

BOPT, WV <wvbopt@wv.gov>

Re: Response to Submitted Rule Change

1 message

BOPT, WV <wvbopt@wv.gov>
To: Alex Beelen <albeelen@gmail.com>

Tue, Aug 5, 2025 at 9:37 AM

Alex,

The West Virginia Board of Physical Therapy has reviewed your comment and has decided to remove the 1,000-hour clinical experience requirement for new PTA graduates. PTA's are allowed to be supervised under general supervision in all practice settings with out restrictions.

After careful consideration and discussion, the Board concluded that this regulation could create unnecessary barriers to patient access to physical therapy services. As a result, it has been rescinded.

Thank you for your input and engagement in the regulatory process.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

2 Players Club Drive Suite 102

Charleston, WV 25311

Office Ph# (304) 558-0367

Fax# (304) 957-0400

wvbopt.wv.gov

**Disclaimer:**

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On Wed, Jun 18, 2025 at 10:26 AM Alex Beelen <albeelen@gmail.com> wrote:

I must've misread the proposed rule change. I thought it was referring to the general supervision between PTs and PTAs. I do not have any statement regarding the 1000 hours of clinical experience.

On Wed, Jun 18, 2025 at 10:23 AM BOPT, WV <wvbopt@wv.gov> wrote:

Are you not in support of the general supervision after the 1000 hours of clinical experience for a new graduate or you are in support of it?

The general supervision is still there we just put in that a new grad still needs the 1000 hours of clinical experience prior to general supervision but allowing exceptions to this rule.

Thank you,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

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On Wed, Jun 18, 2025 at 10:16 AM Alex Beelen <albeelen@gmail.com> wrote:

Sorry for the confusion, I was referring to the changes in general supervision amongst the PTs and PTAs.

On Wed, Jun 18, 2025 at 10:09 AM BOPT, WV <wvbopt@wv.gov> wrote:

Alex,

I'm not sure I'm understanding your comment. In the first part you say you're in full agreement but then the rest I'm not sure. Can you please clarify?

Are you referring to the 1000 hour requirement for new grads to have 1000 hours of clinical experience working under a PT with onsite supervision?

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

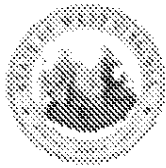
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On Tue, Jun 17, 2025 at 4:50 PM Alex Beelen <alexbeelen@gmail.com> wrote:
Dear Nonnie Holcomb,

I'm in full agreement to change that rule as this further complicates treatment in delegating to PTAs. If there is anything I can do to help amend this rule, I'd be glad to help.

Thanks,

Alex Beelen



BOPT, WV <wvbopt@wv.gov>

Re: Letter Regarding Emergency Rule Change

1 message

BOPT, WV <wvbopt@wv.gov>

Tue, Aug 5, 2025 at 9:58 AM

To: "Dale, Brandon" <brandon.dale@powerbackrehab.com>

Brandon,

The WV Board of Physical Therapy has reviewed your comment and has decided to incorporate your response in its decision. The Board has decided to remove the 1,000-hour clinical experience requirement for new PTA graduates. PTAs are allowed to be supervised under general supervision in all practice settings without restrictions.

After careful consideration and discussion, the Board concluded that this regulation could create unnecessary barriers to patient access to physical therapy services. As a result, it has been rescinded.

Thank you for your input and engagement in the regulatory process.

Sincerely,

Nonnie S. Holcomb

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On Sat, Jun 21, 2025 at 10:35 AM Dale, Brandon <brandon.dale@powerbackrehab.com> wrote:

Hello Included are my comments regarding the emergency rule change.

This e-mail and any attachments may contain information which is confidential, proprietary, privileged or otherwise protected by law. The information is solely intended for the named addressee (or a person responsible for delivering it

8/5/25, 9:59 AM

State of West Virginia Mail - Re: Letter Regarding Emergency Rule Change

to the addressee). If you are not the intended recipient of this message, you are not authorized to read, print, retain, copy or disseminate this message or any part of it. If you have received this e-mail in error, please notify the sender immediately by return e-mail and delete it from your computer.

Brandon Dale, PT, DPT
Board-Certified Clinical Specialist in Geriatric Physical Therapy

West Virginia Board of Physical Therapy
2 Players Club Drive, Suite 102
Charleston, WV 25311

To West Virginia Board of Physical Therapy,

I am writing to express my support for the adoption of general supervision for Physical Therapist Assistants (PTAs) in alignment with Medicare guidelines. As a licensed Physical Therapist practicing in West Virginia, I strongly believe that allowing PTAs to work under general supervision without requiring a Physical Therapist to be onsite can greatly enhance access to timely, high-quality care, particularly in underserved and rural areas across our state.

However, I am deeply concerned about the Board's proposal to restrict general supervision only to PTAs who have completed 1,000 clinical hours, regardless of setting. I respectfully urge the Board to reconsider this requirement.

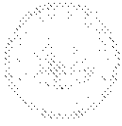
Requiring 1,000 hours of clinical work before a PTA can function under general supervision introduces a barrier that is not evidence-based and may lead to unintended consequences. Specifically, this rule risks limiting access to essential physical therapy services in regions already struggling with healthcare workforce shortages. In many rural communities, PTAs are key providers of care, and unnecessary restrictions could delay rehabilitation, increase healthcare costs, and worsen patient outcomes.

Medicare, which sets the standard for safe and effective PTA utilization nationally, does not impose an experience threshold for general supervision. Aligning with these established guidelines ensures consistency, promotes workforce flexibility, and helps meet the needs of our diverse patient population without compromising safety or quality.

I fully support accountability and competency in our profession. However, competence should be assessed by the supervising Physical Therapist and through the PTA's licensing and education—not by an arbitrary hour threshold. Let us trust in the training, licensure, and judgment of our colleagues, and avoid over-regulating in ways that harm public access.

Thank you for your consideration of this important issue. I appreciate the Board's efforts to advance our profession and protect public health, and I encourage a balanced approach that prioritizes both quality care and access for all West Virginians.

Sincerely,
Brandon Dale, PT, DPT



Holcomb, Nonnie S <nonnie.s.holcomb@wv.gov>

Re: Comment period

1 message

Holcomb, Nonnie S <nonnie.s.holcomb@wv.gov>

Tue, Aug 5, 2025 at 10:46 AM

To: Ettore Hector Pittore <ettoreccc@gmail.com>

Ettore,

Thank you for your comment and concern. After reviewing your comment the Board will not be including this within our agency approved rule at this time.

Myofascial release is permitted in practice, provided it is within the scope of your education and training. There are no specific restrictions or additional requirements to perform this technique beyond appropriate education.

Thank you for your input and engagement in the regulatory process.

Sincerely,

*Nonnie S. Holcomb**Executive Director***WV Board of Physical Therapy****2 Players Club Drive Suite 102****Charleston, WV 25311****Office Ph# (304) 558-0367****Fax# (304) 957-0400***wvbopt.wv.gov***Disclaimer:**

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On Mon, Jul 7, 2025 at 10:32 AM Ettore Hector Pittore <ettorepcc@gmail.com> wrote:

Good morning,

I am a licensed PT in WV since 1991. I reviewed the proposed updates, but I was not able to locate anywhere in the description of the role of a Physical Therapist anything related to Myofascial Release treatment by way of Soft Tissue Mobilization (superficial and deep approach) using digits, palm, hand, forearm elbow or Tool assisted. We as Physical therapists have "spilled over" into other fields with the expansion of our skills (chiropractic/ massage therapy/ Athletic training/ exercise physiology, etc), BUT, we are THE ONLY PROFESSIONALS THAT ADDRESS SOFT TISSUE MOBILIZATION at the skilled set level we do. If this is not clarified in the edits, my entire career (34 out of 35 years) dedicated to soft tissue disorders would be completely negated. PLEASE, reconsider this compelling input,

Sincerely,

Ettore Pittore, PT

WV Lic 0970



BOPT, WV <wvbopt@wv.gov>

Re: General supervision rule change

1 message

BOPT, WV <wvbopt@wv.gov>

Tue, Aug 5, 2025 at 9:53 AM

To: jennifer sauls <jrsauls1991@yahoo.com>

Jennifer,

The WV Board of Physical Therapy has reviewed your comment and after careful consideration the Board has decided to remove the 1000-hour requirement of clinical experience for new PTA graduates. All PTA's are allowed to be supervised under general supervision in all practice settings without restrictions.

After careful consideration and discussion of public comments received, the Board concluded that this regulation could create unnecessary barriers to patient access to physical therapy services. As a result, it has been rescinded.

Thank you for your input and engagement in the regulatory process. If you have any questions, please feel free to reach out.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

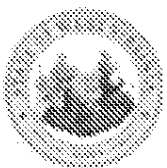
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On Wed, Jun 18, 2025 at 6:29 PM jennifer sauls <jrsauls1991@yahoo.com> wrote:

Yes I definitely feel that they should still have 1,000 hours before general supervision in any setting.

Yahoo Mail: Search, Organize, Conquer

On Wed, Jun 18, 2025 at 3:48 PM, BOPT, WV <wvbopt@wv.gov> wrote:

We have submitted rules changes for the 2026 Legislative Session which included modifying part of the requirements for general supervision. We filed an emergency rule amendment which was approved back in February allowing for general supervision to be utilized in all practice settings (this is currently still in place). However, when we submitted this rule change the 1000 hours of supervision was taken out. After much discussion, the Board thought that in order to protect the public best that we should keep the 1000 hours of clinical experience for a new grad before allowing general supervision. We have allowed for allowing this requirement to be waived under certain requirements.

Please let us know your thoughts and if you have thoughts on any of the other rule changes. Hope you have a great day!

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

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On Wed, Jun 18, 2025 at 3:18 PM jennifer sauls <jrsauls1991@yahoo.com> wrote:

Oh, I thought this was about where outpatient supervision was changed to general vs direct, I forgot that only had to do with Medicare. I do think the 1,000 hours is a good thing though for a new grad to be supervised for, yes.

Yahoo Mail: Search, Organize, Conquer

On Wed, Jun 18, 2025 at 1:29 PM, BOPT, WV
<wvbopt@wv.gov> wrote:

Jennifer,

Thank you for your comment. I just wanted to clarify what you're referring to as a good decision. Are you referring to putting back in the 1000 hours of clinical supervision for a newly graduated PTA before general supervision may be utilized?

Thank you for your time!

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

2 Players Club Drive Suite 102

Charleston, WV 25311

Office Ph# (304) 558-0367

Fax# (304) 957-0400

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On Wed, Jun 18, 2025 at 10:42 AM jennifer sauls <jrsauls1991@yahoo.com> wrote:

I think this is a very good decision because it has never made sense to me why I could see patients in a nursing home or people working home health as New grads could go to people's homes without a PT on site but in the least critical of patients in the Physical Therapy realm couldn't be seen without a PT in the building. It felt kind of demeaning honestly.

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BOPT, WV <wvbopt@wv.gov>

Re: Public Comment Period

1 message

BOPT, WV <wvbopt@wv.gov>

Tue, Aug 5, 2025 at 9:48 AM

To: Mary Tolley Rhodes <marytrhodes@gmail.com>

Mary,

Thank you for your comment and concern. The West Virginia Board of Physical Therapy has reviewed your feedback regarding the proposed rule change.

The proposed rule change was for newly graduated PTA's not seasoned PTA's. However, the Board has proceeded with removing the 1000-hour requirement of clinical experience for new PTA graduates. We have left in place that general supervision may be utilized in all practice settings without restrictions.

§16-1-10.2. will now read as follows: 9-2-10.2. ~~Supervision requirements of a physical therapist assistant depend upon the practice setting in which the care is delivered. In all practice settings general supervision is required.~~

After careful consideration and discussion, the Board concluded that this regulation could create unnecessary barriers to patient access to physical therapy services. As a result, it has been rescinded.

Thank you for your input and engagement in the regulatory process.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

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Charleston, WV 25311

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On Tue, Jun 17, 2025 at 5:45 PM Mary Tolley Rhodes <maryrhodes@gmail.com> wrote:
I am asking for clarification on the supervision of PTAs specifically on 10.2.

~~9.2.10.2. Supervision requirements of a physical therapist assistant depend upon the practice setting in which the care is delivered: A physical therapist assistant (PTA) may transition from direct supervision to general supervision in all practice settings after completing 1,000 hours of clinical experience under direct supervision by a licensed physical therapist (PT). These hours must be documented and verified by the supervising physical therapists (PT).~~

I understand that the transition to general supervision is keeping with current Medicare guidelines. I am finding this statement however to be unclear. Is it that the PTA as a new grad needs 1000 hours of direct supervision hours or that a PTA in any newly hired position at any point in their career needs 1,000 hours of direct supervision? The latter would leave seasoned PTAs at a great disadvantage and create incredible difficulties for home based service, ie home health or early intervention. 1,000 hours is 6 months of work which will leave home health companies unable to find or staff an adequate number of therapy services if PTAs have to be under direct supervision for 6 months. Can you please clarify the intent of this proposed change and also consider better wording to make that intent clear.

Thanks,
Mary Tolley Rhodes, PT, MPT

On Tue, Jun 17, 2025 at 3:17 PM BOPT, WV <wvbopt@wv.gov> wrote:

Hello,

The West Virginia Board of Physical Therapy has submitted a rule change for Title 16, Series 1 -- General Provisions for Physical Therapists and Physical Therapist Assistants.

To review the rule change, click: [View Rule](#)

The public comment period begins today and ends on July 17, 2025, at 3:00 p.m.

To provide comments or feedback, email the Board at wvbopt@wv.gov or nonnie.s.holcomb@wv.gov.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

2 Players Club Drive Suite 102

Charleston, WV 25311

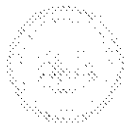
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BOPT, WV <wvbopt@wv.gov>

Re: Public Comment Period

1 message

BOPT, WV <wvbopt@wv.gov>

Tue, Aug 5, 2025 at 10:12 AM

To: Mick Bates <mbates@bodyworkshfr.com>

Mick,

Thank you for your comments and concerns. The Board has carefully reviewed your feedback and has chosen to incorporate your suggestions into the final rule.

First, we appreciate your support of the jurisprudence requirement. The Board believes this addition will help new applicants and licensees gain a stronger understanding of the rules and regulations governing the practice of physical therapy in West Virginia.

Second, after thorough discussion and consideration, the Board has removed the 1,000-hour clinical experience requirement for newly graduated PTAs. It was determined that this requirement could pose unnecessary barriers to patient access to physical therapy services. As such, it has been rescinded. PTAs may continue to be supervised under general supervision in all practice settings without restriction.

Thank you for your input and engagement in the regulatory process. It is greatly appreciated.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

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On Thu, Jul 17, 2025 at 1:57 PM Mick Bates <mbates@bodyworkshfr.com> wrote:

Good afternoon.

Please see attached and accept this my public comments with regards to the proposed rule.

Thank you. If you could acknowledge receipt it would be appreciated.

Thank you.

Mick.

From: BOPT, WV <wvbopt@wv.gov>
Sent: Wednesday, June 18, 2025 10:30 AM
To: WV BOPT <wvbopt@wv.gov>
Subject: Public Comment Period

Warning: Unusual sender <wvbopt@wv.gov>

You don't usually receive emails from this address. Make sure you trust this sender before taking any actions.

Hello,

The West Virginia Board of Physical Therapy has submitted a rule change for Title 16, Series 1 -- General Provisions for Physical Therapists and Physical Therapist Assistants.

To review the rule change, click: [View Rule](#)

The public comment period ends on July 17, 2025, at 3:00 p.m.

To provide comments or feedback, email the Board at wvbopt@wv.gov or nonnie.s.holcomb@wv.gov.

Sincerely,

Nonnie S. Holcomb

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Public Comment Regarding

TITLE 16 LEGISLATIVE RULE WV BOARD OF PT

SERIES 1 GENERAL PROVISIONS PHYSICAL THERAPIST AND PHYSICAL THERAPIST ASSISTANT

07/16/25 - Submitted by Email

Esteemed members and staff of the West Virginia Board of Physical Therapy

First. Thank you for your prompt action earlier in the year promulgating the emergency rule. Your action has made supervisory standards for Physical Therapist Assistants consistent with federal regulations and Medicare coverage policies and across all clinical settings.

Since February, I have had personal experience and have heard from several of my colleagues that emergency rule has improved access to care in areas of the state that are chronically underserved and have healthcare work force shortages without compromising the quality of care for patients or endangering the public. It has reduced the administrative burden of scheduling and provided employment opportunities for new graduate Physical Therapist that did not exist prior to your action.

Second. I support the addition of a jurisprudence requirement for licensure and renewal. In my 30 plus years' experience there is a general lack of awareness of WV state law and regulation among practicing Physical Therapist and Assistant professionals. While ignorance of the law is not a defense. A better understanding of these laws and rules would decrease the likelihood of unintended or unreported instances of violation of safe professional standards. This protects the public and in doing so promotes and strengthens the profession. It protects practicing Physical Therapist and Assistance from employers that wish to exploit ignorant and inexperienced clinicians by placing them in unsafe supervisory and treatment situations for economic gain. It also removes ignorance as an excuse from the few bad actors that endanger the public and profession.

Finally. I oppose reinstatement of the additional 1000 hours of direct supervised post-graduation experience and licensure for the Physical Therapist Assistant for the following reasons.

1. The additional 1000 hours standard is an arbitrary standard. There is no evidence to suggest that this or any other number of hours is needed to practice without direct supervision.
2. Physical Therapist Assistant graduates from a CAPTE accredited program that establishes a standard for "entry level" competency.

3. Physical Therapist Assistant passes a national board examination to demonstrate that they have the base level of knowledge to be licensed.
4. The Physical Therapist is responsible for the care provided under his or her supervision. As such, they need to determine the individual needs of the patient under their care and the individual competency those they supervising to see those individual patients with general rather than direct supervision
5. The additional 1000 hours standard does not exist in federal regulation
6. The additional 1000 hours standard does not exist in any surrounding jurisdictions and neighboring states
7. This standard cannot be practically meet in setting such as school-based care and home health where the Physical Therapist is not generally present when care is provided or at times such as weekend coverage for skilled nursing and acute care settings
8. This standard reduces the employment opportunities for new graduate Physical Therapists, increases the cost of employing these graduates and the administrative burden on supervising Physical Therapists

As such, I would respectfully recommend and request that Section 16-1-10.2 and 16-1-10.5 be removed from the proposed rule.

With this change, other than a few non-substantive stylist and grammatical changes, I could fully support the rule and would encourage others to do so. I would be happy to provide any additional information you require and work collaboratively with the board on language.

I intend to follow the rules through the legislative process and will share my position with members of the legislative rule making review committee and the House and Senate at the appropriate time.

In closing, West Virginia Governor Patrick Morrissey has said time and time again that one of his main focuses is making the state more economically competitive with bordering states, calling this initiative the "Backyard Brawl."

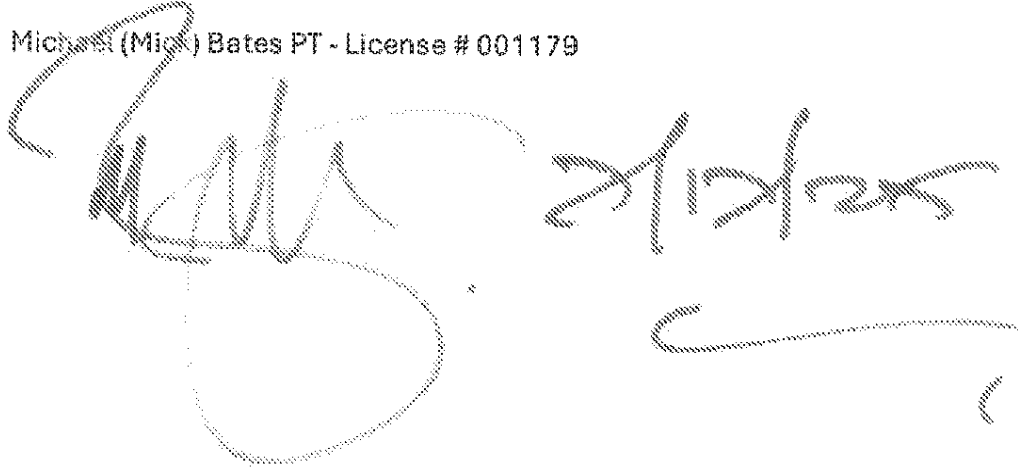
[Gov. Morrissey gives details on 'Backyard Brawl' to bring economic growth - WV Chamber of Commerce - January 24th, 2025](#)

In February, the West Virginia Board of Physical Therapy took action to do just that, while being true to its core function of protecting the public. Now is not the time to take a step in the opposite direction.

Thank you for your consideration of these comments and your service to the public, the profession of Physical Therapy, and the State of West Virginia.

Respectfully Submitted

Michael (Mick) Bates PT - License # 001179

A handwritten signature in black ink, appearing to read "Mick Bates", is written over the typed name. The signature is stylized and cursive, with a large loop at the end.



BOPT, WV <wvbopt@wv.gov>

Re: [EXTERNAL] Re: General provision comment

1 message

BOPT, WV <wvbopt@wv.gov>

Wed, Jun 25, 2025 at 8:42 AM

To: Michael Bonar <Michael.Bonar@chhi.org>

Michael,

That part I'm not sure about yet since we still do have some time to work out everything. My thoughts are that for renewals it will be a part of your renewal with no additional fee. It will be just an additional step within your renewal application. We may do something different with initial licensure and compact licensure but this is all things that will be worked out once the rule has passed. If you have any other questions about anything just let me know.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

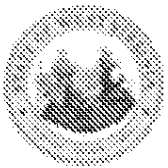
2 Players Club Drive Suite 102

Charleston, WV 25311

Office Ph# (304) 558-0367

Fax# (304) 957-0400

wvbopt.wv.gov

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On Fri, Jun 20, 2025 at 9:58 AM Michael Bonar <Michael.Bonar@chhi.org> wrote:

Thank you, that does clear things up. One final question. Would the exam be part of the license renewal fee or a separate fee?

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From: BOPT, WV <wvbopt@wv.gov>
Sent: Thursday, June 19, 2025 11:23:26 AM
To: Michael Bonar <Michael.Bonar@chhl.org>
Subject: [EXTERNAL] Re: General provision comment

Michael,

Unfortunately, the Board has a large amount of people who haven't looked over the rules and some have no idea certain ones exist and that includes seasoned PT's and PTA's. The board felt like this would be a good refresher for people every couple years to look over the rules and it's completely open book.

With rules changing from time to time it helps with that too. While we understand there are some who read the statute and rules knowing them very well there's a large amount of questions we get asked when the answers are perfectly clear in the rules had they looked at them.

I hope this provided a little better understanding.

Thank you,

Nonnie S. Holcomb

Executive Director

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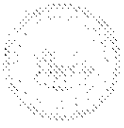
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On Thu, Jun 19, 2025 at 11:15 AM Michael Bonar <Michael.Bonar@chhl.org> wrote:

Good morning. I would like some clarification as to why there is verbiage to start jurisprudence exams for license renewals. I can see reactivation or initial licensure needing to be tested, but I don't really see the need to test the knowledge of active therapists. I appreciate any insight you can provide.

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Holcomb, Nonnie S <nonnie.s.holcomb@wv.gov>

Re: Comment Rule Change for Title 16, Series 1 - General Provisions for Physical Therapist and Physical Therapist Assistant

1 message

Holcomb, Nonnie S <nonnie.s.holcomb@wv.gov>
To: "Davis, Scott" <davis1090@marshall.edu>

Tue, Aug 5, 2025 at 10:32 AM

Scott,

Thank you for your comments and concerns. The Board has carefully reviewed your feedback and has chosen not to incorporate your suggestions into the agency approved rule regarding the definition of "Physical therapist assistant patient/client relationship". 2.19. "Physical therapist assistant-patient/client relationship" means the formal or inferred relationship entered into by the mutual consent between a licensed physical therapist assistant and a patient/client or their legally authorized representative established once the physical therapist assistant assumes or undertakes the care or treatment of a patient/client and continues until either the patient/client is discharged or treatment is formally transferred to another practitioner or as further defined by rule.

Commentary: Clearly defining the physical therapist assistant-patient/client relationship is important to clarify the professional boundary that must exist for objectivity in care. It is important to understand the inherent power dynamic in a clinician-patient relationship—regardless of gender or patient condition, this dynamic is real and powerful. The power differential between the physical therapist assistant and patient/client exists because the physical therapist assistant has knowledge and skills needed by the patient/client, access to personal medical information, and the patient/client's reliance on them for establishing boundaries in care. That power differential may continue after the end of formal treatment sessions, and boards should develop appropriate standards to protect the public even when the relationship may appear to be mutually consensual. Physical therapist assistants cannot have a relationship with someone who may still be vulnerable to the power imbalance. Additionally, discharging a patient only to have a relationship with them would also not be acceptable and is noted in some administrative codes.

This definition was added while reviewing the Federation of State Boards of Physical Therapy's model practice act that all states in the U.S, plus several additional jurisdictions including D.C., Puerto Rico, U.S. Virgin Islands etc. rely on for the most up to date information. The FSBPT is a national organization that includes member boards such as ourselves along with other jurisdictions. The model practice act was developed to have more uniformity across all physical therapy boards in the U.S. and other jurisdictions. Many states have adopted the language developed within the model practice act.

As always, thank you for your input and engagement in the regulatory process.

Sincerely,

Nonnie S. Holcomb

Executive Director

WV Board of Physical Therapy

2 Players Club Drive Suite 102

Charleston, WV 25311

Office Ph# (304) 558-0367

Fax# (304) 957-0400

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On Wed, Jun 18, 2025 at 12:29 PM Holcomb, Nonnie S <nonnie.s.holcomb@wv.gov> wrote:
Scott,

The "Physical therapist assistant-patient/client relationship" definition was taken from the Federation of State Boards of Physical Therapy's Model Practice Act. I've provided their commentary below regarding this definition. We will take your recommendation into consideration after the comment period has ended before filing our agency approved rule.

12. "Physical therapist assistant-patient/client relationship" means the formal or inferred relationship entered into by mutual consent between a licensed [certified] physical therapist assistant and a patient/client or their legally authorized representative established once the physical therapist assistant assumes or undertakes the care or treatment of a patient/client and continues until either the patient/client is discharged or treatment is formally transferred to another practitioner or as further defined by rule.

Commentary: Clearly defining the physical therapist assistant-patient/client relationship is important to clarify the professional boundary that must exist for objectivity in care. It is important to understand the inherent power dynamic in a clinician-patient relationship—regardless of gender or patient condition, this dynamic is real and powerful. The power differential between the physical therapist assistant and patient/client exists because the physical therapist assistant has knowledge and skills needed by the patient/client, access to personal medical information, and the patient/client's reliance on them for establishing boundaries in care. That power differential may continue after the end of formal treatment sessions, and boards should develop appropriate standards to protect the public even when the relationship may appear to be mutually consensual. Physical therapist assistants cannot have a relationship with someone who may still be vulnerable to the power imbalance. Additionally, discharging a patient only to have a relationship with them would also not be acceptable and is noted in some administrative codes.

Thank you,

Nonnie S. Holcomb

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Isaiah 55:8-9

On Wed, Jun 18, 2025 at 12:10 PM Davis, Scott <davis1080@marshall.edu> wrote:

Nonnie,

I have a few concerns regarding the recent rule changes, specifically with the language used in section 2.19:

2.19. ...physical therapist assistant assumes or undertakes the care or treatment of a patient/client and continues

I am concerned with the use of the terms "assumes," "undertakes," and "care" in this context. These terms imply that the physical therapist assistant (PTA) is responsible for the overall care of the patient/client, which is not consistent with the established roles and responsibilities in clinical practice.

The **physical therapist (PT)** is solely responsible for the **care** of the patient/client. This includes establishing the plan of care and assuming professional responsibility for clinical decisions. The **PTA** may provide **treatment interventions** as delegated by the PT, but does **not assume or undertake the care** of the patient.

I recommend the following revised wording for clarity and accuracy:

2.19. ...physical therapist assistant provides treatment to the patient/client under the supervision of the physical therapist, based on the established plan of care, and continues

This revision aligns with **Section 2.7**, which defines general supervision as the process by which a physical therapist oversees and directs safe and effective delivery of care through appropriate verbal, written, or electronic communication.

Thank you for considering this clarification.

Scott

D. Scott Davis PT, MS, EdD
Chair/Program Director/Professor
School of Physical Therapy
Board Certified Orthopaedic Physical Therapist 1995-2025

