of commerce provided for in Title 2, chapter 15, part 18.

(9) "Hearing" means the adjudicative proceeding concerning the issuance. denial. suspension. or revocation of a license. after which the appropriate action toward an applicant or licensee is to be determined by the board.

History: En. Sec. 1, Ch. 39, L. 1961; amd. Sec. 241, Ch. 350, L. 1974; R.C.M. 1947, 66-2501(part); amd. Secs. 3, 5, Ch. 491, L. 1979; amd. Sec. 3, Ch. 274, L. 1981.

37-11-104. Physical therapy — evaluation and treatment. (1) Physical therapy evaluation includes the administration, interpretation, and evaluation of tests and measurements of bodily functions and structures; the development of a plan of treatment; consultative, educational, and other advisory services; and instruction and supervision of supportive personnel.

(2) Treatment employs, for therapeutic effects, physical measures, activities and devices, for preventive and therapeutic purposes, exercises, rehabilitative procedures, massage, mobilization, and physical agents including but not limited to mechanical devices, heat, cold, air, light, water, electricity, and sound.

(3) The evaluation and treatment procedures listed in subsections (1) and(2) may be performed by a licensed physical therapist without referral.

History: En. Sec. 4. Ch. 491, L. 1979; amd. Sec. 1. Ch. 240, L. 1981; amd. Sec. 3. Ch. 55, L. 1987.

BOZEMAN PHYSICAL THERAPY CENTER Suite 703G • Medical Arts Center 300 North Willson Bozeman, Montana 59715 (406) 587-4501

SENATE HEALTH & WELFARE
EXHIBIT NO. 14
DATE 1-14-91
BILL NO. SB 54

KEY POINTS REGARDING SENATE BILL 54

- 1: OCCUPATIONAL THERAPISTS ARE ATTEMPTING TO TOTALLY ASSUME RESPONSIBILITIES AND PRACTICE OF PHYSICAL THERAPY.
- 2: PHYSICAL THERAPY AND OCCUPATIONAL THERAPY ARE DISTINCT PROFESSIONS INCLUDING THEIR EDUCATIONAL BACKGROUND.
- 3: <u>OCCUPATIONAL THERAPISTS DO NOT RECEIVE THE NECESSARY</u> <u>EDUCATION AND TRAINING TO PERFORM THE DUTIES COMMENSURATE</u> <u>WITH THIS BILL.</u>
- 4: ALLOWING THIS BILL CAN HAVE THREE HARMFUL AFFECTS:
 - A: Direct soft tissue or bone harm in the form of burns or strains.
 - B: Inappropriate use or sequence leading to exacerbation of pathology extending recovery time.
 - C: Significant increase in cost to patients and payors because of lack of knowledge of when and when not to use physical therapeutic agents and procedures.
- 5: OCCUPATIONAL THERAPISTS DO NOT POSSESS THE NECESSARY CLINICAL DECISION MAKING SKILLS TO PRACTICE PHYSICAL THERAPY.
- 6: THE PUBLIC IS CLEARLY NOT BEING SERVED BY THIS LEGISLATION.

OT's comment fill the void of en communities where no pt

Convenience is no reason to allow maynumete +neative at

Gary Lusin, P.T. Mary Jo Lusin, P.T.

BOZEMAN PHYSICAL THERAPY CENTER Suite 703G • Medical Arts Center

300 North Willson Bozeman, Montana 59715 (406) 587-4501

TO: Senate Public Health Committee

RE: Senate Bill 54 regarding Occupational Therapy

Senate Bill 54 involves a one sentence change within the definition of occupational therapy. The significance of that change is of major proportion. In essence occupational therapists would like the ability to practice physical therapy in an unlimited fashion.

I am opposed to this legislation based on the limited or non existent training within occupational therapy which would allow them to practice as proposed. The two professions have different educational emphasis and training, the practitioners within each profession hold different philosophies and concepts regarding evaluation and treatment for most conditions, the licensing exams of each profession reflect the academic and clinical eduction received, and state practice acts should define clearly the roll and scope of each profession. This bill attempts to confuse even more a very complex issue.

The primary purpose of state practice acts is to provide some assurance of public protection. In my opinion Senate Bill 54 as proposed totally ignores any attempt to protect the public. The Senate Public Health Committee should pay special attention to the education and training of occupational therapists with regard to physical therapeutic agents and physical therapeutic procedures. Through my investigation it appears that occupational therapists in no way have the appropriate academic or clinical background in making important clinical decisions regarding the use of physical agents nor many physical therapeutic procedures.

Because I know how to operate a wrench does not make me a mechanic. The fact that I have dissected a human cadaver does not make me a surgeon. The fact that an occupational therapist may learn how to turn on an ultrasound machine does not make them a physical therapist. My point is that certain clinical decision making factors must come into play even when the simplest of physical agents (ie, hot pack, cold pack, etc.) are being considered for application to a patient.

The committee's concern for public protection should fall in the following three areas:

Gary Lusin, P.T. Mary Jo Lusin, P.T.

Exhibit #/4 1-14-91 SB 54

1: PHYSICAL HARM TO A PATIENT.

Any physical agent has the potential to physically harm a patient. Hot packs can burn, cold packs can freeze, etc.

The electro-modalities which would include ultrasound hold particular concern. Ultrasound can burn tissue very rapidly and can disrupt the outer layer of bone which is called the periosteum. Diathermy also holds particular caution both in burning the patient or even burning equipment adjacent to the patient.

The electrical stimulation physical agents present concerns regarding superficial tissue burns with inappropriate current all the way to deep muscle burns or strains depending on what type of current is used along with the intensity, frequency, and duration.

Placing physical agents such as these in the hands of occupational therapists who can not demonstrate appropriate training is certainly not in the best interest of the public.

2: POTENTIAL EXACERBATION OF SYMPTOMS.

It is not necessary for the physical agents to produce significant harmful affects but they can also easily exacerbate a patient's condition and prolong recovery if the physical agents are not properly selected. This would include appropriate evaluation and assessment as to the appropriate physical agent for the condition, appropriate application, and then assessment as to whether or not that treatment is facilitating or inhibiting recovery. Depending upon the stage of the healing process inappropriate use of physical agents can lead to unnecessary discomfort on the part of the patient, and limited function.

3: INCREASED COST TO PATIENTS AND INSURERS.

A critical consideration should be that without necessary training both academically and clinically, it is entirely possible, and most likely probable, that patients will be subjected to a variety of unnecessary physical agent treatments which someone will have to pay for. I would think this factor alone would cause the Senate Public Health Committee to be sure beyond a doubt that occupational therapists do have the training and education to appropriately use physical agents or physical therapeutic procedures that will not add to the cost of health care. The term of physical therapeutic procedure is also of significant concern. It has been stated several times by occupational therapists, and is on record at least at one hearing in the past, that their concept of their practice act is that if it doesn't say they can't do it, then they can. If an occupational therapist feels that a colonic irrigation is necessary to improve the function of a patient, will they then be able to do that. Will they be able to perform soft tissue mobilization, joint or other mobilization or manipulation, spinal traction, sophisticated techniques. This whole area needs to be significantly challenged by the Senate Public Health Committee because the language as proposed is far too broad for a profession with limited education. If occupational therapists had the education they claim they have, then why we would be having occupational therapists in various parts of the state ask physical therapists how to do everything from applying a hot pack to how to use various electrical stimulation units, to treating patients with various mobilizations shoulder and other procedures? I maintain that the language as proposed is entirely too broad and is foregoing protection of the public. I urge you to oppose the Senate Bill 54 as initially proposed.

Is any Lum, MS, ATC, PT

SERVICE MEMORY & WELFARE
EXMIRIT NO. 15 DATE 01/14/91
WITNESS STATEMENT STILL NO 54.
To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this 14th day of January, 1991.
Name: Ann LAUSON
Address: 114 1st Ave W
Kalispell, INT
Telephone Number: $40c - 755 - 0414$
Representing whom? MT ASSCC APTA
Appearing on which proposal?
Do you: Support? Amend? Oppose? Comments:
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

Exhibit #15 1-14-91 SB 54

To Members of Senate Public Health Comm. From: Ann Lawson Physical Therapist Kalispell, MT R: 5B 54 I wish to comment in opposition to SBSA as proposed. I feel strongly about my responsi bility as a medical professional to provide quality, and research-substantiated care for my petients. It is a pribrity for me to continue upgrading "Herrpeutic stills and knowledge initially rearned in school. I have practiced Physical Therapy for Ile years and have observed factors influencing our profession. A patient places a great deal of trust in the therapist's ability to plan appro-printe and highly-skilled care for him or her. In practicing Physical Therapy all these years, the academic foundations I learned in school continue to play a large part in my comprehunsion of the impact my treatment has upon my patient. I cannot imagine giving a treat. ment with a therpeutic agent without being fully aware of its effect on human Tissue, I do not feel that the curriculem currently offered in a majority of Occupational Therapy Schools adequately provides those students with the necessary foundations needed to ins the capatile anote in patient rack

I unge you to take steps to insure pour public has access to safe and effective rehubilitative therapy. Thank you for your attention to the above comments. ····· and the second · · · · · · · · ·

SENATE HEALTH & WELFARE EXHIBIT NO. $\frac{# 15}{-14 - 91}$	
WITNESS STATEMENT BILL NO. SB54	
To be completed by a person testifying or a person who wants their testimony entered into the record.	
Dated this $\underline{14^{4}}$ day of $\underline{JANUARY}$, 1991.	
Name: DIANNE ALLEN	
Address: 926 Crist Dr.	
Billings MT 59105	
Telephone Number: 248.1460	
Representing whom?	
MT. Chapter of American Physicae Shuapy Genocia	tic
Appearing on which proposal?	
5 B. 54	
Do you: Support? Amend? Oppose?	
Comments:	

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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

- Exhibit #15 1-14-91 SB 54

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January 14, 1991

TO: Members of Senate Public Health Committee, Dorothy Eck, Chairman

I am a physician who utilizes both physical and occupational therapy extensively. I would like to address $\pi\gamma$ concerns regarding SB 54.

The purpose of this bill is to expand the practice of occupational therapy treatment. As stated, "treatment includes but is not limited to the use of physical therapeutic agents and procedures". In the past I have seen other profitations change their practice acts to more specifically define these moope of practice and present provision of services. However, a profession should not change its practice act to encompass present provisions or expand into areas for which that profession is not qualified. In this broad expansion of the OT act 1 am concerned this may happen.

From my understanding of their educational background, O.T.s do not receive the basic education necessary to utilize all physical therapeutic agents or procedures: nor does their license exam include any formal testing of these areas. In addition, OT's education is concentrated on treatment of the appar extremity.

As a physician, I want to know that my parients are receiving services from the appropriate professional encode trained to perform them. Therefore, I feel that OT's should not be allowed to expand their practice to include physical machalities/procedures until their college curriculums and licensure exams indicate adequate preparation. Perhaps OT's could perform some superficial modalities such as heat or ice, if they can adequately demonstrate a knowledge of their appropriate use and precautions, however, if the OT practice act was expanded to allow this use of superficial modalities, it should be limited to the application to the upper extremity only.

I appreciate your attention to my concerns and urge you to vote against SB 54 as proposed.

Schlesinger,



Exhibit # 15 1-14-91 SB 54

Dianne Allen, P.T. P.O. Box 50013, Billings, Montana 59105-0013

TO: MEMBERS OF THE MONTANA STATE SENATE PUBLIC HEALTH COMMITTEE

THANK YOU FOR THE OPPORTUNITY TO EXPRESS MY OPPOSITION 3 TO THE OCCUPATIONAL THERAPY BILL, S.B. 54.

I AM OPPOSED TO S.B. 54 BECAUSE I FEEL IT IS AN ATTEMPT BY THE OCCUPATIONAL THERAPISTS IN MONTANA TO EXPAND THEIR SCOPE OF PRACTICE WITHOUT REGARDS TO THEIR EDUCATIONAL PREPARATION, EXPERTISE OR PROFICIENCY. INDEED, THE WORDING OF THE PROPOSED LEGISLATION, "TREATMENT INCLUDES BUT IS NOT LIMITED TO THE USE OF THERAPEUTIC PHYSICAL AGENTS AND PROCEDURES", IS SUCH THAT THERE IS NO LIMIT TO THE PRACTICE OF OCCUPATIONAL THERAPY. IS THIS IN THE BEST INTEREST OF THE CITIZENS OF MONTANA? I THINK NOT. THE SCOPE OF ANY PROFESSION'S PRACTICE SHOULD BE LIMITED BY THEIR EDUCATION AND PROFICIENCY.

Arguments in support of S.B. 54 have been that OCCUPATIONAL THERAPISTS REQUIRE THE ABILITY TO USE THERAPEUTIC PHYSICAL AGENTS AS ADJUNCTS TO OCCUPA-TIONAL THERAPY TREATMENT IN MANY INSTANCES IN ORDER TO EFFECTIVELY TREAT THEIR PATIENTS. I WOULD LIKE TO SUBMIT FOR CONSIDERATION THE FACT THAT THEIR IS A PROFESSION IN MONTANA WHICH IS LICENSED TO TREAT PATIENTS WITH THERAPEUTIC PHYSICAN AGENTS AND PROCEDURES AND THAT THIS PROFESSION IS THE PRACTICE OF PHYSICAL THERAPY. THEREFORE, IF A PATIENT **REQUIRES** TREATMENT WITH THERAPEUTIC PHYSICAL AGENTS AND PROCEDURES WOULDN'T IT BE APPROPRIATE FOR THE PATIENT TO BE REFERRED TO THE PROFESSIONAL WHO HAS BEEN LICENSED BASED ON EDUCATION AND PROFICIENCY TO PROVIDE TREATMENT WITH THERAPEUTIC PHYSICAL AGENTS AND PROCEDURES?

UT-PATIENT SERVICES

- Stillwater Community Hospital P.O. Box 959 Columbus, MT 59019 Ph 322-5316
- Western Manor Nursing Home 2115 Central Avenue Billings, MT 59102 Ph 656-6500

CONTRACTED SERVICES

- Saint Johns Lutheran Home Billings Heights 1415 Yellowstone River Road Billings, MT 59105 Ph 245-9330
- Stillwater Convalescent Center 350 West Pike Avenue Columbus, MT 59019 Ph 322-5342
- Western Manor Nursing Home 2115 Central Avenue Billings, MT 59102 Ph 656-6500

Exhibit # 15 1-14-91 SB 54

As chairperson of the Quality Assurance Program of the Montana Chapter of the American Physical Therapy Association I am aware of the questions and problems currently encountered by third party payors when attempting to determine appropriate reimbursement for duplication of services between Occupational and Physical Therapy. What will the future problems be if the scope of Occupational Therapy is expanded such that it will duplicate the entire practice of physical therapy?

AN ADDITIONAL ARGUMENT IN SUPPORT OF OCCUPATIONAL THERAPISTS EXPANDING THEIR SCOPE OF PRACTICE TO INCLUDE PHYSICAL THERAPY IS THE FACT THAT THERE IS A SHORTAGE OF PHYSICAL THERAPISTS IN MONTANA. ΙN-HERENT IN THIS ARGUMENT IS THE PREMISE THAT THERE ARE SUFFICIENT AND, PERHAPS, EVEN EXCESSIVE NUMBERS OF OCCUPATIONAL THERAPISTS IN MONTANA SUCH THAT, WITH TRAINING IN THERAPEUTIC PHYSICAL AGENTS AND PROCEDURES, THEY WILL BE ABLE TO FILL THE VOID OF PHYSICAL THERAPISTS. I THINK NOT! IT IS MY UNDERSTANDING THAT THERE IS A DEFINITE SHORTAGE OF OCCUPATIONAL AS WELL AS PHYSICAL THERAPISTS. SHOULDN'T THE EFFORTS AT "FILLING VOIDS" BE FIRST DIRECTED TOWARD YOUR OWN PROFESSION RATHER THAN CREATING A LARGER VOID BY PRACTICING A DIFFERENT PROFESSION?

LASTLY, I WOULD LIKE TO ADDRESS THE ARGUMENT THAT, IF THE LACK OF COMPLEXITY IN THE USE OF SEVERAL THERAPEUTIC PHYSICAL AGENTS AND PROCEDURES IS SUCH THAT PATIENTS THEMSELVES CAN BE TAUGHT THE APPLICA-TION OF THEM, WHY CANNOT AN OCCUPATIONAL THERAPIST? I AGREE THAT THE APPLICATION OF SEVERAL OF THE PHYSICAL THERAPEUTIC AGENTS AND PROCEDURES CAN

Exhibit # 15 1-14-91 SB 54

EASILY BE TAUGHT. IT IS NOT THE LIMITED KNOWLEDGE IN THE ACTUAL TECHNICAL APPLICATION OF THE AGENTS AND PROCEDURES THAT IS IN QUESTION. IT IS THE ABILITY OF THE OCCUPATIONAL THERAPIST, WHOSE EDUCA-TION DOES NOT INCLUDE INSTRUCTION IN THE PHYSIOLO-GICAL BASICS OF THERAPEUTIC PHYSICAL AGENTS AND PROCEDURES, TO DETERMINE WHEN IT IS APPROPRIATE TO USE VARIOUS AGENTS AND PROCEDURES AND TO ASSESS THE AFFECTS OF THOSE TREATMENTS THAT IS IN QUESTION.

AGAIN, I WISH TO THANK YOU FOR THE OPPORTUNITY TO EXPRESS MY OPPINIONS IN REGARDS TO S.B. 54 AND FOR THE OPPORTUNITY TO URGE YOU TO VOTE AGAINST IT.

SINCERELY,

Diavan & Oller, R.T.

DIANNE C. ALLEN, P.T.



JANUARY 12, 1991

Attention: 1991 Montana Legislature

To Whom It May Concern:

I'm writing in response to the news that the Occupational Therapists intend to introduce legislation that will essentially remove any restrictions from their practice act. As a practicing Physical Therapist who works daily with several Occupational Therapists, I feel such a bill would allow many Occupational Therapists to use modalities and other physical agents that would be beyond the scope of their present professional training. Furthermore, that situation would greatly affect the safety of the general public utilizing those services as it would seem the Board of Medical Examiners would have a difficult time establishing the scope of Occupational Therapy.

In the past two years, I have been approached on two occasions by different Occupational Therapists soliciting information on the operation of a functional electric muscle stimulator (FES). Specifics on the machine parameters to use, location and size of electrodes, and treatment protocol were requested. From the nature of the questions and the reaction to my answers, it was apparent this topic was not covered in the individuals professional schooling.

In another situation, I was requested to answer questions concerning how to set a patient up for exercise on an Upper Body Exerciser. My questions about what specific treatment goals the OT was trying to achieve were met with the statement that he just needs to use his upper extremities and get back into shape. When directly asked what target heartrate the OF wished the patient to achieve it was evident that the effect of upper extremity exercise on the heart was never considered. The thing that underlines my concerns about public saftey is that the patient in question was exercising on the piece of equipment at the time of the discussion.

Modalities and other physical agents have a well established place in the treatment of many musculoskeletal problems but they must be applied by qualified health care professionals. In my opinion Occupational Therapists, as shown above, are not currently taught the safe and effective use of these powerful treatment tools and therefore should be closely monitored by law. Training in these modalities and physical agents should be added to the curriculum of every OT training program and they should display as a group a consistent minimum proficiency upon entering their profession. I feel this should occur before a practice act is opened to include these treatments. All areas of medical care need to be closely defined as to their scope and limitations. This is for the benefit and safety of the general public and the health care practitioner. For Occupational Therapy to be exempt from this limiting process when the profession is clearly not providing training in critical areas would be a Serious error in the laws governing our state.

Exhibit # 15 1-14-91 SB 54

Please take these comments into consideration when hearing the arguments for the bill concerning the Occupational Therapy Practice Act.

Thank you for your time.

Sincerely,

The Rebert

Bruce Abbott. P.T.

Supervisor-Rehab F.T. Section Physical Therapy St. Vincent Hospital and Health Center Billings, Montana

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My name is Barbara Penner. I am a physical therapist in Helena. Τ graduated from physical therapy school at the University of Minnesota 20 years ago in 1971. The University of Minnesota continues to offer a degree in physical therapy as well as occupational therapy. This morning I spoke to one of my instructors, Mr. Scutter who is still on staff at the University (phone 612-626-4096). He stated that the ciriculum for both schools is similar to the way I had remembered it. In the professional school, the two groups share only the medical The occupational therapy students are given no science courses. instruction in physical agents and procedures. Mr. Scutter also stated physiology and chemistry prerequisite requirements that the for entrance into the professional program for physical therapy program is much stronger than for occupational therapy. This core knowledge is not taught in a weekend course that teaches application of physical agents and procedures. Physical therapists may instruct aides to carry out some physical agents and procedures but according to law, it is done under the direct supervision of a physical therapist as aides are not expected to have the judgement to know what and when a physical agent or procedure is appropriate. It may be concept for an O.T. to offer these services, but it no more appropriate that someone getting enjections from the pharmacy. The use of physical agents and procedures is not in the occupational therapy standards, ciriculum or licensure exam. Ι feel it is inappropriate for to enact legislation that would enable occupational therapists to use physical agents and procedures when their educational do not provide them the training background and licensure procedures

WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Date: <u>/- / 4 - 9</u> /
Name: Donna Vannedge
Address: 6017 Vigilante Lane
Great Falls, 17T 59404
Telephone Number: (406) 454-3537
Representing Whom?
Montana chapter APTA
Appearing on which proposal? 56754
Do you: Support? Amend? Oppose?
This bill is much too pread. The definition
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY. THANK YOU.

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WITNESS STATEMENT

To be completed by a person testifying or a person who wants their testimony entered into the record.
Dated this <u>14</u> day of <u>Junuary</u> , 1991. Name: <u>Judith Kuipers</u>
Name: Judith Kuipers
Address: 205 Chestnut
Livingston, MT 59047
Telephone Number: 222-3201
Representing whom?
Physical therapists
Appearing on which proposal?
SB 54
Do you: Support? Amend? Oppose? O
Comments: Tam appesed to SB 54 based
<u>I an opposed to SB 54 based</u> on the lack of educational background For performing these modalities.
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PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY

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Exhibit # 15 1-14-91 SB 54

Thank-you for the opportunity to speak in opposition to SB54 as proposed. The primary purpose of licensure laws is to protect the public. This bill is too broad and if passed would allow an occupational therapist to apply any physical agent or procedure from the simple to the very complex. Appropriate use of the more complex agents and procedures requires a background knowledge in the pathological changes, healing process, indications and contraindications and the ability to analyze the results of treatment and modify as needed. question the educational background of the occupational therapist to do this. I personally have witnessed the lack of knowledge by occupational therapists in the area of physical agents. In the fall of 1990, a fulltime O.T. student intern who had completed all her academic work asked one of the physical therapists in our department to teach her how to apply functional electrical stimulation to a patient. She stated that she had not learned how to do this in school and that none of the O.T.'s in the department knew how to teach her. If this bill were passed she would be legally able to do this and other procedures despite her admitted lack of background. In another instance, one of the O.T.'s came to me with the request to put hot packs on one of our stroke patient's shoulder. When asked what the rationale for that treatment was she stated" because he has pain." Upon further probing she did not know the cause of the pain and had not done nor did she know how to do any definitive testing to ascortain the cause. These are only two specific examples demonstrating the lack of knowledge on the use and application of physical agents by O.T.s. There is potential harm to patients from the misuse of these agents or procedures. I would urge the committee to carefully consider the vagueness of this bill.

y E.

Dorothy E. Hash, P.T. Billings, Mt



BOZEMAN BONE & JOINT CLINIC, P.C.

E. Lee Blackwood, M.D., Ph.D. Fellow, A.A.O.S. Exhibit # 15 1-14-91 SB 54

300 N. Willson Avenue Bozeman, Montana 59715 (406) 587-8050

January 14, 1991

TO WHOM IT MAY CONCERN:

As a practicing orthopedic surgeon as well as a concerned citizen, I would like to express my concern about the proposed legislation to broaden the functions of certified occupational therapists in the State of Montana. It has come to my attention that a lobby for the O.T. interests is proposing legislation to broaden the function of these professionals and allow them to perform patient services for which they are not trained or certified. This would not be for the best good of the patients and simply represents another attempt at deprofessionalization of paramedical services by legislative fiat. Other recent examples would be midwifery, use of prescription drugs by optometrists and broadening the hospital privileges of podiatrists and chiropractors.

I have respect for the occupational therapists and their work and I do believe that it should and could be expanded in a way that could help us manage the disaster of Workers Compensation claims in Montana. I could only hope that some well written legislature coming from other than special interest groups might be proposed to help us in areas such as Workers Compensation.

Sincerely,

E. Lee Blackwood, M.D.

ELB/mj

Cheryl Hanson, P.T. Kirk Hanson, P.T.

Exhibit # 15 1-14-91 SB 54

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Physical

Therapy

Associates ______ 2615 Colonial Drive Helena, Montana 59601 406 443-5555

January 14, 1991

TO: MEMBERS OF SENATE PUBLIC HEALTH COMMITTEE DOROTHY ECK, CHAIRWOMAN

I am writing in response to SB 54, regarding the expansion of the practice of Occupational Therapy to include treatment "not limited to the use of physical agents and procedures".

I understand that Occupational Therapists would like to utilize all the physical therapeutic agents/procedures that by past and present law are legal for physical therapists to use. I know too, that some OT's are presently utilizing some of these agents and wish to be reimbursed for them. OT's feel that their weekend workshops and on-the-job training by Physical Therapists should make them qualified to use modalities and procedures.

Unfortunately, there is a difference between OT's and PT's. Our PT law was not written to expand our practice but to define it. Physical therapists receive extensive basic college education in the physiology, indications and contraindications for the use of specific modalities and procedures. OT's do not. PT's are tested extensively on that basic education via licensure exam. OT's, of course, can't be tested on this information in their exams because they weren't taught it.

As to continuing education workshops, PT's, too, attend these. The difference is that PT workshops are usually an extension or more detailed study of the basic foundations and information we received in college. Continuing education on therapeutic agents is new information to OT's.

In regards to on-the-job training, PT's provide that to aides and assistants, too. But a PT aide or assistant can <u>not</u> then practice those, techniques unless under the direct supervision of a licensed PT - that's our law. Yet OT's want to utilize the on-the-job training without supervision.

Page 2

Often, we also hear that SB 54's expansion of OT practice would allow patients in more remote areas to receive services. It is rare to find a geographic area in which an OT is practicing that there is not some type of PT available. Perhaps, if the OT's are concerned about the availability of certain services for their patients they should refer them to a PT who is qualified, trained and tested in those procedures.

I have no problem with the OT's utilization of superficial heat and cold prior to treatment, as long as they know the indications and contraindications. However, I do not feel they are qualified to provide any other physical agents and procedures and feel their treatment should be limited to the upper extremity, distal to the elbow, as their training was limited.

Therefore I urge you to vote NO on SB 54 as proposed.

Sincerely,

Cheryl Hanson F.

Hanson,

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January 13, 1990

Montana Senate Public Health Committee

Dear Committee Members,

I am an assistant professor in the Physical Therapy Program at the University of Montana and am writing to express my opposition to Senate Bill #54, amending the Occupational Therapy Practice Act.

The first reason I oppose this amendment is its broad scope and lack of a specific definition for "therapeutic procedures". Without more definitive boundaries on occupational therapy practice, patients are at risk of receiving treatment which is beyond the capability and training of the OT.

Further, the amendment contains reference to "therapeutic agents." I am responsible for teaching one of the physical agents classes in the Physical Therapy Program. I understand the level of expertise and training necessary to become competent applying these agents. In addition, our students have an extensive background in anatomy, physiology and pathology which enables them to make critical decisions regarding the appropriateness and potential dangers of applying these agents. For example, despite the seemingly innocuous nature of "hot packs," inappropriate application can retard healing or cause further tissue damage.

I urge you to vote AGAINST this amendment. Until occupational therapists incorporate physical agents into all curricula and licensure examination, I believe it is in the best interest of the public NOT to expand the bounds of their practice act.

Sincerely,

Jesebeth Roled

Elizabeth R Ikeda, MS, PT Assistant Professor Physical Therapy Department University of Montana Missoula, Montana 59812

Montana Association of Private Practice Physical Therapists

January 14, 1991

Senator Dorothy Eck Chair, Public Health Committee Capitol Post Office Capitol Building Helena, MT 59620

RE: SB 54 as proposed

As a physical therapist from Helena and Chairman of the Montana Association of Private Practice Physical Therapists, I write in opposition to Senate Bill 54 as proposed.

This bill seeks to greatly widen the scope of Occupational Therapy practice in the State of Montana. While the desire to expand their professional scope of practice may be understandable, Occupational Therapists do not have the basic level of education and training in the use of modalities nor does their license exam test for any level of competency. Further, the proposed language is so broad it goes beyond even what physical therapists are trained and licensed to perform. I oppose allowing any profession practicing in areas in which they are not qualified.

Consumers will not be lacking the services; physical therapists treat hands. In fact, in some instances Occupational Therapists have asked physical therapists to teach them specific techniques to be used with hand patients as the basic instruction was not included in the OT curriculum. Therefore, this is clearly a situation where a profession seeks authority to expand its practice beyond what its members have been trained to perform.

I urge a "no" vote on Senate Bill 54 as proposed. Thank you.

Sincerely, son, P.T.

Kirk Hanson, P.T.

DATE Monday, Jan. 14, 191 COMMITTEE ON senate committee on public health, welfare & safety

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DATE Monday, Jan. 14, 1991 COMMITTEE ON _____ senate committee on public health, welfare & safety

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