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LAW AND REGULATIONS

June 16, 2021

TABLE OF CONTENTS

Kentucky Revised Statutes

KRS 327.010	Definitions
KRS 327.020	License required - Exception - Use of designation or name
KRS 327.025	Obligation to report concerning practitioner's qualifications to practice
KRS 327.030	State Board of Physical Therapy – Membership - Qualifications - Vacancies
KRS 327.040	Duties and powers of the board
KRS 327.045	Impaired physical therapy practitioners committee (IPTPC) – Purpose – Assessments to support functions – Immunity of members – Privileged information – Annual report
KRS 327.050	Licensing provisions
KRS 327.060	Licensing requirements for persons holding a license in another state and persons trained in a foreign country
KRS 327.065	Licensing reciprocity
KRS 327.070	Disciplinary actions
KRS 327.075	Reinstatement of license or certificate – Appeal.
KRS 327.080	Expenses of board
KRS 327.090	Repealed, 1996
KRS 327.100	Short title
KRS 327.200	Duty of treating physical therapist utilizing telehealth to ensure patient's informed consent and maintain confidentiality – Board to promulgate administrative regulations Definition of "telehealth".
KRS 327.300	Physical Therapy Licensure Compact.
KRS 327.310	Criminal background check required by Physical Therapy Licensure Compact
KRS 327.990	Penalties

Kentucky Administrative Regulations

201 KAR 22.001	Definitions for 201 KAR Chapter 22
201 KAR 22.010	Objectives of physical therapy
201 KAR 22.020	Eligibility and credentialing procedure
201 KAR 22.035	Change of name and contact information
201 KAR 22.040	Procedure for renewal or reinstatement of a credential for a physical therapist or a physical therapist assistant
201 KAR 22:045	Continued competency requirements and procedures
201 KAR 22.052	Complaint procedure and disciplinary action of a credential holder or applicant
201 KAR 22.053	Code of ethical standards and standards of practice for physical therapists and physical therapist assistants
201 KAR 22.070	Requirements for foreign-educated physical therapists
201 KAR 22.130	Per diem of board members
201 KAR 22:135	Fees
201 KAR 22:140	Funding of impaired physical therapy practitioners committee
201 KAR 22:150	Impaired Practitioners Alternative Program
201 KAR 22:160	Telehealth and telephysical therapy
201 KAR 22.170	Physical Therapy Compact Commission

**KENTUCKY REVISED STATUTES
BOARD OF PHYSICAL THERAPY
CHAPTER 327**

327.010 Definitions.

As used in this chapter, unless the context otherwise requires:

- (1) **"Physical therapy"** means the use of selected knowledge and skills in planning, organizing, and directing programs for the care of individuals whose ability to function is impaired or threatened by disease or injury, encompassing preventive measures, screening, tests in aid of diagnosis by a licensed doctor of medicine, osteopathy, dentistry, chiropractic, or podiatry and evaluation and invasive or noninvasive procedures with emphasis on the skeletal system, neuromuscular and cardiopulmonary function, as it relates to physical therapy. Physical therapy includes screening or evaluations performed to determine the degree of impairment of relevant aspects, such as but not limited to nerve and muscle function including subcutaneous bioelectrical potentials, motor development, functional capacity, and respiratory or circulatory efficiency. Physical therapy also includes physical therapy treatment performed upon referral by a licensed doctor of medicine, osteopathy, dentistry, chiropractic, or podiatry, including but not limited to exercises for increasing or restoring strength, endurance, coordination and range of motion, stimuli to facilitate motor activity and learning, instruction in activities of daily living, and the use of assistive devices and the application of physical agents to relieve pain or alter physiological status. The use of roentgen rays and radium for diagnostic or therapeutic purposes, the use of electricity for surgical purposes, including cauterization and colonic irrigations are not authorized under the term "physical therapy" as used in this chapter;
- (2) **"Physical therapist"** means a professional person who has met the educational requirements of this chapter and who is licensed to practice physical therapy pursuant to this chapter;
- (3) **"Board"** means the Board of Physical Therapy established by KRS 327.030;
- (4) **"Referral"** means the procedure by which a licensed doctor of medicine, osteopathy, dentistry, chiropractic or podiatry designates the initiation of physical therapy treatment by a licensed physical therapist; and
- (5) **"Temporary permit"** means a permit granted to an individual who has met all requirements in Kentucky for license application by examination and has made application for examination but who has not yet successfully completed the board approved examination in this or another state.

327.020 License required -- Exceptions -- Use of designation or name.

- (1) No person shall practice or hold himself or herself out as being able to practice physical therapy unless the person:
 - (a) 1. Meets the educational requirements of this chapter;
 2. Is licensed in accordance with the provisions of this chapter;
 3. Is in good standing with the board; and
 4. Holds a license that is not suspended or revoked; or
 - (b) Is eligible to practice or work through a compact privilege granted under KRS 327.300.
- (2) Nothing contained in this chapter shall prohibit any person licensed in this state under any other law from engaging in the practice for which that person is duly licensed. Nothing contained in this chapter shall prohibit routine and restorative services performed by personnel employed by hospitals, physicians, or licensed health care facilities as relates to physical therapists. This chapter does not preclude certified occupational therapists, respiratory technicians, or respiratory therapists from practicing as defined in the United States Department of Health, Education and Welfare, Public Health Service, Health Resources Administration, Bureau of Health Manpower, DHEW publication No. (HRA) 80-28, "A Report on Allied Health Personnel." Persons regularly employed by the United States shall be exempted from the provisions of this chapter while engaged in this employment.
- (3) A licensed physical therapist may hold himself or herself out as a "physical therapist" or "licensed physical therapist" and may use the abbreviations "P.T." or "L.P.T." as a part of or immediately following the physical therapist's name, in connection with his or her profession.
- (4) It shall be unlawful for any person, or for any business entity, its employees, agents, or representatives to use in connection with the person's or entity's name or business activity the words "physical therapy," "physical therapist," "physiotherapy," "physiotherapist," "registered physical therapist," the letters "P.T.," "L.P.T.," or any other words, letters, abbreviations, or insignia indicating or implying directly or indirectly that physical therapy is provided or supplied or to bill for physical therapy unless that physical therapy is provided by or under the supervision of a physical therapist licensed and practicing in accordance with this chapter.

- (5) The provisions of subsection (1), (2), and (4) of this section shall not apply to volunteer health practitioners providing services under KRS 39A.350 to 39A.366.

Effective: June 29, 2017

History: Amended 2017 Ky. Acts ch. 93, sec. 4, effective June 29, 2017. –
Amended 2007 Ky. Acts ch. 96, sec. 17, effective June 26, 2007. –
Amended 1984 Ky. Acts ch. 377, sec. 2, effective July 13, 1984. –
Amended 1980 Ky. Acts ch. 53, sec. 2, effective July 15, 1980. –
Amended 1974 Ky. Acts ch. 74, Art. VI, sec. 107(10). –
Amended 1970 Ky. Acts ch. 115, sec. 2. –
Created 1958 Ky. Acts ch. 27, sec. 2, effective June 19, 1958

KRS 327.025 Obligation to report concerning practitioner's qualifications to practice

Any physical therapist, physical therapist's assistant, or employer of physical therapy practitioners having knowledge of facts by actual or direct knowledge shall report to the board of physical therapy a physical therapist or physical therapist's assistant who:

- (1) Has been convicted of a felony that involved acts that bear directly on the qualifications or ability of the applicant, licensee, or certificate holder to practice physical therapy;
- (2) Is suspected of fraud or deceit in procuring or attempting to procure a license to practice physical therapy or of negligently performing actions that justify action against a physical therapist or physical therapist's assistant's license as identified in KRS 327.070(2);
- (3) Has had a license to practice as a physical therapist or a certificate as a physical therapist's assistant denied, limited, suspended, probated, or revoked in another jurisdiction on grounds sufficient to cause a license or certificate to be denied, limited, suspended, probated, or revoked in this Commonwealth; or
- (4) Is practicing physical therapy without a current active license, certificate, or valid temporary permit issued by the board.

KRS 327.030 State Board of Physical Therapy - Membership - Qualifications – Vacancies

There is hereby established a State Board of Physical Therapy which shall consist of seven (7) members who shall be appointed by the Governor.

- (1) One (1) board member shall be a resident of Kentucky and who is not affiliated with or does not have more than five percent (5%) financial interest in any health care profession or business.
- (2) All other Board members shall:
 - (a) Be residents of Kentucky;
 - (b) Have engaged in the practice of physical therapy in Kentucky for the past five (5) years, and;
 - (c) Not have been disciplined by the board, or have been under any disciplinary action, in the past two (2) years.
- (3) All vacancies shall be filled by the Governor from a list of three (3) persons per position submitted by the Kentucky Physical Therapy Association or as provided by KRS 12.070.
- (4) For appointments to the board after December 31, 2008, the first two (2) appointments shall be for a term of two (2) years. The third appointment shall be for a term of three (3) years. All other subsequent appointments shall be for a term of four (4) years. All members shall serve until their successors are appointed and qualify. No member shall serve for more than two (2) consecutive terms.
- (5) The Governor may remove any member of the board for misconduct, incompetence, or neglect of duty.
- (6) The board may request the removal of a board member by the Governor.
- (7) The board shall annually elect a chair and chair-elect.
- (8) The board shall provide orientation to all new board members regarding the duties of the board.
- (9) There shall be no liability on the part of, and no action for damages against, any current or former board member, representative, agent, or employee of the board, when the person is functioning within the scope of board duties, acting without malice and with the reasonable belief that the actions taken by him or her are warranted by law.
- (10) Each board member shall receive, in addition to travel, lodging, and other actual and necessary expenses, a per diem not to exceed one hundred twenty dollars (\$120) for each day the member is actually engaged in the discharge of official duties approved by the board. The board shall, by promulgation of administrative regulations, set the amount of the per diem.

KRS 327.040 Duties and powers of the board

- (1) It shall be the duty of the State Board of Physical Therapy to receive applications from persons desiring to become physical therapists and to determine whether said applicants meet the qualifications and standards required by this chapter of all physical therapists. The board shall also be charged with enforcement of the provisions of this chapter.
- (2) The board is an agency of state government with the power to institute criminal proceedings in the name of the Commonwealth against violators of this chapter, and to institute civil proceedings to enjoin any violation of this chapter. The board shall investigate every alleged violation of this chapter coming to its notice and shall take action as it may deem appropriate. It shall be the duty of the Attorney General, the Commonwealth's attorneys, and the county attorneys to assist the board in prosecuting all violations of this chapter.
- (3) The board shall meet at least once each quarter at such place in this state as may be selected by the board. Four

- (4) members of the board shall constitute a quorum for the transaction of business. All meetings shall be held at the call of the chairman or at a call of a quorum of members upon not less than ten (10) days' written notice, unless notice shall be waived. The presence of any member at any meeting of the board shall constitute a waiver of notice thereof by the member.
- (4) The board may conduct investigations and schedule and conduct administrative hearings in accordance with KRS Chapter 13B, to enforce the provisions of this chapter or administrative regulations promulgated pursuant to this chapter. The board shall have the authority to administer oaths, receive evidence, interview persons, issue subpoenas, and require the production of books, papers, documents, or other evidence. In case of disobedience to a subpoena, the board may invoke the aid of the Franklin Circuit Court. Any order or subpoena of the court requiring the attendance or testimony of witnesses or the production of documentary evidence may be enforced and shall be valid anywhere in the Commonwealth.
 - (5) The board shall keep a minute book containing a record of all meetings of the board.
 - (6) The board shall maintain a register of all persons licensed or certified under this chapter. This register shall show the name of every licensee or certificate holder in this state, his current business and residence address and telephone numbers, and the date and number of his license or certificate. A licensee or certificate holder shall notify the board of a change of name, address, or telephone number, within thirty (30) days of the change.
 - (7) The board's records shall be updated annually.
 - (8) The board shall publish annually and make available, a current directory of all licensed physical therapists and certified physical therapists' assistants.
 - (9) The board shall adopt a seal which shall be affixed to every license and certificate granted by it.
 - (10) The board may promulgate administrative regulations establishing a measure of continued competency as a condition of license renewal.
 - (11) The board may promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of this chapter pursuant to the provisions of KRS Chapter 13A.
 - (12) The board shall promulgate by administrative regulation a code of ethical standards and standards of practice.
 - (13) The board shall have the right to regulate physical therapists' assistants and may promulgate reasonable administrative regulations regarding certification, limitations of activities, supervision, and educational qualifications for physical therapists' assistants. The board may establish reasonable fees for the certification, renewal, and endorsement of physical therapists' assistants. The fees shall not exceed corresponding fees for physical therapists.
 - (14) The board shall promulgate administrative regulations governing the physical and mental examination of physical therapists, physical therapists' assistants, or applicants, who may be impaired by reason of a mental, physical, or other condition that impedes their ability to practice competently. For purposes of enforcing this section, the board shall have the power to order an immediate temporary suspension in accordance with KRS 13B.125 if there is a reasonable cause to believe that a physical therapist, physical therapist's assistant, or applicant may be impaired by reason of a mental, physical, or other condition that impedes his or her ability to practice competently.

KRS 327.045 Impaired physical therapy practitioners committee (IPTPC): purpose - assessments to support functions – immunity of members – privileged information – annual report

- (1) The board shall establish an impaired physical therapy practitioners committee to promote the early identification, intervention, treatment, and rehabilitation of physical therapists and physical therapists' assistants who may be impaired by reason of illness or of alcohol or drug abuse, or as a result of any physical or mental condition.
- (2) The board may enter into a contractual agreement with a nonprofit corporation, physical therapy professional organization, or similar organization for the purpose of creating, supporting, and maintaining an impaired physical therapy practitioners committee.
- (3) The board may promulgate administrative regulations in accordance with KRS Chapter 13A to effectuate and implement a committee formed by the provisions of this section.
- (4) Beginning January 1, 2001, the board shall collect an assessment fee not to exceed twenty dollars (\$20) per licensee or certificate holder, payable to the board, to be added to each licensure and certification renewal application fee. Proceeds from the assessment shall be expended on the operation of an impaired physical therapy practitioner committee formed by the provisions of this section. The fee shall be set by the promulgation of administrative regulations.
- (5) Members of an impaired physical therapy practitioners committee, any administrator, staff member, consultant, agent, volunteer, or employee of the committee acting within the scope of their duties and without actual malice, and all other persons who furnish information to the committee in good faith and without actual malice shall not be liable of any claim or damages as a result of any statement, decision, opinion, investigation, or action taken by the committee or by an individual member of the committee.
- (6) All information, interviews, reports, statements, memoranda, or other documents furnished to or produced by the impaired physical therapy practitioners committee, all communication to or from the committee, and all proceedings, findings, and conclusions of the committee including those relating to intervention, treatment, or rehabilitation, which in any way pertain or refer to a physical therapist or physical therapist's assistant who is or may be impaired, shall be privileged and confidential.
- (7) All records and proceedings of the committee that pertain or refer to a licensee or a certificate holder who may be, or actually is, impaired shall be privileged and confidential and shall be used by the committee and its members only in the exercise of the proper function of the committee and shall not be considered public records and shall not be subject to court subpoena and subject to discovery or introduction as evidence in any civil, criminal, or administrative

- proceedings except as described in subsection (8) of this section.
- (8) The committee may disclose information relative to an impaired physical therapist or physical therapist's assistant only when:
 - (a) It is essential to disclose the information to persons or organizations needing the information in order to address the intervention, treatment, or rehabilitation needs of the impaired practitioner;
 - (b) Its release is authorized in writing by the impaired physical therapist or physical therapist's assistant; or
 - (c) The information is subject to court order.
 - (9) The impaired physical therapy practitioners committee shall make an annual report to the board.

KRS 327.050 – Licensing Provisions

- (1) Before applying for licensure by the board as a physical therapist, a person shall have successfully completed an accredited program in physical therapy approved by the board. No school shall be approved by the board unless it has been approved for the educational preparation of physical therapists by the recognized national accrediting agency for physical therapy educational programs.
- (2) Any person who possesses the qualifications required by this chapter and who desires to apply for licensure as a physical therapist in Kentucky shall make written application to the board, on forms to be provided by the board. The application shall be accompanied by a nonrefundable application fee in an amount to be determined by the board, but not to exceed two hundred fifty dollars (\$250).
- (3) If it appears from the application that the applicant possesses the qualifications required by this chapter and has not yet successfully completed the board-approved examination, the applicant shall be allowed to sit for the examination and tested in the subjects the board may determine to be necessary.
- (4) Examinations shall be held within the state at least once a year at the time and place as the board shall determine.
- (5) An applicant who is admitted to the examination or an applicant who has submitted satisfactory evidence that he has been accepted as a candidate for licensure by examination in a state which offers an examination approved by the board may be granted a temporary permit which shall be valid until his examination is graded and he is notified by the board of his score. The board may summarily withdraw a temporary permit upon determination that the person has made any false statement to the board on the application, or the person fails to pass an examination approved by the board.
- (6) An applicant who receives a passing score as determined by the board and who meets the other qualifications required by this chapter shall be licensed as a physical therapist.
- (7) An applicant who fails to receive a passing score on his examination shall not be licensed; but the board may, by administrative regulation, permit applicants to take the examination more than once.
- (8) All licenses and certificates shall be renewed biennially, upon payment on or before March 31 of each uneven-numbered year of a renewal fee in an amount to be promulgated by the board by administrative regulations.
- (9) Licenses and certificates which are not renewed by March 31 of each uneven numbered year shall lapse.
- (10) This chapter shall not be construed to affect or prevent:
 - (a) A student of physical therapy from engaging in clinical practice under the supervision of a licensed physical therapist, as part of the student's educational program;
 - (b) A physical therapist who is licensed to practice in another state or country from conducting or participating in a clinical residency under the supervision of a physical therapist licensed in Kentucky and for a period of not more than ninety (90) days;
 - (c) A physical therapist who is licensed to practice in another state or country from conducting or participating in the teaching of physical therapy in connection with an educational program and for a period of not more than ninety (90) days;
 - (d) A physical therapist licensed in another state or country from performing therapy on members of the out-of-state sports or entertainment group they accompany to Kentucky; or
 - (e) The practice of chiropractic as defined in KRS 312.015(3).

KRS 327.060 Licensing requirements for persons holding a license in another state and persons educated in a foreign country.

- (1) The board shall issue a license to:
 - (a) An individual who holds a valid license from another state, who meets requirements specified in KRS 327.050 and who has no imposed or pending disciplinary actions.
 - (b) An individual who has been educated as a physical therapist outside the United States and who has:
 1. Completed the application process;
 2. Provided satisfactory evidence to the board that his or her education is substantially equivalent to the requirements for physical therapists educated in United States accredited educational programs;
 3. Provided written proof that the school of physical therapy education outside the United States is recognized by its own ministry of education;
 4. Successfully completed the examinations provided for in KRS 327.050;
 5. Passed the board approved English language proficiency examinations if English is not his or her native language;
 6. Successfully completed, prior to licensure, a board-approved, supervised practice period of not less than three (3) months nor more than six (6) months, under the direct supervision of a physical therapist who

- holds an unrestricted Kentucky license. This requirement may be satisfied by at least three (3) months of supervised practice as a physical therapist in a state with license requirements comparable to or more stringent than those of Kentucky;
7. Provided proof of legal authorization to reside and seek employment in the United States or its territories;
 8. Provided proof of authorization to practice as a physical therapist without limitations in the country where the professional education occurred;
 9. Submitted to a prescreening process by an agency approved by the board; and
 10. Submitted educational credentials to the board for evaluation by an agency approved by the board.
- (2) The board may approve an agency to prescreen applicants for initial licensure under this section.
 - (3) The board may approve one (1) or more services to provide an evaluation of the applicant's educational credentials for board approval for licensing under this section.
 - (4) The board may waive the requirements of subsection (1)(b) 3., 9., and 10. of this section if the applicant is a graduate of a professional physical therapy education program pre-approved by the board.

KRS 327.065 – Licensure reciprocity.

Notwithstanding any statutory provision to the contrary, any physical therapist or physical therapist assistant holding a valid, unencumbered license or certificate to practice or work in another state may practice or work in the Commonwealth of Kentucky under a compact privilege if the person otherwise meets the requirements of KRS 327.300

Effective: June 29, 2017

History: Created 2017 Ky. Acts ch. 93, sec. 2, effective June 29, 2017.

KRS 327.070 – Disciplinary actions.

- (1) The board, after due notice and an opportunity for an administrative hearing conducted in accordance with KRS Chapter 13B may take any one (1) or a combination of the following actions against any licensee, certificate holder, or applicant:
 - (a) Refuse to license or certify any applicant;
 - (b) Refuse to renew the license or certificate of any person;
 - (c) Suspend or revoke or place on probation the license or certificate of any person;
 - (d) Impose restrictions on the scope of practice of any person;
 - (e) Issue an administrative reprimand to any person;
 - (f) Issue a private admonishment to any person; and
 - (g) Impose fines for violations of this chapter not to exceed two thousand five hundred dollars (\$2,500).
- (2) The following acts by a licensee, certificate holder, or applicant may be considered cause for disciplinary action:
 - (a) Indulgence in excessive use of alcoholic beverages or abusive use of controlled substances;
 - (b) Engaging in, permitting, or attempting to engage in or permit the performance of substandard patient care by himself or by persons working under his supervision due to a deliberate or negligent act or failure to act, regardless of whether actual injury to the patient is established;
 - (c) Having engaged in or attempted to engage in a course of lewd or immoral conduct with any person.
 1. While that person is a patient of a health care facility defined by KRS 216B.015 where the physical therapist or physical therapist's assistant provides physical therapy services; or
 2. While that person is a patient or client of the physical therapist or physical therapist's assistant;
 - (d) Having sexual contact, as defined by KRS 510.010(7), without the consent of both parties, with an employee or coworker of the licensee or certificate holder;
 - (e) Sexually harassing an employee or coworker of the licensee or certificate holder;
 - (f) Conviction of a felony or misdemeanor in the courts of this state or any other state, territory, or country which affects his ability to continue to practice competently and safely on the public, if in accordance with KRS Chapter 335B. "Conviction," as used in this paragraph, shall include a finding or verdict of guilt, an admission of guilt, or a plea of nolo contendere;
 - (g) Obtaining or attempting to obtain a license or certificate by fraud or material misrepresentation or making any other false statement to the board;
 - (h) Engaging in fraud or material deception in the delivery of professional services, including reimbursement, or advertising services in a false or misleading manner;
 - (i) Evidence of gross negligence or gross incompetence in his practice of physical therapy;
 - (j) Documentation of being declared mentally disabled by a court of competent jurisdiction and not thereafter having had his rights restored;
 - (k) Failing or refusing to obey any lawful order or administrative regulation of the board;
 - (l) Promoting for personal gain an unnecessary device, treatment, procedure, or service, or directing or requiring a patient to purchase a device, treatment, procedure, or service from a facility or business in which he has a financial interest; and
 - (m) Being impaired by reason of a mental, physical, or other condition that impedes his or her ability to practice competently.
- (3) A private admonishment shall not be subject to disclosure to the public under KRS 61.878(1)(l). A private admonishment shall not constitute disciplinary action but may be used by the board for statistical purposes or in subsequent disciplinary action against the same licensee, certificate holder, or applicant.

KRS 327.075 Reinstatement of a license

- (1) The board may reinstate within three (3) years a license or certificate which has lapsed, upon payment of the prescribed renewal fee and, in addition, the payment of a reinstatement fee to be promulgated by the board by administrative regulations.
- (2) The board may reinstate a license or certificate which has been lapsed for more than three (3) years, upon showing that the applicant is able to practice with reasonable competency. In determining competency, the board may require the applicant to successfully complete all or any part of the required examination.
- (3) The board may reinstate a license which has been suspended or revoked under provisions of this chapter, if after a hearing conducted in accordance with KRS Chapter 13B, the board determines the applicant is able to practice the profession with reasonable competency and is able to maintain the ethical code and standards of practice promulgated by administrative regulation. As a condition of reinstatement, the board may impose reasonable restrictions under which the licensee or certificate holder shall practice.
- (4) Any person aggrieved by a final order of the board denying, suspending, or revoking his license or certificate may appeal to the Franklin Circuit Court in accordance with KRS Chapter 13B.

KRS 327.080 – Expenses of the board

- (1) All fees received by the board and collected under this chapter or the administrative regulations adopted in accordance with this chapter shall be deposited with the State Treasurer and credited to the revolving fund of the board, a trust and agency fund, to be used by the board in defraying the costs and expenses of the board in the administration of the provisions of this chapter. No part of this fund shall revert to the general fund of the Commonwealth.
- (2) The board may employ an executive director and other personnel and may purchase such materials and supplies as it may deem necessary for the proper discharge of its duties.

KRS 327.090 – Repealed, 1996

KRS 327.100 - Short title.

This chapter may be cited as the “Physical Therapy Practice Act.”

KRS 327.200 – Duty of treating physical therapist utilizing telehealth to ensure patient’s informed consent and maintain confidentiality – Board to promulgate administrative regulations – Definition of “telehealth.”

- (1) A treating physical therapist who provides or facilitates the use of telehealth shall ensure:
 - (a) That the informed consent of the patient, or another appropriate person with authority to make the health care treatment decision for the patient, is obtained before services are provided through telehealth; and
 - (b) That the confidentiality of the patient’s medical information is maintained as required by this chapter and other applicable law. At a minimum, confidentiality shall be maintained through appropriate processes, practices, and technology as designated by the board and that conform to applicable federal law.
- (2) The board shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement this section and as necessary to:
 - (a) Prevent abuse and fraud through the use of telehealth services;
 - (b) Prevent fee-splitting through the use of telehealth services; and
 - (c) Utilize telehealth in the provision of physical therapy and in the provision of continuing education.
- (3) For purposes of this section, “telehealth” means the use of interactive audio, video, or other electronic media to deliver health care. It includes the use of electronic media for diagnosis, consultation, treatment, transfer of health or medical data, and continuing education.

KRS 327.300 – Physical Therapy Licensure Compact.

Physical Therapy Licensure Compact

SECTION 1. PURPOSE

The purpose of this Compact is to facilitate interstate practice of physical therapy with the goal of improving public access to physical therapy services. The practice of physical therapy occurs in the state where the patient or client is located at the time of the patient or client encounter. The Compact preserves the regulatory authority of states to protect public health and safety through the current system of state licensure.

This Compact is designed to achieve the following objectives:

1. Increase public access to physical therapy services by providing for the mutual recognition of other member state licenses;
2. Enhance the states’ ability to protect the public’s health and safety;
3. Encourage the cooperation of member states in regulating multistate physical therapy practice;
4. Support spouses of relocating military members;
5. Enhance the exchange of licensure, investigative, and disciplinary information between member states; and
6. Allow a remote state to hold a provider of services with a compact privilege in that state accountable to that state’s

practice standards.

SECTION 2. DEFINITIONS

As used in this Compact, and except as otherwise provided, the following definitions shall apply:

1. "Active duty military" means full-time duty status in the active uniformed service of the United States, including members of the National Guard and Reserve on active duty orders pursuant to 10 U.S.C. secs. 1209 and 1211;
2. "Adverse action" means disciplinary action taken by a physical therapy licensing board based upon misconduct, unacceptable performance, or a combination of both;
3. "Alternative program" means a nondisciplinary monitoring or practice remediation process approved by a physical therapy licensing board. This includes but is not limited to substance abuse issues;
4. "Compact privilege" means the authorization granted by a remote state to allow a licensee from another member state to practice as a physical therapist or work as a physical therapist assistant in the remote state under its laws and rules. The practice of physical therapy occurs in the member state where the patient or client is located at the time of the patient or client encounter;
5. "Continuing competence" means a requirement, as a condition of license renewal, to provide evidence of participation in, completion of, or both participation in and completion of educational and professional activities relevant to practice or area of work;
6. "Data system" means a repository of information about licensees, including examination, licensure, investigative, compact privilege, and adverse action;
7. "Encumbered license" means a license that a physical therapy licensing board has limited in any way;
8. "Executive board" means a group of directors elected or appointed to act on behalf of, and within the powers granted to them by, the commission;
9. "Home state" means the member state that is the licensee's primary state of residence;
10. "Investigative information" means information, records, and documents received or generated by a physical therapy licensing board pursuant to an investigation;
11. "Jurisprudence requirement" means the assessment of an individual's knowledge of the laws and rules governing the practice of physical therapy in a state;
12. "Licensee" means an individual who currently holds an authorization from the state to practice as a physical therapist or to work as a physical therapist assistant;
13. "Member state" means a state that has enacted the Compact;
14. "Party state" means any member state in which a licensee holds a current license or compact privilege or is applying for a license or compact privilege;
15. "Physical therapist" means an individual who is licensed by a state to practice physical therapy;
16. "Physical therapist assistant" means an individual who is licensed or certified by a state and who assists the physical therapist in selected components of physical therapy;
17. "Physical therapy," "physical therapy practice," and "the practice of physical therapy" mean the care and services provided by or under the direction and supervision of a licensed physical therapist;
18. "Physical Therapy Compact Commission" or "commission" means the national administrative body whose membership consists of all states that have enacted the Compact;
19. "Physical therapy licensing board" or "licensing board" means the agency of a state that is responsible for the licensing and regulation of physical therapists and physical therapist assistants;
20. "Remote state" means a member state other than the home state where a licensee is exercising or seeking to exercise the compact privilege;
21. "Rule" means a regulation, principle, or directive promulgated by the commission that has the force of law; and
22. "State" means any state, commonwealth, district, or territory of the United States of America that regulates the practice of physical therapy.

SECTION 3. STATE PARTICIPATION IN THE COMPACT

- A. To participate in the Compact, a state shall:
 1. Participate fully in the commission's data system, including using the commission's unique identifier as defined in rules;
 2. Have a mechanism in place for receiving and investigating complaints about licensees;
 3. Notify the commission, in compliance with the terms of the Compact and rules, of any adverse action or the availability of investigative information regarding a licensee;
 4. Fully implement a criminal background check requirement, within a time frame established by rule, by receiving the results of the Federal Bureau of Investigation record search on criminal background checks and use the results in making licensure decisions in accordance with Section 3.B. of this Compact;
 5. Comply with the rules of the commission;
 6. Utilize a recognized national examination as a requirement for licensure pursuant to the rules of the commission; and
 7. Have continuing competence requirements as a condition for license renewal.
- B. Upon adoption of this statute, the member state may obtain biometric-based information from each physical therapy licensure applicant and submit this information to the Federal Bureau of Investigation for a criminal background check in accordance with 28 U.S.C. sec. 534 and 42 U.S.C. sec. 14616.
- C. A member state shall grant the compact privilege to a licensee holding a valid unencumbered license in another member state in accordance with the terms of the Compact and rules.

- D. Member states may charge a fee for granting a compact privilege.

SECTION 4. COMPACT PRIVILEGE

- A. To exercise the compact privilege under the terms and provisions of the Compact, the licensee shall:
 - 1. Hold a license in the home state;
 - 2. Have no encumbrance on any state license;
 - 3. Be eligible for a compact privilege in any member state in accordance with Section 4.D., G., and H. of this Compact;
 - 4. Have not had any adverse action against any license or compact privilege within the previous two (2) years;
 - 5. Notify the commission that the licensee is seeking the compact privilege within a remote state or states;
 - 6. Pay any applicable fees, including any state fee, for the compact privilege;
 - 7. Meet any jurisprudence requirements established by the remote state or states in which the licensee is seeking a compact privilege; and
 - 8. Report to the commission adverse action taken by any nonmember state within thirty (30) days from the date the adverse action is taken.
- B. The compact privilege is valid until the expiration date of the home license. The licensee shall comply with the requirements of Section 4.A. of this Compact to maintain the compact privilege in the remote state.
- C. A licensee providing physical therapy in a remote state under the compact privilege shall function within the laws and regulations of the remote state.
- D. A licensee providing physical therapy in a remote state is subject to that state's regulatory authority. A remote state may, in accordance with due process and that state's laws, enforce any one (1) or combination of the following:
 - 1. Remove a licensee's compact privilege in the remote state for a specific period of time;
 - 2. Impose fines; and
 - 3. Take any other necessary actions to protect the health and safety of its citizens.

The licensee is not eligible for a compact privilege in any state until the specific time for removal has passed and all fines are paid.

- E. If a home state license is encumbered, the licensee shall lose the compact privilege in any remote state until the following occur:
 - 1. The home state license is no longer encumbered; and
 - 2. Two (2) years have elapsed from the date of the adverse action.
- F. Once an encumbered license in the home state is restored to good standing, the licensee shall meet the requirements of Section 4.A. of this Compact to obtain a compact privilege in any remote state.
- G. If a licensee's compact privilege in any remote state is removed, the individual shall lose the compact privilege in any remote state until the following occur:
 - 1. The specific period of time for which the compact privilege was removed has ended;
 - 2. All fines have been paid; and
 - 3. Two (2) years have elapsed from the date of the adverse action.
- H. Once the requirements of Section 4.G. of this Compact have been met, the license shall meet the requirements in Section 4.A. of this Compact to obtain a compact privilege in a remote state.

SECTION 5. ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES

A licensee who is active duty military or is the spouse of an individual who is active duty military may designate one (1) of the following as the home state:

- A. Home of record;
- B. Permanent Change of Station (PCS); or
- C. State of current residence if it is different than the PCS state or home of record.

SECTION 6. ADVERSE ACTIONS

- A. A home state shall have exclusive power to impose adverse action against a license issued by the home state.
- B. A home state may take adverse action based on the investigative information of a remote state, so long as the home state follows its own procedures for imposing adverse action.
- C. Nothing in this Compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action and that this participation shall remain nonpublic if required by the member state's laws. Member states shall require licensees who enter any alternative programs in lieu of discipline to agree not to practice in any other member state during the term of the alternative program without prior authorization from that other member state.
- D. Any member state may investigate actual or alleged violations of the statutes and rules authorizing the practice of physical therapy in any other member state in which a physical therapist or physical therapist assistant holds a license or compact privilege.
- E. A remote state may:
 - 1. Take adverse actions as set forth in Section 4.D. of this Compact against a licensee's compact privilege in the state;
 - 2. Issue subpoenas for the production of evidence and for hearings and investigations that require the attendance and testimony of witnesses. Subpoenas issued by a physical therapy licensing board in a party state for the production of evidence, the attendance and testimony of witnesses, or both from another party state shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued

in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the evidence, witnesses, or both are located; and

3. If otherwise permitted by state law, recover from the licensee the costs of investigations and disposition of cases resulting from any adverse action taken against that licensee.

F. Joint Investigations

1. In addition to the authority granted to a member state by its respective physical therapy practice act or other applicable state law, a member state may participate with other member states in joint investigations of licensees.
2. Member states shall share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the Compact.

SECTION 7. ESTABLISHMENT OF THE PHYSICAL THERAPY COMPACT COMMISSION

A. The Compact member states hereby create and establish a joint public agency known as the Physical Therapy Compact Commission:

1. The commission is an instrumentality of the Compact states.
2. Venue is proper and judicial proceedings by or against the commission shall be brought solely and exclusively in a court of competent jurisdiction where the principal office of the commission is located. The commission may waive venue and jurisdictional defenses to the extent it adopts or consents to participate in alternative dispute resolution proceedings.

Nothing in this Compact shall be construed to be a waiver of sovereign immunity.

B. Membership, Voting, and Meetings

1. Each member state shall have and be limited to one (1) delegate selected by that member state's licensing board.
2. The delegate shall be a current member of the licensing board, who is a physical therapist, physical therapist assistant, public member, or the board administrator.
3. Any delegate may be removed or suspended from office as provided by the law of the state from which the delegate is appointed.
4. The member state board shall fill any vacancy occurring in the commission.
5. Each delegate shall be entitled to one (1) vote with regard to the promulgation of rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the commission.
6. A delegate shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for delegates participation in meetings by telephone or other means of communication.

7. The commission shall meet at least once during each calendar year. Additional meetings shall be held as set forth in the bylaws.

C. The commission has the following powers and duties:

1. Establish the fiscal year of the commission;
2. Establish bylaws;
3. Maintain its financial records in accordance with the bylaws;
4. Meet and take any actions consistent with the provisions of this Compact and the bylaws;
5. Promulgate uniform rules to facilitate and coordinate implementation and administration of this Compact. The rules shall have the force of law and shall be binding in all member states;
6. Bring and prosecute legal proceedings or actions in the name of the commission, provided that the standing of any state physical therapy licensing board to sue or be sued under applicable law shall not be affected;
7. Purchase and maintain insurance and bonds;
8. Borrow, accept, or contract for services of personnel, including but not limited to employees of a member state;
9. Hire employees, elect or appoint officers, fix compensation, define duties, grant these individuals appropriate authority to carry out the purposes of the Compact, and establish the commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;
10. Accept, receive, utilize, and dispose of any appropriate donations and grants of money, equipment, supplies, materials, and services. At all times the commission shall avoid any appearance of impropriety, conflict of interest, or both;
11. Lease, purchase, accept appropriate gifts or donations of, or otherwise own, hold, improve, or use any real, personal, or mixed property. At all times the commission shall avoid any appearance of impropriety;
12. Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any real, personal, or mixed property;
13. Establish a budget and make expenditures;
14. Borrow money;
15. Appoint committees, including standing committees composed of members, state regulators, state legislators or their representatives, and any other interested persons as designated in this Compact and the bylaws;
16. Provide and receive information from, and cooperate with, law enforcement agencies;
17. Establish and elect an executive board; and
18. Perform any other necessary or appropriate functions to achieve the purposes of this Compact consistent with the state regulation of physical therapy licensure and practice.

D. The Executive Board

The executive board may act on behalf of the commission according to the terms of this Compact.

1. The executive board shall be composed of nine (9) members:

- a. Seven (7) voting members who are elected by the commission from the current membership of the commission;
 - b. One (1) ex officio, nonvoting member from the recognized national physical therapy professional association; and
 - c. One (1) ex officio, nonvoting member from the recognized membership organization of the physical therapy licensing boards.
2. The ex officio members shall be selected by their respective organizations.
 3. The commission may remove any member of the executive board as provided in bylaws.
 4. The executive board shall meet at least once annually.
 5. The executive board shall have the following duties and responsibilities:
 - a. Recommend to the entire commission changes to the rules or bylaws, changes to his Compact legislation, fees paid by Compact member states such as annual dues, and any commission Compact fee charged to licensees for the compact privilege;
 - b. Ensure Compact administration services are appropriately provided, contractual or otherwise;
 - c. Prepare and recommend the budget;
 - d. Maintain financial records on behalf of the commission;
 - e. Monitor Compact compliance of member states and provide compliance reports to the commission;
 - f. Establish additional committees as necessary; and
 - g. Other duties as provided in rules or bylaws.
- E. Meetings of the Commission
1. All meetings shall be open to the public, and public notice of meetings shall be given in the same manner as required under rulemaking provisions in Section 9 of this Compact.
 2. The commission, the executive board, or other committees of the commission may convene in a closed, nonpublic meeting if the commission, executive board, or other committees of the commission need to discuss:
 - a. Noncompliance of a member state with its obligations under the Compact;
 - b. The employment, compensation, discipline, or other matters, practices, or procedures related to specific employees or other matters related to the commission's internal personnel practices and procedures;
 - c. Current, threatened, or reasonably anticipated litigation;
 - d. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;
 - e. Accusing any person of a crime or formally censuring any person;
 - f. Disclosure of trade secrets or commercial or financial information that is privileged or confidential;
 - g. Disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;
 - h. Disclosure of investigative records compiled for law enforcement purposes;
 - i. Disclosure of information related to any investigative reports prepared by, on behalf of, or for use of the commission or another committee charged with responsibility of investigation or determination of compliance issues pursuant to the Compact; or
 - j. Matters specifically exempted from disclosure by federal or member state statute.
 3. If a meeting, or portion of a meeting, is closed pursuant to this provision, the commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision.
 4. The commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons for the actions, including a description of the views expressed. All documents considered in connection with an action shall be identified in these minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the commission or order of a court of competent jurisdiction.
- F. Financing of the Commission
1. The commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.
 2. The commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.
 3. The commission may levy on and collect an annual assessment from each member state or impose fees on other parties to cover the cost of the operations and activities of the commission and its staff, which shall be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the commission, which shall promulgate a rule that is binding upon all member states.
 4. The commission shall not incur obligations of any kind prior to securing the funds adequate to meet the obligations, nor shall the commission pledge the credit of any of the member states, except by and with the authority of the member state.
 5. The commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the commission shall be subject to the audit and accounting procedures established under its bylaws. All receipts and disbursements of funds handled by the commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the commission.
- G. Qualified Immunity, Defense, and Indemnification
1. The members, officers, executive director, employees, and representatives of the commission shall be immune from suit and liability, either personally or in their official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error, or omission that occurred, or that the

person

against whom the claim is made had a reasonable basis for believing occurred, within the scope of commission employment, duties, or responsibilities. Nothing in this paragraph shall be construed to protect any person from suit, liability, or both for any damage, loss, injury, or liability caused by the intentional, willful, or wanton misconduct of that person.

2. The commission shall defend any member, officer, executive director, employee, or representative of the commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities, if the actual or alleged act, error, or omission did not result from that person's intentional, willful, or wanton misconduct. Nothing in this paragraph shall be construed to prohibit that person from retaining his or her own counsel.
3. The commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of commission employment, duties, or responsibilities, or that the person had a reasonable basis for believing occurred within the scope of commission employment, duties, or responsibilities, if the actual or alleged act, error, or omission did not result from the intentional, willful, or wanton misconduct of that person.

SECTION 8. DATA SYSTEM

- A. The commission shall provide for the development, maintenance, and utilization of a coordinated database and reporting system containing licensure, adverse action, and investigative information on all licensed individuals in member states.
- B. Notwithstanding any other provision of state law to the contrary, a member state shall submit a uniform data set to the data system on all individuals to whom this Compact is applicable as required by the rules of the commission, including:
 1. Identifying information;
 2. Licensure data;
 3. Adverse actions against a license or compact privilege;
 4. Nonconfidential information related to alternative program participation;
 5. Any denial of application for licensure, and the reason or reasons for the denial; and
 6. Other information that may facilitate the administration of this Compact, as determined by the rules of the commission.
- C. Investigative information pertaining to a licensee in any member state shall only be available to other party states.
- D. The commission shall promptly notify all member states of any adverse action taken against a licensee or an individual applying for a license. Adverse action information pertaining to a licensee in any member state shall be available to any other member state.
- E. Member states contributing information to the data system may designate information that may not be shared with the public without the express permission of the contributing state.
- F. Any information submitted to the data system that is subsequently required to be expunged by the laws of the member state contributing the information shall be removed from the data system.

SECTION 9. RULEMAKING

- A. The commission shall exercise its rulemaking powers pursuant to the criteria set forth in this section and the rules adopted under this section. Rules and amendments shall become binding as of the date specified in each rule or amendment.
- B. If a majority of the legislatures of the member states reject a rule within four (4) years of the date of adoption of the rule, by enactment of a statute or resolution in the same manner used to adopt the Compact, then the rule shall have no further effect in any member state.
- C. Rules or amendments to the rules shall be adopted at a regular or special meeting of the commission.
- D. Prior to promulgation and adoption of a final rule or rules by the commission, and at least thirty (30) days in advance of the meeting at which the rule will be considered and voted upon, the commission shall file a Notice of Proposed Rulemaking:
 1. On the Web site of the commission or other publicly accessible platform; and
 2. On the Web site of each member state physical therapy licensing board or other publicly accessible platform or the publication in which each state would otherwise publish proposed rules.
- E. The Notice of Proposed Rulemaking shall include:
 1. The proposed time, date, and location of the meeting in which the rule will be considered and voted upon;
 2. The text of the proposed rule or amendment and the reason for the proposed rule;
 3. A request for comments on the proposed rule from any interested person; and
 4. How interested persons may submit notice to the commission of their intention to attend the public hearing and submit any written comments.
- F. Prior to adoption of a proposed rule, the commission shall allow persons to submit written data, facts, opinions, and arguments, which shall be made available to the public.
- G. The commission shall grant an opportunity for a public hearing before it adopts a rule or amendment if a hearing is requested by:
 1. At least twenty-five (25) persons;
 2. A state or federal governmental subdivision or agency; or
 3. An association having at least twenty-five (25) members.
- H. If a hearing is held on the proposed rule or amendment, the commission shall publish the place, time, and date of the scheduled public hearing. If the hearing is held via electronic means, the commission shall publish the mechanism for access

to the electronic hearing.

1. All persons wishing to be heard at the hearing shall notify the executive director of the commission or other designated member in writing of their desire to appear and testify at the hearing not less than five (5) business days before the scheduled date of the hearing.
 2. Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.
 3. All hearings shall be recorded. A copy of the recording shall be made available on request.
 4. Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the commission at hearings required by this section.
- I. Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the commission shall consider all written and oral comments received.
 - J. If not written notice of intent to attend the public hearing by interested parties is received, the commission may proceed with promulgation of the proposed rule without a public hearing.
 - K. The commission shall, by majority vote of all members, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.
 - L. Upon determination that an emergency exists, the commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in the Compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that requires immediate adoption in order to:
 1. Meet an imminent threat to public health, safety, or welfare;
 2. Prevent a loss of commission or member state funds;
 3. Meet a deadline for the promulgation of an administrative rule that is established by federal law or rule; or
 4. Protect public health and safety.
 - M. The commission or an authorized committee of the commission may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the Web site of the commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing, and delivered to the chair of the commission prior to the end of the notice period. If no challenge is made, the revision shall take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the commission.

SECTION 10. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

A. Oversight

1. The executive, legislative, and judicial branches of state government in each member state shall enforce this Compact and take all actions necessary and appropriate to effectuate the Compact's purposes and intent. The provisions of this Compact and the rules promulgated under this Compact shall have standing as statutory law.
2. All courts shall take judicial notice of the Compact and the rules in any judicial or administrative proceeding in a member state pertaining to the subject matter of this Compact that may affect the powers, responsibilities, or actions of the commission.
3. The commission shall be entitled to receive service of process in any judicial or administrative proceeding relating to this Compact, and shall have standing to intervene for all purposes in any judicial or administrative proceeding relating to this Compact. Failure to provide service of process to the commission shall render a judgment or order void as to the commission, this Compact, or promulgated rules.

B. Default, Technical Assistance, and Termination

1. If the commission determines that a member state has defaulted in the performance of its obligations or responsibilities under this Compact or the promulgated rules, the commission shall:
 - a. Provide written notice to the defaulting state and other member states regarding any one (1) or any combination of the following: the nature of the default, the proposed means of curing the default, and any other action to be taken by the commission; and
 - b. Provide remedial training and specific technical assistance regarding the default.
2. If a state in default fails to cure the default, the defaulting state may be terminated from the Compact upon an affirmative vote of a majority of the member states, and all rights, privileges, and benefits conferred by this Compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of default.
3. Termination of membership in the Compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the commission to the Governor, the majority and minority leaders of the defaulting state's legislature, and each of the member states.
4. A state that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.
5. The commission shall not bear any costs related to a state that is found to be in default or that has been terminated from the Compact, unless agreed upon in writing between the commission and the defaulting state.
6. The defaulting state may appeal the action of the commission by petitioning the United States District Court for the District

of Columbia or the federal district where the commission has its principal offices. The prevailing member shall be awarded all costs of this litigation, including reasonable attorney's fees.

C. Dispute Resolution

1. Upon request by a member state, the commission shall attempt to resolve disputes related to the Compact that arise among member states and between member and nonmember states.
2. The commission shall promulgate a rule providing for both mediation and binding dispute resolution for disputes as appropriate.

D. Enforcement

1. The commission, in the reasonable exercise of its discretion, shall enforce the provisions and rules of this Compact.
2. By majority vote, the commission may initiate legal action in the United States District Court for the District of Columbia or the federal district where the commission has its principal offices against a member state in default to enforce compliance with the provisions of the Compact and its promulgated rules and bylaws. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing member shall be awarded all costs of the litigation, including reasonable attorney's fees.
3. The remedies authorized under this section shall not be the exclusive remedies of the commission. The commission may pursue any other remedies available under federal or state law.

SECTION 11. DATE OF IMPLEMENTATION OF THE INTERSTATE COMMISSION FOR PHYSICAL THERAPY PRACTICE AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT

- A. The Compact shall come into effect on the date on which the Compact statute is enacted into law in the tenth member state. The provisions, which become effective at that time, shall be limited to the powers granted to the commission relating to assembly and the promulgation of rules. Thereafter, the commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact.
- B. Any state that joins the Compact subsequent to the commission's initial adoption of the rules shall be subject to the rules as they exist on the date on which the Compact becomes law in that state. Any rule that has been previously adopted by the commission shall have the full force of law on the day the Compact becomes law in that state.
- C. Any member state may withdraw from this Compact by enacting a statute repealing the Compact.
 1. A member state's withdrawal shall not take effect until six (6) months after enactment of the repealing statute.
 2. Withdrawal shall not affect the continuing requirement of the withdrawing state's physical therapy licensing board to comply with the investigative and adverse action reporting requirements of this Compact prior to the effective date of withdrawal.
- D. Nothing contained in this Compact shall be construed to invalidate or prevent any physical therapy licensure agreement or other cooperative arrangement between a member state and a nonmember state that does not conflict with the provisions of this Compact.
- E. This Compact may be amended by the member states. No amendment to this Compact shall become effective and binding upon any member state until it is enacted into the laws of all member states.

SECTION 12. APPLICABILITY TO KENTUCKY STATE GOVERNMENT

In order to clarify the effect of certain provisions of this Compact and to ensure that the rights and responsibilities of the various branches of government are maintained, the following shall be in effect in this state:

- A. By entering into this Compact, this state authorizes the licensing board as defined in Section 2.19. of this Compact and as created by KRS Chapter 327 to implement the provisions of this Compact.
- B. Notwithstanding any provision of this Compact to the contrary:
 1. When a rule is adopted pursuant to Section 9 of this Compact, the licensing board of this state as defined by Section 2.19. of this Compact shall have sixty (60) days to review the rule for the purpose of filing the rule as an emergency administrative regulation pursuant to KRS 13A.190 and for filing the rule as an accompanying ordinary administrative regulation, following the requirements of KRS Chapter 13A. Failure by the licensing board of this state as defined by Section 2.19. of this Compact to promulgate a rule adopted by the Physical Therapy Compact Commission as an administrative regulation pursuant to KRS Chapter 13A shall result in the initiation of the process for withdrawal as set forth in Section 11 of this Compact. Nothing in these provisions shall negate the applicability and effect of Section 9.K. of this Compact to this state.
 2. If the proposed administrative regulation is found deficient and the deficiency is not resolved pursuant to KRS 13A.330 or 13A.335, the provisions of Section 10 of this Compact shall apply. If the procedures under Section 10 of this Compact fail to resolve an issue, the provisions of Section 11 of this Compact shall apply.
 3. If the Physical Therapy Compact Commission created by Section 7 of this Compact exercises its rulemaking authority in a manner that is beyond the scope of the purposes of this Compact, or the powers granted under this Compact, then such an action by the commission shall be invalid and have no force or effect.
- C. Section 7.F. of this Compact pertaining to the financing of the commission shall not be interpreted to obligate the general fund of this state. Any funds used to finance this Compact shall be from money collected pursuant to KRS 327.080.
- D. This Compact shall apply only to those physical therapists or physical therapist assistants who practice or work under a compact privilege.

SECTION 13. CONSTRUCTION AND SEVERABILITY

The Compact shall be liberally construed so as to effectuate its purposes. The provisions of this Compact shall be severable, and if any phrase, clause, sentence, or provision of this Compact is declared to be contrary to the constitution of any party state or of the United States, or the Compact's applicability to any government, agency, person, or circumstance is held invalid, it shall not affect the validity of the remainder of this Compact and its applicability to any government, agency, person, or circumstance. If this Compact is held contrary to the constitution of any party state, the Compact shall remain in full effect as to the remaining party states, and shall remain in full effect in the affected party state as to all severable matters.

Effective: June 29, 2017

History: Created 2017 Ky. Acts ch. 93, sec. 1, effective June 29, 2017.

KRS 327.310 National and state criminal background investigation of all applicants for licensure, certification, or temporary permit.

The Board of Physical Therapy established in KRS 327.30 shall require a national and state criminal background investigation for every applicant seeking a license, certificate, or temporary permit issued by the board permitting the applicant to engage in a profession authorized by the board. The criminal background investigation shall be by means of a fingerprint check by the Department of Kentucky State Police and Federal Bureau of Investigation, pursuant to the following requirements:

- (1) The applicant shall provide his or her fingerprints to the Department of Kentucky State Police for submission to the Federal Bureau of Investigation after a state criminal background check is conducted;
- (2) The results of the national and state criminal background check shall be sent to the board for the screening of applicants;
- (3) The board shall be prohibited from releasing any criminal history record information to any private entity or other Licensing board, or authorizing receipt by such entity or board; and
- (4) Any fee charged by the Department of Kentucky State Police or the Federal Bureau of Investigation shall be an Amount no greater than the actual cost of processing the request and conducting the background check. The board may charge this fee to the applicant for licensure or certification.

Effective: April 2, 2018

History: Repealed and reenacted 2018 Ky. Acts ch. 97, sec.1, effective April 2, 2018.-Created 2017 Ky. Acts ch. 93, sec. 3, effective June 29, 2017.

KRS 327.990 – Penalties.

- (1) Each violation of KRS 327.020 shall constitute a misdemeanor and be punished by a fine of not less than fifty dollars (\$50) nor more than five hundred dollars (\$500) or by imprisonment for not less than ten (10) days nor more than thirty (30) days, or both, for the first offense. Each subsequent violation thereof shall be punished by a fine of not less than one hundred dollars (\$100) nor more than one thousand dollars (\$1,000) or by imprisonment for not less than thirty (30) days nor more than ninety (90) days or both.
- (2) Any person who shall knowingly make a false statement in his application for licensure under this chapter, or in response to any proper inquiry by the board, shall be guilty of a misdemeanor and fined not less than one hundred dollars (\$100) and not more than one thousand dollars (\$1,000) or imprisoned for not less than thirty (30) days nor more than six (6) months, or both.
- (3) The Attorney General, commonwealth attorney, county attorney or, upon majority vote of the board, any member thereof may apply for injunctive relief in any court of competent jurisdiction to enjoin any person or entity from committing an act in violation of this chapter. The injunction proceedings shall be in addition to, and not in lieu of, all penalties and other remedies in this chapter.

**ADMINISTRATIVE REGULATIONS
BOARD OF PHYSICAL THERAPY
201 KAR CHAPTER 22**

201 KAR 22:001. Definitions for 201 KAR Chapter 22.

RELATES TO: KRS 327.010, 327.050, 327.200

STATUTORY AUTHORITY: KRS 327.040(11)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the Kentucky Board of Physical Therapy to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327 pertaining to the practice and credentialing of physical therapists and physical therapist assistants. This administrative regulation requires the definitions for 201 KAR Chapter 22.

Section 1. Definitions.

- (1) "Board" is defined by KRS 327.010(3).
- (2) "CAPTE" means Commission on Accreditation in Physical Therapy Education.
- (3) "Credential" means the license or certificate issued by the board authorizing a person to practice physical therapy.
- (4) "Credential holder" means a licensed physical therapist or certified physical therapist assistant who has met all requirements for credentialing in 201 KAR 22:020 and has been credentialed by the board.
- (5) "Credentialing" means the process of licensing or certifying an applicant by the board.
- (6) "Direct supervision" means:
 - (a) The physical therapist or physical therapist assistant:
 1. Is immediately available to direct and supervise tasks that are related to direct patient care; and
 2. Provides line of sight direction and supervision the majority of the time per visit for each patient when these tasks are performed; and
 - (b) Supervision is not provided by electronic communication.
- (7) "Electronic communication" means:
 - (a) Any transfer of signs, signals, writing, images, sounds, data, information, or intelligence of any nature transmitted by computer or via the internet in whole or in part by a wire, radio, electromagnetic, photo-electronic, or photo-optical system; and
 - (b) The science and technology of the exchanging of information over any distance by electronic transmission of impulses including activities that involve using electronic communications to store, organize, send, retrieve, or convey information.
- (8) "Endorsement" means a method of application which is utilized by an applicant credentialed by another jurisdiction.
- (9) "Examination" means a board-approved examination that an applicant successfully passes as a requirement for credentialing.
- (10) "Full time" means employment for forty (40) hours a week.
- (11) "Inactive status" means a credential that is inactive and the credential holder is not engaged in the practice of physical therapy.
- (12) "Jurisdiction" means a licensing authority in a state or territory of the U.S.
- (13) "NPTE" means the National Physical Therapy Examination for physical therapists and physical therapist assistants.
- (14) "On-site supervision" means immediate physical accessibility within the same building.
- (15) "Patient" means any person for whom physical therapy is provided.
- (16) "Physical therapist" is defined by KRS 327.010(2).
- (17) "Physical therapist assistant" means a skilled health care worker certified by the board who performs physical therapy and related duties as assigned by the supervising physical therapist.
- (18) "Physical therapist student" or "physical therapist assistant student" means a person who meets the requirements of KRS 327.050(10)(a).
- (19) "Physical therapy" is defined by KRS 327.010(1).
- (20) "Physical therapy student services" means services provided by a physical therapist student or physical therapist assistant student, as part of the student's educational program, and are considered as provided by the supervising physical therapist or physical therapist assistant.
- (21) "Reinstatement of a credential" means a renewal of a license that has lapsed.
- (22) "Supervising physical therapist" means the physical therapist who is supervising the care of a patient who is being treated by a physical therapist assistant or supportive personnel.
- (23) "Supportive personnel" means a person assisting in the provision of direct physical therapy patient care who is not credentialed by the board and is not a physical therapist student or physical therapist assistant student.
- (24) "Telehealth" is defined by KRS 327.200(3).
- (25) "Telephysical therapy" means physical therapy between the credential holder and the patient who are not at the same physical location using interactive, secure, synchronous audio, and synchronous videoconferencing technology.
- (26) "Verification" means the process of verifying a lawful credential. (31 Ky.R. 889; Am. 1062; eff. 1-4-2005; 39 Ky.R. 826; eff. 12-11-2012; 40 Ky.R. 2197; 2420; eff. 6-6-2014.)

201 KAR 22:010. Objectives of physical therapy.

RELATES TO: KRS 327.010

STATUTORY AUTHORITY: KRS 327.040

NECESSITY, FUNCTION, AND CONFORMITY: The practice of physical therapy is rapidly evolving and changing in purpose and scope. The purpose of this administrative regulation is to define clearly the desired goals of physical therapy and the permissible means of achieving these goals. In this manner, standards of physical therapy practice are clearly established and may be used to evaluate particular treatments which have been used or which may later evolve.

Section 1. Goals of the patient-physical therapy unit include, but are not limited to, maintaining health, preserving functional capacity, and in the presence of impairment, developing or reestablishing function through carefully planned, and implemented programs. In order to reach these objectives, the physical therapist provides consultation, evaluates patients, identifies problems, plans programs, and provides direct treatment.

Section 2. Patient Management. Adequate, effective, and efficient patient care is the ultimate goal of physical therapy. The physical therapist evaluates each patient, and determines those ways in which he can contribute to total health management. He then plans and implements a treatment program, reevaluating and making modifications as necessary. A physical therapist shall refer to a licensed physician or dentist any patient whose medical condition should, at the time of evaluation or treatment, be determined to be beyond the scope of practice of the physical therapist. When basis for treatment is referral, the physical therapist may confer with the referring physician, podiatrist, dentist, or chiropractor. (eff. 12-2-86.)

201 KAR 22:020. Eligibility and credentialing procedure.

RELATES TO: KRS 164.772, 327.010, 327.050, 327.060, 327.075, 327.080, 327.310

STATUTORY AUTHORITY: KRS 327.040(1), (11), (13)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the Board of Physical Therapy to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.040(1) requires the board to determine if physical therapist applicants meet the qualifications and standards required by KRS Chapter 327. KRS 327.040(13) authorizes the board to promulgate administrative regulations regarding the qualifications for physical therapist assistants. This administrative regulation establishes the criteria for eligibility, methods, and procedures of qualifying for a credential to practice physical therapy in Kentucky.

Section 1. An application shall be accepted for credentialing as a physical therapist or physical therapist assistant based on successful completion by the applicant of one (1) of the following processes:

- (1) Examination;
- (2) Endorsement; or
- (3) Reinstatement.

Section 2. Examination Candidate.

(1) To be eligible for the examination, the applicant for licensure as a physical therapist shall:

(a) Have successfully completed the academic and clinical requirements of a physical therapy program accredited by

CAPTE;

- (b) Submit certification of completion by the educational administrator of that program;
- (c) Have successfully completed the Jurisprudence Exam;
- (d) Submit a complete Application for credentialing that includes a photo taken within one (1) year;
- (e) Submit the correct, nonrefundable fee as required in 201 KAR 22:135;
- (f) Effective six (6) months after the board receives an Originating Agency Number from the Federal Bureau of Investigation, submit to the board a completed nationwide criminal background check as required by KRS 327.310 with the background investigation completed no later than six (6) months prior to the date of the filling of the application.
- (g) If applicable, submit on an Applicant Special Accommodations Request Form a request for a reasonable accommodation in testing due to a documented disability; and
- (h) Register for the NPTE examination.

(2) To be eligible for the examination, the applicant for certification as a physical therapist assistant shall:

(a) Have successfully completed the academic and clinical requirements of a physical therapy or physical therapist assistant program accredited by CAPTE; and

(b) Complete the requirements of subsection (1)(b) through (h) of this section.

(3) Effective July 1, 2012, after six (6) failed attempts at either the physical therapist or physical therapist assistant examination, or combination thereof, in any jurisdiction, an applicant for licensure or certification shall not be eligible to register for any additional examinations.

Section 3. An applicant for credentialing who is registered for the examination in another jurisdiction shall:

- (1) Meet the eligibility requirements of Section 2 of this administrative regulation; and
- (2) Register with the FSBPT Score Transfer Service to have results submitted to Kentucky.

Section 4. To be eligible for a temporary permit, the candidate shall:

(1) Meet the qualifications of Section 2 or 3 of this administrative regulation, except for the retake provisions in Section 2(3) of this administrative regulation;

(2) Complete a Supervisory Agreement for Applicant with Temporary Permit with one (1) or more physical therapists; and

(3) Have not failed either the physical therapist or physical therapist assistant examination in any jurisdiction.

Section 5.

(1) Upon issuance of a temporary permit, the physical therapist or physical therapist assistant applicant shall practice only under the supervision of a physical therapist currently engaged in the practice of physical therapy in Kentucky who:

- (a) Has practiced in Kentucky for more than one (1) year; and
- (b) Has an unrestricted license.

(2) A supervising physical therapist:

- (a) Shall be on-site at all times during the practice of the applicant with a temporary permit;
- (b) Shall be responsible for the practice of physical therapy by the applicant with a temporary permit;
- (c) Shall review, approve, date, and co-sign all physical therapy documentation by the applicant with a temporary permit;

(d) May designate an alternate supervising physical therapist who meets the qualifications of subsection (1)(a) and (b) of this section. The alternate supervising physical therapist shall sign and date written documentation of the acceptance of the responsibility as identified in paragraph (a) through (c) of this subsection; and

- (e) Shall notify the board immediately if the supervisory relationship is terminated.

(3) The applicant with a temporary permit shall:

- (a) Disclose the applicant's temporary credential status to all patients prior to initiating treatment;
- (b) Sign documentation with temporary permit number and designation as required in 201 KAR 22:053, Section 5(5)(a) or (b);

and

- (c) Notify the board immediately if the supervisory relationship is terminated.

(4) The temporary permit shall expire the earlier of:

- (a) Six (6) months from the date of issuance; or

(b) Notice of exam results by the board. A temporary permit holder who is registered for the examination in another jurisdiction shall register with the FSBPT Score Transfer Service to have results submitted to Kentucky within forty-eight (48) hours of the release of the exam results.

Section 6. A physical therapist applicant who meets the qualifications for physical therapy licensure by examination may become a special candidate for physical therapist assistant certification by examination.

Section 7. To be eligible for credentialing by endorsement, the applicant shall:

(1) Have successfully completed the academic and clinical requirements of a physical therapy or physical therapist assistant program accredited by CAPTE;

(2) Meet the requirements established in Section 2(1)(b) through (f) of this administrative regulation;

(3) Have successfully completed the NPTE or its equivalent, predecessor examination and register with the FSBPT Score Transfer Service to have results submitted to Kentucky:

(a) A passing score in Kentucky for the person who took the NPTE prior to July 1, 1993, shall be at least equal to the national average raw score minus one and five-tenths (1.5) standard deviation set equal to a converted score of seventy-five (75); or

(b) After July 1, 1993, a passing score shall be the criterion referenced passing point recommended by the FSBPT set equal to a scaled score of 600;

(4) Have an active credential in this profession in another jurisdiction; and

(5) Have verification of credentials showing the credential has never been revoked, suspended, placed on probation, or is not under disciplinary review in another jurisdiction upon application.

Section 8. To be eligible for reinstatement, the applicant shall meet the requirements in 201 KAR 22:040.

Section 9. A credential issued by the board shall be in effect until March 31 of the next odd-numbered year.

Section 10. A foreign-educated physical therapist shall comply with the provisions of 201 KAR 22:070.

Section 11. Incorporation by Reference.

(1) The following material is incorporated by reference:

- (a) "Application for Credentialing", December 2011;
- (b) "Supervisory Agreement for Applicant with Temporary Permit", January 2017; and
- (c) "Applicant Special Accommodations Request Form", December 2012.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Board of Physical Therapy, 312 Whittington Parkway Suite 102, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. (PTB-Rg-1-1; 2 Ky.R. 77; eff. 9-10-1975; Am. 5 Ky.R. 809; eff. 6-6-79; 7 Ky.R. 310; 442; eff. 11-6-1980; 825; eff. 6-3-1981; 11 Ky.R. 735; eff. 12-11-1984; 18 Ky.R. 334; eff. 9-24-1991; 27 Ky.R. 2224; 2726; eff. 4-9-2001; 28 Ky.R. 1448; 1795; eff. 2-7-2002; 31 Ky.R. 995; 1236; eff. 1-19-2005; 33 Ky.R. 3436; eff. 8-16-2007; 34 Ky.R. 1795; eff. 3-19-2008; TAm eff. 3-19-2008; 35 Ky.R. 1856; 2213; eff. 5-1-2009; 37 Ky.R. 775; eff. 11-17-2010; 38 Ky.R. 657; 896; eff. 11-16-2011; 38 Ky.R. 1363; 1550; eff. 3-21-2012; 39 Ky.R. 1930; 2161; eff. 5-31-2013; 40 Ky.R. 2199; 2421; eff. 6-6-2014; 42 Ky.R. 1283; 1710; eff. 12-16-2015; 43 Ky.R. 1237, 1528; eff. 3-31-2017; 44 Ky.R. 556, 919; eff. 11-15-2017; 44 Ky.R. 2257, 2487; eff. 6-20-2018; 45 Ky.R. 418; eff. 11-2-2018; 45 Ky.R. 2755, 3057; eff.05-31-2019.)

201 KAR 22:035. Change of name and contact information.

RELATES TO: KRS 327.040

STATUTORY AUTHORITY: KRS 327.040(11)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the Board of Physical Therapy to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. This administrative regulation provides the mechanism for a credential holder to change the name under which originally credentialed and to keep the board apprised of the credential holder's contact information.

Section 1. If a physical therapist or a physical therapist assistant wishes to be credentialed in a name different from that in which the credential holder is originally or currently credentialed, the credential holder shall submit to the board a legal document that authorizes the change.

Section 2. A credential holder who changes employment, home address, email address, or telephone shall notify the board office in writing within thirty (30) days of change. (7 Ky.R. 360; eff. 11-6-80; Am. 31 Ky.R. 808; 1063; eff. 1-4-2005; 39 Ky.R. 1932; 2163; eff. 5-31-2013.)

201 KAR 22:040. Procedure for renewal or reinstatement of a credential for a physical therapist or physical therapist assistant.

RELATES TO: KRS 164.772, 327.050(8), (9), 327.070, 327.070

STATUTORY AUTHORITY: KRS 327.040(10), (11) 327.310

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the Board of Physical Therapy to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.040(10) authorizes the board to promulgate administrative regulations establishing a measure of continued competency as a condition of license renewal. This administrative regulation establishes the requirements and procedures for the renewal and reinstatement of credentials.

Section 1. A credential shall be renewed upon:

- (1) Payment of the renewal fee established in 201 KAR 22:135 on or before March 31st of each odd numbered year. The fee shall be waived for renewal of license or certificate held by an active duty member of Armed Forces as established in KRS 12.355;
- (2) Submission of the completed Renewal Application or Reinstatement Application; and
- (3) Verification of continued competence as established in 201 KAR 22:045.

Section 2. Credentials not renewed by the board by March 31 of each odd numbered year shall lapse.

Section 3.

(1) A credential holder who has a credential that has lapsed may, within three (3) years of the lapsed date, reinstate upon:

- (a) Meeting the requirements of Section 1(2) of this administrative regulation for the current renewal period;
- (b) Verification of having obtained within two (2) years prior to the date of submission of the completed Renewal Application or Reinstatement Application:
 1. Thirty (30) hours of continued competency as established in 201 KAR 22:045, Section 2(1)(a)1, 2, and 3 and (c) for a physical therapist; or
 2. Twenty (20) hours of continued competency as established in 201 KAR 22:045, Section 2(1)(b)1, 2, and 3 and (c) for a physical therapist assistant;
- (c) Submission of payment of the reinstatement fee established in 201 KAR 22:135; and
- (d) Effective six (6) months after the board receives an Originating Agency Identification Number from the Federal Bureau of Investigation, submitting to the board a completed nationwide criminal background check as required by KRS 327.310 with the background check completed no later than six (6) months prior to the date of the filing of the Reinstatement Application. A criminal background check is not required if the Reinstatement Application is filed on or before May 15 of the same odd numbered year the applicant's credential lapsed.

(2) Continued competency hours submitted under subsection (1)(b) of this section for reinstatement shall satisfy the continued competency hours for the next renewal period as established in 201 KAR 22:045, Section 2(2) and (3).

Section 4. A credential holder who has a credential that has lapsed may, more than three (3) years of the lapsed date, reinstate upon:

- (1) Meeting the requirements of Section 3 of this administrative regulation;
- (2) Submission of all credentials from other jurisdictions since last renewal; and
- (3) Completing the following requirements of the board if not holding a current credential from any other jurisdiction since last renewal:
 - (a) Submission of evidence of professional competency;
 - (b) An agreement to practice physical therapy under direct supervision not to exceed six (6) months;
 - (c) Successful completion of the board-approved examination; or
 - (d) Any combination of paragraphs (a) through (c) of this subsection.

Section 5. Incorporation by Reference. (1) The following material is incorporated by reference:

- (a) "Renewal Application", July 2015; and
- (b) "Reinstatement Application", July 2015.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Board of Physical Therapy, 312 Whittington Parkway, Suite 102, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. (39 Ky.R. 77; eff. 9-19-2012; 40 Ky.R. 2612; 41 Ky.R. 31; eff. 8-1-2014; 42 Ky.R. 1285; 1712; eff. 12-16-2015; 44 Ky.R. 248, 920; eff. 11-15-2017; 44 Ky.R. 2257, 2487; eff. 6-20-2018; 45 Ky.R. 420; eff. 11-2-2018.)

201 KAR 22:045. Continued competency requirements and procedures.

RELATES TO: KRS 12.355, 327.010(1), (2), 327.070

STATUTORY AUTHORITY: KRS 327.040(10)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(10) authorizes the board to promulgate administrative regulations establishing a measure of continued competency as a condition of license renewal. This administrative regulation establishes continued competency requirements and procedures.

Section 1. Definitions.

(1) "Contact hour" means a credit earned based on sixty (60) minutes of participation in a physical therapy-related activity.

(2) "Continued competency" means a planned learning experience relating to the scope of "physical therapy" practice as defined by KRS 327.010(1) if the subject is intervention, examination, research, documentation, education, or management of a health care delivery system.

(3) "Jurisprudence Examination" means an open book tutorial provided by the board on KRS Chapter 327 and 201 KAR Chapter 22.

Section 2.

(1) A credential holder applying for renewal shall have completed the continued competency requirements established in subsections (2) and (3) of this section during the preceding renewal period. Continued competency shall be based on contact hours awarded.

(a) For a physical therapist, the board shall require thirty (30) contact hours as a condition of licensure renewal. These hours shall be obtained as established in subparagraphs 1. through 3. of this paragraph.

1. Two (2) hours shall be awarded for the successful completion of the Jurisprudence Examination per biennium.

2. At least eighteen (18) hours shall be earned from Category 1 as established in subsection (2) of this section.

3. Hours may be earned from Category 2. If hours are earned from Category 2, hours shall be as established in subsection (3) of this section. Hours earned from Category 2 over ten (10) hours shall not be awarded.

(b) For a physical therapist assistant, the board shall require twenty (20) contact hours as a condition of renewal. These hours shall be obtained as established in subparagraphs 1. through 3. of this paragraph.

1. Two (2) hours shall be awarded for the successful completion of the Jurisprudence Examination per biennium.

2. At least ten (10) hours shall be earned from Category 1 as established in subsection (2) of this section.

3. Hours may be earned from Category 2. If hours are earned from Category 2, hours shall be as established in subsection (3) of this section. Hours earned from Category 2 over eight (8) hours shall not be awarded.

(c) A participant shall not be awarded contact hours for a course that is repeated more than once in the same biennium.

(2) Category 1 continued competency shall be:

(a) Completion of courses, seminars, workshops, symposia, or home study courses consisting of at least three (3) contact hours that have been approved by the board, the board's designee, Federation of State Boards of Physical Therapy (FSBPT), the American Physical Therapy Association (APTA) or its components, or another physical therapy licensing agency;

(b) Completion of courses, seminars, workshops, symposia, or home study courses consisting of less than three (3) contact hours that have been produced and developed by the American Physical Therapy Association (APTA) or its state chapters and sections;

(c) Completion or auditing of an accredited postsecondary educational institution credit course meeting continued competency as defined by Section 1(2) of this administrative regulation.

1. Twelve (12) contact hours shall be awarded for each semester credit hour completed; and

2. Eight (8) contact hours shall be awarded for each quarter credit hour completed;

(d) Presentation of a continued competency course, workshop, seminar, or symposium that has been approved by the board or its designee. Contact hours shall be awarded equal to contact hours awarded to a participant with a maximum of two (2) events of the same course per biennium;

(e) Authorship of a research article, manuscript, or scientific paper, published in the biennium and related to physical therapy. Fifteen (15) contact hours shall be awarded per event with a maximum of two (2) events per biennium;

(f) A presented scientific poster or scientific platform presentation related to physical therapy. Ten (10) contact hours shall be awarded per event with a maximum of two (2) events per biennium;

(g) Teaching part of a physical therapy or physical therapist assistant credit course if that teaching is not the primary employment of the credential holder. A maximum of twenty (20) contact hours per biennium shall be awarded;

(h) American Board of Physical Therapy Specialties (ABPTS) certification. Twenty-eight (28) contact hours shall be awarded per biennium;

(i) ABPTS recertification or other certifications and recertifications within the scope of physical therapy practice. A

maximum of twenty-eight (28) contact hours per biennium shall be awarded;

(j) Completion of a clinical residency program or clinical fellowship program. Not more than five (5) contact hours shall be awarded for each week of residency with a maximum of twenty-eight (28) contact hours per program per biennium;

(k) Engaging in the practice of "physical therapy" as defined by KRS 327.010(1) at least 1,000 hours per biennium. Five (5) contact hours shall be awarded per biennium;

(l) Engaging in the instruction in a CAPTE-accredited physical therapy or physical therapist assistant program at least 1,000 hours per biennium. Five (5) contact hours shall be awarded per biennium;

(m) Appointment to the Kentucky Board of Physical Therapy. Four (4) contact hours shall be awarded per biennium;

(n) Election or appointment to a position of the Kentucky Physical Therapy Association, APTA, or FSBPT as an officer or committee chair. Four (4) contact hours shall be awarded per biennium; or

(o) Member of a committee or task force for one (1) of the organizations in paragraph (m) or (n) of this subsection. One (1) contact hour shall be awarded per biennium.

(3) Category 2 continued competency shall be:

(a) Self-instruction from reading professional literature. One (1) contact hour shall be awarded per biennium;

(b) Attendance at a scientific poster session, lecture, panel, or symposium. One (1) contact hour shall be awarded for each hour of activity. A maximum of two (2) contact hours shall be awarded per biennium;

(c) Clinical instructor for a CAPTE-approved educational program or an APTA credentialed residency or fellowship program. Continued competency shall be one (1) contact hour per sixteen (16) hours of student supervision;

(d) Participation in a physical therapy in-service or study group consisting of two (2) or more physical therapists or physical therapist assistants. A maximum of two (2) contact hours shall be awarded per biennium;

(e) Completion of other unapproved applicable courses. One (1) contact hour for each hour of credit shall be awarded up to a maximum of three (3) hours per course;

(f) Participation in community service related to health care. One (1) contact hour for each hour of participation shall be awarded up to a maximum of two (2) hours per biennium;

(g) Member of the APTA. One (1) contact hour shall be awarded per year and a maximum of two (2) contact hours per biennium;

(h) Completion of cardiopulmonary resuscitation initial certification or re-certification. A maximum of two (2) contact hours shall be awarded per biennium; or

(i) Completion of a HIV/AIDS course. A maximum of two (2) contact hours shall be awarded per biennium.

(4) Documentation of compliance.

(a) Each licensee shall retain independently verifiable documentation of completion of all continued competency requirements of this administrative regulation for a period of at least three (3) years from the end of the biennium.

(b) The licensee shall, within thirty (30) days of a written request from the board, provide evidence of continued competency activities to the board.

(c) A licensee who fails to provide evidence of the continued competency activities or who falsely certifies completion of continued competency activities shall be subject to disciplinary action pursuant to KRS 327.070.

(5) Exemption and extension.

(a) A licensee shall be granted a temporary hardship extension for an extension of time, not to exceed one (1) renewal cycle, if the licensee:

1. Files a completed Exemption or Extension for Completion of Continued Competency Form, including a plan describing how the required credits will be met, by April 30 of the odd-numbered year in the renewal cycle for which the extension is sought; and

2. Submits documentation showing evidence of undue hardship by reason of the licensee's:

- a. Age;
- b. Disability;
- c. Medical condition;
- d. Financial condition; or
- e. Other clearly mitigating circumstance.

(b) A licensee shall be granted a temporary nonhardship extension of time if the licensee cannot show undue hardship and if the licensee:

1. Files a completed Exemption or Extension for Completion of Continued Competency Form, including a plan describing how the required credits will be met, by March 31 of the odd-numbered year in the renewal cycle for which the extension is sought;

2. Pays a fee of \$250;

3. Has not received a temporary nonhardship extension of time in the prior renewal cycle; and

4. Files proof of compliance with the continued competency requirements by the following July 1.

(c) A licensee on active military duty shall be granted an exemption from continued competency requirements as established in KRS 12.355.

Section 3. Incorporation by Reference.

(1) "Exemption or Extension for Completion of Continued Competency Form", June 2012, is incorporated by reference.

(2) This material may be inspected, copied, or obtained, subject to applicable law, at the Kentucky Board of Physical Therapy, 312 Whittington Parkway, Suite 102, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. (31 Ky.R. 890; Am. 1064; eff. 1-4-2005; 1437; eff. 4-22-2005; 32 Ky.R. 2069; 33 Ky.R. 384; eff. 9-1-2006; 34 Ky.R. 1105; 1710; eff. 2-1-2008; 35 Ky.R. 2485; 36 Ky.R. 29; eff. 7-31-2009; 2209; 37 Ky.R. 34; eff. 7-21-2010; 38 Ky.R. 89; 10-19-2011; 38 Ky.R.

201 KAR 22:052. Complaint procedure and disciplinary action of a credential holder or applicant.

RELATES TO: KRS 327.020, 327.040, 327.070

STATUTORY AUTHORITY: KRS 327.040(2), (11), (14)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the board to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.040(14) authorizes promulgation of administrative regulations governing the physical and mental examination of credential holders or applicants who may be impaired by reason of a mental, physical, or other condition that impedes his or her ability to practice competently. KRS 327.040(2) authorizes the board to investigate every alleged violation and take action, as appropriate. This administrative regulation is necessary to establish the procedure for filing a complaint and the action to be taken by the board on a complaint and disciplinary action against a credential holder or applicant in violation of KRS 327.020.

Section 1. Definitions.

- (1) "Complaint Committee" means a committee of the board that:
 - (a) Reviews an initiating complaint;
 - (b) Determines whether an investigation should be conducted; and
 - (c) Directs and reviews an investigation of the respondent.
- (2) "Formal complaint" means a formal administrative pleading authorized by the board that sets forth a charge against a credential holder or applicant and commences a formal disciplinary proceeding under KRS Chapter 13B.
- (3) "Initiating complaint" means any complaint that a person has allegedly violated the requirements of KRS Chapter 327 or the administrative regulations of the board.
- (4) "Respondent" means the person against whom an initiating complaint or formal complaint has been made.

Section 2. Initiating Complaint.

- (1) A complaint may be initiated by:
 - (a) A member of the public;
 - (b) or government agency; or
 - (c) The board.
- (2) An initiating complaint shall:
 - (a) Be made in writing to the board and signed by the complainant unless the nature of the initiating complaint alleges an immediate danger to the health, safety and welfare of the public; and
 - (b) Bear the date of the complaint.
- (3) The board may, at any time, conduct an investigation on its own initiative without receipt of a written complaint if the board has reason to believe that there may be a violation of KRS Chapter 327 or the administrative regulations of the board.
- (4) A certified copy of a court record for conviction of a misdemeanor or felony shall be considered a valid initiating complaint.
- (5) An initiating complaint may be received by:
 - (a) A board member;
 - (b) The Office of the Attorney General; or
 - (c) A staff member.

Section 3. Consideration of Initiating Complaint.

- (1) Review of an initiating complaint shall take place:
 - (a) At the next regularly-scheduled meeting of the complaint committee; or
 - (b) As soon as practicable.
- (2) The Complaint Committee:
 - (a) Shall:
 1. Review the initiating complaint;
 2. Determine if an investigation is warranted; and
 3. If investigation is warranted, appoint one (1) of its members or an agent or representative of the board to conduct an investigation of the respondent.
 - (b) May be assisted by:
 1. Board staff;
 2. A board agent; or
 3. The Office of the Attorney General.
- (3) If there is reasonable cause to believe that a credential holder or applicant may be physically or mentally incapable of practicing physical therapy with reasonable skill and safety to clients:
 - (a) The board may order the credential holder or applicant to submit to an examination by a psychologist, physician, or certified alcohol and drug counselor designated by the board to determine the credential holder's or applicant's psychological or physical status to practice physical therapy.
 - (b) The expense of this examination may be incurred by the board.
 - (c) The board shall then consider the findings and conclusion of the examination and the final investigative report at its next regularly-scheduled meeting or soon thereafter.
- (4) Notice to respondent.

- (a) The board shall notify the respondent of the receipt of the initiating complaint and the essential contents of the initiating complaint. The board may keep the complainant's name confidential until completion of any board investigation.
- (b) Respondent shall file a reply to the initiating complaint with the board within twenty (20) days after receipt of notice of the initiating complaint.
- (c) Failure of the respondent to file a timely reply to the initiating complaint shall constitute a violation of a board order or administrative regulation and shall be grounds for disciplinary action under KRS 327.070(2)(k).
- (5) Based on consideration of the initiating complaint and the investigative report, the board shall determine if there has been a prima facie violation upon summary and recommendation by the complaint committee. The members of the complaint committee shall not vote on this determination.
- (6) If it is determined that the facts alleged constitute a prima facie violation, the board:
 - (a)
 - 1. Shall issue a formal complaint, in accordance with KRS Chapter 13B, against the credential holder or applicant; and
 - 2. May order that a written response be filed with the board; or
 - (b) If it is determined that there is a prima facie violation of KRS 327.020, shall proceed under KRS 327.040(2).

Section 4. Procedures for Disciplinary Hearings.

- (1) All procedures for disciplinary hearings shall conform to KRS Chapter 13B.
- (2) Testimony to be considered by the board, hearing panel, or hearing officer, if any, may be taken by deposition. A party or witness may be allowed to testify by deposition, rather than attend the hearing, upon a showing of inability to attend and a showing that other parties shall have an opportunity to cross-examine at said deposition. The presiding officer or hearing officer, if any, shall rule upon motions to allow testimony to be considered by deposition. Other depositions shall not be allowed.
- (3) The presiding officer or hearing officer, if any, may order that at least five (5) days prior to the hearing, each party shall file a summary of each witness' expected testimony.

Section 5. Final Disposition.

- (1) Upon reaching a decision, the board shall notify, in writing by certified mail, the complainant and respondent of its final disposition of the matter.
- (2) The board shall make public:
 - (a) Its final order in a disciplinary action under KRS 327.070(1)(a)-(e) and (g).
 - (b) An action to restrain or enjoin the non-credentialed practice of physical therapy.

Section 6. Settlement by Informal Proceedings.

- (1) The board through counsel and the complaint committee may, at any time during this process, enter into informal proceedings with the individual who is the subject of the complaint for the purpose of appropriately dispensing with the matter.
- (2) An agreed order or settlement reached through this process shall be approved by the board and signed by the individual who is the subject of the complaint and the chairman.
- (3) The board may employ mediation as a method of resolving the matter informally. (eff. 1-5-05.)

201 KAR 22:053. Code of ethical standards and standards of practice for physical therapists and physical therapist assistants.

RELATES TO: KRS 327.040, 327.070

STATUTORY AUTHORITY: KRS 327.040(11), (12), (13), 367.4082

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040 (12) requires the Board of Physical Therapy to establish by administrative regulation a code of ethical standards and standards of practice for physical therapists and physical therapist assistants. This administrative regulation establishes those standards which, if violated, are a basis for disciplinary action under KRS 327.070.

Section 1. Code of Ethical Standards.

- (1) A physical therapist and a physical therapist assistant shall:
 - (a) Respect the rights and dignity of all patients;
 - (b) Practice within the scope of the credential holder's training, expertise and experience;
 - (c) Ensure that all personnel involved in the delivery of physical therapy services are identified to the patient by name and title;
 - (d) Report to the board any reasonably suspected violation of KRS Chapter 327, KRS 367.4082, or 201 KAR Chapter 22 by a credential holder or applicant within thirty (30) days;
 - (e) Report to the board any civil judgment, settlement, or civil claim involving the credential holder's practice of physical therapy made against the credential holder relating to the credential holder's own physical therapy practice within thirty (30) days; and
 - (f) Comply with the provisions of KRS 367.4082.
- (2) Physical therapist and physical therapist assistant shall not:
 - (a) Verbally or physically abuse a client; or
 - (b) Continue physical therapy services beyond the point of reasonable benefit to the patient, unless the patient consents in writing.

Section 2. Standards of Practice for the Physical Therapist. While engaged in the practice of physical therapy, a physical therapist shall:

- (1) Perform screenings in order to:
 - (a) Provide information on a person's health status relating to physical therapy;
 - (b) Determine the need for physical therapy evaluation and treatment;
 - (c) Make a recommendation regarding a person's ability to return to work or physical activity; and
 - (d) Provide physical therapy services;
- (2) Evaluate each patient prior to initiation of treatment;
- (3) Upon receipt of a patient under an active plan of care from another physical therapist:
 - (a) Complete an evaluation in compliance with subsection (2) of this section and 5(2)(a)-(d) of this administrative regulation;
 - (b) Ensure the evaluation and plan of care from the other physical therapist is current and appropriate;
 - (c) Retain the evaluation and plan of care from the other physical therapist in the medical record; and
 - (d) Comply with reassessment requirements based on the date of the most recent evaluation.
- (4) Reassess each patient in accordance with the following:
 - (a) Reassessing inpatients in either a hospital or comprehensive rehabilitation facility every fourteen (14) days;
 - (b) Reassessing every ninety (90) days, with the physical therapist assistant present, patients in:
 1. A facility defined in 902 KAR 20:086 as an intermediate care facility (ICF) for the mentally retarded (MR) and developmentally disabled (DD); or
 2. A school system.
 - a. A forty-five (45) day grace period shall be allowed upon transfer from another school district or from the start of the school year;
 - b. During this grace period treatment may continue based upon the previous reassessment or evaluation;
 - (c) Reassessing each patient not otherwise noted every thirty (30) days following the last evaluation or subsequent reassessment;
 - (d) Reassessing a patient whose medical condition has changed;
- (5) Refer the patient to other professionals or services if the treatment or service is beyond the physical therapist's scope of practice;
- (6) Be responsible for the physical therapy record of each patient;
- (7) Be responsible for the plan of care until the patient is received by another physical therapist pursuant to subsection (3) of this section;
- (8) Provide services that meet or exceed the generally accepted practice of the profession;
- (9) Explain the plan of care to the patient and to others designated by the patient;
- (10) Make it clear to the patient that the patient has the right to choose any qualified professional or equipment supplier if the physical therapist makes recommendations for those; and
- (11) Disclose in writing to each patient any financial interest, compensation, or other value to be received by the referral source:
 - (a) For services provided by the physical therapist;
 - (b) For equipment rental or purchase; or
 - (c) For other services the physical therapist may recommend for the patient.

Section 3. Standards of Practice for the Physical Therapist Assistant. While engaged in the practice of physical therapy, the physical therapist assistant shall:

- (1) Provide services only under the supervision and direction of a physical therapist;
- (2) Refuse to carry out procedures that the assistant believes are not in the best interest of the patient or that the assistant is not competent to provide by training or skill level;
- (3) Initiate treatment only after evaluation by the physical therapist;
- (4) Upon direction from the physical therapist, gather data relating to the patient's disability, but not determine the significance of the data as it pertains to the development of the plan of care;
- (5) Refer to the physical therapist inquiries that require an interpretation of patient information related to rehabilitation potential;
- (6) Comply with the plan of care established by the physical therapist;
- (7) Communicate with the physical therapist any change or lack of change that occurs in the patient's condition that may indicate the need for reassessment; and
- (8) Discontinue physical therapy services if reassessments are not done in compliance with Section 2(4) of this administrative regulation, and inform the supervising physical therapist.

Section 4. Standards for Supervision. While supervising the physical therapist assistant and supportive personnel, the physical therapist shall:

- (1)(a) At all times, including all work locations in all jurisdictions, be limited to supervising not more than four (4) physical therapist assistants or supportive personnel; and
- (b) Abide by the maximum staffing ratio of physical therapists to physical therapist assistants or supportive personnel required in this section except that a maximum of seven (7) work days in a sixty (60) consecutive day period shall not constitute a violation of this standard;
- (2) Provide direct supervision when supervising supportive personnel as defined by 201 KAR 22:001, Section 1(23), effective September 1, 2013;
- (3) Not delegate procedures or techniques to the physical therapist assistant that are outside his or her scope of training, education or expertise;

(4) Not delegate procedures or techniques to supportive personnel that are outside his or her scope of training, education or expertise.

(a) Scope of training and competency for supportive personnel shall be documented and verified at least annually.

(b) Documentation of training and competency shall be immediately available for review; and

(5) Be responsible for:

(a) Interpreting any referral;

(b) Conducting the physical therapy evaluation;

(c) Establishing reporting procedures to be followed by the physical therapist assistant and supportive personnel;

(d) Evaluating the competency of the physical therapist assistant and supportive personnel;

(e) Supervising the physical therapist assistant by being available and accessible by telecommunications during the working hours of the physical therapist assistant;

(f) Ensuring that if supportive personnel provide direct patient care that there is direct supervision as defined by 201 KAR 22:001, Section 1(6), effective September 1, 2013 by a physical therapist or physical therapist assistant;

(g) Ensuring that a physical therapy student fulfilling clinical education requirements shall receive on-site supervision by a physical therapist;

(h) Ensuring that a physical therapist assistant student fulfilling clinical education requirements shall receive on-site supervision of which eighty (80) percent may be by a credentialed physical therapist assistant;

(i) Establishing discharge planning for patients who require continued physical therapy; and

(j) Directing and being accountable for services rendered by physical therapist students or physical therapist assistant students, including documentation requirements in Section 5 of this administrative regulation.

Section 5. Standards for Documentation.

(1) The physical therapist shall be responsible for the physical therapy record of a patient. The physical therapy record shall include an evaluation and, as required, ongoing documentation and reassessment.

(2) An evaluation in the physical therapy record consists of a written or typed report signed and dated by the physical therapist who is performing the evaluation or who is supervising the physical therapist student performing the evaluation. The evaluation shall include:

(a) Pertinent medical and social history;

(b) Appropriate subjective and objective information;

(c) An assessment, which may indicate problems, interpretations, and a diagnosis identifying the nature and extent of the patient's impairment; and

(d) The plan of care, which includes the:

1. Treatment; and

2. Measurable goals, including anticipated time frame of achievement.

(3) Ongoing documentation in the physical therapy record shall:

(a) Be completed at least weekly or, if treatment is less than weekly, at each patient visit;

(b) Be written or typed, signed, and dated:

1. By the physical therapist or physical therapist assistant rendering treatment;

2. By the supervising physical therapist or physical therapist assistant if treatment was rendered by a physical therapist student or physical therapist assistant student; or

3. By the physical therapist student or physical therapist assistant student rendering treatment if countersigned and dated by the supervising physical therapist;

(c) Include:

1. The treatment rendered since the last evaluation, ongoing documentation, or reassessment;

2. The patient's response to treatment; and

3. Appropriate subjective and objective information;

(4) The reassessment included in the physical therapy record for the revision or reaffirmation of the existing plan of care, or the establishment of a new plan of care shall be written or typed, signed, and dated by a physical therapist.

(a) The reassessment shall be in compliance with Section 2(4) of this administrative regulation.

(b) A reassessment shall include:

1. Subjective, objective, and medical information acquired by the physical therapist, physical therapist student, physical therapist assistant, or physical therapist assistant student;

2. An assessment in compliance with subsection (2)(c) of this section completed by the physical therapist or physical therapist student; and

3. A plan of care in compliance with subsection (2)(d) of this section completed by the physical therapist or physical therapist student.

(5) The correct designation following the signature of the person who has entered a statement into the patient record shall be as follows:

(a) If written by a physical therapist: "PT". Appropriate designations for advanced physical therapy degrees may follow "PT";

(b) If written by a physical therapist assistant: "PTA";

(c) If written by supportive personnel: "PT Aide", or "Physical Therapy Aide", or "PT Tech"; and

(d) If written by a student: "Physical Therapist Student" or "PT Student"; "Physical Therapist Assistant Student" or "PTA Student".

Section 6. Appointment of Fees. Unless prohibited by law, all members of a business entity shall be allowed to pool or apportion

fees received in accordance with a business agreement. (16 Ky.R. 2616; Am. 17 Ky.R. 34; 1350; eff. 8-17-1990; 18 Ky.R. 1379; eff. 1-10-1992; 28 Ky.R. 132; 559; eff. 9-10-2001; 31 Ky.R. 811; 1067; eff. 1-4-2005; 35 Ky.R. 1859; 2215; eff. 5-1-2009; 36 Ky.R. 1305; 2047-M; eff. 4-2-2010; 37 Ky.R. 776; 1184; eff. 11-17-2010; 38 Ky.R. 91; eff. 10-19-2011; 1467; 1701; eff. 5-4-2012; 39 Ky.R. 827; 1113; eff. 12-11-12; TAm eff. 11-16-2016; 43 Ky.R. 1240; 1940; 6-2-2017.)

201 KAR 22:070. Requirements for foreign-educated physical therapists.

RELATES TO: KRS 327.050, 327.060

STATUTORY AUTHORITY: KRS 327.040(1), (11), (13) 327.060(3), 327.310

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the Board of Physical Therapy to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.040(13) authorizes the board to promulgate and enforce reasonable administrative regulations regarding certification, limitations of activities, supervision, and educational qualifications for physical therapist assistants. KRS 327.060 (3) authorizes the board to approve services to provide an evaluation of a foreign-educated physical therapist applicant's educational credentials. This administrative regulation establishes the requirements a foreign-educated physical therapist shall satisfy to become credentialed in the state of Kentucky.

Section 1. A foreign-educated physical therapist applicant shall be credentialed if the applicant:

(1) Complies with the requirements of KRS 327.060(1)(b).

(2) In accordance with KRS 327.060(1)(b), meets the following requirements:

(a) Furnishes the board a favorable educational credentials evaluation report from a credentialing agency that uses the appropriate edition of the "Coursework Tool" (CWT) copyrighted by Federation of State Boards of Physical Therapy (FSBPT). An academic deficiency in general education coursework identified by the CWT shall be satisfied by the applicant through submission of evidence identifying one (1) of the following:

1. Completion of appropriate coursework at a regionally accredited academic institution;
2. Continuing education in a course approved by the board; or
3. Submission of a portfolio including a detailed resume and description of relevant work experience approved by the

board;

(b) Shows proof of English Language Proficiency by:

1. A score of not less than fifty (50) on the Test of Spoken English (TSE);

2. Verification that the applicant has achieved the following minimum scores for each category of the Test of English as a Foreign Language, TOEFLE Internet-based test (TOEFL IBT):

(a) Writing, twenty-two (22);

(b) Speaking, twenty-four (24);

(c) Listening, twenty-one (21);

(d) Reading, twenty-two (22); or

(e) With an overall score of not less than eighty-nine (89); or

3. Verification that English is the native language of the country of origin.

(c) Submits a satisfactorily-completed application and appropriate fee as required by 201 KAR 22:135;

(d) Completes the Jurisprudence Exam; and

(e) Obtains a passing score on the National Physical Therapy Examination (NPTE). The requirements of 201 KAR 22:020, Section 2(3) and (4) shall be applicable to examination candidates; and

(f) Has successfully completed a minimum of three (3) months and no more than six (6) months of practice under the on-site supervision of a physical therapist credentialed under KRS Chapter 327 at a Kentucky facility previously approved by the board that satisfies the following requirements:

1. The supervised practice shall be a minimum of 390 hours in a three (3) month period, in a facility that is serving as a clinical education site for students enrolled in a program in physical therapist education accredited by the Commission for Accreditation of Physical Therapy Education (CAPTE);

2. The applicant shall furnish the board a favorable evaluation of on-site supervision performed by a clinical supervisor who

utilizes the "Performance Evaluation Tool for Foreign Educated Therapists Completing a Supervised Clinical Practice in the United States" copyrighted by FSBPT. The clinical supervisor shall submit the evaluation to the board after three months practice, and if required, after the sixth month, when the required score denoting clinical competency shall have been reached;

3. The supervising physical therapist shall, within the three (3) years prior to serving as a supervisor, have previously acted as clinical supervisor for a physical therapist student as part of a CAPTE accredited program; and

4. The supervisor shall countersign all of the candidate's physical therapy records within fourteen (14) days.

(3) Effective six (6) months after the Board receives an Originating Agency Number from the Federal Bureau of Investigation, submits to the Board a completed nationwide criminal background check as required by KRS 327.310 with the background check completed no later than six (6) months prior to the date of the filing of the application.

Section 2. Temporary Permits for Foreign-educated Physical Therapist Applicants.

(1) An applicant who has not satisfactorily completed three (3) months of supervised practice as a physical therapist shall be issued a temporary permit to complete Section 1(2)(f) of this administrative regulation if the applicant has:

(a) Completed the requirements of Section 1(2)(a) through (e) of this administrative regulation; and

(b) Submitted an approved "Supervisory Agreement for Physical Therapists Educated in a Foreign Country".

- (2) The temporary permit shall be revoked if the applicant has not satisfactorily completed the supervised practice within a six month period.

Section 3. A foreign-educated physical therapist assistant applicant shall be credentialed if the applicant has:

- (1) Completed the application process;
- (2) Provided written proof that the education institution in which the applicant received his or her education to be a physical therapist assistant is recognized by its own ministry of education;
- (3) Provided proof of authorization to reside and seek employment in the United States or its territories;
- (4) Provided proof of authorization to practice as a physical therapist assistant without limitations in the country where the professional education occurred;
- (5) Furnished the board a favorable educational credentials evaluation report from a credentialing agency that uses the appropriate edition of the "Coursework Evaluation Tool" (CWT) copyrighted by the Federation of State Boards of Physical Therapy (FSBPT). An academic deficiency in general education coursework identified by the CWT shall be satisfied by the applicant through submission of evidence identifying one (1) of the following:
 - (a) Completion of appropriate coursework at a regionally accredited academic institution;
 - (b) Continuing education in a course approved by the board; or
 - (c) Submission of a portfolio including a detailed resume and description of relevant work experience approved by the board;
- (6) Shows proof of English Language Proficiency by:
 - (a) A score of not less than fifty (50) on the Test of Spoken English (TSE);
 - (b) Verification that the applicant has achieved the following minimum scores for each category of the Test of English as a Foreign Language, TOEFLE Internet-based test (TOEFL IBT):
 - (1) Writing, twenty-two (22);
 - (2) Speaking, twenty-four (24);
 - (3) Listening, twenty-one (21);
 - (4) Reading, twenty-two (22); or
 - (5) With an overall score of not less than eighty-nine (89); or
 - (c) Verification that English is the native language of the country of origin.
- (7) Submits a satisfactorily-completed application and appropriate fee as required by 201 KAR 22:135;
- (8) Completes the Jurisprudence Exam;
- (9) Obtains a passing score on the National Physical Therapy Examination (NPTE);
- (10) Completes the requirements of Section 1(3) of this administrative regulation; and
- (11) To be eligible for a temporary permit, a foreign-educated Physical Therapist Assistant applicant must complete the requirements of 201 KAR 22:020 Sections 4 and 5.

Section 4. Incorporation by Reference.

- (a) "Supervisory Agreement for Physical Therapists Educated in a Foreign Country", August, 2017.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Board of Physical Therapy, 312 Whittington Parkway, Suite 102, Louisville, Kentucky 40222, Monday through Friday, 8 a.m. to 4:30 p.m. (2 Ky.R. 79; eff. 9-10-75; Am. 7 Ky.R. 310; 443; eff. 11-6-80; 11 Ky.R. 419; eff. 10-9-84; 12 Ky.R. 1353; eff. 3-4-86; 13 Ky.R. 1710; eff. 5-14-87; 18 Ky.R. 336; eff. 9-24-91; 19 Ky.R. 450; 868; eff. 10-8-92; 22 Ky.R. 615; 1975; eff. 11-15-95; 27 Ky.R. 1324; 1768; eff. 1-15-2001; 28 Ky.R. 1450; 1796; eff. 2-7-02; 31 Ky.R. 814; 1068; eff. 1-4-05; 1438; eff. 4-22-05; 33 Ky.R. 1431; 2274; eff. 3-1-07; TAm eff. 2-5-2008; 35 Ky.R. 2127; eff. 6-5-09; 37 Ky.R. 779; Am. 1419; eff. 12-15-2010; 38 Ky.R. 1365; 1551; eff. 3-21-2012; TAm eff. 12-6-2012; 42 Ky.R. 1287; 1712; eff. 12-16-2015; 43 Ky.R. 2022; 44 Ky.R. 17; eff. 7-17-2017; 44 Ky.R. 560, 920; eff. 11-15-2017; 44 Ky.R. 2259, 2487; eff. 6-20-2018; 45 Ky.R. 2161, 2862; eff. 5-3-2019.)

201 KAR 22:130. Per diem of board members.

RELATES TO: KRS 327.030, 327.080

STATUTORY AUTHORITY: KRS 327.030(6)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.030(6) authorizes the board to promulgate administrative regulations establishing a per diem for board members not to exceed \$120 per day for each day the member is actually engaged in the discharge of official duties. This administrative regulation outlines the per diem members will receive when required to represent the board or attend its meetings.

Section 1. Each member of the board shall receive a per diem of \$120 for attending each meeting of the board or otherwise representing the board. (9 Ky.R. 746; eff. 1-6-83; Am. 27 Ky.R. 1055; 1449; eff. 12-21-2000; 31 Ky.R. 815; 1069; eff. 1-4-05; TAm. 5-21-2013; 40 Ky.R. 112; 10-4-13.)

201 KAR 22:135. Fees.

RELATES TO: KRS 61.874(4), 327.050(2), (8), 327.075(1), 327.080(1)

STATUTORY AUTHORITY: KRS 327.040(11), (13), 327.050(2), (8), 327.075(1)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the board to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.050(2) and (8) require the board to

establish fees for application and renewal of licenses for physical therapists, and KRS 327.075(1) requires the board to establish a reinstatement fee. KRS 327.040(13) authorizes the board to establish reasonable fees for the certification, renewal, and endorsement of physical therapist assistants. This administrative regulation establishes the fees required to apply for a credential by application, reinstatement, or renewal.

Section 1. Payment of Fees.

- (1) Except as provided in subsection (2) of this section, an application fee shall be:
 - (a) Made payable as required by KRS 327.080(1); and
 - (b) Paid by:
 1. Cashier's check;
 2. Certified check;
 3. Money order;
 4. Credit card;
 5. Debit card; or
 6. Cash.
- (2) A renewal application fee shall be paid:
 - (a) As required by subsection (1) of this section; or
 - (b) By personal check.

Section 2. Licensure fees shall be:

- (1) \$225 for initial credentialing by application;
- (2) \$205 for a reinstatement application plus the impaired practitioner's assessment as set forth in 201 KAR 22:140, Section 1; and
- (3) \$170 for a renewal application plus the impaired practitioner's assessment as set forth in 201 KAR 22:140, Section 1.

Section 3. Other administrative fees shall be:

- (1) Verification of licensure forty (40) dollars;
- (2) Billfold license fifteen (15) dollars;
- (3) Wall certificate twenty-five (25) dollars;
- (4) Licensure mailing list on a CD or by email \$150; and
- (5) Licensure mailing labels \$150. (eff. 7-21-2010.) (13 Ky.R. 2161; eff. 7-2-1987; 16 Ky.R. 1623; eff. 4-12-1990; 18 Ky.R. 340; eff. 9-24-1991; 19 Ky.R. 83; 868; eff. 10-8-1992; 1402; eff. 1-27-1993; 21 Ky.R. 69; eff. 8-17-1994; 23 Ky.R. 175; eff. 8-21-1996; 25 Ky.R. 2432; 2838; eff. 6-16-1999; 26 Ky.R. 1695; 1945; eff. 5-10-2000; 27 Ky.R. 1055; eff. 12-21-2000; 31 Ky.R. 816; 1070; eff. 1-4-2005; 36 Ky.R. 2211; 37 Ky.R. 35; eff. 7-21-2010; Crt eff. 6-4-2018; 45Ky.R. 3258; eff. 7-19-2019)

201 KAR 22:140. Funding of impaired physical therapy practitioners committee.

RELATES TO: KRS. 327.040(13), 327.045, 327.070(2)(a)

STATUTORY AUTHORITY: KRS 327.045(4)

NECESSITY, FUNCTION, and CONFORMITY: KRS 327.045(4) requires the board to promulgate an administrative regulation establishing the assessment fee to be collected by the board as part of the license renewal application fee of each physical therapist and certification renewal application fee of each physical therapist's assistant. This administrative regulation establishes the assessment fee.

Section 1.

- (1) An assessment fee of twenty (20) dollars shall be paid to the board by each licensee or credentials holder, in addition to the license and credentials renewal application fee established in 201 KAR 22:135.
- (2) The assessment fee shall be paid at the time of renewal of the license or certificate each time the license or certificate is renewed. (eff. 12-21-2000.)

201 KAR 22:150. Impaired Practitioners Alternative Program.

RELATES TO: KRS 327.040, 327.045

STATUTORY AUTHORITY: KRS 327.040(14), 327.045

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(14) authorize the board to promulgate administrative regulations regarding the physical and mental examinations of physical therapists, physical therapist assistants, or applicants, who may be impaired by reason of a mental, physical, or other condition that impedes their ability to practice competently, KRS 327.045 authorizes the board to establish an impaired physical therapy practitioners committee to promote early identification, intervention, treatment, and rehabilitation of physical therapists and physical therapist assistants who may be impaired by reason of illness, alcohol or drug abuse, or as a result of any physical or mental condition. This administrative regulation provides procedures for the implementation of an alternative program.

Section 1. Definitions.

- (1) "Approved treatment provider" means an alcohol or drug treatment provider that meets the standards as set out in Section 6 of this administrative regulation.
- (2) "Chemically-dependent individual" means a credential holder or applicant for a credential issued by the board whose

ability to practice according to acceptable and prevailing standards of care is or may be impaired by reason of alcohol or drug abuse.

- (3) "Participant" means a chemically-dependent individual who has been accepted into the program.
- (4) "Program" means the Practitioners Alternative Care Effort (PACE) which is the alternative program operated by the board for credential holders or applicants for a credential issued by the board.

Section 2. Admission and Denial to the Program.

- (1) In order to gain admission to the program, an individual shall:
 - (a) Be a credential holder in the Commonwealth of Kentucky or an applicant for a credential issued by the board;
 - (b) Request participation in the program regardless of whether referred by the board, self, or another person;
 - (c) Be a credential holder currently enrolled in a state-approved alternative program, if requesting licensure by endorsement from another state;
 - (d) Admit in writing to being a chemically-dependent individual;
 - (e) Agree in writing to the terms set forth in the program agreement;
 - (f) Obtain a current chemical dependency assessment, which includes a complete physical and psychosocial evaluation performed by a licensed or certified medical, mental health, or psychological specialist in the field of drug, alcohol, or other chemical dependency;
 - (g) Provide any evaluation and treatment information, disclosure authorizations, and releases of liability as may be requested by the program staff;
 - (h) Agree to not be employed in any capacity in a patient care setting or one which requires licensure until approved to do so by the program staff; and
 - (i) Have attended an approved treatment provider program.
- (2) Admission to the program shall be denied if the applicant:
 - (a) Does not meet the eligibility requirements for admission as set by subsection (1) of this section;
 - (b) Is not eligible for a credential from the board in Kentucky;
 - (c) Diverted any prescription drug for other than self-administration;
 - (d) In the opinion of the program staff, will not substantially benefit from participation in the program;
 - (e) Has a criminal conviction related to the sale or distribution of scheduled substances or legend prescription drugs; or
 - (f) Has been terminated from alternative program participation in Kentucky or any other state.

Section 3. Requirements for Participation in the Program.

- (1) A participant shall:
 - (a) Enter into a program agreement; and
 - (b) Comply with all of the terms and conditions of the program agreement for the time period specified in the agreement.
- (2) The program agreement shall be updated and modified as needed to address the participant's progress in recovery and may include any of the following:
 - (a) A requirement that the participant undergo and successfully complete chemical dependency treatment by an approved treatment provider;
 - (b) A requirement that the participant agree not to practice in any capacity in a patient care setting or one (1) which requires licensure until approved to do so by the program;
 - (c) A requirement that the participant undergo and successfully complete the continuing care program recommended by the approved treatment provider and designated in the program agreement. The continuing care program may include individual or group counseling or psychotherapy;
 - (d) A requirement that the participant remain free of alcohol, over-the-counter medications containing alcohol, or mood-altering substances including herbal preparations and any other medication except for substances prescribed by a practitioner authorized by law to prescribe for a specific medical condition;
 - (e) A requirement that the participant inform all treating health care practitioners of the participant's chemical dependency and recovery status prior to receiving a prescription for any medication, mood-altering substance, or herbal preparation;
 - (f) A requirement, if a participant is required to take any substance prescribed or recommended by a practitioner, that the participant provide the program written documentation from the practitioner that the use of the substance shall not impair the participant's ability to practice physical therapy in a safe and effective manner and shall not interfere with the participant's recovery program provided the substance is used in accordance with the prescription or recommendation;
 - (g) A requirement that if the participant is prescribed, recommended, or dispensed any medication by a practitioner, the participant shall cause the practitioner to complete a medication report form provided by the program. The medication report form shall include the diagnosis and a copy of any prescription from any physician, and shall be submitted to the program within the time specified in the program agreement. Consultation with a physician addictionologist may be required by the program and the participant shall agree to abide by any determination made by the physician addictionologist;
 - (h) A requirement that the participant have all treatment providers and counselors provide any reports as may be required by the program at the intervals specified in the program agreement;
 - (i) A requirement that the participant submit to random alcohol and drug testing when requested by the program, and that the participant comply with all requirements of the program concerning random alcohol and drug testing;
 - (j) A requirement that the participant attend health professionals' support group and twelve (12) step group meetings as specified by the program agreement, and that the participant verify attendance at these meetings by signature of a

- group or meeting representative and submit the signatures to the program;
- (k) A requirement that the participant comply with the employment restrictions specified by the program agreement;
- (l) A requirement that the participant sign a waiver which would allow the program to communicate with the participant's treatment providers, counselors, employers, work site monitors, law enforcement officials and health professionals' support group facilitators, if applicable;
- (m) A requirement that the participant be responsible for paying the costs of the physical and psychosocial assessment, chemical dependency treatment, and random alcohol and drug testing, or any other costs incurred in complying with the program agreement;
- (n) A requirement that the participant submit a written personal report to the program at the intervals specified by the program agreement;
- (o) A requirement that the participant meet in person with a program representative at the intervals specified by the program agreement; or
- (p) A requirement that the participant comply with all other terms and conditions specified in the program agreement which the program staff determines are necessary to ensure that the participant is able to practice physical therapy in accordance with acceptable and prevailing standards of safe patient care.

Section 4. Successful Completion of the Program.

- (1) A participant successfully completes the program if the participant fully complies with all of the terms of the program agreement for the period as specified in the agreement.
- (2) If a participant successfully completes the program, the program shall notify the participant of the successful completion in writing. Once the participant receives this written notification of successful completion of the program, the participant shall no longer be required to comply with the program agreement.
- (3) A participant who successfully completes the program shall not be reported to the Healthcare Integrity and Protection Data Bank (HIPDB).

Section 5. Causes for Termination from the Program. A participant shall be terminated from the program for the following causes:

- (1) Noncompliance with any aspect of the program agreement;
- (2) Receipt of information by the board, other than an administrative reprimand or a private admonishment which, after investigation, results in disciplinary action by the board; or
- (3) Being unable to practice according to acceptable and prevailing standards of safe physical therapy.

Section 6. Standards for Approved Treatment Providers. In order to be an approved treatment provider, the treatment provider shall:

- (1) Be accredited by the Joint Commission for the Accreditation of Healthcare Organizations or be state-certified and shall have operated as a chemical dependency treatment program for a minimum of one (1) year;
- (2) Provide inpatient or outpatient care;
- (3) Be based on a twelve (12) step program of Alcoholics Anonymous/Narcotics Anonymous or equivalent support group;
- (4) Provide development of an individualized treatment and aftercare program to meet the specific needs of the participant and make recommendations regarding an ongoing rehabilitation plan;
- (5) Be based on evaluation by a multidisciplinary team, which includes a psychiatrist, addictionologist, licensed counseling staff, and a core of referral specialists;
- (6) Provide adequate detoxification services, including medical support and motivational support with no use of mood-altering drugs past detoxification period unless prescribed by a practitioner consistent with Section 3 of this administrative regulation;
- (7) Provide clearly-stated costs and fees for services, and offer fee schedules and flexibility in payment plans to accommodate participants who are underinsured or experiencing financial difficulties;
- (8) Demonstrate willingness to provide information to the alternative program regarding the status of the participant after appropriate consents to release information are obtained;
- (9) Work closely with the alternative program staff to assure proper implementation and administration of policies and procedures related to the program;
- (10) Maintain timely and accurate communication with program staff, including assessments, diagnosis, prognosis, discharge summary and follow-up recommendations as well as reports on significant events which occur in treatment that are related to impairment and the ability to practice safely; and
- (11) Provide monthly written reports of progress. (eff. 1-4-05.)

201 KAR 22:160. Telehealth and telephysical therapy.

RELATES TO: KRS 327.200

STATUTORY AUTHORITY: KRS 327.040(11), (12), 327.200(1), (2)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.040(11) authorizes the board to promulgate and enforce reasonable administrative regulations for the effectuation of the purposes of KRS Chapter 327. KRS 327.040(12) requires the board to promulgate by administrative regulation standards of practice. KRS 327.200(1) requires a treating physical therapist utilizing telehealth to ensure a patient's informed consent and to maintain confidentiality. KRS 327.200(2) requires the board to promulgate administrative regulations necessary to implement telehealth. This administrative regulation establishes procedures necessary to

prevent abuse and fraud through the use of telehealth, prevent fee-splitting through the use of telehealth, and utilize telehealth in the provision of physical therapy services and in the provision of continuing education.

Section 1. Patient Identity, Communication, and Informed Consent Requirements. A credential holder using telehealth to deliver physical therapy services or who practices telephysical therapy shall, upon an initial contact with the patient:

- (1) Verify the identity of the patient;
- (2) Obtain alternative means of contacting the patient;
- (3) Provide to the patient alternative means of contacting the credential holder;
- (4) Provide contact methods of alternative communication the credential holder shall use for emergency purposes;
- (5) Not use personal identifying information in non-secure communications; and
- (6) Inform the patient and document acknowledgement of the risk and limitations of:
 - (a) The use of electronic communications in the provision of physical therapy;
 - (b) The potential breach of confidentiality, or inadvertent access, of protected health information using electronic communication in the provision of physical therapy; and
 - (c) The potential disruption of electronic communication in the use of telephysical therapy.

Section 2. Competence, Limits on Practice, Maintenance, and Retention of Records. A credential holder using electronic communication to deliver physical therapy services or who practices telephysical therapy shall:

- (1) Be responsible for determining and documenting that telehealth is appropriate in the provision of physical therapy;
- (2) Limit the practice of telephysical therapy to the area of competence in which proficiency has been gained through education, training, and experience;
- (3) Document which physical therapy services were provided by telephysical therapy;
- (4) Follow the record-keeping requirements of 201 KAR 22:053, Section 5; and
- (5) Ensure that confidential communications obtained and stored electronically shall not be recovered and accessed by unauthorized persons when the credential holder disposes of electronic equipment and data.

Section 3. Compliance with State Law. A credential holder practicing telephysical therapy shall be:

- (1) Licensed to practice physical therapy where the patient is physically present or domiciled; or
- (2) Otherwise authorized by law to practice physical therapy in another jurisdiction where the patient is physically present or domiciled. (40 Ky.R. 2227; 41 Ky.R. 32; eff. 8-1-2014.)

201 KAR 22.170. Physical Therapy Compact Commission.

RELATES TO: KRS 327.300(12)

STATUTORY AUTHORITY: KRS 327.300(12)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 327.300(12) requires the Board of Physical Therapy to review any rule adopted by the Physical Therapy Compact Commission within sixty (60) days of adoption for the purpose of filing the rule as an emergency administrative regulation pursuant to KRS 13A.190 and for filing the rule as an accompanying ordinary administrative regulation, following the requirements of KRS Chapter 13A. This administrative regulation sets forth the Rules adopted by the Physical Therapy Compact Commission.

Section 1. The Kentucky Board of Physical Therapy shall comply with all bylaws, rules, and administrative regulations of the Physical Therapy Compact Commission, which includes the Physical Therapy Compact Commission Rules and Bylaws.

Section 2. Incorporation by Reference. (1) The following material is incorporated by reference:

- (a) "Physical Therapy Compact Commission Rules", October 2020; and
 - (b) "Physical Therapy Compact Commission Bylaws", October 2020.
- (2)(a) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Kentucky Board of Physical Therapy, 312 Whittington Parkway, Suite 102, Louisville, Kentucky 40222, Monday through Friday, 8 am to 4:30 p.m.; or
- (b) This material may be obtained on the Kentucky Board of Physical Therapy's Web site at <https://pt.ky.gov>.
- (3) This material may also be obtained at:
- (a) The Physical Therapy Compact Commission, 124 West Street South, Third Floor, Alexandria, Virginia, 22314; or
 - (b) <http://www.ptcompact.org>. (44 Ky.R. 1976; eff. 3-15-2018; 45 Ky.R. 422, 951; eff. 11-2-2018; 2164; eff. 3-13-2019; 2108; eff. 6-30-2020; 47 Ky.R. 1424; eff. 6-16-2021.)