

Report on the

Board of Occupational Therapy

Montgomery, Alabama



Department of Examiners of Public Accounts

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June 15, 2022

Representative Sanderford
Chairman, Sunset Committee
Alabama State House
Montgomery, AL 36130

Dear Mr. Sanderford,

This report was prepared to provide information for use by the Sunset Committee in conducting its review and evaluation of the operations of the Board of Occupational Therapy in accordance with the *Code of Alabama 1975*, Section 41-20-9.

The report contains unaudited information obtained from the management, staff, and records of the Board of Occupational Therapy, in addition to information obtained from other sources.

Please contact me if you have any questions concerning this report.

Sincerely,

A handwritten signature in black ink that reads 'Rachel Laurie Riddle'.

Rachel Laurie Riddle
Chief Examiner

Examiner
E Christine Kilpatrick

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PROFILE

Purpose/Authority

The Board of Occupational Therapy was created in 1990. The Board reviews applicants' qualifications for examination, issues licenses to successful occupational therapists or occupational therapist assistants. The Board operates under the authority of the *Code of Alabama 1975*, Section 34-39-1 through 34-39-16.

Act 2021-516, Acts of Alabama, added Section 34-39-12.1 to the *Code of Alabama 1975*, authorizing the Board to establish an impaired practitioner program for occupational therapists and occupational therapy assistants.

<u>Characteristics</u>	
Members and Selection	Five members appointed by the Governor from a list of names submitted by the Alabama Occupational Therapy Association. The Association submits two or more names for each position on the Board to be filled. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(1)
Term	Members serve 3-year, staggered terms. Members cannot serve more than three consecutive terms. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(2)
Qualifications	Four members must be engaged in rendering services to the public, teaching, or research in occupation therapy for at least three years, and shall hold at all times a valid license. One of the four must be an occupational therapy assistant. One member must be a member of another health profession or a member of the public with interest in the rights or concerns of health services. Each member shall be a resident the state of Alabama. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(1)

Consumer Representation	One consumer member or other health professional required by statute. One consumer member currently serving. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(1)
Racial Representation	One of the three occupational therapists must be a minority. One minority member serving. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(1)
Geographical Representation	No statutory requirement.
Other Representation	To the extent possible, membership of the Board is inclusive and reflects the racial, gender, geographic, urban/rural, and economic diversity of the state. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(1)
Compensation	Members may be reimbursed for all reasonable and necessary expenses actually incurred in the performance of their duties in accordance with the laws of the State of Alabama and regulations of the State Personnel Director. <i>Code of Alabama 1975</i> , Section 34-39-6(a)(7)
Attended Board Member Training	Two staff members Seven Board members
<u>Operations</u>	
Administrator	Ann Cosby, Executive Director, unclassified merit employee, appointed by the Board. Annual salary of \$76,898.40 is set by the Board and approved by the State Personnel Department. <i>Code of Alabama 1975</i> , Section 34-39-7(j)
Location	770 Washington Avenue, Suite 420 Montgomery, AL 36130-4510 Office hours: Monday – Friday 8 am – 5 pm
Employees	Two
Legal Counsel	Brad Chynoweth, Assistant Attorney General, Attorney General’s Office.

Subpoena Power	Yes, persons and records. <i>Code of Alabama 1975</i> , Section 34-39-7(f)
Internet Presence	https://ot.alabama.gov/ Home page listing the following <ul style="list-style-type: none"> • About • Forms • License Verification • Rules and Regulations • Continuing Education • Renewals • News • Contact information
<u>Financial</u>	
Source of Funds	Licensing fees, and administrative penalties.
State Treasury	Yes – Special Revenue Fund 0637
Required Distributions	None
Unused Funds	The Board retains unused funds at fiscal year-end.
<u>Licensure</u>	
Licensees	3,028 licensees as of 2/15/22 <i>Source:</i> Executive Director
Licensure Qualifications	Both Occupational Therapists and Occupational Therapy Assistants: (1) Must be a citizen of the United States or legally present. (2) Degree or certificate conferral from an educational program in occupational therapy. (3) Pass the required examination. (4) Provide letter of verification from the National Board of Occupational Therapy. Occupational Therapy Assistants must also provide name of licensed occupational therapist supervisor. <i>Code of Alabama 1975</i> , Section 34-39-8 and 34-39-9 <i>Administrative Rule</i> 625-X-1-.04

Examinations	<p>The Occupational Therapist Registered Exam (OTR) and the Occupational Therapy Assistant Exam (COTA) are national examinations administered on demand by the National Board of Certification in Occupational Therapy (NBCOT).</p> <p>The examinations are computerized and administered at Sylvan Learning Testing Centers located in Birmingham, Huntsville, Montgomery and Mobile.</p> <p><i>Code of Alabama 1975</i>, Section 34-39-8(2) and 34-39-9</p> <p style="text-align: center;">Occupational Therapists – Master Level</p> <table border="1" data-bbox="592 604 1421 903"> <thead> <tr> <th>University</th> <th>2018</th> <th>2019</th> <th>2020</th> </tr> </thead> <tbody> <tr> <td>Alabama State University</td> <td>100%</td> <td>95%</td> <td>95%</td> </tr> <tr> <td>Tuskegee University</td> <td>42%</td> <td>83%</td> <td>58%</td> </tr> <tr> <td>Univ. of Alabama-Birmingham</td> <td>100%</td> <td>98%</td> <td>95%</td> </tr> <tr> <td>University of South Alabama</td> <td>100%</td> <td>100%</td> <td>100%</td> </tr> </tbody> </table> <p>2021 exam stats are not available as of 2/28/2022</p> <p style="text-align: center;">Occupational Therapist Assistants</p> <table border="1" data-bbox="592 1012 1421 1129"> <thead> <tr> <th>University</th> <th>2018</th> <th>2019</th> <th>2020</th> </tr> </thead> <tbody> <tr> <td>Wallace State Community College</td> <td>98%</td> <td>100%</td> <td>100%</td> </tr> </tbody> </table> <p>2021 exam stats are not available as of 2/28/2022</p> <p><i>Source:</i> Executive Director</p>	University	2018	2019	2020	Alabama State University	100%	95%	95%	Tuskegee University	42%	83%	58%	Univ. of Alabama-Birmingham	100%	98%	95%	University of South Alabama	100%	100%	100%	University	2018	2019	2020	Wallace State Community College	98%	100%	100%
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University	2018	2019	2020																										
Wallace State Community College	98%	100%	100%																										
Reciprocity	<p>The Board may waive the examination, education, or experience requirements and grant a license to any applicant who shall present proof of current licensure as an occupational therapist or an occupational therapist assistant in another state, the District of Columbia, or territory of the United States which requires standards for licensure considered by the Board to be equivalent to the requirements for licensure in Alabama.</p> <p><i>Code of Alabama 1975</i>, Section 34-39-10(b)</p>																												

<p>Renewals</p>	<p>Initial renewals are for one year and all subsequent renewals are biennial. Renewals are deemed late if not submitted 60 days prior to expiration date.</p> <p><i>Code of Alabama 1975</i>, Section 34-39-13(a) <i>Administrative Rule</i> 625-X-5.01; 625-X-6-.01</p> <p>97% of renewals were accomplished online for the FY21 renewal period.</p> <p><i>Source:</i> Executive Director</p>
<p>Licensee Demographics</p>	<p>Data is not collected by the Board.</p> <p><i>Source:</i> Executive Director</p>
<p>Continuing Education</p>	<p>Occupational therapists – 30 hours biennially. Occupational therapy assistants – 20 hours biennially.</p> <p><i>Code of Alabama 1975</i>, Section 34-39-13(a) <i>Administrative Rule</i> 625-X-5-.02(b)</p>

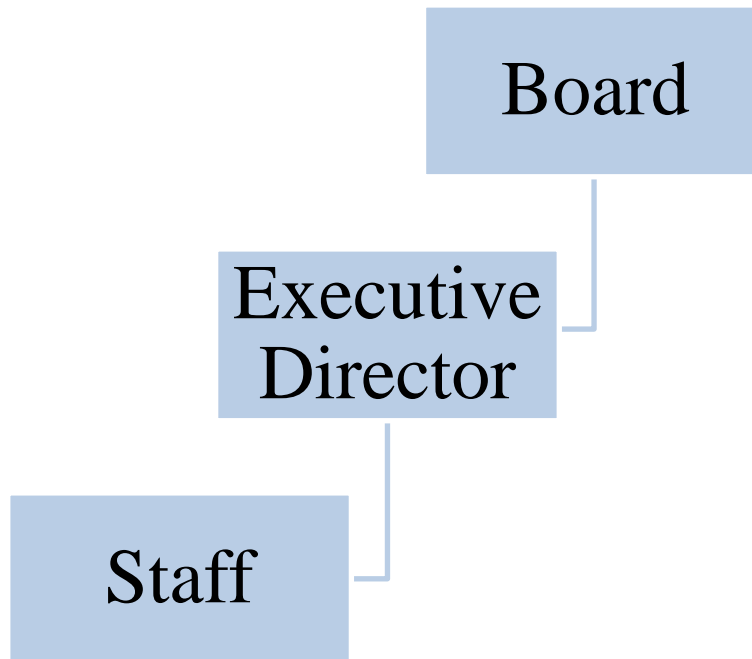
SIGNIFICANT ISSUES

No new significant issues.

STATUS OF PRIOR FINDINGS/SIGNIFICANT ISSUES

All prior findings/significant issues are resolved.

ORGANIZATION



PERSONNEL

Schedule of Employees By Classification/Race/Gender			
Classification	#	W/F	Salary
Executive Director	1	1	\$76,898.40
Executive Assistant	1	1	\$40,065.60
Total employees	2	2	

W/F – White Female

Legal Counsel

Assistant Attorney General Brad Chynoweth, an employee of the Attorney General’s Office, provides legal counsel to the Board.

PERFORMANCE CHARACTERISTICS

Number of Licensees per Employee – 1,604

Number of Licensees for the Past Four Fiscal Years

Type of Licenses	FISCAL YEARS			
	2018	2019*	2020*	2021*
Total Occupational Therapists and Occupational Therapy Assistants	2,583	2,700	2,779	3,028
In Fiscal Year 2018 there were 1,643 Occupational Therapists and 940 Occupational Therapy Assistants. *Board did not provide separate numbers for Occupational Therapists and Occupational Therapy Assistants. <i>Source:</i> Executive Director				

Operating Disbursements per Licensee (FY2021) - \$67.36

Fines/Penalties as a Percentage of Operating Receipts

	FY 2021	FY 2020	FY 2019	FY 2018
Total Receipts	\$234,625.00	\$224,127.00	\$233,780.00	\$200,095.00
Fines	0.00	3,202.00	0.00	0.00
Percentage	0%	1.43%	0%	0%

Notification of Board decisions to Amend Administrative Rules

The Board complied with notification procedures prescribed in the Administrative Procedure Act, which includes publication of proposed rules in the Administrative Monthly and held public hearings on proposed rules. According to the Executive Director, the Board does not specifically notify licensees.

COMPLAINT HANDLING

The Board’s *Administrative Rules* 625-X-10 through 625-X-11 provide the procedures for documentation, receipt, and investigation of complaints against licensees.

Initial Contact/Documentation	Complaints must be in writing and signed by the party or an attorney for the party, but notarization is not required. Complaints may be mailed or emailed. A letter is sent to the complainant acknowledging receipt.
Anonymous Complaints Accepted	No
Investigative Process / Probable Cause Determination	The Board’s attorney, executive director and one Board member review the individual complaints and determine if probable cause exists. Should the matter be brought before the Board, the reviewing member recuses self from voting. The Board appoints a hearing officer to preside over disciplinary hearings should such hearing be necessary.

Negotiated Settlements	Yes
Notification of Resolution to the Complainant	The complainant is notified by mail at the conclusion/resolution of the complaint.

Source: Executive Director

Schedule of Complaints Resolved						
Fiscal Years 2018 through 2021						
Year/Number Received	Year/Number Resolved					Pending
	2018	2019	2020	2021	2022	
2018/4	-	4	-	-	-	-
2019/6		3	3	-	-	-
2020/1			-	1	-	-
2021/3				2	1	-

Average Time to Resolve Complaints – 120 days

Disposition of Resolved Complaints

Number of Actions	Resolution
4	No Action Taken
1	Letters of Warning to Facility
1	Fine, Probation, random drug screens
1	Thirty-day suspension, fine plus hearing cost, 2 continuing education courses and 2 years direct supervision
1	Fine plus hearing cost and Continuing education course
1	Suspension and required aftercare
1	Suspension, fine, probation/12 months practice with close supervision
1	Fine
1	Probation and continuing education course
1	Random Drug Testing and fine
1	Surrender

Source: Executive Director

REGULATION IN CONJUNCTION WITH OTHER ENTITIES

There is no direct overlap or regulation with other state or federal agencies.

FINANCIAL INFORMATION

Schedule of Fees

The specific fees amounts are adopted in the Board's *Administrative Rule* 625-X-7-.01.

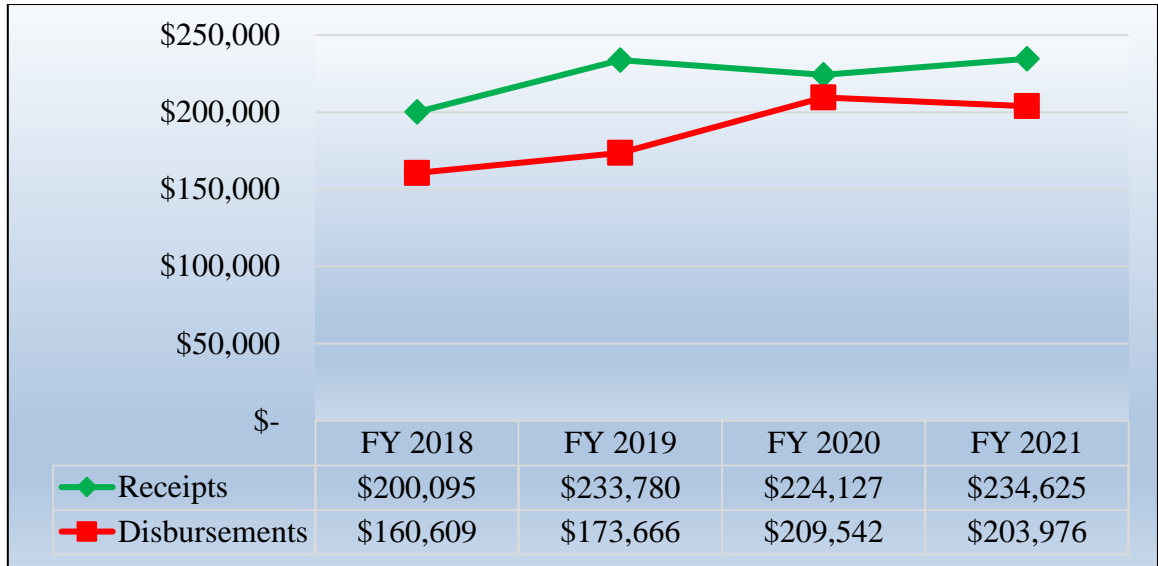
Fee Type/Purpose	Statute	Amount in Statute	Amount Collected
Initial Licensure			
Occupational Therapist	34-39-14(3)	Set by Board	\$140.00
Occupational Therapy Assistant	34-39-14(3)	Set by Board	\$115.00
Limited Permit Fee	34-39-14(2)	Set by Board	\$ 25.00
Renewal Fees			
Occupational Therapist	34-39-14(4)	Set by Board	\$140.00
Occupational Therapy Assistant	34-39-14(4)	Set by Board	\$115.00
Late Renewal	34-39-14(5)	Set by Board	\$ 50.00
Fines Penalties Costs			
Fines – Per Violation	34-39-16	≤ \$1,000.00	≤ \$1,000.00
Costs of Hearing	34-39-14(6)	Actual costs	Actual costs

Schedule of Receipts, Disbursements and Balances

October 1, 2017 through September 30, 2021

	<u>2020-2021</u>	<u>2019-2020</u>	<u>2018-2019</u>	<u>2017-2018</u>
<u>Receipts</u>				
Licenses and Permits	\$ 234,625.00	\$ 220,925.00	\$ 233,780.00	\$ 200,095.00
Fines and Penalties	-	3,202.00	-	-
Total	<u>234,625.00</u>	<u>224,127.00</u>	<u>233,780.00</u>	<u>200,095.00</u>
<u>Disbursements</u>				
Personnel Costs	114,380.08	112,008.88	85,633.83	84,711.20
Employee Benefits	46,982.57	47,103.45	28,196.40	27,438.47
In-State Travel	-	7,751.90	8,822.85	7,034.61
Out-of-State Travel	-	-	4,819.54	-
Repairs & Maintenance	105.00	551.25	-	460.62
Rentals and Leases	20,703.62	20,613.08	20,134.74	23,189.26
Utilities & Communication	4,720.31	4,358.79	3,920.91	3,574.11
Professional Services	6,793.11	9,089.74	10,575.01	7,920.63
Supp, Mat. & Op. Expenses	6,264.36	6,254.85	5,511.36	4,352.96
Other Equipment Purchases	4,027.14	1,810.00	6,051.00	1,926.81
Total	<u>203,976.19</u>	<u>209,541.94</u>	<u>173,665.64</u>	<u>160,608.67</u>
Excess of Receipts over Disbursements	30,648.81	14,585.06	60,114.36	39,486.33
Cash Balance at Beginning of Year	<u>428,358.82</u>	<u>413,773.76</u>	<u>353,659.40</u>	<u>314,173.07</u>
Cash Balance at Year End	459,007.63	428,358.82	413,773.76	353,659.40
Reserve for Unpaid Obligations	<u>(6,207.00)</u>	<u>(2,700.00)</u>	<u>(11,123.00)</u>	<u>(8,277.00)</u>
Unobligated Cash Balance at Year End	<u>\$ 452,800.63</u>	<u>\$ 425,658.82</u>	<u>\$ 402,650.76</u>	<u>\$ 345,382.40</u>

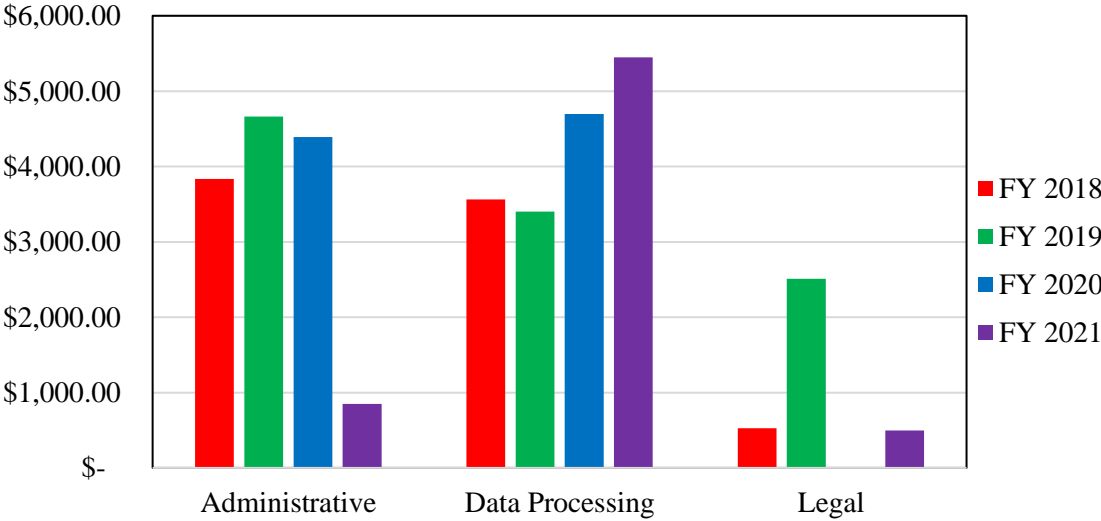
Operating Receipts vs. Operating Disbursements (Chart)



SUMMARY SCHEDULE OF PROFESSIONAL SERVICE DISBURSEMENTS*				
As of September 30th				
Type of Service	FY 2018	FY 2019	FY 2020	FY 2021
Administrative	\$ 3,833.95	\$ 4,663.05	\$ 4,392.45	\$ 850.00
Data Processing	3,561.68	3,400.46	4,697.29	5,448.11
Legal	525.00	2,511.50	0.00	495.00
Total	\$ 7,920.63	\$ 10,575.01	\$ 9,089.74	\$ 6,793.11

*Detailed information presented in the appendix

Professional Service Disbursement Chart



QUESTIONNAIRES

Board Member Questionnaire

A letter was sent to all five members of the Board of Occupational Therapy requesting participation in the survey. Five participated in the survey. The percentages, where shown, are based on the number who responded to the question.

1. What are the most significant issues currently facing the Board of Occupational Therapy and how is the Board addressing these issues?

Respondent #1 – “The most significant issue facing the Board is developing and implementing an impaired practitioner program. The board is actively working towards an evidence-informed solution that protects the public/consumers of services and supports the practitioner.”

Respondent #2 – “As with our State, region, country, and world, it is ‘How do we as a board and profession manage to best care for our clinicians and provide the best care and safety of the people receiving our skills?’ The Board has on its shoulders the best practice and provision of Occupational Therapy to those in our great State needing the wholistic approach which only Occupational Therapy can provide. In doing so, our mission is to do it without a grain of potential harm. Therefore, it is of greatest concern of how to provide O.T. safely, efficiently, with precaution, and sincerest care. Our current Board and its members discuss with diligence and promote recommended guidelines.”

Respondent #3 – “developing the Impaired Practitioners Program.”

Respondent #4 – “None”

Respondent #5 – “We did have a need for addiction wellness program. Now we have a program being implemented after legislation was passed.”

2. What, if any, changes to the Board’s laws are needed?

Respondent #1 – “I am not certain that the Board laws are in need of change at this time.”

Respondent #2 – “Our Occupational Therapy board is currently drafting a Wellness Program related to addictions and the means to address. The revision to our Practice Act must include the appropriate and legal wording, this has already been done. Now we are in the process of creation and rule writing. Therefore, the Occupational Therapy Association and our legal team is being communicated with. It is a careful and thoughtful process for a program that must be adopted.”

Respondent #3 – “whatever is necessary to comply with the Impaired Practitioners Program”

Respondent #4 – “Wellness (Addiction) Program”

Respondent #5 – “Not at this time.”

Board Member Questionnaire

3. Is the Board adequately funded?

Yes 5 100%

4. Is the Board adequately staffed?

Yes 5 100%

5. Does the Board receive regular reports on the operations of the board from the chief administrative officer?

Yes 5 100%

6. Has the Board experienced any significant changes to its operations?

No 5 100%

7. Does the Board plan any significant changes in its operations?

No 5 100%

8. Do you have any other comments you would like to make?

Respondent #1 – “This self-funded board is extremely efficient and consistently meets the needs of the public and its licensees despite the challenges presented by COVID-19.”

Respondent #2 – “Due to the dedication and commitment of our Occupational Therapy Board Directors forethought, efficiency, management, and planning the funding of the board will be able to function and perform necessary issues that arise.”

Respondent #3 – “the upcoming need to have a succession plan when the Executive Director retires.”

Respondent #4 – “None”

Respondent #5 – “Ann Cosby does an excellent job as Executive Director. I am proud to serve on ASBOT.”

Occupational Therapist Questionnaire

A letter was sent to one hundred licensees requesting participation in the survey. Sixteen participated in the survey. The percentages, where shown, are based on the number who responded to the question.

1. What do you think is the most significant issue(s) currently facing your profession in Alabama?

Respondent #1 – “Medicare cuts.”

Respondent #2 – “Necessary adaptive equipment/assistive devices that are not covered by insurance.”

Respondent #3 – “Telehealth.”

Respondent #4 – “COVID-19.”

Respondent #5 – “Scope of practice infringement, underpaid.”

Respondent #6 – “Burnout.”

Respondent #7 – “I am not aware of any issues. At least in my setting, acute care.”

Respondent #8 – “Market is being flooded with high volume of OTAs, lowering the rate of experienced therapists. I have firsthand seen how companies are releasing experienced therapists to opt for new grads to pay them less.”

Respondent #9 – “Along with the rest of the health professions, probably burnout.”

Respondent #10 – “We continue to be under recognized in the medical and educational community. In the school system, we are underpaid with high workloads.”

Respondent #11 – “Decrease in jobs requiring my skills. The pandemic has greatly impacted this.”

Respondent #12 – “Access to OT and reimbursement for skilled OT services.”

Respondent #13 – “Lack of jobs due to COVID19, job cuts, and increased graduating students in the area.”

Respondent #14 – “Uniform education and standards of practice.”

Respondent #15 – “Reimbursement from insurance and insurance authorizing fewer visits.”

Respondent #16 – “1.) Ensuring that as healthcare changes are implemented with impact on the field of occupational therapy like telemedicine that the highest level of care is provided to patients in these new delivery avenues. 2.) Patient access to Occupational Therapy Services and third-party coverage for occupational therapy. For example, for adults that have Medicaid coverage, there is no occupational therapy coverage in most outpatient rehabilitation settings in the state of Alabama outside of facilities like Cooper Green Mercy Health Services. 3.) Advocating for mental healthcare improvements and access to occupational therapy in mental health settings in Alabama.”

Occupational Therapist Questionnaire

2. Do you think regulation of your profession by the Board of Occupational Therapy is necessary to protect the public welfare?

Yes	14	87%
Unknown	2	13%

3. Do you think any of the Board’s laws, rules, or policies are an unnecessary restriction on the practice of your profession?

Yes	1	6%
No	13	81%
No Opinion	2	13%

4. Are you adequately informed by the Board of changes to and interpretations of the Board’s positions, policies, rules, and laws?

Yes	12	75%
No	3	19%
Unknown	1	6%

5. Do you consider mandatory continuing education necessary for the competent practice of your profession?

Yes	16	100%
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6. Does the Board respond to your inquiries in a timely manner?

Yes	14	88%
Unknown	1	6%
No Opinion	1	6%

7. Has the Board performed your licensing and renewal in a timely manner?

Yes	16	100%
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8. Do you have any other comments that you would like to make?

Respondent #8 – “I have not had to inquire about anything with the Board in my 20 years of practicing.”

Respondent #10 – “The staff at AL OT Board is small but incredibly efficient and helpful.”

Respondent #11 – “I have always found ASBOT to be responsive and supportive whenever I have had a question or concern.”

Respondent #12 – “Our current state board is reliable and efficient.”

Occupational Therapist Questionnaire

Respondent #15 – “Impressed with prompt response from Ann Cosby with regard to providing proof of licensure to the MA state board when requested.”

Respondent #16 – “The Alabama State Board of Occupational Therapy fulfills an ongoing vital role in ensuring the integrity of the profession of occupational therapy in the state of Alabama for consumers, therapists, and all those in healthcare settings in this state. Thank you.”

Ten licensees did not respond to this question.

Occupational Therapy Assistant Questionnaire

A letter was sent to one hundred licensees requesting participation in the survey. Twelve participated in the survey. The percentages, where shown, are based on the number who responded to the question.

1. What do you think is the most significant issue(s) currently facing your profession in Alabama?

Respondent #1 – “At the present time, I have no concerns in the area I work.”

Respondent #2 – “In North Alabama, our field is saturated and there are not enough jobs. There is also major concern with the Medicare reimbursement for COTA treatments that have caused a lot of COTA’s to lose their jobs.”

Respondent #3 – “Poor leadership from our state board is the most significant issue I see because it results in a generalized lack of understanding of Occupational Therapy, it's scope of practice and necessity, and the separate and distinct contribution our discipline provides. I believe many of us have witnessed firsthand a lack of respect and irrelevance with which our profession is viewed. We need strong leadership to advocate for us both as clinicians and as an equally-important discipline; not the tolerated "other physical therapy."”

Respondent #4 – “The biggest issue in our field is the control of treatment by health insurance companies. Health insurance companies are dictating patient care from greed. Doctors and therapists should have the ultimate say so in the care patients receive.”

Respondent #5 – “Lack of COTA positions as a whole within hospitals and inpatient rehabs to be specific. Salaries are set lower than PTA's which doesn't encourage the growth within our profession. Lack of advocacy within multidisciplinary teams.”

Respondent #6 – “The one issue I see is that we don't have many advanced courses in certifications offered in the rural areas.”

Respondent #7 – “Decreased wages secondary to the Medicare 85% pay rate”

Respondent #8 – “Insurance and billing”

Respondent #9 – “Cuts in Medicare funding especially the reduced payouts for treatment provided by OTA. Due to these cuts many employers are cutting hours of OTA’s and instituting pay freezes. I feel if this continues many OTA’s will be force to change professions or find other jobs.”

Respondent #10 – “No known issues at this time.”

Respondent #11 – “Payment issues such insurance reimbursement, payment rates ser by federal government and private insurance companies”

Respondent #12 – “I believe some issues we are currently facing in our profession are the unrealistic expectations in productivity. The emphasis is going away from the quality of care and treatment and is moving towards a bigger focus on revenue/profit being made.”

Occupational Therapy Assistant Questionnaire

2. **Do you think regulation of your profession by the Board of Occupational Therapy is necessary to protect the public welfare?**

Yes	10	83%
No Opinion	2	17%

3. **Do you think any of the Board's laws, rules, or policies are an unnecessary restriction on the practice of your profession?**

No	10	84%
Unknown	1	8%
No Opinion	1	8%

4. **Are you adequately informed by the Board of changes to and interpretations of the Board's positions, policies, rules, and laws?**

Yes	8	66%
No	2	17%
Unknown	2	17%

5. **Do you consider mandatory continuing education necessary for the competent practice of your profession?**

Yes	10	84%
No	1	8%
No Opinion	1	8%

6. **Does the Board respond to your inquiries in a timely manner?**

Yes	9	75%
No	1	8%
No Opinion	2	17%

7. **Has the Board performed your licensing and renewal in a timely manner?**

Yes	12	100%
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8. **Do you have any other comments that you would like to make?**

Respondent #3 – “Our State Board of OT lacks appropriate oversight. It does not abide by the rules and regulations dictated to practitioners and fails to maintain true and accurate files on complaints or issues. The [REDACTED] has shown [REDACTED] unprofessional and unethical.”

Respondent #5 – “Would benefit from areas as a whole with continual growth as a COTA to further excel and grow as a practitioner. More opportunities of specializations for assistants since its solely for OT's currently.”

Occupational Therapy Assistant Questionnaire

Respondent #6 – “Thank you for the chance to give this information.”

Respondent #9 – “The Board has always been helpful and quick to respond to my inquiries. I feel they are a valuable resource to our profession.”

Respondent #10 – “Profession is held at high standards. Board members are doing a great job.”

Respondent #11 – “Greater support of the profession by the national professional organization with lobbying in congress to encourage increased recognition and support in the medical field, increased reimbursement rates and greater autonomy as a whole professionally.”

Six licensees did not respond to this question.

Complainant Questionnaire

A letter was sent to four complainants requesting participation in the survey. One complainant participated in the survey. The percentages, where shown, are based on the number who responded to the question.

1. Was receipt of your complaint acknowledged?

Yes 1 100%

2. Approximately how long after filing your complaint did the Board of Occupational Therapy contact you?

Unknown 1 100%

3. Did the Board communicate the results of the investigation into your complaint to you?

Yes 1 100%

4. Do you think the Board did everything it could to resolve your complaint?

No 1 100%

5. Do you have any additional comments you would like to make?

Respondent #1 – “The board never contacted the daycare to see video or ask the teachers what they saw.”

APPENDICES

Applicable Statutes

Section 34-39-1 Short title.

This chapter shall be known and may be cited as the "Alabama State Occupational Therapy Practice Act."

(Acts 1990, No. 90-383, p. 515, §1.)

Section 34-39-2 Purpose.

The Alabama State Occupational Therapy Practice Act is enacted to safeguard the public health, safety, and welfare, and to assure the availability of high quality occupational therapy services to persons in need of such services. It is the purpose of this chapter to provide for the regulation of persons offering themselves as occupational therapists or as occupational therapy assistants.

(Acts 1990, No. 90-383, p. 515, §2.)

Section 34-39-3 Definitions.

In this chapter, the following terms shall have the respective meanings provided in this section unless the context clearly requires a different meaning:

- (1) ASSOCIATION. The Alabama Occupational Therapy Association.
- (2) BOARD. The Alabama State Board of Occupational Therapy.
- (3) IMPAIRED. The inability of an occupational therapist or occupational therapy assistant to practice occupational therapy with reasonable skill and safety to patients by reason of illness, inebriation, excessive use of drugs, narcotics, alcohol, chemicals, or other substances, or as a result of any physical or mental condition.
- (4) LICENSE. A valid and current certificate of registration issued by the board.
- (5) OCCUPATIONAL THERAPY.
 - a. The practice of occupational therapy means the therapeutic use of occupations, including everyday life activities with individuals, groups, populations, or organizations to support participation, performance, and function in roles and situations in home, school, workplace, community, and other settings. Occupational therapy services are provided for habilitation, rehabilitation, and the promotion of health and wellness to those who have or are at risk for developing an illness, injury, disease, disorder, condition, impairment, disability, activity limitation, or participation restriction. Occupational therapy addresses the physical, cognitive, psychosocial, sensory-perceptual, and other aspects of performance in a variety of contexts and environments to support engagement in occupations that affect physical and mental health, well-being, and quality of life. The practice of occupational therapy includes:
 1. Evaluation of factors affecting activities of daily living (ADL), instrumental activities of daily living (IADL), rest and sleep, education, work, play, leisure, and social participation including all of the following:
 - (i) Client factors, including body functions, such as neuromusculoskeletal, sensory-perceptual, visual, mental, cognitive, and pain factors; body structures such as

cardiovascular, digestive, nervous, integumentary, genitourinary systems, and structures related to movement; values, beliefs, and spirituality.

(ii) Habits, routines, roles, rituals, and behavior patterns.

(iii) Physical and social environments, cultural, personal, temporal, and virtual contexts, and activity demands that affect performance.

(iv) Performance skills, including motor and praxis, sensory-perceptual, emotional regulation, cognitive, communication, and social skills.

2. Methods or approaches selected to direct the process of interventions such as:

(i) Establishment, remediation, or restoration of a skill or ability that has not yet developed, is impaired, or is in decline.

(ii) Compensation, modification, or adaptation of activity or environment to enhance performance, or to prevent injuries, disorders, or other conditions.

(iii) Retention and enhancement of skills or abilities without which performance in everyday life activities would decline.

(iv) Promotion of health and wellness, including the use of self-management strategies, to enable or enhance performance in everyday life activities.

(v) Prevention of barriers to performance and participation, including injury and disability prevention.

3. Interventions and procedures to promote or enhance safety and performance in activities of daily living (ADL), instrumental activities of daily living (IADL), rest and sleep, education, work, play, leisure, and social participation including all of the following:

(i) Therapeutic use of occupations, exercises, and activities.

(ii) Training in self-care, self-management, health management and maintenance, home management, community/work reintegration, and school activities and work performance.

(iii) Development, remediation, or compensation of neuromusculoskeletal, sensory-perceptual, visual, mental, and cognitive functions, pain tolerance and management, and behavioral skills.

(iv) Therapeutic use of self, including one's personality, insights, perceptions, and judgments, as part of the therapeutic process.

(v) Education and training of individuals, including family members, caregivers, groups, populations, and others.

(vi) Care coordination, case management, and transition services.

(vii) Consultative services to groups, programs, organizations, or communities.

(viii) Modification of environments, including home, work, school, or community, and adaptation of processes, including the application of ergonomic principles.

(ix) Assessment, design, fabrication, application, fitting, and training in seating and positioning, assistive technology, adaptive devices, training in the use of prosthetic devices, orthotic devices, and the design, fabrication, and application of selected splints or orthotics.

(x) Assessment, recommendation, and training in techniques to enhance functional mobility, including management of wheelchairs and other mobility devices.

(xi) Low vision rehabilitation when the patient or client is referred by a licensed optometrist, a licensed ophthalmologist, a licensed physician, a licensed assistant to physician acting pursuant to a valid supervisory agreement, or a licensed certified

registered nurse practitioner in a collaborative practice agreement with a licensed physician.

(xii) Driver rehabilitation and community mobility.

(xiii) Management of feeding, eating, and swallowing to enable eating and feeding performance.

(xiv) Application of physical agent modalities, and use of a range of specific therapeutic procedures such as wound care management, interventions to enhance sensory-perceptual and cognitive processing, and manual therapy, all to enhance performance skills.

(xv) Facilitating the occupational performance of groups, populations, or organizations through the modification of environments and the adaptation of processes.

b. An occupational therapist or occupational therapy assistant is qualified to perform the above activities for which they have received training and any other activities for which appropriate training or education, or both, has been received. Notwithstanding any other provision of this chapter, no occupational therapy treatment programs to be rendered by an occupational therapist, occupational therapy assistant, or occupational therapy aide shall be initiated without the referral of a licensed physician, a licensed chiropractor, a licensed optometrist, a licensed assistant to a physician acting pursuant to a valid supervisory agreement, a licensed certified registered nurse practitioner in a collaborative practice agreement with a licensed physician, a licensed psychologist, or a licensed dentist who shall establish a diagnosis of the condition for which the individual will receive occupational therapy services. In cases of long-term or chronic disease, disability, or dysfunction, or any combination of the foregoing, requiring continued occupational therapy services, the person receiving occupational therapy services shall be reevaluated by a licensed physician, a licensed chiropractor, a licensed optometrist, a licensed assistant to a physician acting pursuant to a valid supervisory agreement, a licensed certified registered nurse practitioner in a collaborative practice agreement with a licensed physician, a licensed psychologist, or a licensed dentist at least annually for confirmation or modification of the diagnosis. Occupational therapists performing services that are not related to injury, disease, or illness that are performed in a wellness or community setting for the purposes of enhancing performance in everyday activities are exempt from this referral requirement. Occupational therapists employed by state agencies and those employed by the public schools and colleges of this state who provide screening and rehabilitation services for the educationally related needs of the students are exempt from this referral requirement.

c. Nothing in this chapter shall be construed as giving occupational therapists the authority to examine or diagnose patients or clients for departures from the normal of human eyes, visual systems or their adjacent structures, or to prescribe or modify ophthalmic materials including, but not limited to, spectacles, contacts, or spectacle-mounted low vision devices.

(6) OCCUPATIONAL THERAPIST. A person licensed to practice occupational therapy whose license is in good standing.

(7) OCCUPATIONAL THERAPY ASSISTANT. A person licensed to assist in the practices of occupational therapy under the supervision of, or with the consultation of, a licensed occupational therapist whose license is in good standing.

(8) OCCUPATIONAL THERAPY AIDE. A person who assists in the delivery of occupational therapy, who works under direct on-site supervision of an occupational therapist or occupational therapy assistant, or both, and whose activities require an understanding of occupational therapy but do not require professional or advanced training in the basic anatomical, biological, psychological, and social sciences involved in the practice of occupational therapy. No activity listed under paragraph (5)a. may be performed by an occupational therapy aide.

(9) PERSON. A human person only, not a legal entity.

(10) WITH THE CONSULTATION OF. The collaboration of two or more persons on a regularly scheduled basis for the purpose of planning, review, or evaluation of occupational therapy services.

(Acts 1990, No. 90-383, p. 515, §3; Acts 1995, No. 95-279, p. 502, §3; Act 99-92, p. 108, §3; Act 2003-62, p. 96, §3; Act 2013-309, p. 1041, §1; Act 2021-516, §1.)

Section 34-39-4 Representation of self as occupational therapist or therapy assistant without license prohibited.

(a) No person may present himself or herself as an occupational therapist or an occupational therapy assistant in this state unless he or she is licensed in accordance with this chapter. No firm, partnership, association, or corporation may advertise or otherwise offer to provide or convey the impression that it is providing occupational therapy unless an individual holding a current valid license or limited permit under this chapter is or will at the appropriate time be rendering the occupational therapy services to which reference is made.

(b) It is unlawful for any person not licensed as an occupational therapist or an occupational therapy assistant or whose license has been suspended or revoked to use in connection with his or her name or place of business the words "occupational therapist," "licensed occupational therapist," "occupational therapy assistant," "licensed occupational therapy assistant," or the letters "O.T.," "L.O.T.," "O.T.R./L.," "O.T.A.," "L.O.T.A.," "C.O.T.A./L.," thereby indicating or implying that he or she is qualified to practice in this state as a licensed occupational therapist or a licensed occupational therapy assistant. At the discretion of the licensee, academic credentials including MS, OTR/L to indicate a master's degree, and OTD to indicate a clinical doctorate, may also be used in conjunction with the licensure acronyms. It is unlawful also for any person not licensed under this chapter to show in any other way, orally, in writing, in print, or by sign, directly or by implication that he or she is engaged in performing occupational therapy services.

(Acts 1990, No. 90-383, p. 515, §4; Act 2013-309, p. 1041, §1.)

Section 34-39-5 Exceptions.

Nothing in this chapter shall be construed as preventing or restricting the practice, services, or activities of any of the following persons:

(1) Any person licensed under any other law of the state from engaging in the profession for which he or she is licensed.

(2) Any person employed as an occupational therapist or an occupational therapy assistant by the government of the United States, if the person provides occupational therapy solely under the direction or control of the organization by which he or she is employed.

(3) Any person pursuing a course of study leading to a degree in occupational therapy at an accredited or approved educational program if the activities and services constitute a part of a supervised course of study, if the person is designated by a title which clearly indicates his or her status as a student or trainee.

(4) Any person fulfilling the supervised fieldwork experience requirements of subdivision (2) of Section 34-39-8.

(Acts 1990, No. 90-383, p. 515, §5; Acts 1995, No. 95-279, p. 502, §3; Act 2013-309, p. 1041, §1.)

Section 34-39-6 Board of Occupational Therapy established; composition; fund created.

(a) There is established the Alabama State Board of Occupational Therapy.

(1) The board shall consist of five members, four of whom shall be involved in the practice of occupational therapy, of which one shall be an occupational therapy assistant. The remaining member shall be a member of another health profession or a member of the public with an interest in the rights or the concerns of health services. Each member of the board shall be a citizen of this state. The occupational therapy board members shall be appointed by the Governor from a list submitted by the Alabama Occupational Therapy Association. In appointing members to the board, the association and the Governor, to the extent possible, shall select those persons whose appointments ensure that the membership of the board is inclusive and reflects the racial, gender, geographic, urban/rural, and economic diversity of the state. Those board members who are occupational therapists, of which one shall be a minority, and occupational therapy assistants shall have been engaged in rendering services to the public, teaching, or research in occupational therapy for at least three years, and shall at all times be holders of valid licenses for the practice of occupational therapy in Alabama. Except for the members in the initial board, all members who are occupational therapists and occupational therapy assistants shall fulfill the requirements for licensure pursuant to this chapter. Terms of appointment for the initial board members shall be as follows: Two members shall serve a one-year term; two members shall serve a two-year term; and one member shall serve a three-year term.

(2) The board shall, within 90 days after April 17, 1990, be selected as provided in subdivision (1). At the expiration of the initial terms, board members shall be appointed in the same manner as initial appointments, each for a period of three years. No person shall be appointed to serve more than three consecutive terms.

(3) Terms shall begin on the first day of the calendar year and end on the last day of the calendar year, or until successors are appointed, except for the initial members who shall serve through the last calendar day of the year in which they are appointed before the commencement of the terms prescribed by subdivision (1).

(4) Within 45 days after April 17, 1990, and annually thereafter, the association shall submit two or three names for each position on the board to be filled. In the event of a midterm vacancy in one of the positions on the board, the Governor shall

appoint a member to fill the unexpired term from a list submitted by the association in the same manner as provided in subdivision (1).

(5) The Governor, after notice and opportunity for hearing by the board, may remove any member of the board for neglect of duty, incompetence, revocation or suspension of the license of the member, or other dishonorable conduct. After removal, the Governor shall appoint a successor to the unexpired term from a list of two or three names submitted by the association.

(6) The board shall elect from its membership a chairperson, a secretary, and a treasurer. A majority of the members of the board shall constitute a quorum. The board shall meet during the first month of the calendar year to select officers. No board member may hold the same position as an officer of the board for more than two consecutive years. At least one additional meeting shall be held before the end of the calendar year. Further meetings may be convened at the call of the chairperson, or on the request of any three board members.

(7) Members may be reimbursed for all reasonable and necessary expenses actually incurred in the performance of their duties in accordance with the laws of the State of Alabama and regulations of the State Personnel Director.

(b) There is established a separate special revenue fund in the State Treasury known as the Alabama State Board of Occupational Therapy Fund. All receipts collected by the board pursuant to this chapter shall be deposited in this fund and used only to carry out the provisions of this chapter. Receipts shall be disbursed only by warrant of the state Comptroller upon the State Treasurer, upon itemized vouchers approved by the chairperson. No funds shall be withdrawn or expended except as budgeted and allotted according to the provisions of Sections 41-4-80 to 41-4-96, inclusive, and Sections 41-19-1 to 41-19-12, inclusive, and only in amounts as stipulated in the general appropriations bill or other appropriation bills.

(Acts 1990, No. 90-383, p. 515, §6; Act 2003-62, p. 96, §3; Act 2011-168, p. 321, §3; Act 2013-309, p. 1041, §1.)

Section 34-39-7 Duties of board; joint approval of rules with Board of Medical Examiners.

(a) The board shall administer, coordinate, and enforce this chapter.

(b) The board, within 90 days of the time at which it is appointed, shall notify all current practitioners of occupational therapy in the state, as identified by the American Occupational Therapy Certification Board, of the enactment of this chapter and its otherwise becoming a law.

(c) The board shall adopt and publish rules relating to the professional conduct to carry out the policies of this chapter, including, but not limited to, rules relating to professional licensure, registration, and the establishment of ethical standards of practice. The State Board of Medical Examiners and the Alabama State Board of Occupational Therapy shall jointly approve any rule or policy that interprets, explains, or enumerates the permissible acts, functions, or services rendered by an occupational therapist, occupational therapy assistant, or occupational therapy aide as those acts, functions, and services are defined in Section 34-39-3. Any rule or policy adopted in violation of this requirement is invalid.

(d) The board shall evaluate the qualifications of all applicants for licensure under this chapter and shall maintain a register of all persons holding a license and a record of all inspections made.

(e) The board shall approve all examinations of applicants for licensure at least twice a year, shall determine the qualifications and authorize the issuance of licenses to qualified occupational therapists and occupational therapy assistants, and shall renew, suspend, or revoke the licenses in the manner provided.

(f) The board may investigate complaints and allegations concerning the violation of this chapter and may examine witnesses, issue subpoenas, and administer oaths in connection with these investigations. Hearings may be conducted, provided reasonable public notice is given and records and minutes are kept in accordance with the rules of the board.

(g) The board shall make an annual report to the Governor which shall contain an account of duties performed, actions taken, and appropriate recommendations.

(h) The board shall establish a budget in accordance with the requirements of the state.

(i) The board may establish and publish reasonable fees as established in Section 34-39-14.

(j) The board may employ and discharge an executive director and any officers and employees as may be necessary, and shall determine their duties and fix their compensation in accordance with applicable state statutes. The board shall hire and establish the responsibilities and salary of all employees.

(k) The board shall establish an impaired practitioner program beginning January 1, 2022, pursuant to Section 34-39-12.1.

(Acts 1990, No. 90-383, p. 515, §7; Acts 1995, No. 95-279, p. 502, §3; Act 2013-309, p. 1041, §1; Act 2021-516, §1.)

Section 34-39-8 Application for license; requirements.

An applicant for licensure as an occupational therapist or as an occupational therapy assistant shall be a citizen of the United States or, if not a citizen of the United States, a person who is legally present in the United States with appropriate documentation from the federal government, and shall file a written application on forms provided by the board, showing to the satisfaction of the board fulfillment of all of the following requirements:

(1) Applicant shall present evidence satisfactory to the board of having successfully completed all of the academic requirements for degree or certificate conferral from an educational program in occupational therapy recognized by the board. The program shall be accredited by the Accreditation Council for Occupational Therapy Education of the American Occupational Therapy Association, Incorporated.

(2) Applicant shall pass an examination as provided for in Section 34-39-9.

(Acts 1990, No. 90-383, p. 515, §8; Acts 1995, No. 95-279, p. 502, §3; Act 2011-168, p. 321, §3; Act 2013-309, p. 1041, §1.)

Section 34-39-9 Examinations and reexamination; foreign trained applicants.

(a) A person applying for licensure under this chapter shall demonstrate his/her eligibility in accordance with the requirements of Section 34-39-8, and shall make application for examination upon a form and in such a manner as the board shall

prescribe. A person who fails an examination may make reapplication for reexamination accompanied by the established fee.

(b) Each applicant for licensure under this chapter shall be examined by written examination to test his or her knowledge of the basic clinical sciences relating to occupational therapy, and occupational therapy theory and practice, the applicant's professional skills and judgment in the utilization of occupational therapy techniques and methods, and such other subjects as the board may deem useful to determine the applicant's fitness to practice. The board shall establish standards for acceptable performance by the applicant.

(c) Applicants for licensure shall be examined at a time and place and under such supervision as the board may require. Examinations shall be given at least twice each year at such places as the board may determine. The board shall give reasonable public notice of these examinations in accordance with its rules and regulations.

(d) Applicants may obtain their examination scores in accordance with such rules and regulations as the board may establish.

(e) Foreign trained occupational therapists and occupational therapy assistants shall satisfy the examination requirements of Section 34-39-8(3). The board shall require foreign trained applicants to complete educational and supervised fieldwork requirements, substantially equal to those contained in Section 34-39-8, before taking the examination.

(Acts 1990, No. 90-383, p. 515, §9.)

Section 34-39-10 Waiver of license requirements; reciprocity; notification procedure.

(a) The board shall grant a license to any person certified prior to April 17, 1990, as an occupational therapist registered (OTR) or as a certified occupational therapy assistant (COTA) by the American Occupational Therapy Association, Inc. The board may waive the examination, education, or experience and grant a license to any person certified after April 17, 1990, by a national occupational therapy certification board, if the board considers the requirements for certification to be equivalent to the requirements under the terms of this chapter.

(b) The board may waive the examination, education, or experience requirements and grant a license to any applicant who shall present proof of current licensure as an occupational therapist or an occupational therapy assistant in another state, the District of Columbia, or territory of the United States which requires standards for licensure considered by the board to be equivalent to the requirements for licensure of this chapter.

(c) The board shall cause notification to be sent to all occupational therapists and occupational therapy assistants presently employed or practicing occupational therapy in this state. The notification shall summarize the requirements of this chapter and provide information on procedures for obtaining a license.

(Acts 1990, No. 90-383, p. 515, §10; Acts 1995, No. 95-279, p. 502, §3.)

Section 34-39-11 Issuance of license; limited permit; permitted representations.

(a) The board shall issue a license to any person who meets the requirements of this chapter upon payment of the license fee as described in Section 34-39-14.

(b) The board shall issue a limited permit to persons who have completed the educational and fieldwork experience requirements of this chapter. This permit shall allow the person to practice occupational therapy under the supervision of an occupational therapist who holds a current license in this state and shall be valid until the date on which the results of the qualifying examination have been made public. This limited permit shall not be renewed if the applicant has failed the examination. Failure of the examination shall result in revocation of an active limited permit.

(c) Any person who is issued a license as an occupational therapist under the terms of this chapter may use the words "occupational therapist," "licensed occupational therapist," "occupational therapist registered," or may use the letters "O.T.," "L.O.T.," or "O.T.R./L." in connection with his/her name or place of business to denote registration hereunder.

(d) Any person who is issued a license as an occupational therapy assistant under the terms of this chapter may use the words "occupational therapy assistant," "licensed occupational therapy assistant," "certified occupational therapy assistant," or may use the letters "O.T.A.," "L.O.T.A.," or "C.O.T.A./L." in connection with his or her name or place of business to denote registration hereunder.

(Acts 1990, No. 90-383, p. 515, §11; Act 2013-309, p. 1041, §1.)

Section 34-39-12 Denial or suspension of license; probationary conditions; hearing; reinstatement.

(a) The board shall, after notice and opportunity for hearing, have the power to deny or refuse to renew a license, or may suspend or revoke a license, or may impose probationary conditions, where the licensee or applicant for license has been guilty of unprofessional conduct which has endangered or is likely to endanger the health, welfare, or safety of the public. Such unprofessional conduct includes:

(1) Obtaining or attempting to obtain a license by fraud, misrepresentation, or concealment of material facts;

(2) Being guilty of unprofessional conduct as defined by the rules established by the board;

(3) Violating any lawful order, rule, or regulation rendered or adopted by the board;

(4) Being convicted of a crime other than minor offenses defined as "minor misdemeanors," "violations," or "offenses" in any court if the acts for which he or she was convicted are found by the board to have a direct bearing on whether he or she should be entrusted to serve the public in the capacity of an occupational therapist or occupational therapy assistant;

(5) Violating any provision of this chapter.

(b) Such denial, refusal to renew, suspension, revocation, or imposition of probationary conditions upon a license may be ordered by the board in a decision made after a hearing in the manner provided by the rules and regulations adopted by the board. One year from the date of the revocation of a license, application may be made to the board for reinstatement. The board shall have discretion to accept or reject an application for reinstatement and may, but shall not be required to, hold a hearing to consider such reinstatement.

(Acts 1990, No. 90-383, p. 515, §12.)

Section 34-39-12.1 Alabama Occupational Therapy Wellness Committee; impaired practitioner program.

(a) The board shall promote the early identification, intervention, treatment, and rehabilitation of occupational therapists or occupational therapy assistants who may be impaired.

(b) To accomplish this obligation, the board may contract with any nonprofit corporation or medical professional association to create, support, and maintain an Alabama Occupational Therapy Wellness Committee. The committee shall be selected in a manner prescribed by the board. The board may expend available funds as necessary to adequately provide for the operational expenses of the committee including, but not limited to, the actual cost of travel, office overhead, and personnel expense. The expenditure of funds provided by the board for operating expenses of the committee are not subject to state competitive bid laws.

(c) The board may enter into an agreement with a nonprofit corporation or medical professional association for the committee to undertake those functions and responsibilities specified in the agreement, which may include any or all of the following:

- (1) Contracting with providers of treatment programs.
- (2) Receiving and evaluating reports of suspected impairment from any source.
- (3) Intervening in cases of verified impairment.
- (4) Referring impaired occupational therapists or occupational therapy assistants to treatment programs.
- (5) Monitoring the treatment and rehabilitation of impaired occupational therapists or occupational therapy assistants.
- (6) Providing post-treatment monitoring and support of rehabilitated impaired occupational therapists or occupational therapy assistants.
- (7) Performing other activities as agreed by the board and the committee.

(d) The committee shall develop procedures in consultation with the board for all of the following:

- (1) Periodic reporting of statistical information regarding impaired practitioner program activity.
- (2) Periodic disclosure and joint review of all information the board deems appropriate regarding reports received, contracts or investigations made, and the disposition of each report. The committee may not disclose any personally identifiable information except as otherwise provided in this chapter.

(e) Any person appointed to serve as a member of the committee and any auxiliary personnel, consultant, attorney, or other volunteer or employee of the committee taking any action authorized by this chapter, engaging in the performance of any duties on behalf of the committee, or participating in any administrative or judicial proceeding resulting therefrom, in the performance and operation thereof, shall be immune from any liability, civil or criminal, that might otherwise be incurred or imposed. Any nonprofit corporation or medical professional association or other entity that contracts with or receives funds from the board for the creation, support, and operation of the committee, in so doing, shall be immune from any liability, civil or criminal, that might otherwise be incurred or imposed.

(f) All information, interviews, reports, statements, memoranda, or other documents furnished to or produced by the committee and any findings, conclusions, recommendations, or reports resulting from any investigation, intervention, treatment, or rehabilitation, or other proceeding of the committee is privileged and confidential. All records and proceedings of the committee pertaining to an impaired occupational therapist or occupational therapy assistant are confidential and shall be used by the committee and the members of the committee only in the exercise of the proper function of the committee and shall not be public record nor available for court subpoena or for discovery proceedings. In the event of a breach of contract between the committee and the impaired occupational therapist or occupational therapy assistant, all records pertaining to the conduct determined to cause the breach of contract shall be disclosed to the board upon its request for disciplinary purposes only. Nothing contained in this subsection shall apply to records made in the regular course of business of an occupational therapist or occupational therapy assistant and any information, document, or record otherwise available from an original source may not be construed as immune from discovery or use in any civil proceeding merely because it is presented or considered during proceedings of the committee.

(g) The committee shall render an annual report to the board concerning the operations and proceedings of the committee for the preceding year. The committee shall report to the board any occupational therapist or occupational therapy assistant who the committee determines is impaired, when it appears that the occupational therapist or occupational therapy assistant is currently in need of intervention, treatment, or rehabilitation and the occupational therapist or occupational therapy assistant has failed or refused to participate in any program of treatment or rehabilitation recommended by the committee. A report to the committee shall be deemed a report to the board for the purposes of any mandated reporting of occupational therapy licensee impairment or occupational therapy assistance licensee impairment otherwise provided for by law.

(h) If the board has reasonable cause to believe that an occupational therapist or occupational therapy assistant is impaired, the board may cause an evaluation of the occupational therapist or occupational therapy assistant to be conducted by the committee for the purpose of determining if there is an impairment. The committee shall report the findings of its evaluation to the board.

(Act 2021-516, §2.)

Section 34-39-13 Expiration and renewal of licenses; fee; continuing education; late fee.

(a) All licenses under this chapter shall be subject to renewal and shall expire unless renewed in the manner prescribed by the rules and regulations of the board upon the payment of a renewal fee. The board may set a required number of continuing education units for license renewal. The board may provide for a late renewal of license upon payment of a late renewal fee. Any license which has not been restored within three years following its expiration may not be renewed, restored, or reissued thereafter. The holder of such an expired license may apply for and obtain a valid license only upon compliance with all relevant requirements for issuance of a new license.

(b) A suspended license is subject to expiration and may be renewed as provided in this section, but such renewal shall not entitle the licensee, while the license remains suspended and until it is reinstated, to engage in the licensed activity or in other conduct or activity in violation of the license revoked on disciplinary grounds is reinstated, the licensee, as a condition of reinstatement, shall pay the reorder or judgment by which the license was suspended. If a license revoked on disciplinary grounds is reinstated, the licensee, as a condition of reinstatement, shall pay the renewal fee and any late fee that may be applicable.

(Acts 1990, No. 90-383, p. 515, §13.)

Section 34-39-14 Fees authorized.

The board is empowered to establish, publish, and collect reasonable fees and costs in amounts determined by the board for the following purposes:

- (1) Application for examination;
- (2) Limited permit fee;
- (3) Initial license fee;
- (4) Renewal of license fee;
- (5) Late renewal fee; and
- (6) The costs of conducting a hearing of any person whose license or certificate of qualification is suspended, revoked, or refused as a result of such hearing.

(Acts 1990, No. 90-383, p. 515, §14; Acts 1991, No. 91-165, p. 221, §3.)

Section 34-39-15 Violation as misdemeanor; penalty; forfeiture and revocation of license.

Any person who violates any provision of this chapter as set forth in Sections 34-39-4 and 34-39-13, shall be guilty of a misdemeanor and upon conviction shall be punished by a fine of not less than \$250 and not more than \$1,000, or imprisonment for a period not exceeding six months, or both. A license held by any person convicted under this section shall be forfeited and revoked forthwith for one year from the date of such conviction.

(Acts 1990, No. 90-383, p. 515, §15.)

Section 34-39-16 Complaints; notice and hearing; judicial review.

(a) Any person may file a complaint with the board against any licensed occupational therapist or licensed occupational therapy assistant in the state charging the person with having violated this chapter. The complaint shall set forth specifications of charges in sufficient detail so as to disclose to the accused fully and completely the alleged acts of misconduct for which he or she is charged. When a complaint is filed, the secretary of the board, or the executive director at the request of the secretary, shall mail a copy thereof to the accused by return receipt mail at his or her address of record, with a written notice of the time and place of hearing thereof, advising him or her that he or she may be present in person and by counsel if he or she so desires, to offer evidence and be heard in his or her defense.

(b) At the time and place fixed for the hearing, the board shall receive evidence upon the subject matter under consideration and shall accord the person against whom charges are preferred a full and fair opportunity to be heard in his or her defense. The board shall be bound by the rules of evidence in contested cases under Section

41-22-13 of the Alabama Administrative Procedure Act and all oral testimony considered by the board shall be under oath. If the board finds that the licensed occupational therapist or the licensed occupational therapy assistant has violated this chapter, the board may suspend or revoke his or her licensure, levy a reasonable fine not to exceed one thousand dollars (\$1,000) per violation, or restrict his or her license and require the licensee to report regularly to the board on matters related to the reasons for the restricted license, or any combination of these.

(c) The action of the board in suspending, revoking, or refusing to issue a license may be appealed to the Circuit Court of Montgomery County accompanied by a bond to be approved by the court. The notice of appeal shall be filed within 30 days from the receipt of such order or ruling. Appeals shall be governed by the judicial review provisions of Section 41-22-20 of the Alabama Administrative Procedure Act, except that the review procedure provided therein shall not suspend the action of the board nor stay the enforcement of any order in the suspension, revocation, or refusal of a license.

(Acts 1990, No. 90-383, p. 515, §16; Acts 1991, No. 91-165, p. 221, §3; Act 2013-309, p. 1041, §1.)

Professional Services by Vendor

Administrative Services	FY2018	FY2019	FY2020	FY2021
AL Assoc. Of Regulatory Boards	\$ 750.00	\$ 895.00	\$ -	\$ -
State Personnel Department	357.00	368.00	743.00	753.00
Department of Finance				
Mailing Services	95.95	100.05	119.45	97.00
Department of Finance				
Security/Monitoring	36.00	-	-	-
Department of Finance				
STAARs Contract	1,650.00	3,300.00	3,300.00	-
Coleman American Moving Services, Inc	945.00	-	-	-
Legislative Services Agency	-	-	230.00	-
Total Administrative Services	3,833.95	4,663.05	4,392.45	850.00
Data Processing Services				
Office of Information Tech.				
Data Processing	2,770.57	1,819.74	2,161.02	2,124.43
Office of Information Tech.				
IT Planning/Oversight	99.87	114.36	131.29	125.84
Department of Finance				
SBS Billing	58.12	794.03	1,279.00	1,844.25
Department of Finance				
Comptroller Services	633.12	672.33	1,125.98	1,353.59
Total Data Processing	3,561.68	3,400.46	4,697.29	5,448.11
Legal Services				
Attorney General's Office	525.00	525.00	-	495.00
Baker Realtime Reporting/Video	-	1,986.50	-	-
Total Legal Services	525.00	2,511.50	-	495.00
Total Professional Services	\$ 7,920.63	\$ 10,575.01	\$ 9,089.74	\$ 6,793.11

Board Members



Alabama State Board of Occupational Therapy

P.O. Box 304510

334-353-4466

Montgomery, AL 36130-4510

February 14, 2022

Christine Kilpatrick
Examiner's of Public Accounts
P.O. Box 302251
Montgomery, AL 36130-2251

Dear Ms. Kilpatrick

The following are current members serving on the Board of Occupational Therapy:

Rodney Higginbotham, Chair Jasper	OT	Expires December 31, 2022
Greshundria Raines Prattville	OT (Minority)	Expired December 31, 2023
Marcia Obermann, RN BSN Huntsville	Public Member	Expired December 31, 2023
Annette Harman Killen	OTA	Expires December 31, 2024
Tracy O'Connor Spanish Fort	OT	Expires December 31, 2024

Sincerely,

Ann Cosby
Executive Director