As Amended by Senate Committee

As Amended by House Committee

Session of 2007

HOUSE BILL No. 2483

By Committee on Health and Human Services

2-8

AN ACT concerning physical therapy [health care; relating to physi-1415 cal therapy and department of health and environment]; amend-16 ing K.S.A. 2006 Supp. [65-180,] 65-2901 and 65-2912 and repealing 17the existing section sections. 1819Be it enacted by the Legislature of the State of Kansas: 20Section 1. K.S.A. 2006 Supp. 65-2901 is hereby amended to read as 21follows: 65-2901. As used in article 29 of chapter 65 of the Kansas Statutes 22Annotated and acts amendatory of the provisions thereof or supplemental 23 thereto: "Physical therapy" means examining, evaluating and testing indi-24 (a) 25viduals with mechanical, anatomical, physiological and developmental im-26pairments, functional limitations and disabilities or other health and 27 movement-related conditions in order to determine a diagnosis solely for 28physical therapy, prognosis, plan of therapeutic intervention and to assess 29 the ongoing effects of physical therapy intervention. Physical therapy also 30 includes alleviating impairments, functional limitations and disabilities by 31 designing, implementing and modifying therapeutic interventions that 32 may include, but are not limited to, therapeutic exercise; functional train-33 ing in community or work integration or reintegration; manual therapy; 34 therapeutic massage; prescription, application and, as appropriate, fab-35 rication of assistive, adaptive, orthotic, prosthetic, protective and suppor-36 tive devices and equipment; airway clearance techniques; integumentary 37 protection and repair techniques; debridement and wound care; physical 38 agents or modalities; mechanical and electrotherapeutic modalities; pa-39 tient-related instruction; reducing the risk of injury, impairments, func-40 tional limitations and disability, including the promotion and maintenance 41of fitness, health and quality of life in all age populations and engaging in 42administration, consultation, education and research. Physical therapy 43 also includes the care and services provided by a physical therapist or a

1 physical therapist assistant under the direction and supervision of a phys-2 ical therapist that is licensed pursuant to this act. Physical therapy does 3 not include the use of roentgen rays and radium for diagnostic and ther-4 apeutic purposes, the use of electricity for surgical purposes, including $\mathbf{5}$ cauterization, the practice of any branch of the healing arts and the mak-6 ing of a medical diagnosis. 7 (b) (1) "Physical therapist" means a person who is licensed to prac-8 tice physical therapy pursuant to this act. Any person who successfully 9 meets the requirements of K.S.A. 65-2906 and amendments thereto shall 10 be known and designated as a physical therapist and may designate or 11 describe oneself as a physical therapist, physiotherapist, licensed physical 12 therapist, P.T., Ph. T., M.P.T., D.P.T. or L.P.T. 13 (2) Except as otherwise provided in this section subsection (b)(3), (b)(4) and (b)(5) physical therapists may evaluate patients without phy-1415 sician referral but may initiate treatment only after consultation with and 16approval by a *licensed* physician licensed to practice medicine and surgery, a licensed podiatrist, a licensed physician assistant or an advanced 1718registered nurse practitioner working pursuant to the order or direction of a person licensed to practice medicine and surgery physician, a li-1920censed chiropractor or a licensed dentist in appropriately related cases or 21a therapeutic licensed an optometrist pursuant to subsection (e) of K.S.A. 65-1501, and amendments thereto, provided that any such approval 22 23 was made by a person with the appropriate license, registration or certification required for the respective practice in the jurisdiction 24 25regulating such practice. 26*Physical therapists may evaluate and treat a patient for no more* 27 than 30 consecutive calendar days without a referral under the following 28conditions: (A) The patient has previously been referred to a physical 29 therapist for physical therapy services by a licensed physician, a licensed 30 podiatrist, a licensed physician assistant or an advanced registered nurse 31 practitioner working pursuant to the order, direction or practice protocol 32 of a person licensed to practice medicine and surgery physician, a li-33 censed chiropractor or a licensed dentist in appropriately related cases or 34 a therapeutic licensed an optometrist pursuant to subsection (e) of K.S.A. 35 65-1501 and amendments thereto, provided that any such approval 36 was made by a person with the appropriate license, registration or 37 certification required for the respective practice in the jurisdiction regulating such practice; (B) the patient's referral for physical therapy 38 39 was made within one year from the date a physical therapist implements 40 a program of physical therapy treatment without referral; (C) the physical therapy being provided to the patient without referral is for the same 41injury, disease or condition as indicated in the referral for such previous 42injury, disease or condition; and (D) the physical therapist transmits to 43

1 the physician or other practitioner identified by the patient a copy of the 2 initial evaluation no later than five business days after treatment com-3 mences. Treatment for more than 30 consecutive calendar days of such patient shall only be upon the approval of a licensed physician, a licensed 4 podiatrist, a licensed physician assistant or an advanced registered nurse 5practitioner working pursuant to the order, direction or practice protocol 6 7 of a person licensed to practice medicine and surgery physician, a li-8 censed chiropractor or a licensed dentist in appropriately related cases or 9 a therapeutic licensed an optometrist pursuant to subsection (e) of K.S.A. 65-1501 and amendments thereto. 10 (4)Physical therapists may provide, without a referral, physical 11 12therapy services which do not constitute treatment for a specific 13 condition, disease or injury to: (A) Employees solely for the purpose of education and instruction related to workplace injury preven-1415tion; or (B) the public for the purpose of fitness, health promotion 16and education. 17<u>(5) Physical therapists may provide physical therapy services</u> 18without a referral to special education students who need physical 19therapy services to fulfill the provisions of their individualized ed-20ucation plan (IEP) or individualized family service plan (IFSP). 21"Physical therapist assistant" means a person who is certified pur-(c) 22 suant to this act and who works under the direction of a physical therapist, 23 and who assists the physical therapist in selected components of physical 24 therapy intervention. Any person who successfully meets the require-25ments of K.S.A. 65-2906 and amendments thereto shall be known and 26 designated as a physical therapist assistant, and may designate or describe 27 oneself as a physical therapist assistant, certified physical therapist assis-28tant, P.T.A., C.P.T.A. or P.T. Asst. 29 (d) "Board" means the state board of healing arts. 30 (e) "Council" means the physical therapy advisory council. 31 (f)"Physician" means a person licensed to practice medicine and sur-32 gery by the board. 33 Sec. 2. K.S.A. 2006 Supp. 65-2912 is hereby amended to read 34 as follows: 65-2912. (a) The board may refuse to grant a license to any physical therapist or a certificate to any physical therapist as-35 36 sistant, or may suspend or revoke the license of any licensed physical therapist or certificate of any certified physical therapist as-37 38 sistant, or may limit the license of any licensed physical therapist 39 or certificate of any certified physical therapist assistant or may 40 censure a licensed physical therapist or certified physical therapist 41assistant for any of the following grounds: 42Addiction to or distribution of intoxicating liquors or drugs (1)

43 for other than lawful purposes;

1 (2) conviction of a felony if the board determines, after inves-2 tigation, that the physical therapist or physical therapist assistant 3 has not been sufficiently rehabilitated to warrant the public trust; (3) obtaining or attempting to obtain licensure or certification 4 5by fraud or deception; 6 (4) finding by a court of competent jurisdiction that the phys-7 ical therapist or physical therapist assistant is a disabled person 8 and has not thereafter been restored to legal capacity; 9 unprofessional conduct as defined by rules and regulations (5) adopted by the board; 10(6) the treatment or attempt to treat ailments or other health 11 12conditions of human beings other than by physical therapy and as 13 authorized by this act; failure to refer patients to other health care providers if 14(7)15 symptoms are present for which physical therapy treatment is in-16advisable or if symptoms indicate conditions for which treatment 17is outside the scope of knowledge of the licensed physical 18therapist; 19 (8) initiating treatment without prior consultation and approval by a 20physician licensed to practice medicine and surgery, by a licensed podi-21atrist, by a licensed physician assistant or by an advanced registered nurse practitioner working pursuant to the order or direction of a person li-2223 eensed to practice medicine and surgery, by a licensed chiropractor, by 24 a licensed dentist or by a therapeutic licensed optometrist pursuant to 25subsection (e) of K.S.A. 65-1501, and amendments thereto [(8)] evalu-26ating or treating patients in a manner not consistent with subsection 27 (b)(2) or (b)(3), or both (b)(4) or (b)(5), of K.S.A. 65-2901, [section 3] 28and amendments thereto; and 29 knowingly submitting any misleading, deceptive, untrue or (9) fraudulent misrepresentation on a claim form, bill or statement. 30 31All proceedings pursuant to article 29 of chapter 65 of the 32 Kansas Statutes Annotated, and acts amendatory of the provisions 33 thereof or supplemental thereto, shall be conducted in accordance 34 with the provisions of the Kansas administrative procedure act and 35 shall be reviewable in accordance with the act for judicial review 36 and civil enforcement of agency actions. 37 [New Sec. 3. (a) Except as otherwise provided in subsection (b), 38 (c) or (d), a physical therapist may evaluate patients without physician referral but may initiate treatment only after approval by a 39 40licensed physician, a licensed podiatrist, a licensed physician assis-

 $41 \quad tant \ or \ an \ advanced \ registered \ nurse \ practitioner \ working \ pursuant$

42 to the order or direction of a licensed physician, a licensed chiro-

43 practor, a licensed dentist or licensed optometrist in appropriately

1 related cases. Physical therapists may initiate treatment with the approval by a practitioner of the healing arts duly licensed under 2 3 the laws of another state if K.S.A. 65-2872, and amendments thereto, authorize professional services to be performed based upon an or-4 5der by such practitioner. 6 [(b) Physical therapists may evaluate and treat a patient for no 7 more than 30 consecutive calendar days without a referral under 8 the following conditions: (1) The patient has previously been re-9 ferred to a physical therapist for physical therapy services by a 10 person authorized by this section to approve treatment; (2) the patient's referral for physical therapy was made within one year from 11 12the date a physical therapist implements a program of physical therapy treatment without a referral; (3) the physical therapy being 13 14provided to the patient without referral is for the same injury, dis-15ease or condition as indicated in the referral for such previous in-16jury, disease or condition; and (4) the physical therapist transmits to the physician or other practitioner identified by the patient a 1718copy of the initial evaluation no later than five business days after 19treatment commences. Treatment for more than 30 consecutive cal-20endar days of such patient shall only be upon the approval of a 21person authorized by this section to approve treatment. 22[(c) Physical therapists may provide, without a referral, phys-23 ical therapy services which do not constitute treatment for a specific 24 condition, disease or injury to: (1) Employees solely for the purpose

of education and instruction related to workplace injury prevention; or (2) the public for the purpose of fitness, health promotion
and education.

[(d) Physical therapists may provide physical therapy services
 without a referral to special education students who need physical
 therapy services to fulfill the provisions of their individualized ed ucation plan (IEP) or individualized family service plan (IFSP).]

32 [Sec. 4. K.S.A. 2006 Supp. 65-180 is hereby amended to read 33 as follows: 65-180. The secretary of health and environment shall: 34 [(a) Institute and carry on an intensive educational program 35 among physicians, hospitals, public health nurses and the public 36 concerning congenital hypothyroidism, galactosemia, phenylketo-37 nuria and other genetic diseases detectable with the same specimen. 38 This educational program shall include information about the na-39 ture of such conditions and examinations for the detection thereof 40 in early infancy in order that measures may be taken to prevent the

41 mental retardation or morbidity resulting from such conditions.

42 [(b) Provide recognized screening tests for phenylketonuria, ga-43 lactosemia, hypothyroidism and such other diseases as may be ap1 propriately detected with the same specimen. The initial laboratory

2 screening tests for these diseases shall be performed by the depart-

3 ment of health and environment or its designee for all infants born

in the state. Such services shall be performed without charge for a fee 4 5

of not more than \$30 per newborn without charge.

6 [(c) Provide a follow-up program by providing test results and 7 other information to identified physicians; locate infants with ab-8 normal newborn screening test results; with parental consent, mon-9 itor infants to assure appropriate testing to either confirm or not 10 confirm the disease suggested by the screening test results; with parental consent, monitor therapy and treatment for infants with 11 12confirmed diagnosis of congenital hypothyroidism, galactosemia, 13 phenylketonuria or other genetic diseases being screened under this 14statute; and establish ongoing education and support activities for 15individuals with confirmed diagnosis of congenital hypothyroidism, 16galactosemia, phenylketonuria and other genetic diseases being 17screened under this statute and for the families of such individuals. 18Maintain a registry of cases including information of im-[(d)]19portance for the purpose of follow-up services to prevent mental

20retardation or morbidity.

21Provide, within the limits of appropriations available there-[(e) 22 for, the necessary treatment product for diagnosed cases for as long 23 as medically indicated, when the product is not available through 24 other state agencies. In addition to diagnosed cases under this sec-25tion, diagnosed cases of maple syrup urine disease shall be included 26as a diagnosed case under this subsection. Where the applicable 27 income of the person or persons who have legal responsibility for 28the diagnosed individual meets medicaid eligibility, such individ-29 uals' needs shall be covered under the medicaid state plan. Where 30 the applicable income of the person or persons who have legal re-31sponsibility for the diagnosed individual is not medicaid eligible, 32 but is below 300% of the federal poverty level established under 33 the most recent poverty guidelines issued by the United States de-34 partment of health and human services, the department of health 35 and environment shall provide reimbursement of between 50% to 36 100% of the product cost in accordance with rules and regulations 37 adopted by the secretary of health and environment. Where the ap-38 plicable income of the person or persons who have legal responsi-39 bility for the diagnosed individual exceeds 300% of the federal pov-40 erty level established under the most recent poverty guidelines 41issued by the United States department of health and human serv-42ices, the department of health and environment shall provide re-

43 imbursement of an amount not to exceed 50% of the product cost in accordance with rules and regulations adopted by the secretary
 of health and environment.

[(f) Provide state assistance to an applicant pursuant to subsec-3 tion (e) only after it has been shown that the applicant has ex-4 hausted all benefits from private third-party payers, medicare, med- $\mathbf{5}$ 6 icaid and other government assistance programs and after 7 consideration of the applicant's income and assets. The secretary of 8 health and environment shall adopt rules and regulations establish-9 ing standards for determining eligibility for state assistance under 10 this section.

[(g) (1) Except for treatment products provided under subsec-11 12tion (e), if the medically necessary food treatment product for diagnosed cases must be purchased, the purchaser shall be reim-13 bursed by the department of health and environment for costs 1415 incurred up to \$1,500 per year per diagnosed child age 18 or 16younger at 100% of the product cost upon submission of a receipt of purchase identifying the company from which the product was 17purchased. For a purchaser to be eligible for reimbursement under 18 19this subsection (g)(1), the applicable income of the person or per-20sons who have legal responsibility for the diagnosed child shall not 21exceed 300% of the poverty level established under the most recent 22poverty guidelines issued by the federal department of health and 23 human services.

[(2) As an option to reimbursement authorized under subsec-24 25tion (g)(1), the department of health and environment may purchase 26 food treatment products for distribution to diagnosed children in 27an amount not to exceed \$1,500 per year per diagnosed child age 2818 or younger. For a diagnosed child to be eligible for the distri-29 bution of food treatment products under this subsection (g)(2), the 30 applicable income of the person or persons who have legal respon-31sibility for the diagnosed child shall not exceed 300% of the poverty 32 level established under the most recent poverty guidelines issued 33 by the federal department of health and human services. 34 [(3) In addition to diagnosed cases under this section, diagnosed

a (6) In dualition to diagnosed cases under this section, anglosed
 c cases of maple syrup urine disease shall be included as a diagnosed
 c case under this subsection (g).

37 [(h) The department of health and environment shall continue 38 to receive orders for both necessary treatment products and nec-39 essary food treatment products, purchase such products, and shall 40 deliver the products to an address prescribed by the diagnosed in-41 dividual. The department of health and environment shall bill the 42 person or persons who have legal responsibility for the diagnosed 43 patient for a pro-rata share of the total costs, in accordance with

1 the rules and regulations adopted pursuant to this section. The department of health and environment and the Kansas health policy au-2 3 thority shall combine the purchasing resources for the purpose of this subsection and shall enter into a joint contract for the purchase of all 4 5products for both medicaid and nonmedicaid eligible elients. 6 I(i) Not later than July 1, 2008, the secretary of health and environ-7 ment shall adopt rules and regulations as needed to require, to the extent 8 of available funding, newborn screening tests to screen for disorders listed 9 in the core uniform panel of newborn screening conditions recommended in the 2005 report by the American college of medical genetics entitled 10 "Newborn Screening: Toward a Uniform Screening Panel and System" or 11 12another report determined by the department of health and environment 13 to provide more appropriate newborn screening guidelines to protect the health and welfare of newborns. 1415 [(j) In performing the duties under subsection (i), the secretary of health and environment shall appoint an advisory council to advise the

health and environment shall appoint an advisory council to advise the
department of health and environment on implementation of subsection
(i).

19 [(k) The department of health and environment shall periodically re-20 view the newborn screening program to determine the efficacy and cost 21 2 effectiveness of the program and determine whether adjustments to the 22 3 program are necessary to protect the health and welfare of newborns 23 and 4 to maximize the number of newborn screenings that may be con-

24 ducted 5 with the funding available for the screening program.]

25 Sec. 2-3. [5.] K.S.A. 2006 Supp. [65-180,] 65-2901 is and 65-2912
26 are hereby repealed.

27 Sec. **34.** [6]. This act shall take effect and be in force from and after 28 its publication in the statute book.