



Practice Act Updates

by Patricia S. Hodson, PT, DPT, Chair

There is nothing wrong with change if it is in the right direction. — Winston Churchill

On July 18, 2013, the North Carolina General Assembly approved **House Bill 828-An Act Updating the Physical Therapy Practice Act**. The updated version is posted on the NC Board of Physical Therapy Examiners website at <http://www.ncptboard.org> and it behooves every licensee to read G.S. 90-270.24-90-270.39 Article 18B in its entirety for awareness and understanding of these substantive changes that became effective on October 1, 2013.

Since the most recent significant rewrite of **Practice Act** was effective on December 30, 1985, the statute governing the practice of physical therapy in North Carolina has been amended two times including amendment of the fee schedule in 1999 and addition of continuing competence in 2006. Beginning in June 2012, Legislative Priorities were suggested by the North Carolina Board of Physical Therapy Examiners (NCPTEx) and shared with Dean McCall, President of the North Carolina Physical Therapy Association (NCPTA). Originally, twelve priorities were identified with addition of one priority for consideration in October 2012. Many of the priorities were included in the revised **Practice Act** with the exception of a few priorities involving definitions.

The first priority was to include language in §90-270.26 (12) Powers of the Board that allows the Board to

organize, hold, rent, encumber real property. Currently the Board leases office space in Durham and may, at some point in the future consider purchasing a building if it is deemed financially and fiscally advisable. Another change in §90-270.26 (3) Powers of the Board includes an item describing confidential investigations by the Board regarding **Practice Act** violations. The rewritten language clarifies that investigative records are not considered public records, however, Board decisions, hearing notices and statements of charges, and materials received and admitted into evidence are public records and may be

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North Carolina Board of Physical Therapy Examiners - 2013

Standing Left to Right: John M. Silverstein, Attorney; Leslie P. Kesler; Gloria H. Lewis; Ben F. Massey, Jr., ED; Paul Garcia, MD; Angela Diaz; Eric J. Smith;

Seated Left to Right: Patricia Ann Rode; Patricia S. Hodson, Chair; Judy L. Edwards, Sec-Treas



Recent Changes to the Physical Therapy Practice Act

by John M. Silverstein, Board Attorney

The recently concluded session of the North Carolina General Assembly generated significant national attention resulting from fundamental changes in North Carolina laws governing social, economic and political issues. Virtually no attention was given to the amendments to the North Carolina Physical Therapy Practice Act that will significantly impact physical therapy licensees, consumers of physical therapy services and applicants for physical therapy licensure for years to come. The North Carolina Physical Therapy Association was the driving force behind this legislation, and during this session, leadership in the General Assembly was provided by the bill's primary sponsor, Representative Jim Fulghum, M.D.

The revisions to the **Physical Therapy Practice Act** are effective October 1, 2013. The Board's Chair, Pat Hodson, has analyzed the changes to the Practice Act in her Article in this Newsletter. In addition, Ms. Hodson appointed a Rules Subcommittee to draft rules addressing the modifications to the Practice Act. Proposed rules will have to be adopted by the Board and then submitted to the North Carolina Rules Review Commission ("RRC"). Any rules approved by the RRC are still subject to legislative review. It is the Board's hope that rules relating to modifications to the Practice Act will be adopted in 2014.

The Board will propose rules that address the following areas:

I. Membership of the Board. The **Practice Act** requires that members of the Board be actively engaged in the practice of physical therapy during incumbency. For the first time, the rules will define what constitutes active engagement in physical therapy practice. The proposal includes oversight, supervision, administration and teaching, as well as the direct provision of physical therapy services.

II. Complaints and Investigations. Fundamental changes were made in the **Practice Act** related to materials obtained by the Board during investigations of licensees, which now will remain confidential during the investigation in order to protect both the complainant and licensee. A rule will be enacted to enable confidential investigation records to be shared with any licensee subject to a disciplinary action, as well as with the licensee's attorney.

III. Subpoenas. Revisions to the **Practice Act** make it clear that the Board's authority to issue subpoenas is not restricted to contested case hearings, and that subpoenas can be utilized for the production of documents pursuant to investigations. Rules will be proposed to include this provision as well as to give the Board the discretion to refuse to issue subpoenas designed solely to harass or intimidate a witness.

IV. Impaired Licensees. Until the recent grant of authority in the **Practice Act**, the Board did not have specific authorization to direct licensees with substance abuse or mental health issues to specific programs designed to assist health care practitioners with chemical dependencies or mental health issues. Since the number of physical therapy licensees who suffer from such conditions is insufficient to justify the Board's establishment of a separate program, the **Practice Act** now gives the Board authority to utilize programs administered by other licensing boards and rules will be enacted to provide for such referral. Participation in such programs will remain confidential so long as the licensee is complying with the requirements of the program.

V. Applications. The Board was given the authority to require criminal background checks and fingerprints for applicants for licensure. The rules will establish the mechanism for completing these requirements.

VI. Exemptions. The **Practice Act** added exemptions for practitioners licensed in another state who relocate to North Carolina due to a natural disaster occurring in their home state or in North Carolina. Rules will establish parameters for practitioners not licensed in North Carolina to work in this jurisdiction on temporary basis.

VII. Foreign Trained PTA's. The **Practice Act** now provides for the licensure of foreign trained physical therapist assistants. Rules will be enacted to govern the process for licensing these applicants.

In addition to the foregoing rules, the Rules Committee is also considering revisions to rules governing continuing competence, supervision of foreign educated licensees, as well as any other rules that may need modifications.

Rule making proceedings are a recurring responsibility of the Board, as not only the **Practice Act**, but the nature

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Continuing Competence Rules Updates – Effective January 1, 2014

by Kathy O'Dwyer Arney, PT, MA, Consultant, Continuing Competence

Continuing competence rules have been updated and become effective January 1, 2014. NCBPTE Board members, licensees and other stakeholders provided input to the newly revised rules approved by the Rules Review Commission April 18, 2013. A copy of the updated rules is now posted on the Board website under this link: <https://www.ncptboard.org/documents/continuingcompetence/21%20NCAC%2048%20-%20CC%20rules.pdf>

The most significant rule change related to continuing competence involves the definition of a reporting period. A reporting period is now defined as: “. . . a **25-month period** commencing on January 1st during which the licensee must complete all continuing competence requirements. Points earned by a licensee may be counted toward completion during one reporting period only.” (Definitions section 21 NCAC 48G .0105 (12)). Confusion over when a reporting period ends and when license renewal ends should be eliminated. The 25-month period aligns the date by which continuing competence activities need to be completed and the date of licensure expiration annually, January 31st. In addition, activities completed in January at the end of the reporting period may be reported in the current reporting period *or* the next reporting period that begins January 1 but *not both*.

Other changes of note include:

- 21 NCAC 48G .0106 – clarification of which points may be carried over
- 21 NCAC 48G .0108 – the addition of IACET (The International Association for Continuing Education and Training) as a pre-approved provider of CC activities by NCBPTE.
- 21 NCAC 48G .0109 – (a)(1) addition of *live, real-time activities* completed via *electronic media* to earn up to 15 points in this category.

- (a)(4) clarifies *non-interactive*, approved provider, electronic media activities may earn up to 10 points.
- (a)(6) and (a)(8) clarify differences in home study activities, with (6) being self-designed and (8) being added to recognize approved provider, home study activities earning up to 10 points.
- 21 NCAC 48G .0109 (f) (7) & (8) – are new activities that qualify for points under Research and Publishing, being distinguished as either published, non peer-reviewed or published, peer reviewed articles, book reviews or abstracts related to PT.
- 21 NCAC 48G .0109 (i)(1) Workplace Education – now differentiates whether an licensee is an attendee or presenter and updates point earnings depending on attendance or presenting status
- 21 NCAC 48G .0109 (j)(5) Professional Service – was updated to include unpaid, volunteer service to both the general public and in addition, healthcare professionals
- (j)(8) adds service for item writing for either the NPTE or ABPTS exams
- (j)(9) adds participation in conducting clinical research (not intended as a research subject participant)
- 21 NCAC 48G .0111 Deferments for completion of continuing competence activities for license renewal were eliminated and clarifications made for exemptions from continuing competence requirements.

Editorial corrections and updates were also made to the continuing competence rules and are highlighted at the link for review.

Questions or comments should be directed to karney@ncptboard.org.

Recent Changes to the Physical Therapy Practice Act *(continued from page 2)*

of the practice of physical therapy undergoes changes. The revisions required by recent changes to the **Practice Act** fit neatly within the Board's ongoing requirement to adopt, modify or repeal rules impacted by changes to the practice of physical therapy in general, and revisions to the **Practice Act** in particular. As with all other rules

changes, there will ample notification of the Board's proposed actions posted on the Board's website, and to repeat the mantra that should be followed by all licensees, please be sure to check the website on a regular basis for changes that will impact every licensee.

Audits: Documentation to Keep and Send

by Kathy O'Dwyer Arney, PT, MA, Consultant, Continuing Competence

A recently audited licensee submitted this question, “. . . I tried to be organized with my audit materials . . . Was my method of flagging the activity on the printed online report . . . and flagging the document/evidence . . .” helpful in making the audit any easier? This question describes several topics related to documentation to provide for continuing competence audits.

Documentation is defined simply as evidence of completion of continuing competence activities. When a licensee receives a request for documentation to complete an audit, paper documents are submitted to the Board for review to validate the twenty (20) points for a PTA and thirty (30) points for a PT of continuing competence activities required for license renewal. As few documents as possible that demonstrate an activity was completed should be submitted as evidence of the continuing competence activities. To minimize submissions, knowing which documents to send and sending only what is required will help. For example, copies of online reports and the request for documentation should not be submitted.

The reference for which documents to send, “Required Documentation” can be found on the Board website: <https://www.ncptboard.org/documents/continuing-competence/Documenting%20Continuing%20Competence%20Activities.pdf>. It is updated to comply with the Board rules effective January 1, 2014. Most subcategories can be demonstrated with one piece of paper. When submitting single page certificates, the document should include: dates of activity participation (within the reporting period), contact hours, the approving entity with any validating number or codes, appropriate signatures and method of instruction. If any of this information is missing, licensees will receive requests for additional information via email.

If a licensee has claimed carry over points from a prior reporting period and is audited, proof of those activities is required to complete the audit. When a licensee chooses the category(ies) from which to claim carry over, a document to prove participation or completion of one of the activities reported in that subcategory should be kept as evidence. Reviewing the online report from a prior period can easily provide the activity reported and thus which documentation to send. The Board rule states, “Licensees shall retain evidence of compliance with continuing competence requirements for a period of four

years following the end of the reporting period for which credit is sought for an activity.” Keeping documentation for at least 2 reporting periods after the reporting period where the activity is earned will make submission of carry over points to comply with an audit easy to do.

When certificates are incomplete additional work is required to obtain details. Prompt communication with the Board while information is sought allows the Board the opportunity to work with a licensee to complete the audit. Lack of communication puts a licensee at risk for disciplinary action. When activities are completed and documents maintained as required, responding to an audit request in a timely manner is less burdensome and the audit is completed quickly.

Other tips for submitting documentation to successfully complete an audit and minimize paper and requests for additional information are:

- Placing documents in the order they are reported in the online report
- If an activity requires more than a single page certificate, review what documentation is required and submit only what is required, stapled together and complete.
- Utilizing template forms available on the Board website facilitates compliant documentation submissions. Link: <https://www.ncptboard.org/ContinuingCompetence/CCForms.shtml>
- include documentation of all points; most commonly omitted documents are Jurisprudence Certificates and appropriate clinical practice documentation

Providing documentation to demonstrate compliance with Board rules is meant to preserve the integrity of the continuing competence requirements for license renewal. Audits are conducted primarily during the year after the close of a reporting period. For all licensees, establishing a mechanism to maintain and easily access documents at anytime is important in minimizing risk of being subject to disciplinary action for lack of timely response or audit completion. Whether you are on a traveling assignment, on medical leave from work, working in another state or having another personal hardship, all licensees are expected to comply with Board’s rules for audit in a timely manner.

Continuing Competence Audits, the Investigative Committee and Discipline

by Kathy O'Dwyer Arney, PT, MA, Consultant, Continuing Competence

The Board has audited continuing competence documentation for the reporting periods of 2009-2010, 2010-2011, and 2011-12. While the majority of audits were complete and compliant with both activities and documentation, over 50 licensees have been referred to the Board's Investigative Committee, with more than nineteen (19) licensees receiving Warnings and over twenty-five (25) receiving Advisory letters related to deficiencies. When disciplinary action has been recommended and approved, it has been related to failure to timely respond to the request for documentation, failure to complete an audit, or more seriously, for obtaining a license under false pretenses.

Licensees are selected for audit of continuing competence activities at the end of each reporting period. They are notified via USPS mailed letter and have 30-days to respond to the request to submit documentation. Once documentation of the required 20 points for PTA's and 30 points for PT's for license renewal is submitted, it is reviewed and if complete, the licensee receives a letter indicating completion and how to update the online report for accuracy. The process is straight forward and described in Board rule 21 NCAC 48G .0111.

Audit files that are incomplete, significantly delayed in completion or have no response are referred to the Board's Investigative Committee for review. Each file is reviewed individually and circumstances of compliance are considered before the Committee makes a recommendation. Recommendations may include closing the file without further action, sending an Advisory Letter (*not considered disciplinary action*), or disciplinary action. Recommendations for disciplinary action require additional review and approval by the Board. The auditing process is not meant to be punitive, but to ensure the integrity of the continuing competence requirements. Steps to take to avoid disciplinary action related to a continuing competence audit are further described here.

Do Not Renew your license if you have not completed continuing competence by the end of the reporting period. Obtaining a license renewal under false pretenses may lead to disciplinary action under the Board's rules. Licenses are easily revived within a few days of the renewal deadline if continuing competence is completed and can be demonstrated with documentation.

Response to an audit — within 30-days of receipt of a letter from the Board requesting documentation, submit complete documentation. If there are questions about how to respond or what to send in, please contact Kathy Arney, PT, at the Board office 919-490-6393 / karney@ncptboard.org. If there is a hardship in complying with the request contact the Board office and request an extension in writing, as soon as possible.

Audit compliance tips:

- Know and understand the continuing competence board rules. Review the rule updates to comply with rules amendments effective January 1, 2014.
- Establish a system for keeping and storing required documentation — electronic or hard-copy, as long as it's accessible when needed.
- Obtain complete documentation at the time the activity is completed.
- Report activities in the online continuing Competence reporting form as they are completed. It's available on the Board's website 24/7.
- Keep all contact information updated — mail, email, work and phone — using Online Services at the Board website.
- Do the Jurisprudence Exercise early in the reporting period, save or print the certificate, then report it online

Ineffective Excuses:

- I have changed employers.
- My employer has all my records.
- I lost my records while moving.
- I have another healthcare occupational license and activities completed for that will suffice.
- I am a "traveler".
- I didn't understand so I didn't respond.

Beginning each reporting period with a plan for where and how to complete the continuing competence requirements smoothes the way for completing required activities on time and completing an audit if selected.

Practice Act Updates *(continued from page 1)*

disclosed. Three additional changes in this section include the power to request criminal background checks in connection with licensure from the Department of Justice (9), the power to issue subpoenas to compel witness attendance or produce documents relative to Board investigations (10), and the power to establish or participate in programs for aiding in recovery for chemical and alcohol abuse (11). The use of criminal history checks for denial of licensure is comprehensively detailed in §90-270.29A and in §114-19.33 (adopted legislation that is not part of the **Practice Act**).

In §90-270.30, licensure of the foreign trained physical therapist assistant was included if the individual meets the conditions for licensure and demonstrates completion of instruction that is substantially equivalent to a domestically educated physical therapist assistant. This was a necessary inclusion as there are now international physical therapist assistant programs in addition to international physical therapist education programs.

90-270.24 (a) (7), (8), and (9) adds three additional categories for exemptions from licensure for a temporary and specified time for physical therapists and physical therapist assistants who provide physical therapy to athletic teams, athletic organizations or performing arts

companies; physical therapists and physical therapist assistants licensed in other jurisdictions that enter the state to provide physical therapy after a declared disaster or emergency in North Carolina; and physical therapists and physical therapist assistants licensed in another jurisdiction who are forced to leave their residence or state following a disaster or emergency such as those Louisiana licensees displaced following Hurricane Katrina.

The final revision to the **Practice Act** in §90-270.25 includes an additional third paragraph describing conduct that may result in removal of a Board member, i.e. ceases to meet qualifications, failure to attend three successive Board meetings without just cause, violation of provisions of the Article or rules, and otherwise engaging in immoral, dishonorable, unprofessional, or unethical conduct, or conduct that compromises the integrity of the Board. Licensees will have opportunities to demonstrate awareness of the revised **Practice Act** in Jurisprudence Exercises as they meet requirements for licensure renewal and continuing competence. Again, I encourage all North Carolina physical therapists and physical therapist assistants to become familiar with these recent revisions to the statute that governs the practice of physical therapy in our state.

2013 NCBPTE Holiday Schedule

Board Office will be closed	Day(s) of Week	Date(s)
Veteran's Day	Monday	November 11, 2013
Thanksgiving	Thurs & Friday	November 28 & 29, 2013
Christmas	Tues, Wed, & Thurs	December 24, 25, & 26, 2013

2014 NCBPTE Holiday Schedule

Board Office will be closed	Day(s) of Week	Date(s)
New Year's Day	Wednesday	January 1, 2014
Martin Luther King's Day	Monday	January 20, 2014
Good Friday	Friday	April 18, 2014
Memorial Day	Monday	May 26, 2014
Independence Day	Friday	July 4, 2014
Labor Day	Monday	September 1, 2014
Veteran's Day	Tuesday	November 11, 2014
Thanksgiving Day	Thurs & Fri	November 27 & 28, 2014
Christmas	Wed, Thurs, Fri	December 24, 25, & 26, 2014



Q: Does the change to the Board's rules require a PT to perform a reassessment on every patient on exactly the 13th visit or at least every 60 days, regardless of whether a PTA is involved with the patient's care?

A: The revised rule that you are referring to is "21 NCAC 48C .0102 - RESPONSIBILITIES (k) A physical therapist must reassess a patient every 60 days or 13 visits, whichever occurs first." First, if a physical therapist is providing care to a patient exclusively and a physical therapist assistant is not involved in the care, then this rule would not apply as it is expected that physical therapists perform an ongoing reassessment of patients on every visit. Secondly, a physical therapist may perform a reassessment sooner than 13 visits or at least every 60 days, but may not exceed these requirements.

Q: Is a formal discharge summary required on every patient as some of our patients are admitted to the hospital one day and discharged in a couple of days without any warning?

A: No. A Brief Discharge Note written by the PT or PTA that indicates the patient was discharged before a Discharge Summary could be performed is acceptable. (See Position Statement – "Documentation – Discharge Summary".

Q: Is Trager technique an appropriate technique to be performed by PTA's

A: Trager techniques that involve the spine should **not** be performed by PTA's as they are a form of spinal mobilization. Trager techniques that involve the shoulders, hips, arms, and legs would be permitted if the PTA has advanced training and is competent to perform extremity mobilization and Trager techniques.

Q: For the two (2) year reporting period, have the dates changed regarding the December 31st deadline for completion of continuing competence requirements?

A: Yes. In accordance with the change to the Board's rules below, the deadline for completion of continuing competence requirement is now the same deadline as licensure renewal (January 31st).

21 NCAC 48G .0105 DEFINITIONS

As used in this Subchapter, the following definitions apply:

- (12) "Reporting period" means a 25 month period commencing on January 1 during which the licensee must complete all continuing competence requirements. Points earned by a licensee may be counted toward completion during one reporting period only.

North Carolina Board of Physical Therapy Examiners

Board Orders / Consent Orders / Other Board Actions – December 2012 – October 2013

Owens, Mark Austin, PT (Summary Suspension)

Location: Winston-Salem, Forsyth County

License #: P12059

Conduct: Conviction of misdemeanor sexual battery with a patient.

Discipline: Indefinite Suspension (Executed December 6, 2012)

Owens, Mark Austin, PT (Surrender of License)

Location: Winston-Salem, Forsyth County

License #: P12059

Conduct: Conviction of misdemeanor sexual battery with a patient.

Discipline: Surrender of License (Effective Date – March 7, 2013)

Whisnant, Anna F., PT (Suspension)

Location: Asheville, NC, Buncombe County

License #: P8394

Conduct: Entering false documentation in several patient records and billing for treatments not performed.

Discipline: Suspension for one year, of which 15 consecutive days would be active and the remaining period would be inactive with conditions and reimburse the Board for the cost of the investigation. (Executed – December 31, 2012)

Kidd, William Bryan, PT (Surrender of License)

Location: High Point, NC, Guilford County

License #: P11526

Conduct: Stealing prescription medications from his patients for his personal use and abusing prescription medications.

Discipline: Surrender of license for a minimum of 1 year. (Effective date – January 13, 2013)

Earp, Jessica J., PTA (Warning)

Location: King, NC, Stokes County

License #: A-4095

Conduct: Engaging in practice beyond the scope of licensure as a physical therapist assistant.

Discipline: Warning and reimburse the Board for the cost of the investigation. (Effective date – April 23, 2013)

Anthony, Charles S., PTA (Warning)

Location: Benson, NC, Johnston County

License #: A3010

Conduct: Recording false information in patient treatment records.

Discipline: Warning and reimburse the Board for the cost of the investigation. (Effective date – April 23, 2013)

Hultz, Richard., PT (Suspension)

Location: Chapel Hill, NC, Orange County

License #: P7136

Conduct: Documenting and charging for patient visits that he did not perform.

Discipline: Suspension for one year, fifteen days active and the remaining stayed with conditions including that he may not work in a home health setting for 3 years. In addition, he must reimburse the Board for the cost of the investigation. (Executed – April 27, 2013)

Cooper, Benjamin Ryan, PTA, (Warning)

Location: Kernersville, NC, Forsyth County

License #: A4702

Conduct: Engaging in the practice of physical therapy while his license had lapsed.

Discipline: Warning and pay cost of the investigation. (Effective date - July 22, 2013)

Stratton, Kelly, PTA, (Warning)

Location: Monroe, NC, Union County

License #: A4171

Conduct: Billing for time spent documenting treatments.

Discipline: Warning, attend a course on documentation, and pay cost of the investigation. (Effective date - October 24, 2013)

Disciplinary Actions related to Continuing Competence

Donnellon, Stephen Walter, PT (Warning)

Location: Mission, TX

License #: P11809

Conduct: Failing to provide documentation in a timely manner that he had completed continuing competence by the deadline (Dec. 31, 2010).

Discipline: Warning, complete activities, and reimburse the Board for the cost of the investigation. (Effective date – January 24, 2013)

Deily, Timothy P., PT, (Warning)

Location: Charlotte, NC, Mecklenburg County,

License #: P7348

Conduct: Failing to provide documentation in a timely manner that he had completed continuing competence by the deadline (Dec. 31, 2010).

Discipline: Warning, complete activities, and reimburse the Board for the cost of the investigation. (Effective date - January 24, 2013)

Calendar of Events

** Dates are tentative / please confirm by contacting the Board office (800-800-8982)*

Posted and updated regularly on the Board's website

Board Members

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Consultant*

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Nov 1, 2013 (Fri)	Postcard Notices will be mailed reminding licensees to renew. Online renewal will open.
Nov 26, 2013 (Tues)	Investigative Committee Meeting *- (09:00 a.m. – 01:00 p.m., Satsky and Silverstein Law Firm, Raleigh, NC, www.satskysilverstein.com).
Dec 5, 2013 (Thurs)	Board Meeting *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, http://www.sienahotel.com/).
Jan 9, 2014 (Thurs)	Investigative Committee Meeting *- (09:00 a.m. – 01:00 p.m., Satsky and Silverstein Law Firm, Raleigh, NC, www.satskysilverstein.com).
Jan 31, 2014 (Fri)	Final Deadline for license renewal.
Feb 1, 2014 (Sat)	Lapse of licenses not renewed.
Mar 13, 2014 (Thurs)	Board Meeting *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, http://www.sienahotel.com/).
June 19, 2014 (Thurs)	Board Meeting *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, http://www.sienahotel.com/).
Sept 11, 2014 (Thurs)	Board Meeting *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, http://www.sienahotel.com/).

Summary of Fees

(Effective March 1, 2007)

Renewal (PT & PTA)	\$100.00	Verification/Transfer Fee	30.00
Revival Fee and Renewal Fee	130.00	License Card	10.00
Application Fee PT & PTA	150.00	Mailing list of Licensees (PT or PTA)	60.00
Exam Cost (PT & PTA)*	370.00	Certificate Replacement	30.00
Exam Retake Fee	60.00		

*Plus PT or PTA Application Fee

21 NCAC 48G .0112 *Costs for Continuing Competence Activities*

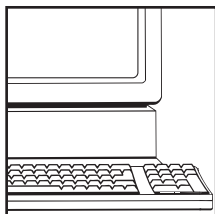
(Effective January 1, 2009)

- (a) There is no cost for approval of continuing competence activities offered by approved sponsors.
- (b) For a non-Approved provider seeking approval of a continuing competence activity offered to licensees in this State, the cost is one hundred fifty dollars (\$150.00) per activity.
- (c) For a licensee seeking approval of a continuing competence activity that is not offered by an approved sponsor, the cost is twenty-five dollars (\$25.00).

N.C. Licensure Statistics

(As of September 24, 2013)

	Licensed	Reside	Work
PTs	7,057	6,003	5,636
PTAs	3,155	2,804	2,577



21 NCAC 48F .0105 CHANGE OF NAME AND ADDRESS REQUIRED

Each licensee must notify the Board within 30 days of a change of name or work or home address. [History Note: Authority G.S. 90-270.27; Eff. August 1, 2002.]

Addresses can be changed by the licensee on the Licensure Board's web page (www.ncptboard.org) or by letter, fax (919-490-5106), or call the Board's office at 919-490-6393 or 800-800-8982.