

**From:** [Sunset Advisory Commission](#)  
**To:** [Cecelia Hartley](#)  
**Subject:** FW: TBPTE Consolidation into TDLR  
**Date:** Monday, November 28, 2016 11:59:52 AM  
**Attachments:** [image001.png](#)

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**From:** Kissinger, Cathy  
**Sent:** Monday, November 28, 2016 11:47 AM  
**To:** Sunset Advisory Commission  
**Subject:** TBPTE Consolidation into TDLR

To the members of the Sunset Commission,

My name is Dr. Cathy Kissinger, PT, DPT and I am writing to express my opposition to the recommendation to consolidate Texas Board of Physical Therapy Examiners (TBPTE) functions into the Texas Department of Licensing & Regulation (TDLR). I live in Frisco, TX and have practiced in Plano, TX as the manager of the outpatient rehabilitation services department at Texas Health Presbyterian Hospital of Plano for over 16 years.

Here are the primary reasons for my opposition to this consolidation:

- Efficiency of scale and consolidation is the major reason cited for the proposed changes. The Licensing Consolidation Project report states that no non-government business would operate with the current structure. I can tell you, as an employee of a hospital system that employs over 18,000 staff across central Texas, that we have seen much standardization and centralization of functions in recent years. While some of the changes have led to gains in efficiency, I have found that many others create efficiencies in one area at the expense of gains in another. I feel that would be the case with this transition, as well.
- The TBPTE functions effectively and efficiently, and I question why Mr. Levine sees a need to alter a system that is working exceptionally well on its own. I have complete faith that the TBPTE will make wise decisions that serve our profession best, as it is an integral part of our profession. I do not have the same faith that an umbrella agency such as the TDLR will take the same care, even if counseled by a board of PT advisors.
- According to the cost analysis in the report, it will take 6.4 years to break even from the expense taxpayer will incur in the implementation of this change. And all this to save only 3 FTE's if the change is fully implemented? It seems to be a very high cost for such meager gains.

I strongly recommend that the TBPTE remain intact and functioning to effectually and efficiently serve our profession as it does today.

Here is my contact information – I would be glad to discuss these issues further, if you like:

Dr. Cathy S. Kissinger, PT, DPT

My deepest gratitude for your careful consideration of this matter-

**Cathy Kissinger, PT, DPT** ½ Manager, Outpatient Rehabilitation Services



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