

Comments on Sunset Commission Healthcare Consolidation Proposal
By the:
Texas Physical Therapy Association
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We would be remiss if we did not make note of the flawed process that led to the surprise “motion to table” request by the Sunset Director at the Aug 22nd Sunset meeting. The Sunset Staff Recommendation (4.1) for the Texas Board of Physical Therapy Examiners (TBPE), published on multiple occasions and confirmed in meetings over the course of months, was to retain the TBPE as an independent state licensure agency for the next 12 years (2029). None of the stakeholders, the public, nor many of the Sunset Commission members, knew that request was coming. In fact, the Sunset staff recommendation, initially published in April, reaffirmed at the June 23rd public hearing and again in the meeting materials provided in advance of the Aug 22nd hearing, as well as the published meeting materials distributed in the hearing room the morning of the Aug 22nd meeting, confirmed that recommendation 4.1---retention of the TBPE as an independent agency ***was the Sunset staff recommendation.***

The tabling motion requested by the Sunset Director at the Aug 22nd Sunset meeting undermined 6 months of stakeholder input, education efforts and lobbying support and regardless of what happens now, no one can give us (the stakeholders and the public we represent) that time back. In a private meeting between representatives of our professional association (Texas Physical Therapy Association) and the Sunset Director in October, Mr. Levine told us that the Sunset staff had decided that a consolidation of health profession licensing agencies was their chosen course of action back in mid-summer. We asked if that was the case then why was it that the Sunset Commission staff prepared materials, including those published materials that supported the Aug 22nd hearing that continued to call for leaving the TBPE as an independent state licensure agency, we were told; “...that was a mistake”. That is a regrettable situation, and certainly does not reflect the transparency that characterizes the political decision-making process in Texas.

Regardless, we believe that the Sunset staff proposal to send the Physical Therapy Licensure Board to the Texas Department of Licensing and Regulation (TDLR) is not a well-conceived approach, not in the public’s best interest, and not in keeping with the state’s interests for running the most effective and cost-efficient healthcare licensing board for the profession of Physical Therapy. For example:

1. The Sunset staff told us that cost effectiveness was one of the drivers of the healthcare consolidation proposal. The cost per licensee at TDLR is \$44, at the Texas Board of

Physical Therapy Examiners the cost per licensee is \$32 dollars, an increase of 37%. The cost effectiveness argument seems a bit suspect considering the data.

2. The Sunset staff told us that the issue of time required to address complaint resolutions against licensees was another factor in leading to the consolidation proposal; the issue of agency effectiveness...the number of days required to resolve complaints against licensees at TDLR is 217, at the PT Board it is 113. It is worth noting that complaints against currently licensed occupations at TDLR, e.g. hairdressers, well-diggers and tow-truck operators is likely to be less complex than the kind of nuanced clinical complaints for a healthcare profession where 'hands on patient care' is the standard for daily practice.
3. The Sunset staff told us that the size of the agency---scalability, was an issue that argued for the consolidation approach. At TDLR the number of licensees supported per agency full-time employee (FTE) is 1,630, at the PT board that FTE per licensee ratio is 2,125...bigger is not always better.

The Sunset staff also told us that while the numbers related to agency efficiency and effectiveness were important, that no one number told the entire story...you need to look at multiple data-points. The examples above represent a sampling of multiple data points---there are many others and we look forward to having an opportunity to share these with the Sunset Commission members at the December public hearing.

However, none of these examples address the big picture question---is it a good idea to consolidate healthcare professions into an agency whose Commissioners, the "court of last resort" in agency decision-making, are prohibited by law from having any affiliation with those occupations over which they exercise regulatory control? Is the loss of institutional knowledge and experience generated over decades of regulatory control of doctoral-level educated healthcare professionals, Physical Therapists, something that serves the long-term interests of the state?

Thank you for the opportunity to offer comments.

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