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BILL ANALYSIS



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Senate Bill 668 (as introduced 11-9-23)

Sponsor: Senator Kevin Hertel

Committee: Health Policy

Date Completed: 10-1-24

CONTENT

The bill would amend Part 178 (Physical Therapy) of the Public Health Code to do the following:

- Modify the scope of the practice of physical therapy to include the identification and management of physical therapy-related health conditions, impairments, activity limitations, and participation restrictions and to delete language excluding the identification of underlying medical problems, the establishment of medical diagnoses, and the prescription of treatment.**
- Specify that the practice of physical therapy would not include the diagnosis of a health condition if the diagnosis fell outside the scope of practice of physical therapy.**
- Delete language limiting the length of time and purposes that a physical therapist may practice on a patient who does not have a prescription from another medical professional.**
- Repeal Section 17819, which specifies that other medical professionals may perform activities considered the practice physical therapy if the activities are within the medical professional's scope of practice.**

Scope of the Practice of Physical Therapy

Currently, "practice of physical therapy" means the evaluation of, education of, consultation with, or treatment of an individual by the employment of effective properties of physical measures and the use of therapeutic exercises and rehabilitative procedures, with or without assistive devices, for the purpose of preventing, correcting, or alleviating a physical or mental disability. The term includes treatment planning, performance of tests and measurements, interpretation of referrals, initiation of referrals, instruction, consultative services, and supervision of personnel. Under the bill, the term also would include the identification and management of physical therapy-related health conditions, impairments, activity limitations, and participation restrictions.

In addition, "practice of physical therapy" currently does not include the identification of underlying medical problems or etiologies, establishment of medical diagnoses, or the prescribing of treatment. The bill would delete this language. Instead, the term would not include the diagnosis of a health condition if the diagnosis fell outside the scope of practice of physical therapy.

Delete Requirement for a Referral

The Code requires a physical therapist or physical therapist assistant to engage in the treatment of a patient if that treatment is prescribed by a health care professional who is an advanced practice registered nurse, who holds a license issued under Part 166 (Dentistry),

170 (Medicine), 175 (Osteopathic Medicine and Surgery), or 180 (Podiatric Medicine and Surgery), or who holds an equivalent license issued by another state. A physical therapist or a physical therapist assistant may engage in the treatment of a patient without the such a prescription under either of the following circumstances:

- For 21 days or 10 treatments, whichever first occurs; however, a physical therapist must determine that the patient's condition requires physical therapy before delegating physical therapy interventions to a physical therapist assistant.
- The patient is seeking physical therapy services for the purpose of preventing injury or promoting fitness.

The bill would delete these provisions.

Repeal Section 17819

The bill would repeal Section 17819 of the Code. Section 17819 states that Part 178 does not prohibit an individual licensed, registered, or otherwise authorized to engage in a health profession under any other part or any other Act from performing activities that are considered the practice of physical therapy or the practice as a physical therapist assistant so long as those activities are within the individual's scope of practice and the individual does not use the words, titles, or letters protected under Part 178.

MCL 333.17801 et al.

Legislative Analyst: Alex Krabill

FISCAL IMPACT

The bill would have no fiscal impact on State or local government.

Fiscal Analyst: Nathan Leaman

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