



HEIN GOVERNMENTAL CONSULTING, LLC

5845 SW 29th Street Topeka, KS 66614-2462
Phone 785-273-1441 Fax 785-273-9243 WWW.HEINGC.COM

Testimony Re: SB 490
Senate Public Health and Welfare Committee
Presented by Ronald R. Hein
on behalf of
Kansas Physical Therapy Association
March 9, 2016

Mister Chairman, Members of the Committee:

My name is Ron Hein, and I am legislative counsel for the Kansas Physical Therapy Association. The Kansas Physical Therapy Association (KPTA) is a non-profit professional association representing physical therapists, physical therapist assistants who are licensed to practice in Kansas, and Kansas physical therapist students and physical therapist assistant students. KPTA is a chapter of the American Physical Therapy Association (APTA), the national professional organization representing more than 93,000 members.

I would like to give you a background on the acupuncture and dry needling issue. In 2011, the acupuncturists introduced legislation, which ultimately did not pass. That legislation exempted PTs operating within their scope of practice. The physical therapists did not oppose that legislation. The acupuncturists then began the credentialing process before KDHE. In their application, they sought approval for acupuncture, but did not seek dry needling, intramuscular therapy, or trigger therapy, to the best of my knowledge based upon our review of their application. They did not fulfill the credentialing process provided by statute, as their application for licensure was ultimately rejected by the Secretary of KDHE.

Then in 2016, the acupuncturists introduced SB 363. That bill did not exempt PTs as the 2011 legislation did, but the bill also sought ability to perform 3 activities which have been part of the scope of practice of PTs, dry needling, intramuscular therapy, and trigger point therapy. The Kansas bill would be the only bill in the nation which permits acupuncturists to perform all 3 activities, which traditionally have not been part of the scope of practice of acupuncturists. There has been no testimony presented by them to justify why these terms were added to their bill or to present evidence of their specific training in these Western medicine procedures.

Since these terms would negatively impact the current physical therapy scope of practice by forcing PTs to stop providing those procedures on patients, KPTA testified against SB 363, and indicated that they would be neutral if the bill was amended to exempt PTs operating within their scope of practice, and to clarify that dry needling is within their scope of practice. Other conferees will speak to that fact.

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We understand that the acupuncturists spoke to numerous healthcare providers prior to introduction of their bill, but they did not contact the KPTA. When the bill was introduced, we requested an opportunity to meet with them through communications with their lobbyist. We specifically requested two meetings with the acupuncturists to discuss our differences, and they refused to meet at the first instance, and canceled a meeting we had established for a second meeting 2 hours before the meeting. Thus we have not been able to learn why the acupuncturists are attacking the PTs or to determine when they decided to add our procedures to their scope of practice without allowing PTs to continue to perform such procedures for patients of such PTs.

Sen. Laura Kelly was to present an amendment to SB 363 in committee, but when the bill was worked in committee, both she and the revisor who drafted the amendment were not present, and thus the bill went to the floor without addressing the PT concerns. Several Senators informed us that the concerns would be addressed on the Senate floor. When SB 363 was debated on the Senate floor, Sen. Garrett Love offered the PT amendment to SB. 363.

This bill has been introduced to permit us to address the issue of clarifying that dry needling is, indeed, within the PT scope of practice, apparently rather than including that provision within the provisions of SB 363. The concern which KPTA has is that if SB 363 passes, and this bill does not, then many PTs will have to stop providing dry needling to their patients, and those patients will be denied those services.

And, even if this bill does pass, PTs would be violating the acupuncturists bill if SB 363 is not amended to provide an exemption for PTs operating within their scope of practice.

We urge the committee to pass this bill and to amend SB 363 with an exemption for PTs, or to place both of those provisions in SB 363, which would insure that SB 363 does not pass without this bill passing as well.

I have also attached to my testimony a compilation of statements from patients of PTs who are currently receiving dry needling who are expressing satisfaction with the treatment by their PTs, and commenting on their support for dry needling being within the scope of practice of PTs and/or opposing SB 363 unless it exempts PTs.

Thank you very much for permitting me to testify, and I will be happy to yield to questions.