Occupational Therapy; SB 440

SB 440 authorizes occupational therapists to provide limited services to patients without referral from a health care provider and amends the Occupational Therapy Practice Act (Act).

Occupational Therapists and Referrals

The bill allows occupational therapists to evaluate and initiate occupational therapy treatment on a patient without referral from a health care practitioner.

The bill creates conditions under which an occupational therapist is required to obtain a referral from an appropriate health care practitioner. An occupational therapist who is treating a patient without a referral from a health care practitioner is required to obtain a referral from an appropriate health care practitioner prior to continuing treatment if the patient:

- Is not progressing toward documented treatment goals as demonstrated by objective, measurable, or functional improvement after 10 patient visits or in a period of 30 calendar days from the initial treatment visits following the initial evaluation visit; or

- Within one year from the initial treatment visit following the initial evaluation visit, returns to the occupational therapist seeking treatment for the same conditions or injury.

The bill allows occupational therapists to provide services without a referral to:

- Employees solely for the purpose of education and instruction related to workplace injury prevention;

- The public for the purpose of health promotion, education, and functional independence in activities of daily living; or

- Special education students who need occupational therapy services to fulfill the provisions of their individualized education plan (IEP) or individualized family service plan (IFSP).

The bill does not prevent a hospital or ambulatory surgical center from requiring a physician to order or make a referral for occupational therapy services for a patient currently being treated in such a facility.

The bill requires an occupational therapist to provide written notice to a self-referring patient, prior to commencing treatment, which states that an occupational therapy diagnosis is not a medical diagnosis by a physician.

The bill clarifies that occupational therapists may perform wound care management services only after approval by a person licensed to practice medicine and surgery.
The bill defines “healthcare practitioner” to mean:

- A person licensed by the State Board of Healing Arts (BOHA) to practice medicine and surgery, osteopathic medicine and surgery, or chiropractic;
- A “mid-level practitioner” as already defined in statute; or
- A licensed dentist or licensed optometrist in appropriately related cases.

**Liability Insurance**

The bill requires licensed occupational therapists actively practicing in the state to maintain professional liability insurance coverage as a condition of rendering professional occupational therapy services. The bill requires BOHA to determine the minimum level of coverage for such insurance through rules and regulations.

**Amendments to Occupational Therapy Practice Act**

The bill removes sections of the Act that pertain to referral or supervision from a licensed health care practitioner and adds language specifying that the “practice of occupational therapy” does not include the practice of any branch of the healing arts or making a medical diagnosis.