

Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
Occupational Therapy Section Meeting
May 8, 2014
9:00 am. Roll Call
77 South High Street, 31st Floor, East B
Columbus, Ohio 43215

Occupational Therapy Section Vision Statement:

The Occupational Therapy Section is committed to proactively:

- Provide Education to the Consumers of Occupational Therapy Services;
- Enforce Practice Standards for the Protection of the Consumer of Occupational Therapy Services;
- Regulate the Profession of Occupational Therapy in an Ever-Changing Environment;
- Regulate Ethical and Multicultural Competency in the Practice of Occupational Therapy;
- Regulate the Practice of Occupational Therapy in all Current and Emerging Areas of Service Delivery.

1. Administrative Matters

1.1 Agenda Review

1.2 Approval of Minutes

Action Required

1.3 Executive Director's Report

1.4 Executive Session

1.4.1 To discuss pending and imminent court action (*ORC 121.22 (G)(3)*)

1.4.2 To discuss personnel matters related to:

- Appointment; Employment; Dismissal; Discipline; Promotion; Demotion; Compensation (*ORC 121.22 (G)(1)*) (*see Item 8.2*)

Investigation of charges/complaints against a public employee, licensee, or regulated individual in lieu of a public hearing (*ORC 121.22 (G)(1)*)

1.4.3 To discuss matters required to be kept confidential by federal law, federal rules, or state statutes (*ORC 121.22 (G)(5)*)

1.5 Discussion of Law and Rule Changes

1.6 OTA Renewal Update

2. Licensure Applications (50 Minutes)

2.1 Application Review Liaison Report (5 Minutes)

Action Required

2.2 Releases from Limited License Agreement(s)

2.3 License Application Waiver Requests

2.4 Occupational Therapist/Occupational Therapy Assistant Examination Applications

Action Required

2.5 Occupational Therapist/Occupational Therapy Assistant Endorsement Applications

Action Required

2.6 Occupational Therapist/Occupational Therapy Assistant Reinstatement Applications

Action Required

2.7 Occupational Therapist/Occupational Therapy Assistant Restoration Applications

Action Required

- 2.8 CE Request(s) for Approval

Action Required

- 2.8.1 CE Denial Appeal

Action Required

3. Enforcement Division (50 Minutes)

- 3.1 Assistant Attorney General Report (5 Minutes)
3.2 Case Review Liaison Report (10 Minutes)
3.3 Releases from Consent Agreement(s)
3.4 Notice(s) of Opportunity for Hearing
3.5 Consent Agreement(s)
3.6 Affidavit Consideration(s)
3.7 Hearing Officer Report(s)
3.8 Summary Suspension(s)
3.9 To discuss proposed disciplinary action against a licensee pursuant to ORC 121.22 (G)(1) and pursuant to 121.22 (G)(5) that involve matters required to be kept confidential under ORC sections 149.43 (A)(2) and 4755.02 (E)(1)

4. Correspondence (30 Minutes)

Joint Correspondence

5. OOTA Report (5Minutes)

6. Open Forum (5 Minutes)

7. Old Business (10 Minutes)

- 7.1 Review Cease/Desist Letter and Board Process (Yvonne Tertel, AAG)
7.2 Discussion on Offering CE Credit for Supervision of Level I Students

8. New Business (20 Minutes)

- 8.1 Public Rules Hearing (10:15 am)
8.2 Review and Vote to File New Rule 4755-3-12

Action Required

9. Next Meeting Preparation

- 9.1 Agenda Items
9.2 Executive Director Assignments

10. Adjournment



Ohio Occupational Therapy, Physical Therapy,
and Athletic Trainers Board

Occupational Therapy Section
March 6, 2014
9:00 a.m.

Members Present

Beth Ann Ball, OTR/L, Secretary
Rebecca Finni, OTR/L, Chair
Jean Halpin, OTR/L
Mary Beth Lavey, COTA/L
Kimberly Lawler, OTR/L (arrived from OTERP @ 9:54 am)
Trevor Vessels, Public Member

Staff

H. Jeff Barker, Investigator
Lisa Ratinaud, Enforcement Division Supervisor
Jeffrey Rosa, Executive Director

Guest

Heather Meredith, OOTA
Kathy Sanders

Legal Counsel

Yvonne Tertel, AAG

Call to Order

Rebecca Finni, Section Chair called the meeting to order at 9:30 a.m.

The Section began the meeting by reading the vision statement.

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- Regulate the Practice of Occupational Therapy in all Current and Emerging Areas of Service Delivery.

Approval of Minutes

Action: Rebecca Finni moved that the minutes from the January 16, 2014 meeting be approved as amended. Kimberly Lawler seconded the motion. The motion carried.

Discussion of Law and Rule Changes

The Section needs to amend two of the no change rules that were filed recently to fix some technical changes. These rules will be addressed at the May 2014 rules hearing.

Administrative Reports

Licensure Report

Action: Jean Halpin moved that the Occupational Therapy Section ratify, as submitted, the occupational therapist and occupational therapy assistant licenses issued by examination, endorsement, reinstatement, and restoration by the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board from January 16, 2014 through March 6, 2014, taking into account those licenses subject to discipline, surrender, or non-renewal. Rebecca Finni seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. The motion carried.

Occupational Therapist – Examination

Aldrich, Wesley	Alger, Benjamin
Bass, Jaime	Bates, Bethany
Bochnak, Morgan	Brehm, Laurie
Buehrle, Lauren	Cahalan, Ann
Carsone, Blair	Cash, Mary
Chou, Chang-Tung	Conley, Samantha
Davis, Ashlee	DeBrosse, Michelle

Baird, Lauren
Berarducci, Lindsay
Brown, Kaitlyn
Carpenter, Carissa
Cecil, Christine
Craven, Kimberly
Dobbs, Mackenzie

Farr, Leigh
Freyman, Jocelyn
Hand, Brittany
Hooker, Lisa
Jackson, Kristen
Kirsch, Brian
Legg, Elizabeth
Marusic, Jennifer
Milazzotto, Carmin
Moore, Elena
Mumm, Katrina
Parrino, Catherine
Raffol, Lindsey
Rogers, Jayna
Russo, Gabriella
Schmelzer, Brooke
Staal, Erin
Sturgill, Kristi
Terlau, Melissa
Vangsness, Kari
Weber, Elaina

Fink, Christine
Gorentz, Samantha
Hickox, Erica
Hunter, Jessica
Joseph, Danielle
Knabusch, Kristen
Limburg, Sarah
McCarthy, Mallory
Mitchell, Lyndsey
Morris, Richard
Newman, Crystal
Potts, Wendy
Redmond, Lauren
Rosenbauer, Brianna
Sauer, Katherine
Schmitt, Ashlee
Stanton, Morgan
Swogger, Emily
Toledo, Kathryn
Vitucci, Angelina
Williams, William

Finley, Rebecca
Graft, Deric
Holmes, Brittany
Jackson, Julie
Justice, Lauren
Kramer, James
Mahon, Shannon
Melvin, Courtney
Molnar, Lyndsay
Mueller, Tracy
Olson, Jessica
Prushing, Michelle
Reno, Stacey
Rowland, Megan
Schaffner, Leah
Slomka, Katelyn
Staraitis, Kathryn
Taylor, Blair
Tom, Andrew
Vogel, Kasey

Occupational Therapy Assistant – Examination

Berk, Ashley
Chambers, Kelly
Cook, Erin
Hardwick, Laura
Keller, Katlyn
Mills, Sue
Powell, Paula
Schneider, Courtney
Sobal, Nancy
Urbas, Antonia

Brock, Jaelyn
Church, Kelley
Davis, Christine
Hashman, Deanna
Kelner, Margaret
Myers, Drew
Robinson, Kelly
Sethman, Karen
Starcher, Karen
Wright, Kristi

Bushee, Tyler
Cook, Bobbi-Jo
Gale, Kayla
Holcomb, Tiffany
McCauley, Nancy
Newton, Rebecca
Rumer, Sandra
Shook, Amber
Taller, Melissa

Occupational Therapist – Endorsement

None

Occupational Therapy Assistant – Endorsement

Karp, Miriam
Wolfgang, Megan

Rosel, Andrew

Spicer, Erin

Occupational Therapist – Reinstatement

Fugate, Bryan
Scott, Laurie

Gold, Debra

Sadowski, David

Occupational Therapy Assistant – Reinstatement

None

Occupational Therapist – Restoration

Teater, Amanda

Occupational Therapy Assistant Restoration

Loewenstine, Julie

Limited License Agreements

Jean Halpin reported the Section received five limited license applications and closed zero limited license applications since the January 16, 2014 meeting. There are currently twenty-two limited license applications/agreements being monitored.

Jean Halpin reported that Angela Stevenot and Ria Caldwell complied with all terms and conditions and were released from their limited license agreements.

Jean Halpin recommended that, pursuant to rule 4755-3-01(F) of the Administrative Code, the Section offer a limited license agreement to occupational therapy assistant endorsement applicant #5338554. **Action:** Beth Ann Ball moved that Section grant a limited occupational therapy assistant license agreement to occupational therapy assistant endorsement applicant #5338554. Rebecca Finni seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. Jean Halpin abstained from voting. The motion carried. The Section granted a limited license agreement to Lori Ann Brennan.

Jean Halpin recommended that, pursuant to rule 4755-3-12(D)(2) of the Administrative Code, the Section offer a limited license agreement to occupational therapist reinstatement applicant #5342828. **Action:** Rebecca Finni moved that Section grant a limited occupational therapist license agreement to occupational therapist reinstatement applicant #5342828. Mary Beth Lavey seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. Jean Halpin abstained from voting. The motion carried. The Section granted a limited license agreement to Jordan R. Gray.

Jean Halpin recommended that, pursuant to rule 4755-3-05(D) of the Administrative Code, the Section offer a limited license agreement to occupational therapy assistant restoration applicant #5346174. **Action:** Rebecca Finni moved that Section grant a limited occupational therapist license agreement to occupational therapy assistant restoration applicant #5346174. Mary Beth Lavey seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. Jean Halpin abstained from voting. The motion carried. The Section granted a limited license agreement to Bobbie Jo Henning.

Jean Halpin recommended that, pursuant to rule 4755-3-12(D)(2) of the Administrative Code, the Section offer a limited license agreement to occupational therapist reinstatement applicant #5342620. **Action:** Beth Ann Ball moved that Section grant a limited occupational therapist license agreement to occupational therapist reinstatement applicant #5342620. Mary Beth Lavey seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. Jean Halpin abstained from voting. The motion carried. The Section granted a limited license agreement to Patricia Mayer.

Jean Halpin recommended that, pursuant to rule 4755-3-05(D) of the Administrative Code, the Section offer a limited license agreement to occupational therapy assistant restoration applicant #5348393. **Action:** Rebecca Finni moved that Section grant a limited occupational therapy assistant license agreement to occupational therapy assistant restoration applicant #5348393. Mary Beth Lavey seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. Jean Halpin abstained from voting. The motion carried. The Section granted a limited license agreement to Angela Barth.

The Section clarified the limited license requirements for occupational therapist restoration applicant #5333945. **Q:** If a limited license holder fails the NBCOT certification examination, does the applicant have to reapply? **A:** The Section would keep the existing application open for one year from the date listed on the limited license agreement. The applicant can retake the NBCOT certification examination prior to the file close date. Otherwise, the applicant would be required to submit a new application for licensure to the OT Section.

Continuing Education Report

Action: Mary Beth Lavey moved that the Section approve 72 applications for contact hour approval. Jean Halpin seconded the motion. Kimberly Lawler was absent for the vote due to the Enforcement Review Panel. The motion carried.

Assistant Attorney General's Report

Yvonne Tertel, AAG, had no formal report for the Section.

Case Review Liaison Report

Kimberly Lawler reported that the Enforcement Division opened four cases and closed zero cases since the January 16, 2014 meeting. There are currently eighteen cases open. There are one consent agreement and one adjudication order being monitored.

Enforcement Actions

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-008 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-008 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Felix Correa, OTA.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-013 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-013 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Kathryn M. Hoffert, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-014 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-014 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Bruce Kasnik, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-015 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-015 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Tyra Klink, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-016 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-016 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Alicia Vasiladis, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-017 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-017 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Christina Watts, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-018 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-018 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Quianna Alexandra, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-019 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-019 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Laura Glasscock, OT.

Kimberly Lawler recommended that the Section accept consent agreement OT FY14-020 in lieu of going to hearing.

Action: Jean Halpin moved that the Section accept consent agreement OT FY14-020 in lieu of going to hearing. Rebecca Finni seconded the motion. Kimberly Lawler abstained from voting. The motion carried. The Section accepted the consent agreement for Judith Swarm, OT.

Affidavit Hearing

Good afternoon. My name is Rebecca Finni, Chairperson of the Occupational Therapy Section of the Ohio Occupational Therapy, Physical Therapy and Athletic Trainers Board. Let the record show that these proceedings were called to order at 12:30 pm on March 6, 2014, at the Vern Riffe Center, 77 South High Street, Columbus, Ohio, 43215. Members of the Board present for the proceedings are:

The Executive Director called roll:

Beth Ann Ball	Present
Rebecca Finni	Present
Jean Halpin	Present
Mary Beth Lavey	Present
Kimberly Lawler	Present

It will be noted for the record that a majority of the members of the Board are present. There will be one adjudication proceeding today. The proceeding is in the matter of case number OT-FY14-011, Mirna Monroy-Cubie, OTA.

This proceeding shall be an affidavit-based adjudication relative to a Notice of Opportunity for Hearing mailed to the respondent in the aforementioned cases and believed to have been properly serviced according to the Administrative Procedures Act (Chapter 119. of the Ohio Revised Code).

As the respondent did not properly request a hearing in the case, this proceeding will be held before the board pursuant to *Goldman v. State Medical Board of Ohio*. The individual named does not have the ability to present written or oral testimony today, but may be present to hear the proceedings and outcome.

You have already received sworn affidavit from the Board's Enforcement Division Supervisor and accompanying exhibits for the Goldman Proceeding in your board packet. The affidavit contains the evidence and testimony upon which you will deliberate. Please take a few moments to review the evidence and testimony.

In lieu of a stenographic record being made, let the minutes reflect the original sworn affidavit and exhibits shall be kept as the official record of the proceedings in the aforementioned matter in the Board office.

I will now recognize Assistant Attorney General, Yvonne Tertel, for the purpose of providing a brief synopsis of the case.

Ms. Tertel reviewed the case for the Board.

Having heard Ms. Tertel's synopsis, may I now have motion to admit the facts and exhibits outlined in the sworn affidavit in the aforementioned case into evidence?

Action: Beth Ann Ball moved to admit the facts and exhibits outlined in the sworn affidavit for case number OT-FY14-011, Mirna Monroy-Cubie, OTA. Mary Beth Lavey seconded the motion. Kimberly Lawler abstained from voting. The motion carried.

There being no further evidence to come before the board, this proceeding is now closed at 12:38 pm.

The procedural and jurisdictional matters having being satisfied, we will now continue with the proceeding by deliberation on the sworn affidavit and exhibits.

At this time, is there a motion to recess the meeting in order to go into private session for the purpose of quasi-judicial deliberation on case number OT-FY14-011, Mirna Monroy-Cubie, OTA, and to reconvene the meeting after deliberations are complete?

Action: Mary Beth Lavey moved to recess the meeting to go into private session for the purpose of quasi-judicial deliberation on these matters. Jean Halpin seconded the motion.

The Executive Director called roll:

Beth Ann Ball	Yes
Rebecca Finni	Yes
Jean Halpin	Yes
Mary Beth Lavey	Yes
Kimberly Lawler	Yes

The Section went into private session at 12:39 p.m. and came out at 12:49 p.m. Kimberly Lawler left the room during private session and did not participate in the deliberations.

After review of the evidence the Board makes the following findings:

1. The Board has proper jurisdiction over this matter.
2. Monroy-Cubie did not comply with the terms of the Consent Agreement she entered into with the Board on July 24, 2013. Specifically, Monroy-Cubie has not paid her \$250.00 fine, nor had her employer send written notification on company letterhead to the Enforcement Division indicating that they were provided with a copy of the Consent Agreement.
3. Monroy-Cubie has failed to cooperate with the board investigation by failing to follow through with statements made during a telephone conversation with the Board's Enforcement Staff, and for failing to return/respond to Enforcement Division contact.
4. The Board sent the Notice of Opportunity for Hearing on December 11, 2013, via certified mail, pursuant to Revised Code section 119.07. This Notice was signed for on an undocumented date. The Notice informed Monroy-Cubie of the Board's intent to take disciplinary action against her license as an occupational therapy assistant in the state of Ohio for violation of Ohio Revised Code sections 4755.11 (A)(3) and (A)(19)(a).
5. Monroy-Cubie did not request a hearing on the aforementioned charge.

After review of the evidence, the Board makes the following conclusions of law:

1. Monroy-Cubie was properly served with the notice of opportunity for hearing pursuant to Revised Code section 119.07.
2. Monroy-Cubie violated Ohio Revised Code sections 4755.11 (A)(3) and (A)(19)(a).

Action: Rebecca Finni moved that the license of Mirna Monroy-Cubie, OTA, be revoked based on the affidavit, findings, and conclusions of law before us. Jean Halpin seconded the motion.

The Executive Director called roll:

Beth Ann Ball	Present
Rebecca Finni	Present
Jean Halpin	Present
Mary Beth Lavey	Present
Kimberly Lawler	Abstained

The motion carried. The license of Mirna Monroy-Cubie, OTA, is hereby revoked.

The Executive Director is hereby instructed to prepare an adjudication order to carry out the mandates of this Board and serve the order on OT-FY14-011, Mirna Monroy-Cubie, OTA, in the manner prescribed by law.

This concludes the Matter of OT-FY14-011, Mirna Monroy-Cubie, OTA.

Correspondence

1. **James Boylen, OTR/L:** Mr. Boylen asked the Section questions regarding whether occupational therapy practitioners can provide restorative programs to residents that are not on their caseload. **Reply:** The requirements for provision of occupational therapy services are consistent across practice settings. If you are representing yourself as an occupational therapist and/or your services are related to your skills as an occupational therapist (regardless of payer source), each client would require an evaluation and the establishment of an occupational therapy treatment/intervention plan. If, as an employee of the facility, you are asked to participate in duties that may not be under skilled (OT) but related duties, you would not be representing yourself as occupational therapists or occupational therapy assistants, or billing as such. If you decide to bill for your services through a third party payer, the Section recommends that you refer to Medicare, Medicaid, and/or payer policies for any specific billing and reimbursement requirements in your setting. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association.
2. **Maria Sheller, OTR/L:** Ms. Sheller asked the Section questions regarding supervisory ratios being affected by Level II occupational therapy assistant students. **Reply:** There is nothing in the Occupational Therapy Practice Act that addresses directly how students affect supervisory levels. Since the supervising occupational therapist is ultimately responsible for all supervised occupational therapy assistants and their students, **the decision of how many is acceptable should be a collaborative one with the supervising occupational therapist.** Rule 4755-7-04 of the Administrative Code addresses the supervision of occupational therapy assistant students. According to this rule, "Supervision must ensure consumer protection. The supervising occupational therapist is ultimately responsible for all clients and is accountable and responsible at all times for the actions of persons supervised." The Section recommends that you review the Accreditation Council for Occupational Therapy Education (ACOTE) Standards regarding supervision of students.
3. **Melissa Sturgill-Lucas, OTA/L:** Ms. Sturgill-Lucas asked the Section questions regarding occupational therapy services during calamity days. **Reply:** The Occupational Therapy Practice Act does not address these circumstances directly. Ethical considerations for using backpack activities during calamity days should take into consideration that **the work done at home would not be documented as treatment time.** In accordance with rule 4755-7-08 (B)(15) of the Ohio Administrative Code, a licensee shall adhere to minimal standards of acceptable prevailing practice. Failure to adhere to minimal standards of practice, whether or not actual injury to a client occurred, includes, but not limited to: (a) Documenting or billing for services not actually performed. The Section recommends contacting Cathy Csanyi, the OT/PT Specialty Consultant with the Ohio Department of Education, Office for Exceptional Children at (419) 747-2806 or via email at cathy.csanyi@ode.state.oh.us. The Ohio Occupational Therapy Association's pediatrics member support group chair may be able to assist you with questions regarding school based practice during calamity day make up programs. You can contact the Ohio Occupational Therapy Association at www.oota.org.
4. **Shelly Boldman, OTR/L:** Ms. Boldman asked the Section questions regarding supervising quotas for occupational therapy assistants in different facilities and 10th visit considerations. **Reply:** *Regarding your first question about supervision of occupational therapy assistants*, the supervisory ratio applies across all practice locations. If you are providing direct client treatments at any facility, you may supervise no more than four occupational therapy assistants, even if you do not provide direct client treatments at the facility where you supervise the occupational therapy assistants. *Regarding your question about the length of time for the 10th visit for a Medicare part B patient*, the "10th visit note" is a documentation requirement specific to Medicare Part B that requires specific visits during a course of therapy to be completed and documented by a licensed therapist. As it is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice, the Section recommends that you refer to Medicare policies for specific guidelines regarding this requirement. You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association.
5. **Claire Heffron, OT/L:** Ms. Heffron asked the Section questions regarding school based service specifically with students who are attending programs using the ODE Autism Scholarship. **Reply:** The Section requested clarification form the correspondent.

6. **G. Sharon Handley, OTR/L:** Ms. Handley asked the Section questions occupational therapist rights responsibilities when determining caseload requirements in school based setting. **Reply:** Pursuant to paragraphs (B)(1) to (B)(3) of rule 4755-7-04 of the Administrative Code, when maintaining a separate caseload, a full-time equivalent occupational therapist may supervise no more than four full-time equivalent occupational therapy assistants. The number of occupational therapy assistants that a part-time or PRN occupational therapist may supervise is proportionate to the number of hours worked by the part-time or PRN occupational therapist. Rule 3301-51-09 (I)(3)(c) & (e) of the Ohio Department of Education's Operating Standards states that an occupational therapist shall provide services to no more than 50 school-age students or 40 preschool students. The Ohio Department of Education interprets this as the number of students to whom the therapist provides direct service. These numbers should be adjusted to the number of hours that you are working. As you described it, you do not serve the district which the COTA is serving. If, in addition to your direct service, you are asked to supervise the COTA, your direct service caseload can be adjusted. Paragraph (I)(1) of rule 3301-51-09 also states that determination of the appropriate caseload for an individual therapist must take into consideration the following: The severity of each eligible child's needs; The level and frequency of services necessary for the children to attain IEP goals/objectives; Time required for planning services; Time required for evaluations including classroom observations; Time required for coordination of the IEP services; Time required for staff development; Time required for follow up; and Travel time required for the number of building served. It is the position of the Occupational Therapy Section that all responsibilities of the occupational therapist and occupational therapy assistant, including both direct and indirect service to students, must be considered when determining an appropriate therapist caseload. The number of students to whom the supervising therapist provides direct service must be reduced as the number of assistants a therapist supervises expands, since this increases the number of students for whom the therapist is responsible. The therapist must ensure provision of appropriate services and must not serve and/or supervise service for more students than he/she can provide skilled care, including informed direction of all aspects of the service provided for students by the assistant. The code of ethical conduct requires licensees, regardless of practice setting, to maintain the ability to make independent judgments and strive to effect changes that benefit the client (4755-7-08 (B)(9)). The Section recommends contacting Cathy Csanyi, the OT/PT Specialty Consultant with the Ohio Department of Education, Office of Exceptional Children at (419) 747-2806 or via email at cathy.csanyi@ode.state.oh.us for answers to your specific questions. The Ohio Occupational Therapy Association's pediatrics member support group may also be able to assist you with your questions regarding school-based practice. You can contact the Ohio Occupational Therapy Association at www.oota.org.
7. **Lequitta Fontenot, OTA/L:** Ms. Fontenot asked the Section requesting resources for occupational therapy practitioners' rights in the workplace. **Reply:** The mission of the Board is to protect the consumers of occupational therapy services. Unless the employment issue has a relationship to the Ohio Occupational Therapy Practice Act, you should contact the Ohio Occupational Therapy Association. The role of the professional association is to advocate for their members.
8. **Philip Enzerra, OTR/L** Mr. Enzerra asked the Section questions supervision of occupational therapy assistants. **Reply:** Regarding your first question, it is the duty of the Occupational Therapy Section to protect the consumers of occupational therapy services and ensure that students receive care consistent with safe and ethical practices. To this end, licensees are required to report to their licensing board any entity that places them in a position of compromise with the code of ethical conduct as stated in rule 4755-7-08 (B)(12) of the Administrative Code. Pursuant to rule 4755-7-01 of the Administrative Code, **the occupational therapy assistant is also responsible** to make sure the supervising occupational therapist possesses a current license to practice occupational therapy and understands whom they are supervising prior to providing occupational therapy treatment. The supervising licensed occupational therapist need not be on-site, but must be available for consultation and collaboration with the occupational therapy assistant at all times. Your second question about contract positions speaks to information that the Section does not directly oversee. Columbus City Schools does have contract positions for occupational therapists and occupational therapy assistants, however, you might want to contact the Ohio Occupational Therapy Association for further information regarding other school district contracts in Ohio. As to your question about billing and payment for services, the Section recognizes the challenges for billing indicated by your question. However, it is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice. You might also contact the Ohio Occupational Therapy Association, or the American Occupational Therapy Association regarding this question.

9. **Terri Bendele, OTA/L:** Ms. Bendele asked the Section questions regarding co-signing notes and completing discharge summaries, and whether an occupational therapist can provide supervision at another site owned by the company. **Reply:** Your first question describes a situation where there was a resignation of a supervising therapist and no transfer of care. As you describe it, it is unclear if an occupational therapist is in place for supervision. **As you know, as an occupational therapy assistant, you must have a supervising occupational therapist before you can legally provide occupational therapy service.** Rule 4755-7-03 addresses delegation: According to this rule, the occupational therapy assistant may implement the occupational therapy treatment/intervention plan established by the supervising occupational therapist. We recognize the challenges that this requirement places on you. However, you have a responsibility to inform your agency of this prerequisite. That being said, each occupational therapy practice should determine a system that will allow for transfer of care in a situation where an occupational therapist is terminating the client/therapist relationship. The transfer of care must be documented in the client's medical record by identifying the new occupational therapist by name, if there is an occupational therapist, or transferring to the individual responsible for management of therapy services, if there's not an occupational therapist, for reassignment. Regarding the documentation, it is the position of the Occupational Therapy Section that the therapist assuming the treatment/intervention plan cannot retroactively co-sign documentation prior to assuming the treatment/intervention plan. Your second question is also regarding transfers of care and a resignation after evaluations were completed. Because the transfer was due to an elective termination by the occupational therapy licensee and notice was given to the agency, the agency is responsible for hiring a new occupational therapist to receive the treatment/intervention plans. If there is no occupational therapist in place to supervise, the occupational therapy assistant may not continue service. Supervision of the occupational therapy assistant, as defined in division (C) of section 4755.04 of the Revised Code, requires initial direction and periodic inspection of the service delivery and relevant in-service training. The supervising occupational therapist need not be on-site, but **must be available for consultation with the occupational therapy assistant at all times.** Evidence must be established, either in the client records or in a separate document (e.g.: collaboration log), that the supervision took place. Regarding a time frame for discharge notes, there is nothing in the Ohio Occupational Therapy Practice Act that addresses specifically the amount of time required for a discharge note to be completed. However, hospital or facility policies, accrediting bodies, and/or reimbursement agencies may be more restrictive than the Ohio Occupational Therapy Practice Act. They may have other requirements and guidelines, including timing policies for notes to be posted. In any situation, licensees should follow the more restrictive policies. You might also contact the Ohio Occupational Therapy Association, or the American Occupational Therapy Association for best practice guidelines in this area. Your question about a supervising occupational therapist from another facility raises more questions. The occupational therapist who supervises your practice is responsible for your clients and assumes your caseload and the treatment/intervention plans. Rule 4755-7-04 (A) states: Supervision must ensure consumer protection. The supervising occupational therapist is ultimately responsible for all clients and is accountable and responsible at all times for the actions of persons supervised.
10. **Erin Echnat, OTA/L:** Ms. Echnat asked the Section questions regarding guidelines for documenting occupational therapy services for Medicare. **Reply:** While the Ohio Occupational Therapy Practice Act is not specific about the components of documentation, it is the position of the Occupational Therapy Section that occupational therapy practitioners should follow the American Occupational Therapy Association's *Guidelines for Documentation of Occupational Therapy* (AOTA, 2008) when determining documentation of occupational therapy in any setting. There is nothing in the laws and rules that govern the practice of occupational therapy in Ohio that requires short-term goals/objectives for each long-term goal as a part of the treatment/intervention plan. However, to meet best practice standards, the treatment/intervention plan must include measurable objectives for expected client outcomes. You may wish to refer to Medicare and other third party payer policies to determine what they require. Insurer policies and/or federal regulations may be more or less restrictive than the Ohio Occupational Therapy Practice Act. In any situation, licensees should follow the more restrictive policies.
11. **Julie Beach, OTR/L:** Ms. Beach asked the Section questions regarding whether it is appropriate for an occupational therapist to recommend behavioral health or geropsych consult during an initial evaluation. **Reply:** There is nothing in the Occupational Therapy Practice Act that prohibits occupational therapist from making direct referrals to another healthcare practitioner. In fact, rule 4755-7-08 (C)(8) of the Ohio Administrative Code, states that occupational therapy practitioners shall refer to or consult with other

service providers whenever such a referral or consultation would be beneficial to the care of the client. The referral or consultation process should be done in collaboration with the client. A referral in this type of circumstance should be documented by the occupational therapist in the medical record to clearly demonstrate a referral for that service. Such referrals would not constitute a delegation of tasks or duties of occupational therapy.

12. **Marlys Loyer, OTR/L:** Ms. Loyer asked the Section questions regarding whether an occupational therapists whose license is in escrow can provide consultative services regarding sensory activities in the classroom. **Reply:** This letter is in response to your correspondence regarding speaking about sensory activities in Ohio while your Ohio license is in escrow. According to rule 4755-3-05 of the Administrative Code the licensee whose license is in escrow will not engage in the active practice of occupational therapy, as defined by division (A) of section 4755.04 of the Revised Code. Section 4755.04 does not include any wording prohibiting presenting information on practice in general or specific modalities. It is the position of the Occupational Therapy Section that you may provide presentations in Ohio while your license is in escrow.
13. **Shelly Armstrong, OTR/L:** Ms. Armstrong asked the Section question regarding how long should an occupational therapy practitioner keep a supervision log. **Reply:** The Occupational Therapy Section does not have policy for records retention. The Section suggests that you contact your Medical Information Department and/or legal counsel regarding an appropriate record retention policy. You may also refer to OOTA or AOTA for information regarding best practice in this area. Although the Section does not have a policy for records retention, it is the position of the Occupational Therapy Section that the student records, such as IEPs and MFEs, ultimately belong to the school district. It is recommended that occupational therapists retain a copy of their therapy logs and intervention plans. The Section recommends contacting Cathy Csanyi, the OT/PT Specialty Consultant with the Ohio Department of Education, Office for Exceptional Children at (419) 747-2806 or via email at cathy.csanyi@ode.state.oh.us. The Ohio Occupational Therapy Association's pediatrics member support group chair may be able to assist you with questions regarding school based practice via telerehabilitation. You can contact the Ohio Occupational Therapy Association at www.oota.org.

Joint Correspondence

- JB1. **Stephanie Bachman, OT/L:** Ms. Bachman asked the Occupational and Physical Therapy Sections whether CPR is a requirement for occupational and physical therapy licensure. **Reply:** Although the Sections encourage Basic Life Support certification, there is nothing in the Ohio Occupational or Physical Therapy Practice Acts that requires this credential for occupational and/or physical therapy licensure. You should check with your facility policies to see if they have a requirement for CPR certification.
- JB2. **Kayla Atkinson, OTA/L:** Ms. Atkinson asked the Occupational and Physical Therapy Sections questions regarding whether occupational therapy assistants/physical therapist assistants can perform home assessments. **Reply:** A home assessment is the sole responsibility of the physical therapist. However, prior to the completion of a home assessment, the physical therapist assistant may go into the home, without patient involvement, to perform an environmental survey (architectural barriers, floor plan, etc.). If the patient is going into his/her home environment and his/her function in the home is being assessed, this assessment must be performed by a physical therapist. A physical therapist assistant may continue an established treatment plan of functional activities in the home or other non-clinical environment or may complete an environmental checklist once the patient assessment has been completed. Pursuant to section 4755.04 (C) of the Revised Code and rule 4755-7-03 (A) of the Administrative Code, it is the position of the Occupational Therapy Section that for home assessments, occupational therapy assistants may gather objective information and report observations, with or without the client and/or occupational therapist being present under an established occupational therapy treatment/intervention plan. However, they may not interpret this data. It is the responsibility of the occupational therapist to interpret the data gathered by the occupational therapy assistant and collaborate with the occupational therapy assistant to make recommendations. Any collaboration between the occupational therapist and occupational therapy assistant must be reflected in client documentation.
- JB3. **Ashley Fields, PT:** Ms. Fields asked the Occupational and Physical Therapy Sections questions regarding occupational therapy and physical therapy practitioners can perform iontophoresis. **Reply: In response to your first question,** there is nothing in the Occupational and Physical Therapy Practice Acts that prohibits

a physical therapist or an occupational therapist from providing a patient with iontophoresis treatment and instruction on their application and use as part of a home program. However, the patient will need to obtain any medication used in the treatment from a pharmacy and may have to obtain the unit from a durable medical equipment (DME) supplier. The procedure you described in your letter is permissible under the Ohio Occupational and Physical Therapy Practice Acts. More information on this can be found on the Board's website by going to the Publications page under the Physical Therapy dropdown menu and reviewing the "Guidelines for the Use of Pharmaceuticals in Physical Therapy." Please review that document to see if it answers your questions. If you still have additional questions after reviewing the document, please contact the Board. The Limited Category 2 Permit is granted by the Ohio State Board of Pharmacy and not by the Physical Therapy Section of the Ohio Occupational Therapy, Physical Therapy and Athletic Trainers Board. You may, therefore, wish to contact the Ohio State Board of Pharmacy to further clarify any questions about dispensing dexamethasone under the Limited Category 2 Permit. **In response to your second question**, yes physical therapist assistants are able to administer iontophoresis to a patient if this procedure is in the established plan of care and the physical therapist has determined the parameters of treatment prior to the physical therapist assistant performing this procedure. Pursuant to section 4755.04 (A)(6) of the Revised Code, occupational therapy includes the "administration of topical drugs that have been prescribed by a licensed health professional authorized to prescribe drugs." Since iontophoresis is a topical drug, it falls within the scope of practice of an occupational therapist. If this will be administered by an occupational therapy assistant, both the supervising occupational therapist and occupational therapy assistant must document and demonstrate competency in the technique.

JB4. Jessica Sabine: Ms. Sabine asked the Occupational and Physical Therapy Sections questions regarding whether occupational therapy assistants/physical therapist assistants can write orders. **Reply:** Yes the physical therapist assistant is allowed to write physical therapy orders, however all orders written by the physical therapist assistant must be counter-signed by the physical therapist and ultimately signed by the physician. In accordance with rule 4755-27-02 (B) of the Ohio Administrative Code, physical therapist assistants are not qualified to: (1) interpret physician referrals, (2) conduct initial patient evaluations, (3) write initial or ongoing patient treatment plans, (4) conduct re-evaluations of the patient or adjust patient treatment plans or (5) perform the discharge evaluation and complete the final discharge summary. Occupational therapists are not required to have a referral and/or prescription to evaluate or treat patients in the State of Ohio. The decision whether an occupational therapy assistant or occupational therapist is permitted to write orders for therapy in patient charts is based on facility policy. Accrediting bodies and/or reimbursement agencies may have other requirements and guidelines, including requiring a physician's referral and/or prescription, which need to be met for accreditation and/or reimbursement of occupational therapy services. It is the position of the Occupational Therapy Section that occupational therapy assistants may gather and summarize objective information; however, they may not interpret this data. It is the responsibility of the occupational therapist to interpret and make recommendations for the purpose of discharge plan development, as indicated in rule 4755-7-02 of the Ohio Administrative Code. The collaboration between the occupational therapy assistant and the occupational therapist must be reflected in the client documentation. Pursuant to rule 4755-7-02 (B)(1)(b) of the Administrative Code, the occupational therapy assistant may contribute to and collaborate in the preparation, implementation, and documentation of the treatment/intervention plan and the discharge plan. Pursuant to rule 4755-7-04 (H) of the Administrative Code, any documentation written by an occupational therapy assistant for inclusion in the client's official record shall be co-signed by the supervising occupational therapist. Third party payer policies, other regulatory agencies, and/or facility policies may be more restrictive than the Ohio Occupational Therapy Practice Act. In any situation, licensees should follow the more restrictive policies.

Old Business

None

New Business

Review Cease/Desist Letter and Board Process (Yvonne Tertel, AAG)

The Section tabled this item until the May 2014 Section meeting.

Review Retreat Agenda

The Section reviewed the retreat agenda. The retreat will be held on June 18, 2014. The retreat topics are listed below.

- Display of Wall License
- Non-Traditional roles/supervision requirements
- Compact Agreements

Discuss Granting Continuing Education Credit for Supervision of a Level I Student

The Section requested that the Executive Director obtain additional information on this topic. The Section will discuss this topic further at the May 2014 Section meeting.

Open Forum

None

Ohio Occupational Therapy Association (OTA) Report

Heather Meredith had no formal report for the Section.

Items for Next Meeting

- Review the Board Process of Issuing Cease Desist Letters
- Discussion on offering CE Credit for Supervision of a Level I student

Next Meeting Date

The next regular meeting date of the Occupational Therapy Section is scheduled for Thursday, May 8, 2014.

Action: Kimberly Lawler moved to adjourn the meeting. Beth Ann Ball seconded the motion. The motion carried. The meeting adjourned at 12:50 p.m.

Respectfully submitted,
Diane Moore

Rebecca Finni, OTR/L, Chairperson
Ohio Occupational Therapy, Physical Therapy,
and Athletic Trainers Board, OT Section

Beth Ann Ball, OTR/L, Secretary
Ohio Occupational Therapy, Physical Therapy,
and Athletic Trainers Board, OT Section

Jeffrey M. Rosa, Executive Director
Ohio Occupational Therapy, Physical Therapy,
and Athletic Trainers Board

BB:jmr:dm



Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board

77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

TO: Members of the Occupational Therapy Section

FROM: Jeffrey M. Rosa, Executive Director

DATE: May 2, 2014

RE: Executive Director's Report

In addition to an account of my activities since the March Joint Board and Section meetings, attached to this report is a copy of the budget update and the legislative update.

Legislative

Attached to this memo is a status report of relevant legislation from the 130th General Assembly as of May 1, 2014.

Board Management

- Reviewed the minutes for the March Section meetings.
- Reviewed OT, PT, and AT correspondence and licensure applications.
- On May 5, reconciled revenues with Diane Moore.
- On April 24, attended the Ohio Boards and Commissions Management meeting.
- On April 29, attended an e-license 2.0 steering committee meeting.
- On April 11, attended an e-license 2.0 stakeholders meeting.
- On March 12, 25-28, with Diane Moore, worked with Iron Data staff regarding configuration for the new licensing system.
- On April 7-10, with Diane Moore, attended letters training for the new licensing system.
- On April 28, attended the JCARR meeting covering the Board's no change rules.
- March OT correspondence was sent on March 17, 2014.
- March PT correspondence was sent on March 17, 2014.
- There was no AT correspondence in March.
- March Joint correspondence was sent on March 17, 2014.

Fiscal Responsibility

The attached report reflects the expenditures and revenues that occurred during FY 2014 through April 30, 2014 (with the following exceptions):

- Payments made during this fiscal year using last year's (FY 2013) encumbered funds;
- Funds encumbered in FY 2014 via purchase order, pending payment.

Report Legend

- **Actual Spent** – The total amount spent for each of the subcategories for the particular expense category (e.g.: 500, 520, etc.) at the time of reporting, with the above exceptions.
- **Allotment** – The amount allocated for the expense category. This figure may be adjusted during the fiscal year if allotments are increased (e.g.: controlling board request to increase appropriation authority) or if allotments are transferred between expense categories.
- **Amount Remaining** – The amount remaining in the expense category at the time of the report. This figure is obtained by subtracting the actual spent from the allotment.

- **% Spent** – Reflects the percentage of funds used for each expense category from that category's allotment. For the Section specific reports, the % of Total category indicates the percentage of total agency spending in that category that is attributable to the Section.

FY 2014 Report Summary

As of April 30, 2014, 304 days elapsed in the fiscal year (83.3%).

- *Staff Payroll* – The Board spent approximately 84% of its funds allocated to staff payroll.
- *Personal Services* – The main expenditures to date in this category are testing accommodations for the Ohio Physical Therapy Jurisprudence Exam and two PT Section hearings. Year to date, the Board has already spent more in this category than allotted for the entire fiscal year.
- *Maintenance* – The Board spent 71% in this category. The main expenditures in this category include rent, mail, Central Service Agency fees, credit card processing fees, and IT services. In April, the Board received the rent invoices for the first three quarters of the fiscal year. Rent rates increased by about 20% over what was budgeted. This is causing some concern as we near the end of the fiscal year. The Board budgeted \$8.51/sq. ft. Actual rates are \$10.51/sq. ft. For the entire year, this will be about \$8,500 more than budgeted.
- *Equipment* – The only expense in this category is the new computers.
- *Board Payroll* – The Board spent approximately 69% of its funds allocated to Board member payroll.
- *Board Travel & Maintenance* – The Board spent 106% of the funds allocated for this category. A main reason for the overspending in this category is the increase in mileage reimbursement rates.
- *Refunds* – The Board has not spent anything in this category, which is used to pay for refunds to licensees who render incorrect or duplicate payments.

Networking and Relationship Building

- None since March meetings.

Leadership for Office Staff

- None since March meetings.

Communications/Customer Satisfaction

- As of May 1, 2014, 1,510 individuals “liked” the Board’s Facebook page, an increase of 4.2% since February 25, 2014.
- As of May 1, 2014, 639 individuals followed the Board’s Twitter feed, an increase of 7.8% since February 25, 2014.

Professional Development Objectives

- On March 11, presented to the Illinois PT Board in Springfield, IL.
- On March 18-24, attended the Federation of State Boards of Physical Therapy Board of Directors meeting in Santa Barbara, CA.
- On April 10, attended a WebEx covering what occurs at the Prometric Test Center on NPTE test day.
- On April 26-27, attended the Federation of State Boards of Physical Therapy Licensure Compact Advisory Task Force in Alexandria, VA.

Presentations

- Ohio Physical Therapy Association Annual Membership Meeting (March 29)
- OT students at Xavier University (April 4)
- OOTA Columbus District (April 16)
- OT students at Ohio State University (April 21)
- OOTA Northeast and North Central Districts (May 3)

License Census

The following table lists the number of individuals licensed by the Board as of May 1, 2014.

	As of 5/1/14
OT	5,067
OT Escrow	121
OT Limited	7
OTA	3,996
OTA Escrow	89
OTA Limited	4
PT	8,364
PTA	7,043
AT	2,459
TOTAL	27,150

License Review Metrics

Attached to this memo is the license review metrics for applications approved through April 30, 2014.

Status Report of Legislation from the 130th General Assembly

Prepared by: Jeff Rosa

Report created on May 1, 2014

HB83 PSYCHOLOGY LAWS (HACKETT R) To revise the laws governing the practice of psychology.

Current Status: 12/19/2013 - **SIGNED BY GOVERNOR**; Eff. 3/20/2014

All Bill Status: 12/4/2013 - **PASSED BY SENATE**; Vote 33-0
4/17/2013 - **PASSED BY HOUSE**; Vote 96-1
2/26/2013 - Introduced

Comments: Under the OT Practice Act (ORC 4755.13 (B)), OTs are prohibited from using any "psychological procedures defined by the state board of psychology under division (C) of section 4732.23 of the Revised Code as a serious hazard to mental health and to require professional expertise in psychology." This bill deletes that paragraph. In addition, an amendment to the exemptions to psychology licensure (ORC 4732.22) state that "persons licensed, certified, or registered under any other provision of the Revised Code who are practicing those arts and utilizing psychological procedures that are allowed within the standards and ethics of their profession or within new areas of practice that represent appropriate extensions of their profession, provided that they do not hold themselves out to the public by the title of psychologist" (division (A)(8) of RC. 4732.22).

ORC Sections: 102.02, 102.022, 102.03, 2152.54, 2919.271, 2945.37, 4732.01, 4732.02, 4732.03, 4732.06, 4732.07, 4732.09, 4732.10, 4732.11, 4732.12, 4732.13, 4732.14, 4732.141, 4732.15, 4732.16, 4732.17, 4732.171, 4732.172, 4732.173, 4732.18, 4732.21, 4732.22, 4732.31, 4755.13, 4757.42, 5120.55, 5122.01

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_83

HB98 OCCUPATIONAL LICENSING LAW (GONZALES A, RETHERFORD W) To revise the Occupational Licensing Law regarding military service members and veterans.

Current Status: 11/15/2013 - **SIGNED BY GOVERNOR**; Eff. 11/15/2013

All Bill Status: 11/6/2013 - **PASSED BY SENATE**; Amended on Floor --
Emergency Clause Vote 30-3 -- Bill Vote 33-0
5/22/2013 - **PASSED BY HOUSE**; Emergency Vote 92-1 Bill Vote 93-0
3/7/2013 - Introduced

Comments: The bill requires all licensing agencies to consider military training when determining eligibility for licensure. The enacted law requires agencies to adopt rules by June 30, 2014, to specify which military programs of training, primary specialties, and lengths of service are substantially equivalent to the educational/experience requirements for licensure. The bill does not require the Board to automatically license individuals based on military training, but rather to determine if training is substantially equivalent.

ORC Sections: 4506.09, 4713.60, 4723.24, 4725.16, 4725.51, 4732.14, 4733.15, 4743.04, 5903.03, 5903.10, 5903.12, 5903.121

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_98

HB123 TELEHEALTH SERVICES (GONZALES A, WACHTMANN L) Regarding Medicaid and health insurance coverage of telehealth services.

Current Status: 2/18/2014 - **SIGNED BY GOVERNOR**; Eff. 5/20/2014

All Bill Status: 1/29/2014 - **PASSED BY SENATE**; Vote 30-0
6/26/2013 - **PASSED BY HOUSE**; Vote 95-3
4/10/2013 - Introduced

Comments: Under the bill, the Department of Medicaid is required to establish standards for Medicaid payments for health care services the Department determines are appropriate to be covered by Medicaid when provided as telehealth services. The bill defines a telehealth services as "a health care service delivered to a patient through the use of interactive audio, video, or other telecommunications or electronic technology from a site other than the site where the patient is located."

ORC Sections: 2305.25, 2305.252, 5164.94

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_123

HB130 **END DEMAND ACT-HUMAN TRAFFICKING (FEDOR T)** To authorize a judge or magistrate to order the testimony of a victim of trafficking in persons to be taken by closed circuit television equipment under certain circumstances, to prohibit the release of routine police reports that contain identifying information about minor crime victims or uncharged arrestees unless the identifying information is redacted, to specify that a public children services agency or private child placement agency is not required to make reasonable efforts to prevent the removal of a child from the child's home, eliminate the continued removal of a child from the child's home, or return a child to the child's home and that a court find that a child cannot be placed with either parent under specified circumstances, to provide that a guardian ad litem can be appointed for a child in certain situations, to extend the period within which a prosecution for trafficking in persons must be commenced from six to twenty years after the offense is committed, to specify that the Rape Shield Law applies to evidence of a rape victim's involuntary sexual activity as well as evidence of a rape victim's voluntary sexual activity, to prohibit the admission of evidence pertaining to a victim's sexual activity in a case of trafficking in persons in the same manner as the Rape Shield Law does in a case of rape, to eliminate as an element of the offense of importuning the offender's knowledge or reckless disregard of the age of the person importuned when the person importuned is a victim of trafficking in persons who is 16 or 17 years of age, to provide that if a minor is a victim of trafficking in persons or human trafficking the state does not need to prove that the minor was compelled to engage in certain specified activities, to include in the offense of promoting prostitution certain specified activities that through electronic means promotes or facilitates sexual activity for hire, to increase the penalty for soliciting when the person solicited is a minor, to require offenders convicted of solicitation when the person solicited is under 18 years of age to register as sex offenders, to prohibit including the term "massage" or any other term that implies a massage technique or method in advertisements unless certain circumstances apply, and to declare an emergency.

Current Status: 2/25/2014 - Senate Criminal Justice, (Second Hearing)

All Bill Status: 6/26/2013 - **PASSED BY HOUSE**; Bill Amended Bill Vote 98-0
Emergency Clause Vote 98-0
4/16/2013 - Introduced

Comments: One section of the bill states:

"No person shall advertise the practice of massage or any other term that implies a massage technique or method, including relaxation massage, in any public publication or communication unless the person is a practitioner of medicine or surgery, or any of its branches, including massage therapy, and has the appropriate certificate from the state medical board, the person is a chiropractor licensed by the state chiropractic board, the person is a cosmetologist, esthetician, or manicurist licensed by the state board of cosmetology, or the person is licensed, certified, or regulated by a political

subdivision to engage in massage."

The bill was amended to allow any individual licensed under Title 47 (includes OT, PT, & AT) to advertise for massage if their professional license authorizes the individual to practice massage or a massage technique or method.

ORC Sections: 109.54, 149.435, 2151.414, 2151.419, 2901.13, 2905.32, 2907.02, 2907.05, 2907.07, 2907.19, 2907.22, 2907.24, 2907.241, 2907.25, 2927.17, 2929.01, 2937.11, 2950.01, 2951.041

State Bill Page: <http://www.legislature.state.oh.us/bills.cfm?ID=130> **HB 130**

HB180 CARDIAC ARREST-YOUTH ACTIVITIES (PILLICH C) With regard to sudden cardiac arrest in youth athletic activities.

Current Status: 6/19/2013 - House Health and Aging, (First Hearing)

All Bill Status: 5/28/2013 - Introduced

Comments: The bill requires a student-athlete's coach to remove the student-athlete from participation in an athletic activity if any of the following determine that the student exhibits signs/symptoms of sudden cardiac arrest:

(a) Game official; (b) Coach; (c) Athletic trainer; (d) Physician; or (e) Any other official designated by a school.

If a student-athlete is removed, they cannot return to participation until they are evaluated and cleared to return by one of the following:

(a) Physician; or (b) Certified nurse practitioner, clinical nurse specialist, or certified nurse-midwife.

ORC Sections: 3313.5310, 3314.03, 3326.11, 3707.56, 3707.57

State Bill Page: <http://www.legislature.state.oh.us/bills.cfm?ID=130> **HB 180**

HB220 PHYSICAL THERAPIST PRACTICE (HOOD R) To modify the scope of practice of a physical therapist.

Current Status: 3/25/2014 - House Health and Aging, (Second Hearing)

All Bill Status: 6/25/2013 - Introduced

Comments: This is a bill backed by the Ohio Physical Therapy Association. The bill modifies the physical therapy scope of practice (ORC 4755.40) to read:

(A)(1) "Physical therapy" means all of the following, for the purpose of preventing, correcting, or alleviating physical impairments, functional limitations, or any disability:

(a) The evaluation of a person to determine a diagnosis of physical impairment, functional limitations, or disability, to determine a prognosis, and to determine a plan of therapeutic intervention;

(b) The treatment of a person by physical measures, which include massage, heat, cold, air, light, water, electricity, sound, manual therapy techniques, and the performance of tests of neuromuscular function as an aid to such treatment;

(c) The use of therapeutic exercises and rehabilitative procedures, with or without assistive devices.

(2) If performed by a person who is adequately trained, physical therapy includes all of the following:

(a) The design, fabrication, revision, education, and instruction in the use of various assistive devices including braces, splints, ambulatory or locomotion devices, wheelchairs, prosthetics, and orthotics;

(b) The administration of topical drugs that have been prescribed by a licensed health professional authorized to prescribe drugs, as defined in section 4729.01 of the Revised Code;

(c) The establishment and modification of physical therapy programs, treatment planning, patient education and instruction, and consultative services;

(d) Physiotherapy;

(e) Ordering appropriate tests, including diagnostic imaging and studies, that are performed and interpreted by other licensed health care professions.

(3) Physical therapy does not include the use of Roentgen rays or radium for diagnostic or therapeutic purposes, or the use of electricity for cauterization or other surgical purposes.

Existing paragraphs (B), (C), and (D) are not amended in this bill.

ORC Sections: 4755.40

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_220

HB232 SOCIAL WORKERS-THERAPISTS LAWS (SEARS B, MILKOVICH Z) To modify the laws governing professional counselors, social workers, and marriage and family therapists.

Current Status: 4/10/2014 - **SIGNED BY GOVERNOR**

All Bill Status: 4/2/2014 - **PASSED BY SENATE**; Vote 31-0
11/6/2013 - **PASSED BY HOUSE**; Vote 74-23
7/17/2013 - Introduced

Comments: The bill was amended on the House floor to add language authorizing occupational therapists to form corporations and limited liability companies to provide professional services in conjunction with a variety of other health care professionals. This language, which was requested by the Ohio Occupational Therapy Association, mirrors language that already exists for physical therapists.

The bill was also amended to add athletic trainers to the definition of "health care professional." The statutory definition already included OT, OTA, PT, and PTA.

ORC Sections: 1701.03, 1705.03, 1705.04, 1705.53, 1785.01, 1785.02, 1785.03, 2152.72, 2305.234, 2305.51, 2317.02, 2921.22, 2925.01, 2951.041, 3107.014, 3701.046, 3701.74, 3709.161, 3721.21, 3923.28, 3923.281, 3923.282, 3923.29, 3923.30, 3963.01, 4723.16, 4725.33, 4729.161, 4731.226, 4731.65, 4732.28, 4734.17, 4734.41, 4755.111, 4755.471, 4757.01, 4757.02, 4757.03, 4757.04, 4757.10, 4757.11, 4757.13, 4757.16, 4757.21, 4757.22, 4757.23, 4757.26, 4757.27, 4757.28, 4757.29, 4757.30, 4757.31, 4757.321, 4757.33,

4757.34, 4757.36, 4757.37, 4757.38, 4757.41, 4757.43, 4758.40, 4758.41, 4758.55, 4758.561, 4758.59, 4758.61, 4769.01, 5101.61, 5123.61

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_232

HB296 **SCHOOLS-EPINEPHRINE AUTOINJECTORS** (JOHNSON T, DUFFEY M) To permit public schools to procure epinephrine autoinjectors in accordance with prescribed procedures and to exempt them from licensing requirements related to the possession of epinephrine autoinjectors.

Current Status: 4/21/2014 - **SIGNED BY GOVERNOR**

All Bill Status: 4/8/2014 - **PASSED BY SENATE**; Emergency Clause Vote 32-0 Bill Vote 32-0

11/20/2013 - **PASSED BY HOUSE**; Vote 92-0

10/10/2013 - Introduced

Comments: Existing state law allows local boards of education to designate employees who are authorized to administer to a student a drug prescribed for the student. The bill allows school districts to procure epinephrine autoinjectors to have on premises for use in emergency situations. It appears that the bill exempts the district from the requirement to obtain a Terminal Distributor of Dangerous Drugs license from the Pharmacy Board only for the emergency epi-pens.

Under the bill, any district that elects to procure the emergency epi-pens must specify district employees, in addition to the school nurse, who may access and use the epi-pen in an emergency situation. This language would allow an athletic trainer who is identified by the district to administer the epi-pen in an emergency situation.

The Ohio Athletic Trainers Association successfully asked that the language be amended to permit licensed AT's who contract with the school and/or district, to also be able to administer the epi-pen, since the bill currently is limited to district employees.

ORC Sections: 3313.7110, 3313.7111, 3313.713, 3313.718, 3314.143, 3326.28, 3328.29, 4729.51, 4729.60, 5101.76

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_296

HB317 **MEDICAID REFORM MEASURES** (SEARS B) Regarding reforms relating to Medicaid, fraud committed against the state, penalties for certain drug offenses committed against pregnant women, non-opiate medication for released inmates, prescription-related identification requirements, and education for individuals without a high school diploma.

Current Status: 10/30/2013 - House Health and Aging, (First Hearing)

All Bill Status: 10/24/2013 - Introduced

ORC Sections: 103.41, 103.411, 103.412, 2747.01, 2747.02, 2747.03, 2747.04, 2747.05, 2747.06, 2747.07, 2747.08, 2747.09, 2925.02, 2925.03, 3313.617, 4729.553, 5120.113, 5162.01, 5162.133, 5162.70, 5163.04

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_317

HB398 **STUDY COMMITTEES CREATION** (SEARS B) To create the Veterans and Medicaid Eligibility Study Committee and the Health Care Access and Innovation Study Committee.

Current Status: 1/14/2014 - Referred to Committee House Health and Aging

All Bill Status: 12/23/2013 - Introduced
State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_398

HB488 **MBR-HIGHER EDUCATION-MILITARY VETERANS** (DOVILLA, LANDIS) To require state institutions of higher education to award credit for military training, and to make other changes regarding state support and benefits for veterans and their spouses.

Current Status: 4/9/2014 – **PASSED BY HOUSE**; Vote 92-0

All Bill Status: 3/18/2014 - Introduced

Comments: This bill codifies many of the provisions contained in the Governor's Executive Order. Although the bill has not yet passed, significant portions of the Board's "HB 98" rules are based on language contained in this bill.

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_488

HB531 **MEDICAL PROFESSIONALS-CONTINUING EDUCATION REQUIREMENTS** (GONZALES A) To authorize the State Medical Board to fine certain professionals it regulates for failing to comply with continuing education requirements without suspending the individual's license or certificate to practice, to authorize the Board to fine the professionals it regulates for violating law administered by the Board, and to impose additional terms and conditions for physician certificate restoration.

Current Status: 4/30/2014 - Introduced

ORC Sections: 4730.14, 4730.252, 4731.22, 4731.222, 4731.225, 4731.281, 4760.133, 4762.133, 4774.133, 4778.06, 4778.141

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_HB_531

SB3 **RULE-MAKING REFORM** (LAROSE F) To reform rule-making and rule-review procedures and regulatory processes.

Current Status: 4/8/2014 - **BILL AMENDED**, House State and Local Government, (Third Hearing)

All Bill Status: 6/26/2013 - **PASSED BY SENATE**; Vote 32-0
2/12/2013 - Introduced

Comments: The bill clarifies that existing rules being filed in accordance with the no change provisions must go through the Common Sense Initiative process. The bill also requires JCARR to establish, maintain, and improve an electronic rule watch system. The bill also requires agencies to prepare a report at the conclusion of the public rules hearing outlining a summary of the positions, arguments, or contentions, and of the issues raised at the hearing. This hearing summary report is required to be filed with JCARR before an agency can final file any rule.

New section 113.091 is included in the bill. This language states that if an agency imposes a fine as punishment for an act or omission, any moneys collected shall be deposited into the GRF.

ORC Sections: 101.35, 103.0511, 107.52, 107.53, 107.54, 107.55, 107.62, 107.63, 111.15, 117.20, 119.01, 119.03, 119.04, 121.39, 121.73, 121.74, 121.81, 121.811, 121.82, 121.83, 121.91, 126.02, 127.18, 1531.08, 3319.22, 3319.221, 3333.021, 3333.048, 3701.34, 3737.88, 3746.04, 4117.02, 4141.14, 5103.0325, 5117.02, 5703.14, 6111.31, 6111.51

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_3

SB13 VETERANS-ACADEMIC CREDIT (GENTILE L) To enhance support and services for veterans at state institutions of higher education and to require each institution to develop a policy for awarding academic credit to veterans for training received while in the military.

Current Status: 1/15/2014 - **BILL AMENDED**, Senate Public Safety, Local Government and Veterans Affairs, (Third Hearing)

All Bill Status: 2/12/2013 - Introduced

Comments: The bill requires state colleges and universities to award academic credit that meets the standards of the American Council on Education or equivalent standards for awarding academic credit to a student veteran for training or service completed by the student veteran as a member of the armed forces.

ORC Sections: 3333.0412, 5903.05, 5907.071

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_13

SB93 OPEN MEETINGS ACT (JONES S) To require that further information be stated in motions to hold executive sessions under the Open Meetings Act, to expand the fees and expenses that may be recovered for violations of the Act, and to make other changes to the Act.

Current Status: 1/22/2014 - Senate State Government Oversight and Reform, (First Hearing)

All Bill Status: 3/21/2013 - Introduced

ORC Sections: 121.22

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_93

SB131 HEALTH CARE PROFESSIONAL REQUIREMENT (TAVARES C) To require certain health care professionals to complete instruction in cultural competency.

Current Status: 5/22/2013 - Referred to Committee Senate Medicaid, Health and Human Services

All Bill Status: 5/15/2013 - Introduced

Comments: The bill requires applicants for initial and renewed licensure in specified professions to complete instruction/continuing education in cultural competency.

The impacted professions are dentistry, optometry, pharmacy, psychology, medicine, social worker, counselor, marriage and family therapy, and nursing.

ORC Sections: 4743.08

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_131

SB132 HEALTH CARE PROFESSIONAL LICENSE DISPLAY (TAVARES C) To require certain health care professionals to wear, when providing direct patient care, an identification card, badge, or similar device that includes a photograph of the professional and specifies the license held by the professional.

Current Status: 5/22/2013 - Referred to Committee Senate Medicaid, Health and Human Services

All Bill Status: 5/15/2013 - Introduced

Comments: The bill enacts ORC 4745.04 to require health care professionals to, at all times when providing direct patient care, wear an identification card, badge, or similar device that includes a recent photograph, the individual's name, the license held, and the expiration date of the license.

The bill also states that failure to wear the identification card would be grounds for disciplinary action. The Board's licensees are included in this bill.

ORC Sections: 4715.30, 4723.28, 4725.19, 4725.53, 4729.16, 4730.02, 4730.25, 4731.22, 4732.17, 4734.31, 4745.04, 4753.10, 4755.11, 4755.47, 4755.64, 4757.36, 4758.30, 4759.07, 4760.13, 4761.09, 4762.13, 4765.33, 4773.03, 4774.13, 4778.14, 4779.28

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_132

SB151 OHIO HEALTH CARE PROFESSIONAL LOAN REPAYMENT PROGRAM (TAVARES C) To require the Director of Health to establish the Ohio Health Care Professional Loan Repayment Program.

Current Status: 6/26/2013 - Referred to Committee Senate Medicaid, Health and Human Services

All Bill Status: 6/25/2013 - Introduced

Comments: The bill creates the Ohio Health Care Professional Loan Repayment Program to provide grants to specified primary health care professionals to assist in the repayment of qualifying educational loans. The health care professions included in the bill are:

(A) Physicians; (B) Physician assistants; (C) Certified nurse practitioners who practice a primary care specialty; (D) Certified nurse-midwives; (E) Clinical nurse specialist who specializes in psychiatric or mental health services; (F) Dentists who practice a primary care specialty; (G) Dental hygienists; (H) Independent marriage and family therapists; (I) Professional clinical counselors; (J) Licensed independent social workers; and (K) Psychologists who have passed the examination for professional practice of psychology.

ORC Sections: 4783.01, 4783.02, 4783.03, 4783.04, 4783.05, 4783.06, 4783.07, 4783.08, 4783.09

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_151

SB264 SCHOOLS- OCCUPATIONAL-PHYSICAL THERAPISTS WORKLOADS (SCHAFFER T) To require the Department of Education to solicit from school districts and educational service centers regular studies of the time spent by occupational and physical therapists on certain activities and to use the studies to determine appropriate workloads.

Current Status: 1/22/2014 - Referred to Committee Senate Education

All Bill Status: 1/14/2014 - Introduced

ORC Sections: 3323.21

State Bill Page: http://www.legislature.state.oh.us/bills.cfm?ID=130_SB_264

Ohio OTPTAT Board - FY 2014 Budget Report

Revenue	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total
OT Non-Renewal Income	\$26,880.00	\$14,890.00	\$21,100.00	\$7,890.00	\$70,760.00
OT Renewal Income	\$66,740.00	\$0.00	\$0.00	\$0.00	\$66,740.00
OTA Renewal Income	\$0.00	\$0.00	\$0.00	\$14,660.00	\$14,660.00
PT Non-Renewal Income	\$28,105.00	\$28,625.00	\$41,310.00	\$19,900.00	\$117,940.00
PT Renewal Income	\$0.00	\$276,150.00	\$295,750.00	(\$70.00)	\$571,830.00
PTA Renewal Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
AT Non-Renewal Income	\$12,340.00	\$3,330.00	\$3,650.00	\$2,715.00	\$22,035.00
AT Renewal Income	\$0.00	\$100.00	(\$100.00)	\$0.00	\$0.00
Disciplinary Fines	\$1,100.00	\$1,200.00	\$1,750.00	\$1,300.00	\$5,350.00
Income from Other Sources	\$210.00	\$205.00	\$0.00	\$0.00	\$415.00
Revenue Total	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00

Staff Payroll (500)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$100,460.18	\$89,173.36	\$100,131.35	\$31,192.04	\$320,956.93	
Salaries - OT Compensation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Paid Leave & Othr Compensation	\$16,794.46	\$14,864.33	\$21,930.36	\$3,711.97	\$57,301.12	
Other Employer-Paid Benefits	\$47,066.93	\$42,888.51	\$49,681.41	\$14,312.56	\$153,949.41	
DAS Payroll Charges	\$2,375.45	\$2,191.35	\$2,482.65	\$711.25	\$7,760.70	
Actual Spent	\$166,697.02	\$149,117.55	\$174,225.77	\$49,927.82	\$539,968.16	
<i>Allotment</i>	\$166,697.02	\$149,117.55	\$177,361.00	\$152,023.00	\$645,198.57	
<i>Amount Remaining</i>	\$0.00	\$0.00	\$3,135.23	\$102,095.18	\$105,230.41	% Spent
Total Staff Payroll	\$166,697.02	\$149,117.55	\$174,225.77	\$49,927.82	\$539,968.16	84%

Personal Services (510)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Hearing Officers	\$3,244.25	\$0.00	\$0.00	\$0.00	\$3,244.25	
Court Reporters	\$1,716.60	\$0.00	\$0.00	\$0.00	\$1,716.60	
Subpoena & Witness Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Conference Registration Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Dues, Subscriptions, ADA, Misc	\$910.00	\$2,715.00	\$1,470.00	\$240.00	\$5,335.00	
Actual Spent	\$5,870.85	\$2,715.00	\$1,470.00	\$240.00	\$10,295.85	
<i>Allotment</i>					\$15,000.00	
<i>Amount Remaining</i>					\$4,704.15	% Spent
Total Personal Services	\$5,870.85	\$2,715.00	\$1,470.00	\$240.00	\$10,295.85	69%

Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total
Office Supplies	\$1,946.45	\$533.41	\$1,113.04	\$796.00	\$4,388.90
Credit Card Processing Fees	\$295.26	\$2,335.17	\$8,042.79	\$408.39	\$11,081.61
Parking	\$90.00	\$360.00	\$270.00	\$90.00	\$810.00
Staff Travel - In State	\$0.00	\$448.12	\$261.04	\$104.00	\$813.16
Staff Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
VoIP & Toll-free Telephone	\$0.20	\$194.41	\$476.40	\$155.04	\$826.05
FedEx/UPS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Document Shredding	\$50.00	\$80.60	\$75.00	\$25.00	\$230.60
Ofc. Equip. Maint. & Repairs	\$0.00	\$0.00	\$2,025.88	\$0.00	\$2,025.88
Printing/Copying	\$0.00	\$3,867.35	\$883.40	\$715.50	\$5,466.25
Legal Notices in Newspapers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Rent (+space repairs, improve)	\$0.00	\$0.00	\$0.00	\$31,953.90	\$31,953.90
Central Service Agency	\$7,951.53	\$5,971.82	\$8,163.96	\$8,717.21	\$30,804.52
Telephone (DAS)	\$440.01	\$1,778.74	\$175.00	\$0.00	\$2,393.75

DAS Motor Pool	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
State Purchasing Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
DAS Centralized Mail Service	\$0.00	\$1,619.16	\$1,785.44	\$0.00	\$3,404.60	
DAS IT Services	\$1,360.28	\$4,117.62	\$10,425.58	\$1,292.69	\$17,196.17	
Other	\$384.00	\$995.32	\$109.00	\$1.79	\$1,490.11	
Actual Spent	\$12,517.73	\$22,301.72	\$33,806.53	\$44,259.52	\$112,885.50	
<i>Allotment</i>					\$159,269.35	
<i>Amount Remaining</i>					\$46,383.85	% Spent
Total Maintenance Cost	\$12,517.73	\$22,301.72	\$33,806.53	\$44,259.52	\$112,885.50	71%

Equipment (530)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Computer / IT Purchases	\$0.00	\$0.00	\$5,202.00	\$0.00	\$5,202.00	
All other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$0.00	\$0.00	\$5,202.00	\$0.00	\$5,202.00	
<i>Allotment</i>					\$9,000.00	
<i>Amount Remaining</i>					\$3,798.00	% Spent
Total Equipment Cost	\$0.00	\$0.00	\$5,202.00	\$0.00	\$5,202.00	58%

Bd Member Payroll	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$5,556.21	\$3,296.27	\$3,826.07	\$584.58	\$13,263.13	
Other Employer-Paid Benefits	\$863.74	\$512.45	\$594.81	\$90.91	\$2,061.91	
DAS Payroll Charges	\$596.91	\$311.50	\$536.43	\$110.09	\$1,554.93	
Actual Spent	\$7,016.86	\$4,120.22	\$4,957.31	\$785.58	\$16,879.97	
<i>Allotment</i>	\$7,016.86	\$4,120.22	\$8,924.00	\$4,462.00	\$24,523.08	
<i>Amount Remaining</i>	\$0.00	\$0.00	\$3,966.69	\$3,676.42	\$7,643.11	% Spent
Total Board Payroll	\$7,016.86	\$4,120.22	\$4,957.31	\$785.58	\$16,879.97	69%

Board Travel & Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Board Travel - In State	\$3,882.00	\$3,355.88	\$4,036.78	\$153.60	\$11,428.26	
Board Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Misc. Expenses (non-travel)	\$60.00	\$774.25	\$1,530.75	\$0.00	\$2,365.00	
Conference Registrations (510)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$3,942.00	\$4,130.13	\$5,567.53	\$153.60	\$13,793.26	
<i>Allotment</i>					\$12,977.00	
<i>Amount Remaining</i>					(\$816.26)	% Spent
Total Board Maintenance	\$3,942.00	\$4,130.13	\$5,567.53	\$153.60	\$13,793.26	106%

Refunds (595)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Actual Spent	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
<i>Allotment</i>					\$200.00	
<i>Amount Remaining</i>					\$200.00	% Spent
Total Refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0%

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% Spent
OPERATIONAL COSTS TOTAL	\$196,044.46	\$182,384.62	\$225,229.14	\$95,366.52	\$699,024.74	81%

TOTAL REVENUE	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total
	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00

April 30, 2014 is 83.3% of FY 2014
Day 304 of 365 days in FY 2014

FY 14 Appropriation Authority \$866,169
Amount Unspent \$167,144.26

OT Section - Budget Report FY 2014

Revenue	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total
OT Non-Renewal Income	\$26,880.00	\$14,890.00	\$21,100.00	\$7,890.00	\$70,760.00
OT Renewal Income	\$66,740.00	\$0.00	\$0.00	\$0.00	\$66,740.00
OTA Renewal Income	\$0.00	\$0.00	\$0.00	\$14,660.00	\$14,660.00
PT Non-Renewal Income	\$28,105.00	\$28,625.00	\$41,310.00	\$19,900.00	\$117,940.00
PT Renewal Income	\$0.00	\$276,150.00	\$295,750.00	(\$70.00)	\$571,830.00
PTA Renewal Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
AT Non-Renewal Income	\$12,340.00	\$3,330.00	\$3,650.00	\$2,715.00	\$22,035.00
AT Renewal Income	\$0.00	\$100.00	(\$100.00)	\$0.00	\$0.00
Disciplinary Fines	\$1,100.00	\$1,200.00	\$1,750.00	\$1,300.00	\$5,350.00
Income from Other Sources	\$210.00	\$205.00	\$0.00	\$0.00	\$415.00
Revenue Total	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00

Staff Payroll (500)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$33,422.16	\$29,671.53	\$33,301.45	\$10,384.83	\$106,779.97	
Salaries - OT Compensation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Paid Leave & Othr Compensati	\$5,607.57	\$4,949.75	\$7,320.10	\$1,231.32	\$19,108.74	
Other Employer-Paid Benefits	\$15,696.45	\$14,295.61	\$16,560.49	\$4,770.83	\$51,323.38	
DAS Payroll Charges	\$790.90	\$729.50	\$826.49	\$236.87	\$2,583.76	
Actual Spent	\$55,517.08	\$49,646.39	\$58,008.53	\$16,623.85	\$179,795.85	% of Total
Total Staff Payroll	\$166,697.02	\$149,117.55	\$174,225.77	\$49,927.82	\$539,968.16	33%

Personal Services (510)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Hearing Officers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Court Reporters	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Subpoena & Witness Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Conference Registration Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Dues, Subscriptions, ADA, Misc	\$216.00	\$0.00	\$346.50	\$81.60	\$644.10	
Actual Spent	\$216.00	\$0.00	\$346.50	\$81.60	\$644.10	% of Total
Total Personal Services	\$5,870.85	\$2,715.00	\$1,470.00	\$240.00	\$10,295.85	6%

Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Office Supplies	\$642.33	\$176.01	\$367.30	\$262.68	\$1,448.32	
Credit Card Processing Fees	\$268.13	\$185.99	\$151.50	\$29.89	\$635.51	
Parking	\$29.70	\$118.80	\$89.10	\$29.70	\$267.30	
Staff Travel - In State	\$0.00	\$367.00	\$110.24	\$104.00	\$581.24	
Staff Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
VoIP & Toll-free Telephone	\$0.06	\$64.15	\$157.21	\$51.13	\$272.55	
FedEx/UPS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Document Shredding	\$16.50	\$26.60	\$24.75	\$8.25	\$76.10	
Ofc. Equip. Maint. & Repairs	\$0.00	\$0.00	\$668.54	\$0.00	\$668.54	
Printing/Copying	\$0.00	\$907.11	\$0.69	\$236.12	\$1,143.92	
Legal Notices in Newspapers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Rent (+space repairs, improve)	\$0.00	\$0.00	\$0.00	\$10,544.79	\$10,544.79	
Central Service Agency	\$2,703.52	\$1,970.70	\$2,694.10	\$2,876.68	\$10,245.00	
Telephone (DAS)	\$149.60	\$586.98	\$57.75	\$0.00	\$794.33	
DAS Motor Pool	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
State Purchasing Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
DAS Centralized Mail Service	\$0.00	\$534.32	\$589.20	\$0.00	\$1,123.52	
DAS IT Services	\$448.89	\$1,358.82	\$3,440.46	\$426.59	\$5,674.76	
Other	\$126.11	\$194.06	\$56.55	\$1.79	\$378.51	
Actual Spent	\$4,384.84	\$6,490.54	\$8,407.39	\$14,571.62	\$33,854.39	% of Total
Total Maintenance Cost	\$12,517.73	\$22,301.72	\$33,806.53	\$44,259.52	\$112,885.50	30%

Equipment (530)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Computer / IT Purchases	\$0.00	\$0.00	\$1,716.66	\$0.00	\$1,716.66	
All other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$0.00	\$0.00	\$1,716.66	\$0.00	\$1,716.66	% of Total
Total Equipment Cost	\$0.00	\$0.00	\$5,202.00	\$0.00	\$5,202.00	33%

Bd Member Payroll	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$1,485.82	\$1,812.36	\$1,325.52	\$29.33	\$4,653.03	
Other Employer-Paid Benefits	\$230.98	\$281.74	\$206.07	\$4.57	\$723.36	
DAS Payroll Charges	\$147.22	\$151.41	\$170.91	\$13.21	\$482.75	
Actual Spent	\$1,864.02	\$2,245.51	\$1,702.50	\$47.11	\$5,859.14	% of Total
Total Board Payroll	\$7,016.86	\$4,120.22	\$4,957.31	\$785.58	\$16,879.97	35%

Board Travel & Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Board Travel - In State	\$959.76	\$1,164.08	\$588.20	\$131.33	\$2,843.37	
Board Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Misc. Expenses (non-travel)	\$0.00	\$110.25	\$442.30	\$0.00	\$552.55	
Conference Registrations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$959.76	\$1,274.33	\$1,030.50	\$131.33	\$3,395.92	% of Total
Total Board Maintenance	\$3,942.00	\$4,130.13	\$5,567.53	\$153.60	\$13,793.26	25%

Refunds (595)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Actual Spent	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	% of Total
Total Refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% of Total
OPERATIONAL COSTS OT SECTION	\$62,941.70	\$59,656.77	\$71,212.08	\$31,455.51	\$225,266.06	32%
OPERATIONAL COSTS TOTAL	\$196,044.46	\$182,384.62	\$225,229.14	\$95,366.52	\$699,024.74	

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% of Total
OT LIC. REVENUE	\$93,620.00	\$14,890.00	\$21,100.00	\$22,550.00	\$152,160.00	17%
TOTAL REVENUE	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00	

April 30, 2014 is 83.3% of FY 2014
Day 304 of 365 days in FY 2014

PT Section - Budget Report FY 2014

Revenue	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total
OT Non-Renewal Income	\$26,880.00	\$14,890.00	\$21,100.00	\$7,890.00	\$70,760.00
OT Renewal Income	\$66,740.00	\$0.00	\$0.00	\$0.00	\$66,740.00
OTA Renewal Income	\$0.00	\$0.00	\$0.00	\$14,660.00	\$14,660.00
PT Non-Renewal Income	\$28,105.00	\$28,625.00	\$41,310.00	\$19,900.00	\$117,940.00
PT Renewal Income	\$0.00	\$276,150.00	\$295,750.00	(\$70.00)	\$571,830.00
PTA Renewal Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
AT Non-Renewal Income	\$12,340.00	\$3,330.00	\$3,650.00	\$2,715.00	\$22,035.00
AT Renewal Income	\$0.00	\$100.00	(\$100.00)	\$0.00	\$0.00
Disciplinary Fines	\$1,100.00	\$1,200.00	\$1,750.00	\$1,300.00	\$5,350.00
Income from Other Sources	\$210.00	\$205.00	\$0.00	\$0.00	\$415.00
Revenue Total	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00

Staff Payroll (500)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$40,375.20	\$35,937.90	\$39,982.49	\$12,709.00	\$129,004.59	
Salaries - OT Compensation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Paid Leave & Othr Compensat	\$7,213.27	\$6,078.13	\$9,369.65	\$1,408.32	\$24,069.37	
Other Employer-Paid Benefits	\$19,776.38	\$17,854.15	\$20,694.93	\$5,963.71	\$64,289.17	
DAS Payroll Charges	\$976.91	\$893.95	\$1,015.47	\$291.25	\$3,177.58	
Actual Spent	\$68,341.76	\$60,764.13	\$71,062.54	\$20,372.28	\$220,540.71	% of Total
Total Staff Payroll	\$166,697.02	\$149,117.55	\$174,225.77	\$49,927.82	\$539,968.16	41%

Personal Services	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Hearing Officers	\$3,244.25	\$0.00	\$0.00	\$0.00	\$3,244.25	
Court Reporters	\$1,716.60	\$0.00	\$0.00	\$0.00	\$1,716.60	
Subpoena & Witness Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Conference Registration Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Dues, Subscriptions, ADA, Mis	\$526.00	\$2,715.00	\$1,029.00	\$136.80	\$4,406.80	
Actual Spent	\$5,486.85	\$2,715.00	\$1,029.00	\$136.80	\$9,367.65	% of Total
Total Personal Services	\$5,870.85	\$2,715.00	\$1,470.00	\$240.00	\$10,295.85	91%

Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Office Supplies	\$1,128.94	\$309.39	\$645.56	\$461.68	\$2,545.57	
Credit Card Processing Fees	\$14.32	\$2,082.23	\$7,806.08	\$372.82	\$10,275.45	
Parking	\$52.20	\$208.80	\$156.60	\$52.20	\$469.80	
Staff Travel - In State	\$0.00	\$81.12	\$150.80	\$0.00	\$231.92	
Staff Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
VoIP & Toll-free Telephone	\$0.12	\$112.77	\$276.32	\$89.87	\$479.08	
FedEx/UPS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Document Shredding	\$29.00	\$46.75	\$43.50	\$14.50	\$133.75	
Ofc. Equip. Maint. & Repairs	\$0.00	\$0.00	\$1,175.01	\$0.00	\$1,175.01	
Printing/Copying	\$0.00	\$2,845.57	\$882.53	\$414.98	\$4,143.08	
Legal Notices in Newspapers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Rent (+space repairs, improve)	\$0.00	\$0.00	\$0.00	\$18,533.25	\$18,533.25	
Central Service Agency	\$4,532.37	\$3,463.66	\$4,735.10	\$5,055.98	\$17,787.11	
Telephone (DAS)	\$250.81	\$1,031.67	\$101.50	\$0.00	\$1,383.98	
DAS Motor Pool	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
State Purchasing Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
DAS Centralized Mail Service	\$0.00	\$939.11	\$1,035.55	\$0.00	\$1,974.66	
DAS IT Services	\$788.96	\$2,388.23	\$6,046.83	\$749.76	\$9,973.78	
Other	\$223.50	\$748.33	\$47.05	\$0.00	\$1,018.88	
Actual Spent	\$7,020.22	\$14,257.63	\$23,102.43	\$25,745.04	\$70,125.32	% of Total
Total Maintenance Cost	\$12,517.73	\$22,301.72	\$33,806.53	\$44,259.52	\$112,885.50	62%

Equipment (530)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Computer / IT Purchases	\$0.00	\$0.00	\$3,017.16	\$0.00	\$3,017.16	
All other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$0.00	\$0.00	\$3,017.16	\$0.00	\$3,017.16	% of Total
Total Equipment Cost	\$0.00	\$0.00	\$5,202.00	\$0.00	\$5,202.00	58%

Bd Member Payroll	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$3,350.93	\$1,345.10	\$2,191.62	\$555.25	\$7,442.90	
Other Employer-Paid Benefits	\$520.91	\$209.12	\$340.71	\$86.34	\$1,157.08	
DAS Payroll Charges	\$260.87	\$119.82	\$258.91	\$96.88	\$736.48	
Actual Spent	\$4,132.71	\$1,674.04	\$2,791.24	\$738.47	\$9,336.46	% of Total
Total Board Payroll	\$7,016.86	\$4,120.22	\$4,957.31	\$785.58	\$16,879.97	55%

Board Travel & Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Board Travel - In State	\$2,021.36	\$1,885.56	\$2,775.94	\$5.22	\$6,688.08	
Board Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Misc. Expenses (non-travel)	\$0.00	\$147.00	\$721.80	\$0.00	\$868.80	
Conference Registrations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$2,021.36	\$1,885.56	\$2,775.94	\$5.22	\$6,688.08	% of Total
Total Board Maintenance	\$3,942.00	\$4,130.13	\$5,567.53	\$153.60	\$13,793.26	48%

Refunds (595)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Actual Spent	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	% of Total
Total Refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% of Total
OPERATIONAL COSTS PT SECTION	\$87,002.90	\$81,296.36	\$103,778.31	\$46,997.81	\$319,075.38	46%
OPERATIONAL COSTS TOTAL	\$196,044.46	\$182,384.62	\$225,229.14	\$95,366.52	\$699,024.74	

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% of Total
PT LIC. REVENUE	\$28,105.00	\$304,775.00	\$337,060.00	\$19,830.00	\$689,770.00	79%
TOTAL REVENUE	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00	

April 30, 2014 is 83.3% of FY 2014
Day 304 of 365 days in FY 2014

AT Section - Budget Report FY 2014

Revenue	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total
OT Non-Renewal Income	\$26,880.00	\$14,890.00	\$21,100.00	\$7,890.00	\$70,760.00
OT Renewal Income	\$66,740.00	\$0.00	\$0.00	\$0.00	\$66,740.00
OTA Renewal Income	\$0.00	\$0.00	\$0.00	\$14,660.00	\$14,660.00
PT Non-Renewal Income	\$28,105.00	\$28,625.00	\$41,310.00	\$19,900.00	\$117,940.00
PT Renewal Income	\$0.00	\$276,150.00	\$295,750.00	(\$70.00)	\$571,830.00
PTA Renewal Income	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
AT Non-Renewal Income	\$12,340.00	\$3,330.00	\$3,650.00	\$2,715.00	\$22,035.00
AT Renewal Income	\$0.00	\$100.00	(\$100.00)	\$0.00	\$0.00
Disciplinary Fines	\$1,100.00	\$1,200.00	\$1,750.00	\$1,300.00	\$5,350.00
Income from Other Sources	\$210.00	\$205.00	\$0.00	\$0.00	\$415.00
Revenue Total	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00

Staff Payroll (500)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$26,662.82	\$23,563.93	\$26,847.41	\$8,098.21	\$85,172.37	
Salaries - OT Compensation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Paid Leave & Othr Compensation	\$3,973.62	\$3,836.45	\$5,240.61	\$1,072.33	\$14,123.01	
Other Employer-Paid Benefits	\$11,594.10	\$10,738.75	\$12,425.99	\$3,578.02	\$38,336.86	
DAS Payroll Charges	\$607.64	\$567.90	\$640.69	\$183.13	\$1,999.36	
Actual Spent	\$42,838.18	\$38,707.03	\$45,154.70	\$12,931.69	\$139,631.60	% of Total
Total Staff Payroll	\$166,697.02	\$149,117.55	\$174,225.77	\$49,927.82	\$539,968.16	26%

Personal Services (510)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Hearing Officers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Court Reporters	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Subpoena & Witness Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Conference Registration Fees	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Dues, Subscriptions, ADA, Misc	\$168.00	\$0.00	\$94.50	\$21.60	\$284.10	
Actual Spent	\$168.00	\$0.00	\$94.50	\$21.60	\$284.10	% of Total
Total Personal Services	\$5,870.85	\$2,715.00	\$1,470.00	\$240.00	\$10,295.85	3%

Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Office Supplies	\$175.18	\$48.01	\$100.18	\$71.64	\$395.01	
Credit Card Processing Fees	\$12.81	\$66.95	\$85.21	\$5.68	\$170.65	
Parking	\$8.10	\$32.40	\$24.30	\$8.10	\$72.90	
Staff Travel - In State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Staff Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
VoIP & Toll-free Telephone	\$0.02	\$17.49	\$42.87	\$14.04	\$74.42	
FedEx/UPS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Document Shredding	\$4.50	\$7.25	\$6.75	\$2.25	\$20.75	
Ofc. Equip. Maint. & Repairs	\$0.00	\$0.00	\$182.33	\$0.00	\$182.33	
Printing/Copying	\$0.00	\$114.67	\$0.18	\$64.40	\$179.25	
Legal Notices in Newspapers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Rent (+space repairs, improve)	\$0.00	\$0.00	\$0.00	\$2,875.86	\$2,875.86	
Central Service Agency	\$715.64	\$537.46	\$734.76	\$784.55	\$2,772.41	
Telephone (DAS)	\$39.60	\$160.09	\$15.75	\$0.00	\$215.44	
DAS Motor Pool	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
State Purchasing Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
DAS Centralized Mail Service	\$0.00	\$145.73	\$160.69	\$0.00	\$306.42	
DAS IT Services	\$122.43	\$370.57	\$938.29	\$116.34	\$1,547.63	
Other	\$34.39	\$52.93	\$5.40	\$0.00	\$92.72	
Actual Spent	\$1,112.67	\$1,553.55	\$2,296.71	\$3,942.86	\$8,905.79	% of Total
Total Maintenance Cost	\$12,517.73	\$22,301.72	\$33,806.53	\$44,259.52	\$112,885.50	8%

Equipment (530)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Computer / IT Purchases	\$0.00	\$0.00	\$468.18	\$0.00	\$468.18	
All other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$0.00	\$0.00	\$468.18	\$0.00	\$468.18	% of Total
Total Equipment Cost	\$0.00	\$0.00	\$5,202.00	\$0.00	\$5,202.00	9%

Bd Member Payroll	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Basic Wages	\$719.46	\$138.81	\$308.93	\$0.00	\$1,167.20	
Other Employer-Paid Benefits	\$111.85	\$21.59	\$48.03	\$0.00	\$181.47	
DAS Payroll Charges	\$188.82	\$40.27	\$106.61	\$0.00	\$335.70	
Actual Spent	\$1,020.13	\$200.67	\$463.57	\$0.00	\$1,684.37	% of Total
Total Board Payroll	\$7,016.86	\$4,120.22	\$4,957.31	\$785.58	\$16,879.97	10%

Board Travel & Maintenance (520)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Board Travel - In State	\$900.88	\$306.24	\$672.64	\$17.05	\$1,896.81	
Board Travel - Out of State	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Misc. Expenses (non-travel)	\$60.00	\$517.00	\$366.65	\$0.00	\$943.65	
Conference Registrations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Actual Spent	\$900.88	\$306.24	\$672.64	\$17.05	\$1,896.81	% of Total
Total Board Maintenance	\$3,942.00	\$4,130.13	\$5,567.53	\$153.60	\$13,793.26	14%

Refunds (595)	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	
Actual Spent	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	% of Total
Total Refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	#DIV/0!

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% of Total
OPERATIONAL COSTS AT SECTION	\$46,039.86	\$40,767.49	\$49,150.30	\$16,913.20	\$152,870.85	22%
OPERATIONAL COSTS TOTAL	\$196,044.46	\$182,384.62	\$225,229.14	\$95,366.52	\$699,024.74	

	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	Grand Total	% of Total
AT LIC. REVENUE	\$12,340.00	\$3,430.00	\$3,550.00	\$2,715.00	\$22,035.00	3%
TOTAL REVENUE	\$135,375.00	\$324,500.00	\$363,460.00	\$46,395.00	\$869,730.00	

April 30, 2014 is 83.3% of FY 2014
Day 304 of 365 days in FY 2014

		# of Days to Send Application Receipt Letter	# of Days from Application Receipt to Completed Application	# of Days to Approve Completed Application
April 2013 66 applications	Median	1	20.5	2
	Mean	1.61	36.67	2.92
	Range	0 to 38 days	0 to 315 days	0 to 33 days
May 2013 39 applications	Median	1	34	2
	Mean	0.92	47.28	2.21
	Range	0 to 8 days	0 to 167 days	0 to 11 days
June 2013 66 applications	Median	1	38	1
	Mean	1.56	43.92	1.95
	Range	0 to 6 days	0 to 221 days	0 to 12 days
July 2013 106 applications	Median	1	18.5	2
	Mean	1.29	32.97	2.62
	Range	0 to 7 days	0 to 300 days	0 to 8 days
August 2013 93 applications	Median	1	33	1
	Mean	1.46	40.03	2.62
	Range	0 to 8 days	0 to 158 days	0 to 32 days
September 2013 83 applications	Median	1	38	1
	Mean	1.40	47.14	1.92
	Range	0 to 6 days	0 to 423 days	0 to 54 days
October 2013 59 applications	Median	1	38	1
	Mean	1.75	46.08	2.25
	Range	0 to 43 days	0 to 195 days	0 to 9 days
November 2013 22 applications	Median	1	38.5	1
	Mean	1.45	64.18	1.55
	Range	0 to 6 days	0 to 241 days	0 to 5 days
December 2013 32 applications	Median	1	19	0.5
	Mean	1.16	40.53	1.09
	Range	0 to 4 days	0 to 331 days	0 to 4 days
January 2014 37 applications	Median	1	39	0
	Mean	1.16	43.38	1.43
	Range	0 to 4 days	0 to 131 days	0 to 35 days
February 2014 96 applications	Median	1	37	0
	Mean	1.43	46.04	1.53
	Range	0 to 34 days	0 to 384 days	0 to 8 days
March 2014 81 applications	Median	1	38	2
	Mean	1.07	42.28	2.72
	Range	0 to 6 days	0 to 191 days	0 to 41 days
April 2014 51 applications	Median	1	26	1
	Mean	0.92	36.24	0.90
	Range	0 to 10 days	0 to 172 days	0 to 3 days

		# of Days to Send Application Receipt Letter	# of Days from Application Receipt to Completed Application	# of Days to Approve Completed Application
April 2013 33 applications	Median	1	59	1
	Mean	2.61	82.42	2.85
	Range	0 to 55 days	0 to 399 days	0 to 43 days
May 2013 405 applications	Median	1	79	2
	Mean	2.39	82.50	3.36
	Range	0 to 181 days	0 to 226 days	0 to 73 days
June 2013 180 applications	Median	1	28	4
	Mean	1.62	45.38	4.81
	Range	0 to 24 days	0 to 385 days	0 to 28 days
July 2013 85 applications	Median	1	67	2
	Mean	4.96	77.52	4.75
	Range	0 to 242 days	0 to 326 days	0 to 56 days
August 2013 87 applications	Median	1	98	1
	Mean	1.24	86.79	1.55
	Range	0 to 5 days	0 to 190 days	0 to 11 days
September 2013 162 applications	Median	1	29	2
	Mean	1.24	62.79	3.92
	Range	0 to 9 days	0 to 814 days	0 to 21 days
October 2013 44 applications	Median	1	73	1
	Mean	1.05	102.91	2.23
	Range	0 to 5 days	13 to 358 days	0 to 16 days
November 2013 38 applications	Median	1	64.5	0
	Mean	1.16	70.58	1.87
	Range	0 to 4 days	0 to 344 days	0 to 40 days
December 2013 78 applications	Median	1	27	0
	Mean	1.81	79.60	1.91
	Range	0 to 4 days	0 to 327 days	0 to 6 days
January 2014 73 applications	Median	0	52	1
	Mean	0.60	60.42	0.73
	Range	0 to 3 days	8 to 256 days	0 to 35 days
February 2014 44 applications	Median	0	47.5	0
	Mean	1.02	79.02	1.84
	Range	0 to 7 days	0 to 322 days	0 to 8 days
March 2014 31 applications	Median	1	23	1
	Mean	2.13	42.74	5.16
	Range	0 to 16 days	0 to 182 days	0 to 121 days
April 2014 68 applications	Median	1	70	0.5
	Mean	6.56	82.78	2.16
	Range	0 to 366 days	7 to 348 days	0 to 85 days

		# of Days to Send Application Receipt Letter	# of Days from Application Receipt to Completed Application	# of Days to Approve Completed Application
April 2013 10 applications	Median	0.5	15	1
	Mean	1.00	22.60	0.70
	Range	0 to 6 days	0 to 76 days	0 to 2 days
May 2013 18 applications	Median	1	19.5	2
	Mean	3.06	26.50	1.83
	Range	0 to 44 days	0 to 64 days	0 to 5 days
June 2013 48 applications	Median	1	16.5	2
	Mean	2.04	19.79	2.35
	Range	0 to 13 days	0 to 67 days	0 to 12 days
July 2013 80 applications	Median	1	16.5	2
	Mean	1.74	29.23	2.91
	Range	0 to 21 days	0 to 349 days	0 to 26 days
August 2013 34 applications	Median	1	23.5	1
	Mean	1.18	35.71	1.62
	Range	0 to 5 days	1 to 363 days	0 to 6 days
September 2013 36 applications	Median	1	26.5	1
	Mean	2.22	39.00	2.53
	Range	0 to 46 days	0 to 193 days	0 to 11 days
October 2013 19 applications	Median	1	19	1
	Mean	0.63	36.42	1.37
	Range	0 to 3 days	0 to 358 days	0 to 16 days
November 2013 3 applications	Median	0	14	0
	Mean	0.33	44.00	0.33
	Range	0 to 1 days	5 to 113 days	0 to 16 days
December 2013 8 applications	Median	0.5	16.5	0.5
	Mean	4.13	26.50	0.75
	Range	0 to 30 days	0 to 110 days	0 to 3 days
January 2014 11 applications	Median	1	13	1
	Mean	1.09	17.36	1.73
	Range	0 to 5 days	0 to 47 days	0 to 5 days
February 2014 9 applications	Median	1	43	1
	Mean	1.78	38.33	1.78
	Range	0 to 5 days	6 to 75 days	0 to 6 days
March 2014 10 applications	Median	1	16.5	2
	Mean	2.30	18.30	1.80
	Range	0 to 8 days	4 to 40 days	0 to 6 days
April 2014 12 applications	Median	0.5	7	1
	Mean	0.67	24.08	0.83
	Range	0 to 3 days	0 to 78 days	0 to 2 days

		# of Days to Send Application Receipt Letter	# of Days from Application Receipt to Completed Application	# of Days to Approve Completed Application
April 2013 109 applications	Median	1	29	2
	Mean	1.85	49.23	2.70
	Range	0 to 55 days	0 to 399 days	0 to 43 days
May 2013 462 applications	Median	1	76	2
	Mean	2.29	77.34	3.20
	Range	0 to 181 days	0 to 226 days	0 to 73 days
June 2013 294 applications	Median	1	27	3
	Mean	1.68	40.87	3.77
	Range	0 to 24 days	0 to 385 days	0 to 28 days
July 2013 271 applications	Median	1	32	2
	Mean	2.58	45.84	3.38
	Range	0 to 242 days	0 to 349 days	0 to 56 days
August 2013 214 applications	Median	1	41	1
	Mean	1.33	58.36	2.03
	Range	0 to 8 days	0 to 363 days	0 to 32 days
September 2013 281 applications	Median	1	34	1
	Mean	1.41	55.12	3.15
	Range	0 to 46 days	0 to 814 days	0 to 54 days
October 2013 122 applications	Median	1	43	1
	Mean	1.32	65.07	2.11
	Range	0 to 43 days	0 to 358 days	0 to 16 days
November 2013 63 applications	Median	1	54	0
	Mean	1.22	67.08	1.68
	Range	0 to 6 days	0 to 344 days	0 to 40 days
December 2013 118 applications	Median	1	27	0
	Mean	1.19	52.62	1.26
	Range	0 to 30 days	0 to 331 days	0 to 6 days
January 2014 121 applications	Median	1	43	1
	Mean	0.82	51.30	1.03
	Range	0 to 5 days	0 to 256 days	0 to 35 days
February 2014 149 applications	Median	1	39	0
	Mean	1.33	55.32	1.64
	Range	0 to 34 days	0 to 384 days	0 to 8 days
March 2014 122 applications	Median	1	30	1.5
	Mean	1.44	40.43	3.26
	Range	0 to 16 days	0 to 191 days	0 to 121 days
April 2014 131 applications	Median	1	57	1
	Mean	3.82	59.28	1.55
	Range	0 to 366 days	0 to 348 days	0 to 85 days

	<u>OTA</u>
Renewals Mailed	4,068
Licenses Renewed	526
Incomplete Renewals Rec'd	0
Not Renewing	12
Escrow Restoration	2
Deceased	0
Not Yet Returned	3,528
% Not Yet Returned	86.7%

# Renewing Online	
<u>OTA</u>	
517	
98.3%	
% of those renewing that renewed online	

Information current as of 5/5/14

**Occupational Therapy Section
Limited License Report
May 8, 2014**

Limited License Applications	Quantity
Released	2
Closed	0
New	1
Appls being monitored	22

Credential	Name	Status
OT Applicant - Examination	ARBOGAST CINTHIA	COMPLETED
OT Applicant - Examination	ATSU VIVIAN	COMPLETED
OT Applicant - Examination	BLACKWELL LAVELLE	COMPLETED
OT Applicant - Examination	BOVA SAMANTHA	COMPLETED
OT Applicant - Examination	BOWER REBEKAH	COMPLETED
OT Applicant - Examination	BROWNELL MEGHAN	COMPLETED
OT Applicant - Examination	CHANDAR LORI	COMPLETED
OT Applicant - Examination	CHANDLER MISTY	COMPLETED
OT Applicant - Examination	COTTMAN BRITTNEY	COMPLETED
OT Applicant - Examination	DEBUSK ALEXANDRA	COMPLETED
OT Applicant - Examination	DRIVER HEIDI	COMPLETED
OT Applicant - Examination	DRUSO ANDRE	COMPLETED
OT Applicant - Examination	DUNLAP ERIN	COMPLETED
OT Applicant - Examination	DUNN RACHEL	COMPLETED
OT Applicant - Examination	ECHLER SHENAE	COMPLETED
OT Applicant - Examination	FREEMAN NATALIE	COMPLETED
OT Applicant - Examination	GREEN COURTNEY	COMPLETED
OT Applicant - Examination	HAFLEY LAUREN	COMPLETED
OT Applicant - Examination	HARTER AMANDA	COMPLETED
OT Applicant - Examination	KASSAY STEFANIE	COMPLETED
OT Applicant - Examination	LEE VALERIE	COMPLETED
OT Applicant - Examination	LEWIS HALLIE	COMPLETED
OT Applicant - Examination	LORTZ JANA	COMPLETED
OT Applicant - Examination	MARTIN DANA	COMPLETED
OT Applicant - Examination	MOLNAR MARY	COMPLETED
OT Applicant - Examination	MOLNAR MEGAN	COMPLETED
OT Applicant - Examination	MORGAN ADINA	COMPLETED
OT Applicant - Examination	MORRIS AMBER	COMPLETED
OT Applicant - Examination	MUNOZ AMANDA	COMPLETED
OT Applicant - Examination	NICHOLS STACEY	COMPLETED
OT Applicant - Examination	NISSAN KALI	COMPLETED
OT Applicant - Examination	POTENZINI NICHOLAS	COMPLETED
OT Applicant - Examination	RAWLINS LAUREN	COMPLETED
OT Applicant - Examination	REVERMAN STACY	COMPLETED
OT Applicant - Examination	SCASNY KALEN	COMPLETED
OT Applicant - Examination	SCHULTE SARAH	COMPLETED
OT Applicant - Examination	SCHWIETERMAN KELLY	COMPLETED
OT Applicant - Examination	SPAAR VICTORIA	COMPLETED
OT Applicant - Examination	SPEELMAN CHELSEA	COMPLETED
OT Applicant - Examination	STALTER MARIA	COMPLETED
OT Applicant - Examination	STEFFENHAGEN NICOLE	COMPLETED
OT Applicant - Examination	STERLING WHITNEY	COMPLETED
OT Applicant - Examination	STOCKELMAN CAITLIN	COMPLETED
OT Applicant - Examination	STRASFELD ELIZABETH	COMPLETED
OT Applicant - Examination	TRAVIS MARTIN	COMPLETED
OT Applicant - Examination	WENZELL BRADLEY	COMPLETED
OT Applicant - Examination	WILDS SAMANTHA	COMPLETED
OT Applicant - Examination	WINNE REBECCA	COMPLETED
OT Applicant - Examination	WOOD OLGA	COMPLETED
OT Applicant - Examination	WYNN RACHEL	COMPLETED
OT Applicant - Examination	YOH LAUREN	COMPLETED
OT Applicant - Examination Count		51
OT Applicant - Endorsement	ALLEN MEGAN	COMPLETED
OT Applicant - Endorsement	ANDERSON TERRANCE	COMPLETED
OT Applicant - Endorsement	BASSETT MICHAEL	COMPLETED
OT Applicant - Endorsement	BURLIKOWSKI ERIN	COMPLETED
OT Applicant - Endorsement	CARPENTER JESSICA	COMPLETED
OT Applicant - Endorsement	CLARK ZACHARY	COMPLETED

OT Applicant - Endorsement	CURTS BRITTANY	COMPLETED
OT Applicant - Endorsement	DECREASE CARLY	COMPLETED
OT Applicant - Endorsement	GARVIN WHITNEY	COMPLETED
OT Applicant - Endorsement	HARE MOLLY	COMPLETED
OT Applicant - Endorsement	HILLMAN TIFFANY	COMPLETED
OT Applicant - Endorsement	KAMINSKI JOYCE	COMPLETED
OT Applicant - Endorsement	KELLER NICOLE	COMPLETED
OT Applicant - Endorsement	MARSHALL AUTUMN	COMPLETED
OT Applicant - Endorsement	MARTINS ANGELA	COMPLETED
OT Applicant - Endorsement	MCKENZIE ABIGAIL	COMPLETED
OT Applicant - Endorsement	STONE STEPHANIE	COMPLETED
OT Applicant - Endorsement	TRIPPEL KATHARINE	COMPLETED
OT Applicant - Endorsement	WOLFE KELSEY	COMPLETED
OT Applicant - Endorsement Count		19
OT Applicant - Reinstatement	CLEARY MOIRA	COMPLETED
OT Applicant - Reinstatement	HEYOB SUSAN	COMPLETED
OT Applicant - Reinstatement	KENT LAURICE	COMPLETED
OT Applicant - Reinstatement	MOHR STEPHANIE	COMPLETED
OT Applicant - Reinstatement Count		4
OTA Applicant - Examination	AGUILAR VANESSA	COMPLETED
OTA Applicant - Examination	ARGENTINE JESSICA	COMPLETED
OTA Applicant - Examination	AULETTA SAMANTHA	COMPLETED
OTA Applicant - Examination	BOND JESSE	COMPLETED
OTA Applicant - Examination	BRANNOCK JENNIFER	COMPLETED
OTA Applicant - Examination	BRINKMAN STEPHANIE	COMPLETED
OTA Applicant - Examination	BROCK JAMIE	COMPLETED
OTA Applicant - Examination	DELAGRANGE MELEA	COMPLETED
OTA Applicant - Examination	FAHMY AMEL	COMPLETED
OTA Applicant - Examination	FITZSIMMONS JENNIFER	COMPLETED
OTA Applicant - Examination	GAECKLE BREANNE	COMPLETED
OTA Applicant - Examination	HAMPSHIRE CORTNIE	COMPLETED
OTA Applicant - Examination	HANES SARAH	COMPLETED
OTA Applicant - Examination	HONERLAW DENISE	COMPLETED
OTA Applicant - Examination	IRSAK HOLLY	COMPLETED
OTA Applicant - Examination	JAEGER CODI	COMPLETED
OTA Applicant - Examination	JENNISON AMY	COMPLETED
OTA Applicant - Examination	KINGSLEY CASEY	COMPLETED
OTA Applicant - Examination	KITCHEN SOPHIA	COMPLETED
OTA Applicant - Examination	KUEHNERT TODD	COMPLETED
OTA Applicant - Examination	KURZ BRITTANY	COMPLETED
OTA Applicant - Examination	LANDIS D'ERIN	COMPLETED
OTA Applicant - Examination	LAY KARISSA	COMPLETED
OTA Applicant - Examination	LE MICHELLE	COMPLETED
OTA Applicant - Examination	MEENACHAN KATIE	COMPLETED
OTA Applicant - Examination	MEYER TERESA	COMPLETED
OTA Applicant - Examination	MULLINS HEATHER	COMPLETED
OTA Applicant - Examination	PRICE NICOLE	COMPLETED
OTA Applicant - Examination	REPAS HOLLY	COMPLETED
OTA Applicant - Examination	ROSE JENNIFER	COMPLETED
OTA Applicant - Examination	ROZOW SARA	COMPLETED
OTA Applicant - Examination	RUDIN YVETTE	COMPLETED
OTA Applicant - Examination	SEABOLT JOHNNY	COMPLETED
OTA Applicant - Examination	SHAWVER JUSTIN	COMPLETED
OTA Applicant - Examination	SHORT SARA	COMPLETED
OTA Applicant - Examination	SMITH SHELLEY	COMPLETED
OTA Applicant - Examination	SPEARS ZOHN	COMPLETED
OTA Applicant - Examination	STEIDL AMANDA	COMPLETED
OTA Applicant - Examination	TRUESDALE DANIEL	COMPLETED
OTA Applicant - Examination	VANDEE CHRISTINE	COMPLETED

OTA Applicant - Examination	WOLF MICHELLE	COMPLETED
OTA Applicant - Examination	WRITZ SUSAN	COMPLETED
OTA Applicant - Examination	ZIEGLER STEPHANIE	COMPLETED
OTA Applicant - Examination	ZUMWALDE TIFFANY	COMPLETED
OTA Applicant - Examination Count		44
OTA Applicant - Endorsement	ARMENTI CATHERINE	COMPLETED
OTA Applicant - Endorsement	BAUER VICKIE	COMPLETED
OTA Applicant - Endorsement	GOLDMAN JESSICA	COMPLETED
OTA Applicant - Endorsement	GOOCH WHITNEY	COMPLETED
OTA Applicant - Endorsement	GRIFFITH MELINDA	COMPLETED
OTA Applicant - Endorsement	JONES REGINALD	COMPLETED
OTA Applicant - Endorsement	STALEY AUDREY	COMPLETED
OTA Applicant - Endorsement	WENTWORTH COURTNEY	COMPLETED
OTA Applicant - Endorsement Count		8
OTA Applicant - Reinstatement	WELCH CATRINA	COMPLETED
OTA Applicant - Reinstatement Count		1
OTA Applicant - Escrow Restoration	BARTH ANGELA	COMPLETED
OTA Applicant - Escrow Restoration	BILLMAIER MICHELLE	COMPLETED
OTA Applicant - Escrow Restoration	BROWN DANIELLE	COMPLETED
OTA Applicant - Escrow Restoration	HENNING BOBBIE	COMPLETED
OTA Applicant - Escrow Restoration Count		4
Grand Count		131

OT CEs Approved

05/08/2014

	course name	hours app	approval #	date approved
1	2014 Annual Convention			
		13	140425	4/10/2014
	contact first, last	Kathy	Chapman	
2	Stroke Rehab: Impairment Based Interventions for All Stages of Recovery			
		6.5	140426	4/10/2014
	contact first, last	Eric	Wickline	
3	Operation Stroke: 9th Update (Day 1)			
		2	140427	4/10/2014
	contact first, last	Jim	Benedict	
4	Operation Stroke: 9th Update (Day 2)			
		7	140428	4/10/2014
	contact first, last	Jim	Benedict	
5	Neonatal Touch & Massage Recertification			
		5	140429	4/10/2014
	contact first, last	Kara Ann	Waitzman	
6	Practical Approaches to Therapy in the ICU			
		2.5	140430	4/10/2014
	contact first, last	Dean	Jeris	
7	Implementation of Evidence-Based Practices in Early Childhood Intervention			
		11	140431	4/10/2014
	contact first, last	Sara	Culler	
8	Developing High-Quality Functional IFSP Outcomes			
		1.5	140432	4/10/2014
	contact first, last	Sara	Culler	
9	Developing Functional IFSP Outcomes: The Process			
		5	140433	4/10/2014
	contact first, last	Sara	Culler	
10	Occupational Therapy Ethics: Applications For Long Term Care			
		1	140434ETH	4/10/2014
	contact first, last	Beverly	Denny	

course name	hours app	approval #	date approved
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11	Medication-Assisted Treatment (MAT) for Opioid Use Disorders	2	140435	4/10/2014
contact first, last	Crystal Smith			
12	Managing Chronic Pain in Patients with Opioid Use Disorders	2	140436	4/10/2014
contact first, last	Crystal Smith			
13	Heroin, Krokodil, and Other Opioids: Assessment and Treatment Considerations	2	140437	4/10/2014
contact first, last	Crystal Smith			
14	Incidents Affecting Health & Safety & Individual Rights	1.5	140439	4/10/2014
contact first, last	Daniel Lemaster			
15	Progression of Loss: Providing Help that Matches Need	1.5	140440	4/10/2014
contact first, last	Christine Bowling			
16	Changing Resistance to Participation	1.5	140441	4/10/2014
contact first, last	Christine Bowling			
17	The Alzheimers Association Annual Education Symposium	6	140442	4/10/2014
contact first, last	Kaylene Way			
18	Concussion Review	2	140445	4/10/2014
contact first, last	Tina Griffiths			
19	The Common Core and You - IEP Essentials for School Based OTs and PTs	3	140446	4/10/2014
contact first, last	Georgia Phillips			
20	The Play Project	5.5	140447	4/10/2014
contact first, last	Becky Ford			

course name	hours app	approval #	date approved
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21	Making Therapy Fun: Motivation, Participation, and Care Giver Interaction	3	140448	4/10/2014
contact first, last	Georgia Phillips			
22	Ranchos Los Amigos Scale in Rehabilitation	1	140449	4/10/2014
contact first, last	Michelle Graf			
23	Wound Care Symposium 2014: Dealing with the Healing	6.75	140451	4/10/2014
contact first, last	Teresa Lutz			
24	Rehabilitation for Patients with Spinal Cord Injuries	2	140452	4/10/2014
contact first, last	Elise Moore			
25	Sensory Processing Measure (SPM) and Sensory Processing Measure-Preschool (SPM-P) Quick Tips	6.5	140453	4/10/2014
contact first, last	Maureen Kane-Winela			
26	Therapeutic Exercise Interventions for the Aging Adult	7	140454	4/10/2014
contact first, last	Anja Dean			
27	Functional Thoracic Spine	8	140455	4/10/2014
contact first, last	Diana Huffman			
28	Catholic Medical Ethics	1	140456ETH	4/10/2014
contact first, last	Morna Hearns			
29	2014 Focusing on Excellence Conference	4.4	140457	4/10/2014
contact first, last	Lexie Sines			
30	Robotic Surgery Symposium '14	6.5	140458	4/10/2014
contact first, last	Vicki Reindel			

course name	hours app	approval #	date approved
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31	Neuro Outcome Measures: Which to Choose, How to Use and What Does It All Mean?	4	140459	4/10/2014
contact first, last	Maria Mepham			
32	An Overview of Posttraumatic Dizziness and Vestibular Dysfunction	1.5	140460	4/16/2014
contact first, last	Margaret Blevins			
33	Medicare Manual Update	1.5	140461ETH	4/16/2014
contact first, last	Karen Blake			
34	“Should I or Shouldn’t I?” Your code of ethics	2	140462ETH	4/16/2014
contact first, last	Truly Moore			
35	Justification of Skilled Services for Admission to SNF	2	140463	4/16/2014
contact first, last	Stacey Lytle			
36	Related Service Professional Development	5	140465	4/16/2014
contact first, last	Darcy Finley			
37	Managing Challenging Behaviors	1.5	140466	4/16/2014
contact first, last	Darcy Finley			
38	Functional Rehabilitation for Patients in a Wheelchair	6	140467	4/16/2014
contact first, last	Cynthia Allen			
39	Parkinson’s Disease “Exercise is Medicine”	1	140468	4/16/2014
contact first, last	Stella Barrett			
40	Screening for Vestibular Disorders: Determining Central vs. Peripheral Etiologies and Making	1.5	140469	4/16/2014
contact first, last	Elise Moore			

course name	hours app	approval #	date approved
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41	Commonly Used Neurology Scales Used in Acute Care Setting	1	140471	4/16/2014
contact first, last	Michelle Graf			
42	Brain Injury: Differential Diagnosis, Examination and Rehabilitation	15	140472	4/16/2014
contact first, last	Skip Fritz			
43	Stroke Rehabilitation: Standing Activities & Gait	10	140473	4/16/2014
contact first, last	Lynn Groves			
44	Fall Prevention & F323 Compliance	6	140474ETH	4/16/2014
contact first, last	Karen Blake			
45	Rhythmic Movement Training International - RMT1	14	140475	4/16/2014
contact first, last	Carolyn Nyland			
46	Rhythmic Movement Training International - RMT2	7	140476	4/16/2014
contact first, last	Carolyn Nyland			
47	Milestones Annual Autism Spectrum Disorder Conference 06/19/2014	6	140477	4/16/2014
contact first, last	Leslie Rotsky			
48	Milestones Annual Autism Spectrum Disorder Conference 06/20/2014	6	140478	4/16/2014
contact first, last	Leslie Rotsky			
49	22nd Annual Ohio Institute for OT/PT School Based Practice	12	140479ETH	4/16/2014
contact first, last	Holly Bartholomew			
50	2014 OhioHealth Neuroscience Symposium	6.25	140480	4/16/2014
contact first, last	Lexie Sines			

course name hours app approval # date approved

51	ACA, HIPAA, and Dealing with the Future	4	140481ETH	4/16/2014
contact first, last	Robert Swinehart			
52	Interdisciplinary Clinical Educators Workshop	5	140482	4/16/2014
contact first, last	Hector Merced			
53	New Concepts in the Management of Soft Tissue Dysfunction	4	140483	4/22/2014
contact first, last	Jaclyn Kempf			
54	MDS 3.0 Basics - Part 1	1.5	140484	4/22/2014
contact first, last	Karen Blake			
55	MDS 3.0 Basics - Part 3	1.5	140485	4/22/2014
contact first, last	Karen Blake			
56	MDS 3.0 Basics - Part 7	1.5	140486	4/22/2014
contact first, last	Karen Blake			
57	MDS 3.0 Basics - Part 8	1.5	140487	4/22/2014
contact first, last	Karen Blake			
58	Caring for Residents with Delirium, Depression, & Dementia: It takes a Village	2	140488	4/22/2014
contact first, last	Merri Bunge			
59	Falls: Assessment & Treatment to Prevent Falls in Home Care	1.5	140489	4/22/2014
contact first, last	Krista Fylak			
60	S'Cool Moves Power Up Workshop	11.5	140490	4/22/2014
contact first, last	Carol Kline			

Course name and Contact

1

Safe and Sound Prescribing During the Opioid Epidemic: Update on Legal and Regulatory Issues

Crystal Smith

Board Action Approved - #CE Awarded _____ Denied Request More Info

2

Lean Process Improvement / BMGI's Lean for Healthcare

Sally DiCicco

Board Action Approved - #CE Awarded _____ Denied Request More Info

3

Parents' Rights in the Special Education Process

Kathryn Elmore

Board Action Approved - #CE Awarded _____ Denied Request More Info

4

When Life Changes

Mary Falk

Board Action Approved - #CE Awarded _____ Denied Request More Info

OCCUPATIONAL THERAPY SECTION ENFORCEMENT REVIEW PANEL MEETING

Date: March 6, 2014
Meeting Time: 8:00 am
Board Office Conference Room-16th Floor

“New” cases opened since the March meeting: 2

Cases “closed” at the March meeting: 13

Cases “currently open”: 8
(1 is license denial)

Active consent agreements: 10

Adjudication orders being monitored: 1

Physical Therapy Section

New cases opened since the March meeting: TBD

Cases closed at the March meeting: TBD

Cases currently open: TBD

Active consent agreements: TBD

Adjudication orders being monitored: TBD

Athletic Trainers Section

New cases opened since the March meeting: 4

Cases closed at the March meeting: 1

Cases currently open: 5

Active consent agreements: 0

***Statistics as of 4/29/14**



Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

OT Correspondence – May 2014

No.	Correspondent Name and Subject
1.	<u>Brandy Heistand, OT/L</u> : Ms. Heistand asked the Section questions regarding whether level II occupational therapy students can treat clients if the primary occupational therapist is out of the building.
2.	<u>Cassandra Dettwiller, COTA/L</u> : Ms. Dettwiller asked the Section questions regarding supervision requirements for occupational therapy practitioners.
3.	<u>Joan McAdoo, OTR/L</u> : Ms. McAdoo asked the Section questions regarding billing for evaluations when providing an orthosis.
4.	<u>Stella Mohler, OTA/L</u> : Ms. Mohler asked the Section questions regarding caseload requirements for occupational therapy practitioners in a school-setting
5.	<u>Paula Michaud, OT/L</u> : Ms. Michaud asked the Section questions regarding social connections with former clients.
6.	<u>Karen Pinkerston, OTA/L</u> : Ms. Pinkerston asked the Section questions regarding whether there are regulations that prohibit an occupational therapy assistant from working as an activity director and how should the assistant sign activity notes.
7.	<u>Amy Watson-Grace, OTR/L</u> : Ms. Watson-Grace asked the Section questions regarding copyright law related to occupational therapy assessment protocols.
8.	<u>Kathy Hogue, OTR/L</u> : Ms. Hogue asked the Section questions regarding assessment and plan of care needs in relation to consultative service.
9.	<u>Gail Requardt, OTR/L</u> : Ms. Requardt asked the Section questions regarding records retention.
10.	<u>America Jordan, OTR/L</u> : Ms. Jordan asked the Section questions regarding whether occupational therapist can perform dry needling in their clinical practice.

question re: level 2 OT FW students

Brandy Heistand [bheistand80@gmail.com]

Sent: Wednesday, March 19, 2014 8:58 AM

To: OTPTAT Board

Categories: Blue Category

Hello. Just needed clarification re: Level 2 OT MOT students. I have a Level 2 student in her last month of clinical and I wanted clarification on treatment with patients if the OTR is out of the building.

EX: If the OTR needed to be off a day for illness or something, can the OT student, who is functioning pretty independently with caseload, still manage the caseload with another OTR in the building acting as supervisor?

Does that make sense? I know when I was a student way back when, I was able to do so.

Thanks,
Brandy

OT Correspondence # 1
Page 1
Meeting Date: **MAY 8 2014**
License #: OT.007018



Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
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Executive Director
Jeffrey M. Rosa

OT1
March 19, 2014

Brandy Heistand, OT/L
bheistand80@gmail.com

OT.007018

Dear Ms. Heistand:

This letter is in response to your correspondence regarding supervision of occupational therapy students when the supervisor is gone for a limited time. .

In order to provide some guidance regarding your question(s), the Occupational Therapy Section's initial response in is stated below. Please be aware that an official response to your specific question requires action by the full Occupational Therapy Section, meeting on May 8, 2014. The Section will notify you of the final decision following this meeting.

There is nothing in the Ohio Occupational Therapy Practice Act that prevents the supervising occupational therapist from taking sick leave. As you describe the situation, it appears that the consumer is protected because another occupational therapist is available to answer relevant questions and requests from the occupational therapy student if the occupational therapy supervisor of record needs to be off a day for illness or appointments. The occupational therapy student, who is functioning independently, may manage the caseload with another Ohio licensed occupational therapist in the building acting as supervisor.

Comment [JMR1]: Technically, can't the Level II student function even if there isn't another OT in the building provided that there is an OT that is available for consultation (which can be telephonic consultation)?

The Section thanks you for your correspondence. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

OT Correspondence

Hillsboro4127-Cassandra Dettwiller [Cassandra.Dettwiller@hcr-manorcare.com]

Sent: Friday, March 21, 2014 11:00 AM

To: OTPTAT Board

Categories: Blue Category

Hello,

I am emailing you regarding supervision laws and regulations. I work for Heartland of Hillsboro, and we have a full time OTR/L that completes evaluations as well as direct treatment with residents. We have 4 full time COTA's, although one of those COTA's does not treat residents often. I am the Rehab Team Leader and the COTA in question. When I treat, the most it has been for the two years, that I have been in this position, is approximately 5 hours in one day and approximatley two days per week at most. Our facility has one COTA that wants to step down to part time, and we would hire in another full time COTA. In doing this, our OT staff would include 4 full time COTA's, and one part time COTA. Out of those 4 full time COTA's, I am the one that does not have a consistent treatment schedule. I have reviewed the following laws:

Section 4755-7-04 for OT supervision law is as follows:

(B) The following occupational therapist/occupational therapy assistant supervisory ratios shall apply:

(1) When performing client evaluations, direct client treatment, and supervision of occupational therapy

personnel, a 1.0 full-time equivalent (FTE) occupational therapist shall supervise no more than four FTE

occupational therapy assistants.

My area of concern is in regard to the FTE COTA's. Does that mean FTE treating COTA, or does it include employed FTE? Would we be out of compliance with the laws and rules?

Thanks!

Cassandra Dettwiller COTA/L

Rehab Team Leader

Heartland of Hillsboro

1141 Northview Drive

Hillsboro, OH 45133

OT Correspondence # 2

Page 1

Meeting Date:

MAY 8 2014

License #: OTA.04249

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OT2
May 2014

Cassandra Dettwiller, COTA/L
Cassandra.Dettwiller@hrc-manorcare.com

OTA.004249

Dear Ms. Dettwiller:

This letter is in response to your correspondence regarding supervision requirements for occupational therapy practitioners.

Your copy of the law is correct. An occupational therapist may supervise **no more than four full-time equivalent occupational therapy assistants**. Since the rehab team will have 4 full time occupational therapy assistants, your occupational therapist's supervisory limit will be at the maximum allowed under the Occupational Therapy Practice Act. Because, as you state in your description of your responsibilities, you are treating approximately 10 hours per week, the occupational therapist's supervisory ratio would be exceeded.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

LCode Question

Joan McAdoo [JMcAdoo@nwoortho.com]

Sent: Monday, March 31, 2014 4:07 PM

To: OTPTAT Board

Categories: Blue Category

OT Correspondence # 3
Page 1

Meeting Date: **MAY 8 2014**

License #: OT.001776

This message was sent securely using ZixCorp.

Good afternoon,

A recurring conflict arises where I work regarding billing an evaluation along with an L code. ASHT states that the L code includes evaluation, fitting time and all materials of an orthosis. If there will be treatment as well as an orthosis then an evaluation code can be used. We often will immobilize our patients then later get orders to treat them but by then the evaluation code was already used and we then must use the re-evaluation code.

My supervisors state that an evaluation **MUST BE BILLED** in order for us to keep our Ohio licensure, even if the physician only orders an orthosis and nothing else. I believe that we should not be negligent and just issue anything but I believe the L codes include time spent evaluating for the specific orthosis.

My question-are they correct in saying we can lose our OT license if we do not specifically bill an evaluation when all that was ordered was an orthosis?

Thank you,

Joan McAdoo OTR/L, CHT
Occupational Therapist/Certified Hand Therapist
NWO Orthopedics and Sports Medicine
(419)427-1984 ext 264
jmcadoo@nwoortho.com



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OT3
May 2014

Joan McAdoo, OTR/L
JMcAdoo@nwortho.com

OTA.00669

Dear Ms. McAdoo:

This letter is in response to your correspondence regarding billing for evaluations when providing an orthosis.

We recognize the challenges for billing and reimbursement indicated by your situation. However, it is not within the jurisdiction of the Occupational Therapy Section to render billing and reimbursement advice. Your license depends on your ethical practice, not how you bill.

You might also contact the Ohio Occupational Therapy Association, or the Reimbursement Department of the American Occupational Therapy Association. You also may wish to refer to Medicare and other third party payer policies to determine what they require. Insurer policies and/or federal regulations may be more or less restrictive than the Ohio Occupational Therapy Practice Act. In any situation, licensees should follow the more restrictive policies.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

Caseload

stella mohler [mohlersr@yahoo.com]

Sent: Saturday, April 05, 2014 12:45 PM**To:** OPTAT Board**Categories:** Blue Category

Hi, I am wondering if you can tell me if the following scenario jeopardizes licensure in any way: 1 full time OTR/L in a school district supervises 2 full time OTA/L's. There are aprox. 90-100 students receiving OT services in 8-9 buildings. The OTR/L personally services about 20 total students in 2 buildings, performs all the evaluations, re-evaluations, ETR meetings, etc. Each OTA personally services approx. 35-40 students total, in 3 buildings each, attends IEP meetings, etc. Would this number of students/caseload/workload in any way jeopardize the OTR/L's licensure? Is there a certain number of students, given this scenario, that the OTR/L should not go over?

Thank You in advance for your assistance.

Stella

OT Correspondence # 4
Page 1
Meeting Date: **MAY 8 2014**
License #: OTA. 01041



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OT4
May 2014

Stella Mohler, OTA/L
mohlersr@yahoo.com

OTA.001041

Dear Ms. Mohler:

This letter is in response to your correspondence regarding caseload requirements for occupational therapy practitioners in a school-setting.

The Ohio Occupational Therapy Practice Act does not regulate caseload levels. It is the Ohio Department of Education (ODE) that establishes the number of students that an occupational therapy practitioner may serve. Under the ODE rules, OT personnel may serve no more than 50 school age children with disabilities or no more than 40 preschool children with disabilities. ODE interprets these numbers as direct service. An occupational therapy assistant who provides occupational therapy techniques must do so under the general supervision of an occupational therapist as required in Chapter 4755-7 of the Ohio Administrative Code.

Paragraph (I)(1) of rule 3301-51-09 also states that determination of the appropriate ratio for an individual therapist must take into consideration the following:

- The severity of each eligible child's needs;
- The level and frequency of services necessary for the children to attain IEP goals/objectives;
- Time required for planning services;
- Time required for evaluations including classroom observations;
- Time required for coordination of the IEP services;
- Time required for staff development;
- Time required for follow up; and
- Travel time required for the number of building served.

Services provided to students without disabilities must also be considered in determination of therapist/student ratio. This includes screenings, assessments, consultation, and counseling with families and professionals. Attending Intervention Assistance Team (IAT) meetings, participating in Response to Intervention (RTI) programs, and training education professionals as a part of these programs also must be considered when determining the therapist/student ratio.

All students served by an OTA are part of the supervising therapist's caseload. In accordance with ODE's Operating Standards, as well as the **Ohio Occupational Therapy Practice Act**, OTAs do not have their own caseloads separate from that of the supervising therapist. Therefore, in the scenario you describe, the full time occupational therapy would be responsible for all 90-100 students as part of the occupational therapy caseload.

It is the position of the Occupational Therapy Section that all responsibilities of the OT and OTA, including both direct and indirect service to students, must be considered when determining an appropriate therapist caseload. The number of students to whom the supervising therapist provides direct service must be reduced as the number of assistants a therapist supervises expands, since this increases the number of students for whom the therapist is responsible. The therapist must ensure provision of appropriate services and must not serve and/or supervise service for more students than he/she can provide skilled care, including informed direction of all aspects of the service



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provided for students by the assistant. The code of ethical conduct requires licensees, regardless of practice setting, to maintain the ability to make independent judgments and strive to effect changes that benefit the client (4755-7-08 (B)(9)).

The Section recommends two additional resources: Cathy Csanyi, the OT/PT Specialty Consultant with the Ohio Department of Education, Office for Exceptional Children at (419) 747-2806 or via email at cathy.csanyi@ode.state.oh.us, and the Ohio Occupational Therapy Association's pediatrics member support group chair at www.oota.org. Both may be able to assist you further with some of your questions regarding school-based practice.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

Facebook question

Paula Michaud [pmeshow@wowway.com]

Sent: Sunday, April 06, 2014 11:56 AM

To: OTPTAT Board

Categories: Blue Category

Dear OT/PT licensure board:

I recently discharged a child from early intervention services. A family is now requesting a social connection via Facebook. Is there a waiting period upon discharge that one needs to wait to do so? OR is it advised to not connect at all to past consumers of service as there could be even a slight possibility of their needing services one day in the future from my agency, though at this time I do not serve his age group? Thanks: Paula Michaud
OT

OT Correspondence # 5
Page 1
Meeting Date: **MAY 8 2014**
License #: OT.001131



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OT5
May 2014

Paula Michaud, OTR/L
pmeshow@wowway.com

OT.001131

Dear Ms. Michaud:

This letter is in response to your correspondence regarding social connections with former clients.

There is nothing in the Ohio Occupational Therapy Practice Act that addresses the issue of connections through social media directly.

It is the position of the Section that.....

Comment [JMR2]: Rule 8-01 only applies to Board staff and the maintenance of confidential personal information held by a state agency. It does not apply to licensees

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

OTA/L as Activity Director

Karen Pinkerton [karen43968@yahoo.com]

Sent: Thursday, April 10, 2014 4:13 PM

To: OPTAT Board

Categories: Blue Category

Greetings,

I am an OTA/L who has been offered a job as an Activity Director. Can you please alert me to the rules and regulations concerning this position according to our licensure laws? Are co-signatures needed and how would I sign the activity notes?

Thank you for your time and response.
Karen Pinkerton

OT Correspondence # 6
Page 1
Meeting Date: **MAY 8 2014**
License #: OTA.01807



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OT6
May 2014

Karen Pinkerton, OTA/L
Karen43968@yahoo.com

OTA.001807

Dear Ms. Pinkerton:

This letter is in response to your correspondence regarding whether there are regulations that prohibit an occupational therapy assistant from working as an activity director and how should the activity director sign activity notes.

In the situation you describe, the individual would be functioning as an activity director who also happens to be an occupational therapy assistant and there is nothing that would prohibit the individual from signing **activity notes** in this capacity. Your credentials as an OTA would not be added to your name when signing notes as Activity Director. However, if occupational therapy progress is being reported or an occupational therapy plan of care is being modified, an occupational therapist must sign the document. The occupational therapy assistant cannot sign in lieu of an occupational therapist.

It is the position of the Occupational Therapy Section that an occupational therapy assistant working in the administrative role you described would not be governed by the Ohio Occupational Therapy Practice Act provided that the occupational therapy assistant was not holding himself/herself out as an occupational therapy assistant, **and so long as the individual was not billing or being reimbursed for occupational therapy services when serving in this administrative capacity.**

There is nothing in the Ohio Occupational Therapy Practice Act prohibiting occupational therapy assistants from administratively coordinating the provisions of services **external to the occupational therapy plan of care.**

In providing services other than occupational therapy, the occupational therapy assistant must make it clear to the client or family that the occupational therapy assistant is acting **only in this other capacity.** That is, communication must be done in such a way that if the client or family is asked, he/she could clearly testify in a legal proceeding as to the role of the individual who was providing treatment. The facility must also not represent this role as being more skilled due to additional education/credentials than required for that job description.

It is not within the Section's jurisdiction to render legal advice regarding obtaining professional or personal liability insurance. The Section recommends you contact an attorney or the facility regarding liability when acting in this capacity.

The Section also recommends that you check with corporation policies as they may be more restrictive than the Ohio Occupational Therapy Practice Act.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.



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Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

DRAFT

copying protocols for review by another OT

Amy Watson-Grace [amy.watson-grace@swcs.us]

Sent: Wednesday, April 16, 2014 1:28 PM

To: OTPTAT Board

Categories: Blue Category

OT Correspondence # 7Page 2

Meeting Date:

MAY 8 2014

License #: OT.004643

Good afternoon,

I have a question regarding copyright law related to occupational therapy assessment protocols. I am wondering if the fair use exception to the copyright laws allow for copying of a completed occupational therapy protocol for review by another occupational therapist? I have not been able to locate any information specific to occupational therapists regarding this question. I was asked by a parent at a school district other than the one that I work for to complete an independent educational evaluation. A Sensory Profile School Companion was completed but the results were not fully reported in the original OT evaluation. I am trying to minimize parent expense so I thought I could review the already completed protocol rather than completing a new one. (The other one was completed less than 3 months ago.) The district agreed to let me come in and review it but said that they cannot copy it for me due to copyright law. Again, I am trying to minimize time and, therefore, expense so it would be more cost effective for me to receive a copy than for me to drive to the district and spend an hour reviewing it in the special education office there. I have found on the National Association of School Psychologist's website the following information related :

Copying Protocols for Other Professionals

Q. Is it permissible to release copies of protocols to other psychologists?

A. Yes, assuming appropriate consent is obtained.

Neither FERPA nor IDEA prevent the release of school records (including protocols) to other individuals with parent/guardian authorization. The Psychological Corporation, for example, does not oppose the release of a copy of completed test protocol to another professional (one similarly obligated to follow ethical principles for test security), provided that the materials "pass directly from professional to professional and not through the hands of the parents or their attorney" (Beeman, 2000). NASP's ethical standards (2000a) also remind school psychologists that they "do not condone the use of psychological or educational assessment techniques, or the misuse of the information these techniques provide, by unqualified persons in any way" (Standard IV-C-5). Thus school psychologists must assume responsibility for assuring that any copies of protocols (or other data) are released only to appropriately trained and credentialed individuals.

Do test protocols reflect privileged communication between the school psychologist and student? Most (not all) states extend the concept of privileged communication to psychologists, and in some states this includes school psychologists. However, there are significant limitations on the use of "privileged communication" and it is unlikely that information recorded on a test protocol will be regarded as a confidential communication between the school psychologist and student, given that this information in most cases has already been disclosed as part of the special education assessment process. Further, school psychologists are reminded that the client can waive privilege (the psychologist would then be required to disclose) and judges often have the

power to waive privilege as well (Jacob-Timm & Hartshorne, 1998).

While generally a court order or subpoena must be honored, school psychologists are not otherwise obligated to release copies of protocols to nonqualified individuals, such as attorneys, case workers or pediatricians. If a court order requires release of protocols, the district might still be able to take some precautions to minimize any compromise of test security (see below).

Any information that you may be able to provide with regard to this issue would be most appreciated.

Thank you,

Amy Watson-Grace, MOT, OTR/L
Darby Woods
Darby Woods Preschool
Franklin Heights



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OT7
May 2014

Amy Watson-Grace, OTR/L:
amy.watson-grace@swcs.us

OT.004643

Dear Ms. Watson-Grace:

This letter is in response to your correspondence regarding copying completed protocols for another therapist's use.

It appears that you have done exceptional research into the laws for copying protocols for informative use in evaluating clients. It is not within the Section's jurisdiction to render legal advice. There is nothing in the Occupational Therapy Practice Act that prohibits an occupational therapist from sharing information about a client to another therapist **as long as proper permission is granted**. However, hospital, school or facility policies, accrediting bodies, and/or reimbursement agencies may be more restrictive than the Ohio Occupational Therapy Practice Act.

The Section thanks you for your correspondence. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

consut Occupational Therapy

Hogue, Kathy [Kathy.Hogue@hamiltondds.org]

Sent: Thursday, April 24, 2014 12:15 PM

To: OTPTAT Board

Categories: Blue Category

To Whom it Mat Concern:

My name is Kathy Hogue and I am an Occupational Therapist who works for Hamilton County Developmental Disability Services. (DDS) :

I have a question regarding consult services. I currently work in our school based facilities and provide direct care to the students I serve. I have been asked by our Itinerant Behavior staff to provide consult services for a specific student who is currently being served by his local school district due to sensory processing difficulties. My question is regarding assessment and plan of care needs for this situation. I have provided consult services while working in Early Intervention, but we filled out an Assessment with the team before consult services were implemented. I am glad to assist this student, but want to make sure I am following the correct Standards of Practice. Thank you for your time. If you would prefer to talk in person my phone number is 513-559-6947☎. Kathy Hogue OTR/L

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OT Correspondence # 8
 Page 1
 Meeting Date: **MAY 8 2014**
 License #: OT. 002220



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OT8
May 2014

Kathy Hogue, OTR/L
Kathy.Hogue@hamiltondds.org

OT.002220

Dear Mr. Hogue:

This letter is in response to your correspondence regarding assessment and plan of care needs in relation to consultative service.

From the situation you describe, it is inferred that this student is not receiving occupational therapy services from their home district. In addition, it appears that the student has transitioned from EI to school-based services. Therefore, the assessment and occupational therapy treatment/intervention plan should be provided by you as the therapist of record. This is needed for consultation as well as direct service.

It appears that you understand that, in addition to identifying the IEP goals/objectives to be addressed by the occupational therapy practitioner, your separate occupational therapy treatment/intervention plan should include intervention approaches, types of interventions to be used, outcomes, and any additional occupational therapy goals not listed in the IEP.

Please refer to the American Occupational Therapy Association's *Guidelines for Documentation of Occupational Therapy* (AOTA, 2008). The Section recommends that you contact the Ohio Occupational Therapy Association's pediatrics member support group coordinator concerning further questions regarding school-based issues at www.oota.org.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

Record Retention Regulations

Gail Requardt [gailrequardt@gmail.com]

Sent: Tuesday, April 29, 2014 12:07 AM**To:** OTPTAT Board; TheraPros [theraprosllc@midohio.twcbc.com]; Gail Requardt [gtrequardt15@gmail.com]**Categories:** Blue Category

TO: Ohio Occupational Therapy, Physical Therapy, & Athletic Trainers Board
FROM: Gail Requardt, OTR/L Executive Director, TheraPros,LLC
RE: Records Retention Regulations
DATE: April 28, 2014

Per recommendation from Lisa, Director of Enforcement for the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board, I am directing my question to you for regulatory clarification and direction.

Our Home Health therapy company contracts our services to a variety of Home Health nursing agencies. All billing to payer sources has, thus far, been submitted by the nursing agencies with our company being reimbursed from nursing agencies per contractual agreements.

My question is in regard to records retention. As neither entity is a facility and both are service providers, are both companies responsible for maintaining records of services rendered and for how long? If a contractual agreement is terminated, what are the regulations in this case?

Your expedient attention to these questions is greatly appreciated. Please email response to gailrequardt@gmail.com. For questions or further information, I may be contacted at 740-607-8784.

Thank you for your assistance.

Respectfully, Gail Requardt, OTR/L OH-OT # 00432

OT Correspondence # 9Page 1

Meeting Date:

MAY 8 2014

License #: OT. 000432



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Columbus, Ohio 43215-6108

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OT9
May 2014

Gail Requardt, OTR/L
gailrequardt@gmail.com

OT.000432

Dear Ms. Requardt:

This letter is in response to your correspondence regarding records retention.

The Occupational Therapy Section does not have policy for records retention. The Section suggests that you contact your Medical Information Department and/or legal counsel regarding an appropriate record retention policy.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm

dry needling for ohio occupational therapist

Jordan, America [America.Jordan@va.gov]

Sent: Tuesday, April 29, 2014 12:04 PM

To: OTPTAT Board

Categories: Blue Category

Diane,

My name is America Jordan and I work at the Veteran's Hospital in Chillicothe, Ohio. My question is whether occupational therapists in ohio are legally allowed to use dry needling in their clinical practices. The practice of dry needling for trigger point release is currently in use with physical therapist . Is this an option for OT's ? Thank you.

America Jordan, MPTA/L

Outpatient Orthopedic therapist

Ext: 6729

OT Correspondence # 10
Page _____
Meeting Date: MAY 8 2014
License #: OT.004722



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OT10
May 2014

America Jordan, OTR/L
America.Jordan@va.gov

OT.007722

Dear Ms. Jordan:

This letter is in response to your correspondence regarding whether occupational therapists can perform dry needling in their clinical practice.

There is nothing in the Ohio Occupational Therapy Practice Act that prohibits an occupational therapist from completing dry needling (intramuscular manual therapy) as part of the occupational therapy treatment/intervention plan, provided that the occupational therapist has received training, and demonstrated and documented competence in this activity.

The Section thanks you for your correspondence and appreciates your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (<http://otptat.ohio.gov>) to review the Occupational Therapy Practice Act and other information related to the regulation of occupational therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy Section

Jeffrey M. Rosa
Executive Director

JMR:dm



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Joint Board Correspondence- May 2014

No.	Correspondent Name and Subject
1.	<u>Kristina Smith, OT/L:</u> Ms. Bachman asked the Occupational and Physical Therapy Sections whether occupational and physical therapists are obligated to continue treating a client if the therapy goals have been met.
2/3.	<u>Heather Jennings, PT:</u> Ms. Jennings asked the Physical Therapy and Athletic Trainers Sections questions regarding whether community colleges and professional sports are covered under Ohio Physical Therapy and Athletic Training laws regarding concussion management and clarification on the documentation requirement for athletic trainers.
4.	<u>Thomas Paris, PT:</u> Mr. Paris asked the Occupational and Physical Therapy Sections questions regarding occupational and physical therapy practitioners can perform tracheostomy suctioning.
5.	<u>Michelle Tristani:</u> Ms. Tristani asked the Occupational and Physical Therapy Sections questions regarding whether the occupational and physical therapy Sections offer a limited permit, and asked for clarification on the signature designation for occupational and physical therapy practitioners.
6.	<u>Michael Millward:</u> Ms. Millward asked the Physical Therapy and Athletic Trainers Sections questions requesting clarification on the physical therapy and athletic trainers requirements regarding concussion management.
7.	<u>Scott Ritchey, PT:</u> Mr. Ritchey asked the Occupational and Physical Therapy Sections questions regarding whether occupational therapy assistants and physical therapist assistants document patient progress toward therapy goals.

OT and PT coorespondence

Agenda 4 - JB Corr

Smith, Tina [tsmith@graceworks.org]

Sent: Monday, March 17, 2014 1:58 PM

To: OTPAT Board

Categories: Blue Category

Hello,

I spoke with Jeff Barker today and it was suggested I send an email .

I am an OT who is employed at a skilled nursing facility here in Dayton. We have had a few cases with insurance companies recently that have raised questions with our staff.

Here is the scenario:

OT and PT will discharge a patient from therapy. The patient appeals this decision to a third party case management company. (Keypro) If the patient wins the appeal process, we are told to keep treating the patient.

Are we obligated to keep treating the patient even if our goals have been met or if the patient is at maximal potential?

Would you be able to provide a Position Statement regarding this situation?

Thank you,
Kristina Smith, OT/L

JB Correspondence # 1
Page 1
Meeting Date: **MAY 2014**

License #: OT.001298



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JB1
May 2014

Kristina Smith, OT/L
tsmith@graceworks.org

OT.005325

Dear Ms. Bachman:

This letter is in response to your correspondence regarding whether occupational and physical therapists are obligated to continue treating a client if the therapy goals have been met. Your question addresses both occupational and physical therapy practice. Please be aware that the regulation of these professions is undertaken by two separate entities.

If the physical therapy goals have been met and no further skilled physical therapy needs have been identified then there is no obligation to continue treatment.

There may be specific instances where no improvement is expected but skilled physical therapy is needed in order to prevent or slow deterioration and maintain maximum level of function.

Your question also relates to payer policies. The Physical Therapy Section recommends that you contact the Ohio Chapter or Reimbursement Department of the American Physical Therapy Association.

In response to your scenario, occupational therapy practitioners may encounter situations in which they feel a client would not benefit from further intervention, where a client is ready to be discharged from occupational therapy services, but other interdisciplinary team members, managers, and/or the client's family disagree. **According to rule 4755-7-08 (C)(1)(b) of the Ohio Administrative Code, an occupational therapist or occupational therapy assistant shall not provide treatment interventions that are not warranted by the client's condition or continue treatment beyond the point of reasonable benefit to the client.** Occupational therapy practitioners must clearly document and communicate with the interdisciplinary team.

If the manager, interdisciplinary team, and/or client/client's family decides to continue occupational therapy services after such communication, the occupational therapist may continue to provide services **after the client is made aware that no further benefit is expected.** In this situation, the occupational therapist would not be in violation of rule 4755-7-08 (C)(1)(b).

The Sections thank you for your correspondence and appreciate your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (www.otptat.ohio.gov) to review the Occupational Therapy and Physical Therapy Practice Acts and other information related to the regulation of occupational and



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physical therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy and Physical Therapy Sections

Jeffrey M. Rosa
Executive Director

JMR:dm

From OTPTAT Board Website

Jennings, Heather H [Heather.Jennings@health-partners.org]

Sent: Wednesday, March 19, 2014 4:33 PM

To: OTPTAT Board

Categories: Blue Category

Hello,

I am a physical therapist who has questions regarding House Bill #143 on Concussive Management. Does that bill apply to school aged athletes k-12 or to athletes for a junior college or minor league team. Our company provides coverage for a junior college (Lorain County Community College) and a independent minor league baseball team called the Lake Erie Crushers. I would like to know the laws and regulations governing concussion with these set of athletes.

Also, would you be able to direct me to the documentation requirements for athletic trainers. Thank you so much!

Heather

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JB Correspondence # 2

Page 1

Meeting Date: MAY 2014

License #: PT. 013740

Clarification

Jennings, Heather H [Heather.Jennings@health-partners.org]

Sent: Tuesday, April 08, 2014 2:43 PM**To:** OTPTAT Board**Categories:** Blue Category

Hello,

My company Mercy provides game sports coverage only and it was brought to her attention that some of the visiting team AT's are not providing care as what one clarified that may be a misperception of restorative care vs first aide and basic care. I want to make the clarification of what can be legally provided.

Also, seeing as this is a junior college does house bill 143 apply or highly recommended. If a home or away player shows up for a game and a possibly suspected concussion injury that was not cleared by anyone can a PT assess that player and if no signs of concussion RTP or regardless of AT or PT the player the player must wait 24 hrs of injury and follow SOP in conjunction with physician. Thank you for your help!

Heather

Sent from my iPhone

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JB Correspondence # 3Page 1Meeting Date: **MAY 2014**License #: PT, 013740



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JB2/JB3
May 2014

Heather Jennings, PT
Heather.Jennings@health-partners.org

OTA.03682

Dear Ms. Jennings:

This letter is in response to your correspondence regarding whether community colleges and professional sports are covered under Ohio laws regarding concussion management and clarification on the documentation requirement for athletic trainers. Your question addresses both physical therapy and athletic training practice. Please be aware that the regulation of these professions is undertaken by two separate entities.

As noted in the Legislative Service Commission bill analysis for Sub. H.B. 143, the provisions of the act apply to all of the following entities:

1. Public schools, including schools operated by school districts, community schools, and science, technology, engineering, and math (STEM) schools;
2. All private schools, including both chartered and nonchartered nonpublic schools; and
3. "Youth sports organizations," which are defined in H.B. 143 as public or nonpublic entities that organize athletic activities in which the athletes are not more than 19 years old and are required to pay a fee to participate in the athletic activity or whose cost to participate is sponsored by a business or nonprofit organization.

As a result, the provision of H.B. 143 would not apply for athletes participating on a junior college athletic team or a minor league baseball team.

Although H.B. 143 does not apply to adult and/or college level athletes, you are encouraged to consult the bylaws of the governing body for the community college's athletics department (www.njcaa.org) and the baseball team's league to determine if those entities have requirements and recommendations pertaining to the recognition and management of concussions. You would also be encouraged to follow current best practice in the recognition and management of concussions which is outlined in various consensus and position statements. A concussion recognition and management policy developed using these documents and in consultation with the team physician would be the best course of action.

In regards to your question regarding athletic trainer's documentation requirements, under an athletic training referral, the athletic trainer functions independently and is responsible for documentation. What this documentation consists of is governed by best practices and employer policies.

Comment [SS1]: Jeff, I didn't see any specific of what AT documentation consists of anywhere, are there state standards for documentation anywhere? This section needs expanded, but not sure where to go, the questions was very vague.

The Sections thank you for your correspondence and appreciate your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (www.otptat.ohio.gov) to review the Athletic Training and Physical Therapy Practice Acts and other information related to the regulation of athletic training and physical therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter



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(<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Physical Therapy and Athletic Trainers Sections

Jeffrey M. Rosa
Executive Director

JMR:dm

DRAFT

Scope of Practice

Paris, Thomas [parist@ccf.org]

Sent: Wednesday, April 09, 2014 8:40 AM

To: OTPTAT Board

Categories: Blue Category

Dear Board Members,

Is suctioning of patient's airway included in PT / OT scope of practice?

Thank you,

Thomas Paris



Thomas J. Paris, RRT, BA | Manager | Respiratory Therapy | Respiratory Institute
Cleveland Clinic | 9500 Euclid Avenue, M-56 | Cleveland, OH 44195
Office: (216) 444-1172 | Fax: (216) 444-8279 | E-Mail: parist@ccf.org

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JB Correspondence # 4

Page 1

Meeting Date: **MAY 2014**

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JB4
May 2014

Thomas Paris
parist@ccf.org

Dear Mr. Paris:

This letter is in response to your correspondence regarding whether occupational and physical therapy practitioners can perform tracheostomy suctioning. Your question addresses both occupational therapy and physical therapy practice. Please be aware that the regulation of these professions is undertaken by two separate entities.

It is the opinion of the Ohio Physical Therapy Section that it is not within the scope of practice for a physical therapist assistant (PTA) to do tracheostomy suctioning even with training. It is within the scope of practice, however, for a physical therapist (PT) to do this type of treatment if trained and shown to be competent in the intervention, as suctioning requires an examination for appropriateness for this intervention and evaluation of how much and when to stop treatment.

In accordance with section 4755.04 (A)(3) of the Ohio Revised Code, it is the position of the Occupational Therapy Section that occupational therapy practitioners may use physical agent modalities in the provision of occupational therapy services provided that the occupational therapy practitioner demonstrates and documents competency in the modality, in accordance with rule 4755-7-08 of the Administrative Code, and is practicing within the occupational therapy scope of practice. If the modality will be administered by an occupational therapy assistant both the supervising occupational therapist and occupational therapy assistant must document and demonstrate competency in the techniques or modality.

The Sections thank you for your correspondence and appreciate your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (www.otptat.ohio.gov) to review the Occupational Therapy and Physical Therapy Practice Acts and other information related to the regulation of occupational and physical therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy and Physical Therapy Sections

Jeffrey M. Rosa
Executive Director

JMR:dm

OT and PT Licensure Questions

Tristani, Michelle [Michelle.Tristani@peoplefirstrehab.com]

Sent: Tuesday, April 15, 2014 9:41 AM**To:** OTPTAT Board**Categories:** Blue Category

Hello,

I have a few questions regarding OT, COTA, PT and PTA licenses.

1. Do you offer temporary licenses for OT, COTA, PT and PTA?
2. If you do offer temporary licenses, is direct, onsite supervision required during the time period of temp licensure?
3. Does the board have state specific signature requirements for credentials for OT, COTA, PT and PTA within clinical documentation? More specifically, does the board require the OT, COTA, PT and PTA license number next to the signature on clinical documentation?

Thanks so much!

Michelle

Michelle Tristani, MS/CCC-SLP

Cell: 508 654-2382

Fax: 866 652-7747

michelle.tristani@rehabcare.com

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Dedicated to Hope, Healing and Recovery.

JB Correspondence # 5
Page 1
Meeting Date: **MAY 2014**

License #:



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JB5
May 2014

Michelle Tristani
Michelle.Tristani@peoplefirstrehab.com

Dear Ms. Tristani:

This letter is in response to your correspondence asking whether the Board issues temporary licenses and for clarification on the signature designation for occupational and physical therapy practitioners. Your questions address both occupational therapy and physical therapy practice. Please be aware that the regulation of these professions is undertaken by two separate entities.

The Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board does not issue temporary licenses for occupational therapy or physical therapy licensees.

In response to your question regarding signature requirements, rule 4755-27-07 of the Ohio Administrative Code requires physical therapists and physical therapist assistants to use the letters PT or PTA immediately following the individual's name since this is the regulatory designation allowing practice. Academic degrees may then follow the regulatory credential. For example, a nametag or signature might read Pat Doe, PT, MS, OCS.

Rule 4755-7-10 outlines the appropriate credentials for occupational therapy licensees. Occupational therapy staff are required to use OTR/L or COTA/L if they are currently certified by the National Board for Certification in Occupational Therapy (NBCOT). They are not currently certified, the appropriate credential is OT/L or OTA/L. The Ohio Occupational Therapy Practice Act does not specify if the credential needs to immediately follow the licensee's name.

The Sections thank you for your correspondence and appreciate your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (www.otptat.ohio.gov) to review the Occupational Therapy and Physical Therapy Practice Acts and other information related to the regulation of occupational and physical therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy and Physical Therapy Sections

Jeffrey M. Rosa
Executive Director

JMR:dm

Questions regarding AT Practice Laws

Millward Mike [millward.mike@pctc.k12.oh.us]

Sent: Thursday, April 24, 2014 7:46 AM**To:** OTPTAT Board**Categories:** Blue Category

Good morning,

I am working closely with my hospital system in attempting to incorporate an improved role of ATs in the clinical setting. Several questions have come up, that we want to be sure we understand the laws accurately. Any information you can give would be greatly appreciated.

- 1) Are ATs allowed to perform manipulations in the state of Ohio, given the AT is trained in such treatments?
- 2) I hope I am reading this accurately ... ATs may bill using the same codes as PTs/PTAs, as long as there is direct (1-1) supervision. Does this mean that a PT may not be treating a different patient at the same an AT is treating a patient, if they are going to bill under the same codes (they are treating different patients)?
- 3) Do ATs documentation need to be co-signed by a PT?

Thank you again for your time, any help you could give would be greatly appreciated!!

Michael J. Millward AT, ATC, CSCS

Exercise Science - Sports Medicine Instructor

Pioneer Career and Technology Center

27 Ryan Rd.

Shelby, Ohio 44875

Office: 419.347.7744 x 42787

Fax: 419.347.4977

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JB Correspondence # 6Page 1Meeting Date: MAY 2014License #: AT.002760



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JB6
May 2014

Michael Millward, AT
Millward.mike@pctc.k12.oh.us

AT.002760

Dear Mr. Millward:

This letter is in response to your correspondence requesting clarification on the physical therapy and athletic trainers requirements regarding concussion management. Your question addresses both physical therapy and athletic training practice. Please be aware that the regulation of these professions is undertaken by two separate entities.

In response to your first question, while the Ohio Revised Code pertaining to athletic training does not specifically mention manipulation, care should be taken to ensure that section 4734.01 (practice of chiropractic defined) and 4734.14 (Prohibited Acts) of the revised code is not violated. The section is located below for your review.

4734.01 Practice of Chiropractic Defined

As used in this chapter, the "practice of chiropractic" means utilization of the relationship between the musculo-skeletal structures of the body, the spinal column, and the nervous system in the restoration and maintenance of health, in connection with which patient care is conducted with due regard for first aid, hygienic, nutritional, and rehabilitative procedures and the specific vertebral adjustment and manipulation of the articulations and adjacent tissues of the body.

4734.14 Prohibited acts.

(A) (1) Except as provided in division (B) of this section, no person shall engage in the practice of chiropractic without a current, valid license issued by the state chiropractic board under this chapter.

Pursuant to section 4755.60 (A) of the Revised Code and rule 4755-42-02 of the Administrative Code, athletic trainers must practice upon the referral of an individual licensed in Ohio to practice medicine and surgery, osteopathic medicine and surgery, podiatric medicine and surgery, chiropractic, dentistry, or physical therapy. Athletic trainers may not accept direct referrals from physician assistants or practitioners of the limited branches of medicine.

A referral relationship between a team physician and an athletic trainer should be one consisting of a protocol of care communicated between a team physician and the athletic trainer. This agreement should include procedures for prevention, recognition, assessment, management and treatment of athletic injuries.

If a situation exists where a patient referred to the athletic trainer by a physical therapist may benefit from athletic training services, i.e. a patient's condition is an athletic injury, then the physical therapist may refer that particular patient to an athletic trainer. If this procedure is followed, the athletic trainer must perform an injury assessment and determine the athletic training plan of care.

If the athletic trainer is providing services pursuant to a physical therapy plan of care, rule 4755-27-01 (C) of the Ohio Administrative Code applies. This rule defines "other licensed personnel" as "any person holding an Ohio license to practice as a health care practitioner in a profession other than physical therapy . . . who is working under the direct supervision of a physical therapist or physical therapist assistant, as delegated by the physical therapist, and is performing tasks and duties related to the delivery of physical therapy." When acting under the direction of a physical therapist, licensed athletic trainers are considered other licensed personnel.

Comment [JMR2]: Sue, I would argue that if you (the AT Board) say that manipulation is part of the AT scope, the provisions in the chiro law don't apply. They don't own the performance of manipulation. That being said, I have no idea if manipulation is something that ATs are educated/trained to do.



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In accordance with rule 4755-27-04 of the Administrative Code, the supervising physical therapist or physical therapist assistant is accountable and responsible at all times for the direction of the actions of the persons supervised, including other licensed personnel. A physical therapist assistant can provide direct supervision of other licensed personnel even if the physical therapist is not on-site but is available by telecommunication at all times and able to respond appropriately to the needs of the patient. However, only a physical therapist can determine that a patient may be delegated to other licensed personnel.

Other licensed personnel cannot be assigned their own physical therapy caseload without the supervising physical therapist or physical therapist assistant having direct contact with each patient during each visit. It is the responsibility of the physical therapist to determine and document the extent of contact necessary to assure safe patient care. Pursuant to rule 4755-27-03 (F) of the Ohio Administrative Code, "Delegation of tasks related to the operation and delivery of physical therapy to other licensed personnel must be done in accordance with the scope of practice of the other licensed personnel's professional license, education and training, the level of competence as determined by the supervising physical therapist, and in consideration of the patient's overall needs and medical status."

The patient contact by the delegating physical therapist or supervising physical therapist assistant may be to provide portions of treatment or to assess the patient's progress within the existing plan of care. When needed, only the physical therapist may make adjustments to the plan of care.

In response to your second question, relates to payer policies and not the Physical Therapy Practice Act, The Physical Therapy section recommends that you prefer to Medicare rules or other payer policies about reimbursement for treatment by other licensed personnel since some insurers do not cover services other than those provided by a physical therapist or physical therapist assistant. You may also get information from the Reimbursement Department or Ohio chapter of the APTA.

Nothing in the Ohio Athletic Training Practice Act prevents athletic trainers from billing for services. However, employers may restrict your practice due to billing or other protocol issues. The Athletic Trainers Section suggests you contact the Ohio Athletic Trainers Association or the National Athletic Trainers Association or refer to CPT codes listed under physical medicine.

In response to your third question, the Physical Therapy Section does not dictate the format of clinical notes. As long as the documentation by other licensed personnel is restricted to an accounting of the activities provided, descriptions of those activities and the patient's comments may be in various sections of the documentation. The remainder of the documentation is the responsibility of the supervising physical therapist or supervising physical therapist assistant.

The rule limiting the documentation by other licensed personnel to "an accounting of the activities provided" is intended to include patient comments during those activities and a description of the patient's response or ability/inability to perform specific components of the program. However, any assessment of a patient's progress must be documented by the physical therapist or physical therapist assistant, and prognosis or plan revision must be documented by the physical therapist.

The signature of other licensed personnel may reflect their training or credentials, but must be countersigned by the supervising physical therapist. The countersignature must indicate that the supervising physical therapist reviewed the written note. Only a hand written or electronic signature is acceptable.

When a patient is seen in a multidisciplinary facility, the professional who performs the initial evaluation must oversee that patient's care.



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Executive Director
Jeffrey M. Rosa

For example, if a patient is referred for evaluation and treatment and an athletic trainer performs the initial evaluation, the patient is under athletic training care and guidelines. If the patient is initially seen by a physical therapist, the patient would be a physical therapy patient and fall under their guidelines. The prescription by the referring medical practitioners must state that the referral is for athletic training. The physical therapist may also refer the patient to the care of the athletic trainer but have the patient still remain under the care of the physical therapist. If the patient is receiving services pursuant to an athletic training referral, the athletic training functions independently and does not need supervision or co-signature by the physical therapist.

The Sections thank you for your correspondence and appreciate your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (www.otptat.ohio.gov) to review the Athletic Training and Physical Therapy Practice Acts and other information related to the regulation of athletic training and physical therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Physical Therapy and Athletic Trainers Sections

Jeffrey M. Rosa
Executive Director

JMR:dm

From OTPTAT Board Website

Ritchey, Scott [sritchey@interim-health.com]

Sent: Monday, April 28, 2014 8:34 AM

To: OTPTAT Board

Categories: Blue Category

To Whom It may concern,

I am a practicing homecare PT in the Central Ohio area. Our daily visit notes have a section to define each pt goal and document progress toward that goal (in percentages: 0-25, 26-50, 51-75, 76-99, 100) at each visit. Can a PTA complete this section, or only a PT? I read through the Practice Act, but could not see where this issue was addressed. Could you clarify this for me? Would the ruling/guideline also apply to OT/OTA's.

Thank You

Scott Ritchey MHS, PT
PT-09238

JBC Correspondence # 7
Page 1
Meeting Date: **MAY** 2014
License #: PT.009238



Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board

77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

JB7
May 2014

Scott Ritchey, PT
sritchey@interim-health.com

PT.009238

Dear Mr. Ritchey:

This letter is in response to your correspondence regarding whether occupational therapy assistants and physical therapist assistants document patient progress toward therapy goals. Your question addresses both occupational therapy and physical therapy practice. Please be aware that the regulation of these professions is undertaken by two separate entities.

It is the position of the Occupational Therapy Section that the initial plan, long-term goals, and initial short-term goals must be written by the occupational therapist. The occupational therapist may collaborate with the occupational therapy assistant in the development of these items. Once the initial treatment/intervention plan and goals are established, the occupational therapy assistant may update short-term goals in collaboration with the occupational therapist. Please review rule 4755-7-02 of the Administrative Code for additional information on the roles and responsibilities of the occupational therapist and occupational therapy assistant.

The occupational therapy assistant can gather objective information and report observations, with or without the client and/or occupational therapist present. It is the responsibility of the occupational therapist to interpret the data gathered by the occupational therapy assistant and collaborate with the occupational therapy assistant to make recommendations. Any collaboration between the occupational therapist and occupational therapy assistant must be reflected in client documentation.

In accordance with rule 4755-7-04 of the Administrative Code, it is the position of the Occupational Therapy Section that if patient/client documentation includes any type of treatment grid, a single co-signature and date of review on the form is sufficient. Co-signature verifies that the supervisor reviewed the document and agrees with its content.

It is the position of the Section that for any hand written documentation, the supervising occupational therapist must co-sign each entry into the patient/client medical record with their name, credential, and date.

Insert PT response

The Sections thank you for your correspondence and appreciate your understanding that it is your professional responsibility to remain current with professional standards. Please visit the Board's website (www.otptat.ohio.gov) to review the Occupational Therapy and Physical Therapy Practice Acts and other information related to the regulation of occupational and physical therapy in Ohio. You can also obtain updates from the Board at our Facebook (<http://www.facebook.com/OhioOTPTATBoard>) and Twitter (<http://www.twitter.com/OhioOTPTATBd>) pages. Should you have any additional questions, please contact the Board at (614) 466-3774 or via e-mail at board@otptat.ohio.gov.

Sincerely,
The Occupational Therapy and Physical Therapy Sections

Jeffrey M. Rosa



Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board
77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

Executive Director

JMR:dm

DRAFT

State	Level I CE?	Comments	Citation
AL	No	No credit for Level II either	
AR	Yes	2 credits for Level 1, 4 credits for Level II; Max of 4 credits	
AZ	No		
IN	Yes	1 hr for every 32 hrs of supervision, max of 6 contact hrs (for both Level 1&2)	844 IAC 10-7-4
KS	No	Considering adding for Level I, but now only for Level II	
KY	Yes	1 CCU/40 hrs of supervision (doesn't specify Level I or II).	201 KAR 28:200 Sec 3.(6)
MD	Yes	2 hrs per Level I student, 8 hrs per Level II student	Rule 10.46.04.06(15)
MI		No CE required for occupational therapy	
MO	No		
NC	Yes	Licensee may earn 1/2 point for each 40 hrs of fieldwork, up to max of 6 points	Rule .0805(5)
NH	No		
NV	Yes	2 hours max for Level I (but earn 1 hr for each week of Level II supervision)	NAC 640A.090
OK	Yes	1 point per week of continuous direct supervision (doesn't specify what level)	
OR	Yes	1 point for 8 hrs of supervision (limit to 14 of 30 points in this category)	OAR 339-020-0020
PA	Yes	1 CE/student. Max of 12 CE per biennium (3 CE/student for Level II)	42.52; 42.55 (b)(3)
RI	No		
SD	No		
TX	Yes	1 CE/40 hrs of supervision and 2 CE/80 hrs; Max of 2 CE for each Level I student. For Level II, 6 hrs/8 wks or 8 hrs/12 weeks; Max of 8 CE for each Level II. Max of 10 hrs for supervision	367.2 (a)(6)(A)
UT		No CE required but must be certified by NBCOT	
VA	No		
VT	No		
WA	No	Credit only for level 2	
WI	Yes	2 points for Level I (8 points for Level II). 24 total points required for renewal	OT 3.06
WV	Yes	2 contact hours/student for Level I. Max of 6 hours	rule 13-04 3.8.b.13
WY	No	No credit for Level II either	



Electronic Rule Filing

The Honorable Jon Husted
 Secretary of State
 180 E. Broad St., 15th Floor
 Columbus, OH 43215

Mark Flanders, Director
 Legislative Service Commission
 77 South High St., 9th Floor
 Columbus, OH 43215

Larry Woipert, Director
 Joint Committee on Agency Rule Review
 77 South High St., Concourse Level
 Columbus, OH 43215

It is hereby confirmed that the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board **original** filed the following rule(s) pursuant to section 119.03 of the Ohio Revised Code.

Package Number: 119897
File Date and Time: 04/01/2014 08:27 AM
Confirmation Number: 6c53c8c5edb8e16ac3b3e619b81ca958

ORIGINAL FILE

Rule Number	Type	FYR	CSI	JE Date	Eff Date	Next FYR	Tagline
4755-8-02	Amendment	Y	N	06/05/2014			Definitions.
4755-8-05	Amendment	Y	N	06/05/2014			Confidentiality statutes.



**Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board**

77 South High Street, 16th Floor
Columbus, Ohio 43215-6108

Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

Agenda 8.1**Notice of Public Hearing**

In accordance with section 119.07 of the Ohio Revised Code and rule 4755-1-01 of the Ohio Administrative Code, you are hereby notified that the Occupational Therapy Section of the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board will conduct a public hearing on Thursday, May 8, 2014 at 10:15 A.M. in the Vern Riffe Center for Government and the Arts located at 77 S. High Street, 31st Floor, Columbus, Ohio, 43215.

4755-8-02

Definitions Used for ORC 1347.15 CPI Rules (Amend)

4755-8-05

Confidentiality Statutes Identified in accordance with ORC 1347.15 CPI Rules (Amend)

Persons intending to testify are encouraged to pre-register by sending an email to board@otptat.ohio.gov or writing to:

Jeffrey Rosa, Executive Director
Ohio OTPTAT Board
Occupational Therapy Section
77 S. High Street, 16th Floor
Columbus, OH 43215-6108

Testimony presented during the hearing or submitted to the Section will be considered by the Section at its May 8, 2014 meeting. A copy of the proposed rules referenced above may be obtained at the Board's website, <http://otptat.ohio.gov>, or by contacting the Board by email or telephone.

Exhibit
2

4755-8-02 **Definitions.**

For the purposes of the administrative rules promulgated in accordance with section 1347.15 of the Revised Code, the following definitions apply:

- (A) "Access" as a noun means an opportunity to copy, view, or otherwise perceive whereas "access" as a verb means to copy, view, or otherwise perceive.
- (B) "Acquisition of a new computer system" means the purchase of a "computer system," as defined in paragraph ~~(C)~~(D) of this rule, that is not a computer system currently in place nor one for which the acquisition process has been initiated as of the effective date of rule 4755-8-06 of the Administrative Code.
- (C) "Board" means the Ohio occupational therapy, physical therapy, and athletic trainers board.
- (D) "Computer system" means a "system," as defined by section 1347.01 of the Revised Code, that stores, maintains, or retrieves personal information using electronic data processing equipment.
- (E) "Confidential personal information" has the meaning as defined by division (A)(1) of section 1347.01 of the Revised Code and identified in Chapter 4755-8 of the Administrative Code that reference the federal or state statutes or administrative rules that make personal information maintained by the board confidential.
- (F) "CPI" means confidential personal information, as defined in paragraph (E) of this rule.
- (G) "Employee of the board" means each employee of the board regardless of whether the employee holds an elected or appointed office or position within the board. "Employee of the board" is limited to the employing state agency.
- (H) "Incidental contact" means contact with the information that is secondary or tangential to the primary purpose of the activity that resulted in the contact.
- (I) "Individual" means natural person or the natural person's authorized representative, legal counsel, legal custodian, or legal guardian.
- (J) "Information owner" means the individual appointed in accordance with division (A) of section 1347.05 of the Revised Code to be directly responsible for a system.
- (K) "Person" means natural person.

- (L) "Personal information" has the same meaning as defined in division (E) of section 1347.01 of the Revised Code.
- (M) "Personal information system" means a system that maintains personal information, as those terms are defined in section 1347.01 of the Revised Code. System includes manual and computer systems.
- (N) "Research" means a methodical investigation into a subject.
- (O) "Routine" means common place, regular, habitual, or ordinary.
- (P) "Routine information that is maintained for the purpose of internal office administration, the use of which would not adversely affect a person" as that phrase is used in division (F) of section 1347.01 of the Revised Code means personal information relating to the board's employees that is maintained by the board for administrative and human resource purposes.
- (Q) "System" has the same meaning as defined by division (F) of section 1347.01 of the Revised Code.
- (R) "Upgrade" means a substantial redesign of an existing system for the purpose of providing a substantial amount of new application functionality, or application modifications that would involve substantial administrative or fiscal resources to implement, but would not include maintenance, minor updates and patches, or modifications that entail a limited addition of functionality due to changes in business or legal requirements.

Effective:

R.C. 119.032 review dates: 04/01/2014

Certification

Date

Promulgated Under: 119.03
Statutory Authority: 1347.15
Rule Amplifies: 1347.15
Prior Effective Dates: 1/3/11

Rule Summary and Fiscal Analysis (Part A)**Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board**

Agency Name

Division

Jeffrey M. Rosa

Contact

**77 South High Street 16th floor Columbus OH
43215-6108**

Agency Mailing Address (Plus Zip)

614-466-3474

Phone

614-995-0816

Fax

jeff.rosa@otptat.state.oh.us

Email

4755-8-02

Rule Number

AMENDMENT

TYPE of rule filing

Rule Title/Tag Line

Definitions.**RULE SUMMARY**

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? **Yes**

2. Are you proposing this rule as a result of recent legislation? **No**

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**

4. Statute(s) authorizing agency to adopt the rule: **1347.15**

5. Statute(s) the rule, as filed, amplifies or implements: **1347.15**

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

To update an incorrect citation in paragraph (B) of the rule.

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

The rule lists the definitions of terms used in the rules on accessing confidential personal information. The amendment corrects a citation in paragraph (B).

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

This response left blank because filer specified online that the rule does not incorporate a text or other material by reference.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

11. If **revising** or **refiling** this rule, identify changes made from the previously filed version of this rule; if none, please state so. If applicable, indicate each specific paragraph of the rule that has been modified:

Not Applicable.

12. 119.032 Rule Review Date: **4/1/2014**

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

\$0.00

Not applicable.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

Not applicable.

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

Not applicable.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? **No**

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**

S.B. 2 (129th General Assembly) Questions

18. Has this rule been filed with the Common Sense Initiative Office pursuant to R.C. 121.82? **No**

19. Specific to this rule, answer the following:

A.) Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? **No**

B.) Does this rule impose a criminal penalty, a civil penalty, or another sanction,

or create a cause of action, for failure to comply with its terms? **No**

C.) Does this rule require specific expenditures or the report of information as a condition of compliance? **No**

4755-8-05 **Confidentiality statutes.**

The following federal statutes or regulations or state statutes and administrative rules make personal information maintained by the agency confidential and identify the confidential personal information within the scope of rules promulgated by the board in accordance with section 1347.15 of the Revised Code:

- (A) Social security numbers: 5 U.S.C. 552a (2010), unless the individual was told that the number would be disclosed.
- (B) Information and records received or generated by the board pursuant to an investigation: division (E) of section 4755.02 of the Revised Code.
- (C) The results of any criminal records checks conducted pursuant to Chapter 4776. of the Revised Code: section 4776.04 of the Revised Code.
- (D) Medical records submitted with requests for testing accommodations and/or continuing education waiver requests: ~~42 U.S.C. 20145~~ C.F.R. 164 (2014).
- (E) College and university transcripts: 20 U.S.C. 1232g (2013).

Effective:

R.C. 119.032 review dates: 04/01/2014

Certification

Date

Promulgated Under: 119.03
Statutory Authority: 1347.15
Rule Amplifies: 1347.15
Prior Effective Dates: 1/3/11

Rule Summary and Fiscal Analysis (Part A)**Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board**

Agency Name

Division	<u>Jeffrey M. Rosa</u> Contact	
<u>77 South High Street 16th floor Columbus OH 43215-6108</u> Agency Mailing Address (Plus Zip)	<u>614-466-3474</u> Phone	<u>614-995-0816</u> Fax
<u>jeff.rosa@otptat.state.oh.us</u> Email		

4755-8-05

Rule Number

AMENDMENT

TYPE of rule filing

Rule Title/Tag Line

Confidentiality statutes.**RULE SUMMARY**

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? **Yes**

2. Are you proposing this rule as a result of recent legislation? **No**

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**

4. Statute(s) authorizing agency to adopt the rule: **1347.15**

5. Statute(s) the rule, as filed, amplifies or implements: **1347.15**

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

To comply with the incorporation by reference requirements.

7. If the rule is an AMENDMENT, then summarize the changes and the content of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

The rule provides for a list of statutes and regulations that address the need to consider certain information as confidential under Ohio law. The amendment includes the dates that the federal codes and regulations were last amended to comply with the incorporation by reference requirements. The amendment also updates the citation for medical records.

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

The text being incorporated by reference are various provisions of the United States Code and the Code of Federal Regulations. There are various websites available to the public to review the text of federal statutes and regulations.

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

As noted in the JCARR Procedures Manual (2013), if a rule incorporates a section of the United States Code, the agency should simply list the code's section number in the rule.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

11. If **revising** or **refiling** this rule, identify changes made from the previously filed version of this rule; if none, please state so. If applicable, indicate each specific paragraph of the rule that has been modified:

Not Applicable.

12. 119.032 Rule Review Date: 4/1/2014

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease** either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.

This will have no impact on revenues or expenditures.

\$0.00

Not applicable.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

Not applicable.

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

Not applicable.

16. Does this rule have a fiscal effect on school districts, counties, townships, or municipal corporations? **No**

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**

S.B. 2 (129th General Assembly) Questions

18. Has this rule been filed with the Common Sense Initiative Office pursuant to R.C. 121.82? **No**

19. Specific to this rule, answer the following:

A.) Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? **No**

B.) Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? **No**

C.) Does this rule require specific expenditures or the report of information as a condition of compliance? **No**

*****DRAFT - NOT FOR FILING*******4755-3-12 Military provisions related to licensure.**(A) Definitions.(1) "Armed forces" means:

- (a) The armed forces of the United States, including the army, navy, air force, marine corps, and coast guard;
- (b) A reserve component of the armed forces listed in paragraph (A)(1)(a) of this rule;
- (c) The national guard, including the Ohio national guard or the national guard of any other state;
- (d) The commissioned corps of the United States public health service;
- (e) The merchant marine service during wartime; or
- (f) The Ohio organized militia when engaged in full-time national guard duty for a period of more than thirty days.

(2) "Member" means any person who is serving in the armed forces.(3) "Veteran" means any person who has completed service in the armed forces, who has been discharged under honorable conditions or who has been transferred to the reserve with evidence of satisfactory service.(B) Eligibility for licensure.

In accordance with section 5903.03 of the Revised Code, the following military programs of training, military primary specialties, and lengths of service are substantially equivalent to or exceed the educational and experience requirements for licensure as an:

(1) Occupational therapist.(a) Military programs of training.

There are no military programs of training that are substantially equivalent to or exceed the educational and experience requirements for licensure as an occupational therapist. An individual serving in a military primary specialty listed in paragraph (B)(1)(b) of this rule must be a graduate of an occupational therapy program accredited by the accreditation council for occupational therapy education (ACOTE) to serve in that specialty.

(b) Military primary specialties.

- (i) Army: Occupational therapist (AOC 65A)
- (ii) Navy: Occupational therapy (NOBC 0874)

*****DRAFT - NOT FOR FILING*****

(iii) Air Force: Occupational Therapist (AFSC 42T3)

(c) Lengths of service.

There are no minimal lengths of service that would be substantially equivalent to or exceed the educational and experience requirements for licensure as an occupational therapist.

(2) Occupational therapy assistant.

(a) Military programs of training.

The occupational therapy assistant program at the medical education and training campus at Fort Sam Houston, Texas, is substantially equivalent to the educational requirements for licensure as an occupational therapy assistant.

(i) Army: School 083; Course 303-68L10 (Course 303-N3 prior to 2014).

(ii) Navy: School 083; Course B-303-0152.

(b) Military primary specialties.

(i) Army: Occupational therapy specialist (MOS 68L).

(ii) Navy: Occupational therapy assistant (NEC HM-8467).

(c) Lengths of service.

There are no minimal lengths of service that would be substantially equivalent to or exceed the educational and experience requirements for licensure as an occupational therapy assistant.

(C) License renewal.

(1) In accordance with section 5903.10 of the Revised Code, a licensee whose license expired due to the licensee's service in the armed forces shall be eligible for renewal of the expired license in accordance with section 4755.10 of the Revised Code and rules 4755-3-10 and 4755-5-05 of the Administrative Code, if the following conditions are met:

(a) The licensee presents the board with satisfactory evidence that, not more than six months prior to the date the evidence is submitted to the board, the licensee was honorably discharged or separated under honorable conditions;

(b) The licensee is not suffering a mental or physical illness, including physical deterioration that adversely affects cognitive, motor, or perception skills, that affect the licensee's ability to practice according to acceptable and prevailing standards of care; and

(c) The licensee meets the requirements for license renewal required by section

*****DRAFT - NOT FOR FILING*****

4755.10 of the Revised Code and rules 4755-3-10 and 4755-5-05 of the Administrative Code.

(2) The provisions of paragraph (C) of this rule also apply if the licensee's spouse served in the armed forces and the spouse's service resulted in the licensee's absence from this state.

(D) Continuing education.

(1) In accordance with section 5903.12 of the Revised Code, the provisions of this paragraph apply to a licensee who has been a member of the armed forces who has served on active duty for a period in excess of thirty-one days.

(2) A licensee who meets the provisions contained in paragraph (D)(1) of this rule may submit an application to the Board requesting an extension of the current continuing education reporting period.

(a) The licensee shall submit proper documentation certifying the active duty service and the length of that active duty service.

(b) Upon receiving the application and proper documentation, the board shall extend the current continuing education reporting period by an amount of time equal to the total number of months that the licensee spent on active duty during the current continuing education reporting period. Any portion of a month served shall be considered one full month.

(E) Determining fulfillment of continuing education.

(1) In accordance with section 5903.121 of the Revised Code, the board shall consider relevant education, training, or service completed by a licensee as a member of the armed forces in determining whether a licensee has met the continuing education requirements needed to renew the license.

(2) For the board to consider relevant education, training, or service completed by the licensee in accordance with paragraph (E) of this rule, the licensee shall submit a request for consideration and documentation of the education, training, or service to the board at least ninety days prior to the expiration of the license.

(F) Waiver of license application fee.

(1) The application fee shall be waived for an applicant who is a current member of the armed forces.

(2) Paragraph (F) of this rule applies to the following application fee types:

(a) Initial licensure by examination, outlined in rule 4755-5-01 of the Administrative Code.

(b) Initial licensure by endorsement, outlined in rule 4755-5-01 of the Administrative Code.

*****DRAFT - NOT FOR FILING*****

(c) Reinstatement of an expired license, outlined in rule 4755-5-08 of the Administrative Code.

(d) Restoration of a license in escrow, outlined in rule 4755-5-09 of the Administrative Code.

(G) Application process.

(1) The board's applications shall include a question to identify if the applicant is a member of the armed forces, a veteran, or a spouse or surviving spouse of a member of the armed forces or veteran. This status shall be stored in the licensing system.

(2) When the board receives an application from an individual identified in paragraph (G)(1) of this rule, the processing of that application shall be prioritized, with a goal of ensuring that a license is issued the same day that the application is complete.



MEMORANDUM

TO: Jeff Rosa, Executive Director, Ohio OTPTAT Board
FROM: Paula Steele, Regulatory Policy Advocate
DATE: April 15, 2014
RE: **CSI Review – 2014 OT Military Considerations** (OAC 4755-3-12)

On behalf of Lt. Governor Mary Taylor, and pursuant to the authority granted to the Common Sense Initiative (CSI) Office under Ohio Revised Code (ORC) section 107.54, the CSI Office has reviewed the abovementioned administrative rule package and associated Business Impact Analysis (BIA). This memo represents the CSI Office's comments to the Agency as provided for in ORC 107.54.

Analysis

This rule package consists of a single new rule being proposed by the Ohio Occupational Therapy, Physical Therapy, & Athletic Trainers (OTPTAT) Board to implement the recently enacted House Bill 98 which requires each licensing board to adopt rules identifying substantial military equivalents for its licensing education and experience requirements. This rule package, along with one each for athletic trainers and physical therapists was submitted to the CSI Office on March 14, 2014 with the comment period ending on April 4, 2014. Three comments were received – two comments were specific to the occupational therapist rule and in favor of it, and one comment was in favor of all the new rules.

The rule defines armed forces and military veterans, and addresses eligibility for licensure, license renewals for those serving in the armed forces or a licensee whose spouse served in the armed forces, and continuing education and fee waivers for members of the armed forces. In addition, the Board was able to identify and articulate in the eligibility for licensure section of the proposed rule, the military programs of training, military primary specialties, and lengths of service that are substantially equivalent to or exceed the educational and experience requirements for licensure for occupational therapists and occupational therapy assistants.

While the proposed rule implements House Bill 98, it also captures the intent of the recommendations stemming from Executive Order 2013-05K, which are summarized in the Office of Workforce Transformation's *Valuing Ohio Veterans Report* as follows:

The State of Ohio recognizes veterans as a valuable, talented and skilled workforce, and to that end is committed to increasing the number of military service members and veterans living and working in Ohio.

In June of 2013, Governor John R. Kasich signed Executive Order 2013-05K to support Ohio's veterans by ensuring they are receiving the appropriate credit and credentialing for their military training and experience.

Of the comments, one included a suggestion that the U.S. Public Health Service be included in the definition of the armed services. The Board responded that subsequent to the draft of the proposed rule, the State has expanded the definition to include the U.S. Public Health Service. Therefore, the Board will revise the proposed rule(s) accordingly prior to filing with the Joint Committee on Agency Rule Review.

After reviewing the proposed rule and BIA, the CSI Office has determined that the rule package satisfactorily meets the standards espoused by the CSI Office, and the purpose of the rules justifies the adverse impact identified in the BIA.

Recommendations

For the reasons described above, the CSI Office has no recommendations regarding this rule package.

Conclusion

Based on the above comments, the CSI Office concludes that the Board should proceed with the formal filing of this rule package with the Joint Committee on Agency Rule Review.

cc: Mark Hamlin, Lt. Governor's Office



Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board

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Governor
John R. Kasich
Executive Director
Jeffrey M. Rosa

TO: Mark Hamlin, Director of Regulatory Policy

FROM: Jeffrey M. Rosa, Executive Director

DATE: April 28, 2014

SUBJECT: Memorandum of Response to CSI Review – 2014 OT Military Considerations

On April 15, 2014, the Ohio Occupational Therapy, Physical Therapy, and Athletic Trainers Board (“Board”) received the Common Sense Initiative Office’s Recommendation Memorandum (“CSI Recommendation”) for the 2014 OT Military Considerations (OAC 4755-3-12) rule package. The Board appreciates the timely issuance of this memo.

The CSI Recommendation stated that “For the reasons discussed above, the CSI Office has no recommendations regarding this rule package.” The CSI Recommendation also stated that “Based on the above comments, the CSI Office concludes that the Board should proceed with the formal filing of this rule package with the Joint Committee on Agency Rule Review.”

At this time, the Board will continue moving forward with its filing of this rule package with the Joint Committee on Agency Rule Review.

If you have any questions, please do not hesitate to contact me at 614-466-3474 or jeff.rosa@otptat.ohio.gov.