



RI Occupational Therapy Association

## **H7945- PRO with minor transcription error edits requested**

March 24, 2024

Dear Chairperson Solomon and Members of the House Corporations Committee,

Thank you for your service.

My name is Janet Rivard Michaud and I am an Occupational Therapist of 37 years working in Rhode Island in outpatient rehabilitation, both as an employee and in private practice. I am writing today as the Advocacy Chairperson for the Rhode Island Occupational Therapy Association (RIOTA).

RIOTA is writing to express our strong support for House bill 7945 The Occupational Therapy Licensure Compact. We are grateful to Representative McNamara for introducing this important legislation and to all of our sponsors.

There are many challenges facing health care from limited workforces to new forms of service delivery such as telehealth. Many health care facilities have merged into larger corporations with multi-state locations. Clients frequently cross state borders to seek health care services including occupational therapy. Providers likewise are becoming more mobile either by relocating more frequently (as in the case of military families) or by working in settings in more than one state. This is especially common in our Tri-State area where our border communities have a blending effect.

The Occupational Therapy Licensure Compact has the potential to assist with many of these challenges. It is a collaborative initiative among the American Occupational Therapy Association (AOTA) our professional membership association, the National Board for Certification in Occupational Therapy (NBCOT) and the Council of State Governments.

Currently, Occupational Therapy providers must obtain a license in each state in which they work. This includes the requirement to be licensed in the state in which a client resides if telehealth is the service delivery model. The application, review and license issuance process can be cumbersome and lengthy—on the order of weeks or even months. This often limits opportunities in relation to employment when turnaround time is short and many facilities are seeking immediate assistance given the health care worker shortages since the pandemic. With the creation of a centralized application platform that is able to instantaneously verify a home state license and note that it is valid and in good standing, the process of obtaining a mutual recognition based interstate compact privilege allowing a provider to practice in another member state is anticipated to be completed in a 15 minute online application process. The compact privilege will require a criminal background check for each state where the application is made to assure public safety. Such a process opens up windows of opportunity for experienced and new providers alike when seeking primary or supplemental employment. It may also allow better continuity of care for individuals receiving services who move across state lines and offers them more choice in

providers. In large systems it assures that employees may move more easily among satellite offices in multi-state locations. The centralized data base also helps to support member states in regulating the profession. All 50 states have common core licensure requirements. The OT compact will provide for shared license, disciplinary and investigative information that will help to assure public safety in the provision of Occupational Therapy Services.

The Compact does not change individual member states' statutes, rules and regulations, or scope of practice descriptions. It does not limit the states regulatory authority over licensees in Rhode Island but supports it.

It is also not anticipated to present a financial burden but could increase revenue as member states may set a fee for compact privileges.

***(Please see attached for a listing of what the OT compact does and does not do for ease of reference)***

### **Access to Occupational Therapy Services**

Rhode Island's current population is approximately 1,095,962 (US Census estimate July 1, 2023 at [www.census.gov](http://www.census.gov).) We have 1089 licensed Occupational Therapists (OTs) and 639 licensed Occupational Therapy Assistants (OTAs) per the RI Department of Health website. That equates to 1 OT for every 1006 people and 1 OTA to every 1,715 people. Collectively OT providers make up approximately 0.16 percent of the population in RI.

Occupational Therapists help people to be as independent as possible in the things they need or want to do in their daily lives. We address anything that interferes with function whether physical, emotional, cognitive, developmental, aging related or due to social or environmental barriers. We help people develop skills for daily living, rehabilitate skills impacted by illness or injury and use adaptive techniques or equipment to complete desired activities despite ongoing limitations. That's a lot to address by a very small part of Rhode Island's population in the proportions noted above.

Wouldn't it be wonderful to attract more talented OT practitioners to meet the clear need in our state? Making it easier to obtain a privilege to practice could help with that.

Rhode Island is also home to 3 Occupational Therapy Educational programs. Many of those students live out of state and come to school here. As they transition into the workforce they are facing the need for licenses possibly in multiple states. Can we make it easier for them to choose RI as one of those states and possibly remain here?

### **Efficiency**

As a professional licensed in RI and MA since 1987, I can personally attest to the extended time required to complete the application and review processes to obtain a license to practice. For my first licenses in each state I had to take a full day and present in person in MA waiting several hours for a successful outcome. That was just submitting the application. It was weeks before my license actually was issued. RI required the same information to be provided as well as 3 letters referencing upstanding moral character and again took several weeks for licensure. Many years later a glitch and misinformation caused me to need to reinstate my MA license. Even with exceptional support and repeated faxing of documents by the RI Division of Professional Regulation, repeated emails and calls, it took 8 weeks to resolve the issue to renew the license I've had since 1987. While the Compact will not cause me to switch to a compact privilege since I have both licenses, the thought that my 8 weeks might have been 15 mins is astonishing.

## Protection for the Public

As a prior licensure board member and chair I remember the rare complaints where we wished we had more information and often had to seek it from other states when people were relocating or if there were some prior encumbrance on their license. Sometimes this was a single minor past incident or substance concern that was resolved, but to get further information meant requesting it from another state by phone, mail or email then waiting sometimes weeks for a reply. This meant prolonged times for review, sometimes the need for a licensee to return to the board more than once and by then (due to a limited number of meetings per year), months might go by before a license could be approved or a complaint brought to closure. A centralized system to share that information would speed up the process, ease the stress for the provider, and ultimately assure better safety for the public in a more expedient manner.

To date 28 States have enacted OT compact legislation. 7 have introduced legislation and several others are considering or preparing to introduce legislation including our neighbors in the Tri-State area and New England. RIOTA supports this legislation as good for Rhode Island.

## Proposed Amendment

On reviewing the proposed legislation there were some transcription errors that we request be corrected in the final version.

Edits for transcription errors S2623

- 1) **P2 of 21 5-93-3. Definitions line 28 “Continuing competence”**  
Replace the word “or” with “and” to read...”to provide evidence of participation and completion of...”
- 2) **p2 of 21 5-93-3. Definitions line 32: “Current significant investigative information”**  
Remove Rhode Island and replace with “state” as this is not meant to refer solely to RI  
This will read: “if required by state law”
- 3) **P3 of 21 item 21) still under Definitions line 30 “Primary State of Residence”**  
Remove “the State of Rhode Island” and replace with “the state” as it does not refer solely to RI  
This will read: “Primary State of residence “means the state (also known as the home state)”
- 4) **P 7 of 21 5-93-6 Obtaining a new home state license by virtue of compact privileges 5 e line 34**  
After the word state where the sentence as written ends there are words missing. Need to add after state “for the issuance of a Single-State license.”

Thank you all for your consideration of these comments.

RIOTA remains available for any questions which may be directed to the contact below.

On behalf of the Rhode Island Occupational Therapy Association and with best regards,

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