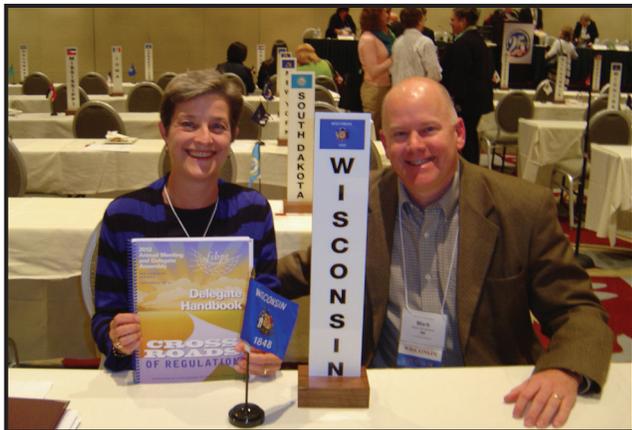


PTEB News & Updates

Physical Therapy Examining Board News

As many of you will recall, Wisconsin Act 149 was signed into law in March 2010, which replaced the Physical Therapist Affiliated Credentialing Board (PTACB) with the independent Physical Therapy Examining Board (PTEB.) In October 2010, the PTEB initiated the process of replacing references to the outdated language, making additional clarifications and minor corrections in the PT Administrative Rules 1-9. Following a public hearing and after incorporating valuable input from WPTA leadership, these changes were published and are effective as of September 2012.



Lori Dominiczak, PT and Mark Shropshire, PT represented the Wisconsin jurisdiction at the annual FSBPT meeting in September.

In addition, the Department of Regulation and Licensing (DRL) is now known as the Department of Safety and Professional Services (DSPS.) Recent website changes have been made and can be viewed at <http://dsps.wi.gov>.

Delegate **Lori Dominiczak**, PT and Alternate Delegate **Mark Shropshire**, PT represented the Wisconsin jurisdiction at the annual Federation of State Boards of Physical Therapy (FSBPT) meeting in September 2012 where FSBPT Board administrator **Tom Ryan**, from Wisconsin received the 2012 Outstanding Service Award. We were fortunate to have FSBPT Regional Liaison **Jeff Rosa** and Director of Professional Standards **Leslie Adrian** attend the September 2012 PTEB meeting.

Submitted by **Mark Shropshire**, PT Member, PTEB



President's Message

Kip Schick, PT, DPT, MBA

Looking Ahead to 2013

Happy New Year! I hope that everyone had a safe and enjoyable holiday season.



2013 promises to be a year full of activity; following are some examples.

Implementation of the **Patient Protection and Affordable Care Act (PPACA)**, is ongoing and includes several critical components.

Wisconsin recently announced that the state will participate in a federally run health insurance exchange, which will begin enrolling individuals in October 2013 with insurance coverage beginning in January 2014. The law mandates that physical therapy (habilitation and rehabilitation) must be included as a benefit in any qualified health plan that participates in an exchange. However, the law does not specify the terms or parameters surrounding the coverage terms of the physical therapy benefit, so expect some variability between states.

Wisconsin also will make a determination in the near future regarding Medicaid expansion since PPACA allows states to open their Medicaid programs to Americans who earn up to 133% of the federal poverty level, which is currently set at \$11,170 for a single person. The law also makes those with incomes 100% to 133% of the poverty level eligible to buy federally subsidized private insurance through exchanges. The US Supreme Court ruling in the summer of 2012, allows states to opt out of expanding Medicaid without losing federal funding for the program.

President's Message continued – page 3

Be Sure to Check Out Election Results! – page 5

2012 WPTA Fall Conference in Photos – page 15

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Statement of Purpose

PT Connections is a quarterly newsletter published by the Wisconsin Physical Therapy Association. It provides information on local, state and national issues affecting PTs and PTAs in the State of Wisconsin. It's three functions include disseminating information, soliciting involvement and educating members on current issues.

All articles should be submitted for review to: WPTA, 3510 East Washington Avenue, Madison, WI 53704 or to wpta@wpta.org.

The WPTA welcomes your feedback. All letters to the editor must be signed, and include a phone number and address. Names will be withheld upon request. Letters to the editor and responses do not necessarily reflect the opinions or official policies of the WPTA or its Board of Directors. All materials submitted are subject to editorial review for inclusion and editing.

Advertisements

Ads are accepted for employment opportunities, product promotion and course listings. Ad inclusion does not imply endorsement by the WPTA or its Board of Directors.

Camera Ready Ad Rates:

Full Page - \$250	1/4 Page - \$100
1/2 Page - \$175	Cont. Ed Listings - \$35

There is an extra charge for typesetting. Please call WPTA office at 608/221-9191 for details.

Next Issue - April 2013

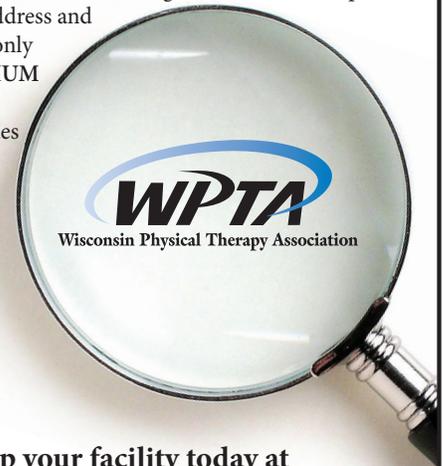
Editorial submission deadline is February 15. Ad submission deadline is March 1.

Non-member subscriptions are available for \$100/year.

Looking to increase your client base?

Sign up for "Find a PT Clinic" through the WPTA website

Members can choose a FREE basic listing that includes a map marker, clinic name, address and phone number, or for only \$75 annually, a PREMIUM listing is available. The premium listing includes a map marker, staff listing and specialties, logo, website, up to two photos, a list of insurances accepted and more!



Sign up your facility today at

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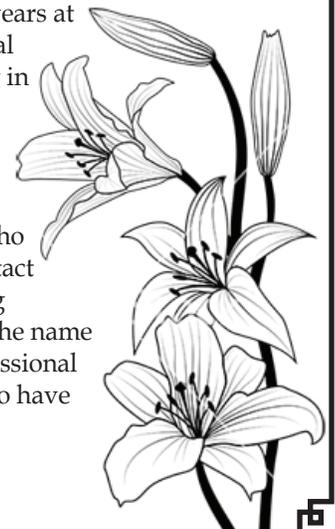
Wisconsin Physical Therapy Association

3510 E. Washington Ave. | Madison, WI 53704
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In Memoriam

Edward G. Weber, PT, one of the first physical therapists in the Manitowoc/Two Rivers area, died on September 16, 2012. He received his physical therapy education from the University of St. Louis in 1952. During his professional career, he held positions in St. Louis, Springfield, Clintonville, Sheboygan and 30 plus years at Holy Family Memorial Medical Center, in Manitowoc, retiring in 1992.

PT Connections would like to remember WPTA members who have passed away. Please contact the Chapter Office by emailing karen.curran@wpta.org with the name and a brief review of the professional life of members you know who have passed away.



President's Message (cont.)

Congress may consider Medicare Payment Advisory Commission (MedPAC) recommendations from earlier this year, which include the following:

- Apply a multiple procedure payment reduction (MPPR) of 50% to the practice expense component of therapy services provided to the same patient on the same day
- Decrease the certification period for the outpatient therapy plan of care from 90 to 45 days
- Reduce the therapy cap for physical therapy/speech-language pathology combined to \$1,270 in 2013 and occupational therapy to \$1,270 in 2013
- Permanently include hospital outpatient therapy departments under the therapy cap
- Implement manual medical review for requests to exceed the cap

APTA is expected to continue to work with the American Medical Association to consider a new coding structure to replace the "97000" series codes with the implementation of an Alternative Payment System, which is likely to be called the "Physical Therapy Classification and Payment System." The APTA does not expect this new system to be implemented prior to 2015.

The APTA House of Delegates will consider several important issues in June 2013. Proposed motions have not been released so a full list is not known, although we expect to debate motions in the following areas:

- A new vision statement for our association, which will replace APTA Vision 2020
- Governance review with possible changes to the House of Delegates and other stakeholder groups, including APTA Sections as well as the APTA Board of Directors

- Continued refinement of the APTA's position on the use of support personnel

In Wisconsin, the WPTA continues to remain actively engaged in a number of areas by:

- Reviewing and advocating for issues in the next biennial budget for the State of Wisconsin for 2013 and 2014, which will impact state funding across all state run programs
- Continuing to work with the Wisconsin Department of Health Services to implement Medicaid reform to make improvements to the current prior authorization process
- Monitoring, protecting, and considering state legislative activity to address issues that impact our scope of practice, as well as issues related to payment
- Implementing changes to our governance structure to streamline the way our association operates at the district, SIG, and state levels

Obviously we have a lot in front of us for the upcoming year, but I am excited about our ability to play an active role in shaping our future!

The time is now for every physical therapist, physical therapist assistant, student physical therapist, and student physical therapist assistant in Wisconsin to be a WPTA member and an active voice for our profession.

I look forward to working with you over the coming year!

Regards,

Kip

Reimbursement

Reimbursement Updates for January 2013

Our WPTA Reimbursement Specialist and Executive Director have updated your webpage resources! Visit the www.wpta.org Reimbursement tab for a review of what is available.

A new payment folder has been added to the site that is geared toward students and new professionals. It was developed by an outstanding Marquette University DPT-4 student team including: **Amy Cauzillo, Drew Goede, Kristin Heyrman, Rob Hofschulte, Jaime McCarthy, Mark Russ, and Brandon Weigel**. This team surveyed programs and students to determine what resources would be most helpful for school projects, clinicals and first jobs.

The WPTA webpage is an adjunct to APTA's and focuses primarily on local issues and questions often queried by WPTA members. If you have resources that you would like to suggest adding to the WPTA page, please forward

them to **Lynn Steffes**, PT WPTA Reimbursement Specialist at steffbiz@gmail.com.

MANY...MANY MEDICARE UPDATES

Medicare Fee Schedule

- Payment cuts will be 26.5% (\$25.0008 conversion factor) beginning January 1, 2013 unless Congress acts to stop this cut. This is the annual "Doc Fix" that we wait for each January.
- Physical therapy will actually experience a 4% increase in aggregate payment (due to practice expense changes) if the 26.5% cut is averted.

Therapy Cap

- Therapy cap amount is increased to \$1,900 for 2013.

Reimbursement continued on page 4

Reimbursement (cont.)

- The Exceptions process (adding the KX Modifier on claims after \$1,900) and the manual review process (submitting medical records for review and approval for services over \$3,700) are pending congressional extensions at this time.
- It is presumed that if the Therapy Cap is extended, it will continue to include hospitals with exception of critical access hospitals.

Medicare Auditing

The Small Business Jobs Act of 2010 required predictive modeling to identify and prevent improper payments. Centers for Medicare & Medicaid Services (CMS) contracted to deploy algorithms and an analytical process that looks at CMS claims in real time by beneficiary, provider, service origin or other patterns. It will also identify problems and assign an "alert" and risk scores for claims that are aberrant.

Risk areas are as follows (perform a self-audit to be sure you avoid these!):

- Signatures not legible (physician or PT on plan of care) or use of a stamped signature
- Plan of care not signed by the physician; plan of care not recertified
- Documentation is insufficient
- Services not medically necessary
- Billing for services furnished by Aides/Techs
- Providing inadequate supervision, as noted by lack of documentation
- Billing for one-on-one codes instead of group therapy
- Failing to comply with the 8-minute rule
- Billing for 'not medically necessary' services without an Advanced Beneficiary Notice (ABN)
- Billing for excessive duration and frequency of services
- Billing for services not furnished
- Billing for maintenance care

A recent court case challenged the concept of limiting Medicare recipients' therapy that appears to be maintenance care. On October 16, 2012, a decision was rendered in Glenda Jimmo, et al vs. Kathleen Sebelius Contractors: limitation of services. If "Improvement Standard" is not met and physical therapy is discontinued, it may prevent Medicare recipients from performing routine daily activities or even cause their condition to deteriorate, leading to higher costs in the long term. The court upheld the right of these patients to continue to receive reasonable and necessary care. However, auditing will continue to look aggressively at the need for skilled services in the case of maintenance care.

For resources on self-auditing see: <http://www.apta.org/Compliance/Audits/>

Medicare Physician Quality Reporting System (PQRS) in 2013

If you are a PT in private practice or in a physician-owned clinic, you must be reporting PQRS. Data

gathered from 2013 visits will not only give you the opportunity for a .5% bonus, in 2015 providers not submitting PQRI data will be penalized 1.5%.

For details on participation see APTA Payment page: <http://www.apta.org/PQRS> and CMS PQRS page: <https://www.cms.gov/PQRS/>

New Functional Reporting starts January 1, 2013 with penalties of non-payment after July 1, 2013. The Middle Class Tax Relief and Job Creation Act of 2012 mandated CMS collect the following information regarding the beneficiaries on the claim form:

- Function and condition
- Therapy services furnished
- Outcomes achieved on patient function

CMS intends to utilize this information in the future to reform payment for outpatient therapy services. *All practice settings* that provide *outpatient therapy* (PT, OT, and SLP) services furnished in the following settings need to report this information:

- Hospitals *including* critical access hospitals
- Skilled nursing facilities
- Comprehensive Outpatient Rehabilitation Facility (CORF)s/rehabilitation agencies
- Home health agencies
- Private offices of therapists, physicians and non-physician practitioners

Beginning January 1, 2013 therapy service providers will submit non-payable G-codes with severity modifiers on their claims for the beneficiary's current status and projected goal. G-codes must be used:

- At the outset of the therapy episode
- At a minimum *every 10th visit*
- At a formal re-evaluation
- At discharge/end reporting (unless the patient self discharges prior to formal discharge visit)

Functional limitation categories include:

- Mobility: walking and moving around
- Managing and maintaining body position
- Carrying, moving and handling objects

See APTA Payment page: <http://www.apta.org/Payment/Medicare/CodingBilling/FunctionalLimitation/>

Home Health Final Rule

- Home health providers will receive a 1.3% increase in payment for 2013
- Will continue reporting through OASIS
- Non-physician providers (NPP) in post-acute facilities can perform the face to face encounter under the MD and report information for the MD to certify homebound status
- A qualified therapist must complete a functional reassessment of the patient at the 14th and 20th visit, as well as every 30 days

Reimbursement continued on page 7

Committee News

Federal Government Affairs

“America’s health care system is neither healthy, caring, nor a system.” – Walter Cronkite, 1978

Based on the quote above from this legendary CBS news anchorman, we have clearly been working on this problem for a while now. Whether your candidates won or lost during this last election, one thing that we all have in common is that we need to be prepared for implementation of significant changes in the near future regarding how health-care operates in this country, which will most certainly include changes in the provision of physical therapy.

At the time of writing this article, here are just a few of the important issues that APTA (which needs to include the collective contributions and efforts of members, like you, at the grassroots level) is working hard to address as 2012 draws to a close.

Some good news - There are now 49 states with practice acts allowing physical therapists to evaluate patients without physician referral and 47 states allow treatment without physician referral.

More good news - With healthcare reform in need of effective, low-cost healthcare provider options, physical therapists have an opportunity to take a lead role in the health, wellness, and function of our country’s population as new models of healthcare provision and reimbursement emerge.

To this end, I encourage you to keep your eyes and ears open, your minds engaged, and your legislators informed as healthcare reform takes place. I highly encourage you to make plans to attend the APTA Federal Affairs Forum in Washington, DC, April 14-16. To help our Wisconsin Congress members be strong proponents for physical therapy, Congress members need to have PT or PTA Key Contacts, to educate them and advocate for our profession.

If you would like to be a Key Contact for your Congress member, e-mail me at rob@advancedptsm.com.

Submitted by **Rob Worth PT, DPT, MS, OCS, MTC, LAT**

Membership

My name is **Deb Urben PT**, your new state Membership Chair. First of all, I would like to say thank you all for being members and supporting the greatest profession in the world, physical therapy! I would encourage you to share this newsletter with your non-member co-workers so they can see some of the benefits of being a member. I also would like to challenge each of you to become more involved within your district in 2013. Set a goal of attending one meeting, one continuing education opportunity, or volunteering at an event within the next year. You will be surprised how attending one event helps you feel more connected to others, to our profession, and to the WPTA.

Soon you will be receiving an email with a membership survey attached. Please take 5-10 minutes to fill out the survey. It will give us very important information on how to better serve our members. If we don’t hear from you, we don’t know what you want.

Please feel free to contact me with any questions, concerns, or recommendations. Feedback is always greatly appreciated! You can contact me at deborahkind@hotmail.com or (920) 639-1931. I look forward to serving as your new Membership Chair.

Submitted by **Deb Urben, PT**

Election Results

The results for the WPTA 2012 Election are in. Newly elected members include:

President – **Kip Schick**

Vice President – **Connie Kittleson**

Director – **Rich Larsen**

Ethics Committee – **Tina Stoeckmann**

PTA Caucus Rep – **Marie Haskins**

Delegates – **Rob Worth, Jane Bernatovich, Julie Siefert, Dennis Kaster, Diane Slaughter, and Amy Helminski**

Alternate Delegate #1 – **Lara Bleck**

Alternate Delegate #2 – **Rose Hebar**

Alternate Delegate #3 – **Heidi Weidner**

Nominating Committee – **Lynn Steffes, Amy Helminski, Heidi Weidner, and Rose Hebar**

Congratulations!

Committee News (cont.)

WPT Fund

The WPT Fund held a successful silent auction at the 2012 fall conference to benefit our scholarship and grant funds. We would like to thank the many people who participated in the auction by bidding on items, as well as the very generous donors listed below. Due to your support of the WPT Fund, we were able to raise over \$3000.

Thank you to these generous donors:

Andrew Starsky
ATI
Barral Institute
Connie Kittleson
Florentine Opera Company
Green Bay Packers
Harley Davidson Museum
Kalahari
Lisa Steinkamp
Madison Club
Madison Concourse Hotel
Madison Museum of Contemporary Art
Milwaukee Admirals
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Milwaukee Brewers
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Milwaukee Repertory Theater
Milwaukee Wave
Potawatomi Bingo Casino
PT Plus
Reenie Kavalari
Robert Worth
Slack, Inc.
United Seating and Mobility
Upledger Institute
UW Athletics
William & Jill Boissonnault
Wisconsin Union Theater
WPTA Private Practice SIG

If you would like more information about how to support the WPT Fund and/or how to apply for scholarships or grants, please go to www.wpta.org/wptfund.cfm.

The upcoming deadline for student scholarship applications is March 4, 2013. Student members expected to graduate from an accredited PT or PTA program in Wisconsin between December 2013 and December 2014 are eligible to apply.

Submitted by **Connie Kittleson**, DPT, Chair

WPT Conduit

Fall conference has once again come and gone...and another wonderful Conduit contribution total! I would like

to extend a personal thank you to all who contributed. It is your personal contributions that continue to make the WPT Conduit grow and allow our profession to stay in the forefront of the political field in Wisconsin.

I once again am going to make a challenge to ALL WPTA members.....I challenge you to contribute to the WPT Conduit the small amount of \$10/month for an entire year. If all PT and PTA members were to contribute that small monthly amount, our conduit total would increase by \$208,200. In these challenging economic times I realize every dollar counts in your own budget, but keeping our profession's stance in the forefront of the political scene is a necessity. The WPT Conduit is what helps us stay there.

Thank you all who contributed to the WPT Conduit at fall conference, and who make monthly, quarterly and annual contributions. I applaud all of your dedication in continuing to keep our profession a leader in the healthcare field.

Submitted by **Erik Jacobs**, PTA, BS, Chair

Medical Assistance

Lori Dominiczak, PT, MS, **Kip Schick**, PT, DPT, MBA, **Lynn Steffes**, PT, DPT and **Jeremy Shepherd**, WPTA Lobbyist, met with **Brett Davis**, Wisconsin Medicaid Director and **Dave Stepien**, Section Chief for the Bureau of Benefits Management, on November 19, 2012 to discuss the WPTA's proposed Prior Authorization (PA) reform proposal. Mr. Stepien indicated that the Office of the Inspector General (OIG) is willing to finish the already-started work on expanding the list of diagnoses eligible to use the Spell of Illness PA form.

Mr. Stepien also indicated that the OIG was open to reviewing the current PA review criteria and modifying it as necessary to create more transparency and efficiency with the Prior Authorization Therapy Attachment (PA/TA) process. This will most likely require a complete review of the current PA/TA form and possible modifications. The Department of Health Services has pledged support for providing the necessary resources to advance these initiatives.

A copy of a letter sent to **Kip Schick** can be found on the Reimbursement tab of the WPTA website.

We continue to be available to WPTA members for questions related to participation in the Wisconsin Medicaid programs and can be contacted via the WPTA website Reimbursement tab at <http://www.wpta.org/>

Submitted by **Lori Dominiczak**, PT, MS, Chair

Financial Performance and Investments

Several good questions were raised at the WPTA's fall conference business meeting at the Kalahari Resort in Wisconsin Dells. In reflecting about the questions raised, I felt publishing an article in *PT Connections* addressing the financial performance and investments of the Chapter was in order.

The Chapter has liquid (cash or easily converted to cash investments such as mutual fund) assets in two areas:

- Cash held in a business checking account at US Bank. This money is federally protected and insured up to \$100,000. The Chapter typically carries a balance of \$120,000 that varies month to month based on transactions.
- Investments (60% Mutual Funds, 40% Bond Funds) in Charles Schwab Institutional Account managed by independent investment advisor Johnson Bank Wealth Management of Madison. The Chapter's current balance as of November 30, 2012 was \$213,385.

The APTA advises chapters to try and maintain financial reserves which represent at least 56% of annual operating costs. The WPTA's current reserve balance following the APTA's method of calculation is currently 81%.

The Charles Schwab account contains the following investments:

Mutual Funds

Mid/Large CAP

BBH Core Select	7.3%
Buffalo Growth	8.4%
Calamos Growth& Income CI I	6.0%

Columbia Dividend Opportunity Z	9.1%
FMI Large Cap	7.5%

Specialized Hybrid

Absolute Strategies	4.9%
---------------------	------

Foreign

Allianz NFJ Intl Value	5.3%
Artisan International Value	4.5%

Bond Funds

Intermediate Maturity

American Century Diversified	9.6%
Metropolitan West Total Return Inst	15.0%
PIMCO Total Return CI D	16.2%

The overall performance of the portfolio year to date has been 8.8% through October 31, 2012. By Comparison, the S&P 500 (SPX) considered a "gold standard" of large cap investing has had a year to date return of 9.9%. The WPTA has followed our independent investment advisor's advice of placing investments in conservative mutual funds of large dividend paying companies and bond funds. This strategy reduces large profit potential but also reduces overall risk, an appropriate investment strategy for the WPTA. I welcome your comments and questions: stevejohnson@achievetherapy.com.

Submitted by **Steven Johnson, DPT**, WPTA Treasurer

Reimbursement (cont.)

- If a qualified therapist missed a reassessment visit, therapy coverage would resume with the visit during which the qualified therapist completed the late reassessment, not the visit after the therapist completed the late reassessment
- In cases where the patient is receiving more than one type of therapy, qualified therapists must complete their reassessment visits during the 11th, 12th, or 13th visit for the required 13th visit reassessment and the 17th, 18th, or 19th visit for the required 19th visit reassessment.
- See APTA Payment page: <http://www.apta.org/Payment/Medicare/CodingBilling/HH/>

Health Care Reform: The Patient Protection and Affordable Care Act (PPACA)

The PPACA establishes health insurance exchanges that need to be implemented in all states by 2014. These exchanges are essentially a centralized marketplace where individuals and small businesses can purchase healthcare coverage. The intent is a one-stop shop web portal that

allows coverage for all individuals. All plans will contain 10 essential benefits, of which both rehabilitation and habilitation are included.

Coverage will be paid for by:

- Tax credits for premiums
- Subsidies for out-of-pocket costs
- Medicaid expansion
- Qualified health plan (QHP) coverage
- Essential health benefits

Wisconsin has stated we will rely on the federal government to establish our exchange. More information will be coming over the next year!

See: www.apta.org/ehb and www.apta.org/exchanges

Submitted by **Lynn Steffes, PT, DPT**, Reimbursement Specialist

District News

Southwest

Thank you to Mercy Health System, especially **Jess Johnson**, PT, MPT, OCS for hosting our fall business meeting on October 29 in Janesville. Following the business meeting, speaker, **Darin S. Rutherford**, MD, sports medicine physician for Mercy Health, presented an update on concussion management of athletes. One CEU was awarded for FREE to all SW District members in attendance.

The District Membership Committee is looking for a new chair. **Jess Johnson** is stepping down, and would like to spend some time training anyone interested in the position. Duties include speaking to students at schools, and recruiting and retaining membership. Please contact officers below if interested!

The District's Public Relations Committee is in the process of planning a "media blitz" on various PT related topics. Grassroots public relations involvement in areas of expertise include newspaper and TV spots. Please contact **Jim Cumming**, PT (email below) if interested in participating and sharing your expertise and passion for what you do.

Upcoming dates and events

- February 23, 2013: Southwest District / Phi Theta continuing education workshops at UW-Madison DPT Program; full and half day courses to be announced.
- April 29, 2013 (tentative date, location TBD): business meeting and continuing education "Service Learning Trips to Belize and Uganda", by **David Lippi**, SPT and **Karen Patterson**, PT, MS, PCS
- June 20, 2013 (tentative date, location TBD): Membership Social

SW District officers

Jim Cumming, PT (chair) jcumming@uwalumni.com
Chantel Hasman, PT (vice chair) clhasman@gmail.com
Jennifer Jeschke, DPT (secretary) optimalpt@gmail.com
Sue Meng PT (treasurer) smeng100@hotmail.com

Submitted by **Jennifer Jeschke**, DPT, Secretary

West Central

The WC District has helped forge a strong educational background for the therapists of this District. This year we have been able to once again fill an amazing fall and spring with many great continuing education pieces. We have already started the year with a joint collaboration with Gundersen Lutheran Sports Medicine, UW-Madison, and the District to present a four hour course on Health Literacy: The Ethics of Making Ourselves Understood. This course was presented by speaker **Dr. Jill Boissonnault**, PT, PhD.

We have also been blessed with the views of **Mike Lohse**, PT from Innovations in Sparta with "Trigger Point Dry Needling for the Management of Neuromuscular Dysfunctions and Pain". In November we offered two courses, the

first "Peds/Neuro Lab Course" brought to us by **Dawn Waddell**, PT of Tomah School District Team. The second of our November courses was "Introduction to Visceral Mobilizations" brought to us by **Jodi Symmons**, PT of Gundersen Lutheran's Outpatient in Onalaska.

With a break over the holidays, we jump into the New Year on January 16 at UW-La Crosse Health Science Center with "Overview of MNRI Masgutova Neurosensory Motor Reflex Integration" with speaker **Laura Paquette**, OT from the Coulee Children's Center. In February, we have a fantastic course on "Recovery from Traumatic Brain Injuries" with the speaker to be announced at a later time.

Once again we will be having Gundersen Lutheran Sports Medicine's residents speaking in March with their course topic to be determined. If there are any recommendations for future continuing education courses, please contact the District Education Committee by emailing lshepardson@winonahealth.org.

Submitted by **Jack Knudson-Stuhr**, PTA

North Central

The NC District held its fall meeting on October 16 using videoconferencing. Meeting minutes are available on the WPTA website. The meeting included a discussion about the research article *Clinical Decision Making for Exercise Prescription in Fall Prevention*. Hass R, Maloney S, Pausenberger E. *Phys Ther*.2012;92:666-679.

The District hosted an ethics course on October 23 in Stevens Point, "Duty to Promote Global Health", presented by **Gwynn Straker**, PT, MS, DCE. The CE Committee has already begun planning for the next course. We are hoping to have the course hosted in the Northwoods. Look for details in the future.

The next District meeting will be via videoconferencing on Feb 19, 2013. The meeting will start at 5:30. If you have questions, please contact District Chair **Stephanie Olson**, PT at Stephanie.Olson@ministryhealth.org (715-346-5192) or District Secretary **Dave Smith**, PT at smith.david@marshfieldclinic.org (715-389-7501).

Submitted by **Dave Smith**, PT, Secretary

Reminder

Please make sure the APTA/WPTA has your correct e-mail address.

We email important updates to keep you informed. Contact the WPTA Chapter Office at wpta@wpta.org, call 608/221-9191 or go to APTA's website: www.apta.org to update your membership information.

Thank You!

Exercise Classes for Parkinson Disease

How to Implement Evidence Based Research into a Community Program for People with Parkinson Disease

Many people with Parkinson Disease (PD) enjoy group exercise programming, but believe they do not fit into the general exercise classes offered. Many years ago, a small group of physical therapists developed exercise classes that directly targeted the needs of people with PD. These classes consist of treadmill walking forward and backwards, along with a floor routine of exercises promoting back, hip, and shoulder extensor strength as well as activities focusing on stretching the hip flexors and trunk. Clients also use strengthening equipment, if available at the site.

In an effort to analyze the program's effectiveness, a research study was completed "*Community-Based Exercise and Wellness Program for People with Parkinson Disease: Experiences from a 10-Month Trial*," by **Teresa Steffen, Cheryl Petersen and Leah Dvorak** (Journal of Geriatric Physical Therapy in 2012). The study demonstrates walking endurance, a primary outcome, had the largest improvement over time, 11%. A second outcome was that mentation, behavior and mood on the Unified Parkinson Disease Rating Scale improved by 38%.

Currently, there are 15 Wisconsin sites that offer these exercise classes. They are operated by PTs in Fish Creek, Grafton, Greenfield, Hartford, Green Bay, Madison, Manitowoc, Oconomowoc, Racine, Shawano, Sheboygan,

Sturgeon Bay, Waukesha, West Bend, and Whitefish Bay. It is the belief of the developer of these programs, **Teresa Steffen, PT, PhD**, that no one should "own" these programs, but rather, these programs should be able to develop and grow wherever there is a need and a therapist with the energy and qualifications to run them.

In an effort to help grow and support these important programs, Dr. Steffen has developed a website: www.exercisepd.com. The website has an important section on the assessment of the client with PD. It also has a section on exercises that have shown the largest response in the Parkinson literature, including treadmill training, resistive exercises and a few fun exercises like dance and tai chi. This website not only includes important information for clinicians, but can also be a useful source of information for those with PD.

The most important aspect of these programs is that they cultivate a high activity level for the clients that includes fostering movement. In physical therapy, many therapists work within the framework of motor control theory. Because walking becomes the problem for those with PD--walking is how we treat. Please help us encourage increased movement in this population.

Submitted by **Teresa Steffen, PT, PhD**

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Our new and improved dry needling course program is coming to Wisconsin



The preferred dry needling program of the Women's Tennis Association, the Association of Tennis Professionals, Physiotherapy Associates (Atlanta), the American Association of Orofacial Pain, the Physical Therapy Board of Craniofacial & Cervical Therapeutics, the Bahrain Physical Therapy Association, the Royal Dutch Physical Therapy Association, the British Medical Acupuncture Society, the University of Castilla i la Mancha, the Royal College of Psychiatrists of Thailand, among many others. What are you waiting for?

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CLINICAL EDUCATION WORKSHOPS

APTA Clinical Instructor Education & Credentialing Program

The program (two days) addresses issues of planning and preparing for physical therapy students during their clinical experiences, developing learning experiences, and supporting ongoing learning through questioning and effective feedback. Skills of student evaluation are discussed, as well as the identification and management of students with exceptional situations. It includes information regarding student supervisory guidelines as well as legal, regulatory and ADA issues. An "Assessment Center" provides each participant with the opportunity to apply information from the program in simulated situations. **15 contact hours**

APTA Advanced Clinical Instructor Education & Credentialing Program

The focus of this new course is *best clinical practice* and *best clinical teaching*. This course is open only to physical therapists who have taken the original CI Education and Credentialing Program workshop. It includes two days of programming along with some online preparatory work to be applied in class. **16.75 contact hours**

Annual Wisconsin Clinical Education Consortium (WCEC) State Conference

This one day conference is held each year for anyone interested in clinical education. **7 contact hours**

Date/Location	Workshop/Conference	Contact
April 26 & 27, 2013 UW-LaCrosse	APTA CI Credentialing	Brenda Landrum 608/785-8467 blandrum@uwlax.com

Schedule provided by the Wisconsin Clinical Education Consortium tgrabinski@uwlax.edu

WPTA Matching Program

Support Two Programs for the Price of One!

The WPTA has exciting news for you. This year you can support both the PT Foundation as well as the WPT Fund with one donation. For every donation made to the WPT Fund's Legacy Endowment Fund in 2013, the WPTA will send a matching donation to the PT Foundation (up to \$10,000 in total).

If you have been considering joining or renewing your membership in the Legacy Society, now is the time.

Imagine how great you will feel when your donation to the Legacy Endowment Fund supports not only student scholarship and grant opportunities, but an equivalent donation is made to the PT Foundation supporting research. You get twice the donating power as well as twice that feel-good sensation! Tear this form off, or download it at www.wpta.org/wptfund.cfm

Submitted by **Connie Kittleson**, DPT, Chair-WPT Fund



I wish to support the future of the Physical Therapy profession in Wisconsin by joining the **Legacy Society**

Name: _____

Address: _____

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email: _____

- I pledge to donate \$1000 over the next 5 years. Enclosed is my initial donation of \$200
- I would like to be recognized as an Elite Member of the **Legacy Society**.

Enclosed is my full donation of \$1000

In Honor of (optional) _____

Method of payment: Check enclosed (make payable to WPT Fund)

Charge my credit card: Visa Mastercard

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For inclusion in estate planning,
contact WPT Fund at
(608)221-9191

Please mail to: Wisconsin Physical Therapy Fund
3510 E. Washington Ave.
Madison, WI 53704

(608)221-9191 www.wpta.org/wptfund.cfm

Topics in PT/PTA Education

This Issue's Topic – Comment on how your curriculum promotes community service.

Upcoming Topic – April 2013 – Comment on curricular activities that address issues of cost, quality and access to health care.

If you have a school topic you are interested in hearing about, please feel free to email me at je.sherry@hosp.wisc.edu.

Julie Sherry, PT, MS, Associate Editor

Carroll University

Community service is highly valued at Carroll University and is promoted in the physical therapy curriculum through the integration of the Teaching Laboratory Practice (TLP) series. The TLP is a three-course sequence designed to allow students to care for actual community members in need across the lifespan, garnering a sense of civic and social responsibility. This will be exemplified in two examples occurring this semester.

The Therapeutic Abilities Clinic (TAC) provides clients with chronic conditions, such as stroke and congenital or acquired diseases, an opportunity to pursue health and wellness services after exhausting insurance benefits. Services are provided pro bono as students work in pairs or individually to fully manage their patients for approximately seven weeks under direct supervision. Students develop professional behaviors that apply both examination and treatment strategies.

A second TLP event that illustrates our commitment to serving others is in partnership with the Curative Care Network organization. Curative is a local, non-profit group with a mission "to improve the function and quality of life for persons with disabilities or limiting conditions through high quality care and services." By accompanying clients during a community bowling outing and an individual exercise program at the YMCA, students are able to live out our professional core values through compassionate empathetic interaction and socialization.

By incorporating these service-learning experiences, our program aims to produce clinicians who are respectful of patient/client values and who contribute to his/her community.

Submitted by **Garrett Naze, DPT, OCS, FAAOMPT**

UW-Madison

The University of Wisconsin-Madison DPT program embraces the "Wisconsin Idea", the principle that the University should improve peoples' lives beyond the classroom. Our students participate in the local community by participating in the MEDiC Program, through their student organization Phi Theta, and via a formal service-learning course PT 600. MEDiC is a student-run program of the University of Wisconsin School of Medicine and

Public Health and is comprised of seven free health clinics that provide health care to uninsured and underinsured people in Dane county. Our students volunteer every semester they are on campus.

Phi Theta sponsors many community activities including fundraising for needy families, raking leaves for community elders, adopting a highway segment and keeping it free of trash (Hwy 12 near Old Sauk Rd...honk at our sign!), and funding PT 600 community projects abroad and locally.



UW-Madison DPT student, Ashton Sczygelski distributes a bicycle as part of the "Wheels for Winners" campaign.

PT 600 students work in groups of 3-4 in the 2nd year of the curriculum on projects that meet a health care/promotion need of a community partner. Examples include: senior-center health fair screening for falls, balance, and posture; development of client-centered educational materials on exercise/wellness for childhood cancer survivors; assisting the mission of "Wheels for Winners" organization; development of warm-up routines for Special Olympic athletes; an elementary school project encouraging student activity/fitness and healthy eating to combat childhood obesity; and surveying members of a local Spinal Cord Injury club to assist in the Club's development.

Our students cite these experiences as some of the richest and most rewarding of their time here!

Submitted by **Jill S. Boissonnault, PT, PhD, WCS**

UW Alumni

**Join fellow UW-Madison PT Alumni at
Combined Section Meeting in San Diego**

**Wed. Jan. 23 7-8:30 pm
Marriott Marquis and Marina**

Topics in PT/PTA Education (cont.)

Marquette University

Marquette University's DPT program has been around for 55 years, and has always been based on three major pillars: academic excellence, clinical excellence, and service to others. Our students have been living these pillars their entire academic career and continue to do so after graduation.

Though MUPT's student council, each DPT class has an outreach project. These include a blood drive, Special Olympics bowling, a clothing drive, gift wrapping for the Salvation Army, and a school supply drive for Unity in Motion.

Dennis Sobush PT, MA, DPT, CCS teaches the course "Culture and Disability". As part of this course, a number of students are engaged in service learning. Some examples of their community service include volunteering as an aide at the Milwaukee Center for Independence, working at St. Anne's rest home, and providing childcare at Penfield Children's Center.

Tina Stoeckmann PT, MS, DSc is a volunteer with the Southeastern Wisconsin Adaptive Ski and Snowboard Program, along with a number of our DPT students. This program allows people with various disabilities to try downhill skiing and snowboarding. Tina and the students evaluate the participants and make recommendations for adaptive equipment.

These are just a few examples of how Marquette University's DPT students and faculty live the pillar of "service to others" in their daily lives.

Submitted by **Andrew Starsky**, MPT, PhD, Clinical Assistant Professor

Concordia University

In the Concordia DPT program, students are provided with numerous opportunities to experience service learning. **Kathy Lemley**, PT, MS volunteers her time several times each year providing anatomy lab experiences to high school students to promote science/ health careers. **Robert Barnhart**, PT, ScDPT takes students into community schools to provide gross motor assessments to kindergartners as a part of his pediatric course. In her two-semester musculoskeletal course sequence, **Cheryl Petersen**, PT, DPT, DHS has students provide free examination and intervention to community members several times each semester.

Lois Harrison, DPT, MS encourages service in her Health Promotion course by providing an opportunity for students to plan an inter-professional health screening designed to address the specific health and wellness needs of the campus community. Students also partner with and collaborate with a variety of community organizations

to create a resource that addresses a specific health need of the population served by the organization. The CUW DPT program collaborates with several community organizations to provide students with opportunities to provide pro bono PT to community members who would otherwise not have access.

Discussions related to the APTA Code of Ethics occur throughout the curriculum and often relate to principle 8A, "meeting the health needs of society by providing pro bono care". This, in conjunction with the pro bono experiences, reinforces our profession's social responsibility. Finally, CUW faculty often share with students how they provide services in their personal time and in this way role model the importance of service in our profession.

Submitted by **Lois Harrison**, DPT, MS

UW-La Crosse

The UW-La Crosse DPT Program blended student learning with community involvement through an addition to its curriculum this year. This class, known as the Applied Adult Community Program, encourages second year DPT students to work twice per week with clients from the community with movement and neurodegenerative disorders. The program is currently offered pro-bono to participants. As the program evolves in our curriculum, we hope to reach out and expand to help even more clients experiencing movement disorders in the community. Sophie, a participant in the program had some affirming words to say. "It is a great program with a lot of potential to continue on for other people. Everyone that comes will benefit in some way."

In addition, the curriculum requires a two semester Health and Wellness course to promote state and national public health guidelines through service learning. In the first semester, students develop a project proposal using literature on a topic of interest from Healthy People 2020. During the second semester, students collaborate with community partners to implement the proposal. For example, a group of students may choose to screen community-dwelling elderly for falls risk and make recommendations and referrals based on the screening results in order to prevent falls

Students also participate in service to St. Clare's Mission, a local pro bono clinic. A small, highly committed team of local PTs and one PTA provide PT services once a week to clients that would otherwise be unable to afford or access healthcare. Students volunteer their services, while learning from clinical mentors and this very diverse group of clients.

Submitted by **Molly Flanagan**, SPT

Welcome to These New Members!

PTs

Angela Cunningham
Andrea DeRubeis
Paul Jones
Anna Lang
Joan Roubal
Brando Salvatierra

Emily Hitchcock
Taylor Holmes
Morgan Kaminski
Stephanie Koch
Kristen Kotecki
Jelena Krstic
Kiara Leurquin
Alex Marhillo
Sydney Miller
Cody Moldenhauer
Megan Neitzel
Moira Ostrander
Lori Puchalski
Reni Raju
Marlene Ridgway
Paul Rogus
Aubrey Ronner
James Rosenwald
Andrew Rumler
Erin Rutkowsky
Steven Schmidt
Kellsey Schmitz
Amber Slaybaugh
Kelly Smeiska
Kayla Smithback
Rachel Sobczak
Jay Sparks

Tyler Starkweather
Jordan Stearnes
Heidi Stein
Mara Stoffel
Abigail Stromquist
Tyler Tylinski
Caleb Vizina
Hannah Vogt
Emily Voirin
Abigail Wagner
Joseph Weinfurt
Aaron White
Adam Wied
Katie Wittnebel
Cassandra Wymer
Stephanie Yeung
Brianna Zimmerman

Students

Sarah Alt
Abigail Arndt
Daniel Boehr
Libby Burkle
Taylor Borgrud
Cassandra Cavender
Katherine Chiroff
Courtney Convey
Kara Delie
Andrew Fix
Jaclyn Gartz
Amy Garvin
Justin Gerhartz
Brianna Glende
Emily Goebert
Margaret Greene
Emily Hanson
Sarah Higgins

PTs = 1542

PTAs = 193

Students = 643

Total Membership = 2380

2013 Calendar of Events

2013

January 21-24 – Combined Section Meeting, San Diego, CA
April 14-16 – APTA Federal Advocacy Forum, Washington, DC
April 17-19 – WPTA Spring Conference, Oconomowoc
June 26-29 – Annual Conference: PT 2013, Salt Lake City, UT
October 2-4 – WPTA Fall Conference, Wisconsin Dells

2012 Fall Conference



Kalahari Resort & Convention Center

Wisconsin Dells, WI

October 10 -12, 2012

Thank You to Our Fall 2012 Vendors for Their Support of WPTA and the Physical Therapy Profession

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Van Matre HealthSouth Rehabilitation Hospital

Restorative Care of America

Langlade Hospital

Mercy Health System

Marshfield Clinic

A & J Mobility

**The raffle prize drawing was a huge success!
Many thanks to the vendors who donated prizes.**

2012 Fall Conference in Photos



Matt Haberl demonstrates therapy techniques for the knee in his and Paul Reuteman's Thursday course.



Attendees heard about the comings and goings of their Association at Friday's Business Meeting.



The Exhibit Hall vendors provided great networking opportunities for attendees.



Longtime WPTA members Kristine DeKarske (L) and Bill Boissonnault (R) were recognized by Membership Chair Deb Urban.



Bill Boissonnault presented Wednesday's Pre-Conference Course "Evidence-Based Practice: Patient Values - the Forgotten Element".



There was a lot of hands on learning for participants in Marc Sherry's "Athletic Movement Progressions" course.



Wisconsin Physical Therapy Association

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MARQUETTE
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The Department of Physical Therapy Presents
Continuing Education Courses for 2013*

March 11-12 Level I and Advanced APTA Clinical Instructor Education and Credentialing Programs, Both courses held simultaneously. Registration Deadline: Feb 1, 2013

March 15-17 MU Pelvic Floor Symposium: Understanding Sexual Function and Wellness: A Course for Pelvic Floor Therapists, Integrating Meditation, Progressive Muscle Relaxation, Imagery, and other Mind-Body Strategies into Rehabilitation and Behavioral Therapy for Chronic Pelvic Pain and, The Male Pelvic Floor-A Therapeutic Approach

April 26-28 Evidence Based Therapeutic Exercise for Pelvic Floor Dysfunction with Elizabeth Hampton, PT, WCS, BCB-PMD

May 21, June 11, 18 & 25 Differential Diagnosis with William Boissonault, PT, DHSc, FAAOMPT, FAPTA

May 30, 31, June 1 Understanding the Normal and Abnormal Kinesiological Basis of Exercise- Focus on the Upper Quarter with Dr. Neumann, PT, PhD, FAPTA and special guest David Williams, PT, PhD, ATC, CSCS

June 19-22 Treatment of Bowel, Bladder and Pelvic Floor Disorders: Anatomical, Physiological, and Behavioral Foundations for Clinical Practice - The 9th annual offering of this flagship course.

July 26 Ethics and Jurisprudence as part of our annual clinical issues and practice updates. Huge Discounts for Alumni!

October 3-5 Behavioral and Rehabilitation Treatment of Bowel Disorders.

December 6 Electrotherapy day with Dr. Starsky

*Please check website regularly for additional offerings.
www.marquette.edu/chs - click on continuing education.