

# ARIZONA STATE SENATE

## RESEARCH STAFF



**MICHAEL MADDEN**  
LEGISLATIVE RESEARCH ANALYST  
HEALTH AND HUMAN SERVICES COMMITTEE  
Telephone: (602) 926-3171

TO: JOINT LEGISLATIVE HEALTH AND  
HUMAN SERVICES COMMITTEE OF  
REFERENCE

DATE: January 19, 2024

SUBJECT: Sunset Review of the Arizona State Board of Physical Therapy

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Attached is the final report of the sunset review of the Arizona State Board of Physical Therapy, which was conducted by the Joint Legislative Health and Human Services Committee of Reference.

This report has been distributed to the following individuals:

Governor of the State of Arizona  
The Honorable Katie Hobbs

President of the Senate  
Senator Warren Petersen

Speaker of the House of Representatives  
Representative Ben Toma

Senator Thomas Shope, Co-Chair  
Senator Janae Shamp  
Senator Sonny Borrelli  
Senator Eva Burch  
Senator Sally Gonzales  
Senator Theresa Hatathlie  
Senator Justine Wadsack

Legislative Members

Representative Steve Montenegro, Co-Chair  
Representative Barbara Parker  
Representative Selina Bliss  
Representative Patricia Contreras  
Representative Matt Gress  
Representative Alma Hernandez  
Representative Christopher Mathis  
Representative Beverly Pingerelli  
Representative Amish Shah  
Representative Julie Willoughby

CC: Senate Republican Staff  
Senate Democratic Staff  
Senate Research Staff  
Senate Resource Center  
House Republican Staff  
House Democratic Staff  
House Research Staff  
House Chief Clerk

Arizona State Board of Physical Therapy  
Arizona State Library, Archives and Public Records

# ARIZONA STATE BOARD OF PHYSICAL THERAPY SUNSET REVIEW

## *Background*

Pursuant to [A.R.S. § 41-2953](#), the Joint Legislative Audit Committee assigned the sunset review of the Arizona State Board of Physical Therapy (Board) to the Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference.

The Board was established in 1952 and to regulate the practice of physical therapy in Arizona, certify qualified applicants and take enforcement action and disciplinary action as necessary. Board duties include: 1) evaluating, licensing and certifying qualified applicants; 2) providing national examinations and determining passing scores for physical therapists and physical therapist assistants; 3) establishing mechanisms to assess continued professional competence of physical therapists and physical therapist assistants; 4) maintaining a current list of all persons regulated by the board; 5) publishing final disciplinary actions taken against a licensee or certificate holder; 6) entering into contracts for services as necessary to carry out the Board's duties; and 7) providing information to the public regarding the board, its processes and consumer rights ([Arizona State Library; A.R.S. § 32-2003](#)).

The Board consists of seven members appointed by the Governor to staggered four-year terms. Members may not serve more than two successive terms or for more than ten consecutive years. The Board is required to meet at least once per quarter (A.R.S. §§ [32-2002](#) and [32-2003](#)).

The Board terminates on July 1, 2024, unless legislation is enacted for its continuation ([A.R.S. § 41-3024.02](#)).

## *Sunset Review Procedure*

The Joint Legislative Health and Human Services Committee of Reference held a public meeting on Thursday, January 11, 2024, to review the sunset factors, the Board's responses to the sunset factors and receive public testimony.

## *Committee of Reference Recommendations*

The Committee of Reference recommended that the Legislature continue the Board for eight years until July 1, 2032.

## *Appendices*

- A. Meeting notice
- B. Committee minutes
- C. Committee materials
- D. Chairman's letter requesting Board response to the agency factors
- E. Board's Response to the agency factors pursuant to [A.R.S. § 41-2954](#)

Interim agendas can be obtained via the Internet at <http://www.azleg.gov/Interim-Committees>

**ARIZONA STATE LEGISLATURE**

**INTERIM MEETING NOTICE**  
**OPEN TO THE PUBLIC**

**SENATE HEALTH AND HUMAN SERVICES COMMITTEE OF REFERENCE AND HOUSE  
HEALTH & HUMAN SERVICES COMMITTEE OF REFERENCE**

**Date:** Thursday, January 11, 2024

**Time:** ~~2:00 P.M.~~ 11:30 A.M. or Upon adjournment of the Senate Natural Resources, Energy and Water Committee of Reference and House Government Committee of Reference and House Subcommittee on Budgetary Funding Formulas

**Place:** HHR 1

**Members of the public may access a livestream of the meeting here:**

<https://www.azleg.gov/videoplayer/?clientID=6361162879&eventID=2024011024>

**AGENDA**

1. Call to Order
2. Roll Call
3. Introduction
4. Sunset Review of the Board of Nursing Care Institution Administrators and Assisted Living Facility Managers
  - a. Presentation by the Board of Nursing Care Institution Administrators and Assisted Living Facility Managers
  - b. Public Testimony
  - c. Discussion and Recommendation
5. Sunset Review of the Arizona State Board of Physical Therapy
  - a. Presentation by the Arizona State Board of Physical Therapy
  - b. Public Testimony
  - c. Discussion and Recommendation
6. Sunset Review of the Arizona Pioneers' Home, State Hospital for Miners with Disabilities
  - a. Presentation by the Arizona Pioneers' Home, State Hospital for Miners with Disabilities
  - b. Public Testimony
  - c. Discussion and Recommendation
7. Sunset Review of the Foster Care Review Board
  - a. Presentation by the Arizona Office of the Auditor General
  - b. Response by the Foster Care Review Board and the Arizona Administrative Office of the Courts.
  - c. Public Testimony
  - d. Discussion and Recommendation

8. Review of the Arizona Adult Protective Services System
  - a. Presentation by the Arizona Office of the Auditor General
  - b. Responses by the Arizona Department of Economic Security, Arizona Department of Health Services and Arizona Health Care Cost Containment System
  - c. Public Testimony
  - d. Discussion
9. Adjourn

**Members:**

Senator Thomas "T.J." Shope, Co-Chair  
 Senator Sonny Borrelli  
~~Senator Eva Burch~~  
 Senator Sally Ann Gonzales  
 Senator Theresa Hatathlie  
 Senator Juan Mendez  
 Senator Janae Shamp  
 Senator Justine Wadsack

Representative Steve Montenegro, Co-Chair  
 Representative Selina Bliss  
 Representative Patricia Contreras  
 Representative Matt Gress  
 Representative Gail Griffin  
 Representative Alma Hernandez  
 Representative Christopher Mathis  
 Representative Barbara Parker  
~~Representative Beverly Pingerelli~~  
 Representative Amish Shah  
 Representative Julie Willoughby

01/04/2024  
 01/09/2024  
 hf

For questions regarding this agenda, please contact Senate Research Department.  
 Persons with a disability may request a reasonable accommodation such as a sign language interpreter, by contacting the Senate Secretary's Office: (602) 926-4231 (voice). Requests should be made as early as possible to allow time to arrange the accommodation.

# ARIZONA STATE LEGISLATURE

## SENATE HEALTH AND HUMAN SERVICES COMMITTEE OF REFERENCE AND HOUSE HEALTH & HUMAN SERVICES COMMITTEE OF REFERENCE

Minutes of the Meeting  
January 11, 2024

11:30 A.M. or Upon adjournment of the Senate Natural Resources, Energy and  
Water Committee of Reference and House Government Committee of Reference  
and House Subcommittee on Budgetary Funding Formulas, HHR1

Members of the public may access a livestream of the meeting here:

<https://www.azleg.gov/videoplayer/?clientID=6361162879&eventID=2024011024>

### Members Present:

Senator Thomas "T.J." Shope, Co-Chair  
Senator Sally Ann Gonzales  
Senator Juan Mendez  
Senator Janae Shamp  
Senator Justine Wadsack

Representative Steve Montenegro, Co-Chair  
Representative Selina Bliss  
Representative Patricia Contreras  
Representative Matt Gress  
Representative Gail Griffin  
Representative Alma Hernandez\*  
Representative Christopher Mathis  
Representative Barbara Parker  
Representative Julie Willoughby

### Members Excused:

Senator Sonny Borrelli  
Senator Theresa Hatathlie

Representative Amish Shah\*

The Speaker approved the following temporary appointments:

\*Representative Lupe Contreras replaced Representative Amish Shah at 4:27 p.m.

\*Representative Consuelo Hernandez replaced Representative Alma Hernandez at 4:27 p.m.

### Staff:

Michael Madden, Senate Health and Human Services Research Analyst  
Kaytie Sherman, Senate Health and Human Services Assistant Research Analyst  
Dhaky Mullangi, Senate Health and Human Services Research Intern  
Ahjahna Graham, House Health and Human Services Research Analyst  
Montserrat Torres, House Health and Human Services Assistant Research Analyst  
Kayla Thackeray, House Health and Human Services Research Intern

Co-Chair Shope called the meeting to order at 2:40 p.m. and attendance was noted.

## INTRODUCTION

Senator Shope offered opening comments.

## **SUNSET REVIEW OF THE FOSTER CARE REVIEW BOARD**

### **Presentation by the Arizona Office of the Auditor General**

**Jeff Gove, Office of the Auditor General**, distributed and explained a PowerPoint presentation entitled "Arizona Foster Care Review Board, Performance Audit and Sunset Review" (Attachment A).

### **Response by the Foster Care Review Board and the Arizona Administrative Office of the Courts**

**Caroline Lutt-Owens, Director, Dependent Children Services Division, Administrative Office of the Courts**, gave an overview of the Foster Care Review Board (FCRB), distributed and explained a PowerPoint presentation entitled "Foster Care Review Board, Advocating for Arizona's Most Vulnerable Citizens" (Attachment B).

Ms. Lutt-Owens answered questions posed by the Committee.

### **Public Testimony**

**Anna Young, Judge, Yavapai County Superior Court**, gave an overview of the court process, the use of the Foster Care Review Board (FCRB) reports and answered questions posed by the Committee.

**Kris Jacober, representing self**, testified in support of continuation of the FCRB and answered questions posed by the Committee.

**Kari Hancock Handley, representing self**, testified in opposition to the continuation of the FCRB and answered questions posed by the Committee.

**Peter Bartolini, representing self**, testified in opposition to the continuation of the FCRB.

**Arlene Willes, representing self**, testified in opposition to the continuation of the FCRB and submitted a copy of her testimony (Attachment C).

**Anika Robinson, representing self**, testified in opposition to the continuation of the FCRB.

**Bruce Brannan, representing self**, testified in support of continuation of the FCRB and answered questions posed by the Committee.

**Crystal Nuttle, representing self**, testified on the foster care system and submitted a copy off her testimony (Attachment D).

**Dan Crane, representing self**, testified in support of continuation of the FCRB.

**Kristy Dupree, representing self**, testified in support of continuation of the FCRB.

**Linda Bohling, representing self**, testified in support of continuation of the FCRB.

Mr. Crane answered questions posed by the Committee.

Judge Young answered additional questions posed by the Committee.

### **Discussion and Recommendation**

Representative Montenegro displayed on the screen and read Recommendation 2 for the Foster Care Review Board Sunset Review (Attachment E).

**Lindsey Perry, Auditor General**, answered questions posed by the Committee.

Representative Montenegro offered comments.

**Representative Montenegro moved that the Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference approve the recommendations for the Arizona Foster Care Review Board (Attachment E) as presented on January 11, 2024 at 4:14 p.m.**

**Representative Parker offered a substitute motion that the Arizona Foster Care Review Board be terminated and all authority, duties, responsibilities and funding be transferred to the Casa of Arizona Office to further the purpose of the court appointed special advocate program. The motion FAILED with a roll call vote of 2-12-3-0 (Attachment 1).**

**Representative Montenegro's original motion CARRIED with a roll call vote of 13-1-3-0 (Attachment 2).**

Representative Parker explained her vote.

### **RECESS**

At 4:20 p.m. the Co-Chair Shope recessed the meeting to the sound of the gavel.

### **RECONVENE**

At 4:27 p.m. the Co-Chair Shope called the meeting to order.

Representative Lupe Contreras replaced Representative Amish Shah.  
Representative Consuelo Hernandez replaced Representative Alma Hernandez.

**Daniel Butters, representing self**, testified in support of continuation of the FCRB.

**Morgan Butters representing self**, testified in support of continuation of the FCRB.

The Committee offered comments.

## **SUNSET REVIEW OF THE BOARD OF NURSING CARE INSTITUTION ADMINISTRATORS AND ASSISTED LIVING FACILITY MANAGERS**

### **Presentation by the Board of Nursing Care Institution Administrators and Assisted Living Facility Managers**

**Jack Confer, Executive Director, Nursing Care Board**, gave an overview of the Board, distributed and explained a PowerPoint presentation entitled "Joint Health and Human Services Committee" (Attachment F) and answered questions posed by the Committee.

### **Public Testimony**

**Marie Isaacson, Arizona Leading Age**, testified in support of the continuation of the Board of Nursing Care Institution Administrators (NCIA) and Assisted Living Facility Managers.

**Karen Barno, Arizona Assisted Living Federation of America**, testified in support of the continuation of the Board of Nursing Care Institution Administrators and Assisted Living Facility Managers.

**Becky Hill, Family Representative, NCIA Board**, testified in support of the continuation of the Board of Nursing Care Institution Administrators and Assisted Living Facility Managers.

Senator Gonzales submitted a letter from Maria Gomez Murphy (Attachment G).

### **Discussion and Recommendation**

**Representative Montenegro moved that the Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference recommends that the Board of Nursing Care Institution Administrators and Assisted Living Facility Managers be continued for 8 years until July 1, 2032. The motion CARRIED with a roll call vote 13-0-4-0 (Attachment 3).**

Senator Shamp and Representative Griffin explained their vote.



## **SUNSET REVIEW OF THE ARIZONA STATE BOARD OF PHYSICAL THERAPY**

### **Presentation by the Arizona State Board of Physical Therapy**

**Judy Chepeus, Executive Director, Arizona State Board of Physical Therapy**, distributed and explained a PowerPoint presentation entitled "Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference" (Attachment H) and answered questions posed by the Committee.

### **Public Testimony**

**Tom Dorn, Arizona Physical Therapy Association**, testified in support of the continuation of the Arizona State Board of Physical Therapy.

### **Discussion and Recommendation**

**Representative Montenegro moved that the Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference recommends that the Arizona State Board of Physical Therapy be continued for 8 years until July 1, 2032. The motion CARRIED with a roll call vote 13-0-4-0 (Attachment 4).**

## **SUNSET REVIEW OF THE ARIZONA PIONEERS' HOME, STATE HOSPITAL FOR MINERS WITH DISABILITIES**

### **Presentation by the Arizona Pioneers' Home, State Hospital for Miners with Disabilities**

**Jessica Sullivan, Superintendent, State of Arizona Pioneers' Home**, distributed and explained a packet of information entitled "Arizona Pioneers' Home, State of Arizona" (Attachment I).

### **Public Testimony**

No public testimony took place.

### **Discussion and Recommendation**

**Representative Montenegro moved that the Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference recommends that the Arizona Pioneers' Home, State Hospital for Miners with Disabilities be continued for 8 years until July 1, 2032. The motion CARRIED with a roll call vote 13-0-4-0 (Attachment 5).**

Representatives Bliss and Griffin explained their vote.

## **REVIEW OF THE ARIZONA ADULT PROTECTIVE SERVICES SYSTEM**

### **Presentation by the Arizona Office of the Auditor General**

**Lindsey Perry, Auditor General**, provided background information on the audit requirements of the Arizona Adult Protective Services System.

Senator Shope offered comments.

**Michel Lahti, LeCroy & Milligan**, distributed and explained a PowerPoint presentation entitled "Senate and House Health and Human Services Committees of Reference: Examining the Delivery of Services to Vulnerable Adults in the Arizona Adult Protective Services System" (Attachment J).

Representative Gress offered comments.

### **Responses by the Arizona Department of Economic Security, Arizona Department of Health Services and Arizona Health Care Cost Containment System**

**Molly McCarthy, Assistant Director, Aging and Adult Services, Arizona Department of Economic Security**, distributed and explained a PowerPoint presentation entitled "Response - Adult Protective Services System Audit" (Attachment K) and answered questions posed by the Committee.

**Jekenna Lebsock, Assistant Director, Division of Health Care Services, Arizona Health Care Cost Containment System**, responded to the Auditor General's report.

**Tom Salow, Assistant Director, Arizona Department of Health Services**, responded to the Auditor General's Report and answered questions posed by the Committee.

### **Public Testimony**

No public testimony took place.

### **Discussion**

No discussion took place.

Attached are forms noting the individual who submitted a Speaker slip on the agenda items (Attachment L).

Attached is a list noting the individuals who registered their position on the agenda items (Attachment M).

There being no further business, the meeting was adjourned at 6:46 p.m.

Respectfully submitted,

Tracey Gardner  
Committee Secretary

(Audio recordings and attachments are on file in the Secretary of the Senate's Office/Resource Center, Room 115. Audio archives are available at <http://www.azleg.gov>)



# ARIZONA STATE BOARD OF PHYSICAL THERAPY

Protecting the Public by Regulating the Profession of Physical Therapy



## Senate Health and Human Services Committee of Reference and House Health and Human Services Committee of Reference

*Sunset Review Hearing  
January 11, 2024*

**Judy Chepeus, Executive Director**



# Overview

# Board Purpose

The Board was established in 1952 to protect the public's health, safety, and welfare by regulating the practice of physical therapy

Only agency that licenses, certifies and regulates physical therapists and physical therapist assistants in Arizona

# Board Mission

The Board's mission is to protect the public by:

- **Issuing licenses and certificates** only to individuals who are qualified to practice as a physical therapist or work as a physical therapist assistant
- **Conducting investigations and adjudicating complaints** alleging unprofessional conduct
- **Taking corrective or disciplinary** action against licensees and certificate holders who violate the laws enforced by the Board, and
- **Providing consumer information** to the public

# Board Composition

The Board is comprised of 7 members:

- Appointed by the Governor
- 2 shall be public members
- 4 shall be physical therapists with an unrestricted Arizona license who have been practicing in this state for at least 5 years
- 1 shall be a physical therapist assistant with an unrestricted Arizona certificate who has been working in this state for at least 5 years



# Physical Therapists

Physical therapists are independent primary healthcare providers that examine, evaluate, and test mechanical, physiological, and developmental impairments, functional limitations and disabilities or other health and movement related conditions in order to determine a diagnosis, prognosis, and plan of therapeutic intervention and to assess the ongoing effects of intervention. [A.R.S. § 32-2001(13)].

Physical therapists graduate from a US accredited physical therapist educational program, (or pursue educational equivalence credentialing of a foreign education), and pass a national examination prior to licensure.

# Physical Therapist Assistants

Physical therapist assistants are certified by the Board and serve as skilled assistive personnel working under the on-site or general (offsite) supervision of a licensed physical therapist. [A.R.S. §32-2001].

Physical therapist assistants perform physical therapy procedures and related tasks that have been selected and delegated by the supervising physical therapist.

Physical therapist assistants graduate from a US accredited physical therapist assistant educational program, and pass a national examination prior to certification.

# Regulation

The Board of Physical Therapy regulates the following:

- Physical therapists with an Arizona license [A.R.S. § 32-2003]
- Physical therapist assistants with an Arizona certificate [A.R.S. § 32-2003]
- Physical therapists and physical therapist assistants with an Arizona PT Compact privilege [A.R.S. § 32-2053]
- Interstate telehealth providers registered to provide telehealth services in Arizona [A.R.S. § 36-3606]
- Business entities registered as providing physical therapy in Arizona [A.R.S. § 32-2030]

# Currently Active

Current practitioners and Entities with an active status:

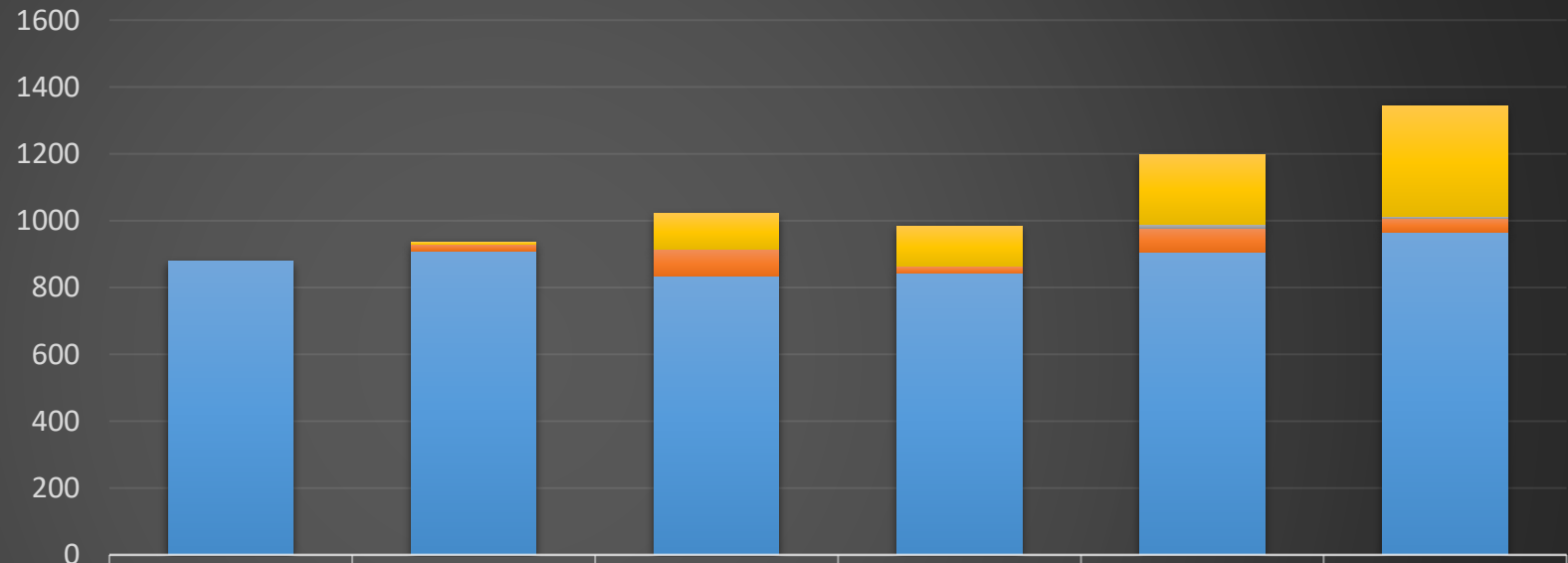
- 6,810 Licensed Physical Therapists
- 2,183 Certified Physical Therapist Assistants
- 11 Registered Interstate Telehealth Providers
- 510 Compact Privilege Holders
- 197 Business Entities Registrants

# Data & Trends

# Initial Application Trends

## INITIAL APPLICATIONS BY FISCAL YEAR

▲ 67%

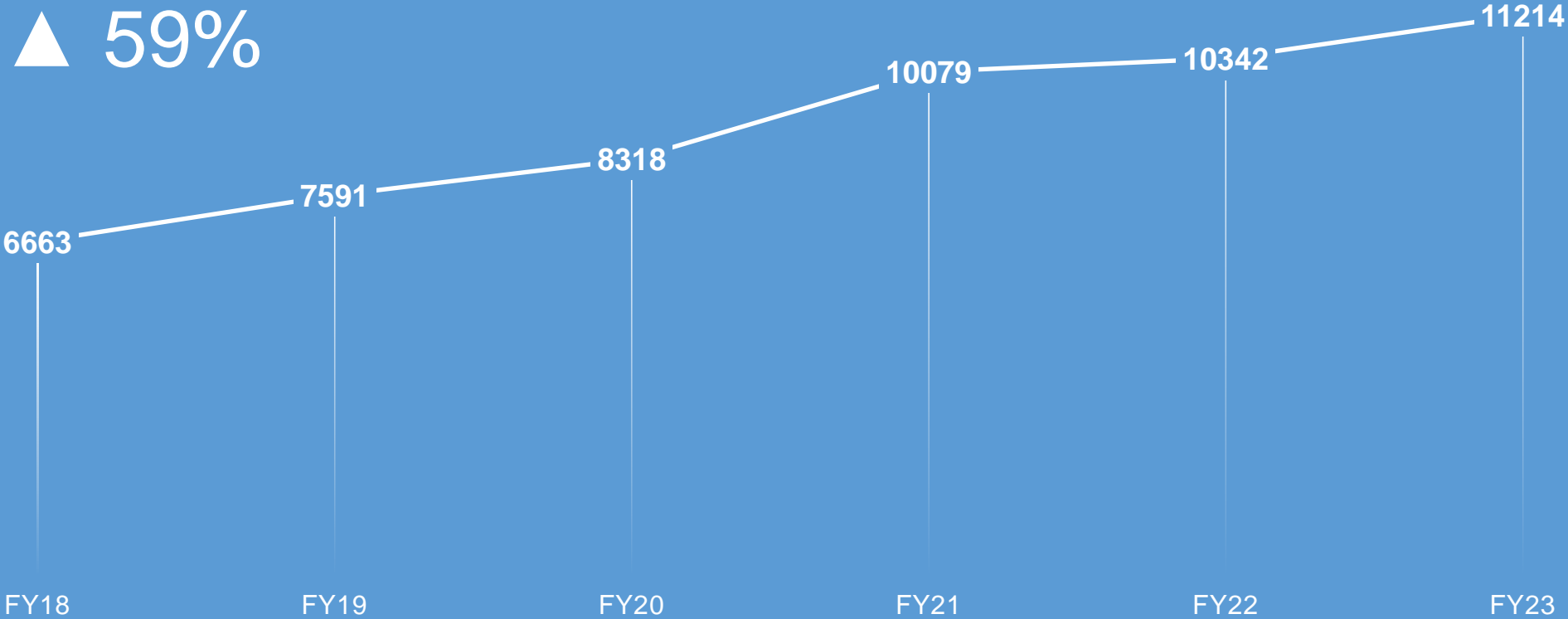


	FY18	FY19	FY20	FY21	FY22	FY23
PT Compact		8	108	120	207	332
Interstate Telehealth					13	5
Business Entity		19	79	22	72	41
Physical Therapist & Physical Therapist Assistant	878	910	834	842	906	967

# Practitioner and Entities Trends

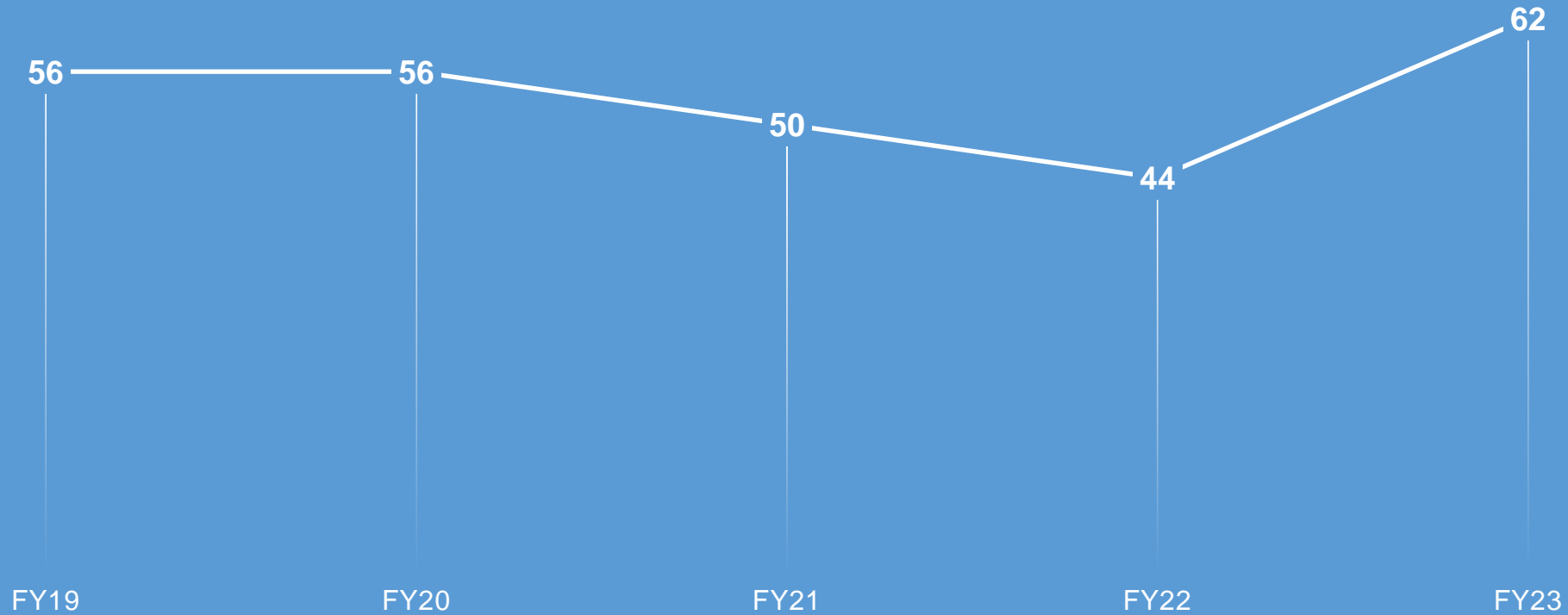
## PRACTITIONERS & ENTITIES

▲ 59%



# Complaint Trends

## COMPLAINTS WITH JURISDICTION





# Board Sunset Impact

- Regulation is essential: protect public health, safety and welfare
- Public expects . . .
  - Only qualifying individuals meeting minimum standards in education and training are permitted to practice
  - The agency to investigate and discipline licensees and certificate holders who fail to practice safely and ethically
- Board sunset . . .
  - Allows unqualified individuals to provide physical therapy treatments, including those that would currently be considered out of scope
  - Eliminates investigation of consumers' complaints of harm and corrective action to prevent future harm

**Questions?**



# Arizona State Legislature

1700 West Washington  
Phoenix, Arizona 85007

June 23, 2023

Director Judy Chepeus  
State Board of Physical Therapy  
1740 W. Adams, Ste. 2450  
Phoenix, AZ, 85007

Dear Director Judy Chepeus:

The sunset review process prescribed in Title 41, Chapter 27, Arizona Revised Statutes, provides a system for the Legislature to evaluate the need to continue the existence of state agencies. During the sunset review process, an agency is reviewed by legislative committees of reference (CORs). On completion of the sunset review, the CORs recommend to continue, revise, consolidate or terminate the agency.

The Joint Legislative Audit Committee has assigned the sunset review of the State Board of Physical Therapy to the CORs comprised of members of the Senate Health and Human Services Committee and the House of Representatives Health and Human Services Committee.

Pursuant to A.R.S. § 41-2954, the COR is required to consider certain sunset factors in deciding whether to recommend continuance, modification or termination of an agency. Please provide your agency's response to the factors listed below:

1. The key statutory objectives and purposes in establishing the agency.
2. The agency's effectiveness and efficiency in fulfilling its key statutory objectives and purposes.
3. The extent to which the agency's key statutory objectives and purposes duplicate the objectives and purposes of other governmental agencies or private enterprises.
4. The extent to which rules adopted by the agency are consistent with the legislative mandate.
5. The extent to which the agency has provided appropriate public access to records, meetings and rulemakings, including soliciting public input in making rules and decisions.
6. The extent to which the agency timely investigated and resolved complaints that are within its jurisdiction.
7. The extent to which the level of regulation exercised by the agency is appropriate as compared to other states or best practices, or both.
8. The extent to which the agency has established safeguards against possible conflicts of interest.
9. The extent to which changes are necessary for the agency to more efficiently and effectively fulfill its key statutory objectives and purposes or to eliminate statutory responsibilities that are no longer necessary.
10. The extent to which the termination of the agency would significantly affect the public health, safety or welfare.

Additionally, please provide written responses to the following:

1. The extent to which the agency potentially creates unexpected negative consequences that may require additional review by the COR, including increasing the price of goods, affecting the availability of services, limiting the abilities of individuals and businesses to operate efficiently and increasing the cost of government.
2. The extent to which the agency has addressed deficiencies in its enabling statutes.
3. The extent to which the agency has determined whether the Attorney General or any other agency in Arizona has the authority to prosecute or initiate actions.
4. The consequences of eliminating the agency or consolidating it with another agency.

Additionally, statute requires the COR to consider certain factors for each agency that administers an *occupational regulation*, which is defined as: 1) a statute, rule, practice, policy or other state law that allows an individual to use an occupational title or work in a lawful occupation; and 2) a government registration, government certification and occupational or professional license. An *occupational regulation* does not include a business license, facility license, building permit or zoning and land use regulation, except to the extent those state laws regulate an individual's personal qualification to perform a lawful occupation. If your agency falls under this category, please provide written responses to the following:

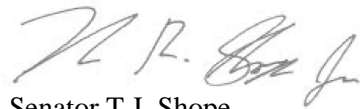
1. The extent to which the occupational regulation meets the requirements of A.R.S. § 41-3502.
2. The extent to which the failure to regulate a profession or occupation will result in:
  - a. the loss of insurance.
  - b. an impact to the ability to practice in other states or as required by federal law.
  - c. an impact to the required licensure or registration with the federal government.
  - d. the loss of constitutionally afforded practices.

Your response should be received by September 1, so that we may proceed with the sunset review and schedule the required public hearing. Please submit the requested information to:

Michael Madden  
Arizona State Senate  
1700 West Washington  
Phoenix, Arizona 85007

Thank you for your time and cooperation. If you have any questions, please feel free to contact me at (602) 926-3012 or Michael Madden, the Senate Health and Human Services Committee Research Analyst, at (602) 926-3072.

Sincerely,



Senator T.J. Shope  
Senate Health and Human Services Committee, Chair

cc: Representative Steve Montengro, House Health and Human Services Committee, Chair  
Ahjahna Graham, House Health and Human Services Committee, Analyst



**ARIZONA STATE BOARD OF PHYSICAL THERAPY**

1740 W. Adams Street, Suite 2450 • Phoenix, AZ 85007 • (602) 274 – 0236  
[ptboard.az.gov](http://ptboard.az.gov)

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August 31, 2023

Senator T.J. Shope, Chair  
Senate Health and Human Services Committee  
1700 West Washington  
Phoenix, AZ 85007

Representative Steve Montenegro, Chair  
House Health and Human Services Committee  
1700 West Washington  
Phoenix, AZ 85007

RE: Response to Sunset Factors pursuant to A.R.S. § 41-2954

The Honorable Senator Shope and Representative Montenegro,

In accordance with the provisions of A.R.S. § 41-2954 and in response to your letter dated June 23, 2023, I offer the following response on behalf of the State Board of Physical Therapy.

**1. The Key Statutory objectives and purposes in establishing the agency:**

The 20<sup>th</sup> Arizona State Legislature established the Arizona Board of Physical Therapy Examiners (now the Arizona State Board of Physical Therapy) in 1952 for the purpose of protecting the public's health, safety and welfare by regulating the practice of physical therapy and licensing only qualified individuals as physical therapists. In 1998, the Board's authority was expanded by the Legislature to include the certification and regulation of physical therapist assistants. In 2010 the Legislature empowered the Board to register Business Entities that provide physical therapy services. In 2016 the Legislature adopted and enacted into law the physical therapy licensure compact, and most recently, the Legislature adopted statutes for the provision of telehealth in Arizona in 2021, which include the registration of healthcare providers licensed outside of Arizona with the state's applicable health care provider regulatory board.

Physical therapists practicing in Arizona by virtue of state licensure, compact privilege or interstate telehealth registration are independent primary healthcare providers that examine, evaluate, and test mechanical, physiological, and developmental impairments, functional limitations and disabilities or other health and movement related conditions in order to determine a diagnosis, a prognosis and a plan of therapeutic intervention and to assess the ongoing effects of intervention, including ordering

musculoskeletal imaging consisting of plain film radiographs. Additionally, physical therapists alleviate impairments and functional limitations by designing, implementing and modifying therapeutic interventions, and work with patients to reduce the risk of injury, impairments, functional limitations and disability by means that include promoting and maintaining a person's fitness, health and quality of life. Physical therapists may also engage in work related to administration, consultation, education and research. Physical therapist assistants are certified by the Board and serve as skilled assistive personnel working under the on-site or general (offsite) supervision of a licensed physical therapist.

The mission of the Arizona State Board of Physical Therapy is *“To protect the public from the incompetent, unprofessional, and unlawful practice of physical therapy. The Arizona Physical Therapy Practice Act establishes the standards for the practice of physical therapy, continuing competence and testing, and defines the scope and limitations of practice. The Board licenses and certifies qualified applicants as physical therapists and physical therapist assistants; and receives, investigates and adjudicates complaints against licensees and certificate holders.”*

The Legislature has detailed the Board’s primary powers and duties in [A.R.S. §32-2003](#). In this statute are 18 separate and distinct duties the Board is charged with completing to include, evaluating the qualifications of applicants for licensure and certification, providing for national examinations and establishing passing scores, issuing licenses and certificates, regulating the practice of physical therapy by interpreting the chapter, adopting rules, assessing continuing competence, and maintaining a current list of those persons regulated by the Board among several other duties.

The Legislature established additional requirements of the Board in [A.R.S. § 32-2051](#). These additional requirements include making a list of licensees and certificate holders available to the public and maintaining confidentiality of regulated individuals home address and telephone number and maintaining the confidentiality of investigative material.

## **2. The agency’s effectiveness and efficiency in fulfilling its key statutory objectives and purposes**

The agency meets its objective and purpose through the day-to-day operations with respect to its licensure, certification, and registration processes and outcomes, as well as its regulation of the profession. Specifically, the agency has a history of processing applications for physical therapist licensure, physical therapist assistant certification, business entity registration, and interstate telehealth registration within the time frames mandated by administrative rule (A.A.C. R4-24-209). All applicants and registrants are notified of deficiencies, whenever applicable, and the means by which to make corrections. With few exceptions, application and registration processes are managed online currently through the enterprise solution administered by the Arizona Department of Administration’s Strategic Enterprise Technology. Additionally, to further economize, the Board, since 2019 has delegated authority to grant licensure, certification, and registration pursuant to [A.R.S. § 32-3123](#) to the Board’s executive director.

Further efforts to streamline application and registration processes are currently in development. These include a transition to a new licensure, certification, registration, and complaint platform, Thentia Cloud, as well as an investigation into the Alternate Approval Pathway, a member benefit developed and offered

by the Federation of State Boards of Physical Therapy (FSBPT). The Board's current FSBPT membership agreement and the Alternate Approval Pathway addendum are in review with the State Procurement Office.

Complaints submitted to the Board are reviewed to establish jurisdiction. The Board investigates all complaints over which the agency has jurisdiction, and adjudicates those cases. The agency tracks its numbers of complaints and the time it takes to resolve the complaints either through dismissal, non-disciplinary action, or disciplinary action. Due to unanticipated personnel changes from 2020 to 2021, agency staff are auditing past actions to ascertain whether there are any outstanding compliance requirements that need to be addressed. The Board is in the process of hiring additional investigative personnel to more effectively meet the investigatory demands on the agency.

Finally, the Board establishes case-specific tracking criteria for purposes of monitoring the compliance of licensees, certificate holders, compact privilege holders, and registrants who are under a Board Order or Consent Agreement. Astute compliance monitoring, enhanced by technological tools and advancements, benefits the overall caseload by limiting the number of cases that return to the Board for violation of a Board Order.

**3. The extent to which the agency's key statutory objectives and purposes duplicate the objectives and purposes of other governmental agencies or private enterprises.**

The agency has not identified any other agency (local, state or federal) or private-sector organization with similar or duplicative objectives or purpose as the Arizona State Board of Physical Therapy.

The Board avoids duplication of functions by referring inquiries related to licensing of other professions (e.g. massage therapists, chiropractors) to the appropriate licensing and regulatory entities. The Board also refers complaints over which the Board lacks jurisdiction to investigate and adjudicate, to the appropriate regulatory authority whenever necessary.

**4. The extent to which rules adopted by the agency are consistent with the legislative mandate.**

Arizona Revised Statutes Title 32 Chapter 19 direct all of the agency's rules. The Board's next five-year rules review is scheduled in 2024 and in preparation, an internal evaluation of the agency's rules is being initiated. In 2019, the agency completed the most recent five-year rules review with approval by the Governor's Regulatory Review Council (GRRC). After the Legislature's enactment of the telehealth statutes in 2021, the Board's rules establishing a registration fee and processing time frame for an interstate telehealth provider registration pursuant to [A.R.S. § 36-3606](#) underwent a one-year review in 2022. Those rules were determined by GRRC to be consistent with [A.R.S. § 36-3606](#).

**5. The extent to which the agency has provided appropriate public access to records, meetings, and rulemakings, including soliciting public input in making rules and decisions.**

The Board's website includes a search for licensees, certificate holders, business entities, and interstate telehealth registrants as well as providing disciplinary and non-disciplinary records published in accordance with [A.R.S. 32-3214](#). A "Public" webpage within the Board's website includes a variety of

information relevant to members of the public. A public records request form is available on the home page, contact us, public, and forms pages as well as the name, email, and phone number of the point of contact in accordance with [A.R.S. § 39-171](#). Meetings are open to all and links and a meetings page are available on the Board’s website. The meetings page includes meeting links, agendas, minutes, and audio recordings of the Board’s meetings. Agendas are posted online and in the lobby of the Board’s office a minimum of 24 hours in advance of the meeting but typically several days in advance. Minutes are posted after approval, and audio recordings are posted within 3 days of the meeting. The Board of physical therapy includes two public members allowing for representation of the public “voice” within every matter before the Board. Additionally, the Board’s website makes copies of the statutes and rules governing the practice of physical therapy in Arizona available on almost every page of the website. In FY 23, the Board received 57 public records and directory requests which, on average, were fulfilled within five days. On the occasion that additional time to compile documentation is necessary, the requester is informed accordingly.

The Board’s most recent rulemaking was completed in 2021 under a one-time rulemaking exemption to establish the fee and processing timeframe associated with interstate telehealth provider registration pursuant to [A.R.S. § 36-3606](#). The prior rule package in 2019 established continuing competence requirements for physical therapist assistants in accordance with the adoption of the physical therapy licensure compact [A.R.S. § 32-2053](#). The Board published the proposed rules as required with the Secretary of State’s office, published copies on the Board’s website and held an oral comment meeting for the proposed rules. The Board’s relationship with the professional association afford an additional avenue for disseminating information. Future rule promulgation by the Board of physical therapy will emulate past procedures and adhere to Title 41 Chapter 6 Article 3 of the Arizona Revised Statutes and Title 4 Chapter 24 Article 5 of the Arizona Administrative Code and any other applicable statutes and rules in place at the time of the rule promulgation.

**6. The extent to which the agency timely investigated and resolved complaints that are within its jurisdiction.**

Fiscal Year	# of Complaints Received where Board has Jurisdiction	Jurisdiction Established & Respondent Notified (average # of days)	# of Days to Close (average)	% of Cases Closed in Under 180 Days	Current FTE Participating in Investigations
2020	56	7	245	34%	.75
2021	50	3	156	68%	.75
2022	44	21	213	41%	.25
2023	62 <sup>1</sup>	18	86 <sup>2</sup>	88% <sup>3</sup>	.25

<sup>1</sup> FY23 case load is still in progress. Of 62 complaints 40 have been adjudicated and 22 remain under investigation.

<sup>2</sup> Of the 40 adjudicated complaints in FY23, average days to close was 86

<sup>3</sup> Of the 40 adjudicated complaints in FY23, 88% were closed in under 180 days

The Board endured challenges with timely complaint resolution in recent years due most notably to staffing deficiencies. As a result of the COVID pandemic at the end of FY 2020, one investigator (.25 FTE)



relinquished his position to care for family. The Executive Director at the time, Karen Donahue, PT, DPT assumed much of the investigative duties to help alleviate the investigator deficit. In August 2021 (FY 2022) Dr. Donahue suddenly and unexpectedly passed away. The remaining staff investigator, a .25 FTE employee, became the lead investigator. The Board assigned an Interim Executive Director in September 2021 but the position was not permanently filled until March 2022. The Board's FY 2023 budget request for an additional 0.50 FTE to address the investigative and administrative staffing deficiencies was not granted. The Board then intended to re-hire the previous investigator who left during COVID, but he ultimately chose not to resume his position. The Board is currently seeking to fill an additional 0.50 FTE investigator position.

Additionally, the Board sought additional measures to process and adjudicate complaints more effectively and expeditiously. An analysis of complaint processing between FY2019 and FY2021 found that an average of 32% of cases where discipline was anticipated were routinely voted to a hearing, effectively extending the overall processing timeframes. As a result, whenever possible, the following practices have been implemented:

- Investigative materials are provided to the Board members ten days in advance of a meeting to facilitate a thorough review of the cases to be heard.
- Investigations and exhibits presented at the initial review stage are thorough and typically complete, helping to reduce the Board's need to continue matters by request additional investigation.
- The completed investigative report is offered to the Respondent in advance of the Board's initial review of the case allowing the Respondent ample time to understand the allegations to be considered by the Board.
- Consent agreement are offered whenever the Board feels the investigation provided at the initial review contains sufficient information about the allegations and that discipline is warranted. The Respondent may choose to accept the consent agreement or request a hearing.

As a result of the above measures,

- In FY 2023, as indicated in the chart above, processing times are reducing. To date, the Board heard 45 cases and took final action in 84.4% of them at the initial review stage.
- In FY 2022, only 15.9% of cases were remanded to an Informal or Formal hearing for final action.
- To date, in each case where a consent agreement was offered to a Respondent, that consent agreement was accepted.

While the Board is encouraged by this progress so far, alleviating the current case backlog is a priority and the ability to do so can only be achieved with additional investigative personnel. The Board believes the additional 0.50 FTE investigator will support this goal.

**7. The extent to which the level of regulation exercised by the agency is appropriate as compared to other states or best practices, or both.**

The Board regulates the following and believes that the current level of regulation exercised is appropriate given the agency's statutory mandate to protect the public.

- a. Licensure: Physical Therapists
- b. Certification: Physical Therapist Assistants
- c. PT Compact: Physical Therapist and Physical Therapist Assistant Privilege Holders
- d. Registration: Business Entities and Interstate Telehealth Providers

All jurisdictions in the US license physical therapists, license or certify physical therapist assistants and regulate the practice of physical therapy at the state level. The practice of physical therapy has advanced to include the physical therapy licensure compact as well as interstate telehealth providers. Currently 31 US jurisdictions, including Arizona, are members of the physical therapy compact. Another 14 US jurisdictions have enacted or introduced legislation to become member states. All of the above expands the portability of practice making it vital that each licensing jurisdiction, Arizona included, actively regulates the profession.

Physical therapists are independent healthcare providers to which the public has direct access and they are responsible for evaluation, diagnosis, and treatment of patients. Physical therapist assistants are not independent healthcare providers. They require the supervision of a physical therapist, but do have an expectation of competence and a responsibility of regular communication with their supervising physical therapist regarding every patient and plan of care. Although physical therapy enjoys the ability to engage in telehealth when appropriate, it remains a hands-on practice making public protection paramount.

The Federation of State Boards of Physical Therapy (FSBPT) is the membership organization for regulatory bodies in the United States jurisdictions. Active FSBPT membership and access to their many provided resources, such as, the Licensure Reference Guide and Model Practice Act allow the Board to identify best practices in physical therapy regulation throughout the US, and to benchmark and compare requirements to that of other jurisdictions.

#### **8. The extent to which the agency has established safeguards against possible conflicts of interest.**

As of 2021 the Board was advised to collect a disclosure statement from members and staff on an annual basis. The disclosure form published by the Arizona Department of Administration Human Resources is completed annually by Board members and staff and preserved in a specified file. Any conflict requiring attention would be brought to the Board, Human Resources, the Department of Administration and/or Attorney General as appropriate.

Board staff with procurement responsibilities annually complete a disclosure statement as required by the State Procurement Office.

In matters brought before the Board, members may disclose any conflict of interest and complete a recusal form at any time. Board minutes and audio recordings reflect disclosures and recusals.

**9. The extent to which changes are necessary for the agency to more efficiently and effectively fulfill its key statutory objectives and purposes or to eliminate statutory responsibilities that are no longer necessary.**

With the FSBPT’s publishing of the Model Practice Act (7<sup>th</sup> ed.) the Board is engaging in a crosswalk exercise to compare its existing statute language to that of the newly revised model. The outcome is expected to inform further research and discussion by the Board and engage its stakeholders to consider any potential changes or updates. The Board is also appointing a Rules Committee to assist with the five-year rules review scheduled in 2024. It is anticipated these processes will assist the Board in determining whether statute or rule changes are necessary or desired.

Like many state agencies, the Board is in the process of updating its licensure and complaint platform. The transition from Salesforce to Thentia Cloud is a departure from an enterprise solution to a more agency specific platform. It is anticipated that this software evolution will benefit applicants through a more user-friendly interface, more customization for application instruction and guidance, on-demand access to information and documents, and improved transparency and efficiencies for applicants to address application deficiencies.

The Board will also look to technological advances that may assist in streamlining its many processes. For example, the Board may in the future be able to request an elimination of fees associated with producing duplicate licensure/certification/registration certificates as software systems are able to support on-demand reproductions.

The greatest obstacle to success that the Board is currently facing is a deficit of staffing resources given the level of demands for its services by all stakeholders. The Board is currently allocated a mere 4 FTEs but it regulates more than 9,100 active practitioners and 200 business entities. The variety of pathways to practice in Arizona have expanded as have the corresponding consumer inquiries. The number of Arizona educational facilities has increased to 8 physical therapist programs and 7 physical therapist assistant programs

**10. The extent to which the termination of the agency would significantly affect the public health, safety or welfare.**

The Board is charged with the regulation of the practice of physical therapy in Arizona and termination of the agency would significantly endanger the public’s health, safety and welfare.

As of August 7, 2023, the Board regulates the following active practitioners/registrants and deposits 10% of all Board revenue into the General Fund:

- 6,616 Licensed Physical Therapists
- 2,127 Certified Physical Therapist Assistants
- 7 Registered Interstate Telehealth Providers
- 209 Business Entity Registrants
- 409 Compact Privilege Holders

There are currently seven accredited physical therapy education programs (plus one in development) and seven accredited physical therapist assistant education programs in Arizona.

Terminating the agency would put the public at risk of receiving unqualified and incompetent physical therapy care. Unlicensed individuals practicing as physical therapists or working as physical therapist assistants would not be prevented from practicing and treating the public. The public has a right to know that an individual claiming to provide physical therapy services has completed a standardized level of training, testing, and is held to a level of practice as outlined in statute and rule. Additionally, if the agency were to be terminated, there would be no regulatory complaint investigation and adjudication system that would assure the public that physical therapists and physical therapist assistants who cause harm would be disciplined and rehabilitated for purposes of returning to the safe practice of the profession.

The practice of physical therapy involves a variety of hands-on interventions and techniques. Physical therapists and physical therapist assistants provide orthopedic, neurological, pediatric, and geriatric care (among others) in a variety of settings such as outpatient clinics, inpatient clinics, hospitals, skilled nursing facilities, schools, and patient homes. Physical therapy consumers are located in every Arizona county and can include the most vulnerable populations (e.g. medically fragile infants and children, individuals with neurological conditions, geriatric patients, etc.). Termination of the agency would eliminate the ability for physical therapy consumers and the public at large to inquire about the profession, obtain information about the individual practitioners within the profession, and seek recourse in cases of negative interactions with practitioners.

The licensure and practice of physical therapy is regulated at the state level throughout the US. Third-party payors, responsible for paying benefits on their customer's behalf, follow industry mandates to ensure quality service through appropriate licensure to treat and bill for services. Termination of the Board of physical therapy, and thereby the loss of licensure and certification for physical therapists and physical therapist assistants respectively, would result in the exclusion of coverage for most Arizona residents who would lose access to necessary care.

Termination of the Board of physical therapy would devalue the current Arizona physical therapist license and physical therapist assistant certification in the eyes of other states. Results would include employment loss, economic hardship, and opportunity loss for current practitioners in good standing and limit their license/certificate mobility through compact privileges, telehealth allowances, or additional state licenses. If the Board were to be terminated, Arizona's physical therapists and physical therapist assistants would take their services and expertise to other jurisdictions and leave Arizonans with little to no physical therapy care, including critical rehabilitative and injury prevention care.

The Board of physical therapy investigates numerous complaints every year, including but not limited to, substandard care, unlicensed practice, and sexual misconduct. Without regulatory oversight and an avenue for the public to report such infractions, these practitioners would be allowed to continue inflicting harm on the public. Termination of the Board of physical therapy would result in the state of Arizona having no qualified means of addressing the needs of the public that seek physical therapy services.

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**1. The extent to which the agency potentially creates unexpected negative consequences that may require additional review by the COR, including increasing the price of goods, affecting the availability of services, limiting the abilities of individuals and businesses to operate efficiently and increasing the cost of government.**

The Board understands that any level of regulation will have some impact on the economics of any profession. As such, the Board's application, renewal, and other fees are paid for by the professionals it regulates. The profession pays initial and renewal fees as follows (statutory authority for the fees below are [A.R.S. §§ 32-2029, 36-3606](#), and [32-2030](#) respectively):

- \$120 to \$260 for an application and issuance of an AZ license or certificate
- \$55 to \$160 every two years for the renewal of an active license or certificate
- \$100 (one time) for an initial registration as an interstate telehealth provider
- \$50 for an initial business entities registration if required by [A.R.S. § 32-2030](#)
- \$50 every two years for the renewal of a business entity registration

PT and PTA license/certification fees have remained static, and below the statutory allowed levels, for more than 15 years. Registration fees have remained stable since their inception. The Board's projections reflect there is no need for any license, certification, or registration fee increases.

The cost of regulating physical therapy in Arizona is minimal considering the standards the Board enforces which includes reducing healthcare costs by investigating and adjudicating complaints of unethical or improper billing practices. Without oversight and regulation, it is likely that improperly inflated billing practices would proliferate, thus causing the cost of services to the public and fraud incurred by public and private insurers to increase as a result. The Board's position is that proper, data driven, and evidence-based minimal regulation benefits all stakeholders in ensuring a minimal level of education and competence and an impartial means of resolving issues of substandard, incompetent, or unprofessional practice/conduct. When adjudicating a case, and when appropriate, the Board makes every effort to prescribe corrective action as opposed to discipline. Conversely, over-burdensome regulation can negatively impact the profession, businesses, and the public. The Board does not believe it has created such an environment as evidenced by the continued growth in applications, practitioners, businesses, and educational facilities in the state.

**2. The extent to which the agency has addressed the deficiencies in its enabling statutes.**

The Board's statutes, professional practice, and regulatory authority were enhanced in the following areas through the noted statutes:

- 2014 – Dry Needling ([A.R.S. §§ 32-2001](#) and [32-2044](#))
- 2016 – PT Licensure Compact ([A.R.S. §§ 32-2053](#) and [32-2054](#))

- 2017 – Fingerprint Clearance Card ([A.R.S. § 32-2022](#))
- 2021 – Telehealth ([A.R.S. §§ 36-3601 through 36-3608](#))
- 2022 – Medical Imaging ([A.R.S. §§ 32-2001](#) and [32-2041.01](#))

As mentioned in #7 above, the Board is reviewing the recently published Model Practice Act (7<sup>th</sup> ed.) to determine if statutory deficiencies exist and/or whether statutory updates should be pursued. The state chapter of the American Physical Therapy Association which promotes the advancement of the physical therapy profession in the state is also a resource for the Board regarding practice issues and/or potential updates to statutes and rules.

The Board’s membership agreement with the Federation of State Boards of Physical Therapy (the regulatory body association) is currently under review to determine if technological advancements and/or membership benefits may be leveraged to increase agency efficiency. If so, it may result in the Board seeking future updates if any limiting factors within the Board’s existing statutes are identified.

**3. The extent to which the agency has determined whether the Attorney General or any other agency in Arizona has the authority to prosecute or initiate actions.**

The Board and the Attorney General’s Office (AGO) annually execute an Interagency Service Agreement that specifies “The attorneys will render such legal services as may be necessary to represent and advise (the agency) including, but not limited to litigation for and in defense of (the agency).” The Board will pay the AGO \$60,000 for 0.3 FTE for Assistant Attorney General (AAG) services in FY 2024. The AAG attends all Board meetings and provides legal advice to the agency as needed and/or as prescribed by the interagency agreement. The Arizona Administrative Procedures Act authorizes the AGO to prosecute cases on the Board’s behalf and the Board has not encountered a legal challenge to the contrary.

**4. The consequences of eliminating the agency or consolidating it with another agency.**

The consequences of eliminating the agency is addressed in detail in item 10 above and include negative consequences to the health, safety, and welfare of the public as well as economic impact to the professional practitioners and this state. Consolidating the Board with another agency would reduce if not entirely eliminate the existing subject matter expertise provided to all stakeholders specific to the regulation and adjudication of the practice of physical therapy in this state. The existing seven-member Board is structured to include four professional physical therapist members, one professional physical therapist assistant member, and two public members. The professional members must be residents of Arizona, licensed/certified by the Board of physical therapy and have practiced in the state for a minimum of five years. The current composition of the Board includes professional members engaged in private practice, hospital administration, outpatient administration and compliance, and education, (there are currently two professional PT member vacancies on the Board). This depth and breadth of knowledge specific to the industry and the practice of physical therapy means that the nuances inherent to each case brought to the Board is realized and understood. The professional members on the Board are also able to address practice-based questions from the public members on the Board. Consolidation with another agency will drastically dilute the practice specific expertise of physical therapy regulation.

As a 90/10 agency, the Board contributes to the State's General fund by depositing 10% of all fees collected as well as all civil penalty monies paid by disciplined practitioners.

Agency staff is also well versed in the practice of physical therapy and shares more than 35 years of physical therapy regulatory experience. The Board's investigator is a licensed physical therapist who was also a prior Board member and president. She has profound knowledge of the practice of physical therapy, the laws and rules governing that practice, and Board procedures.

A shift away from the Board's current regulatory structure and consolidation with another agency would be detrimental to the health and safety of the public and the well-being of the regulated professionals in this state. The public, consumers, and practitioners value easy, clear, and recognizable access to information regarding the practice of physical therapy and are frustrated when forced to navigate through a complex and large agency in the process. Consolidation of regulatory agencies has the potential to establish conflicts of interest between related professions which are grouped together under the guise of a common purpose. The Board's autonomous structure is insulated from those same types of conflicts and approaches regulatory issues from the perspective of a singular purpose. Within the structure of a consolidated regulatory agency, it is reasonable to expect that special interests may drive decision-making, risking the prioritization of professional interests above public protection.

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**1. The extent to which the occupational regulation meets the requirements of A.R.S. § 41-3502.**

The Board is the duly constituted authority for licensing and regulating the practice of Physical Therapy in the State of Arizona pursuant to [A.R.S. § 32-2001](#) *et seq* and complies with the provisions of [A.R.S. § 41-3502](#). The Board is prepared to address any findings by the legislature through and/or in conjunction with the Health and Human Services Committee of Reference.

**2. The extent to which the failure to regulate a profession or occupation will result in:**

**a. The loss of insurance.**

Unregulated physical therapists and physical therapist assistants would no longer be able to bill medical insurance for reimbursement for physical therapy services provided. Unregulated physical therapists would no longer be able to acquire and maintain malpractice insurance coverage.

**b. An impact to the ability to practice in other states or as required by federal law.**

Unregulated physical therapists and physical therapist assistants would no longer be able to gain licensure in another state by endorsement from the State of Arizona.

**c. An impact to the required licensure or registration with the federal government.**

Unregulated Arizona physical therapists or physical therapist assistants would be unable to provide physical therapy services through federal programs such as but not limited to Armed Services, Veterans Affairs, Indian Health Services, and Public Health Services.

**d. The loss of constitutionally afforded practices.**

Unregulated physical therapists and physical therapist assistants would no longer be able to practice physical therapy under a physical therapist license or physical therapist assistant certificate.

On behalf of the Arizona State Board of Physical Therapy, I thank you for the opportunity to respond to these factors and questions. If you have additional questions, or require clarification, please contact me at [judy.chepeus@ptboard.az.gov](mailto:judy.chepeus@ptboard.az.gov) or 602-271-7365.

Best Regards,

A handwritten signature in cursive script that reads "Judy Chepeus".

Judy Chepeus  
Executive Director

cc: Michael Madden, Arizona State Senate  
Ahjahna Graham, House Health and Human Services Committee, Analyst