

SENATE COMMERCE COMMITTEE

STATEMENT TO

SENATE, No. 1315

with committee amendments

STATE OF NEW JERSEY

DATED: FEBRUARY 27, 2017

The Senate Commerce Committee reports favorably and with committee amendments Senate Bill No. 1315.

As amended, this bill revises the “Physical Therapist Licensing Act of 1983” by expanding the scope of practice of physical therapists to include: identification of balance disorders; wound debridement and care; utilization review; screening, examination, evaluation, and application of interventions for the promotion, improvement, and maintenance of fitness, health, wellness, and prevention services in populations of all ages exclusively related to physical therapy practice.

Under current law, physical therapist assistants are under the direct supervision of licensed physical therapists. The amended bill provides, instead, for general or direct supervision of physical therapist assistants. The amended bill requires the licensed physical therapist to make an onsite visit and actively participate in the treatment of the patient at least every six patient visits or every 14 days, whichever occurs first. In addition, when supervising a physical therapist assistant in any off-site setting, there must be regularly scheduled and documented conferences or communications between the physical therapist and the physical therapist assistant regarding patients.

As defined in the amended bill, “general supervision” means supervision by a physical therapist in which: the physical therapist must be available at all times by telecommunications but is not required to be on-site for direction and supervision; and the supervising physical therapist assesses on an ongoing basis the ability of the physical therapy assistant to perform the selected interventions as directed.

As amended, the bill further provides that the State Board of Physical Therapy Examiners shall establish guidelines concerning the supervision of physical therapist assistants including, but not limited to: on-site review of the plan of care with appropriate revision or termination, completed during a regular physical therapist visit; and evaluation of the need for, and a recommendation regarding, utilization of outside resources.

The amended bill also permits physical therapists licensed in other jurisdictions, under certain conditions as enumerated in the bill, to participate in educational activities occurring in New Jersey and to

assist in providing services in this State during emergency situations. In addition, the bill changes the current references concerning continuing education requirements to continuing professional education and competency requirements. “Continuing professional education and competency” is defined as the lifelong process of maintaining and documenting the application of knowledge, skills and behaviors required to function effectively, safely, ethically and legally, through ongoing self-assessment, development, and implementation of a personal learning plan and subsequent reassessment.

Furthermore, this amended bill provides that a person is guilty of a crime of the third degree if the person knowingly does not possess a license to practice physical therapy or knowingly has had such license suspended, revoked or otherwise limited by an order entered by the State Board of Physical Therapy Examiners, and he:

- engages in the practice of physical therapy;
- exceeds the scope of practice permitted by the board order;
- holds himself out to the public or any person as being eligible to engage in the practice of physical therapy;
- engages in any activity for which a license to practice physical therapy is a necessary prerequisite; or
- practices physical therapy under a false or assumed name or falsely impersonates another person licensed by the board. Under the bill, however, these provisions would not apply to a person practicing physical therapy without a license if that person’s activities are permitted under section 9 of P.L.1983, c.296 (C.45:9-37.19).

Committee Amendments:

The committee amended the bill to:

- Remove animal physical therapy from the definition of “physical therapy.”
- Revise the definition of “physical therapy” to remove intramuscular techniques and integumentary protection, repair and management, and to include wound debridement and care. The definition is further clarified to include the screening, examination, evaluation, and application of interventions for the promotion, improvement, and maintenance of fitness, health, wellness, and prevention services in populations of all ages exclusively related to physical therapy practice.
- Reinstate the definition of “direct supervision,” deleted from the current law in the bill as introduced.
- Define “wound debridement and care.”
- Revise the requirements concerning professional competency to include “professional education and competency,” and define that term.
- Reinsert certain language in the current law that was removed under the bill as introduced.
- Remove language prohibiting any person from rendering a utilization management decision that limits, restricts, or curtails

a course of physical therapy care unless they are a licensed physical therapist.

- Clarify that the bill shall not be construed to prohibit an individual who is licensed to practice medicine and surgery in this State from rendering a utilization management decision that limits, restricts or curtails a course of physical therapy care.
- Allow a licensed physical therapist assistant to initiate patient physical therapy treatment under the direct or general supervision of a licensed physical therapist and require the licensed physical therapist to make an onsite visit and actively participate in the treatment of the patient at least every six patient visits or every 14 days, whichever occurs first.
- Clarify that when supervising a physical therapist assistant in any off-site setting, there must be regularly scheduled and documented conferences or communications between the physical therapist and the physical therapist assistant regarding patients.
- As part of the supervision of physical therapist assistants, require that the on-site review of the plan of care must be completed during a regular physical therapist visit.