



Steve Bullock, Governor Pam Bucy, Commissioner

To: Economic Affairs Interim Committee

From: Board of Athletic Trainers

Date: June 10, 2013

Subject: HB525 – ATR response to the Economic Affairs Interim Committee questions

1. What is the public health, safety or welfare rationale for licensing and regulating your profession/occupation?

The regulation of Athletics Trainers was enacted in 2007. Prior to legislation many well-meaning though ill prepared individuals called themselves Athletic Trainers because they had participated in an athletic taping class in high school. The statute clearly defines an "Athletic Trainer" as an individual who is licensed to practice athletic training. "Athletic training" is defined as the practice of prevention, recognition, assessment, management, treatment, disposition, and reconditioning of athletic injuries. Though not clearly addressed, licensure of Athletic Trainers serve the public interest by protecting society's at risk individuals, the youth of Montana. Youth of Montana deserve the highest quality of health care. The board ensures that all Licensed Athletic Trainers have the education and qualifications required for the profession.

2. If your profession/occupation were not licensed, what public protection would be lost?

Yes, licensure of Athletic Trainers ensures the public that those individual with the education, qualifications, and experience will be providing these services. Before licensure any person could claim to be an Athletic Trainer with virtually no qualifications. This put the athletes and other Montana citizens at great risk. Qualifications as a Licensed Athletic Trainer include a minimum of a Bachelor's degree approved by the National Athletic Trainers Association Board of Certification, clinical supervision hours, and successful completion of a national exam. As a result of these standards the licensees are qualified health care professionals who are considered experts in the field of sports medicine. During the 2013 legislative session SB 112, the Youth Concussion Act was passed. Licensed Athletic Trainers are one of the health care providers recognized by this legislation to provide services referenced in the bill.

3. If a license is necessary (for health, safety, or welfare), does the profession/occupation need a board for oversight? If yes, please explain why and describe the purpose of creating a board.

Yes. As mentioned earlier, the Board of Athletic Trainers was established 2007. The purpose for the creation of the board was to clearly define "Athletic Trainer" and "Athletic training" and to establish minimum qualifications to practice as a Licensed Athletic Trainer. The board is

composed of five members appointed by the Governor. One member must be a Licensed Physician preferably with a background in the practice of sports medicine. Three members must be Athletic Trainers who have been engaged in the practice of athletic training in the state for at least two years prior to being appointed. One must be employed by or retired from employment with a postsecondary institution in Montana, the second must be employed in or retired from a secondary school in Montana and the third must be employed by or retired from a health care facility or an athletic facility in Montana. The fifth board member must be a member of the public who is not engaged in or directly connected with the practice of athletic training. Based on the board composition these experts and member of the public have the capacity to establish, implement and enforce licensure requirements.

4. Does your board deal with unlicensed practice issues? If yes, what types of issues?

Yes. As with any new profession that raises to the level of licensure the risk of unlicensed practice exists. The board has occasionally become aware of individuals who are portraying themselves as Athletic Trainers to the public, without the proper education, qualifications, or licensure. This endangers Montana's citizens, particularly our youth, due to the potential for improper diagnosis of injuries, treatment or rehabilitation of injuries. The board has used its authority to issue a cease and desist notice.

5. People who are not licensed but are qualified in an occupation or profession may feel that a licensing board is preventing them from earning a living -- what is your response?

The safe and competent practice of athletic training requires a Bachelor's level of education, which includes at a minimum of 1000 hours of clinical experience in a variety of athletic training sites. The academic site must be accredited by the National Athletic Trainers Association Board of Certification. To ensure the proper and necessary preparation, the law requires reasonable standards that do not unfairly bar any individual from earning a living. In support of Montana regulations, we welcome visiting sports teams at the high school and college level to provide their own athletic trainer services without the need for a temporary Montana license. Montana Athletic Trainers supports the concept that all students, in all states deserve quality health care.

6. How does your board monitor bias among board members toward a particular licensee, an applicant, or a respondent (to unlicensed practice)? How does your board monitor bias toward a particular profession/occupation, if more than one profession or occupation is licensed by the board?

Board member training provided by the Department of Labor and Industry addresses the issue of bias. Board members are advised of the need to recuse themselves from decision-making if a conflict exists. The Presiding Officer and staff including an attorney also monitor bias on a case-by-case basis to help ensure that the possibility or perception of bias is avoided. Also, having a mix of a public member and professional members serving together on the board is another safeguard. There are no other professions licensed by this board.

7. Does the profession or occupation have one or more associations that could provide oversight without the need for a licensing board? Why not use the association as the oversight body?

The National Athletic Trainers Association Board of Certification exists as well as the Montana Athletic Trainers Association. Belonging to these Associations is voluntary. The Board of Certification or BOC monitors continuing education and tri-annual renewal, but they don't monitor unlicensed or unethical practices. The Associations have standards of professional practice and promote the profession while the board promotes protection of the public through regulation of the practice.

8. Is a licensing board needed in order for the practitioner to bill to receive insurance (for example, health insurance)? If so, is there an alternate method for billing that may be recognized rather than having a license or being regulated by a licensing board?

Licensure of Athletic Trainers is a new credential. Athletic Trainers do not bill to receive insurance reimbursement though an insurance billing code is available. Licensed Athletic Trainers are able to obtain a provider identification number, but Medicaid and Medicare do not reimburse for athletic trainer services thus most insurance companies do not reimburse. Most Licensed Athletic Trainers work in a school setting as their employees and fees are not assessed to student athletes.

9. What are the benefits of a board being part of the licensing and discipline process instead of the department handling one or both?

The board composition is detailed in question number three. The board members appointed by the Governor are experts in the field of sports medicine plus a member of the public. These experienced and knowledgeable professionals have a clear understanding of the education, training and knowledge base needed to qualify as a Licensed Athletic Trainer. They also understand the terminology of their profession. Therefore, it is appropriate and wise for the board to set the standards of licensing and professional practice, to emphasize standards of care and to enforce discipline when needed. Most licensure applications that come before the board are "routine" and are handled primarily by staff without the need for board review. This makes for an efficient licensing process. "Non-routine" applications, those that have indicators that deviate from standards, are referred to the full board for review. The board to date has not reviewed complaints before its screening or adjudication panels. The board believes that having them involved in the discipline gives the process a "real world" perspective, and will take its charge seriously in discipline issues for each complaint. Having the process done through the perspective of board members shall yield informed and wise results. Peers are judging peers from a practice perspective.

10. Is there an optimum ratio between licensees, board size, or public representation?

The composition of the board is dictated by statute and works well for the board. They are able to do their work in regulating the licensees.

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11. If a board's purpose includes protecting public welfare, would that consumer protection be handled better by the Attorney General's office than by a board? (In other words, is there a value in a disinterested third party? If yes, why? If not, why not?) Who should be responsible for monitoring fraud within the profession or occupation?

A board comprised of individuals in the profession is invested in monitoring their own profession. They have the expertise in the scope of practice and standards of care and specific knowledge regarding safety issues that need monitoring and boundaries. A disinterested third party would spend significant time and money either learning the profession or hiring consultants in various areas of the profession to address practice and conduct issues.

12. If boards have overlapping scopes of practice, should there be a third-party to determine whether there is intrusion into the other's practices? If so, who should be the judge? If not, why not? Should each be allowed to operate on the other's turf without repercussions?

The scope of practice for Licensed Athletic Trainers is shared to some extent with other health care professionals. While some overlap is expected it is important to assure that those practicing as a Licensed Athletic Trainer do so within the scope of practice and standard of care established by the board. In the large health care system there is overlap from the variety of health care professionals. Each has a defined scope of practice, but the Board of Athletic Trainers believes it takes a lot of health care personnel to get the job done. Yes, there are conflicts and it is the hope of the board that health care licensing boards work together to address these issues in the common goal of providing excellent professionals to deliver the best care possible as issues arise.

13. Should any board have the ability to limit use of certain terminology to only a licensee?

Yes, because the board is building public trust in the Athletic Trainer profession. According to MCA 37-36-203, the use of the title "Licensed Athletic Trainer" or "Certified Athletic Trainer" is for those licensed in the profession, and they may use the abbreviations "LAT" or "AT".