

SENATE COMMITTEE ON HUMAN SERVICES AND AGING

Paper Ballot on Senate Bill 407

Senate Bill 407 creates an affiliated credentialing board to govern the profession of physical therapy, transfers regulation of the profession from the medical examining board to the new board, and changes the level of regulation from certification to licensure.

Senate Amendment LRBa1564/1 is identical to Assembly Amendment 1 to AB 751. This amendment provides that a person meeting the conditions of the amendment does not need an OT license.

Senate Amendment LRBa1566/1 is identical to Assembly Amendment 1 to AB 751. This amendment changes the composition of the new affiliated credentialing board by increasing the number of occupational therapists on the board from two to three and by increasing the number of occupational therapy assistants on the board from one to two.

Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1564/1

Aye

No

Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1566/1

Aye

No

Moved by: Senator Robson

Motion: Recommend passage as amended

Aye

No

Signature: Robert Winch

Date: 3-13-00

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Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1564/1

Aye

No

Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1566/1

Aye

No

Moved by: Senator Robson

Motion: Recommend passage as amended

Aye

No

Signature: 

Date: 3-13-00

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Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1564/1

Aye

No

Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1566/1

Aye

No

Moved by: Senator Robson

Motion: Recommend passage as amended

Aye

No

Signature: Peggy Rosenzweig

Date: 3/13/00

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Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1564/1

Aye

No

Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1566/1

Aye

No

Moved by: Senator Robson

Motion: Recommend passage as amended

Aye

No

Signature: _____

Date: March 13, 2000

SENATE COMMITTEE ON HUMAN SERVICES AND AGING

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Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1564/1

Aye

No

Moved by: Senator Robson

Motion: Recommend introduction and adoption of Senate Amendment LRBa1566/1

Aye

No

Moved by: Senator Robson

Motion: Recommend passage as amended

Aye

No

Signature: _____

Date: _____



Robson

JUDITH B. ROBSON

STATE SENATOR • WISCONSIN LEGISLATURE
CHAIR, HUMAN SERVICES AND AGING COMMITTEE
CO-CHAIR, JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

To: Members of the Senate Committee on Human Services and Aging

Re: Paper Ballots

Date: March 10, 2000

Attached please find paper ballots on the following bills:

- SB 353, relating to funding grants from DHFS to food pantries;
- SB 407, relating licensure of occupational therapists and creating an affiliated credentialing board;
- SB 413, relating to the sale of cigarettes not intended for consumption in the United States;
- SB 418, relating to placement of a child for adoption outside the county where the child is located; and
- SB 419, relating to authorizing a person who determines eligibility for MA to review and update the existing records of an MA applicant, regardless of whether the applicant's case has been assigned to the person making the eligibility determination.

Please return your ballots to me no later than noon on Monday, March 13, 2000.

MADISON OFFICE: STATE CAPITOL, PO BOX 7882, MADISON, WI 53707 • 608/266-2253
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TOLL FREE: 800/334-1468



Tommy G. Thompson
Governor

Marlene A. Cummings
Secretary

1400 E. WASHINGTON AVENUE
P.O. BOX 8935
MADISON, WISCONSIN 53708-8935
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(608) 266-2112
FAX#: (608) 267-0644

**Testimony on Senate Bill 407
Before The
Committee on Human Services and Aging
Senator Judy Robson, Chair
Thursday, March 9, 2000, 10:00 A.M.
201 Southeast, State Capitol**

Chairperson Robson and members of the committee, we appreciate the opportunity to share our views relating to occupational therapists and occupational therapy assistants.

Occupational Therapists and Occupational Therapy Assistants provide a very valuable service to the people of Wisconsin. These services are provided in the home, industrial settings, nursing homes, hospitals, schools, rehabilitation centers and clinics. They are responsible, along with other caregivers for making the impossible, possible. They have taught people how to live in their homes when their functions have been impaired and have retrained people in skills when their mobility and use of limbs have changed due to illness or accidents. At present, they are regulated by the Medical Examining Board as a council. The proposal before you will provide for an Occupational Therapy Affiliated Credentialing Board and for licensure of occupational therapists and assistants.

This proposal comes at a time when there is national and statewide attention focused on home health care providers. As a part of their continuing quest to provide services in the public interest, occupational therapists are aware of the need for public access. They are also aware of the need for closer scrutiny of their practice to ensure safety and welfare of the public. This can better be accomplished through an Affiliated Credentialing Board rather than advisory council. Occupational Therapists compare with other affiliated credentialing boards, i.e. physical therapists and dieticians. This will provide for consistency with the boards affiliated with the Medical Examining Board. Enhanced communication is the expected result.

We support this proposal and urge you to act favorably on this bill. Thank you.

Submitted By: Secretary Marlene A. Cummings

Presented By: Myra L. Shelton, Executive Assistant

MAC/mls
OT Testimony-SB 407

WISCONSIN SENATE HUMAN SERVICES AND AGING COMMITTEE
TESTIMONY
March 9, 2000

RE: SB 407: Relating to the Establishment of an Occupational Therapy Affiliated Credentialing Board and Providing for Licensure.

The Wisconsin Occupational Therapy Association appreciates the opportunity to discuss with you our support of SB407 sponsored by Sen. George et al. The simple intention of the legislation is to remain a regulated profession as a measure of consumer protection for the citizens of Wisconsin, while evolving the regulatory structure from an Occupational Therapy (OT) Advisory Council under the jurisdiction of the Medical Examining Board, to an Affiliated Credentialing Board. Concurrently, we support the legislation's objective to pursue the re-classification of our discipline's regulatory status from certification to licensure. Please allow me to highlight the current practice environment for occupational therapy and the conditions that have led us to seek the introduction of this legislation. Further, we would like to share our recent strategy for a successful outcome.

For almost 12 years now, consumers and the OT profession in Wisconsin have benefited from the protections that the regulatory environment has provided. Consumers have been satisfied that OT practitioners have met rigorous standards set by the Department of Regulation and Licensing, which assures them of core competencies in the delivery of *medical model* (general hospitals, home health, nursing homes, outpatient services, hospice, HMO's, pediatric hospitals, etc.) OT services. At the same time, OT practitioners are cognizant of the demands and expectations the consumer and regulatory community has placed upon them, and have responded in kind by adapting its culture to aggressively meet these standards and abiding by the rules promulgated to date. Certification level regulation, under the jurisdiction of the Medical Examining Board has been good for all parties!

But a dozen years later, and admittedly fed in part by the reimbursement climate, the face of OT practice has changed dramatically. The medical model of OT services is but only one aspect of our practice today. OTs now bring their skills to:

- ◆ school systems (an educational model), and our roles in academic/research settings,
- ◆ community systems (for instance in evaluating architectural barriers and home/residential safety, or in foster care programs, sheltered workshops, community mental health centers, vocational programs, day care programs, retirement centers, managing disability camps, travel, retail stores, or arts programs, Easter Seals programs, correctional institutions, etc.),

- ◆ habilitation services (like disabled driver rehab programs, or assisting the developmentally disabled to live independently in the community), and in
- ◆ private industry (concentrating primarily on ergonomics), among others.

Thus, the reach of the current medically oriented regulatory arm is too narrowly focused in reflecting the services Wisconsin consumers demand. In fact in some instances, consumers that seek OT services outside the medical model are having difficulty with access, for instance in industrial workplace settings. These clients are discouraged in utilizing occupational therapists because of the physician referral requirement. The regulatory structure must evolve past the medical model and address OT practice in these arenas as well.

Concurrently, consumers must have added layers of protection in these emerging practice settings in the form of a more comprehensive definition and administrative rules to govern OT. This legislation will enhance clarity on the roles and functions of occupational therapy service delivery today.

The association should reassure you for the record that when addressing the regulation of OT practice in the medical model milieu, there is no consideration to distance ourselves from our position that the physician (and others specified by law) should be the gatekeeper to OT services. We support the continued advisability for medical referrals in the medical arena. This legislation does not suggest practice without referral in medical model rehabilitation settings.

Given the evolving environment, a broader perspective of an affiliated credentialing board will more adequately represent the needs of both consumers and practitioners in legally re-defining and regulating what occupational therapy is as we begin the new century. Evolving from the level of certification to licensure brings:

- ◆ the consumer a greater clarity of roles;
- ◆ a more precise legal yardstick of pre-established state-specific standards by which a concern about provision of care can be measured;
- ◆ occupational therapists the same rights and responsibilities of other regulated allied health professions including physical therapy, dieticians, nursing and others, and it
- ◆ better reflects the contribution that occupational therapy has made in the rehabilitation and restoration of daily life functions, health promotion, and prevention for so many of our citizens.

Senate Human Services/Aging Committee Testimony
SB 407-George, et al
Re: OT Affiliated Credentialing Board
Page 3

To pursue our goals we decided to employ a strategy of education, information, discussion, and consensus building among the major stakeholders we identified prior to the introduction of SB 407. We have been very encouraged by the response from the Department of Regulation and Licensing and its general counsel, the Medical Examining Board, both assembly and senate leaders, related parties such as speech language pathologists, the home health association, physical therapists, chiropractors, the nursing home lobby, and the medical society.

Most notably however has been the support from consumer advocacy groups. They know how important occupational therapy is to the clients they serve and are concerned with the threats to reimbursement under recent Medicare Balanced Budget Act/Prospective Payment System final rule language. That language delineates that the “initial evaluation, performed by the *licensed* (italics added) therapist and necessary for the development of the plan of treatment, must be performed during the beneficiary’s SNF stay.” If the Medicare administration or its intermediaries were to interpret that phrase literally, Wisconsin consumers would not be able to access OT services in nursing homes. Since a significant portion of all OT services are provided in that setting, our certification status would threaten the rehabilitation potential of thousands of citizens. Licensure status reaffirms the consumer protection aspect of this legislation. Further, consumer groups support the notion that the profession be held accountable in all areas of practice.

We have assured these stakeholders about the use of exemption language in the proposed legislation. No part of this legislation impacts on the scope of practice of any other regulated discipline.

Finally, we hope to retain the highest possible level of cooperation, collaboration and collegiality with the Medical Examining Board, the structure that helped mature us to launch the current initiative. We hope we can count you among those who recognize it is time to change the regulatory environment by which OTs will continue to conduct their professional accountability.

Thank you for placing us on the agenda today!

Contact please:

Teri Black, COTA
Legislative Affairs Chair
(608) 258-2311

Michael Steinhauer, OTR, MPH, FAOTA
Executive Director
(608) 287-1606

FISCAL ESTIMATE WORKSHEET

1999 Session

Detailed Estimate of Annual Fiscal Effect
DOA-2047 (R10/98)

ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.
LRB 3436/2

Amendment No.

Subject

Regulation of occupational therapists and occupational therapy assistants, creating an occupational therapists affiliated credentialing board, etc.

I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):

II. Annualized Costs:	Annualized Fiscal impact on State funds from:	
	Increased Costs	Decreased Costs
A. State Costs by Category		
State Operations - Salaries and Fringes	\$	\$ -
(FTE Position Changes)	(FTE)	(- FTE)
State Operations - Other Costs	\$ 8,500	
Local Assistance		-
Aids to Individuals or Organizations		-
TOTAL State Costs by Category	\$ 8,500	\$ -
B. State Costs by Source of Funds		
GPR	\$	\$ -
FED		-
PRO/PRS	\$ 8,500	-
SEG/SEG-S		-
State Revenues Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.)	Increased Rev.	Decreased Rev.
GPR Taxes	\$	\$ -
GPR Earned	850	-
FED		-
PRO/PRS	8,500	-
SEG/SEG-S		-
TOTAL State Revenues	\$ 9,350	\$ -

NET ANNUALIZED FISCAL IMPACT

	<u>STATE</u>	<u>LOCAL</u>
NET CHANGE IN COSTS	\$ 8,500 _____	\$ _____
NET CHANGE IN REVENUES	\$ 9,350 _____	\$ _____

Agency/Prepared by: (Name & Phone No.)
Gail Riedasch, Budget Manager
266-0746

Authorized Signature/Telephone No.
Marlene A. Cummings
Marlene Cummings, Secretary, 266-8609

Date
1/31/2000

FISCAL ESTIMATE
DOA-2048 N(R10/98)

ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.
LRB 3436/2
Amendment No. if Applicable

Subject

Regulation of occupational therapists and occupational therapy assistants, creating an occupational therapists affiliated credentialing board, etc.

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation.

Increase Costs - May be possible to Absorb Within Agency's Budget Yes No

- Increase Existing Appropriation Increase Existing Revenues
- Decrease Existing Appropriation Decrease Existing Revenues
- Create New Appropriation

Decrease Costs

Local: No local government costs

- 1. Increase Costs
 Permissive Mandatory
- 2. Decrease Costs
 Permissive Mandatory

- 3. Increase Revenues
 Permissive Mandatory
- 4. Decrease Revenues
 Permissive Mandatory

5. Types of Local Governmental Units Affected:
- Towns Villages Cities
 - Counties Others _____
 - School Districts WTCS Districts

Fund Sources Affected
 GPR FED PRO PRS SEG SEG-S

Affected Ch. 20 Appropriations
20.165(1)(g)

Assumptions Used in Arriving at Fiscal Estimate

This bill creates a five-member occupational therapists affiliated credentialing board.

The fiscal impact would be to increase the cost for travel and per diem for the Board. The cost would be \$1,000 for per diems, \$4,500 for travel expenses, \$2,000 for meals and lodging that are direct billed. The implementation of this bill would also necessitate the printing of new applications and code books at a cost of \$1,000.

The total cost needed to implement this legislation would be passed along to credential holders in the form of increased initial credential and renewal fees.

Long-Range Fiscal Implications

Agency/Prepared by: (Name & Phone No.)
Gail Riedasch, Budget Manager
266-0746

Authorized Signature Telephone No.
Marlene A. Cummings
Marlene Cummings, Secretary, 266-8609

Date
1/31/2000



The Arc-Wisconsin, Inc.
600 Williamson Street, Madison, Wisconsin 53703
Phone (608) 251-9272
Fax (608) 251-1403
Toll Free: 1-877-Arc-8400 (1-877-272-8400)

***Promoting Quality of Life for People with
Developmental and Related Disabilities***

Celebrating
50
Years of Service

January 26, 2000

To the Members of the Wisconsin Legislature and Interested Parties,

The Arc of Wisconsin supports the legislation LRB 3436/3 related to the establishment of an affiliated credentialing board and licensure for occupational therapists and occupational therapy assistants.

We believe that consumers of Wisconsin will be best served by the passage of this legislation. We are concerned about recent developments under Medicare requiring that only "licensed professionals" serve beneficiaries. Access by consumers to OT services will be threatened by a strict interpretation of the requirement. An affiliated credentialing board, under the regulatory structure of licensure will assure that Medicare beneficiaries will not experience an interruption of important OT services that assist with rehabilitation and independent living.

Further, the practice of occupational therapy has evolved beyond the medical model that the Medical Examining Board has jurisdiction over. OT practice is also found in communities, school systems, prison systems, mental health arenas, and in our educational system. An affiliated credentialing board can more adequately address rule changes to reflect all the ways in which occupational therapists and assistants can help Wisconsin citizens.

The Arc asks the Wisconsin legislature to support LRB 3436/3 sponsored by Representative Joe Handrick.

Thank you!!

Sincerely,



Gerry Born
Executive Director

Leigh Roberts, President
Perry Mueller, Secretary

Kay Hurkmans, Vice-President
Gene Kreienbrink, Treasurer

Dorothy Will, Past President
Gerry Born, Executive Director

 Community
Health Charities
of Wisconsin
WORKING FOR A HEALTHY AMERICA



February 8, 2000

To Members of the Wisconsin Legislature:

The Wisconsin Council on Developmental Disabilities recognizes the value of occupational therapy in the lives of many people with developmental disabilities. WCDD supports legislation (LRB 3436/3) that would establish an affiliated credentialing board and licensure for occupational therapists and occupational therapy assistants.

Because of pressures felt by private and public insurance to limit access and contain costs of providing needed services, WCDD is concerned that quality care professionally administered will be less available to people who need it. An affiliated credentialing board and a system of licensure will help assure standards of practice that will, we hope, serve as a shield for efforts to contain costs of care by undermining professional practice standards.

Children and adults with disabilities are among the Wisconsin citizens who will benefit from the move from certification to licensure of occupational therapy services. Please support LRB 3436/3 sponsored by Rep. Joe Handrick.

Sincerely,

Jim Strachota
Chairperson

February 4, 2000



Dear Legislator,

I am writing to express the Wisconsin Homecare Organization's support for Rep. Joe Handrick's bill on the regulation of occupational therapists and occupational therapy assistants, and creating an Occupational Therapy Affiliated Credentialing Board and licensure (currently numbered LRB 3436/3).

If you have not signed on as a cosponsor of this piece of legislation, the home care providers of Wisconsin urge you to do so. If you are already on record in support of LRB 3436/3, those same providers offer you their thanks.

The argument in favor of this bill is, in the main, as follows:

1. Medicare regulations under the federal Balanced Budget Act of 1997 and the impending Prospective Payment System require "licensed professionals" for all its reimbursed settings. If interpreted literally, which is a real possibility, all OTs in Medicare certified hospitals, LTC and SNF facilities, home health, outpatient services, etc. etc. would be gone. Consumers would be unable to access any Medicare reimbursed OT services, and thousands of therapists will be out of work.
2. OTs are currently certified under the Medical Examining Board's jurisdiction. The practice today consists of much more than the medical model (for instance in the community, educational models, private industry, home care, etc) can focus on. The credentialing board helps us reflect practice more precisely, and allows for the creation of rules that help regulate practice in these emerging areas. This is strictly a consumer protection issue.
3. Other allied health professions (nursing, PT, etc) have licensure with an Affiliated Credentialing Board regulatory structure, and this legislation allows the OT profession the same rights and responsibilities of other related disciplines.
4. This regulatory structure provides a venue for consumers to seek redress if he or she believes that there has been a violation of the law.

This is a budget neutral matter. The Department of Regulation and Licensing has agreed to these plans and is looking at the final bill now. Several consumer groups already have also agreed to support the legislation.

Your time, attention and careful consideration are appreciated.

Russell King, President/Executive Director
Wisconsin Homecare Organization
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Madison, WI 53719
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