PT Compact & Telehealth

Online Survey of Clinicians with Active Privileges
What is the Compact?

- Agreement between member states
- Improves access to physical therapy services & increases public protection
Status of PT Compact Adoption
As of December 31, 2016

PT Compact Legislation
Enacted – Not Yet Issuing or Accepting Compact Privileges (4)
Status of PT Compact Adoption
As of December 31, 2017

PT Compact Legislation
Enacted – Not Yet Issuing or Accepting Compact Privileges (14)
Status of PT Compact Adoption
As of December 31, 2018

PT Compact Member State – Actively Issuing and Accepting Compact Privileges (6)
- OR
- UT
- AZ
- KS
- MN
- WI
- MI
- IN
- KY
- TN
- GA
- SC
- NC
- PA
- MA
- DE
- DC
- NE
- MT
- CA
- IL
- ND
- NV

PT Compact Legislation Enacted – Not Yet Issuing or Accepting Compact Privileges (15)
- AR
- WY
- CO
- MS
- MO
- MD
- NJ
- NY
- NH
- ME
- AL
- FL
- WV
- CT
- RI
- VT
- OK

Map showing states that have adopted the PT Compact.
Status of PT Compact Adoption
As of December 31, 2019

PT Compact Member State – Actively Issuing and Accepting Compact Privileges (16)
- AK
- HI
- WA
- OR
- MT
- ND
- MN
- WI
- IL
- IN
- OH
- KY
- TN
- GA
- SC
- NC
- PA
- MA
- DE
- DC
- NJ
- NY
- CT
- RI
- VT
- NV
- CA
- ID

PT Compact Legislation Enacted – Not Yet Issuing or Accepting Compact Privileges (10)
- OR
- AZ
- KS
- MN
- WI
- MI
- IN
- KY
- TN
- GA
- SC
- PA
- MA
- DE
- DC
- NE
- MT
- CA
- IL
- ND
- NJ
- HI
- AK
- HI
- PR
Status of PT Compact Adoption
As of December 31, 2021

PT Compact Member State – Actively Issuing and Accepting Compact Privileges (25)

PT Compact Legislation Enacted – Not Yet Issuing or Accepting Compact Privileges (9)
Status of PT Compact Adoption
As of November 14, 2022

PT Compact
Member State – Actively Issuing and Accepting Compact Privileges (27)

PT Compact Legislation Enacted – Not Yet Issuing or Accepting Compact Privileges (7)
Jurisdictions Issuing Privileges as of 10/3/22 (27)

Additional Jurisdictions Projected to be Ready by 7/1/23 (3)

PT Compact Legislation Enacted – Not Yet Issuing or Accepting Compact Privileges (4)
2023 Legislative Outlook – as of October 11, 2022

Current Member Jurisdictions (34)

Most Likely to Introduce in 2023 (8)

Possible Introduction in 2023 (1)
TELEHEALTH & THE COMPACT
TELEHEALTH

- Pandemic => Accelerated growth
- APTA Telehealth Certificate Series
- Virtual Platforms
How Can the Compact Benefit Telehealth?

Practice of physical therapy occurs in the state where the patient/client is located at the time of the patient/client encounter.
Providing Services to Patients in 25 states?

**Traditional License**
- 25 different expiration dates
- 25 different CE requirements
- Score transfers for licenses by endorsement
- 25 separate processes to get licensed in 25 separate states

**Compact**
- 1 expiration date (home state license)
- 1 set of CE requirements (home state license)
- No score transfers needed
- Can purchase multiple privileges in a single transaction
More information available at OTcompact.org

Planning for OT Compact legislation to be introduced in 12-15 states in 2023

OT Compact Privileges to Practice are expected to be available in late 2023 or early 2024

Contact Chuck Willmarth (cwillmarth@aota.org) with any questions
PT Compact Telehealth Survey

Survey sent to 3,051 active privilege holders on May 5

Survey open until end of May

328 survey respondents (response rate of 10.8%)
<table>
<thead>
<tr>
<th>GENDER</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>246</td>
<td>74.55%</td>
</tr>
<tr>
<td>Male</td>
<td>79</td>
<td>23.94%</td>
</tr>
<tr>
<td>I Prefer Not to Respond</td>
<td>5</td>
<td>1.52%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HISPANIC</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>308</td>
<td>93.33%</td>
</tr>
<tr>
<td>Yes</td>
<td>14</td>
<td>4.24%</td>
</tr>
<tr>
<td>I Prefer Not to Respond</td>
<td>8</td>
<td>2.42%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RACE</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>15</td>
<td>4.5%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>3</td>
<td>0.90%</td>
</tr>
<tr>
<td>White</td>
<td>250</td>
<td>75.08%</td>
</tr>
<tr>
<td>Other</td>
<td>64</td>
<td>19.22%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PT</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Therapist</td>
<td>284</td>
<td>86.06%</td>
</tr>
<tr>
<td>Physical Therapist Assistant</td>
<td>46</td>
<td>13.94%</td>
</tr>
<tr>
<td>GENDER</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>------------------------</td>
<td>----</td>
<td>------</td>
</tr>
<tr>
<td>Female</td>
<td>246</td>
<td>74.55%</td>
</tr>
<tr>
<td>Male</td>
<td>79</td>
<td>23.94%</td>
</tr>
<tr>
<td>I Prefer Not to Respond</td>
<td>5</td>
<td>1.52%</td>
</tr>
<tr>
<td>HISPANIC</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>No</td>
<td>308</td>
<td>93.33%</td>
</tr>
<tr>
<td>Yes</td>
<td>14</td>
<td>4.24%</td>
</tr>
<tr>
<td>I Prefer Not to Respond</td>
<td>8</td>
<td>2.42%</td>
</tr>
<tr>
<td>RACE</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>-----</td>
<td>------</td>
</tr>
<tr>
<td>American Indian or Alaska Native</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>15</td>
<td>4.5%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>3</td>
<td>0.90%</td>
</tr>
<tr>
<td>White</td>
<td>250</td>
<td>75.08%</td>
</tr>
<tr>
<td>Other</td>
<td>64</td>
<td>19.22%</td>
</tr>
<tr>
<td>PT</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----</td>
<td>-------</td>
</tr>
<tr>
<td>Physical Therapist</td>
<td>284</td>
<td>86.06%</td>
</tr>
<tr>
<td>Physical Therapist Assistant</td>
<td>46</td>
<td>13.94%</td>
</tr>
</tbody>
</table>
### GENDER

<table>
<thead>
<tr>
<th>Gender</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>246</td>
<td>74.55%</td>
</tr>
<tr>
<td>Male</td>
<td>79</td>
<td>23.94%</td>
</tr>
<tr>
<td>I Prefer Not to Respond</td>
<td>5</td>
<td>1.52%</td>
</tr>
</tbody>
</table>

### HISPANIC

<table>
<thead>
<tr>
<th>Hispanic</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>308</td>
<td>93.33%</td>
</tr>
<tr>
<td>Yes</td>
<td>14</td>
<td>4.24%</td>
</tr>
<tr>
<td>I Prefer Not to Respond</td>
<td>8</td>
<td>2.42%</td>
</tr>
</tbody>
</table>

### RACE

<table>
<thead>
<tr>
<th>Race</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>15</td>
<td>4.5%</td>
</tr>
<tr>
<td>Native Hawaiian or Other Pacific Islander</td>
<td>3</td>
<td>0.90%</td>
</tr>
<tr>
<td>White</td>
<td>250</td>
<td>75.08%</td>
</tr>
<tr>
<td>Other</td>
<td>64</td>
<td>19.22%</td>
</tr>
</tbody>
</table>

### PT

<table>
<thead>
<tr>
<th>PT</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Therapist</td>
<td>284</td>
<td>86.06%</td>
</tr>
<tr>
<td>Physical Therapist Assistant</td>
<td>46</td>
<td>13.94%</td>
</tr>
<tr>
<td>FROM</td>
<td>TO</td>
<td>N</td>
</tr>
<tr>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>1975</td>
<td>1979</td>
<td>2</td>
</tr>
<tr>
<td>1980</td>
<td>1984</td>
<td>8</td>
</tr>
<tr>
<td>1985</td>
<td>1989</td>
<td>9</td>
</tr>
<tr>
<td>1990</td>
<td>1994</td>
<td>18</td>
</tr>
<tr>
<td>1995</td>
<td>1999</td>
<td>17</td>
</tr>
<tr>
<td>2000</td>
<td>2004</td>
<td>11</td>
</tr>
<tr>
<td>2005</td>
<td>2009</td>
<td>21</td>
</tr>
<tr>
<td>2010</td>
<td>2014</td>
<td>37</td>
</tr>
<tr>
<td>2015</td>
<td>2019</td>
<td>46</td>
</tr>
<tr>
<td>2020</td>
<td>2024</td>
<td>15</td>
</tr>
<tr>
<td># of Licenses</td>
<td># of Licenses</td>
<td>Percentage</td>
</tr>
<tr>
<td>---------------</td>
<td>--------------</td>
<td>------------</td>
</tr>
<tr>
<td>1</td>
<td>165</td>
<td>51.7%</td>
</tr>
<tr>
<td>2</td>
<td>79</td>
<td>24.8%</td>
</tr>
<tr>
<td>3</td>
<td>25</td>
<td>7.8%</td>
</tr>
<tr>
<td>4</td>
<td>22</td>
<td>6.9%</td>
</tr>
<tr>
<td>5-9</td>
<td>13</td>
<td>4.1%</td>
</tr>
<tr>
<td>10-14</td>
<td>7</td>
<td>2.2%</td>
</tr>
<tr>
<td>15-19</td>
<td>7</td>
<td>2.2%</td>
</tr>
<tr>
<td>20-24</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td># of Licenses</td>
<td>Number</td>
<td>Percentage</td>
</tr>
<tr>
<td>---------------</td>
<td>--------</td>
<td>------------</td>
</tr>
<tr>
<td>1</td>
<td>165</td>
<td>51.7%</td>
</tr>
<tr>
<td>2</td>
<td>79</td>
<td>24.8%</td>
</tr>
<tr>
<td>3</td>
<td>25</td>
<td>7.8%</td>
</tr>
<tr>
<td>4</td>
<td>22</td>
<td>6.9%</td>
</tr>
<tr>
<td>5-9</td>
<td>13</td>
<td>4.1%</td>
</tr>
<tr>
<td>10-14</td>
<td>7</td>
<td>2.2%</td>
</tr>
<tr>
<td>15-19</td>
<td>7</td>
<td>2.2%</td>
</tr>
<tr>
<td>20-24</td>
<td>1</td>
<td>0.3%</td>
</tr>
</tbody>
</table>
## Number of Licenses

<table>
<thead>
<tr>
<th># of Licenses</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>165</td>
<td>51.7%</td>
</tr>
<tr>
<td>2</td>
<td>79</td>
<td>24.8%</td>
</tr>
<tr>
<td>3</td>
<td>25</td>
<td>7.8%</td>
</tr>
<tr>
<td>4</td>
<td>22</td>
<td>6.9%</td>
</tr>
<tr>
<td>5-9</td>
<td>13</td>
<td>4.1%</td>
</tr>
<tr>
<td>10-14</td>
<td>7</td>
<td>2.2%</td>
</tr>
<tr>
<td>15-19</td>
<td>7</td>
<td>2.2%</td>
</tr>
<tr>
<td>20-24</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>Number of Compact Privileges</td>
<td>Count</td>
<td>Percentage</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>1</td>
<td>214</td>
<td>68.2%</td>
</tr>
<tr>
<td>2</td>
<td>44</td>
<td>14.0%</td>
</tr>
<tr>
<td>3</td>
<td>19</td>
<td>6.1%</td>
</tr>
<tr>
<td>4</td>
<td>9</td>
<td>2.9%</td>
</tr>
<tr>
<td>5-9</td>
<td>21</td>
<td>6.7%</td>
</tr>
<tr>
<td>10-14</td>
<td>2</td>
<td>0.6%</td>
</tr>
<tr>
<td>15-19</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>20-24</td>
<td>4</td>
<td>1.3%</td>
</tr>
<tr>
<td>Number of Compact Privileges</td>
<td>Count</td>
<td>Percentage</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>1</td>
<td>214</td>
<td>68.2%</td>
</tr>
<tr>
<td>2</td>
<td>44</td>
<td>14.0%</td>
</tr>
<tr>
<td>3</td>
<td>19</td>
<td>6.1%</td>
</tr>
<tr>
<td>4</td>
<td>9</td>
<td>2.9%</td>
</tr>
<tr>
<td>5-9</td>
<td>21</td>
<td>6.7%</td>
</tr>
<tr>
<td>10-14</td>
<td>2</td>
<td>0.6%</td>
</tr>
<tr>
<td>15-19</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>20-24</td>
<td>4</td>
<td>1.3%</td>
</tr>
<tr>
<td>Number of Compact Privileges</td>
<td>Count</td>
<td>Percentage</td>
</tr>
<tr>
<td>----------------------------</td>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>1</td>
<td>214</td>
<td>68.2%</td>
</tr>
<tr>
<td>2</td>
<td>44</td>
<td>14.0%</td>
</tr>
<tr>
<td>3</td>
<td>19</td>
<td>6.1%</td>
</tr>
<tr>
<td>4</td>
<td>9</td>
<td>2.9%</td>
</tr>
<tr>
<td>5-9</td>
<td>21</td>
<td>6.7%</td>
</tr>
<tr>
<td>10-14</td>
<td>2</td>
<td>0.6%</td>
</tr>
<tr>
<td>15-19</td>
<td>1</td>
<td>0.3%</td>
</tr>
<tr>
<td>20-24</td>
<td>4</td>
<td>1.3%</td>
</tr>
</tbody>
</table>
Why do you seek authorization to practice (license or compact privilege) in other jurisdictions? (Select all that apply)

- Travel Therapy Assignment in Another Jurisdiction: 17.66%
- Telehealth in Another Jurisdiction: 28.86%
- Teaching in Another Jurisdiction: 1.24%
- Seasonal Travel in Another Jurisdiction: 8.96%
- Live Near Border of Another Jurisdiction: 15.17%
- Company Has Facilities in Multiple Jurisdictions: 18.41%
- Other Please Specify: 9.70%
<table>
<thead>
<tr>
<th>Employment Status</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actively employed as a physical therapist/physical therapist assistant full-time</td>
<td>212</td>
<td>63.86%</td>
</tr>
<tr>
<td>Actively employed as a physical therapist/physical therapist assistant part-time</td>
<td>61</td>
<td>18.37%</td>
</tr>
<tr>
<td>Self-employed as a physical therapist/physical therapist assistant full-time</td>
<td>18</td>
<td>5.42%</td>
</tr>
<tr>
<td>Self-employed as a physical therapist/physical therapist assistant part-time</td>
<td>30</td>
<td>9.04%</td>
</tr>
<tr>
<td>Retired</td>
<td>5</td>
<td>1.51%</td>
</tr>
<tr>
<td>Unemployed, seeking employment as a physical therapist/physical therapist assistant</td>
<td>5</td>
<td>1.51%</td>
</tr>
<tr>
<td>Unemployed, NOT seeking employment as a physical therapist/physical therapist assistant</td>
<td>1</td>
<td>0.30%</td>
</tr>
<tr>
<td>HOW DID YOU HEAR ABOUT THE PT COMPACT?</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>-------------------------------------------------------------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>APTA</td>
<td>111</td>
<td>21.60%</td>
</tr>
<tr>
<td>State Physical Therapy Association Center</td>
<td>30</td>
<td>5.84%</td>
</tr>
<tr>
<td>Federal State Boards of Physical Therapy</td>
<td>40</td>
<td>7.78%</td>
</tr>
<tr>
<td>State Physical Therapy Licensing Board</td>
<td>39</td>
<td>7.59%</td>
</tr>
<tr>
<td>PT/ PTA Educational Program</td>
<td>34</td>
<td>6.61%</td>
</tr>
<tr>
<td>Travel/ Staffing Company</td>
<td>38</td>
<td>7.39%</td>
</tr>
<tr>
<td>Co-worker/ Word of Mouth</td>
<td>98</td>
<td>19.07%</td>
</tr>
<tr>
<td>Internet Search</td>
<td>42</td>
<td>8.17%</td>
</tr>
<tr>
<td>PT Compact Communications (e.g., website, email, webinar, social media)</td>
<td>62</td>
<td>12.06%</td>
</tr>
<tr>
<td>Other, please specify:</td>
<td>20</td>
<td>3.89%</td>
</tr>
<tr>
<td>Location</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-----</td>
<td>------</td>
</tr>
<tr>
<td>Urban/Metropolitan</td>
<td>115</td>
<td>36.86%</td>
</tr>
<tr>
<td>Suburban</td>
<td>107</td>
<td>34.29%</td>
</tr>
<tr>
<td>Rural</td>
<td>90</td>
<td>28.85%</td>
</tr>
<tr>
<td>HAVE YOU EVER USED OR CONSIDERED USING TELEHEALTH (VIRTUAL OR DIGITAL PHYSICAL THERAPY) TO CARE FOR YOUR PATIENTS?</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------------------------</td>
<td>-----</td>
<td>-------</td>
</tr>
<tr>
<td>Yes, I have used telehealth</td>
<td>216</td>
<td>68.79%</td>
</tr>
<tr>
<td>No, I have not used telehealth, but I have considered it</td>
<td>55</td>
<td>17.52%</td>
</tr>
<tr>
<td>No, I have not used telehealth, and have not considered it</td>
<td>43</td>
<td>13.69%</td>
</tr>
</tbody>
</table>

![Bar chart showing the distribution of responses](chart.png)
<table>
<thead>
<tr>
<th></th>
<th>YES, I HAVE USED TELEHEALTH</th>
<th>NO, I HAVE NOT USED TELEHEALTH BUT HAVE CONSIDERED IT</th>
<th>NO, I HAVE NOT USED TELEHEALTH AND HAVE NOT CONSIDERED IT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x CP</td>
<td>2.48</td>
<td></td>
<td>1.47</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>24</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Min CP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Max CP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x Lic</td>
<td>2.85</td>
<td></td>
<td>1.58</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>24</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Min Lic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Max Lic</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>x Total</td>
<td>5.32</td>
<td></td>
<td>3.05</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>48</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Min Tot</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Max Tot</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Do you CURRENTLY use telehealth to care for your patients? (n=215)

- Yes: 73.5%
- No: 26.5%

How many telehealth visits do you CURRENTLY average per week? (n=157)

- Less than 1: 19.7%
- 1 to 5: 38.9%
- 6 to 10: 10.89%
- 11 to 15: 5.1%
- 16 to 20: 7.0%
- 21 to 25: 6.4%
- 26+: 12.1%
Did you provide telehealth at any point DURING the peak of the COVID-19 pandemic? (n=215)

- Yes: 85.6%
- No: 14.4%

How many telehealth visits did you average per week DURING the COVID-19 pandemic? (n=184)

- Less than 1: 7.6%
- 1 to 5: 36.4%
- 6 to 10: 19.6%
- 11 to 15: 10.9%
- 16 to 20: 10.9%
- 21 to 25: 3.3%
- 26+: 11.4%
Did you provide telehealth at any point BEFORE the pandemic (n=215)

- 81.9% No
- 18.1% Yes

How many telehealth visits did you average BEFORE the pandemic? (n=38)

- 1 to 5: 30%
- 6 to 10: 10%
- 11 to 15: 5%
- 16 to 20: 5%
- 21 to 25: 5%
- 26+: 5%
Where were you when you conducted your telehealth visits? Select all that apply (277 responses)

- Clinic: 73.2%
- My Home: 9.8%
- Hospital: 5.5%
- Health System: 8.2%
- Day Care Center: 0.5%
- SNF, Long Term Care, Rehab Facility: 2.2%
- Car (Home Health): 0.5%
Where were your patients located when you conducted telehealth visits? Select all that apply. (244 responses)

- Other Homes: 0.4%
- Car: 0.4%
- Place of Employment: 3.7%
- SNF, Long Term Care, Rehab Facility: 4.5%
- Day Care Center: 0.4%
- Health System: 7.8%
- Hospital: 1.2%
- Remote Site: 7.3%
- Their Home: 67.3%
- Clinic: 6.9%
Using percentages, please identify how much of your telehealth patient population are located in each setting.

- Urban/Metropolitan: 26.1%
- Suburban: 39.6%
- Rural: 34.3%
What aspects of care do you provide via telehealth? Select all that apply.
(844 responses)

- High Risk Call: 0.1%
- Screening: 0.1%
- Consultation with Others: 10.4%
- Remote (Therapeutic) Monitoring: 12.0%
- Supervision: 8.1%
- Re-evaluation (PT Only): 15.9%
- Intervention/Treatment: 19.2%
- Examination (test and measures): 15.4%
- Evaluation (PT Only): 67.3%
What aspects of care do you NOT provide via telehealth? Select all that apply. (274 responses)

- W/C evaluations and prescriptions: 0.4%
- Modalities, manual techniques: 0.7%
- Consultation with others: 16.8%
- Remote (therapeutic) monitoring: 16.8%
- Supervision: 22.6%
- Re-evaluation (PT Only): 7.3%
- Intervention/Treatment: 11.3%
- Examination (test and measures): 12.0%
- Evaluation (PT Only): 12.0%
Telehealth has allowed me to provide more comprehensive quality care for patients. (n=205)
Most of the virtual telehealth visits I provide replace in-person care.
(n=205)
Most of the virtual telehealth visits I provide supplement in-person care. (n=205)
Patients have better access to care with telehealth (n=292)

- Strongly Agree: 36.3%
- Agree: 28.1%
- Neutral: 21.2%
- Disagree: 11.0%
- Strongly Disagree: 3.4%
Patients have higher satisfaction with Telehealth (n=292)

- Strongly Agree: 11.0%
- Agree: 18.5%
- Neutral: 41.4%
- Disagree: 22.6%
- Strongly Disagree: 6.5%
I am personally motivated to increase use of telehealth. (n=292)
My organization's leadership is motivated to increase use of telehealth. (n=290)
Telehealth Opportunities
Opportunity #1

• Lessons learned from the pandemic
Telehealth Adoption

Percentage of PTs Who Used Telehealth Prior And During

- Acute care hospital: Prior 1%, During 12%
- Hospital-based outpatient facility or clinic: Prior 2%, During 50%
- Private outpatient office or group practice: Prior 3%, During 71%
- Skilled nursing facility/Long-term care: Prior 1%, During 5%
- Patient’s home/home care: Prior 2%, During 32%
- School system (pre-K to 12): Prior 0%, During 93%
- Academic institution (postsecondary): Prior 1%, During 69%
- Inpatient rehab facility: Prior 1%, During 7%
- Other: Prior 6%, During 61%

©2020 American Physical Therapy Association. All rights reserved.
Telehealth Use during COVID-19

- Less in rural compared to urban regions
  - Demeke et al (MMWR 2021)
  - Lin et al (Health Aff. 2018)
- Inconsistent findings on minority groups
  - Patel et al (Health Aff. 2021); Weiner et al (JAMA NO, 2021); Qian et al (J Med internet Res. 2021)
- Problem of the color line, spatial access to health services
  - Eberth et al (Health Aff., 2022); Toussignant et al (J Med Internet Res., 2015)
Morbidity and Mortality Weekly Report (MMWR)

Trends in Use of Telehealth Among Health Centers During the COVID-19 Pandemic — United States, June 26–November 6, 2020

Appendix Exhibit 5. Proportion of all Clinicians by Specialty using Telemedicine during the Pre- and COVID-19 Periods

Source/Notes: SOURCE [Authors’ analysis of data from OptumLabs Data Warehouse] NOTES [Abbreviations: physical medicine and rehabilitation (PM&R); obstetrics and gynecology (OB/GYN)]. The x-axis is calculated as the unique number of specialty clinicians billing for any outpatient telemedicine encounter in the pre and COVID-19 periods (columns 4 and 5, respectively, in Appendix Exhibit 5) divided by the total number of unique clinicians in each specialty billing for any service in the OptumLabs Data Warehouse (column 6 in Appendix Exhibit 5) during the entire study period (Jan1-Jun16)
Opportunity #2

- Telehealth PT workforce
  Competencies
PTs Obstacles To Providing Telehealth

- My patients and clients lack adequate technology: 31%
- Payers don't reimburse for telehealth services: 24%
- My facility lacks adequate technology to provide telehealth: 21%
- No obstacles: 20%
- I'm not sure where to start: 13%
- I lack adequate technology to provide telehealth from home: 5%
- My state practice act doesn't allow it: 4%
What specific clinical use cases within physical therapy do you find most appropriate for telehealth?

- Less complex and safer environment for patients (covid)/patient populations
- Where lack of provider (PRN) or lack of services (rural)
- If pediatrics – engaged patient/caregivers/family members
- No inpt setting or acute rehab settings; various outpatient, w/c assessment, self pay
- Hate it to love it
Which of the following are your GREATEST concerns when providing telehealth?

- Technology
- Patient Safety
- Communication
- Privacy
Which of the following do you believe are your patient's GREATEST concerns when providing telehealth?

- Technology
- Patient safety
- Communication
- Lack of hands-on care
Do you have any other comments about telehealth not addressed in the survey?

• Patient selection – pro and con
• Relationship with PTA
• Compact-related topics
An international core capability framework for physiotherapists to deliver quality care via videoconferencing: a Delphi study

Luke Davies 1, Rana S Hinman 1, Trevor Russell 2, Belinda Lawford 3, Kim Bennell 3, International Videoconferencing Steering Group

1. Compliance
2. Patient privacy and confidentiality
3. Patient safety
4. Technology skills
5. Telehealth delivery
6. Assessment & diagnosis
7. Care planning and management

PT videoconferencing competencies
Telehealth Competencies

Over the past 20 years, medical education has improved in many ways, including in how outcomes such as competencies are defined and used to guide teaching and learning. To support this kind of positive change, we continue to build the AAMC New and Emerging Areas in Medicine Series.

The second report in this series focuses on telehealth competencies across the continuum of medical education. It presents a roadmap for curricular and professional development, performance assessment, and improvement of health care services and outcomes.

The competencies are organized across six domains:

1. Patient Safety and Appropriate Use of Telehealth
2. Access and Equity in Telehealth
3. Communication via Telehealth
4. Data Collection and Assessment via Telehealth
5. Technology for Telehealth
6. Ethical Practices and Legal Requirements for Telehealth

The competencies have been developed over three tiers that represent developmental stages in physician development:

1. entry to residency or recent medical school graduate
2. entry to practice or recent residency graduate
3. experienced faculty physician or three to five years post-residency

Opportunity #3

- Current Resources in physical therapy
FSBPT Resources

https://www.fsbpt.org/Free-Resources/Regulatory-Resources/Telehealth-in-Physical-Therapy
Digital Practice Resources

REPORT OF THE WORLD PHYSIOTHERAPY/INPTRA DIGITAL PHYSICAL THERAPY PRACTICE TASK FORCE

15 May 2019


The PTJ Podcast

Collections

Are you a new listener? Introduce yourself to the PTJ Podcast with curated collections, such as the top three most-downloaded episodes of 2020 or episodes focused on physical therapy educational programs.

Most-Downloaded Episodes of 2020

- Physical Therapist Management of Total Knee Arthroplasty: An Author Interview with Dr. Stephen Hunter and Dr. Diane Jette
- The Essential Role of Home- and Community-Based Physical Therapists During the COVID-19 Pandemic: An Author Interview with Dr. Jason Falvey
- COVID-19 and Advancing Digital Physical Therapist Practice: An Author Interview with Dr. Alan Lee and Dr. Lesley Holdsworth

APTA Telehealth Certificate

1. Introduction: Evidence-based Provision of Telehealth Services
2. Provision of Telehealth Services: Administrative/Marketing
3. Provision of Telehealth Services: Ethical Considerations
4. Provision of Telehealth Services: Regulatory Considerations
5. Provision of Telehealth Services: Technical Considerations
6. Provision of Telehealth Services: Clinical Applications and Pearls
7. Elective Courses: Various Practice Settings and Patient Populations

The COVID-19 pandemic significantly increased the number of patients seeking physical therapist services via telehealth. This paradigm shift will improve access to care, but it also brings change. APTA has developed a telehealth certificate series to ensure that PTs, PTAs, and students are prepared to provide excellent care via telehealth. Learn best practices and tips covering ethical and regulatory considerations, administration and marketing, technology, and clinical application.

Enrollees must complete six mandatory core courses within six months of enrollment to receive the APTA telehealth certificate. Elective courses are optional and not required to receive the APTA telehealth certificate.

https://learningcenter.apta.org/student/MyLP.aspx?id=054e0729-854a-454e-bd49-e0be81817e9a&ProgramID=dcca7f06-4cd9-4530-b9d3-4ef7d2717b5d
APTA Find a “Telehealth” PT

Diffusion of Innovations
Digital health technology & PT

https://www.apta.org/article/2022/04/15/digital-health-technology-and-physical-therapy
Summary

• Prepare to inform others now & not abandon telehealth choice in physical therapy for the future
• Thank you & Survey responders from FSBPT
References


Telehealth Use during COVID-19

- Less in rural compared to urban regions
  - Demek et al (MMWR 2021)
  - Lin et al (Health Aff. 2018)
- Inconsistent findings on minority groups
  - Patel et al (Health Aff. 2021); Weiner et al (JAMA NO, 2021); Qian et al (J Med Internet Res. 2021)
- Problem of the color line, spatial access to health services
  - Eberth et al (Health Aff., 2022); Tousignant et al (J Med Internet Res., 2015)
Morbidity and Mortality Weekly Report (MMWR)

Trends in Use of Telehealth Among Health Centers During the COVID-19 Pandemic — United States, June 26–November 6, 2020

Appendix Exhibit 5. Proportion of all Clinicians by Specialty using Telemedicine during the Pre- and COVID-19 Periods

Source/Notes: SOURCE [Authors’ analysis of data from OptumLabs Data Warehouse] NOTES [Abbreviations: physical medicine and rehabilitation (PM&R); obstetrics and gynecology (OBGYN). The x-axis is calculated as the unique number of specialty clinicians billing for any outpatient telemedicine encounter in the pre and COVID-19 periods (columns 4 and 5, respectively, in Appendix Exhibit 5) divided by the total number of unique clinicians in each specialty billing for any service in the OptumLabs Data Warehouse (column 6 in Appendix Exhibit 5) during the entire study period (Jan1-Jun16)]
Opportunity #2

- Telehealth PT workforce Competencies
PTs Obstacles To Providing Telehealth

- My patients and clients lack adequate technology: 31%
- Payers don't reimburse for telehealth services: 24%
- My facility lacks adequate technology to provide telehealth: 21%
- No obstacles: 20%
- I'm not sure where to start: 13%
- I lack adequate technology to provide telehealth from home: 5%
- My state practice act doesn't allow it: 4%
What specific clinical use cases within physical therapy do you find most appropriate for telehealth?

- Less complex and safer environment for patients (covid)/patient populations
- Where lack of provider (PRN) or lack of services (rural)
- If pediatrics – engaged patient/caregivers/family members
- No inpt setting or acute rehab settings; various outpatient, w/c assessment, self pay
- Hate it to love it
Which of the following are your GREATEST concerns when providing telehealth?

- Technology
- Patient Safety
- Communication
- Privacy
Which of the following do you believe are your patient's GREATEST concerns when providing telehealth?

• Technology
• Patient safety
• Communication
• Lack of hands-on care
Do you have any other comments about telehealth not addressed in the survey?

• Patient selection – pro and con
• Relationship with PTA
• Compact-related topics
An international core capability framework for physiotherapists to deliver quality care via videoconferencing: a Delphi study

Luke Davies 1, Rana S Hinman 1, Trevor Russell 2, Belinda Lawford 3, Kim Bennell 3, International Videoconferencing Steering Group

1. Compliance
2. Patient privacy and confidentiality
3. Patient safety
4. Technology skills
5. Telehealth delivery
6. Assessment & diagnosis
7. Care planning and management
MEDICAL EDUCATION

Telehealth Competencies

Over the past 20 years, medical education has improved in many ways, including in how outcomes such as competencies are defined and used to guide teaching and learning. To support this kind of positive change, we continue to build the AAMC New and Emerging Areas in Medicine Series.

The second report in this series focuses on telehealth competencies across the continuum of medical education. It presents a roadmap for curricular and professional development, performance assessment, and improvement of health care services and outcomes.

The competencies are organized across six domains:

1. Patient Safety and Appropriate Use of Telehealth
2. Access and Equity in Telehealth
3. Communication via Telehealth
4. Data Collection and Assessment via Telehealth
5. Technology for Telehealth
6. Ethical Practices and Legal Requirements for Telehealth

The competencies have been developed over three tiers that represent developmental stages in physician development:

1. entry to residency or recent medical school graduate
2. entry to practice or recent residency graduate
3. experienced faculty physician or three to five years post-residency
Opportunity #3

• Current Resources in physical therapy
FSBPT Resources

https://www.fsbpt.org/Free-Resources/Regulatory-Resources/Telehealth-in-Physical-Therapy
Digital Practice Resources

REPORT OF THE WORLD PHYSIOTHERAPY/INPTRA DIGITAL PHYSICAL THERAPY PRACTICE TASK FORCE

World Physiotherapy

International Network of Physiotherapy Regulatory Authorities

15 May 2019


The PTJ Podcast

Collections

Are you a new listener? Introduce yourself to the PTJ Podcast with curated collections, such as the top three most-downloaded episodes of 2020 or episodes focused on physical therapy educational programs.

Most-Downloaded Episodes of 2020

- Physical Therapist Management of Total Knee Arthroplasty: An Author Interview with Dr. Stephen Hunter and Dr. Diane Jette
- The Essential Role of Home- and Community-Based Physical Therapists During the COVID-19 Pandemic: An Author Interview with Dr. Jason Falvey
- COVID-19 and Advancing Digital Physical Therapist Practice: An Author Interview with Dr. Alan Lee and Dr. Lesley Holdsworth

APTA Telehealth Certificate

1. Introduction: Evidence-based Provision of Telehealth Services
2. Provision of Telehealth Services: Administrative/Marketing
3. Provision of Telehealth Services: Ethical Considerations
4. Provision of Telehealth Services: Regulatory Considerations
5. Provision of Telehealth Services: Technical Considerations
6. Provision of Telehealth Services: Clinical Applications and Pearls
7. Elective Courses: Various Practice Settings and Patient Populations

The COVID-19 pandemic significantly increased the number of patients seeking physical therapist services via telehealth. This paradigm shift will improve access to care, but it also brings change. APTA has developed a telehealth certificate series to ensure that PTs, PTAs, and students are prepared to provide excellent care via telehealth. Learn best practices and tips covering ethical and regulatory considerations, administration and marketing, technology, and clinical application.

Enrollees must complete six mandatory core courses within six months of enrollment to receive the APTA telehealth certificate. Elective courses are optional and not required to receive the APTA telehealth certificate.

https://learningcenter.apta.org/student/MyLP.aspx?id=054e0729-854a-454e-bd49-e0be81817e9a&ProgramID=dcce7f06-4cd9-4530-b9d3-4ef7d2717b5d
APTA Find a “Telehealth” PT

Find A “Telehealth” PT

Diffusion of Innovations
Digital health technology & PT

---


https://www.apta.org/article/2022/04/15/digital-health-technology-and-physical-therapy
• Prepare to inform others now & not abandon telehealth choice in physical therapy for the future
• Thank you & Survey responders from FSBPT


Questions

• Alan Lee – allee@msmu.edu
• Richard Woolf – rwoolf@fsbpt.org
• Jeff Rosa – jrosa@fsbpt.org