| IC 25-27 | ARTICLE 27. | PHYSICAL | THERAPISTS |
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| Ch. 1. | Regulation of Physical Therapists |
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| Ch. 2. | Physical Therapy Licensure Compact |

IC 25-27-1 Chapter 1. Regulation of Physical Therapists

| 25-27-1-1 | Definitions |
|--------------|--|
| 25-27-1-2 | Unlawful practices; providing mandated school services |
| 25-27-1-2.5 | Evaluations and treatment without referral; exceptions; testing certification |
| 25-27-1-3 | Repealed |
| 25-27-1-3.1 | Practice of certain occupations or professions and first aid not prohibited |
| 25-27-1-3.3 | Exempt persons |
| 25-27-1-3.5 | Sharp debridement referral |
| 25-27-1-4 | Indiana board of physical therapy |
| 25-27-1-5 | Determination of qualifications; administration of examinations; standards for |
| | competent practice |
| 25-27-1-6 | Evidence of qualification |
| 25-27-1-6.1 | Requirements for physical therapist license |
| 25-27-1-6.2 | Requirements for physical therapist educated outside of the United States |
| 25-27-1-6.3 | Requirements for physical therapist assistant certificate |
| 25-27-1-6.4 | Requirements for physical therapist assistant educated outside of the United |
| | States |
| 25-27-1-7 | Examination; reexamination; examination security |
| 25-27-1-8 | Issuance of license; renewal; reinstatement; temporary nonrenewable permit; |
| | retirement from practice |
| 25-27-1-9 | Foreign applicants; license or certificate by endorsement; fee |
| 25-27-1-10 | Repealed |
| 25-27-1-10.1 | Repealed |
| 25-27-1-11 | Refund of fees |
| 25-27-1-12 | Violation of chapter; penalties |
| 25-27-1-13 | Physical therapist duties; supervision |
| 25-27-1-14 | Documentation and billing |
| 25-27-1-15 | Physical therapy plan of care |
| 25-27-1-16 | Standards of practice |
| 25-27-1-17 | Confidentiality; exceptions |
| 25-27-1-18 | License and certificate display and verification |
| 25-27-1-19 | Transfer of rules, duties, and records |
| | |

IC 25-27-1-1 Definitions

Sec. 1. For the purposes of this chapter:

(1) "Physical therapy" means the care and services provided by or under the direction and supervision of a physical therapist that includes any of the following:

(A) Examining, evaluating, and conduct testing (as defined in subdivision (16)) on patients with mechanical, physiological, or developmental impairments, functional limitations, and disabilities or other health and movement related conditions in order to determine a physical therapy diagnosis.

(B) Alleviating impairments, functional limitations, and disabilities by designing, implementing, and modifying treatment interventions that may include therapeutic exercise, functional training in home, community, or work integration or reintegration that is related to physical movement and mobility, manual therapy, including soft tissue and joint mobilization or manipulation, therapeutic massage, prescription, application, and fabrication of assistive, adaptive, orthotic, protective, and supportive devices and equipment, including prescription and application of prosthetic devices and equipment, airway clearance techniques, integumentary protection and repair techniques, debridement and wound care, physical agents or modalities, mechanical and electrotherapeutic modalities, and patient related

instruction.

(C) Using solid filiform needles to treat neuromusculoskeletal pain and dysfunction (dry needling), after completing board approved continuing education and complying with applicable board rules. However, a physical therapist may not engage in the practice of acupuncture (as defined in IC 25-2.5-1-5) unless the physical therapist is licensed under IC 25-2.5.

(D) Reducing the risk of injury, impairment, functional limitation, and disability, including the promotion and maintenance of fitness, health, and wellness in populations of all ages.

(E) Engaging in administration, consultation, education, and research.

(2) "Physical therapist" means a person who is licensed under this chapter to practice physical therapy.

(3) "Physical therapist assistant" means a person who:

(A) is certified under this chapter; and

(B) assists a physical therapist in selected components of physical therapy treatment interventions.

(4) "Board" refers to the Indiana board of physical therapy.

(5) "Physical therapy aide" means support personnel who perform designated tasks related to the operation of physical therapy services.

(6) "Person" means an individual.

(7) "Sharp debridement" means the removal of foreign material or dead tissue from or around a wound, without anesthesia and with generally no bleeding, through the use of:

(A) a sterile scalpel;

(B) scissors;

(C) forceps;

(D) tweezers; or

(E) other sharp medical instruments;

in order to expose healthy tissue, prevent infection, and promote healing.

(8) "Spinal manipulation" means a method of skillful and beneficial treatment by which a physical therapist uses direct thrust to move a joint of the patient's spine beyond its normal range of motion, but without exceeding the limits of anatomical integrity.

(9) "Tasks" means activities that do not require the clinical decision making of a physical therapist or the clinical problem solving of a physical therapist assistant.

(10) "Competence" is the application of knowledge, skills, and behaviors required to function effectively, safely, ethically, and legally within the context of the patient's role and environment.

(11) "Continuing competence" is the process of maintaining and documenting competence through ongoing self-assessment, development, and implementation of a personal learning plan and subsequent reassessment.

(12) "State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

(13) "Direct supervision" means that a physical therapist or physical therapist assistant is physically present and immediately available to direct and supervise tasks that are related to patient management.

(14) "General supervision" means supervision provided by a physical therapist who is available by telecommunication.

(15) "Onsite supervision" means supervision provided by a physical therapist who is continuously onsite and present in the department or facility where services are provided. The supervising therapist must be immediately available to the person being supervised and maintain continued involvement in the necessary aspects of patient care. (16) "Conduct testing" means standard methods and techniques used to gather data about a patient, including, subject to section 2.5(c) of this chapter, electrodiagnostic and electrophysiologic tests and measures. The term does not include x-rays.

(17) "Physical therapy diagnosis" means a systematic examination, evaluation, and testing process that culminates in identifying the dysfunction toward which physical therapy treatment will be directed. The term does not include a medical diagnosis.

Formerly: Acts 1957, c.198, s.1; Acts 1971, P.L.379, SEC.1. As amended by P.L.150-1986, SEC.4; P.L.259-1987, SEC.1; P.L.240-1989, SEC.1; P.L.98-2013, SEC.1; P.L.160-2019, SEC.9; P.L.156-2020, SEC.107.

IC 25-27-1-2 Unlawful practices; providing mandated school services

Sec. 2. (a) Except as otherwise provided in this chapter and IC 25-27-2, it is unlawful for a person or business entity to do the following:

(1) Practice physical therapy without first obtaining from the board a license authorizing the person to practice physical therapy in this state.

(2) Profess to be or promote an employee to be a physical therapist, physiotherapist, doctor of physiotherapy, doctor of physical therapy, or registered physical therapist or to use the initials "P.T.", "D.P.T.", "L.P.T.", or "R.P.T.", or any other letters, words, abbreviations, or insignia indicating that physical therapy is provided by a physical therapist, unless physical therapy is provided by or under the direction of a physical therapist.

(3) Advertise services for physical therapy or physiotherapy services, unless the individual performing those services is a physical therapist.

(b) Except as provided in subsection (e) and section 2.5 of this chapter, it is unlawful for a person to practice physical therapy other than upon the order or referral of a physician, podiatrist, psychologist, chiropractor, dentist, nurse practitioner, or physician assistant holding an unlimited license to practice medicine, podiatric medicine, psychology, chiropractic, dentistry, nursing, or as a physician assistant, respectively. It is unlawful for a physical therapist to use the services of a physical therapist assistant except as provided under this chapter. For the purposes of this subsection, the function of:

- (1) teaching;
- (2) doing research;
- (3) providing advisory services; or
- (4) conducting seminars on physical therapy;

is not considered to be a practice of physical therapy.

(c) Except as otherwise provided in this chapter and IC 25-27-2, it is unlawful for a person to profess to be or act as a physical therapist assistant or to use the initials "P.T.A." or any other letters, words, abbreviations, or insignia indicating that the person is a physical therapist assistant without first obtaining from the board a certificate authorizing the person to act as a physical therapist assistant. It is unlawful for the person to act as a physical therapist assistant other than under the general supervision of a licensed physical therapist who is in responsible charge of a patient. However, nothing in this chapter prohibits a person licensed or registered in this state under another law from engaging in the practice for which the person is licensed or registered. These exempted persons include persons engaged in the practice of osteopathic medicine, chiropractic, or podiatric medicine.

(d) Except as provided in section 2.5 of this chapter, this chapter does not authorize a person who is licensed as a physical therapist or certified as a physical therapist assistant to:

(1) evaluate any physical disability or mental disorder except upon the order or referral of a physician, podiatrist, psychologist, chiropractor, physician assistant, nurse practitioner, or dentist;

(2) practice medicine, surgery (as described in IC 25-22.5-1-1.1(a)(1)(C)), dentistry, optometry, osteopathic medicine, psychology, chiropractic, or podiatric medicine; or

- (3) prescribe a drug or other remedial substance used in medicine.
- (e) Upon the referral of a licensed school psychologist, a physical therapist who is:
 - (1) licensed under this article; and
 - (2) an employee or contractor of a school corporation;

may provide mandated school services to a student that are within the physical therapist's scope of practice.

Formerly: Acts 1957, c.198, s.2; Acts 1971, P.L.379, SEC.2. As amended by P.L.137-1985, SEC.8; P.L.157-1986, SEC.2; P.L.259-1987, SEC.2; P.L.240-1989, SEC.2; P.L.217-1993, SEC.4; P.L.98-2013, SEC.2; P.L.160-2019, SEC.10; P.L.196-2021, SEC.16.

IC 25-27-1-2.5 Evaluations and treatment without referral; exceptions; testing certification

Sec. 2.5. (a) Except as provided in subsection (b), a physical therapist may evaluate and treat an individual during a period not to exceed forty-two (42) calendar days beginning with the date of the initiation of treatment without a referral from a provider described in section 2(b) of this chapter. However, if the individual needs additional treatment from the physical therapist after forty-two (42) calendar days, the physical therapist shall obtain a referral from the individual's provider, as described in section 2(b) of this chapter.

(b) A physical therapist may not perform spinal manipulation of the spinal column or the vertebral column unless:

(1) the physical therapist is acting on the order or referral of a physician, an osteopathic physician, or a chiropractor; and

(2) the referring physician, osteopathic physician, or chiropractor has examined the patient before issuing the order or referral.

(c) A physical therapist who conducts testing using electrophysiologic or electrodiagnostic testing must obtain and maintain the American Board of Physical Therapy Specialties Clinical Electrophysiologic Specialist Certification.

As added by P.L.98-2013, SEC.3. Amended by P.L.160-2019, SEC.11.

IC 25-27-1-3 Repealed

Formerly: Acts 1957, c.198, s.3. As amended by Acts 1982, P.L.154, SEC.86. Repealed by P.L.150-1986, SEC.14.

IC 25-27-1-3.1 Practice of certain occupations or professions and first aid not prohibited

Sec. 3.1. This chapter does not prohibit any of the following:

(1) The practice of any occupation or profession for which a person is licensed, certified, or registered in Indiana by a state agency. The persons who are exempted by this subdivision include persons licensed, certified, or registered to practice osteopathic medicine, chiropractic, or podiatric medicine.

(2) The practice of any health care occupation or profession by a person who is practicing within the scope of the person's education and experience.

(3) The performance of any first aid procedure incidental to a person's employment or volunteer duties.

(4) The performance of an emergency first aid procedure by any person.

(5) Except as provided in section 2(a)(3) of this chapter, the provision of the following by a chiropractor licensed under IC 25-10:

(A) Physical therapy modality services.

- (B) Physical rehabilitation services.
- (C) Therapeutic procedures.

(D) Tests and measurements.

(E) Therapeutic devices.

(F) Physiotherapy, as included in the chiropractic licensure examination.

However, nothing in this section allows a person to claim or imply that the person is a physical therapist or a physical therapist assistant unless the person is a physical therapist or a physical therapist assistant.

As added by P.L.150-1986, SEC.5. Amended by P.L.160-2019, SEC.12.

IC 25-27-1-3.3 Exempt persons

Sec. 3.3. The following persons are exempt from the licensure or certification requirements of this article:

(1) A person in an entry level professional education program approved by the board who is satisfying supervised clinical education requirements related to the person's physical therapist education while under onsite supervision of a physical therapist.

(2) A physical therapist who is practicing in the armed forces of the United States, United States Public Health Service, or United States Department of Veterans Affairs under federal regulations for jurisdiction licensure of health care providers. However, if the person, while federally employed as a physical therapist, engages in the practice of physical therapy outside the course and scope of federal employment, the person must obtain a license under this chapter.

(3) A physical therapist who is licensed in another state or credentialed to practice physical therapy in another country, if the person is teaching, demonstrating, or providing physical therapy services in connection with an educational seminar. However, the exemption under this subdivision may not exceed sixty (60) days in a calendar year.

(4) A physical therapist who is licensed in another state or credentialed in another country if the person by contract or employment is providing physical therapy to patients affiliated with or employed by established athletic teams, athletic organizations, or performing arts companies temporarily practicing, competing, or performing in Indiana. However, the exemption under this subdivision may not exceed sixty (60) days in a calendar year.

(5) A physical therapist who is licensed in another state and who provides physical therapy during a declared local or national disaster or emergency. However, the exemption may not exceed sixty (60) days following the declaration of the emergency. To be eligible for the exemption the physical therapist must notify the board of the person's intent to practice.

(6) A physical therapist licensed in another state who is forced to leave the person's residence or place of employment due to a declared local or national disaster or emergency and due to the displacement seeks to practice physical therapy. However, the exemption may not exceed sixty (60) days following the declaration of the emergency. To be eligible for the exemption the physical therapist must notify the board of the person's intent to practice.

(7) A physical therapist assistant who is licensed or certified in another state and assisting a physical therapist engaged specifically in activities related to subdivision (2), (3), (4), (5), or (6).

As added by P.L.160-2019, SEC.13.

IC 25-27-1-3.5 Sharp debridement referral

Sec. 3.5. A physical therapist may not perform sharp debridement unless the physical therapist is acting on the order or referral of a:

(1) physician or osteopath licensed under IC 25-22.5; or

(2) podiatrist licensed under IC 25-29.

As added by P.L.98-2013, SEC.4.

IC 25-27-1-4 Indiana board of physical therapy

Sec. 4. (a) There is created the Indiana board of physical therapy. Subject to IC 25-1-6.5-3, the board is comprised of the following:

(1) Three (3) physical therapists.

(2) One (1) physical therapist assistant.

(3) One (1) member who is a resident of the state and who is not associated with physical therapy in any way, other than as a consumer.

(b) The governor shall make each appointment before July 1, 2019, for a term of three (3) years.

(c) The governor shall make each appointment after June 30, 2019, under IC 25-1-6.5.

(d) Each physical therapist and physical therapist assistant appointed must:

(1) have an unrestricted license or certificate issued under this chapter;

(2) have had not less than five (5) years experience in the actual practice of physical therapy immediately preceding appointment; and

(3) be a resident of the state and actively engaged in this state in the practice of physical therapy during incumbency as a member of the board.

(e) The affirmative vote of a majority of the members appointed to the board is required for the board to take action on any measure.

(f) The board shall meet at least quarterly.

(g) A member may be removed under IC 25-1-6.5-4.

Formerly: Acts 1957, c.198, s.4; Acts 1971, P.L.379, SEC.3. As amended by Acts 1981, P.L.222, SEC.195; P.L.150-1986, SEC.6; P.L.160-2019, SEC.14; P.L.249-2019, SEC.114; P.L.101-2020, SEC.7.

IC 25-27-1-5 Determination of qualifications; administration of examinations; standards for competent practice

Sec. 5. (a) The board shall do the following:

(1) Pass upon the qualifications of physical therapists who apply for licensure and physical therapist assistants who apply for certification.

(2) Provide all examinations either directly or by delegation under subsection (c);

(3) Determine the applicants who successfully pass examinations.

(4) License and certify qualified applicants.

(5) Adopt rules concerning the competent practice of physical therapy to the board.

(b) The board shall adopt rules establishing standards for the competent practice of physical therapy.

(c) The board may approve and utilize the services of a testing company or agent to prepare, conduct, and score examinations.

(d) The board shall adopt rules concerning a continuing competency requirement for the renewal of a:

(1) license for a physical therapist; and

(2) certificate for a physical therapist assistant.

Formerly: Acts 1957, c.198, s.5; Acts 1971, P.L.379, SEC.4. As amended by Acts 1981, P.L.222, SEC.196; P.L.150-1986, SEC.7; P.L.259-1987, SEC.3; P.L.197-2011, SEC.116; P.L.160-2019, SEC.15.

IC 25-27-1-6 Evidence of qualification

Sec. 6. (a) Each applicant for a license as a physical therapist or certification as a physical therapist assistant must present satisfactory evidence that the applicant:

(1) does not have a conviction for a crime that has a direct bearing on the applicant's ability to practice competently; and

(2) has not been the subject of a disciplinary action initiated by the licensing agency of another state or jurisdiction on the grounds that the applicant was unable to practice as a physical therapist or physical therapist assistant without endangering the public.

(b) An applicant may appeal the board's decision to deny licensure or certification to the board within fifteen (15) days after the applicant receives notification of the board's decision. Upon receiving an appeal under this subsection, the board shall set the matter for an administrative hearing under IC 4-21.5.

Formerly: Acts 1957, c.198, s.6; Acts 1971, P.L.379, SEC.5. As amended by Acts 1981, P.L.222, SEC.197; Acts 1982, P.L.113, SEC.66; P.L.150-1986, SEC.8; P.L.149-1987, SEC.78; P.L.152-1988, SEC.23; P.L.33-1993, SEC.48; P.L.160-2019, SEC.16.

IC 25-27-1-6.1 Requirements for physical therapist license

Sec. 6.1. An applicant for a license as a physical therapist must do the following:

(1) Complete the application process, including payment of fees.

(2) Submit proof of graduation from a professional physical therapist education

program accredited by a national accreditation agency approved by the board.

(3) Pass an examination approved by the board.

(4) Submit to a national criminal history background check under IC 25-1-1.1-4.

(5) Meet any other requirements established by board rule.

As added by P.L.160-2019, SEC.17.

IC 25-27-1-6.2 Requirements for physical therapist educated outside of the United States

Sec. 6.2. An applicant for a license as a physical therapist who has been educated outside the United States must do the following:

(1) Complete the application process, including payment of fees.

(2) Provide satisfactory evidence that the applicant's education is substantially equivalent to the education of physical therapists educated in an accredited entry level program as determined by the board by any of the following:

(A) Providing evidence of graduation outside the United States from a professional education program accredited by the same accrediting agency that the board approves for programs within the United States.

(B) Do the following:

(i) Provide evidence of graduation from a physical therapist education program that prepares the applicant to engage in physical therapy without restriction.

(ii) Provide evidence that the applicant's school is recognized by its own ministry of education.

(iii) Undergo a credentials evaluation as directed by the board to determine if the candidate meets uniform criteria for educational requirements established by rule.

(3) Complete any additional education required by the board.

(4) Pass a board approved English proficiency examination if the applicant's native language is not English.

(5) Pass an examination approved by the board.

(6) Submit to a national criminal history background check under IC 25-1-1.1-4.

(7) Complete supervised clinical practice with a restricted license if required by rule.

(8) Meet any other requirements established by board rule.

As added by P.L.160-2019, SEC.18.

IC 25-27-1-6.3 Requirements for physical therapist assistant certificate

Sec. 6.3. An applicant for a certificate as a physical therapist assistant must do the following:

(1) Complete the application process, including payment of fees.

(2) Submit proof of graduation from a professional physical therapist assistant education program accredited by a national accreditation agency approved by the board.

(3) Pass an examination approved by the board.

(4) Submit to a national criminal history background check under IC 25-1-1.1-4.

(5) Meet any other requirements established by rule.

As added by P.L.160-2019, SEC.19.

IC 25-27-1-6.4 Requirements for physical therapist assistant educated outside of the United States

Sec. 6.4. An applicant for a certificate as a physical therapist assistant who has been educated outside the United States must do the following:

(1) Complete the application process, including payment of fees.

(2) Provide satisfactory evidence that the applicant's education is substantially equivalent to the education of a physical therapist assistant educated in an accredited entry level program as determined by the board by any of the following:

(A) Provide evidence of graduation outside the United States from a professional education program accredited by the same accrediting agency that the board approves for programs within the United States.

(B) Do the following:

(i) Provide evidence of graduation from a physical therapist assistant education program that prepares the applicant to engage as a physical therapist assistant without restriction.

(ii) Provide evidence that the applicant's school is recognized by its own ministry of education.

(iii) Undergo a credentials evaluation as directed by the board to determine if the candidate meets uniform criteria for educational requirements established by rule.(3) Complete any additional education required by the board.

(4) Pass a board approved English proficiency examination if the applicant's native language is not English.

(5) Pass an examination approved by the board.

(6) Submit to a national criminal history background check under IC 25-1-1.1-4.

(7) Complete supervised clinical practice with a restricted license if required by rule.

(8) Meet any other requirements established by rule.

As added by P.L.160-2019, SEC.20.

IC 25-27-1-7 Examination; reexamination; examination security

Sec. 7. (a) To be eligible to sit for the examination, an applicant must meet:

(1) the qualifying standards of any testing company or national organization employed to administer the examination; and

(2) requirements adopted by rule.

(b) The board shall provide for examinations within Indiana for the licensure of physical therapists and the certification of physical therapist assistants. The board may employ a testing company or a national organization to administer the examination.

(c) The physical therapist examination must test the applicant's entry level competence related to physical therapy theory, examination and evaluation, diagnosis, prognosis, treatment intervention, prevention, and consultation.

(d) The physical therapist assistant examination must test the applicant's requisite knowledge and skills in the technical application of physical therapy services.

(e) An applicant for a license to practice physical therapy or for a certificate to act as a physical therapist assistant may take the respective examination not more than six (6) times.

(f) An applicant for licensure or certification must agree to abide by any security and copyright provisions related to the examination. If the board determines that an applicant has violated the agreement or engaged in or attempted to engage in any other conduct that subverts or undermines the integrity of the examination process or validity of examination results, the board may disqualify the applicant from taking or retaking the examination. The disqualification by the board may be permanent or for a specified period of time. A determination by the board may be appealed under IC 4-21.5.

(g) The board shall report any violation of security and copyright related to the examination or subversion or attempts to subvert the national examination to the Federation of State Boards of Physical Therapy.

Formerly: Acts 1957, c.198, s.7; Acts 1971, P.L.379, SEC.6. As amended by P.L.136-1984, SEC.1; P.L.150-1986, SEC.9; P.L.173-1996, SEC.14; P.L.160-2019, SEC.21.

IC 25-27-1-8 Issuance of license; renewal; reinstatement; temporary nonrenewable permit; retirement from practice

Sec. 8. (a) The board shall license as a physical therapist or certify as a physical therapist assistant each applicant who:

(1) successfully passes the examination provided for in this chapter; and

(2) is otherwise qualified as required by this chapter.

(b) Subject to IC 25-1-2-6(e), all licenses and certificates issued by the board expire on the date of each even-numbered year specified by the Indiana professional licensing agency under IC 25-1-5-4. A renewal fee established by the board must be paid biennially on or before the date specified by the Indiana professional licensing agency, and if not paid on or before that date, the license or certificate becomes invalid, without further action by the board. A penalty fee set by the board shall be in effect for any reinstatement within three (3) years from the original date of expiration.

(c) An expired license or certificate may be reinstated by the board up to three (3) years after the expiration date if the holder of the expired license or certificate:

(1) pays a penalty fee set by the board;

(2) pays the renewal fees for the biennium; and

(3) demonstrates evidence of continuing competence.

If more than three (3) years have elapsed since expiration of the license or certificate, the holder may be reexamined by the board. The board may adopt rules setting requirements for reinstatement of an expired license.

(d) The board may issue not more than two (2) temporary permits to a physical therapist or physical therapist assistant. A person with a temporary permit issued under this subsection may practice physical therapy only under the onsite supervision of a licensed physical therapist who is responsible for the patient. A temporary permit may be issued to any person who has paid a fee set by the board and who:

(1) has a valid license from another state to practice physical therapy, or has a valid certificate from another state to act as a physical therapist assistant; or

(2) has applied for and been approved by the board to take the examination for licensure or certification, has not previously failed the licensure or certification examination in Indiana or any other state, and has:

(A) graduated from a school or program of physical therapy; or

(B) graduated from a two (2) year college level education program for physical therapist assistants that meets the standards set by the board.

The applicant must take the examination within the time limits set by the board.

(e) A temporary permit issued under subsection (d) expires when the applicant becomes licensed or certified, or approved for endorsement licensing or certification by the board, or when the application for licensure has been disapproved, whichever occurs first. An application for licensure or certification is disapproved and any temporary permit based upon the application expires when the applicant fails to take the examination within the time limits set by the board or when the board receives notification of the applicant's failure to pass any required examination in Indiana or any other state.

(f) A holder of a license or certificate under this chapter who intends to retire from practice shall notify the board in writing. Upon receipt of the notice, the board shall record the fact that the holder of the license or certificate is retired and release the person from further payment of renewal fees. If a holder of the license or certificate surrenders a license or certificate, reinstatement of the license or certificate may be considered by the board upon written request. The board may impose conditions it considers appropriate to the surrender or reinstatement of a surrendered license or certificate. A license or certificate may not be surrendered to the board without the written consent of the board if any disciplinary proceedings are pending against a holder of a license or certificate under this chapter.

Formerly: Acts 1957, c.198, s.8; Acts 1971, P.L.379, SEC.7. As amended by Acts 1981, P.L.222, SEC.198; P.L.136-1984, SEC.2; P.L.150-1986, SEC.10; P.L.149-1987, SEC.79;

P.L.48-1991, SEC.48; P.L.214-1993, SEC.59; P.L.244-1995, SEC.1; P.L.173-1996, SEC.15; P.L.1-2006, SEC.467; P.L.177-2015, SEC.64; P.L.160-2019, SEC.22; P.L.156-2020, SEC.108.

IC 25-27-1-9 Foreign applicants; license or certificate by endorsement; fee

Sec. 9. (a) The board may register and furnish a license to or certify by endorsement any applicant who presents evidence satisfactory to the board of being duly licensed to practice physical therapy or to act as a physical therapist assistant in another state if the applicant is otherwise qualified as required in section 6 of this chapter. However, the board shall register and furnish a license or certificate by endorsement to any applicant who is licensed to practice physical therapy or to act as a physical therapist assistant in another state if:

(1) the applicant is otherwise qualified as required under sections 6(a) and 6.1 of this chapter; and

(2) the applicant has successfully passed a licensure examination in another state equal to or exceeding the examination standards of Indiana.

At the time of making an application, the applicant shall pay a fee determined by the board. (b) The board may license as a physical therapist or certify as a physical therapist assistant

any person who has graduated as a physical therapist of certify as a physical therapist assistant, whichever is appropriate, in a foreign country from an educational program approved by the board if the applicant presents satisfactory evidence to the board that the applicant:

(1) does not have a conviction for:

(A) an act that would constitute a ground for disciplinary sanction under IC 25-1-9; or

(B) a crime that has a direct bearing on the applicant's ability to practice competently; and

(2) has not been the subject of a disciplinary action initiated by the licensing agency of another state or jurisdiction on the grounds that the applicant was unable to practice as a physical therapist or physical therapist assistant without endangering the public;

and that the applicant has successfully passed the physical therapy licensure or physical therapist assistant certification examination provided for by this chapter. However, the board, in evaluating an educational program under this subsection shall approve at least three (3) credential evaluating agencies acceptable to the board for the purpose of evaluating educational programs.

(c) At the time of making an application under subsection (b), the applicant shall pay a fee determined by the board.

Formerly: Acts 1957, c.198, s.9; Acts 1971, P.L.379, SEC.8. As amended by Acts 1981, P.L.222, SEC.199; Acts 1982, P.L.113, SEC.67; P.L.136-1984, SEC.3; P.L.150-1986, SEC.11; P.L.259-1987, SEC.4; P.L.152-1988, SEC.24; P.L.96-1990, SEC.15; P.L.2-1995, SEC.97; P.L.244-1995, SEC.2; P.L.160-2019, SEC.23.

IC 25-27-1-10 Repealed

Formerly: Acts 1957, c.198, s.10; Acts 1971, P.L.379, SEC.9. As amended by Acts 1977, P.L.172, SEC.43; Acts 1978, P.L.2, SEC.2545. Repealed by Acts 1981, P.L.222, SEC.296.

IC 25-27-1-10.1 Repealed

As added by Acts 1981, P.L.222, SEC.200. Amended by P.L.150-1986, SEC.12; P.L.149-1987, SEC.80. Repealed by P.L.152-1988, SEC.30.

IC 25-27-1-11 Refund of fees

Sec. 11. The fees collected under this chapter shall under no circumstances be refunded to the applicant.

Formerly: Acts 1957, c.198, s.11. As amended by Acts 1981, P.L.222, SEC.201; P.L.150-1986, SEC.13.

IC 25-27-1-12 Violation of chapter; penalties

Sec. 12. A person who violates this chapter commits a Class B misdemeanor. In addition the board may, in the name of the state, through the attorney general, apply in any court to enjoin any person from practicing physical therapy or acting as a physical therapist assistant, in violation of IC 25-27-1-2.

Formerly: Acts 1957, c.198, s.12; Acts 1971, P.L.379, SEC.10. As amended by Acts 1978, P.L.2, SEC.2546; P.L.160-2019, SEC.24.

IC 25-27-1-13 Physical therapist duties; supervision

Sec. 13. (a) A physical therapist is responsible for managing all aspects of the physical therapy care of each patient. A physical therapist shall provide the following:

(1) The initial evaluation, determination of a physical therapy diagnosis, prognosis, and plan of treatment intervention and documentation of each encounter with each patient.(2) Periodic reevaluation and documentation of each patient.

(3) The documented discharge of the patient, including the patient's response to treatment intervention at the time of discharge.

(b) A physical therapist shall assure the qualifications of all physical therapist assistants and physical therapy aides under the physical therapist's direction and supervision.

(c) For each patient on each date of service, a physical therapist shall:

(1) provide all of the treatment intervention that requires the education, skills, and knowledge of a physical therapist; and

(2) determine the use of physical therapist assistants to ensure that the delivery of care is safe, effective, and efficient.

(d) A physical therapist assistant shall work under a physical therapist's supervision. A physical therapist assistant shall document the care that the physical therapist assistant provides.

(e) A physical therapist may use physical therapy aides for designated tasks. A physical therapy aide shall work under the direct supervision of a physical therapist. Tasks related to patient services must be assigned to a physical therapy aide by a physical therapist or physical therapist assistant.

As added by P.L.160-2019, SEC.25.

IC 25-27-1-14 Documentation and billing

Sec. 14. (a) A physical therapist is responsible for accurate documentation and billing of the services the physical therapist provides.

(b) A physical therapist assistant is responsible for accurate documentation and billing of the services the physical therapist assistant provides. *As added by P.L.160-2019, SEC.26.*

IC 25-27-1-15 Physical therapy plan of care

Sec. 15. A physical therapist shall communicate the overall physical therapy plan of care with the patient or the patient's legally authorized representative. *As added by P.L.160-2019, SEC.27.*

IC 25-27-1-16 Standards of practice

Sec. 16. A physical therapist and physical therapist assistant shall comply with the standards of practice under IC 25-1-9.

As added by P.L.160-2019, SEC.28.

IC 25-27-1-17 Confidentiality; exceptions

Sec. 17. (a) Except as provided in subsection (b), information relating to the physical therapist-patient relationship is confidential and may not be communicated to a third party who is not involved in the patient's care without the written authorization of the patient.

(b) The physical therapist-patient privilege does not extend to cases in which the physical therapist or physical therapy assistant has a duty to report information as required by law. *As added by P.L.160-2019, SEC.29.*

IC 25-27-1-18 License and certificate display and verification

Sec. 18. Each physical therapist and physical therapist assistant shall:

(1) conspicuously display a copy of the license or certificate in a location accessible to public view;

(2) immediately produce a copy of the license or certificate upon request; or

(3) notify a patient how the patient may verify the therapist's license or certificate online.

As added by P.L.160-2019, SEC.30.

IC 25-27-1-19 Transfer of rules, duties, and records

Sec. 19. (a) The rules of the medical licensing board concerning physical therapy under this chapter adopted before July 1, 2019, are considered, after June 30, 2019, rules of the Indiana board of physical therapy.

(b) Any duties, investigation, or disciplinary action taken or begun by the medical licensing board before July 1, 2019, is considered, after June 30, 2019, a duty, investigation, or disciplinary action of the board.

(c) Any records of the medical licensing board concerning physical therapy under this chapter are transferred to the board.

(d) This section expires July 1, 2025.

As added by P.L.160-2019, SEC.31.

IC 25-27-2 Chapter 2. Physical Therapy Licensure Compact

| 25-27-2-1 | Purpose and objectives |
|------------|---|
| 25-27-2-2 | Definitions |
| 25-27-2-3 | State participation in compact |
| 25-27-2-4 | Compact privilege |
| 25-27-2-5 | Active duty military personnel and spouses |
| 25-27-2-6 | Adverse actions |
| 25-27-2-7 | Establishment of physical therapy compact commission |
| 25-27-2-8 | Data system; requirements for submitting data |
| 25-27-2-9 | Rulemaking; notice of proposed rulemaking; public hearing |
| 25-27-2-10 | Oversight; default and termination; dispute resolution; enforcement |
| 25-27-2-11 | Date of implementation; withdrawal; amendment |
| 25-27-2-12 | Construction; severability |
| | |

Effective 1-1-2022.

IC 25-27-2-1 Purpose and objectives

Effective 1-1-2022.

Sec. 1. PURPOSE

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

This Compact is designed to achieve the following objectives:

(1) Increase public access to physical therapy services by providing for the mutual recognition of other member state licenses;

(2) Enhance the states' ability to protect the public's health and safety;

(3) Encourage the cooperation of member states in regulating multi-state physical therapy practice;

(4) Support spouses of relocating military members;

(5) Enhance the exchange of licensure, investigative, and disciplinary information between member states; and

(6) Allow a remote state to hold a provider of services with a compact privilege in that state accountable to that state's practice standards.

As added by P.L.196-2021, SEC.17.

IC 25-27-2-2 Definitions

Effective 1-1-2022.

Sec. 2. DEFINITIONS

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

(1) "Active Duty Military" means full-time duty status in the active uniformed service of the United States, including members of the National Guard and Reserve on active duty orders pursuant to 10 U.S.C. Chapter 1209 and 10 U.S.C. Chapter 1211.

(2) "Adverse Action" means disciplinary action taken by a physical therapy licensing board based upon misconduct, unacceptable performance, or a combination of both.(3) "Alternative Program" means a nondisciplinary monitoring or practice remediation process approved by a physical therapy licensing board. This includes, but is not

limited to, substance abuse issues.

(4) "Compact privilege" means the authorization granted by a remote state to allow a licensee from another member state to practice as a physical therapist or work as a physical therapist assistant in the remote state under its laws and rules. The practice of physical therapy occurs in the member state where the patient or client is located at the

time of the patient or client encounter.

(5) "Continuing competence" means a requirement, as a condition of license renewal, to provide evidence of participation in, and completion of, educational and professional activities relevant to practice or area of work.

(6) "Data system" means a repository of information about licensees, including examination, licensure, investigative, compact privilege, and adverse action.

(7) "Encumbered license" means a license that a physical therapy licensing board has limited in any way.

(8) "Executive Board" means a group of directors elected or appointed to act on behalf of, and within the powers granted to them by, the Commission.

(9) "Home state" means the member state that is the licensee's primary state of residence.

(10) "Investigative information" means information, records, and documents received or generated by a physical therapy licensing board pursuant to an investigation.

(11) "Jurisprudence requirement" means the assessment of an individual's knowledge of the laws and rules governing the practice of physical therapy in a state.

(12) "Licensee" means an individual who currently holds an authorization from the state to practice as a physical therapist or to work as a physical therapist assistant.

(13) "Member state" means a state that has enacted the Compact.

(14) "Party state" means any member state in which a licensee holds a current license or compact privilege or is applying for a license or compact privilege.

(15) "Physical therapist" means an individual who is licensed by a state to practice physical therapy.

(16) "Physical therapist assistant" means an individual who is licensed or certified by a state and who assists the physical therapist in selected components of physical therapy.

(17) "Physical therapy," "physical therapy practice," and "the practice of physical therapy" mean the care and services provided by or under the direction and supervision of a licensed physical therapist.

(18) "Physical Therapy Compact Commission" or "Commission" means the national administrative body whose membership consists of all states that have enacted the Compact.

(19) "Physical therapy licensing board" or "licensing board" means the agency of a state that is responsible for the licensing and regulation of physical therapists and physical therapist assistants.

(20) "Remote state" means a member state other than the home state, where a licensee is exercising or seeking to exercise the compact privilege.

(21) "Rule" means a regulation, principle, or directive promulgated by the Commission that has the force of law.

(22) "State" means any state, commonwealth, district, or territory of the United States of America that regulates the practice of physical therapy.

As added by P.L.196-2021, SEC.17.

IC 25-27-2-3 State participation in compact

Effective 1-1-2022.

Sec. 3. STATE PARTICIPATION IN THE COMPACT

(a) To participate in the Compact, a state must:

(1) participate fully in the Commission's data system, including using the Commission's unique identifier as defined in rules;

(2) have a mechanism in place for receiving and investigating complaints about licensees;

(3) notify the Commission, in compliance with the terms of the Compact and rules, of any adverse action or the availability of investigative information regarding a licensee;

(4) fully implement a criminal background check requirement, within a time frame established by rule, by receiving the results of the Federal Bureau of Investigation record search on criminal background checks and use the results in making licensure decisions in accordance with Section 3(b);

(5) comply with the rules of the Commission;

(6) utilize a recognized national examination as a requirement for licensure pursuant to the rules of the Commission; and

(7) have continuing competence requirements as a condition for license renewal.

(b) Upon adoption of this statute, the member state shall have the authority to obtain biometric-based information from each physical therapy licensure applicant and submit this information to the Federal Bureau of Investigation for a criminal background check in accordance with 28 U.S.C. 534 and 42 U.S.C. 14616.

(c) A member state shall grant the compact privilege to a licensee holding a valid unencumbered license in another member state in accordance with the terms of the Compact and rules.

(d) Member states may charge a fee for granting a compact privilege. *As added by P.L.196-2021, SEC.17.*

IC 25-27-2-4 Compact privilege

Effective 1-1-2022.

Sec. 4. COMPACT PRIVILEGE

(a) To exercise the compact privilege under the terms and provisions of the Compact, the licensee shall:

(1) hold a license in the home state;

(2) have no encumbrance on any state license;

(3) be eligible for a compact privilege in any member state in accordance with subsections (d), (g), and (h);

(4) have not had any adverse action against any license or compact privilege within the previous two (2) years;

(5) notify the Commission that the licensee is seeking the compact privilege within a remote state(s);

(6) pay any applicable fees, including any state fee, for the compact privilege;

(7) meet any jurisprudence requirements established by the remote state(s) in which the licensee is seeking a compact privilege; and

(8) report to the Commission adverse action taken by any non-member state within thirty (30) days from the date the adverse action is taken.

(b) The compact privilege is valid until the expiration date of the home license. The licensee must comply with the requirements of subsection (a) to maintain the compact privilege in the remote state.

(c) A licensee providing physical therapy in a remote state under the compact privilege shall function within the laws and regulations of the remote state.

(d) A licensee providing physical therapy in a remote state is subject to that state's regulatory authority. A remote state may, in accordance with due process and that state's laws, remove a licensee's compact privilege in the remote state for a specific period of time, impose fines, and take any other necessary actions to protect the health and safety of its citizens. The licensee is not eligible for a compact privilege in any state until the specific time for removal has passed and all fines are paid.

(e) If a home state license is encumbered, the licensee shall lose the compact privilege in any remote state until the following occur:

(1) the home state license is no longer encumbered; and

(2) two (2) years have elapsed from the date of the adverse action.

(f) Once an encumbered license in the home state is restored to good standing, the licensee must meet the requirements of subsection (a) to obtain a compact privilege in any

remote state.

(g) If a licensee's compact privilege in any remote state is removed, the individual shall lose the compact privilege in any remote state until the following occur:

(1) the specific period of time for which the compact privilege was removed has ended;

(2) all fines have been paid; and

(3) two years have elapsed from the date of the adverse action.

(h) Once the requirements of subsection (g) have been met, the licensee must meet the requirements in subsection (a) of this chapter to obtain a compact privilege in a remote state. *As added by P.L.196-2021, SEC.17.*

IC 25-27-2-5 Active duty military personnel and spouses

Effective 1-1-2022.

Sec. 5. ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES

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

(1) home of record;

(2) permanent change of station (PCS); or

(3) state of current residence if it is different than the PCS state or home of record. *As added by P.L.196-2021, SEC.17.*

IC 25-27-2-6 Adverse actions

Effective 1-1-2022.

Sec. 6. ADVERSE ACTIONS

(a) A home state shall have exclusive power to impose adverse action against a license issued by the home state.

(b) A home state may take adverse action based on the investigative information of a remote state, so long as the home state follows its own procedures for imposing adverse action.

(c) Nothing in this Compact shall override a member state's decision that participation in an alternative program may be used in lieu of adverse action and that such participation shall remain nonpublic if required by the member state's laws. Member states must require licensees who enter any alternative programs in lieu of discipline to agree not to practice in any other member state during the term of the alternative program without prior authorization from such other member state.

(d) Any member state may investigate actual or alleged violations of the statutes and rules authorizing the practice of physical therapy in any other member state in which a physical therapist or physical therapist assistant holds a license or compact privilege.

(e) A remote state shall have the authority to:

(1) take adverse actions as set forth in section 4(d) of this chapter against a licensee's compact privilege in the state;

(2) issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses, and the production of evidence. Subpoenas issued by a physical therapy licensing board in a party state for the attendance and testimony of witnesses, and the production of evidence from another party state, shall be enforced in the latter state by any court of competent jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses and evidence are located; and

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

(f) Joint Investigations

(1) In addition to the authority granted to a member state by its respective physical therapy practice act or other applicable state law, a member state may participate with other member states in joint investigations of licensees.

(2) Member states shall share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the Compact. *As added by P.L.196-2021, SEC.17.*

IC 25-27-2-7 Establishment of physical therapy compact commission Effective 1-1-2022.

Sec. 7. ESTABLISHMENT OF THE PHYSICAL THERAPY COMPACT COMMISSION

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

(1) The Commission is an instrumentality of the Compact states.

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

(3) Nothing in this Compact shall be construed to be a waiver of sovereign immunity.(b) Membership, Voting, and Meetings

(1) Each member state shall have and be limited to one (1) delegate selected by that member state's licensing board.

(2) The delegate shall be a current member of the licensing board, who is a physical therapist, physical therapist assistant, public member, or the board administrator.

(3) Any delegate may be removed or suspended from office as provided by the law of the state from which the delegate is appointed.

(4) The member state board shall fill any vacancy occurring in the Commission.

(5) Each delegate shall be entitled to one (1) vote with regard to the promulgation of rules and creation of bylaws and shall otherwise have an opportunity to participate in the business and affairs of the Commission.

(6) A delegate shall vote in person or by such other means as provided in the bylaws. The bylaws may provide for delegates' participation in meetings by telephone or other means of communication.

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

(c) The Commission shall have the following powers and duties:

(1) establish the fiscal year of the Commission;

(2) establish bylaws;

(3) maintain its financial records in accordance with the bylaws;

(4) meet and take such actions as are consistent with the provisions of this Compact and the bylaws;

(5) promulgate uniform rules to facilitate and coordinate implementation and administration of this Compact. The rules shall have the force and effect of law and shall be binding in all member states;

(6) bring and prosecute legal proceedings or actions in the name of the Commission, provided that the standing of any state physical therapy licensing board to sue or be sued under applicable law shall not be affected;

(7) purchase and maintain insurance and bonds;

(8) borrow, accept, or contract for services of personnel, including, but not limited to, employees of a member state;

(9) hire employees, elect or appoint officers, fix compensation, define duties, grant such individuals appropriate authority to carry out the purposes of the Compact, and to

establish the Commission's personnel policies and programs relating to conflicts of interest, qualifications of personnel, and other related personnel matters;

(10) accept any and all appropriate donations and grants of money, equipment, supplies, materials, and services, and to receive, utilize, and dispose of the same; provided that at all times the Commission shall avoid any appearance of impropriety and conflict of interest;

(11) lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold, improve, or use, any property, real, personal, or mixed; provided that at all times the Commission shall avoid any appearance of impropriety;

(12) sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property real, personal, or mixed;

(13) establish a budget and make expenditures;

(14) borrow money;

(15) appoint committees, including standing committees composed of members, state regulators, state legislators or their representatives, and consumer representatives, and such other interested persons as may be designated in this Compact and the bylaws;

(16) provide and receive information from, and cooperate with, law enforcement agencies;

(17) establish and elect an Executive Board; and

(18) perform such other functions as may be necessary or appropriate to achieve the purposes of this Compact consistent with the state regulation of physical therapy licensure and practice.

(d) The Executive Board shall have the power to act on behalf of the Commission according to the terms of this Compact.

(1) The Executive Board shall be composed of nine (9) members:

(A) seven (7) voting members who are elected by the Commission from the current membership of the Commission;

(B) one (1) ex-officio, nonvoting member from the recognized national physical therapy professional association; and

(C) one (1) ex-officio, nonvoting member from the recognized membership organization of the physical therapy licensing boards.

(2) The ex-officio members will be selected by their respective organizations.

(3) The Commission may remove any member of the Executive Board as provided in bylaws.

(4) The Executive Board shall meet at least annually.

(5) The Executive Board shall have the following duties and responsibilities:

(A) recommend to the entire Commission changes to the rules or bylaws, changes to this Compact legislation, fees paid by Compact member states such as annual dues, and any commission Compact fee charged to licensees for the compact privilege;

(B) ensure Compact administration services are appropriately provided, contractual or otherwise;

(C) prepare and recommend the budget;

(D) maintain financial records on behalf of the Commission;

(E) monitor Compact compliance of member states and provide compliance reports to the Commission;

(F) establish additional committees as necessary; and

(G) other duties as provided in rules or bylaws.

(e) Meetings of the Commission

(1) All meetings shall be open to the public, and public notice of meetings shall be given in the same manner as required under the rulemaking provisions in section 9 of this chapter.

(2) The Commission or the Executive Board or other committees of the Commission may convene in a closed, nonpublic meeting if the Commission or Executive Board or

other committees of the Commission must discuss:

(A) noncompliance of a member state with its obligations under the Compact;

(B) the employment, compensation, discipline, or other matters, practices, or procedures related to specific employees or other matters related to the Commission's internal personnel practices and procedures;

(C) current, threatened, or reasonably anticipated litigation;

(D) negotiation of contracts for the purchase, lease, or sale of goods, services, or real estate;

(E) accusing any person of a crime or formally censuring any person;

(F) disclosure of trade secrets or commercial or financial information that is privileged or confidential;

(G) disclosure of information of a personal nature where disclosure would constitute a clearly unwarranted invasion of personal privacy;

(H) disclosure of investigative records compiled for law enforcement purposes;

(I) disclosure of information related to any investigative reports prepared by or on behalf of or for use of the Commission or other committee charged with responsibility of investigation or determination of compliance issues pursuant to the Compact; or

(J) matters specifically exempted from disclosure by federal or member state statute. (3) If a meeting, or portion of a meeting, is closed pursuant to this provision, the Commission's legal counsel or designee shall certify that the meeting may be closed and shall reference each relevant exempting provision.

(4) The Commission shall keep minutes that fully and clearly describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, and the reasons therefore, including a description of the views expressed. All documents considered in connection with an action shall be identified in such minutes. All minutes and documents of a closed meeting shall remain under seal, subject to release by a majority vote of the Commission or order of a court of competent jurisdiction.

(f) Financing of the Commission

(1) The Commission shall pay, or provide for the payment of, the reasonable expenses of its establishment, organization, and ongoing activities.

(2) The Commission may accept any and all appropriate revenue sources, donations, and grants of money, equipment, supplies, materials, and services.

(3) The Commission may levy on and collect an annual assessment from each member state or impose fees on other parties to cover the cost of the operations and activities of the Commission and its staff, which must be in a total amount sufficient to cover its annual budget as approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated based upon a formula to be determined by the Commission, which shall promulgate a rule binding upon all member states.

(4) The Commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same; nor shall the Commission pledge the credit of any of the member states, except by and with the authority of the member state.

(5) The Commission shall keep accurate accounts of all receipts and disbursements. The receipts and disbursements of the Commission shall be subject to the audit and accounting procedures established under its bylaws. However, all receipts and disbursements of funds handled by the Commission shall be audited yearly by a certified or licensed public accountant, and the report of the audit shall be included in and become part of the annual report of the Commission.

(g) Qualified Immunity, Defense, and Indemnification

(1) The members, officers, executive director, employees, and representatives of the Commission shall be immune from suit and liability, either personally or in their

official capacity, for any claim for damage to or loss of property or personal injury or other civil liability caused by or arising out of any actual or alleged act, error or omission that occurred, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing in this paragraph shall be construed to protect any such person from suit and liability for any damage, loss, injury, or liability caused by the intentional or willful or wanton misconduct of that person.

(2) The Commission shall defend any member, officer, executive director, employee, or representative of the Commission in any civil action seeking to impose liability arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that the person against whom the claim is made had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities; provided that nothing herein shall be construed to prohibit that person from retaining his or her own counsel; and provided further, that the actual or alleged act, error, or omission did not result from that person's intentional or willful or wanton misconduct.

(3) The Commission shall indemnify and hold harmless any member, officer, executive director, employee, or representative of the Commission for the amount of any settlement or judgment obtained against that person arising out of any actual or alleged act, error, or omission that occurred within the scope of Commission employment, duties, or responsibilities, or that such person had a reasonable basis for believing occurred within the scope of Commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from the intentional or willful or wanton misconduct of that person.

As added by P.L.196-2021, SEC.17.

IC 25-27-2-8 Data system; requirements for submitting data

Effective 1-1-2022.

Sec. 8. DATA SYSTEM

(a) The Commission shall provide for the development, maintenance, and utilization of a coordinated database and reporting system containing licensure, adverse action, and investigative information on all licensed individuals in member states.

(b) Notwithstanding any other provision of state law to the contrary, a member state shall submit a uniform data set to the data system on all individuals to whom this Compact is applicable as required by the rules of the Commission, including:

(1) identifying information;

(2) licensure data;

(3) adverse actions against a license or compact privilege;

(4) nonconfidential information related to alternative program participation;

(5) any denial of application for licensure, and the reason(s) for such denial; and

(6) other information that may facilitate the administration of this Compact, as determined by the rules of the Commission.

(c) Investigative information pertaining to a licensee in any member state will only be available to other party states.

(d) The Commission shall promptly notify all member states of any adverse action taken against a licensee or an individual applying for a license. Adverse action information pertaining to a licensee in any member state will be available to any other member state.

(e) Member states contributing information to the data system may designate information that may not be shared with the public without the express permission of the contributing state.

(f) Any information submitted to the data system that is subsequently required to be expunged by the laws of the member state contributing the information shall be removed from the data system.

IC 25-27-2-9 Rulemaking; notice of proposed rulemaking; public hearing

Effective 1-1-2022. Sec. 9. RULEMAKING

(a) The Commission shall exercise its rulemaking powers pursuant to the criteria set forth in this Section and the rules adopted thereunder. Rules and amendments shall become binding as of the date specified in each rule or amendment.

(b) If a majority of the legislatures of the member states rejects a rule, by enactment of a statute or resolution in the same manner used to adopt the Compact within four (4) years of the date of adoption of the rule, then such rule shall have no further force and effect in any member state.

(c) Rules or amendments to the rules shall be adopted at a regular or special meeting of the Commission.

(d) Prior to promulgation and adoption of a final rule or rules by the Commission, and at least thirty (30) days in advance of the meeting at which the rule will be considered and voted upon, the Commission shall file a Notice of Proposed Rulemaking:

(1) on the web site of the Commission or other publicly accessible platform; and

(2) on the web site of each member state physical therapy licensing board or other publicly accessible platform or the publication in which each state would otherwise publish proposed rules.

(e) The notice of proposed rulemaking shall include:

(1) the proposed time, date, and location of the meeting in which the rule will be considered and voted upon;

(2) the text of the proposed rule or amendment and the reason for the proposed rule;

(3) a request for comments on the proposed rule from any interested person; and

(4) the manner in which interested persons may submit notice to the Commission of their intention to attend the public hearing and any written comments.

(f) Prior to adoption of a proposed rule, the Commission shall allow persons to submit written data, facts, opinions, and arguments, which shall be made available to the public.

(g) The Commission shall grant an opportunity for a public hearing before it adopts a rule or amendment if a hearing is requested by:

(1) at least twenty-five (25) persons;

(2) a state or federal governmental subdivision or agency; or

(3) an association having at least twenty-five (25) members.

(h) If a hearing is held on the proposed rule or amendment, the Commission shall publish the place, time, and date of the scheduled public hearing. If the hearing is held via electronic means, the Commission shall publish the mechanism for access to the electronic hearing.

(1) All persons wishing to be heard at the hearing shall notify the executive director of the Commission or other designated member in writing of their desire to appear and testify at the hearing not less than five (5) business days before the scheduled date of the hearing.

(2) Hearings shall be conducted in a manner providing each person who wishes to comment a fair and reasonable opportunity to comment orally or in writing.

(3) All hearings will be recorded. A copy of the recording will be made available on request.

(4) Nothing in this section shall be construed as requiring a separate hearing on each rule. Rules may be grouped for the convenience of the Commission at hearings required by this section.

(i) Following the scheduled hearing date, or by the close of business on the scheduled hearing date if the hearing was not held, the Commission shall consider all written and oral comments received.

(j) If no written notice of intent to attend the public hearing by interested parties is

received, the Commission may proceed with promulgation of the proposed rule without a public hearing.

(k) The Commission shall, by majority vote of all members, take final action on the proposed rule and shall determine the effective date of the rule, if any, based on the rulemaking record and the full text of the rule.

(1) Upon determination that an emergency exists, the Commission may consider and adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided that the usual rulemaking procedures provided in the Compact and in this section shall be retroactively applied to the rule as soon as reasonably possible, in no event later than ninety (90) days after the effective date of the rule. For the purposes of this provision, an emergency rule is one that must be adopted immediately in order to:

(1) meet an imminent threat to public health, safety, or welfare;

(2) prevent a loss of Commission or member state funds;

(3) meet a deadline for the promulgation of an administrative rule that is established by federal law or rule; or

(4) protect public health and safety.

(m) The Commission or an authorized committee of the Commission may direct revisions to a previously adopted rule or amendment for purposes of correcting typographical errors, errors in format, errors in consistency, or grammatical errors. Public notice of any revisions shall be posted on the web site of the Commission. The revision shall be subject to challenge by any person for a period of thirty (30) days after posting. The revision may be challenged only on grounds that the revision results in a material change to a rule. A challenge shall be made in writing, and delivered to the chair of the Commission prior to the end of the notice period. If no challenge is made, the revision will take effect without further action. If the revision is challenged, the revision may not take effect without the approval of the Commission.

As added by P.L.196-2021, SEC.17.

IC 25-27-2-10 Oversight; default and termination; dispute resolution; enforcement

Effective 1-1-2022.

Sec. 10. OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT (a) Oversight

(1) The executive, legislative, and judicial branches of state government in each member state shall enforce this Compact and take all actions necessary and appropriate to effectuate the Compact's purposes and intent. The provisions of this Compact and the rules promulgated hereunder shall have standing as statutory law.

(2) All courts shall take judicial notice of the Compact and the rules in any judicial or administrative proceeding in a member state pertaining to the subject matter of this Compact which may affect the powers, responsibilities, or actions of the Commission.(3) The Commission shall be entitled to receive service of process in any such proceeding, and shall have standing to intervene in such a proceeding for all purposes. Failure to provide service of process to the Commission shall render a judgment or order void as to the Commission, this Compact, or promulgated rules.

(b) Default, Technical Assistance, and Termination

(1) If the Commission determines that a member state has defaulted in the performance of its obligations or responsibilities under this Compact or the promulgated rules, the Commission shall:

(A) provide written notice to the defaulting state and other member states of the nature of the default, the proposed means of curing the default, and any other action to be taken by the Commission; and

(B) provide remedial training and specific technical assistance regarding the default.(2) If a state in default fails to cure the default, the defaulting state may be terminated

from the Compact upon an affirmative vote of a majority of the member states, and all rights, privileges, and benefits conferred by this Compact may be terminated on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of default.

(3) Termination of membership in the Compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to suspend or terminate shall be given by the Commission to the governor, the majority and minority leaders of the defaulting state's legislature, and each of the member states.

(4) A state that has been terminated is responsible for all assessments, obligations, and liabilities incurred through the effective date of termination, including obligations that extend beyond the effective date of termination.

(5) The Commission shall not bear any costs related to a state that is found to be in default or that has been terminated from the Compact, unless agreed upon in writing between the Commission and the defaulting state.

(6) The defaulting state may appeal the action of the Commission by petitioning the U.S. District Court for the District of Columbia or the federal district where the Commission has its principal offices. The prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.

(c) Dispute Resolution

(1) Upon request by a member state, the Commission shall attempt to resolve disputes related to the Compact that arise among member states and between member and nonmember states.

(2) The Commission shall promulgate a rule providing for both mediation and binding dispute resolution for disputes as appropriate.

(d) Enforcement

(1) The Commission, in the reasonable exercise of its discretion, shall enforce the provisions and rules of this Compact.

(2) By majority vote, the Commission may initiate legal action in the United States District Court for the District of Columbia or the federal district where the Commission has its principal offices against a member state in default to enforce compliance with the provisions of the Compact and its promulgated rules and bylaws. The relief sought may include both injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing member shall be awarded all costs of such litigation, including reasonable attorney's fees.

(3) The remedies herein shall not be the exclusive remedies of the Commission. The Commission may pursue any other remedies available under federal or state law. *As added by P.L.196-2021, SEC.17.*

IC 25-27-2-11 Date of implementation; withdrawal; amendment *Effective 1-1-2022.*

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

(a) The Compact shall come into effect on the date on which the Compact statute is enacted into law in the tenth member state. The provisions, which become effective at that time, shall be limited to the powers granted to the Commission relating to assembly and the promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking powers necessary to the implementation and administration of the Compact.

(b) Any state that joins the Compact subsequent to the Commission's initial adoption of the rules shall be subject to the rules as they exist on the date on which the Compact becomes law in that state. Any rule that has been previously adopted by the Commission shall have the full force and effect of law on the day the Compact becomes law in that state.

(c) Any member state may withdraw from this Compact by enacting a statute repealing

the same.

(1) A member state's withdrawal shall not take effect until six (6) months after enactment of the repealing statute.

(2) Withdrawal shall not affect the continuing requirement of the withdrawing state's physical therapy licensing board to comply with the investigative and adverse action reporting requirements of this act prior to the effective date of withdrawal.

(d) Nothing contained in this Compact shall be construed to invalidate or prevent any physical therapy licensure agreement or other cooperative arrangement between a member state and a nonmember state that does not conflict with the provisions of this Compact.

(e) This Compact may be amended by the member states. No amendment to this Compact shall become effective and binding upon any member state until it is enacted into the laws of all member states.

As added by P.L.196-2021, SEC.17.

IC 25-27-2-12 Construction; severability

Effective 1-1-2022.

Sec. 12. CONSTRUCTION AND SEVERABILITY

This Compact shall be liberally construed so as to effectuate the purposes thereof. The provisions of this Compact shall be severable and if any phrase, clause, sentence, or provision of this Compact is declared to be contrary to the constitution of any party state or of the United States or the applicability thereof to any government, agency, person, or circumstance is held invalid, the validity of the remainder of this Compact and the applicability thereof to any government, agency, person, or circumstance shall not be affected thereby. If this Compact shall be held contrary to the constitution of any party state, the Compact shall remain in full force and effect as to the remaining party states and in full force and effect as to all severable matters. *As added by P.L.196-2021, SEC.17.*