



AK PT/OT Board - Scope of Practices Committee Mtg April 30, 2026

Alaska Division of Corporations, Business and Professional Licensing
Virtual
2026-04-30 08:00 - 10:00 AKDT

Table of Contents

1. Call to Order/Roll Call.....	3
Committee Members: Tori Daugherty Jonathan Gates	
PHY - Public Notice - Scope Committee Mtg - 04-30-2026.pdf.....	3
2. Review/Approve Agenda.....	4
PHY - Agenda - SOP Mtg - 04-30-2026.pdf.....	4
3. Approve Minutes - 02/12/2026.....	5
AK PT_OT Board - Scope of Practices Committee Mtg - February 12, 2026 Minutes - DRAFT.pdf.....	5
4. Public Comment	
5. NEW Board Correspondence	
A. OT Scope Questions	
B. PT Scope Questions.....	10
- School District IEP Service Delivery - 02-12-2026 - draft response	
School District IEP Service Delivery - 02-12-2026_redacted.pdf.....	10
M Sweetman - PHYP431 - PT - Request for alternative - 03-31-2026_redacted.pdf.....	11
PT Scope Question - Manipulation - 4-19-2026_redacted.pdf.....	14
Scope Modernization - 03-11-2026_redacted.pdf.....	15
C. Generic	
- From October, 2025 board meeting - work with Scope of Practices Committee for generic auto response request for additional information for approval consideration of professional practice alternatives under 12 AAC 54.405(c) and 12 AAC 54.705(c).	
6. PT Scope Modernization Update	

A. Strategic Plan Goal 1.C - Crosswalk PT Scope Modernization draft language once finalized to include any applicable changes to occupational therapy to make inclusive language in common areas

- Title protection for DPT for Doctor of Physical Therapy and OTD for Doctor of Occupational Therapy
- Title protection for "Physiotherapist"

7. OT Scope Modernization Update

8. Next Steps

9. Adjourn



AK PT/OT Board - Scope of Practices Committee Mtg - April 30, 2026

Alaska Division of Corporations, Business and Professional Licensing
Thursday, April 30, 2026 at 8:00 AM AKDT to 10:00 AM AKDT
Virtual

Meeting Details: <https://us02web.zoom.us/meeting/register/AIVgg2vFSNygBdMnKengxA>

Additional Meeting Details: Registration required

Agenda

- 1. Call to Order/Roll Call** **8:00 AM**
Committee Members: Tori Daugherty and Jonathan Gates
- 2. Review/Approve Agenda** **8:05 AM**
- 3. Approve Minutes - 02/12/2026** **8:10 AM**
- 4. Public Comment** **8:15 AM**
- 5. NEW Board Correspondence**
 - A. OT Scope Questions** **8:25 AM**
 - B. PT Scope Questions** **8:30 AM**
 - C. Generic** **8:55 AM**
 - From October, 2025 board meeting - work with Scope of Practices Committee for generic auto response request for additional information for approval consideration of professional practice alternatives under 12 AAC 54.405(c) and 12 AAC 54.705(c).
- 6. PT Scope Modernization Update** **9:10 AM**
Presenter: Jonathan Gates
 - A. Strategic Plan Goal 1.C - Crosswalk PT Scope Modernization draft language once finalized to include any applicable changes to occupational therapy to make inclusive language in common areas**
- 7. OT Scope Modernization Update** **9:30 AM**
Presenter: Victoria Daugherty
- 8. Next Steps** **9:50 AM**
- 9. Adjourn** **10:00 AM**



AK PT/OT Board - Scope of Practices Committee Mtg - February 12, 2026 Minutes

Alaska Division of Corporations, Business and Professional Licensing
2/12/2026 8:00 AM AKST
Virtual

These are DRAFT minutes prepared by staff of the Division of Corporations, Business and Professional Licensing. They have not been reviewed or approved by the Board.

1. Call to Order/Roll Call

Committee Members: Tori Daugherty and Jonathan Gates

The Physical Therapy and Occupational Therapy Board Scope of Practices Committee meeting was called to order on Thursday, February 12, 2026 at 8:11 am by Tori Daugherty.

Roll call taken:

Committee members present: Tori Daugherty and Jonathan Gates.

Staff present: Shane Bannarbie, Project Coordinator 1 and Sheri Ryan, Licensing Examiner 3.

2. Review/Approve Agenda

Tori Daugherty moved to accept the February 12, 2026 Scope of Practices committee meeting agenda as submitted. Motion seconded by Jonathan Gates. All in favor; none opposed. Motion passes unanimously.

3. Approve Minutes - 11/06/2025

Tori Daugherty asked that Item 6B. in NEW Board Correspondence - PT Scope Questions - PTA Scope and Dry Needling Ruling Request - 10-31-2025 be updated to reflect that the original question is related to physical therapy dry needling only. As the response and the discussion was centered around physical therapy dry needling only and would not encompass occupational therapy dry needling, she wanted this clarified in the minutes so as to avoid confusion to anyone reviewing the minutes in the future as the minutes use words like "only performed by physical therapists", etc.

Tori Daugherty moved to approve the November 6, 2025 Scope of Practices committee meeting minutes as discussed. Motion seconded by Jonathan Gates. All in favor; none opposed. Motion passes unanimously.

4. Public Comment

No members of the public joined the meeting; no public comment given.

5. NEW Board Correspondence

A. OT Scope Questions

Vision Therapy Scope Question - 10-28-2025 Draft response reviewed and approved by the committee.

Jonathan Gates moved to approve the letter as written and submit to the PHY Board for approval through OnBoard. Tori Daugherty seconded. All in favor; none opposed. Motion passes unanimously.

Action Items:

Staff to load draft response for Vision Therapy Scope Question - 10-28-2025 into OnBoard for full board approval.

B. PT Scope Questions

- PTA Scope and Dry Needling Ruling Request - 10-31-2025 response reviewed and approved.

Jonathan Gates moved to approve the letter as written and submit to the PHY Board for approval through OnBoard. Tori Daugherty seconded. All in favor; none opposed. Motion passes unanimously.

Action Items:

Staff to load draft response for PTA Scope and Dry Needling Ruling Request - 10-31-2025 into OnBoard for full board approval.

- PTA Scope Ultramist® Wound Care - 12-22-2025 question reviewed. Committee reviewed [APTA Advanced Proficiency Pathways](#) for Wound Management and briefly discussed. More information required for response. Question to be tabled for February 26-27, 2026 board meeting for input from board members. Tori Daugherty to write draft to present at meeting to start board discussion.
- Staff response to IERF – CWT6 for Foreign-Educated PTs – 10-28-2025 reviewed and committee concurred.
- Staff response to Acceptance of FCCPT PTA Educational Evaluation – 01-15-2026 reviewed and discussed. Staff to contact FSBPT regarding ability

for PT (foreign educated or not) to sit for NPTE-PTA examination. Question to be discussed at February 26-27, 2026 board meeting.

Action Items:

1. PTA Scope Ultramist® Wound Care - 12-22-2025 question to be added to February 26-27, 2026 Board meeting agenda for discussion. Tori Daugherty to write draft to present at meeting to start board discussion.
2. Acceptance of FCCPT PTA Educational Evaluation – 01-15-2026 to be added to February 26-27 Board meeting agenda for discussion. Staff to contact FSBPT regarding ability for physical therapists to qualify to take NPTE-PTA.

C. Generic

- CAQH Disclosure Questions – 01-07-2026 question reviewed and discussed. Credentialing is outside the board’s scope of authority. Tori Daugherty to write draft response to directly in OnBoard for full board review and approval.
- School District IEP Service Delivery – 02-12-2026 question reviewed and discussed. IEP service delivery is outside the board’s scope of authority. Jonathan Gates to draft response to be reviewed at next meeting. Staff to send contact information for Alaska Department of Education & Early Development and personnel who directly handles IEPs.

Action Items:

1. Tori Daugherty to write draft response to directly in OnBoard for full board review and approval.
2. Jonathan Gates to draft response to be reviewed at next meeting. Staff to send contact information for Alaska Department of Education & Early Development and personnel who directly handles IEPs.

6. PT Scope Modernization Update (Presenters: Jonathan Gates)

Jonathan Gates scheduled to attend MED board meeting 03/19/2026 to gather feedback regarding “primary care”. Gave overview of strategy change from term protection to title protection for CHI board. AK Chiropractic Society written objections anticipated but still not received. AOTA gave feedback that was incorporated into the draft regarding “functional training related to movement and mobility”. ASMA gave feedback that was

incorporated into the draft regarding the use of “primary care”. Currently trying to schedule educational opportunities with new leadership of APTA-AK to promote collaboration.

7. OT Scope Modernization Update (Presenters: Victoria Daugherty)

Tori Daugherty attending AKOTA Task Force meetings. Draft language submitted to Leg Legal. 1st draft included “health and harm” throughout. 2nd draft included ability to make prosthetics and changed language from OTA being able to contribute to plan of care to contribute to their own performance reports. Test and measurements also moved out of AS 08.84.190 to its own OT specific section. Currently working on 3rd draft to correct.

Action Items:

If OT scope modernization bill introduced this legislative session, request any member of board be delegated to testify.

Executive Administrator bill – add to February 26-27, 2026 board meeting agenda for status update and possibly revisit motion on who can seek sponsorship. Discuss APTA-AK support due to leadership change.

8. Next Steps

1. Tori Daugherty to draft responses for:
 1. PTA Scope UltraMist® wound care - 12-22-2025 question to be used as starting point for discussion at board meeting Feb 26-27, 2026.
 2. CAQH disclosure questions - 01-07-2026 letter as discussed by committee to be uploaded directly to OnBoard for full board approval.
2. Jonathan Gates to draft response for School District IEP Service Delivery - 02-12-2026 to be reviewed at next committee meeting on April 30, 2026. Staff to send contact information for Alaska Department of Education & Early Development - eed.contact@alaska.gov; 907-465-2800; Donald Enoch, Jr.
3. Staff to upload Vision Therapy and PTA Scope Dry Needling draft responses into OnBoard for full board approval.
4. Staff to update minutes from 11-06-2025 with clarification regarding PTA Scope dry needling letter limited to physical therapy related question only and post on PHY website.
5. Staff to contact FSBPT regarding ability for physical therapists to qualify to take NPTE-PTA.

6. If OT scope modernization bill introduced this legislative session, request any member of board be delegated to testify.
 7. Executive Administrator bill – add to February 26-27, 2026 board meeting agenda for status update and possibly revisit motion on who can seek sponsorship.
Discuss APTA-AK support due to leadership change.
9. Adjourn

The Alaska Physical Therapy and Occupational Therapy Scope of Practices Committee meeting was adjourned at 9:57 am on Thursday, February 12, 2026.

Next virtual meeting scheduled for April 30 at 8:00 am.

DRAFT

From: [Amanda Calhoon](#)
To: [Board of Physical and Occupational Therapy \(CED sponsored\)](#)
Subject: Documentation compliance issue— ASD
Date: Wednesday, February 11, 2026 7:44:33 PM

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good evening:

I am an OT within the state of Alaska and also work for the Anchorage School District. As such, I hold both an OT License as well as a “special services” teaching license which classifies me as a teacher to the state of Alaska.

DEED (Department of Education) made recommendations this year to how students are evaluated and classified as well as where OT and PT can support within their educational plan. DEED recommendations suggest that PT/OT be within a “motor” section of their eligibility, not tied to educational areas supported by teachers. Prior to this, OT and PT were considered a “related service” and tied to an educational goal within their eligibility category (ie: OT supporting writing goals and PT supporting Life Skills).

When asked to clarify and provide specific guidance, ASD’s compliance department stated that therapies be under motor but did not give specifics as to how. Therapists, both PT and OT, asked for specific recommendations and have not yet received them. We have emailed our directors and compliance with only a nod to the vague outline as given back in August.

With the addition of western Alaska students to the Anchorage school district, there is now heightened scrutiny of how therapies fit within this educational framework. This has brought this issue to the forefront— yet no further guidance has been given.

Given therapies has always been tied to an educational need it seems that having separate motor goals would go against ASD’s definition that PT and OT are services always tied this. They have yet to define whether PT and OT are separate service (as SLPs have been) OR tied to an educational need.

Because no clarification or directive has been given, each clinician has been left to use their clinical judgment to decide. This has as-expected results: inconsistency and confusion with parents and teachers alike.

Can you please clarify what PTs and OTs should do within this context? I value my board certification and professional license greatly. This is a clear instance in which clinical judgment and lack of clear guidance or judgment run afoul of each other.

I want to do what is legal and appropriate for the students I serve. Without clear guidance, I feel therapists will be blamed for “paperwork errors” that DEED finds in the near future.

Please advise. Thank you for your time and consideration.

Amanda L. Calhoon, OTR/L

27 March 2026

TO: The Alaska PT Licensing Board physicalandoccupationaltherapy@alaska.gov

FROM: Mary Margaret McCulley Sweetman, PT Alaska License PT0431

RE: Request for Alternate Professional Practice Requirement

I am submitting an alternative requirement for the Professional Practice component of my June 2026 Alaska Physical Therapy licensure renewal. As sole care partner for a family member who is living with Parkinson's Disease (PD), my PT skills are utilized multiple times day and night to assist with compromised function consistent with that progressive neurological disease.

BACKGROUND:

Ketchikan has been my home and place of work as a Physical Therapist (PT) since 1988. My family member was diagnosed with PD in 2019. As the disease has progressed, so too has the need for assistance for all ADLs, (Activities of Daily Living) which are impacted by motor and cognition and sensory changes. As a result, my presence has been required in the home full time and as of Fall 2025, I am no longer working outside the home as a PT. Following is my supporting documentation as specified by Sheri Ryan, Licensing Examiner 3 for the Board of Physical and Occupational Therapy.

SUMMARY:

The amount of skilled therapy I provide varies with the changes in ADL abilities. They fluctuate throughout the day and range from independence to maximal assistance needed. Function is primarily impacted by fatigue and on/off times. Other regular contributing factors can be stress, sensory overload, and nutrition.

Research indicates that exercise is a consistent factor in slowing the progression of PD. Executive function decline has resulted in an inability to independently complete a HEP (Home Exercise Program.) Daily, I provide a plan, a set up, assist with carrying out, re- assess and adjust all HEP.

Therapeutic measures across motor, cognitive and sensory domains are inserted into ADLs to increase functional abilities. Although many skills have been lost, many gains have been achieved with daily persistent practice. Our daily PT routine is a one hour minimum of interventions including but not limited to gait training, transfer training, therapeutic exercise, strengthening, stretching, endurance, balance, dual task, and eye hand coordination activities. Skilled PT is provided indoor and outdoor. Outdoor PT is 60-90 minutes of gait training across varied community surfaces, beaches and trails. The indoor PT base plan is 40-60 minutes of the Theracycle, BOSU, LSVT Big and LSVT Loud programs (Lee Silverman Voice Treatment) and/or Parkinson Voice Project Exercises.

Indoor and outdoor environmental assessments have been done and are ongoing for fall risks, energy conservation, body mechanics and executive function. Modifications that I have completed since my last licensure renewal in 2024 include grab bar installation, indoor and outdoor motion sensor lighting, brighter indoor lighting, addition of a shower chair and hand held shower, furniture placement changes to facilitate clear pathways, furniture elevation to facilitate safer transfers, addition of a bed cane and bedside touch lighting, adaptation of household storage for improved access, and clothing choice changes to facilitate greater independence in dressing.

My PT expertise is utilized daily to observe, assess, instruct, treat, modify, and plan for successful home and community based activities based on fluctuating status that is consistent with the presentation of PD. Vitals are monitored and adjustments are made as indicated.

**MaryMargaret M Sweetman PT0431 Request for Alternative Professional Practice Requirement
Page 2/2**

I communicate responses to interventions via email and phone calls as well as during direct and virtual visits to the broad team of medical providers. The PD team includes the Neurologist, Dietician, Primary Care Provider, Speech Therapists, Occupational Therapist, Physical Therapist, Fitness Trainer, Sleep study team (for Apnea and use of CPAP), Ophthalmologist, Optometrist, Audiologist, and Pharmacist. I schedule, transport, attend and provide follow up care for all medical appointments. As appropriate, I educate friends, family and a respite provider on the signs, symptoms and interventions indicated for my family member when spending time with individuals other than myself.

GOALS:

1. Individual will participate in home and community based activities to the fullest extent possible.
2. Individual will safely ambulate on stairs, ramps and level indoor and outdoor surfaces with verbal and/or tactile cueing and the LRAD (Least Restrictive Assistive Device.)
3. Individual will safely transition across varied surfaces including wood, vinyl, carpet, tile, gravel, cement and dirt on even and uneven terrains with verbal and/or tactile cueing and the LRAD.
4. Individual will increase outdoor walking tolerance from current 1.5 miles to 2.0 miles 3x/week.
5. Individual will ambulate up and down indoor steps using unilateral or bilateral hand rail support to access to all rooms in their tri-level home with verbal and/or tactile cueing and the LRAD.
6. Individual will ambulate up and down outdoor steps using unilateral hand rail support to access deck, porch and yard areas with verbal and/or tactile cueing and the LRAD.
7. Individual will transfer to and from a vehicle with CGA (contact guard assist) and verbal cues.
8. Individual will transfer to and from shower chair, with verbal cues.
9. Individual will transfer to and from household furniture throughout home, deck and yard with verbal and/or tactile cueing.
10. Individual will transfer from floor to stand in the event of a non-injury fall.
11. Individual will remain living in their home with family and community support.

PLAN:

1. Gait Training. Outdoors on local trails, beaches, sidewalks and docks 3-5x/week x 60-90 minutes. Monitor progress and quality of gait with use of PT professional assessment and Apple iPhone Health application to include daily, weekly, monthly, 6 month and annual data for distance, double support time, walking asymmetry, walking speed, step length and walking steadiness.
2. Neurological Therapeutic Exercises. Indoors on Theracycle, Bosu, LSVT Big, Dual Tasking, Ball Skills, Stepping, Eye Hand Coordination,, Strengthening. 5x/week x 60 minutes.
3. Transfer Training. Minimum of 5-6x/daily throughout the home, vehicle and community.
4. Transfer Training. From floor to stance 1-2x/week for practice in the event of a non injury fall.

Please contact me for further information or clarification.

Respectfully,

Marggie Sweetman, PT

From: [Maggie Sweetman](#)
To: [Board of Physical and Occupational Therapy \(CED sponsored\)](#)
Subject: Fwd: Board PT Request for alternative
Date: Tuesday, March 31, 2026 4:22:17 PM
Attachments: [Board PT Request for alternative .pdf](#)

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Please find in the attached document, my submission for an alternative to the Professional Practice Requirement for my June 2026 PT Licensure Renewal.

Thank you,
M Margaret Sweetman, PT
AKPT 0431

Maggie Sweetman attached a document



Board PT Request for alternative

This is a courtesy copy of an email for your record only. It's not the same email your collaborators received. Click [here](#) to learn more.



From: [Tara Madden](#)
To: [Board of Physical and Occupational Therapy \(CED sponsored\)](#)
Subject: PT Question
Date: Sunday, April 19, 2026 1:48:13 PM

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hello,

I hope this reaches you well! I have a quick question about the practice of PT in the state of Alaska. Can you answer or lead me in the right direction? I am wondering if Doctors of Physical Therapy are allowed to manipulate the spine in your state.

I appreciate any help you can provide. Thank you.

Tara Madden

From: [Ryan, Sheri J \(CED\)](#)
To: ["Patricia Runde"](#);
RE: Scope Modernization
Subject: Wednesday, March 11, 2026 1:30:00 PM
Date:
Attachments:

Hello Patty and members of the APTA Alaska Board (and others copied on this email),

The state has an official process for board correspondence. All board correspondence goes through the licensing examiner and based on the content, is routed to the appropriate committee for research and a draft response recommendation and then sent to the full board for review and approval. This normally happens through a publicly noticed committee meeting, the correspondence is included in the public packet, and there is the opportunity for public comment. Any draft response is discussed as part of the public meeting. On occasion, the committee may recommend that the draft response go through our electronic voting system for review and vote to speed the process. If any board member has questions or is not in agreement with a draft response, it is tabled for discussion at the next full board meeting. While not necessarily efficient, it is the requirement based on transparency requirements and the Alaska Open Meetings Act.

I do not feel comfortable forwarding this correspondence to other members of the PT Scope Modernization Work Group through their personal email addresses. I would be happy, with your permission, to add this to the next work group meeting, as Public Comment, which would be the appropriate method.

With that said, there are parts of your letter that I can answer in part as I am clarifying “process” or answering normal questions in my role as a Licensing Examiner. Some of it I will have to leave to the full Physical Therapy and Occupational board or the APTA Alaska board to address.

1. How to incorporate changes - [The PT Scope Modernization Work group was established in March 2025 to gather stakeholder input and formulate draft language. The work group IS the process to incorporate draft changes. This has been an ongoing process for almost a year now.](#)
2. Why this is being encouraged presently – [Scope Modernization are strategic plan goals for both physical therapy and occupational therapy of the Physical Therapy and Occupational Therapy Board. The original strategic plan was developed in November 2023. You can review past \[Board meeting minutes\]\(#\) and attend board meetings to stay current on the board’s agenda. The Physical Therapy and Occupational Therapy Board publishes an annual report available online here à](#)

<https://www.commerce.alaska.gov/web/cbpl/DivisionReports>.

3. What obstacles or challenges would be presumed or how unexpected challenges are handled - Once draft language has been finalized by the PT Scope Modernization Work Group, it will need to be presented to the PHY board for approval. The work group may present a plan to the board that includes strategies for bill introduction. This is what the OT Scope Modernization work group did. They included a partnership with their state physical therapy association. There are still additional PT work group meetings to be held to finalize the draft language and any strategies, if included. Once the final report is presented, the PHY board will then decide their course of action based on majority vote. You can find the final report for the OT Scope Modernization on the website [HERE](#) as well as the first version of the PT Scope report presented in June, 2025.
4. What are the costs for a lobbyist or attorney associated with the practice act change efforts? Legally, the PHY board cannot retain a lobbyist. The legislative sponsor of an introduced bill would have the draft language reviewed by Legislative Legal. That cost is unknown. That cost is part of the legislative overhead. The division submits a fiscal note detailing the financial impact, including potential costs, savings, or revenue changes anticipated with proposed changes for any bill. The fiscal note is part of the documents available publicly in the documents section of all bill filings online. The PHY board would incur the regulatory costs to write and pass regulations to support any practice act changes that were successful. I cannot speak to the costs incurred by any partners that would assist in statutory change efforts.
5. Who pays for these costs? [See explanation above](#).
6. What is the cost associated with “opening” the practice act that is predictable, meaning payment for services for lobbyists, etc and who pays for this? I’ve done my best to answer this question in #4 above.
7. The PT Scope Modernization Work Group objectives have been listed on every agenda and public packet since it was established in March 2025. It was slightly modified in August 2025 when the board requested that the work group reconvene based on feedback from yourself and the state association.
8. I would like to know more about the CEU you stated would be addressed, implicating I could check them off. Continuing Education and Professional Practice requirements are in regulation – 12 AAC 54.400 – 54.435, not statute – AS 08.84, therefore a change in statute is not required for continuing education and/or professional practice requirements. Regulation projects are not required to go through legislative approval. However, regulation changes still have a lengthy approval process and do include public notification and public comment period. You can see an overview of the Regulations Process in Boards and Commissions Guides to page 52 -57 à https://www.commerce.alaska.gov/web/Portals/5/pub/CBPL_Board.Commission_Guide.pdf

This is published on the Physical Therapy and Occupational Therapy board Statutes and Regulations webpage - <https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/PhysicalTherapyOccupationalTherapy/StatutesRegulations>

Proposed regulations are advertised in Alaska newspapers and we invite public comment on them. If you would like to receive notice of all proposed regulation changes for your program, please send a request in writing with your name, preferred contact method (mail or email), and the program you want to be updated on to:

Regulations Specialist

Email: RegulationsAndPublicComment@Alaska.Gov
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
PO Box 110806
Juneau, Alaska 99811-0806

All Continuing Competency Committee meetings are publicly noticed. Board meetings are posted on the State's [Online Public Notice System](#). Meeting agendas and Public Packets are published on the PHY Board Business website before each meeting for download. All board meetings and committee meetings include a public comment period offering an opportunity for you to provide feedback to the board or committee members.

9. Will we receive a full draft of the entire practice act with strikethrough and changes in order to thoroughly review it in its entirety as it should be? [All PT Scope Modernization Work Group meetings are public. The draft language has been part of the public packets since the beginning. It is not standard practice to rewrite the entire thing, only the sections being modified when drafting or when the final bill is introduced to the legislature.](#)
10. Can you speak to your progress on all the objectives that are listed? As an instructor in the UAA PTA program I am interested in knowing what language was updated for the PTA. [Updates on the progress on each objective is included in the public packets for each meeting in the History section.](#) The physical therapy scope of practice draft language would apply to both physical therapists and physical therapist assistants. The draft language does not include any changes to the current definition of PTA. It stays the same as it exists now in AS 08.84.190(6). It's just renumbered in the draft.
 2. **“Physical therapist assistant” means a person who assists in the practice of physical therapy or an aspect of physical therapy as initiated, supervised, and terminated by a licensed physical therapist; the responsibilities of a physical therapist assistant do not include evaluation.**
11. I am not sure what information regarding the work group disseminated to the board members of APTA Alaska prior to our meeting on March 4th in fairness to the APTA Alaska board. [All information from the PT Scope Modernization Work Group has been publicly available on the PHY website since the work group was established. Representation of APTA Alaska on the work group was established with Rebecca Byerly as a work group member when the work group was created in March 2025. Communication was encouraged between your representative and your organization.](#)

Respectfully,



Sheri Ryan
Licensing Examiner 3
Board of Physical Therapy and Occupational Therapy
Board of Certified Direct-Entry Midwives
Athletic Trainers Program
Division of Corporations, Business and Professional Licensing

sheri.ryan@alaska.gov

Office: 907-269-6425 | Fax: 907-465-2974

www.commerce.alaska.gov



Are you subscribed to the PT/OT Board Listserv? Receive notifications of board meetings, important announcements/updates, and notices of proposed changes to regulations! Subscribe [NOW!](#)

Effective May 1, 2025 – Physical Therapy Licensure Compact NOW OPERATIONAL

Scam Alert: We've received reports that our licensees have recently been targeted by scams from people impersonating our investigative staff and programs. If you receive an unexpected or suspicious message, do not click any links or provide personal information. To verify the legitimacy of any communication, please contact us directly at **(907) 465-2550** or investigations@alaska.gov

From: [Ryan, Sheri J \(CED\)](#)
To: [Board of Physical and Occupational Therapy \(CED sponsored\)](#)
Subject: FW: Scope Modernization
Date: Thursday, March 26, 2026 12:19:47 PM

Board correspondence

From: Patricia Runde
Sent: Friday, March 6, 2026 4:54 PM
Subject: Scope Modernization

CAUTION: This email originated from outside the State of Alaska mail system. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Jonathan, Sheri, Members of the APTA Alaska Board and Members of the Modernization Work Group,

Thank you for meeting with the members of the APTA Alaska State Board. Your time and efforts in regards to the stakeholder work group that is currently reassessing the Practice Act is appreciated.

The meeting with the Board members of APTA Alaska was much needed. I write this today to continue to be transparent and open in communication.

You asked at the end of the meeting if the goal of answering the questions of the board members was satisfied and I do not believe it was for all. Not because all were not present. I perceived some of the meetings to be that of the workgroup agendas on items and rewording versus education and generalization of the workgroup goals directed to the APTA Alaska State Board. There are board members, including myself, that are not educated in the processes required in order to “open” the practice act- where is the transparency and due diligence in:

1. How to incorporate changes;
2. Why this is being encouraged presently;
3. What obstacles or challenges would be presumed or how unexpected challenges are handled
4. What are the costs for a lobbyist or attorney associated with the practice act change efforts.
5. Who pays for these costs?

Thus far, I would imagine time is the largest cost to the individuals of the work group, countless hours I am sure.

What is the cost associated with “opening” the practice act that is predictable, meaning payment for services for lobbyists etc. who pays for this?

What are the ramifications of opening the practice act, meaning, other organizations, associations or groups that can request changes to the practice act once opened- fully understanding that there can be a request by anyone, person or entity. For example, in 11 (b) the list with joint mobilization/manipulation, not presently stated in our current practice act specifically, could cause

friction with Chiropractors. And if lost, would be extremely detrimental to those therapists currently performing these techniques. There are current states, like Arkansas who lost their battle and are prohibited to perform spinal manipulation, North Carolina, Maine and Indiana are limited by requirement of referral from a medical provider, osteopath or chiropractor to perform these techniques.

I have attended just two of the PT Statutory Scope Modernization Group meetings. The individuals from the original group have fluctuated at best. The original group did have Mark Venhaus – a PTA known to me and a PT Cortland Reger. I am sure time constraints and other factors have led to those individuals absent from the meetings I attended, as well as 2 others absent from the group meetings. Others have attended seemingly consistently for a few meetings like Bruno Steiner, PT, DPT, RMSK. He is not currently licensed in the State of Alaska, but likely utilizing the Compact if he is providing services here. How did his involvement begin? As far as I can surmise he has an interest in imaging and heard about this workgroup from a member perhaps seeking information from those that have promoted some of the changes suggested.

If I have this correct the work group objectives are:

1. Develop a collaborative plan to address modernization of our scope of practice, between all stakeholders, (including the state licensing board, APTA-AK, national organizations and licensees) to create statutory change.
2. Identify needs for change/improvement in the current scope of practice language.- AS 08.84.190(7).
3. Develop draft language to address any needs that the workgroup identifies
4. Address the role of PTAs in scope of practice language
5. Develop an updated draft of scope of practice language with future action steps for recommendation to the PHY board.

I would like to know more about the CEU you stated would be addressed, implicating I could check them off. I had asked to attend meetings and was told I would be notified when I submitted my request and provided a very rough draft of what other states provide in regards to CEU's for Clinical instructors. That was Oct 9th 2024. I reviewed the meeting minutes from the Continue Competency Committee Meeting Information tab and did not find the information. I did see the recommendation to increase our CEU's to 32 hours. This was not presented as a change to the current Practice Act. When a change is made does it require a change to the practice act as in a regulation change (administrative process) or a scope of practice change (legislative process)? I am sure I am not alone in my lack of knowledge of which of these changes are required for different issues presented. In this example is increasing the CEU to 32 hours a regulation change or would it be presented in a legislative manner? Subsequently an edification is made to the current Practice Act. How does a therapist get notified of regulation changes or scope of practice changes? I would have liked to have a voice in the CEU for Clinical Instructors as I requested the addition.

It makes me hesitate in wondering; will we receive a full draft of the entire practice act with strikethrough and changes in order to thoroughly review it in its entirety as it should be. If not, would a letter of support need to specifically state we only support the changes presented?

My goal here is to ask for more clarity and additional transparency with the entire practice act. I, and possible other board members, would have a better understanding when they decide to support or oppose changes. Can you speak to your progress on all the objectives that are listed? As an instructor in the UAA PTA program I am interested in knowing what language was updated for the PTA. Perhaps just a re-wording.

I understand the value of time. I acknowledge the frustration of members of the work group in moving forward, however, this is not something to push through, it requires open communication and patience with the process. I am not sure what information regarding the work group disseminated to the board members of APTA Alaska prior to our meeting on March 4th in fairness to

the APTA Alaska board. From the start of the work group I personally opposed changes and followed some of the work of the group. I was unable to attend or join the group due to my professional schedule. There seems to be more work to be done. I am aware that APTA Alaska can provide a letter of support with majority approval. If that is to happen it needs to be fully understood by all. As a licensee I also know I have a duty to voice my opinion as a licensee.

You have asked to come up with suggestions for language if not satisfied with the language. This creates intent that it is moving forward regardless and a letter of support would be helpful to this effort. Perhaps that is not the intent, just what I perceive. I participated in each of the meetings fully. I suggested the changes in the language the work group presented. Also, I have answered – do not change the current practice act – no list. So “asked and answered”.

I look forward to responses on the questions I presented and updates on the objectives.

I have learned much in participating in these meetings on many levels in my work as a physical therapist. I began in 1990- I was just going to provide interventions and be done with my day- no worries. I would have never thought I would be this involved in legislative actions, I mean, I have just gotten comfortable with billing and coding. Never worried about that in my first 10 years of practice.

I truly appreciate the time and conversations.

Patty

PS- I do not have all the emails- please forward to workgroup members and Leslie from FSBPT as indicated.